



## The Manitoba Pharmaceutical Association

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The following document is an amalgamation of the decisions and suggestions of the Regulations Advisory Committee and the respective decisions of Council (appearing in *italics*).

1. Regulation 5 (c) should be reviewed and revised where necessary to facilitate the ability to acquire a temporary registration.

Moved by Kevin Hall      Seconded by Kris Thorkelson      Vote: 8/8 in favor

A purpose of the “temporary registration” is to register a pharmacist that is urgently needed. Regulation 5(c) requires an applicant to provide a letter of standing, satisfactory to council, from all the jurisdictions in which the applicant is licensed to practice pharmacy. It was thought this would be too cumbersome in matters requiring a quick registration process.

*Moved by Penny Murray and seconded by David Collins that Council agrees with the recommendation of the RAC and change section 5(c) of the document to read “provide a letter of standing, satisfactory to council, from the jurisdiction in which the applicant is currently licensed and actively practicing pharmacy.”*

*Carried*

2. Regulation 8 (1) h should remove the word “moral”.

Moved by Norma Drosdowech      Seconded by Mel Baxter      Vote: 8/8 in favor

The committee indicated that it would be too difficult to make judgments on a person’s morals.

*Moved by Shawn Bugden and seconded by David Collins that Council agree with the recommendation of the RAC and remove the word “moral” from section 8(1)h.*

*Carried*

3. Regulation 8 (2) b should be reviewed and revised as necessary to clarify if a student is not currently participating in a pharmacy education program (e.g. prolonged illness, temporary suspension, etc) are they considered to still be “enrolled” in the Faculty?

Moved by Kevin Hall      Seconded by Joanne Johnson      Vote: 8/8 in favor

It was felt that if a student is not currently registered in courses because of a prolonged illness, suspension, or issue of that nature, that he/she really shouldn’t be on the MPhA register of students. It was also suggested that there should be a mechanism in place to insure that employers are aware when students are no longer “enrolled” in the Faculty

*Moved by Kelly Borisenko and seconded by David Collins that Council agree with the recommendation of the RAC that a student that is not currently participating in a pharmacy education program cannot be considered to still be “enrolled” in the Faculty and, therefore, cannot be considered a student under 8(2) of the regulations discussion document.*

*Carried*

*It was also moved by Kelly Borisenko and seconded by Sheila Holden that a section be added to require the student to notify the employer should they no longer meet the definition of a student under this section.*

*Carried*

4. Regulation 11(1) should also include a similar subsection as regulation 3 (c) to make application criteria for registration and licensure more consistent.  
Moved by Kevin Hall      Seconded by Kris Thorkelson      Vote: 8/8 in favor  
The committee indicated that a statement such as “satisfy the registrar that the applicant does not have an addiction to alcohol, drugs or illegal substances which, as set out by the board, makes the applicant unsuitable for license as a pharmacist” would also be appropriate here. There will need to be clarification of what criteria are considered to make the applicant “unsuitable”.

*Moved by Rob Jaska and seconded by Kelly Borisenko that Council agrees with the recommendation of the RAC that section 11(1) should also include a similar subsection as section 3 (c) to make application criteria for registration and licensure more consistent.*

*Carried*

5.      DEFEATED  
Regulation 11 (1) a should remove the word “investigation”.  
Moved by Tim Pattern Seconded by Kris Thorkelson Vote: 2 in favor, 5 against, 1 did not vote

Although the committee voted against the removal of "investigation", there was a strong opinion by one member that “investigation” be removed as the applicant may not have been found guilty of anything at the time of application. In the event Council decides to leave it in, a definition of “investigation” should appear in the regulations.

*Moved by David Collins and seconded by Rob Jaska that the word “investigation” in section 11(1)a of the Discussion Document would be defined to mean as ordered by the Complaints Committee, or a similar process in other jurisdictions.*

*Carried*

6.      Regulation 11 (1) should have an additional subsection (f) that requires the applicant to disclose whether he or she has a license to practice pharmacy in another jurisdiction.  
Moved by Joanne Johnson      Seconded by Mel Baxter      Vote: 6 in favor, 1 against, 1 did not vote

*Moved by David Collins and seconded by Kelly Borisenko that Council agrees with the recommendation of the RAC and a section be added to 11(1) that requires the applicant to disclose whether he or she has a license to practice pharmacy in another jurisdiction.*

*Carried*

7.      Regulation 11 (2) should change the wording from applying under “either” Section 12 or Section 13, to applying under Section 12, Section 13, or both.  
Moved by Kevin Hall      Seconded by Angela Wierzbicki      Vote: 6 in favor, 1 against, 1 did not vote

This clarification was requested to acknowledge that a pharmacist working in both areas should be able to keep licenses in both areas and it should not be a choice of one over another. One committee member was concerned about the potential unintended consequences of making the change.

- A) *Moved by David Collins and seconded by Gary Cavanagh that Council did not support the recommendation of the RAC that section 11(2) should be changed to allow the pharmacists to apply under section 12, section 13, or both.*

*Carried*

- B) *Moved by David Collins and seconded by Randy Stephanchew there only be one category of practicing license for pharmacists and develop regulations for a conversion process for an applicant as a registered pharmacist to become a registered and licensed pharmacist through an assessment of skills and the appropriate upgrading.*

*Motion withdrawn*

- C) *Moved by Rob Jaska and seconded by Shawn Bugden that Council rescind the previous motion.*

*Carried (5 in favour, 1 against, 3 abstention)*

- D) *Moved by Shawn Bugden and seconded by John Rodie that a two part pharmacist licensing process, as originally proposed in the draft under section 12 and section 13, be developed that would comply with Part 2 of Pharmaceutical Act.*

*Defeated*

- E) *Moved by Rob Jaska and seconded by Kelly Borisenko that the regulations discussion document be reworded to clarify the proposed section 13 license is permitted under the Act by recognizing it is really a section 12 license with conditions and this supported by regulations that define components of the practice of pharmacy, under sections 2(1)b and 2(1)d, that would include, but not limited to, a section 13 license as practicing in a supervisory or drug information role.*

*Carried*

8. In Regulations 12 (2) and 13 (2), regarding requirements for licensure, Council should consider potential further requirements for moving from one practice area to another.

Moved by Kevin Hall Seconded by: Joanne Johnson Vote: 7 in favor, 1 did not vote

For example, a community pharmacist may take a job working on a hospital ward, or vice versa, a hospital pharmacist may want to switch to a community practice. Although the pharmacist would still have a Section 12 license in both scenarios, there may be concerns for public safety, which could be addressed in the regulations by way of a requirement for a minimal period of training/supervision under a Section 12 pharmacist with experience in the new practice setting.

This may not be applicable to all cases, such as where a community pharmacist already provides service to a hospital (i.e. smaller communities), or vice versa. Some flexibility should be considered, but section 12 pharmacists should not be automatically considered to be competent to practice safely in a new practice environment.

*Moved by Rob Jaska, Seconded by Kelly Borisenko that Council rejects this recommendation to add further requirements on the pharmacist license when moving from one practice area to another as the purview of the employer is to ensure the capability of the pharmacist they hire to perform competently.*

*Carried*

9. Regulation 19 (1) specifies how pharmacist profiles must be made available, and council should consider methods to track and analyze how frequently the profiles are being accessed.  
Moved by Norma Drosdowech Seconded by Joanne Johnson Vote: 8/8 in favor

This should help to address regulation 28. Some Committee members were concerned the profile system would be used for unwanted solicitation of pharmacists.

*Moved by Rob Jaska, Seconded by Gary Cavanagh that Council approve the recommendation of the RAC and will develop methods to track and analyze how frequently the profiles are being accessed.*

*Carried*

*Although the recommendation was approved and it be a task for Council to do, this will not be included in the regulations document.*

10. Regulation 21 (b) should be removed and in 21 (c) "availability of interpretation" should be removed.  
Moved by Mel Baxter Seconded by Joanne Johnson Vote: 8/8 in favor

The committee did not want regulation 21 to be used as a marketing tool for pharmacies to describe services available.

*Moved by Shawn Bugden, Seconded by David Collins that Council approve the recommendation of the RAC that section 21 (b) should be removed and in 21 (c) "availability of interpretation" should be removed.*

*Carried*

11. Regulation 24 (4) should be revised to indicate that if a member's profile is being revised, the member should be notified of the significant changes prior to posting.  
Moved by Kris Thorkelson Seconded by: Tim Pattern Vote: 5 in favor, 2 against, 1 did not vote

Some Committee members felt strongly that members should be notified of significant changes to their profile prior to posting because of the potential negative effect of posting incorrect information. However, for minor or "cosmetic" changes, prior notification was not needed.

*Moved by David Collins, Seconded by Gary Cavanagh that Council approve the recommendation of the RAC that section 24 (4) be changed to indicate that if a member's profile is being revised, the member should be notified of the significant changes prior to posting.*

*Carried*

12. Regulation 29 (1) should be reviewed and revised as necessary to allow for flexibility of licensing practice sites and clarify whether one site needs one license or several sites can have one license. Also, there may be a need to define "facility".  
Moved by Kevin Hall Seconded by Mel Baxter Vote: 8/8 in favor

*Moved by David Collins, Seconded by Rob Jaska that Council supports the concern of the RAC and section 29(1) be changed to read "subject to 29(6) of these regulations, the address and description of the practice of pharmacy being performed at each facility covered by the pharmacy licence".*

*Carried*

13. Regulation 29 (1) e should have further clarification of the term “affiliated”.  
Moved by Kris Thorkelson Seconded by Angela Wierzbicki Vote: 8/8 in favor

Consideration should be given to require all names the pharmacy knows is part of their business plan and provides a transparent open description of the business links. A change might include the word "main" before URL as listing "any" affiliated websites could be burdensome for some businesses.

*A) Moved by Rob Jaska, Seconded by Kelly Borisenko that Council approves the recommendation of the RAC that section 29 (1) e should have further clarification of the term “affiliated”.*

*Carried*

*B) Moved by Rob Jaska, Seconded by Kelly Borisenko that Council approve the recommendation of the RAC that the word “main” be added before the word URL.*

*Carried*

*C) Moved by Rob Jaska, Seconded by Ron Kozak that in addition to the information on the license application, the regulations should require the reporting of all businesses that, to the knowledge of the pharmacy, are referring patients to the pharmacy and where the pharmacy is referring patients to other businesses.*

*Carried*

*This would include all pharmacies, not just IPS.*

14. Regulation 29 (3) should be reviewed and revised as necessary to clarify how the components will apply to all areas of practice.  
Moved by Kevin Hall Seconded by Tim Pattern Vote: 8/8 in favor

For example, if a practice site has a central fill component, but the pharmacists working there are also care for patients in the facility, are they considered to be working at a central fill facility, and thus working hours do not count toward maintaining a Section 12 license?

*The recommendation of the RAC that section 29 (3) should be reviewed and revised as necessary to clarify how the components will apply to all areas of practice was deferred until the end of the section 12/13 issue.*

15. Regulations 29(4) The Committee recommends that a section be added that allows pharmacies to provide one of the specified components without having declared the component on the application if in an emergent situation arises and to meet the immediate needs of the patient.  
Moved: Joanne Johnson Seconded: Mel Baxter Vote: 8/8 in favor

This should be documented to describe the event and the reasons.

*Moved by Gary Cavanagh, Seconded by David Collins that a section be added which states: Nothing in this section prevents a pharmacist or pharmacy from providing care where there is an urgent situation and it is important to meet the needs of patients.*

*Carried*

16. Regulation 29 (6) should clarify how a facility is defined and what is meant by “adjoining”?  
Moved by Kevin Hall Seconded by Joanne Johnson Vote: 8/8 in favor

For example, clarification is required to determine if pharmacies in a large hospital, joined by a tunnel system, are considered to be the same facility or adjoining?

*Section 29(6) will be clarified during the discussion of the document and would rely upon the definition of adjoining and the information revealed on the application.*

17. Regulation 30(a) The Committee recommends to remove "ethical" from section 30(a), as the inspector or registrar cannot determine ethical in a pre-opening inspection.  
Moved by Kris Thorkelson Seconded by Kevin Hall Vote: 7 in favour, 1 against

*Moved by Shawn Bugden, Seconded by Randy Stephanchew that Council agrees with the RAC recommendation to remove "ethical" from section 30(a), as the inspector or registrar cannot determine ethical in a pre-opening inspection.*

*Carried*

18. Regulation 32(2b) The Committee recommends this section has the following words added, "Unless the Council determines that the service may be made available for a specified lesser amount of time."  
Moved by Joanne Johnson Seconded by Kevin Hall. Vote: 8/8 in favor

The Committee felt that in certain situations that it might be appropriate for the pharmacy to be open less than 25 hours per week, and that opportunity would be left to the discretion of council.

*Moved by Shawn Bugden, Seconded by Kelly Borisenko that Council agrees with the recommendation of the RAC that the following words be added to section 32(2b), "Unless the Council determines that the service may be made available for a specified lesser amount of time."*

*Carried*

19. DEFEATED Regulation 33 The Committee recommends that section 33 be removed and a committee be formed of MPhA, IPS, government and other stakeholders to review Distance Care.  
Moved by Tim Pattern Seconded by Kris Thorkelson Vote: 4 in favor and 4 against

Note: Four strong opinions that section 33 prevents IPS from continuing in Manitoba and, as reported in the italicized introduction to this section, the Minister of Health wants this business to remain.

*Moved by David Collins, seconded by Rob Jaska that Council rejects the recommendation of the RAC and that section 33 should remain in the Regulations Discussion Document.*

*Carried*

20. Regulations 33(3b)i The Committee requests that Council review this section to clarify what would be required for implementation, suggested time lines and the willingness of jurisdictions to participate.  
Moved by Lavern Vercaigne Seconded by Kevin Hall Vote: 8/8 in favor

There is concern that section 33(b)i would not be possible to implement immediately upon the regulations being passed and an implementation date should be considered. Further information is needed regarding the receptiveness of the State Boards, for example, to participate in such agreements.

*Moved by Penny Murray, Seconded by Kelly Borisenko that Council approve the recommendation of the RAC that Council review section 33(3b)i to clarify what would be required for implementation, suggested time lines and the willingness of jurisdictions to participate.*

*Carried*

21. Regulation 37(1) The Council needs to consider the application of tele-pharmacy practice in populated urban areas where this section would only allow it to occur in remote and under serviced areas.  
Moved by Kevin Hall Seconded by Angela Wierzbicki Vote: 8/8 in favour

If it is to be expanded, the tele-pharmacy requirements need to be reviewed and revised.

*Moved by Penny Murray, Seconded by Gary Cavanagh that Council reject the recommendation of the RAC regarding section 37(1) to consider the application of tele-pharmacy practice in populated urban areas where this section would only allow it to occur in remote and under serviced areas.*

*Carried*

*The reason Council rejected the above recommendation is that the intent is for the tele-pharmacy to meet the needs of the community where there are no other alternatives.*

22. Regulation 38 Council should clarify whether clinical pharmacy practice is only section 12 and whether members under 38(1)c need section 12 or can section 13 pharmacists be allowed.  
Moved by Kevin Hall Seconded by Norma Drosdowech Vote: 8/8 in favor

*Moved by David Collins, Seconded by Gary Cavanagh that section 38 does not need to be changed to address whether section 12 or section 13 pharmacists would be allowed on a clinical pharmacy license as it would be declared on the application.*

*Carried*

*The intent of this section is to allow for both sections 12 and 13 to practice in a clinical practice depending on whether the practice deals directly with patients or provides drug information and consultation for healthcare professionals dealing directly with the patients.*

23. Regulation 39(a) Council should consider this section be changed to "member" to allow for both section 12 and section 13 practicing pharmacists.  
Moved Lavern Vercaigne Seconded by Kris Thorkelson Vote: 7/7 in favor

*Moved by Wendy Clark, Seconded by Rob Jaska that Council accept the recommendation of the RAC that the section 39(a) be changed to include "member" as that would include both sections 12/13.*

*Defeated*

*The reason being that temporary conversion can occur to support a section 13 to do practice in the pharmacy should an emergency arise. However, Council was concerned that a section 12 license would be needed in order for the pharmacist to function effectively in their role as a manager.*

24. Regulation 39(b) The Committee recommends the 4000 hour requirement be removed as this would prevent a newly registered and licensed pharmacist to purchase a pharmacy or become a manager upon graduation.  
Moved by Angela Wierzbicki Seconded by Kris Thorkelson Vote 8/8 in favour (\*Kevin Hall was at the meeting for this vote)

Council should consider more flexible requirements than a 4000 hour requirement. If there is concern that a newly licensed pharmacist cannot perform as a manager, then that needs to be incorporated into a suitable training program, either at the University or the internship program or pharmacy manger training program developed.

A) *Moved by David Collins, Seconded by Kelly Borisenko that Council reject the recommendation of the RAC that in section 39(b) the 4000 hour requirement be removed.*

*Carried (8 for, 1 abstention, 2 opposed {Shawn opposed} )*

B) *Moved by Penny Murray, Seconded by Gary Cavanagh that section 39 (b) be changed to read "or equivalent training or experience satisfactory to Council."*

*Carried*

25. Regulation 40(1)b Recommend that Council remove the part b as this will be reported on the annual basis though the filing of the annual return with the pharmacy license application.  
Moved by Kris Thorkelson Seconded by Angela Wierzbicki Vote: 7/7 in favor

A) *Moved by Gary Cavanagh, Seconded by Rob Jaska that Council reject the recommendation of the RAC that part (b) be removed from section 40(1)b as this will be reported on the annual basis though the filing of the annual return with the pharmacy license application.*

*Carried (the vote was tied and the Chair cast the deciding vote)*

B) *Moved by Wendy Clark, seconded by Shawn Bugden that the section will apply to part a and a new license will be issued with the information provided under section a and section b will only require notification.*

*Amendment to the Motion: Moved by Shawn Bugden, Seconded by Wendy Clark that the last line be removed as it will apply to both sections.*

*Amendment Defeated  
Motion Defeated*

C) *Moved by Shawn Bugden, Seconded by John Rodie that the owner must advise the registrar of the changes and, provided that owner continues to meets the requirements under section 64 and 65 of the act and this part, the license will continue.*

*Carried*

*Add to the discussion document that in this section "surrender the license" means the return of the pharmacy license document and does not mean a stoppage of the license and the practice of pharmacy at the site.*

26. Regulation 41(2) Council should consider only a change in partnership of 50% or more for this section.  
Moved by Kris Thorkelson Seconded by Tim Pattern Vote: 7/7 in favour

*Moved by Rob Jaska, Seconded by Wendy Clark that Council accept the recommendation of the RAC that section 41(2) that only a change in partnership of 50% or more be considered for this section.*

*Amendment to the motion: Moved by Rob Jaska, Seconded by Wendy Clark that Council keep this section as is and reword the section to be similar to the changes approved for section 40(1).*

*Amendment Carried  
Motion Carried as Amended*

27. DEFEATED Regulation 43 The Committee suggested that components can be added to an existing license instead of surrendering the license and reapplying.  
Moved by Tim Pattern Seconded by Kris Thorkelson Vote: 2 in favour, 5 against

The Committee advises Council that changes to components included in this section should not be an onerous process.

*Moved by Penny Murray, Seconded by Gary Cavanagh that Council recognizes the intent of the motion of the RAC and council agrees with the conclusion that the conversion process under section 43 should not be onerous.*

*Carried*

28. Regulations 45(b) The Committee recommends to Council the section be changed to "additional business names" instead of "second business name".  
Moved by Kris Thorkelson Seconded by Tim Pattern Vote: 7/7 in favor

This would facilitate the continued use of an established pharmacy name that is already familiar to the public.

*Moved by Kelly Borisenko, Seconded by Wendy Clark that Council accept the recommendation of the RAC that section 45(b) be changed to "additional business names" instead of "second business name".*

*Carried*

29. Regulation 50(d) The Committee recommends that Council clarify this section whether it includes refills in hospital practice.  
Moved by Joanne Johnson Seconded by Kris Thorkelson Vote: 6 in favor, 1 against

At present, refills may not be checked by the pharmacist in some hospital practice.

*Moved by Shawn Bugden, Seconded by David Collins that the discussion document provide clarification of the approval process in hospital that would comply with section 50(d) for approval of filling an refilling of prescriptions.*

*Carried*

30. Regulation 51 The Committee recommends changing this section to read "...or any other task supporting the practice of pharmacy..."  
Moved by Lavern Vercaigne Seconded by Norma Drosdowech Vote: 7/7 in favor

*Moved by Kelly Borisenko, Seconded by Gary Cavanagh that Council approved the recommendation of the RAC that section 51 be changed to read "...or any other task supporting the practice of pharmacy..."*

*Carried*

31. Regulation 52(2) The Committee recommends that Council does set a sunset clause in order to allow persons working as technicians to meet the requirements of section 52(2).  
Moved by Lavern Vercaigne Seconded by Mel Baxter Vote: 7/7 in favor

Council was asked to provide an opinion as to when this may come into effect.

*Moved by Kelly Borisenko, Seconded by Wendy Clark that Council does not support the recommendation of the RAC to set a sunset clause in order to allow persons working as technicians to meet the requirements of section 52(2).*

*Defeated*

*A "sunset clause" means that it would not be in force until a particular time period has passed, to allow the persons, that are now functioning as technicians, to meet the qualifications of this section and then be allowed to work as a technician as defined under the regulations. A sunset clause is not the same as a "grandfather" clause. However, the persons functioning as technicians under the current act would be able to continue to do what they are doing until such time when the regulations come into effect and they are required to comply.*

*Moved by Rob Jaska, Seconded by Gary Cavanagh that Council supports the recommendation but the time frame for the implementation of a sunset date cannot be determined until the outcome of the regulations process is known.*

*Carried*

32. Regulation 52(3) and 52(4) The Committee recommends that Council remove section 12 pharmacist from 52(3) and 52(4) and it should just read under supervision of a "member".  
Moved by Joanne Johnson Seconded by Angela Wierzbicki Vote: 7/7 in favor

The Committee suggests clarification is needed as to what tasks can be delegated by section 12 and section 13 pharmacists (including in a central fill component) and these sections adjusted according.

*Moved by David Collins, Seconded by Gary Cavanagh that Council reject the recommendation of the RAC to remove section 12 pharmacists from 52(3) and 52(4) and it should just read under supervision of a "member".*

*Carried*

*Leave the section as is using the section 12 pharmacists.  
Council was concerned that the activities do constitute the practice of pharmacy and the pharmacist could not delegate a function that they are not able to do.*

33. Regulation 52(4) The Committee recommends that Council include a section that continues the ratio of 1 to 1 plus 1 for pharmacists to technicians in community pharmacy.  
Moved by Mel Baxter Seconded by Tim Pattern Vote: 5 in favor, 2 against

*Moved by Kelly Borisenko, Seconded by Gary Cavanagh that Council does not support the recommendation of the RAC to include a section to continue the ratio of 1 to 1 plus 1 for pharmacists to technicians in community pharmacy.*

*Carried*

*Council does not support this recommendation, as at meetings of the members in previous years, the direction was to remove the ratio and imposing a limit at this time may encumber a practice site to be efficient in the use of the resources at hand and matter can be addressed through the proposed standard 14.*

34. Regulation 52(4) The Committee recommends that technicians be allowed to demonstrate and explain medical devices under the supervision of members and Council needs to review and revise this section.  
Moved by Angela Wierzbicki Seconded by Kris Thorkelson Vote: 7/7 in favor

*Moved by Gary Cavanagh, Seconded by David Collins that the recommendation by the RAC regarding section 52(4), that technicians be allowed to demonstrate and explain medical devices under the supervision of members and Council needs to review and revise this section, be tabled.*

*Motion Tabled*

*Randy Stephanchew will do some research and provide feedback to the President.*

35. Regulation 52(4)a The Committee recommends that Council needs to provide clarification regarding the meaning of technicians "interpreting" prescriptions.  
Moved by Joanne Johnson Seconded by Tim Pattern Vote: 7/7 in favor

*Moved by David Collins, Seconded by Randy Stephanchew that section 52(4)a be revised to mean the prescription is legible and the requirements for the information contents of the prescription in compliance with the regulations.*

*Carried*

36. Regulation 52(4)c The Committee raised concerns regarding section 52(4)c and the impact upon patient safety and liability.  
Moved by Norma Drosdowech Seconded by Mel Baxter Vote: 7/7 in favor

*Moved by Kelly Borisenko, Seconded by Rob Jaska that, although council appreciates the recommendation, and understands the liability issue to be the pharmacists liability, council recommends to leave section 52(4)c in the discussion document as written.*

*Carried (Randy and David opposed)*

*Moved by Kelly Borisenko, Seconded by Rob Jaska that previous motion be amended to change the word from appreciates to acknowledges.*

*Carried (Randy opposed)*

*Council wanted to include an explanation into the discussion document that this is an option to the practice site and pharmacists do not have to delegate this task to technicians.*

37. DEFEATED It was suggested that Committee members could seek external advice on the draft regulations discussion document and forward the information to Council prior to the April 13th meeting, but it must be noted the information forwarded is not on behalf of the RAC.  
Moved by Kris Thorkelson Seconded by Tim Pattern Vote: 2 in favor, 5 against

Two members felt strongly in favor of the motion.

38. Part 8 Regulations 57 through 67(3) The Committee recommends that Council review the implications of Part 8 on hospital pharmacy practice setting.  
Moved by Laverne Vercaigne Seconded by Mel Baxter Vote: 7/7 in favor

*Part 8, section 57 through 67(3) The Committee recommends that Council review the implications of Part 8 on hospital pharmacy practice setting.*

*Council understands the hospital records would be kept in the institution, but may not be kept in the hospital pharmacy as long as the records are available in the hospital, the records would be compliant. A notation should appear in the discussion document.*

39. Regulation 58(2)a The Committee recommends that Council change 58(2)a to allow for signature or initials of the member.  
Moved by Joanne Johnson Seconded by Kris Thorkelson Vote: 7/7 in favor

*Moved by Wendy Clark, Seconded by Gary Cavanagh that Council accept the recommendation from RAC to allow signature or initials under section 58(2)(a)(i).*

*Carried*

*The discussion document should clarify if the same individual is both approving the drug for dispensing and then doing the final check, this would require the pharmacist to sign or initial both activities separately.*

40. Regulations 60(1)c The Committee recommends that Council remove the requirement of recording the PHIN where the person refuses to provide the information.  
Moved by Tim Pattern Seconded by Kris Thorkelson Vote: 7/7 in favor

*Moved by David Collins, Seconded by Rob Jaska that Council rejects the recommendation of the RAC and the requirement for the PHIN be retained and this remain in the discussion document under section 60(1)c and allow for the members to discuss this matter.*

*Carried*

41. Regulations 62(5) The Committee recommends Council consider removing 62(5) for all medication, but maintain the requirement for CDSA products, because this would be difficult and too labour intensive to administer in both hospital and community pharmacy settings.  
Moved by Joanne Johnson Seconded by Kris Thorkelson Vote: 7/7 in favor

*A) Moved by Sheila Holden, Seconded by Randy Stephanchew that section 62(5) be retained in the discussion document to allow for the members to discuss this matter.*

*Carried*

*The reason for this section to ensure the pharmacies keep track of all drugs being purchased and distributed. A critical part of this information that might be missing is a drug that has been returned to inventory.*

*This section refers only to dispensed medication.*

*B) Moved by David Collins, Seconded by Randy Stephanchew that sections 62(4) and 62(5) be removed.*

*Defeated*

*Product stability and integrity cannot be maintained once a product has been dispensed and there may be enhanced risk to the patient and liability for the pharmacy. Dispensed medication should never be returned to inventory for re-use.*

*C) Moved by Penny Murray, Seconded by Sheila Holden that section 62(4e) be amended to read "known and appropriate".*

*Carried*

42. Regulation 63. The Committee recommends Council consider removing 63 for all medication, but maintain the requirement for CDSA products, because this would be difficult and too labour intensive to administer in the pharmacy.  
Moved by Angela Wierzbicki Seconded by Mel Baxter Vote: 7/7 in favor

*Moved by John Rodie, Seconded by Kelly Borisenko that Council accept the recommendation of the RAC for removal Of section 63 but maintain the requirement for drugs covered under the Controlled Drugs and Substances Act.*

*Carried (Gary and Penny opposed)*

43. Regulations 64(1)c The Committee recommends that section 64(1)c is removed as it would be onerous to maintain and would not provide the needed information to ensure the communication was occurring.  
Moved by Kris Thorkelson Seconded by Angela Wierzbicki Vote: 7/7 in favor

*Moved by David Collins, Seconded by Randy Stephanchew that Council accept the recommendation of the RAC for the removal of section 64(1)c.*

*Defeated (Randy opposed)*

44. Regulations 68(4)f The Committee is concerned that all medications may lack "some therapeutic value" and the wording should be changed by removing the word "may".  
Moved by Norma Drosdowech Seconded by Angela Wierzbicki Vote: 7/7 in favor

The Committee also suggests that scenarios be included to provide some practice applications of this section.

*Moved by Rob Jaska, Seconded by Wendy Clark that Council accept the recommendation of the RAC that in section 68(4)f the wording should be changed by removing the word "may".*

*Carried*

45. Regulations 69(2) The Committee recommends the section be changed to not require DPIN entry, where the patient has requested the information not be entered, until Manitoba Health has created a pseudo-PHIN system (that would enable the information to be entered in a general file).  
Moved by Tim Pattern Seconded by Kris Thorkelson Vote: 5 in favor, 2 against

One member had a strong objection to the motion.

*Moved by Rob Jaska, Seconded by Kelly Borisenko that Council approve to keep section 69(2) as is and it is important to raise this issue with Manitoba Health that a pseudo-PHIN be developed.*

*Carried*

46. Regulations 70(2a)i and 70(2b)i The Committee recommends these sections be changed to add "and the declaration is documented" and remove the corresponding subsections ii.  
Moved by Norma Drosdowech Seconded by Mel Baxter Vote: 7/7 in favor

*Moved by Wendy Clark, Seconded by Ron Kozak that Council accept the recommendation of the RAC in that sections 70(2a)i and 70(2b)i be changed to add "and the declaration is documented" and remove the corresponding subsections ii.*

*Carried*

47. DEFEATED Regulations 73 There was a motion that Council remove section 73.  
Moved by Angela Wierzbicki Seconded by Kris Thorkelson Vote: 4 in favor, 4 against

Four members strongly supported the removal of this section.

*Moved by David Collins, Seconded by Rob Jaska that Council not approve the removal of section 73 that addresses the issue of inducements.*

*Carried*

*Include the issues as discussed the last time we looked at this and to clarify that this would only cover the practice of pharmacy and when drug are sold pursuant to a prescription.*

48. Regulations 74(1) The Committee recommends that a section be added that will allow the dispensing practitioners committee to consult other health professions and individuals as it may deem important to do so.

Moved by Mel Baxter Seconded by Kevin Hall Vote: 8/8 in favor

*Moved by Wendy Clark, Seconded by David Collins that Council support the recommendation of the RAC regarding section 74(1) to allow the dispensing practitioners committee to consult other health professions and individuals as it may deem important to do so.*

*Carried (Penny and Kelly opposed, Gary abstained)*

*Include an explanation of the reason that this is because of the expanding number of prescribers in the health care system and this would be a way to bring there perspective to the deliberations of the committee.*

49. DEFEATED Regulations 74(2) and 85(2) There was motion that a member would be appointed for two years and renewed at the discretion of the appointing body.

Moved by Kevin Hall Seconded by Mel Baxter Vote: 5 in favor, 3 against

Five members felt that more than two terms may be beneficial.

*A) Moved by David Collins, Seconded by Wendy Clark that, with respect to section 74(2), members should be appointed for two year terms with additional terms at the discretion of the appointing body.*

*Carried*

*B) Moved by David Collins, seconded by Wendy Clark that with respect to section 85(2), members should be appointed for two year terms with additional terms at the discretion of the appointing body.*

*Carried*

50. Regulations 75(4) and 79(4) The Committee recommends that these sections be removed and an appeal process developed.

Moved by Kris Thorkelson Seconded by Angela Wierzbicki Vote: 8/8 in favor

*A) Moved by Penny Murray, Seconded by David Collins that under section 75(4), an appeal process be developed that would have Council act as the appeal body and there would no provision for further appeal.*

*Carried*

*B) Moved by Rob Jaska, Seconded by Shawn Bugden that under section 79(4) an appeal process be developed that would have Council act as the appeal body and there would no provision for further appeal.*

*Carried*

51. Regulations 86(1.1) The Committee recommends that section 86(1.1) be reworked and moved to section 68 in order to recognize that this is not prescribing, per se and should not, therefore, be covered by section 87.

Moved by Kevin Hall Seconded by Lavern Vercaigne Vote: 8/8 in favor

Therapeutic interchange in the hospital setting is based on prior approval by the medical staff and occurs automatically; therefore the prescribing criteria listed in section 87 could not be met in the hospital setting. The Committee did recognize that moving this regulation to section 68 might conflict with the authority

permitted for interchangeable pharmaceutical products described in Part 9 of the act, but Regulation 86(1.1) should not be considered prescribing and therefore should not be left in Part 12 of the regulations.

*Moved by Rob Jaska, Seconded by David Collins that with respect to 86(1.1), this section should be left as is and legal advice will be sought regarding the legal impact of the moving of section 68.*

*Carried*

*Council supported the concept of having this in the document and recognized the concern that, should the section be moved, it is necessary to ensure it does not contravene the authority under Part 9 of the regulations and Part 9 of the act.*

52. Regulations 89(1) The Committee recommends that Council remove the requirement of recording the PHIN where the person refuses to provide the information.

Moved by Kris Thorkelson Seconded by Tim Pattern Vote: 7 in favor, 1 against

*Moved by David Collins, Seconded by Kelly Borisenko that in section 89(1), the requirement for the PHIN be retained and this remain in the discussion document and allow for the members to discuss this matter.*

*Carried*

53. Regulations 91(2) The Committee recommends that the training program as established by Council includes training in enhanced safety measures and emergency resuscitation.

Moved by Kevin Hall Seconded by Joanne Johnson Vote: 8/8 in favor

*Moved by Kelly Borisenko, Seconded by Penny Murray that Council supports the recommendation of the RAC for 91(2) in that the training program as established by Council includes training in enhanced safety measures and emergency resuscitation.*

*Carried*

54. Regulations 94(1) The Committee recommends that Council review and revise this section to allow for routine tests, like blood pressure, pregnancy, blood glucose, be exempt from the record keeping required under this section.

Moved by Joanne Johnson Seconded by Mel Baxter Vote: 7 in favor, 1 against

One member felt that documentation was necessary from a liability perspective.

*Moved by David Collins, Seconded by Ron Kozak that the discussion document retain section 94(1) as it currently is.*

*Carried*

55. Regulations 95(4) The Committee recommend that Council change section 95(4) to include all the sections (1,2,3) and not just limited to 95(3), with the appropriate wording change.

Moved by Kris Thorkelson Seconded by Kevin Hall Vote: 8/8 in favor

*Moved by David Collins, Seconded by Rob Jaska that Council accept the recommendation of the RAC regarding section 95(4) in that Council change section 95(4) to include all the sections (1,2,3) and not just limited to 95(3), with the appropriate wording change.*

*Carried*