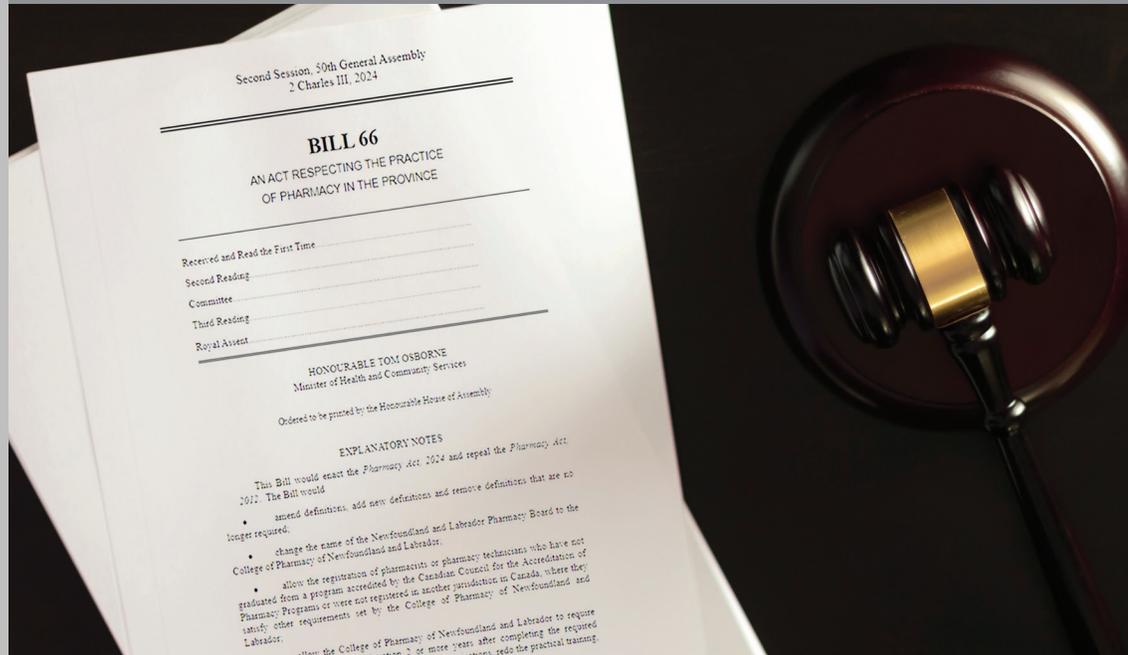


THE APOTHECARY

NEWSLETTER
SUMMER 2024 - nlpb.ca



The official newsletter of the Newfoundland & Labrador Pharmacy Board.

Registered pharmacy professionals are responsible for reviewing all information within this publication.

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Welcome to the Summer 2024 edition of *The Apothecary!* Please read all of the content in this issue. If you have any questions or comments please email inforx@nlpb.ca.



@NLPHARMACYBOARD



MESSAGE FROM THE REGISTRAR

NLPB is committed to embodying its vision of quality pharmacy practice and patient-centred healthcare through leadership and collaboration. In ever-evolving environments like pharmacy practice and regulation, consultation and collaboration with key partners is vital to effective policy development and decision making. Incorporating consultation into standards and policy development enables a deeper understanding of issues and the potential impacts to those affected. This in turn promotes more realistic expectations, streamlined implementation, and improved risk management.

You may have noticed that NLPB has increased its consultation efforts in recent years, as we have enhanced the consultation component of strategic planning and policy review and development processes. In the past two years, NLPB has invited feedback from registered pharmacy professionals on standards of pharmacy operation, standards of practice, interpretation guides, strategic goals, and specific strategic initiatives.

Consultation with registered pharmacy professionals, other healthcare providers, the public, and other key partners may be done through surveys, focus groups, task forces, and/or committees.

We are grateful for the feedback that pharmacy professionals and others have provided, as it has been valuable in identifying factors that affect quality and safety in pharmacy practice as we work to determine the supports that may help pharmacy professionals to provide quality care. The information that we receive through consultation also helps us better communicate what we do and why. We are working to improve our communications following consultations to better share what we heard and how the feedback was used to inform a relevant piece of work.

This past spring, we carried out two key consultations related to initiatives within our strategic plan. Firstly, we invited all registered pharmacy professionals to participate in an online survey designed to gather insight into the nature, prevalence, and scope of workplace practices that have the potential to affect the quality of care the public receives. Over 17% of registered pharmacy professionals shared their feedback. From early analysis of the responses, it is clear that pharmacy professionals in Newfoundland and Labrador are experiencing stress and either burnout or risk of burnout. Of particular concern, many of the pharmacy professionals that responded reported that, at times, they have been unable to provide services requested by their patients because they felt they did not have the time or staffing to do so. While this survey was not of scientific design, a formal analysis of the data is underway. When this is complete, we will report back on what we heard and next steps. By the end of this year, we hope to fulfill the strategic initiative to “define NLPB’s role in supporting pharmacy professionals’ wellness and influencing working conditions that may impact quality and safety of patient care.”

In addition to the working conditions and wellness survey, NLPB also invited registered pharmacists and pharmacy technicians to provide feedback on professional development (PD) requirements to support the review and revision of NLPB’s *Professional Development Requirements for Pharmacists and Pharmacy Technicians Interpretation Guide*. We were pleased that the online survey received such a significant response rate of 42%, allowing for many diverse perspectives and experiences to be included in the analysis. For some brief highlights of what we heard, refer to the article immediately following this message. The survey responses are being analyzed alongside feedback from NLPB’s PD Review Committee and the results of a jurisdictional scan, all of which will inform a new draft of the interpretation guide, which is scheduled to be presented to the board for approval at the September 2024 board meeting. When the new interpretation guide is approved, we will share more on how the consultation process informed the updated requirements.



MESSAGE FROM THE REGISTRAR

NLPB has not only been conducting consultations to inform our decision-making but we have also been actively participating in consultations with key partners to inform their decision-making. The feedback we gather from consultations, practice questions, site visits, the complaints and discipline process, and other interactions with registered pharmacy professionals helped to inform the feedback we shared with the Department of Health and Community Services when consulting on the new *Pharmacy Act, 2024*. For more information regarding NLPB's role in the legislative process, please read the article on the next page, *Self-Regulation - The Process of Legislative Change*.

I sincerely thank everyone who has participated in our consultations and look forward to further collaborations. All feedback we receive is carefully considered and used to the extent possible at all levels of decision-making. If you have not yet participated in an NLPB consultation, I encourage you to keep an eye out for future opportunities to lend your expertise and have your voice heard. I would also love to receive feedback on how we can continue to improve engagement efforts going forward.

Best Regards,

Noelle Patten

PD REQUIREMENTS— HIGHLIGHTS OF WHAT WE HEARD

A total of 449 pharmacists and pharmacy technicians responded to NLPB's online survey regarding professional development (PD) and continuing competency in spring 2024. Pharmacists accounted for 74% of respondents and pharmacy technicians accounted for 26%. Of those who responded, 65% indicated they work in a community practice environment, while 31% indicated they work primarily in a hospital setting and 4% indicated they work in non-patient care. The majority of respondents (66%) indicated that they have been practicing pharmacy for 10 or more years, while 18% have been practicing 5-9 years, and 16% have been practicing less than 5 years. Below are some highlights from the initial analysis.

Required Hours of Learning

Of those who responded to the question regarding the current minimum credits / hours of learning required, 70% agreed the number of credits was sufficient, while 29% felt the number was too high and 1% felt the number was too low.

Accredited Learning

When asked what the current number of credits / hours of accredited learning should be, 46% of those who responded felt the requirement for accredited learning should be eliminated, while 43% believe the number should be retained, and 11% believe the number should be reduced.

Of those who responded, 58% indicated that they relied on accreditation to indicate that a program is of good quality and 80% felt that accreditation provides assurance that the information presented in the program is of good quality and contains reliable information to inform practice.

Supporting Documentation

Pharmacy professionals who responded were divided on their opinion of whether or not supporting documentation should be uploaded to the NLPB Registrant Portal; 49% indicated that it should be uploaded to the portal, and 51% felt that they should only have to upload supporting documents if they were selected for a PD audit.

PD Audit

Regarding the PD audit, 34% of respondents felt NLPB should only audit supporting documentation to ensure the required learning activity was completed, while 26% felt NLPB should only audit to confirm the number of learning hours submitted, and 26% felt that no audit should be conducted.

The information gained from this consultation will be utilized alongside the results of a jurisdictional scan and the recommendations of the PD Review Committee to inform revisions to the *Professional Development Requirements for Pharmacists and Pharmacy Technicians Interpretation Guide*, which should be available later this fall.



SELF-REGULATION— THE PROCESS OF LEGISLATIVE CHANGE

Self-regulation is when government grants a profession the privilege of regulating itself under specific legislation, recognizing that professional activities require a specialized knowledge to both practice and effectively regulate. The legislation creates the regulatory body, provides a regulatory framework, and identifies the extent of the legal authority that is delegated to the regulatory body. It is the responsibility of the regulatory body to govern the profession in accordance with the legislation.

In Newfoundland and Labrador, the rules and principles related to the regulation of the practice and profession of pharmacy are currently set out in the *Pharmacy Act, 2012*, but will be replaced by the *Pharmacy Act, 2024* as of September 30, 2024.

Legislative Process

While it is the responsibility of NLPB to oversee and enforce this legislation (Act), it is not within NLPB's authority to make changes to the Act independently. When issues in the Act are identified or when the Act is due for review, typically every 5-10 years, NLPB compiles suggested revisions and submits them to the provincial Department of Health and Community Services (DHCS). These suggestions are then reviewed and discussed internally by the DHCS staff and, if they feel that revisions to the Act are required, they will prepare and submit a cabinet paper to request permission from Cabinet to begin drafting the changes. This submission can require extensive consultation both internally within the department, between other affected departments, and with external interested parties, and may or may not include NLPB's suggested revisions.

Upon review, Cabinet may choose not to approve the submission if it does not meet with current DHCS or Cabinet priorities. If the submission is approved, Cabinet will give instructions on the specific sections of the Act that may be revised.

Once the submission is approved, DHCS staff, in collaboration with Legislative Counsel staff of the Department of Justice and Public Safety, will start the drafting process. Depending on the extent of the revisions, a bill, which is a draft document setting out the revisions, will be prepared to either amend / make edits to the existing Act or establish a new Act. NLPB is consulted during this process to discuss whether the revisions address the identified issues and that any new sections being developed are in keeping with expected conventions; however, DHCS makes the final

decisions on the form of the bill. As both DHCS staff and Legislative Counsel staff are responsible for multiple pieces of legislative work, this process can take a significant amount of time.

Once the bill has been finalized, the Minister of DHCS will introduce the bill to the House of Assembly, with the permission of the Government House Leader. To become law, a bill goes through several stages – first reading, second reading, Committee of the Whole (amendments, if any, are made at this stage), third reading, and, finally, Royal Assent. In some cases, as with the impending *Pharmacy Act, 2024*, final proclamation is deferred to a later date.

Act Review and Consultation

Since reaching the five-year mark from when the *Pharmacy Act, 2012* was first proclaimed, NLPB has conducted a review each year, compiling and submitting comments and suggestions to DHCS based on the changing practice environment. Upon reaching the 10-year mark, DHCS reviewed these suggestions and decided that revisions were necessary to address the issues identified.

Jun. 2017-2022	NLPB provides annual updates to suggested revisions to DHCS
Jul. 2022	DHCS submits cabinet paper
Aug. 2022	Cabinet approves permission to draft changes to amend Act
Oct. 2022	Initial consultation with legislative consultants
Jan. 2023	Follow-up consultation with legislative consultants
Sept. 2023	Follow-up consultation with legislative consultants Legislative Counsel staff decides to repeal and replace Act instead of amending
Oct. 2023	Final consultation with legislative consultants
Nov. 16, 2023	Notice of Motion to introduce Bill in House of Assembly
Mar. 4, 2024	First Reading
May 13, 2024	Second Reading Committee of the Whole
May 21, 2024	Third Reading
May 29, 2024	Royal Assent
Sept. 30, 2024	Proclamation



PHARMACY ACT, 2024— MAJOR REVISIONS

On September 30, 2024, the *Pharmacy Act, 2012* will be repealed and replaced by the *Pharmacy Act, 2024*. The notable changes to the Act include the following:

- Incorporates gender-neutral language.
- Changes the Newfoundland and Labrador Pharmacy Board's name to College of Pharmacy of Newfoundland and Labrador (CPNL).
- Clarifies and adds definitions and removes definitions that are no longer required.
- Clarifies the objects of CPNL.
- Removes the limitation that pharmacy technicians can only be nominated for board membership in one category specifically for pharmacy technicians.
- Grants CPNL the authority to establish alternate requirements to register candidates who completed their education outside of Canada.
- Sets the expectation that applicants who apply for registration two or more years after completing necessary exams or practical training may be required to rewrite the exams, redo the practical training or both.
- Extends the period that previously registered pharmacists and pharmacy technicians seeking re-registration may remain unregistered from two years to three years before they must complete additional requirements.
- Creates registration categories for pharmacy technician students and pharmacy technician interns.
- Clarifies the requirements for a change in ownership of a pharmacy.
- Allows for "administrative suspensions" in circumstances where a registrant does not comply with registration or renewal requirements (e.g. failure to renew professional liability insurance).
- Allows the Registrar to suspend or restrict
 - the registration of a registrant who is the subject of an allegation of conduct deserving of sanction until the complaints authorization committee makes a decision, when it is in the public interest to do so.
- Removes the restriction that only pharmacists (and not pharmacy technicians) can sit on an adjudication tribunal for a complaint against a pharmacist.
- Clarifies the scope of the quality assurance program to reflect processes for both registrants and pharmacies, including:
 - professional development requirements
 - routine assessment of registrants' practice
 - routine assessment of pharmacies
 - the review of concerns about a registrant's practice by the quality assurance committee.
- Clarifies CPNL's authority to conduct inspections to determine compliance with the Act, regulations, by-laws, and standards of practice and operation (and that this is distinct from routine pharmacy assessments).
- Adds a requirement for employers who end an employment relationship with a registrant based on knowledge of conduct deserving of sanction to report to CPNL.

The changes to the Act and subsequent changes to the Regulations and bylaws creates significant work for NLPB staff as we need to revise process or develop new ones to align with new legislation. Not all processes will be ready for implementation with the proclamation of the *Pharmacy Act, 2024* on September 30, 2024. Registered pharmacy professionals should expect a transition period as NLPB works to ensure processes are thorough, efficient, and serve the best interest of the public.



COLLEGE OF PHARMACY OF NL— NEW NAME AND NEW LOOK

With the *Pharmacy Act, 2024* set to be proclaimed on September 30, 2024, the Newfoundland and Labrador Pharmacy Board (NLPB) will be renamed as the College of Pharmacy of Newfoundland and Labrador (CPNL). Changing the name will bring NLPB in line with all other Canadian pharmacy regulators as well as other provincial healthcare regulatory bodies who are regulatory colleges.

The name change follows the revisions to NLPB's vision and mission adopted earlier this year, which supports the work of the board to define and clarify NLPB's role in pharmacy, healthcare, and the regulatory landscape. Moving forward with a new name and a refreshed vision and mission, CPNL will continue our work to establish a reputation of trust and integrity. This work supports NLPB's strategic goal to *strengthen pharmacy professionals' and the public's trust in the regulatory process* as outlined in the 2023-2026 Strategic Plan.

In preparing for the name change, a review was conducted of the current visual identity to ensure it aligns with NLPB's role. In conducting the review, NLPB staff did so with a critical lens to ensure any imagery or language used aligns with NLPB's equity, diversity, inclusion, and reconciliation initiatives as outlined in the 2023-2026 Strategic Plan. It was noted that some symbols, such as crests and coats of arms are associated with colonial imagery and, as a result, the board decided that NLPB's current logo, a modernized version of NLPB's official crest, was not aligned with NLPB's role moving forward.

Several new logo options were developed and presented to the board. The logo chosen incorporates the text style, colors, and some elements from NLPB's current logo so that it

retains some familiarity already established with NLPB's current visual identity.

The new logo includes three hexagons with an overlay of a mortar and pestle icon in the centre.

Hexagons are not only a symbol associated with organic chemistry, which is an essential component of pharmacy, but are also a symbol of collaboration. As a pharmacy regulator, collaboration is key to achieving quality pharmacy practice and patient-centred healthcare. Each hexagon in the logo represents one of CPNL's key collaborators: the public, pharmacy professionals, and government.

In addition, a complimentary shade of green has been added to the logo, as green has traditionally been associated with pharmacy.

CPNL's new name and new logo will begin appearing on correspondence and resources in October. In addition, the website address and email addresses will be updated to cpnl.ca. The current address, nlpb.ca will be retained and forwarded to cpnl.ca for at least one year following the proclamation of the *Pharmacy Act, 2024* to ensure a smooth transition.

With this change, there are many documents and other resources that will need to be updated, including standards of operation, standards of practice, policies, and interpretation guides. As a result, there will be a transition period wherein some documents may be updated while others still include references to NLPB and display the previous logo. Registered pharmacy professionals are advised that these standards, policies, and interpretation guides remain in effect regardless of whether they have been updated.



MedSTEP NL— INCIDENT AND NEAR MISS TRACKING AND REPORTING



Report medication incidents and near-miss events to National Incident Data Repository

All community pharmacies in Newfoundland and Labrador were required to fully implement MedStep NL, NLPB's standardized continuous quality improvement (CQI) and medication incident reporting (MIR) program, by July 1, 2024. As such, pharmacies must now be reporting medication incidents and near-miss events to the National Incident Data Repository (NIDR).

All data submitted to the NIDR must first be de-identified and anonymized through the pharmacy's MIR platform, that is, there should be no patient identifiers or identifiers of pharmacy staff involved in reporting the incident. Submission of incident and near-miss information to NIDR helps to create a national information-sharing system and provides for provincial reporting, which in turn facilitates the understanding of medication incidents and near misses, and supports the development of strategies to prevent patient harm.

Although all information submitted to the NIDR must be de-identified and anonymized, the incident or near-miss must be documented fully in pharmacy records. It is imperative that the complete history of a medication incident can easily be tracked and cross-referenced if necessary. Therefore, if a pharmacy's MIR platform does not allow for entry of prescription numbers or identifiers such as patient names or pharmacy staff member names, staff must create a process to ensure that all required documentation can be traced back to a specific patient or incident. For example, an incident log could be created and retained on site, or the incident number from the reporting platform could be documented on the medication profile of the patient involved.

Regardless of the method chosen, it is essential that pharmacists-in-charge ensure that all staff are trained on the CQI and MIR process, and the reporting platform itself. It is essential that all pharmacy professionals understand their reporting platform's capabilities to ensure that no steps are missed in the incident documentation process. Pharmacy-specific policies and procedures should be in place that outline the steps staff should take regarding the documentation and reporting of medication incidents and near misses – including what information is to be documented and retained on site.

MedStep NL aims to encourage a culture of patient safety in which medication incidents are approached from a learning perspective. While NLPB will not be collecting pharmacy-level data or information about specific incidents, it is important for pharmacy professionals to have detailed documentation about the incident in the event they need to demonstrate accountability to patients or respond appropriately if a patient files a complaint with NLPB.



BOARD MEMBERS

EXECUTIVE COMMITTEE

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VICE CHAIR

Jason Ryan

EXECUTIVE MEMBERS

Shawn Bugden

Mark Sheppard

PUBLIC REPRESENTATIVES

BOARD-APPOINTED

Terry Foss

Mark Sheppard

GOVERNMENT-APPOINTED

Mary O'Brien

Currently Vacant

NON-VOTING

REGISTRAR

Noelle Patten

ELECTED MEMBERS

ZONE 1 PHARMACIST

Amy Randell

ZONE 2 PHARMACIST

Jason Ryan

ZONE 3 PHARMACIST

Jennifer Godsell

ZONE 4 PHARMACIST

Henry White

ZONE 5 HOSPITAL PHARMACIST

Justin Peddle

ZONE 6 PHARMACY TECHNICIAN

Jeanie Hinks

ZONE 7 AT-LARGE PHARMACISTS

Keith Bailey

Andrew Sweetapple

DEAN, MEMORIAL UNIVERSITY SCHOOL OF PHARMACY

Shawn Bugden



BOARD MEETING UPDATE

The most recent meeting of the NLPB board of directors was held on June 21, 2024 in St. John's.

2023 Audited Financial Statements & Annual Report

The 2023 audited financial statements and the 2023 Annual Report were reviewed and approved by the board. The statements are available for public viewing in the [2023 Annual Report](#) on the NLPB website. The annual report will be presented in its entirety at the Annual General Meeting on September 27, 2024.

Financial Policies

The board approved revisions or additions to expense claim policies, including the Reimbursement of Travel Expenses Policy and Honoraria Policy.

Schedule of Fees 2025

In 2023, the board approved a rate increase of CPI + 5% each year for 3 years, starting in 2024. The CPI that will be applied for 2025 is 3.9%, which is the average CPI for 2023. The increase has been applied to all fees.

Based on a jurisdictional review, new classes of registration added under the *Pharmacy Act, 2024*, and workload associated with certain application processes, the board made the following decisions:

- To reduce the pharmacy student registration fee by 50%
- To add a new pharmacy technician student application fee
- To retain the current pharmacy intern application fee
- To add a new pharmacy technician intern application fee
- To apply a fee to practical training applications for both pharmacist and pharmacy technician candidates.

Please visit the NLPB website to view the [2025 Schedule of Fees](#).

Committee Appointment

Due to a change to the Advocacy Representative

with Newfoundland and Labrador Branch of the Canadian Society of Hospital Pharmacists, the board appointed Dion Ross to the Pharmacy Practice Advisory Committee.

New Logo

With NLPB adopting a new name, College of Pharmacy of Newfoundland and Labrador, upon proclamation of the *Pharmacy Act, 2024* in September, the board approved a new logo design. For more information regarding the new visual identity, please refer to page 5.

Professional Development Requirements

The results of a jurisdictional scan as well as the consultation with pharmacists and pharmacy technicians and the Professional Development (PD) Review Committee regarding the PD Requirements for pharmacists and pharmacy technicians were presented to the board. The board provided direction on several key requirements so that the interpretation guide could be updated and presented for approval at the September 2024 board meeting. Direction was provided regarding:

- required credits / hours of learning,
- required accredited learning credits,
- required fields for documentation,
- auditing processes, and
- submission of supporting documentation.

Pharmacy Technician Bridging Program Policy Development

A new pharmacy technician bridging program was approved by the Nova Scotia College of Pharmacists and launched in March 2024. Subsequently, the pharmacy regulators in New Brunswick and Prince Edward Island have approved a policy to allow registration of pharmacy technician applicants who have completed this program. As such, the board was asked to provide direction regarding the development of a similar policy that would align with other Atlantic provinces. The board provided direction to develop a policy that establishes criteria for the approval of pharmacy technician bridging programs that meet education requirements for pharmacy technician registration.



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