



The Manitoba Pharmaceutical Association

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Regulations Discussion Document: Recommendations of the Board of Examiners

The Board of Examiners of the Manitoba Pharmaceutical Association met on March 19th, 2007 to discuss the draft Regulations Discussion Documents as referred by Council.

Present:

Albert Eros

Sheila Holden

Pat Trozzo

Dean David Collins, Chair

Ronald Guse, staff

Regrets: Kyle MacNair

The following recommendations were made:

- Section 3i the “photograph” should allow for “electronic image”. **Reason:** the registrations should allow for new technology.
- Section 4(1)g Should the internship be determined by the Board of Examiners or the Council? **Reason:** Under the section 3h, the Board of Examiners is the decision body.
- Section 7(1) Clinical pharmacist may not be the preferred term. **Reason:** Clinical pharmacist term is already being used in the practice sites.
- Section 9(1) Include the Part B pharmacist that is transitioning to part A under section 14(1). **Reason:** To be clear and consistent.
- Sections 12(2) the Committee was generally supportive of a two part for pharmacists licenses. However, greater clarification is needed in the discussion document. 9(1) and 11(1) should include a same section as 4(1)b.
- Part 3, section 11(2): The Assistant Registrars were not supportive of having two categories to the practicing license. **Reason:** A pharmacist is a pharmacist and everyone should be considered competent, able to practice in any setting and entrusted to know when they need additional training.
- Section 14(4): Change the words from “do not” to “may not”. **Reason:** The hours performed under Part A Temporary Practice should not automatically be unable to qualify for the required hours of practice (for Part A) and would depend on the type and quality of the experience.
- Section 29(3) amended by adding the category “(d) satellite hospital ward.” **Reason:** Pharmacists servicing small rural hospitals, federal hospitals, nursing

- stations from central larger hospitals or local community pharmacies are currently not regulated under either new regulations or the old regulations. The definition of the practice of pharmacy and the need in the new Act for a pharmacist to practice only in a pharmacy places these members in a non-compliant position under the new Act. In addition, these members have asked for a regulatory structure that will assist them in obtaining leverage with the owners to obtain and maintain the necessary tools to practice effectively.
- Section 30 : change the words from "...is the first application with regard to the subject facility," to "the location is not currently licensed". **Reason:** The location may have been licensed previously and after a lapse of time is going to host another pharmacy.
 - Section 30: remove "substantially renovated". **Reason:** Not consistent with the title of "Pre-opening inspection". Renovations are covered under section 41(5).
 - Add the words in Section 33(1) "In addition to the requirement under 31(1), an application..." **Reason:** Section 33(1) seems to contravene 31(1) with respect to the type of patients served.
 - Section 32(2) should include the same statement under section 33(2)d requiring access to a Part A pharmacist at least 40 hours per week. **Reason:** Important for patient care to have access to a pharmacist in tele-pharmacy sites as it is with Distance Care.
 - Change the section 38(1)a to include all drugs and "medications", using similar words as in 86(1)c. **Reason:** This would exclude all schedule 1, 2, &3 drugs, but not the other "medications".
 - Section 41(5) add the words "may be required to" in front of "surrender" and change "must" to "may" regarding the reissuing of the license. **Reason:** Typically, renovations, even substantial, do not get issued a new license.
 - Section 42 change the notation from being on the license application to the "record maintained at the College". **Reason:** There is little point in accessing the original application to change the information and it might be important to retain the original application as it was received.
 - Section 43(2) Temporary conversion should also include the ability to do "emergency conversion". **Reason:** Should an emergency need arise, it might be important to have the ability for a pharmacy to quickly fulfill the need.
 - Section 46: Change the wording to read, "A pharmacy must display the license issued in a conspicuous and public location at each facility included under the pharmacy license." **Reason:** The College would issue all the copies of the license needed by the pharmacy (rather than having the pharmacy photocopy, for example) and conspicuous does not mean "public".
 - Under section 58(2)c change the name of this section or add another section to described patient counseling record. **Reason:** This section does not seem to fit under the title of "Preparation Record".
 - Under section 58(3), move the words in "a" under this section into the title. **Reason:** The Authorization and Preparation records are requirements unto themselves. Change to read, "In addition to the records required under section s 58(1) and 58(2), no drug.... (do we have to worry that the term "drug" is used here? It will depend on the definition provided by government.)

- Under section 58(3)e and j, include the words “unless the information is recorded in the patient profile under section 60(1),”. **Reason:** This would be onerous and a duplication if the information is already recorded.
- Under section 59(2) remove “by”. **Reason:** typo
- Under section 61(c) change the cited section to 59(1) **Reason:** typo
- Under section 61(d) change the cited section to 58(3) **Reason:** typo
- Under section 61(e) change the cited section to 60(1) **Reason:** typo
- Under section 61(f) include “applicable federal legislation”. **Reason:** central fill does create federal attention regarding the potential for “manufacturing”.
- Under section 63(3) does there need to be a witness of the disposal? If there was drug diversion and subsequently discovered, what record needs to be made? Does the term “someone” include a disposal company? This section could be very labor intensive for hospitals.
- Under section 65(6) does the term “personal care home” need to be defined? **Reason:** Some of the PCH’s are federal and some provincial and would these cover penal institutions?
- Section 68(3) requires further clarification under the *Description Document* to describe some of the scenarios that could be covered through practice directions. **Reason:** The reader may not understand the full impact of this section.
- Under section 69(1) change to read “unless it is approved for sale in Canada” and add a section “d” to include “compounded medication”. **Reason:** This “catch-all” might be better than listing and “drug” may not include extemporaneous preparations.
- Section 69(2) should be clarified that this is in a pharmacy licensed under this act. **Reason:** We have no jurisdiction about DPIN data entry in other facilities and the practice direction would need to exclude hospitals.
- Change section 70(2)a(ii) to include the record being kept in the patient profile (60(1)). **Reason:** This is consistent with the suggested change was made earlier.
- Section 72(3) amended by adding “and if displayed in the public access portion of the pharmacy must be displayed within a continuous uninterrupted line of display of professional products, between the dispensary and the product.” **Reason:** The interpretation of the words “immediately adjacent” has caused some problems with enforcement.
- Under section 72(4)b Is the right term “owner” or “pharmacy”?
- Under section 73, Inducements should exclude “free delivery”. **Reason:** Many pharmacies offer this service and it should not be perceived as an inducement.
- Under section 82, Change the word to have the specialty area of practice to “as approved by Council”. **Reason:** Anytime lists are included in regulations, there is always a concern with omission and change.
- Under 86(1.1) Do we need to address the issue of interchangeability in personal care homes?
- Under section 87(g) change the words from “in the circumstances of the patient” to “meet the needs of the patient”. **Reason:** Seems to better convey the important concept.
- Under 90(1)c remove the words “without any recent changes in dosage”. **Reason:** Should the patient have a recent dosage adjustment, the pharmacist

would be prevented from continuing the prescription and placing the patient at unnecessary risk.

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