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## Bob Nakagawa appointed as new College Registrar



The College of Pharmacists of British Columbia is pleased to announce Bob Nakagawa as the College's next Registrar. Bob, who was previously the Assistant Deputy Minister (ADM) of the Pharmaceutical Services Division with the Ministry of Health, assumed his position on April 2, 2012.

Bob has a pharmacy degree from UBC and a residency in hospital pharmacy from St. Paul's Hospital in Vancouver and is a Fellow of the Canadian Society of Hospital Pharmacists. He has worked both in hospital and in government in developing innovative services and policies for the last 3 decades. He has served as President of the College of Pharmacists of BC, as well as the Canadian Society of Hospital Pharmacists.

Bob is an expert in public drug plan management and has provided advice to federal, provincial and international governments in this area. Bob has chaired the Drug Benefits Committee for BC PharmaCare and the Federal Pharmacy and Therapeutics Committee for Canada.

Bob took over from Deputy Registrar Suzanne Solven, who was appointed Acting Registrar upon Marshall Moleschi's departure in September 2011. Please join the College in thanking Suzanne for her commitment during the interim period and in welcoming Bob to his new role.



# Registrar's Message

## As a healthcare professional and person of integrity I will...

The line above is the opening statement in the College's new pharmacy oath which is part of the revised Code of Ethics. In addition to this oath and the Code itself the legislation includes a dedicated document focused on conflict of interest as well as a model for ethical decision making, designed to assist us in working through the very real ethical dilemmas encountered in practice today.

In order to assist us in understanding and adhering to this important legislation the material has been incorporated into a user friendly online *Code of Ethics Educational Tutorial* which all registrants are required to complete before May 31, 2012 (refer to the article on page 5 for further details).

Given the focus today on the evolving role of pharmacists as decision makers in the delivery of clinical services, the timing of this renewed education regarding our ethical obligation could not be better. As decision makers we need to ensure that we are doing the 'right' thing for the 'right' reasons and this requires a universal understanding of our role and commitment as regulated healthcare professionals.

As articulated in standard 1 of the Code, our ethical obligation is clear and singularly focused... to serve and protect the health and well-being of our patients. Not some of the time, not when it's convenient to do so; but

each and every time, with each and every patient. Although seemingly straightforward it requires conscious effort to ensure that our decisions adhere to this obligation and are not, in any way, influenced or biased by self interest.

We need only examine complaints resolutions data to realize that our failure to live up to this ethical obligation is at the foundation of many of the issues and concerns raised. As we become more empowered as decision makers it becomes even more critical that we are committed to using our knowledge, skills and abilities, as articulated in the oath, 'to do good and actively benefit our patients'.

Module 1 in the online *Code of Ethics Educational Tutorial* was developed specifically to help provide us with a broad foundational understanding of this ethical obligation that we share with all regulated healthcare professionals. It introduces us to the concept of the social contract as well as the four broad ethical principles to which the Code was developed to support.

The social contract simply states that in exchange for government providing the profession with the privilege of self-regulation the profession, and all those practising within it, agree to protect and promote the best interests of their patients, first and foremost. The ethical principles of beneficence and non-maleficence ensure that we

are committed to not just ensuring that no harm occurs but perhaps more importantly to doing what we can to prevent harm and to actually benefiting our patients. The principle of autonomy or respect for persons commits us to accepting our patients as unique individuals who have the right to make informed decisions about their own healthcare. Finally, the ethical principle of accountability or fidelity ensures that we understand that our obligation to uphold our ethical commitment extends beyond us as individuals and includes the profession as a whole.

This information has been included in the tutorial so that we can acquire some foundational understanding of our role and commitment as regulated healthcare professionals and therefore appreciate the need for the specific standards and guidelines that are articulated in the Code of Ethics and Conflict of Interest Standards documents themselves.

It is critical, not just as individual practitioners, but also as a profession as a whole that we truly embrace and live our ethical obligation to put our patients' interests first and foremost. The 'trust' that our patients and government has placed in us is dependent on our ability to demonstrate this commitment. There have been countless examples over the past few years where professions have failed to do this... let's ensure that ours is not one of them.

# Pharmacy Technician Update

With the process and requirements established, the regulation of pharmacy technicians is well on its way. The College registered their first pharmacy technicians in June 2011 with approximately 60 pharmacy technicians registered to-date. In anticipation of the first regulated pharmacy technicians, the College's Regulation was amended to restrict the title of 'pharmacy technician' effective January 1, 2011. Registrants were notified at that time to make the necessary changes to their business models and titles to reflect this restricted title, if needed.

This means that only those individuals working in a pharmacy who are registered with the College of Pharmacists of BC as a 'pharmacy technician registrant' can identify themselves as pharmacy technicians. Others will need to be referred to by another name such as pharmacy assistants. Additionally, only educational institutes who are offering the CCAPP Accredited Pharmacy Technician Program can use the name 'pharmacy technician program'. All others will have to be renamed 'pharmacy assistant programs' or something similar.

With this lead time given, the College is integrating pharmacy technicians into all of their processes including Discipline, Inquiry, Quality Assurance and Registration and will be enforcing this title restriction through their regular inspection process.

## PDAP Update

### CE Component Well Underway!

The Professional Development and Assessment Program's Continuing Education (CE) component, which is linked to individual registrants' annual registration renewal dates, has now been underway for over 6 months. Approximately half of College registrants have already begun completing their minimum requirement of 15 hours of learning documented on 6 learning records. Whether a registrant chooses to participate in a traditional course or seminar that has been accredited (given CEU's) or engages in learning through a focused dialogue with a colleague, it is all valid as long as it is appropriately documented on the required learning record. Recently, registrants have been required to complete the College's *Code of Ethics Online Educational Tutorial* (available on the College website [www.bcpharmacists.org](http://www.bcpharmacists.org) – see page 5) this non-accredited learning is mandatory AND applicable towards the annual CE requirement.

All of the information needed to understand and complete the CE requirement is sent along with the Annual Registration Renewal letter 6 weeks prior to individual registration renewal dates. No action is required until you have received notification.

**Note:** For this initial year only, learning which occurred as far back as January 1, 2011 can be used towards the annual requirement, learning must occur within the individual registration renewal year in all subsequent years.

### Bridging Program Now Offered Online through Selkirk College

The Pharmacy Technician Bridging Program is now being offered online through Selkirk College in addition to being offered through UBC's Continuing Pharmacy Professional Development department. For more information including how to register and program dates, visit [www.selkirk.ca](http://www.selkirk.ca).





# Reminder: All Registrants Required to Obtain Professional Liability Insurance

All full registrants of the College, including pharmacists and pharmacy technicians, are required, as per HPA Bylaw 81, to obtain and at all times maintain professional liability insurance of no less than \$2,000,000 insuring against liability arising from an error, omission or negligent act of the registrant or employee of the registrant. Supplemental to HPA Bylaw 81, *Professional Practice Policy (PPP) #60 – Professional Liability Insurance* further details the specific requirements, stating:

**1. The professional liability insurance coverage must meet the following criteria:**

- a) The policy provides occurrence-based coverage or claims made coverage with an extended reporting period of at least three years; and,
- b) if not issued in the registrant’s name, the group policy covers the registrant as an individual.

**2. Each registrant is responsible to ensure their individual or group plan meets the minimum criteria.**

The College reminds those registrants who are named on their employer’s group policy (as opposed to obtaining their own policy) to check with their employer to ensure that they are specifically added to the policy in order to be covered between jobs and when outside the pharmacy. In other words, registrants will not be covered if they switch jobs or pick up shifts at other pharmacies unless they are added as a ‘named insured’ or they carry their own insurance policy

## MMT – A Collaborative Approach

Following on the success of the mandatory *Methadone Maintenance Treatment (MMT) Training Sessions* which were initiated last year as part of *Professional Practice Policy (PPP) #66 – Methadone Maintenance Treatment*, the College received additional grant money from the federal government to support further education for pharmacists in this important practice area. Building a collaborative relationship between prescribers and pharmacists is essential to providing excellent patient care in order to achieve better health outcomes. This is especially true with addiction medicine and more specifically Methadone Maintenance Treatment (MMT).

In March, the College of Pharmacists of BC hosted a series of free ‘live’ interactive sessions throughout the province which were presented in collaboration with the College of Physicians and Surgeons. The focus of the sessions was to develop pharmacists’ knowledge in the area of addiction medicine in order to enhance clinical decision making skills and to support collaborative working relationships with MMT prescribers. The sessions, approximately 3 hours in length and attended by over 500 pharmacists, began with a presentation from a prescriber within their own community and ended with a moderated round table discussion around key issues that are faced by both prescribers and pharmacists. The round table discussions resulted in the College coming away with insight from frontline pharmacists involved in providing MMT services. The insight proved to be invaluable in understanding the issues facing both professions and potential ‘next steps’ to take to continue to refine MMT prescribing and dispensing procedures to optimize patients’ health outcomes.



# Have you completed the Code of Ethics Educational Tutorial?



The College's Code of Ethics, which had not been updated for over 15 years, was recently revised to reflect enhancements to pharmacists' scope of practice, be inclusive of pharmacy technicians and to ensure that College standards, with respect to professional and ethical conduct, is supportive of pharmacy practice today. Although there are not significant changes from the previous Code of Ethics, these revised documents provide a broader ethical foundation and greater clarity for registrants and include, for the first time, a document dedicated to conflict of interest, a model for ethical decision making and a pharmacy oath. In an effort to assist current practitioners in understanding and applying this revised legislation, the College Board approved the development of the online *Code of Ethics Educational Tutorial* which all registrants are required to complete.

The tutorial has been divided into 4 modules and should take approximately

two hours, in total, to complete. The first module is a foundational introduction called *Understanding Our Role and Commitment as Regulated Healthcare Professionals*. The second, titled *Overview of the Code of Ethics*, is a comprehensive overview of the document itself with the third module focused exclusively on conflict of interest standards. The final module introduces the *Model for Ethical Decision Making* and uses a hypothetical video scenario to illustrate how to apply the decision making tool in practice.

All registrants are required to complete all four modules before May 31, 2012. In order to declare that you have completed and understood this information, you are required to print, sign and date a copy of the declaration of completion (with pharmacy oath), which is linked to the end of Module 4. This declaration is to be retained in your personnel file at your primary place of work and available for review upon

request (you are not required to forward a copy to the College office). This learning may also be used towards your annual Continuing Education requirements of the College's Professional Development and Assessment Program (PDAP).

- **Intro and Module 1: Our Role and Commitment as Regulated Healthcare Professionals**
- **Module 2: Overview of the Code of Ethics**
- **Module 3: Conflict of Interest Standards**
- **Module 4: Model for Ethical Decision Making**

**Note:** You have only a few weeks left to complete the online Code of Ethics Educational Tutorial, which can be accessed by any computer 24/7.

## BC Medication Management Project

More than 10,000 patients benefited from the BC Medication Management Project (BCMMP), a joint pilot project launched by the BC Pharmacy Association and the BC Ministry of Health. Through medication management, participants were able to provide patients with a comprehensive review of their medications and address their medication issues.

The project featured up to 300 pharmacists in up to 125 pharmacies across BC. More than 600 pharmacists applied to participate in the project, indicating tremendous interest from pharmacists to provide more expanded services. Project participants were selected based on criteria such as geographical location, the pharmacy's proximity to divisions of family practice, and the qualifications of applicants.

Through more than 26,486 patient encounters, participants greatly benefited patient health as well as contributed to the future of clinical pharmacy services. The project required

participants to review and document a patient's current and past medication therapies, assess the needs of the patients, create or modify an existing care plan, and evaluate and monitor treatment interventions to improve patient outcomes. The project also facilitated extensive collaboration and interaction between pharmacists and patients, as well as with healthcare providers.

"The BCMMP was an opportunity to develop a structured model for pharmacists to provide expanded services to patients for the improvement of their health," said Parkash Ragsdale, Deputy CEO and Director, Professional Services for BCPhA and co-chair for the Clinical Services Committee (CSC).

"Project participants have greatly contributed to the future of clinical pharmacy services and we have and will continue to learn much from their work."

The project, which wrapped its data collection phase at the end of January 2012, is currently undergoing the evaluation phase which is being carried out by the BC Ministry of Health.

# Medications Return Program

Did you know that only 49% of British Columbians know they can return unused medications to their local pharmacy for disposal? Unused medications pose a health, safety and environmental hazard when improperly stored or disposed of. Remember to urge your patients to bring unused or expired medications back to their local pharmacy instead of tossing or flushing them.

The Medications Return Program diverts expired and/or unused medications from landfills and sewers, and helps to keep them away from the wrong hands, where they may become part of pharmaceutical abuse. For a long time, the recommended method of disposing of drugs, especially those that may be extremely harmful if they fell into the wrong hands, was to open the

container and flush them down the toilet. This policy has changed worldwide. Programs such as the BC Medications Return Program, have now been put into place to offer safe disposal options for unused or expired drugs. This province-wide program, fully funded by industry, allows the public to return medications to participating pharmacies at no cost right across BC.

## What Drugs and Products are Included?

- All unused or expired prescription drugs, OTC's and NHP's
- Medicine in questionable condition
- Medicine whose use is uncertain
- Medicine with incomplete or missing labels

To register your pharmacy for the BC Medications Return Program, visit [www.medicationsreturn.ca](http://www.medicationsreturn.ca). Let's raise awareness amongst our patients about this service – those who know about it use it!

## Do Not...



Toss



Flush



Leave in the Cabinet



## Sandoz Drug Supply Disruption

The Ministry of Health (the Ministry) is aware of the national shortage of a number of drugs produced by Sandoz Canada and is actively working to minimize the impact to patients. This supply situation is due to operational issues at the Sandoz manufacturing site in Boucherville, Québec as well as other related logistical issues.

The Ministry is working with Sandoz, Health Canada, other provinces and the health authorities including Health Shared Service BC to manage the situation. Current stock levels of all Sandoz products are being reviewed and monitored across the province on a daily basis. For some unavailable products, clinical alternatives have been identified. However, for products where there are few or no alternatives, judicious allocation of stock will be necessary. Alternate suppliers are also being explored.

The affected drugs are mostly injectable products used in hospitals, as well as a few topical eye products. While the impact of the potential shortage will be greatest on patients in the hospital, the Ministry recognizes that some patients in the community may also be impacted. Of note to pharmacists in the community, there is restricted availability of injectable morphine and injectable hydromorphone. The Sandoz situation does not affect the company's solid oral product line, nor does it affect patches of somatropin (Omnitrope).

As per usual PharmaCare process when drug shortages occur in the community, appropriate products can be made temporarily eligible for PharmaCare coverage. The Ministry will continue to work with pharmacists to ensure that the best alternatives are made available for patients who are impacted.

Health care professionals should reassure patients not to panic. There is also no need for pharmacies or patients to stockpile Sandoz products. The Ministry encourages all health professionals to work with others across the spectrum of acute and community care, to ensure that we take the best care of our patients during this situation.

Further information regarding the Sandoz supply disruption can be found at: [www.health.gov.bc.ca/pharmacare](http://www.health.gov.bc.ca/pharmacare)

## OxyNEO to replace OxyContin

As you are aware, Purdue Pharma, the manufacturer of controlled-release oxycodone (OxyContin), is discontinuing its production and introducing a new formulation called OxyNEO:

Under provincial legislation, OxyNEO is not interchangeable with OxyContin. Pharmacists will not be able to substitute OxyNEO for OxyContin.

Pharmacies can continue to dispense OxyContin until they exhaust their supply.

Patients who will be started on OxyNEO in place of OxyContin will need prescriptions specifically for OxyNEO.

This will mean physicians will have to issue new prescriptions to cover part-fills for OxyContin.

In other words, pharmacists are not legally permitted to substitute OxyNEO for previously prescribed OxyContin. Physicians must provide a new, written, duplicate prescription.



# Conferences 2012

## Pharmacy Innovation – BCPhA Annual Conference 2012

The theme for the 2012 BCPhA Conference is Pharmacy+ which illustrates the way in which pharmacy in British Columbia is continuing to innovate, improve patient care and lead the way nationally.

*May 24, 2012 – May 26, 2012*  
*Delta Ocean Pointe Resort and Spa Victoria, BC*

For more information on how to register visit their website at [www.bcpharmacy.ca](http://www.bcpharmacy.ca)

# 2012

## Board Meeting Dates

April 13, 2012	Board Meeting
June 15, 2012	Board Meeting
Sept 21, 2012	Board Meeting
Nov 15, 2012	Annual Board Orientation
Nov 16, 2012	Board Meeting
Nov 17, 2012	Annual General Meeting (AGM)

## CPhA National Conference – Registration Now Open

The Canadian Pharmacists Association invites you to join them in Whistler, BC for their 100th conference.

*June 1, 2012 – June 4, 2012*  
*The Westin Resort & Spa*  
*Whistler, BC*

For more information on how to register visit their website at [www.pharmacists.ca](http://www.pharmacists.ca)

## Save the Date: 7th Annual Pharmacy Technician Conference

The 7th Annual Pharmacy Technician Conference organized and hosted by the Pharmacy Technician Society of British Columbia, is being held at the River Rock Casino Resort in Richmond, BC on *October 12th and 13th, 2012*. More details will be available on their website shortly at [www.ptsbcc.ca](http://www.ptsbcc.ca).

# readlinks

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ReadLinks Editor in Chief:  
Suzanne Solven  
Managing Editor: Mykle Ludvigsen

College of Pharmacists of BC  
200–1765 West 8<sup>th</sup> Avenue  
Vancouver, BC V6J 5C6

Tel 604.733.2440 Toll-Free 800.663.1940  
Fax 604.733.2493 Toll-Free Fax 800.377.8129  
E-mail [info@bcpharmacists.org](mailto:info@bcpharmacists.org)  
[www.bcpharmacists.org](http://www.bcpharmacists.org)

The ReadLinks newsletter provides important College and pharmacy practice information. All registrants are expected to be aware of these matters.



## COLLEGE OF PHARMACISTS OF BRITISH COLUMBIA

*Safe and Effective Pharmacy Care*

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### COLLEGE BOARD

District 1 – Metropolitan Vancouver  
Agnes Fridl Poljak E-mail: [zrevan@shaw.ca](mailto:zrevan@shaw.ca)

District 2 – Fraser Valley  
Bev Harris E-mail: [bh2@shaw.ca](mailto:bh2@shaw.ca)

District 3 – Vancouver Island/Coastal  
Blair Tymchuk E-mail: [bdtymchuk@shaw.ca](mailto:bdtymchuk@shaw.ca)

District 4 – Kootenay/Okanagan  
Doug Kipp E-mail: [dougekipp@gmail.com](mailto:dougekipp@gmail.com)

District 5 – Northern British Columbia  
Robert Craigie E-mail: [longlake@valemount.com](mailto:longlake@valemount.com)

District 6 – Urban Hospitals  
John Hope E-mail: [jwhope@telus.net](mailto:jwhope@telus.net)

District 7 – Community Hospitals  
Jerry Casanova E-mail: [supernova@telus.net](mailto:supernova@telus.net)

District 8 – Pharmacy Technicians  
Onnolee Osbourne E-mail: [onnolee-O@shaw.ca](mailto:onnolee-O@shaw.ca)

Government Appointee, Prince Rupert  
Penny Denton E-mail: [snow@citytel.net](mailto:snow@citytel.net)

Government Appointee, Vancouver  
Kris Gustavson E-mail: [kgustavson@phsa.ca](mailto:kgustavson@phsa.ca)

Government Appointee, Langley  
John Scholtens E-mail: [jjscholtens@hotmail.com](mailto:jjscholtens@hotmail.com)

Government Appointee, Victoria  
Jeff Slater E-mail: [Jsl8er@shaw.ca](mailto:Jsl8er@shaw.ca)

Contact information for all College staff and Board is available on the College website.