



**The Manitoba Pharmaceutical Association**  
**Annual Report**  
April 6, 2013

**The Manitoba Pharmaceutical Association  
2013 Annual Report**

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**2013 Order of Business**  
**The Manitoba Pharmaceutical Association**  
**ANNUAL GENERAL MEETING**

*Saturday, April 6, 2013*  
Winnipeg Convention Centre  
Room 2GH – 2<sup>nd</sup> Floor, 375 York Avenue  
Winnipeg, Manitoba  
11:00 a.m. – 12:00 p.m.



The Annual General Meeting of the Manitoba Pharmaceutical Association is scheduled to commence at **11:00 a.m.** at The Winnipeg Convention Centre, in Winnipeg, at which time a series of annual reports will be presented.

The reports will be presented for information and any issues arising from the reports will be referred to the Issues Forum, which will occur in the afternoon.

**AGENDA - ORDER OF BUSINESS**

**CHAIR – Kyle MacNair**

1. *Reading of the minutes of the 2012 Annual General Meeting*
2. *Business arising from the minutes*
3. *Registrar's Report*
4. *Deputy Registrar's Report*
5. *President's Address*
6. *Committee and Liaison Reports (passed for information as a group)*
7. *New Business*
8. *Unfinished Business*
9. *Faculty of Pharmacy Report and Notice of Motion*

Notice of Motion: *Pat Trozzo will move or cause to be moved, seconded by Ron Eros "that M.Ph.A. support the continuation of the \$100.00 levy, per member's annual license fee, to the Faculty of Pharmacy, University of Manitoba, for 2014 licensing year."*

**The Order of Business is designed to allow the formal Annual General Meeting to complete its mandate of closing the dealings that have been completed for the previous fiscal year. Reports are to encompass that fiscal year only. Those issues requiring detailed discussion or where resolution cannot be established will be forwarded to the Issues Forum to be held at the Manitoba Pharmacy Conference.**

## **The Manitoba Pharmaceutical Association Annual General Meeting – Rules of Procedure**

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1. A Notice of Meeting will be forwarded to the entire membership no less than twenty-one (21) days prior to the scheduled meeting.
2. A quorum is required to convene a meeting and to transact any business. A quorum must be at least 5% of the membership in attendance.
3. A Parliamentarian will assist with parliamentary procedure as the need arises.
4. Robert's Rules of Order will govern.
5. The chair of the general meeting may permit discussion of motions that are for information and do not require action by the Association. Motions either simple or by resolution, accepted at an annual general meeting, or a special general meeting, requiring action on behalf of the Association shall be forwarded to Council for consideration and decision.
6. All members must sign the attendance sign-in sheet.
7. Voting cards will be issued to all voting members.
8. All members may speak only once to any given resolution and debate may be limited, unless permission to the contrary is given by the assembly.
9. All members are requested to speak at the microphone and are further requested to identify themselves by name before speaking.
10. The Mover and Secunder can speak first, followed by other speakers. The Mover has the option of being the last speaker to the motion.
11. Speakers must address the chair.
12. All members present are encouraged to engage in discussion, but only voting members may make motions and vote.
13. The membership of the association consists of the persons whose names are on the register and who have paid the fees prescribed in the bylaws.
14. Every member who is a licensed pharmacist is entitled to vote at a meeting of the Association.
15. Non-members and observers are welcome to attend, but are unable to engage in discussion or vote.
16. Motion forms will be provided. Motions should be in writing on these forms and the appropriate copy given to the Chair at the time of making the motion.

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### **Clarification:**

- Only licensed pharmacists have the right to vote; however, members who are on the M.Ph.A. register and have paid a fee for the current year can speak, but not vote.
- Regarding the right to speak at meetings of the MPhA, Robert's Rules would apply and the members (licensed pharmacists with a vote) attending the meeting would decide in each incident whether or not an attendee at the meeting would have the right to speak.

# The Manitoba Pharmaceutical Association

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## April 21, 2012 Annual General Meeting Minutes

**Minutes of the 134<sup>th</sup> Annual Meeting  
The Manitoba Pharmaceutical Association  
The Winnipeg Convention Centre, Winnipeg, Manitoba  
Saturday, April 21, 2012**

**PRESIDENT SHAWN BUGDEN** called the meeting to order at 10:37 a.m. with 99 members in attendance.

**Quorum declared.**

**PRESIDENT BUGDEN** welcomed everyone to the 134<sup>th</sup> Annual Meeting of M.Ph.A.

**PRESIDENT BUGDEN** acknowledged the following guests in attendance:

- Jeff Poston, Executive Director from CPhA
- Past Presidents of MPhA
  - Albert Eros
  - Rem Weiss
  - Lois Cantin
  - Pat Trozzo
  - Randy Stephanchew
  - Gary Cavanagh

**MR. DAVID MARR** was appointed parliamentarian for the meeting.

**THE REGISTRAR** read the names of those members who had passed away since the last annual meeting:

*“The names I read are the names of pharmacists registered in Manitoba that have passed away since the last Annual General Meeting. These pharmacists have devoted their career to providing patient care and to keeping patients safe.*

- *James Menzies*                      *July 30, 2011*
- *Norman Gould*                      *October 20, 2011*
- *Ernie Nelko*                      *October 24, 2011*
- *Glen Sinclair*                      *January 3, 2012*
- *Kenneth Collier*                      *February 26, 2012*
- *John Allen*                      *March 11, 2012*

*It is only fitting to honor their passing with a moment of silence.”*

**One Minute’s silence was observed in memory of the above members.**

**INTRODUCTION BY PRESIDENT BUGDEN:**

The Order of Business is designed to allow the formal Annual General Meeting to complete its mandate in closing the dealings that have been completed for the previous fiscal year. Reports have been circulated and encompass that fiscal year only. By-laws or Regulation changes should be put forward as part of the Annual General Meeting or as part of a Special General Meeting. Those issues requiring detailed discussion or where resolution cannot be established will be forwarded to the Issues Forum to be held at the Manitoba Pharmacy Conference or at a Special General Meeting.

**ADDITIONS TO THE AGENDA:**

PRESIDENT BUGDEN stated that the agenda for the meeting has been circulated and asked the membership if there was any new business they wished to add to the agenda.

No Additions to the Agenda.

**1. READING OF THE MINUTES OF THE APRIL 16, 2011, ANNUAL GENERAL MEETING:**

**MOTION #1:** MOVED BY JOHN CORMIER, SECONDED BY DINAH SANTOS THAT the reading of the April 16, 2011, Annual General Meeting Minutes be waived.

**CARRIED**

**MOTION #2:** MOVED BY KRISTINE PETRASKO, SECONDED BY JARRID McKITRICK THAT the April 16, 2011, Annual General Meeting Minutes be approved.

**CARRIED**

**2. BUSINESS ARISING FROM THE MINUTES**

**MOTION #3:** MOVED BY KYLE MacNAIR, SECONDED BY HEATHER LANGTRY THAT the Business Arising from the Minutes be approved as published in the 2012 Annual Reports.

**CARRIED**

**3. EXECUTIVE TREASURER'S REPORT**

**MOTION #4:** MOVED BY KYLE MacNAIR, SECONDED BY KURT SCHROEDER THAT the Executive Treasurer's Report and the Auditor's Report be approved.

**CARRIED**

**4. REGISTRAR'S REPORT**

**MOTION #5:** MOVED BY AL EROS, SECONDED BY PAT TROZZO THAT the Report of the Registrar be received by this Annual Meeting.

**CARRIED**

**5. DEPUTY REGISTRAR'S REPORT**

**MOTION #5:** MOVED BY PAT TROZZO, SECONDED BY JARRID McKITRICK THAT the Report of the Deputy Registrar be received by this Annual Meeting.

**CARRIED**

**6. PRESIDENT'S ADDRESS**

**PRESIDENT BUGDEN** yielded control of the chair to **Vice-President Cormier:**

The Chairman asked the President to present his address to the membership.

**President's Address:**

*Welcome to the 134th Annual Meeting of the Manitoba Pharmaceutical Association. It is my privilege to address the membership in one of my last official duties as your president. I want to begin by thanking our Registrar, Ronald Guse and all his staff for their dedication, commitment and excellence in their support of the council and our association. I also want to take this opportunity to thank the members of council that have contributed to the work of MPhA over the past year. We also need to recognize and thank our members, the pharmacists of Manitoba, that have given back to the profession by participating in the work of self-regulation. And it is work. And it is we, the pharmacists of Manitoba, that must guide the profession in its service to protect the health and wellbeing of the public of Manitoba. I can think of no better way to protect that wellbeing than by facilitating progressive, patient centered pharmacy practice. The more pharmacists are involved in the management of medication the safer our healthcare system will be.*

*It is in the spirit of this duty and with a reverence to the covenant we have to deliver safe patient-centered pharmaceutical care that we have crafted the code of ethics for your consideration today. Our members have been entrusted with the responsibility of approving the code of ethics. To whom much has been given much is expected. I think this code of ethics honors the patients we serve and its approval will be a credit to our profession.*

*In last year's address I suggested that we were facing a wave of change, a tsunami of change and that we better all row together. I think we have. I am proud of the cooperative efforts of MPhA, MSP, CSHP, Manitoba Health and our many other stakeholders. We are rowing together. Oars still bang together now and again but I have renewed sense of hope that with project management as our coxswain we will complete the required tasks to deliver the new pharmaceutical act. Are we moving fast enough? Perhaps not but I do think we are moving in the right direction.*

*I want to end by talking about the flexed arm hang. You remember the fitness tests that we did in school at least for people of my vintage. You could earn a bronze, silver or gold badge. Mine was always bronze but I always thought that it could pass for gold if you looked quickly. Part of the test was the flexed arm hang. You had to hang on a bar at eye level for as long as you could. I was not bad at this. This was less likely to be due to my powerful arms and more likely due to the rather slight rest of me. The clock ticked away. Forty seconds, fifty seconds, sixty seconds – I would begin to shake. Seventy seconds, I would shake a lot. Eighty seconds, ninety seconds, I can do no more and the bar slips between my fingers and I fall to the mat. My arms would ache. But, and this would always happen. Ten minutes later I would feel like I could have done better but that likely wasn't true. That is how I feel today. Know that you have had my best effort and I have been proud to provide my service to the profession.*

**Vice-President Cormier** returned control of the Chair to **PRESIDENT BUGDEN**.

**7. REPORT OF THE ELECTIONS COMMITTEE**

The number of votes cast during the recent election was 329, with 23 votes deemed as spoiled. The Election Committee, consisting of Lavern Vercaigne, Gayle Romanetz, and Barbara Sproll, reported the successful candidates were:



**District #1**

NAMAKA, Geoff  
PETRASKO, Kristine  
SANTOS, Dinah  
STEPHANCHEW, Randall

**District #2**

LUDWIG, Jennifer  
MacNAIR, Kyle  
MARSH, Glenda  
SCHROEDER, Kurt

**MOTION #6:** MOVED BY JOHN CORMIER, SECONDED BY RANDY STEPHANCHEW THAT the ballots for the 2012 election be destroyed.

**CARRIED**

**Certificates of Merit were presented to the following members for their service on M.Ph.A. Council:**

John Cormier  
Carey Lai (not in attendance)  
Heather Langtry  
Pasquale Trozzo

**8. COMMITTEE REPORTS & LIAISON REPORTS:**

- a) Professional Development Committee Report – Kristine Petrasko
- b) Standards of Practice Committee – Kyle MacNair/Pat Trozzo
- c) NAPRA Report – John Cormier
- d) Board of Examiners – Neal Davies
- e) Awards and Nominating Committee – Randall Stephanchew
- f) Governance Committee – John Cormier
- g) Finance & Risk Management – Heather Langtry
- h) Pharmacy Examining Board of Canada Report – Shawn Bugden
- h) CSHP Manitoba Branch Liaison Report – Barbara Sproll

**MOTION #8:** MOVED BY RANDY STEPHANCHEW, SECONDED BY KRISTINE PETRASKO THAT the Annual Committee and Liaison Reports above be approved by the Annual Meeting for information.

**CARRIED**

**9. NEW BUSINESS**

**MOTION #9:** MOVED BY KRISTINE PETRASKO, SECONDED BY JARRID McKITRICK that the members approve a new Code of Ethics pre-circulated for this meeting and dated April 5, 2012, to come into effect with the proclamation of the December 2006 *Pharmaceutical Act*.

**CARRIED**

**10. UNFINISHED BUSINESS**

No unfinished business.

11. **FACULTY OF PHARMACY REPORT AND MOTION**

**MOTION #10:** MOVED BY KEITH SIMONS, SECONDED BY AMY OLIVER THAT the Faculty of Pharmacy Report be accepted for information.

**CARRIED**

Dr. Neal Davies, Dean of the Faculty of Pharmacy, University of Manitoba, addressed the members and extended gratitude for the support that the members provide with the annual levy.

**MOTION #11:** MOVED BY PAT TROZZO, SECONDED BY KYLE MacNAIR THAT M.Ph.A. support the continuation of the \$100.00 levy, per member's annual licence fee, to the Faculty of Pharmacy, University of Manitoba, for the 2013 licensing year.

**CARRIED**

12. **OMNIBUS MOTION**

Mr. Ernest Stefanson presented the following motion:

**MOTION #12:** MOVED BY ERNEST STEFANSON, SECONDED BY CLAIRE GILLIS THAT, all acts, contracts, elections, appointments and payments made by Council of the MPhA since the last Annual Meeting in 2011 as set forth and referred to in the minutes of council or of statements submitted to this meeting be the same and are hereby ratified and confirmed.

**CARRIED**

13. **ADJOURN**

**MOTION #13:** MOVED BY PENNY SHEFRIN, SECONDED BY CHRIS LOUIZOS THAT the meeting be adjourned at 11:10 a.m.

**CARRIED**

**Business Arising Report  
From the April 21, 2012, Annual General Meeting  
to the April 6, 2013, Annual General Meeting**

**MOTION #9: MOVED BY KRISTINE PETRASKO, SECONDED BY JARRID McKITRICK** that the members approve a new Code of Ethics pre-circulated for this meeting and dated April 5, 2012, to come into effect with the proclamation of the December 2006 *Pharmaceutical Act*.

**CARRIED**

Manitoba Health and the Legislative Drafting Unit were notified that the members approved a new Code of Ethics.

**MOTION #11: MOVED BY PAT TROZZO, SECONDED BY KYLE MacNAIR THAT** M.Ph.A. support the continuation of the \$100.00 levy, per member's annual licence fee, to the Faculty of Pharmacy, University of Manitoba, for the 2013 licensing year.

**CARRIED**

The Faculty of Pharmacy, University of Manitoba levy was collected with the 2013 pharmacist licence fee and will be forwarded to the Faculty of Pharmacy.

**Report of the Executive Treasurer**

The year 2012 showed an operating surplus of \$326,270 based on a total revenue of \$1,814,534. The retained earnings of the Association as at December 31, 2012, were \$2,014,197.

Respectfully submitted,  
Geoff Namaka, Executive Treasurer

**Manitoba Pharmaceutical Association  
Budget 2013**

<b>Revenue</b>		<b>Professional Development</b>	
Practicing Fees	1,102,875	<b>P.D. Program Expenses</b>	<b>27,500</b>
Pharmacy Fees	476,519		
Registration Fees	30,000	<b>Administration Expenses</b>	
Non-Practicing Fees	17,000	CPP Expense	20,500
Mailing/Notice Subscription	1,000	Professional Services	64,000
Pharmacy Transfer Fees	7,000	Building - Heat	3,800
Miscellaneous Income	10,000	Building - Light & Water	6,600
Fines and Costs	00	Building - Maintenance & Repair	20,000
Other Income		Building - Taxes	21,000
Sale of Supplies 2,000	2,000	Building - Insurance	4,000
Interest Income 25,000	25,000	Staff Development	5,000
Lock and Leave Program 10,000	10,000	Delivery Expense	2,000
Rental Income 7,500	7,500	Deprec.- Office Equipment	3,500
Profess. Development Revenue 5,000	5,000	Deprec. - Building	00
Satellite Pharmacies 500	500	Deprec - Software	10,000
<b>Total Other Income 50,000</b>	<b>50,000</b>	Deprec.- Photocopier	3,500
<b>Total Revenue</b>	<b>1,694,394</b>	Deprec.- Computer Hardware	1,500
		Deprec - Leasehold Improvement	21,500
		Dues & Subscriptions	4,500
		Salaries	679,417
		Insurance - Group	46,500
		Communication Resources	
		General Resource 40,000	40,000
		Commun. Plan Exp. 20,000	20,000
		Computer Expenses and I/T	15,000
		Equipment Maintenance	7,500
		Regulations Implementation Costs	50,000
		Printing & Supplies	10,000
		Pension Plan	39,270
		Postage	13,000
		Sundry	4,000
		Bank Charges	32,000
		Telephone	11,000
		EIP Expense	11,500
		External Affairs	20,000
		Human Resource Management	10,000
		<b>Total Administration Expenses</b>	<b>1,200,587</b>
		<b>EXPENSE SUMMARY</b>	
		Total Operational Expenses	<b>440,305</b>
		Total P.D. Program Expenses	<b>27,500</b>
		Total Administration Expenses	<b>1,200,587</b>
		<b>Total Expenses</b>	<b>1,668,392</b>
<b>TOTAL REVENUE</b>			
<b>TOTAL INCOME</b>	<b>\$ 1,694,394.00</b>		
<b>TOTAL EXPENSE</b>	<b>\$ (1,668,392.00)</b>		
<b>OPERATING SURPLUS (LOSS)</b>	<b>\$ 26,002.00</b>		

**MANITOBA PHARMACEUTICAL ASSOCIATION**  
**Non-Consolidated Financial Statements**  
**Year Ended December 31, 2012**

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Index to Non-Consolidated Financial Statements**

**Year Ended December 31, 2012**

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## INDEPENDENT AUDITORS' REPORT

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To the Members of Manitoba Pharmaceutical Association

We have audited the accompanying non-consolidated financial statements of Manitoba Pharmaceutical Association, which comprise the non-consolidated statements of financial position as at December 31, 2012, December 31, 2011 and January 1, 2011, and the non-consolidated statements of revenues and expenses, changes in net assets and cash flows for the years ended December 31, 2012 and December 31, 2011, and a summary of significant accounting policies and other explanatory information.

### Management's Responsibility for the Non-consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these non-consolidated financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of non-consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on these non-consolidated financial statements based on our audits. We conducted our audits in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the non-consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the non-consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the non-consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the non-consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the non-consolidated financial statements.

We believe that the audit evidence we have obtained in our audits is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the non-consolidated financial statements present fairly, in all material respects, the financial position of Manitoba Pharmaceutical Association as at December 31, 2012, December 31, 2011 and January 1, 2011, and the results of its operations and its cash flows for the years ended December 31, 2012 and December 31, 2011 in accordance with Canadian accounting standards for not-for-profit organizations.

Our audit opinion does not extend to the budget figures as presented by management.

*The Exchange*

chartered accountants, LLP  
Winnipeg, Manitoba  
February

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Statement of Financial Position**

**December 31, 2012**

	<b>December 31 2012</b>	December 31 2011	January 1 2011
<b>ASSETS</b>			
<b>CURRENT</b>			
Cash	\$ 611,602	\$ 605,851	\$ 807,121
Marketable securities (Notes 3, 5)	<b>1,926,607</b>	1,622,005	1,259,382
Accounts receivable	-	-	793
Accrued interest receivable	-	-	6,059
Prepaid expenses	<b>2,947</b>	9,045	22,410
Due from DIA Management Group Inc. (Note 6)	<b>209,619</b>	209,619	209,619
	<b>2,750,775</b>	2,446,520	2,305,384
CAPITAL ASSETS (Notes 3, 7)	<b>111,641</b>	117,694	104,542
INVESTMENT IN DIA MANAGEMENT GROUP LTD. (Notes 3, 10)	<b>943,021</b>	945,752	957,890
RESTRICTED ASSET - DUE FROM OPERATING (Note 8)	<b>190,000</b>	50,000	50,000
	<b>\$ 3,995,437</b>	\$ 3,559,966	\$ 3,417,816
<b>TRUST FUNDS</b>			
Building fund			
Due from operating fund	\$ 18,045	\$ 14,661	\$ 13,463
Library fund			
Due from operating fund	<b>460</b>	331	574
	<b>\$ 18,505</b>	\$ 14,992	\$ 14,037
	<b>\$ 4,013,942</b>	\$ 3,574,958	\$ 3,431,853



**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Statement of Financial Position**

**December 31, 2012**

	<b>December 31 2012</b>	December 31 2011	January 1 2011
<b>LIABILITIES</b>			
<b>CURRENT</b>			
Accounts payable and accrued liabilities	\$ 4,960	\$ 10,830	\$ 5,039
Goods and services tax payable	67,812	71,754	65,039
Deferred income (Note 9)	1,699,963	1,724,463	1,700,081
Due to restricted assets	190,000	50,000	50,000
Due to trust funds	18,505	14,992	14,037
	<b>1,981,240</b>	1,872,039	1,834,196
<b>NET ASSETS</b>			
INVESTED IN CAPITAL ASSETS	111,641	117,694	104,542
UNRESTRICTED	1,712,556	1,520,233	1,429,078
INTERNALLY RESTRICTED (Note 8)	190,000	50,000	50,000
	<b>2,014,197</b>	1,687,927	1,583,620
	<b>\$ 3,995,437</b>	\$ 3,559,966	\$ 3,417,816
<b>Building Fund</b>			
Balance, beginning of year	\$ 14,661	\$ 13,463	\$ 12,900
Add: interest income	384	398	263
Add: donation	3,000	800	300
	<b>18,045</b>	14,661	13,463
<b>Library Fund</b>			
Balance, beginning of year	331	574	(50)
Add: contributions received	400	100	600
Add: miscellaneous receipts	-	-	25
Add (Less): interest expense	9	17	(1)
Less: library purchases	(280)	(360)	-
	<b>460</b>	331	574
	<b>\$ 18,505</b>	\$ 14,992	\$ 14,037
	<b>\$ 4,013,942</b>	\$ 3,574,958	\$ 3,431,853

**ON BEHALF OF THE BOARD**

\_\_\_\_\_ Director

\_\_\_\_\_ Director

See notes to financial statements

**MANITOBA PHARMACEUTICAL ASSOCIATION**  
**Non-Consolidated Statement of Revenues and Expenses**  
**Year Ended December 31, 2012**

	Budget (Unaudited) 2012	2012	2011
<b>FEE REVENUE</b>			
Practicing fees	\$ 1,115,093	\$ 1,184,294	\$ 1,025,845
Pharmacy fees	499,518	509,467	501,837
Fines and costs	-	20,000	16,000
Registration fees	18,000	48,794	37,933
Non-practicing fees	17,000	16,807	16,582
Miscellaneous income	5,000	25,114	10,456
Pharmacy transfer fees	7,000	9,028	6,330
Mailing/Notice Subscription	2,000	1,030	1,812
	<u>1,663,611</u>	<u>1,814,534</u>	<u>1,616,795</u>
<b>OTHER INCOME</b>			
Net investment earnings	22,000	72,357	65,663
Professional development	5,000	20,129	8,588
Lock and leave program	12,000	12,605	12,147
Rental income	7,500	7,500	7,500
Sale of supplies	2,000	1,618	2,150
Satellite pharmacies	500	1,030	446
PRISM	-	-	1,671
M3P	-	68,615	58,208
ICPD-OMFC Project	-	14,966	-
	<u>49,000</u>	<u>198,820</u>	<u>156,373</u>
<b>TOTAL REVENUES</b>	<u>1,712,611</u>	<u>2,013,354</u>	<u>1,773,168</u>
<b>EXPENSES</b>			
PRISM	-	-	1,671
M3P	-	68,615	58,208
ICPD-OMFC Project	-	14,966	-
Operations (Page 12)	438,650	493,887	459,890
Administration (Page 13)	1,229,995	1,101,039	1,050,762
Professional development (Page 13)	27,500	29,650	20,188
	<u>1,696,145</u>	<u>1,708,157</u>	<u>1,590,719</u>
<b>EXCESS OF REVENUE OVER EXPENSES FROM OPERATIONS</b>	<u>16,466</u>	<u>305,197</u>	<u>182,449</u>
<b>OTHER INCOME</b>			
Loss of DIA Management Group Ltd. (Note 10)	-	(2,731)	(12,144)
Unrealized gain (loss) on marketable securities	-	23,804	(65,998)
	<u>-</u>	<u>21,073</u>	<u>(78,142)</u>
<b>OPERATING SURPLUS</b>	<u>\$ 16,466</u>	<u>\$ 326,270</u>	<u>\$ 104,307</u>

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Statement of Changes in Net Assets**

**Year Ended December 31, 2012**

	<b>Invested in Capital Assets</b>	<b>Unrestricted</b>	<b>Internally Restricted</b>	<b>2012</b>	<b>2011</b>
<b>NET ASSETS - BEGINNING OF YEAR</b>	\$ 117,694	\$ 1,520,233	\$ 50,000	\$ 1,687,927	\$ 1,583,620
<b>Operating surplus</b>	(40,781)	367,051	-	326,270	104,307
<b>Purchase of capital assets</b>	34,728	(34,728)	-	-	-
<b>Interfund transfers</b>	-	(140,000)	140,000	-	-
<b>NET ASSETS - END OF YEAR</b>	<b>\$ 111,641</b>	<b>\$ 1,712,556</b>	<b>\$ 190,000</b>	<b>\$ 2,014,197</b>	<b>\$ 1,687,927</b>

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Statement of Cash Flows**

**Year Ended December 31, 2012**

	<b>2012</b>	<b>2011</b>
<b>OPERATING ACTIVITIES</b>		
Cash receipts from members	\$ 1,992,646	\$ 1,805,716
Cash paid to suppliers and employees	<u>(1,671,369)</u>	<u>(1,528,676)</u>
Cash flow from operating activities	<u>321,277</u>	<u>277,040</u>
<b>INVESTING ACTIVITIES</b>		
Purchase of capital assets	(34,728)	(49,689)
Change in cost value of marketable securities	<u>(280,798)</u>	<u>(428,621)</u>
Cash flow used by investing activities	<u>(315,526)</u>	<u>(478,310)</u>
<b>INCREASE (DECREASE) IN CASH</b>	<b>5,751</b>	<b>(201,270)</b>
CASH - BEGINNING OF YEAR	<u>605,851</u>	<u>807,121</u>
<b>CASH - END OF YEAR</b>	<u><b>\$ 611,602</b></u>	<u><b>\$ 605,851</b></u>

# MANITOBA PHARMACEUTICAL ASSOCIATION

## Notes to Non-Consolidated Financial Statements

Year Ended December 31, 2012

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### 1. DESCRIPTION OF OPERATIONS

The Association was formed under an act of the legislature of the Province of Manitoba as a body corporate to undertake regulatory activities for the pharmacy profession. It administers the Pharmaceutical Act (Bill 51) and is responsible for the licensing, discipline and monitoring of continuing education of pharmacists and for establishing practice standards. The Association ensures the promotion, preservation and protection of the health and safety of our communities. As a non-profit organization, the Association is exempt from income tax on its earnings under Section 149(1) of the Income Tax Act.

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### 2. FIRST TIME ADOPTION OF ACCOUNTING STANDARDS FOR NOT-FOR-PROFIT ORGANIZATIONS

During the year the Association adopted accounting standards for not-for-profit organizations. These financial statements are the first prepared in accordance with these standards. The changes have not resulted in any changes to previously reported amounts.

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### 3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared in accordance with Accounting Standards for Not-for-Profit Organizations. Because a precise determination of many assets and liabilities is dependent upon future events, the preparation of financial statements for a period necessarily involves the use of estimates which have been made using careful judgement. The financial statements have, in management's opinion, been properly prepared within the reasonable limits of materiality and within the framework of the significant accounting policies summarized below:

#### Financial instruments policy

Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, financial assets with actively traded markets are reported at fair value, with any unrealized gains and losses reported in income. All other financial instruments are reported at amortized cost, and tested for impairment at each reporting date. Transaction costs on the acquisition, sale, or issue of financial instruments are expensed when incurred.

#### Capital assets

Purchased capital assets are recorded at cost. The capital assets are amortized over their estimated useful lives at the following rates using the straight-line method.

Office equipment	10 years
Computer hardware	4 years
Computer software	5 years
Furniture and fixtures	5 years
Renovations and leasehold improvements	5 years

The Association regularly reviews its capital assets to eliminate obsolete items.

*(continues)*

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# MANITOBA PHARMACEUTICAL ASSOCIATION

## Notes to Non-Consolidated Financial Statements

Year Ended December 31, 2012

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### 3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

#### Investment in DIA Management Group Inc.

The Association purchased 100% of the outstanding shares of DIA Management Group Inc. (DIA) on June 30, 2008. The investment is being recorded using the equity method where income or losses of DIA are recorded in the statement of revenues and expenditures with a corresponding adjustment to the cost of the investment.

#### Revenue recognition

These financial statements are prepared on an accrual basis using the deferred contribution and restricted fund methods of accounting.

The Operating Fund uses the deferred contribution method of accounting. Contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Revenues from fees are recognized for the period in which they relate and when collection is reasonably assured.

Fines, costs and interest are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

The Building and Library Fund use the restricted fund method of accounting. Contributions are recognized as revenue in the year they are received.

#### Funds

The Building Fund was set up for the purpose of future major renovations or re-location. As re-location occurred in 2009 future funds received will be allocated to future improvement.

The Library Fund was set up to record purchases for the library. A \$100 allocation is made whenever a member passes away.

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### 4. FINANCIAL INSTRUMENTS

The Association is exposed to various risks through its financial instruments and has a comprehensive risk management framework to monitor, evaluate and manage these risks. The following analysis provides information about the Association's risk exposure and concentration as of December 31, 2012.

#### Credit Risk

Credit risk arises from the potential that a counter party will fail to perform its obligations. The Association is exposed to credit risk from members. The Association has minimized concentration for credit risk because the members are required to pay the dues in order to continue the membership.

#### Interest Rate

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. In seeking to minimize the risks from interest rate fluctuations, the Association manages exposure through its normal operating and financing activities. The Association is exposed to interest rate risk primarily through its marketable securities.

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**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Notes to Non-Consolidated Financial Statements**

**Year Ended December 31, 2012**

5. MARKETABLE SECURITIES

Marketable securities have been adjusted to fair value for 2012 year-end as disclosed below:

	2012		2011	
	Market	Cost	Market	Cost
Common shares	\$ 58,426	\$ 53,981	\$ 65,994	\$ 63,348
Fixed income	1,057,202	1,076,862	1,205,325	1,246,986
Mutual Fund	810,979	810,979	350,686	350,690
	<b>\$ 1,926,607</b>	<b>\$ 1,941,822</b>	<b>\$ 1,622,005</b>	<b>\$ 1,661,024</b>

The marketable securities are on account with RBC Dominion Securities and are invested in GICs, bonds, trusts, mutual funds and common shares. Interest rates on fixed income ranges from 3.0% to 5.95% and mature between June, 2016 and March, 2041.

6. DUE FROM DIA MANAGEMENT GROUP INC.

The amounts due from DIA Management Group Inc. arose from cash advances. The advances bear no interest and have no repayment terms.

7. CAPITAL ASSETS

	2012		2011	
	Cost	Accumulated amortization	Cost	Accumulated amortization
Office equipment	\$ 57,945	\$ 23,430	\$ 41,102	\$ 18,793
Computer hardware	20,773	18,110	16,634	15,463
Computer software	52,500	20,400	49,500	9,900
Furniture and fixtures	1,926	1,541	1,926	1,156
Renovations and leasehold improvements	118,435	76,457	107,689	53,845
	<b>\$ 251,579</b>	<b>\$ 139,938</b>	<b>\$ 216,851</b>	<b>\$ 99,157</b>
Net book value	<b>\$ 111,641</b>		<b>\$ 117,694</b>	

8. INTERNALLY RESTRICTED NET ASSETS

Certain net assets of the Association have been internally restricted for legal defence purposes (\$50,000) and the lower level renovations (\$140,000).

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Notes to Non-Consolidated Financial Statements**

**Year Ended December 31, 2012**

9. DEFERRED INCOME

	<u>2012</u>	<u>2011</u>
Fees	\$ 1,479,809	\$ 1,535,800
MPPP	215,769	187,649
ICPD-OMFC Project	3,371	-
District 5 NABP Study Grant	<u>1,014</u>	<u>1,014</u>
Net contributions deferred	<u>\$ 1,699,963</u>	<u>\$ 1,724,463</u>

Manitoba Prescribing Practices Program (M3P) is composed of the following cumulative to date amounts:

Contributions received	<u>\$ 628,235</u>	<u>\$ 531,500</u>
Expenses:		
Administrative staff	144,055	123,076
Distribution	30,958	26,224
Equipment use	1,380	1,380
Group Insurance	14,097	12,062
Occupancy	37,200	29,700
Prescription forms	177,787	144,904
Professional and consulting	<u>6,989</u>	<u>6,505</u>
	<u>412,466</u>	<u>343,851</u>
Net contributions deferred	<u>\$ 215,769</u>	<u>\$ 187,649</u>

ICPD-OMFC Project is composed of the following cumulative to date amounts:

Contributions received	<u>\$ 18,337</u>	<u>\$ -</u>
Expenses:		
Consulting	11,417	-
Miscellaneous	569	-
Professional fees	2,874	-
Salary	<u>106</u>	<u>-</u>
	<u>14,966</u>	<u>-</u>
Net contributions deferred	<u>\$ 3,371</u>	<u>\$ -</u>

*(continues)*



**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Notes to Non-Consolidated Financial Statements**

**Year Ended December 31, 2012**

9. DEFERRED INCOME *(continued)*

District 5 NABP Study Grant program is composed of the following cumulative to date amounts:

Contributions received	\$ 3,587	\$ 3,587
Expenses:		
Survey	338	338
Administrative staff	735	735
Training	1,500	1,500
	<u>2,573</u>	<u>2,573</u>
	\$ 1,014	\$ 1,014

10. INVESTMENT IN DIA MANAGEMENT GROUP LTD.

The Association controls DIA Management Group Ltd. DIA Management Group Ltd. was incorporated under the Corporations Act of Manitoba on March 26, 1991 with its primary business activities being property management. DIA Management Group Ltd. has not been consolidated in this organization's financial statements. The Association is accounting for its investment in DIA Management Group Ltd. using the equity method where the shares of income or losses are recorded as part of the cost of the investment. Financial statements of DIA Management Group Ltd. are available on request.

Financial summaries of this unconsolidated entity as at December 31, 2012 and December 31, 2011 and for the years then ended are as follows:

**DIA MANAGEMENT GROUP LTD.**

	<b>December 31 2012</b>	December 31 2011
<b>Financial Position</b>		
Total assets	\$ 289,450	\$ 292,181
Total liabilities	211,619	211,619
Total net assets	<u>\$ 77,831</u>	<u>\$ 80,562</u>
<b>Results of Operations</b>		
Total revenues	\$ 12	\$ 340
Total expenses, including income taxes	2,743	12,484
Excess of revenue over expenses	<u>\$ (2,731)</u>	<u>\$ (12,144)</u>
<b>Cash Flows</b>		
Cash from operating activities	\$ (2,731)	\$ (4,472)
Cash from investing activities	-	-
Cash from financing activities	-	-
Increase (decrease) in cash flows	<u>\$ (2,731)</u>	<u>\$ (4,472)</u>

11. COMPARATIVE FIGURES

Some of the comparative figures have been reclassified to conform to the current year's presentation.

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Schedule of Operations Expenses**

**Year Ended December 31, 2012**

	Budget (Unaudited) 2012	2012	2011
<b>OPERATIONS</b>			
Annual meeting	\$ 13,000	\$ 14,658	\$ 10,461
Assistant registrar's expenses	3,000	1,448	1,354
Complaints committee	5,500	11,374	7,587
Contributions - Library Fund	-	400	100
Contributions - sundry	2,500	1,426	1,445
Council meetings	55,000	51,344	29,551
Deputy registrar's expenses	2,000	1,276	652
Discipline - legal	50,000	115,387	110,971
Discipline committee	12,000	7,803	11,838
District meetings	2,500	-	-
Executive meetings	10,000	9,949	17,166
Faculty of Pharmacy levy	134,800	145,800	138,600
Field operations	8,000	6,055	6,684
General and special meetings	5,000	3,850	-
Grads' ceremony	4,000	4,000	4,000
Medals and awards	13,000	15,317	14,831
NAPRA delegates	9,000	7,980	11,399
NAPRA levy	62,000	62,200	66,000
Other conference and travel	20,000	13,465	10,103
Other meetings	15,000	8,480	5,667
President's honorarium	6,600	6,600	6,600
Registrar's expenses	3,250	3,579	2,700
Young leaders awards	2,500	1,496	2,181
	<b>\$ 438,650</b>	<b>\$ 493,887</b>	<b>\$ 459,890</b>

**MANITOBA PHARMACEUTICAL ASSOCIATION**

**Non-Consolidated Schedule of Administration Expenses and Professional Development**

**Year Ended December 31, 2012**

	Budget (Unaudited) 2012	2012	2011
<b>ADMINISTRATION</b>			
Bank and credit card charges	\$ 40,000	\$ 44,455	\$ 21,160
Building - heat	3,800	1,878	1,655
Building - insurance	4,000	3,398	3,322
Building - light and water	6,600	5,531	4,726
Building - maintenance and repairs	20,000	25,403	18,544
Building - rent and taxes	21,000	20,703	18,361
Canada Pension Plan	19,000	19,984	20,157
Communication Resource	70,000	5,371	24,231
Computer and I/T	15,000	10,549	15,914
Delivery	2,000	1,669	1,672
Depreciation - computer hardware	1,500	2,647	1,865
Depreciation - office equipment	7,000	5,022	3,232
Depreciation - software	10,000	10,500	9,900
Depreciation- renovations and leasehold improvement	21,500	22,612	21,538
Dues and subscriptions	4,500	3,359	3,897
Employment Insurance	11,000	11,883	11,555
Equipment maintenance	7,500	3,592	10,055
External affairs	15,000	13,708	3,014
Human resource management	20,000	8,163	11,978
Insurance - group and liability	46,000	47,184	49,317
Pension plan	38,500	36,768	29,410
Postage	11,000	18,139	16,449
Printing and supplies	10,000	12,500	13,071
Professional fees	64,000	70,587	39,747
Project management consultant	75,000	35,675	-
Salaries	666,095	646,467	676,440
Staff development	5,000	384	2,515
Sundry	4,000	3,941	4,553
Telephone	11,000	8,967	12,484
	<b>\$ 1,229,995</b>	<b>\$ 1,101,039</b>	<b>\$ 1,050,762</b>

**Non-Consolidated Schedule of Expenses**

**Year Ended December 31, 2012**

**2012**

**PROFESSIONAL DEVELOPMENT**

Program	\$ 27,500	\$ 29,650	\$ 20,188
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**Registrar's Report  
To the Manitoba Pharmaceutical Association Annual Meeting  
Saturday, April 6<sup>th</sup>, 2013**

This report contains the noted activities of MPhA and staff for 2012 and early 2013.

**Regulations to the December 2006 *The Pharmaceutical Act***

The Council and Staff of the MPhA have been very active and productive over the past year with respect to the creation, consultation and collaboration for the regulations to the December 2006 *Pharmaceutical Act*. Notwithstanding the members passed regulations in November 2010, the document required further rewriting by Manitoba Justice and content review and changes by Manitoba Health in order for it to be accepted into regulations by the government of Manitoba. At the time of writing this report, the plan is to distribute the first parts of the redrafted regulations and a companion document for the review of the members. The rest of the parts will then be drafted and distributed to the members with a second companion document. The need for the companion documents are to describe and provide an explanation of the changes from the regulation that were passed by the members in 2010.

At the last Annual General Meeting, the members passed a new Code of Ethics for the profession, to be implemented upon proclamation of the new Act. Past President Bugden was the lead on this task and it was critical and important event in the Act proclamation process.

The work being done would not be possible if not for the leadership of President Kyle MacNair and collaboration and cooperation of our key stakeholders, the Manitoba Society of Pharmacists, the Canadian Society of Hospital Pharmacists (MB Branch) and Manitoba Health. Certainly, the time and commitment of Manitoba Justice reviewing drafting and redrafting has been exemplary.

As reported last year, MPhA hired Mr. Bayne Robertson of PCGI Consulting Services as our Project Manager and he has kept stakeholders informed and the process moving forward. Although the target date of June 2012 has long since passed, there are many things that are beyond the control of the Project Manager, President MacNair and Council that caused this date to come and pass.

**NAPRA Gateway Project for International Pharmacy Graduate Applicants**

The National Association of Pharmacy Regulatory Authorities (NAPRA) pilot tested the Gateway Project earlier this year. The project will streamline and centralize the process for registration of International Pharmacy graduates (IPG's). Once all provincial licensing authorities have signed the Memorandum of Understanding (MOU), the plan is to have the program in place towards the end of 2013.

This program will assist in relieving some of the MPhA workload with the large increase in IPGs coming into Manitoba for assessment of Entry to Practice competencies and credentials. The Chair of the Board of Examiners will report the exact details on the numbers of IPGs registered and licensed in Manitoba during the past year. Most of the new IPG registrants do not practice in Manitoba but return, mostly, to Ontario to begin practice in that province.

**Pharmacy Examining Board of Canada (PEBC) deadline for the Pharmacy Technician Evaluating Exam**

The PEBC Evaluating exam and NAPRA bridging programs ensure that pharmacy assistants are given the opportunity to make the transition to regulated pharmacy technicians. The transition period will be different in each province and an imposed deadline for completing the PEBC Evaluating exam might be problematic in some provinces. The Council of Pharmacy Registrars of Canada requested that PEBC consider extending their deadline by three years from December 31, 2015, to December 31, 2018. PEBC agreed to extend the examination deadline. However, each PRA can set an earlier deadline as they wish.

### **Canadian Council for Accreditation of Pharmacy Programs (CCAPP) site visits**

The Faculty of Pharmacy at the University of Manitoba was reviewed for accreditation in 2012 under the CCAPP. The Faculty, under the direction and leadership of Dean Neal Davies, created a very comprehensive self-assessment report. The report was acclaimed by the CCAPP Site Evaluation Panel as one of the best they have received. At the time of writing this report, the decision on the level of accreditation was not announced, but the review process and discussion was very favorable to the pharmacy program at the University of Manitoba.

CCAPP has continued its review of the Pharmacy Technician Programs in the province, the most recent was the program available in Brandon.

### **Regulated Health Professions Act (RHPA)**

The government and Manitoba Health are working with a number of Colleges in Manitoba to develop regulations under the RHPA that would allow the proclamation of the RHPA for those professions. The MPhA will not begin to work on this task until the regulations for the December 2006 *Pharmaceutical Act* have been completed. As reported last year, the current regulation development process is being done with the knowledge of content that can be easily transitioned under the RHPA. The regulations coming under the RHPA for pharmacy practice will also require the approval of the members.

### **Pharm. D. Program**

Earlier this year, the University of Toronto and the University of Waterloo received approval from the government of Ontario of their separate applications for the entry-to-practice Doctor of Pharmacy (PharmD) program. University of Toronto's Leslie Dan Faculty of Pharmacy is currently in the second year of implementing the new entry-to-practice PharmD curriculum. The new program includes 44 weeks of clinical training throughout the 4 year professional program. They report the outcomes of the new entry-to-practice PharmD program in Ontario are aligned with the increased scope of practice for pharmacists and designed to better prepare graduates to participate as members of a healthcare team.

### **Manitoba Monitored Drugs Review Committee (MMDRC)**

Recent changes to the province's *Prescription Drugs Cost Assistance Act* will strengthen the monitoring of the prescribing and dispensing of narcotics and other controlled drugs through the MMDRC. The Terms of Reference for MMDRC have been drafted and the first meeting occurred on February 1<sup>st</sup>, 2013. Ms. Cali Orsulak, a pharmacist with the Winnipeg Regional Health Authority working in the renal program, and I have been appointed to the Committee. An important part of the work being done under this new legislation will be performed by a subcommittee. Safeway pharmacist Dr. Brent Booker has been appointed to the subcommittee and they will be meeting in the early part of 2013.

### **Electronic Transmission of Prescriptions**

Since 2009, the MPhA has been working with the College of Physicians and Surgeons of Manitoba to develop a simpler approach to the electronic transmission of prescriptions. As many pharmacists will know, some of the software programs in the physicians offices make it difficult to assess the validity of prescriptions coming into the pharmacy's fax machine as being compliant with the existing joint statement on Facsimile Prescriptions.

One of the delays in the document development was the initial thought of requiring all electronic transmission of prescriptions and facsimile prescriptions to have the Personal Health Information Number (PHIN) on the prescription to facilitate the information being included in the Drug Programs Information Network (DPIN). This led to Manitoba Health seeking clarification from the office of the Ombudsman to resolve and the resultant was the PHIN cannot be a requirement on all prescriptions. However, DPIN entry is required if a prescriber wishes to send a prescription to a pharmacy by electronic means or the through "fax".

### **International Prescription Service (IPS) Pharmacy**

As reported last year, the lawsuit filed against the MPhA by some current and former holders of IPS Pharmacy licenses remains outstanding at the time of writing this report. The lawsuit claims the MPhA had no authority to require an IPS component of a pharmacy licence and, if it can be shown the authority does exist, then the lawsuit alleges that MPhA has charged an unreasonable amount for the IPS component. MPhA legal counsel has made some progress in bringing this matter to an amicable close. Any further updates can be provided to the members at the Annual Meeting.

MPhA has been working with the National Association of Provincial Regulatory Authorities (NAPRA) and the (American) National Association of Boards of Pharmacy (NABP) to decrease the illegal activities of selling prescription drugs from Manitoba businesses that are not licensed pharmacies and to establish verification process for businesses that are licensed pharmacies. NAPRA has reviewed its role in the Verified Internet Pharmacy Practice Sites (VIPPS) and will be making an announcement in this regard, in collaboration with NABP.

The media reported the American Justice department's decision with respect to Andrew Strempler who was a registered pharmacist in Manitoba, but was removed from the register several years ago for professional misconduct and unskilled practice. He was arrested and pled guilty to mail fraud in connection with his role as an owner and President of Mediplan Health Consulting Inc. Mr. Strempler caused prescription drugs from foreign countries to be shipped to a facility that Strempler operated in the Bahamas. Prescription orders made through RxNorth were then filled at the Bahamas facility, with labels on the vials and drug cartons stating they had been filled by RxNorth in Canada. Mr. Strempler then used indirect routes involving multiple countries to ship packages with prescription drugs from the Bahamas to individuals in the United States. Shipments mailed from the Bahamas, containing packages addressed to individuals in the Southern District of Florida, included counterfeit prescription drugs. He was sentenced to four years in prison for his role in a scheme to defraud consumers purchasing pharmaceuticals online and ordered to pay a forfeiture of \$300,000 and a fine of \$25,000.

### **Manitoba Prescribing Practices Program (M3P)**

The government renewed the Service Purchase Agreement for MPhA to continue to administer Manitoba Prescribing Practices Program. The MPhA is filing quarterly financial statements for the funds received from Manitoba Health in support of the M3P program.

During 2012, 8,060 M3P prescriptions pads were distributed in response to 1,888 physicians', 11 dentists' and 17 veterinarians' requests. This is a 10.5% increase over 2011. The pads were ordered mostly through facsimile requests and secondarily through telephone and e-mail transmission. Also, 40 "emergency pads" were issued by the MPhA to prescribers who failed to reorder their forms in a timely manner. Further information can be seen in the MPhA financial statement in the annual report booklet.

### **Strategic Planning Session**

The Council had a Strategic Planning session in October 2012 and the document was posted in January of 2013.

#### **Vision:**

*Creating the Framework for Excellence in Pharmacy Practice*

#### **Mission:**

*To protect the health and well being of the public by ensuring and promoting safe, patient-centred and progressive pharmacy practice.*

The strategies for the MPhA success were identified by Council as:

1. Implementation of the December 2006 *Pharmaceutical Act*
2. Create and Implement a Communication Strategy
3. Pharmacists To Be Brought Under the *Regulated Health Professions Act (RHPA)*
4. Governance & Policy Reform
5. Improve Our Quality Assurance Program For Pharmacy Practices
6. Strengthen Our Relationship with Stakeholders
7. Create and Implement IT Strategy

### **Friday Five**

The *Friday Five* was implemented this past year and it is sent to the members every second Friday. It allows a timely update for the members on five matters of importance and is a supplement to the MPhA Newsletter. The *Friday Five* has proven to be a very useful tool to keep the members informed about the latest practice issues. In addition, MPhA has developed a more predictable schedule for the newsletter which will also enhance communication of information.

### **Tobacco sales in Pharmacies and Smoking Cessation**

The Manitoba government introduced legislation that would remove the sale of tobacco products from pharmacies. This is consistent with the 2002 Policy of MPhA Council, which was reaffirmed in 2009, that states:

*“The Association is of the opinion the sale of tobacco products is contrary to public health and should not be for sale in a pharmacy. In addition, the Association is also in support of any legislative action to prohibit tobacco sales from pharmacies in the province of Manitoba. Council also strongly recommends to government that the cost of smoking cessation programs and products be covered by Manitoba Health when provided by pharmacists.”*

MPhA was not consulted on the wording of this legislation and the legislation does leave open the ability of separate entrances for businesses that operate a pharmacy and wish to continue to sell tobacco products. The legislation will come into effect on May 31, 2013. A “Q&A” document is being planned by Minister Healthy Living, Seniors and Consumer Affairs in support of the legislation and to explain the implementation in pharmacies.

In addition, a proposal entitled “Pharmacist Initiated Smoking Cessation Program” was forwarded to the Minister of Health Living, Seniors and Consumer Affairs at the end of 2012. The proposal would not have been possible without the strong input and guidance from Dr. Brenna Shearer (MSP Executive Director), Dr. Shawn Bugden and Ms. Gayle Romanetz. The program will facilitate the role of the pharmacist to begin discussion with patients and customers regarding smoking cessation and heighten the possibilities for smoking cessation success. Many pharmacists have received additional knowledge and training through CPhA’s QUIT program. The Pharmacist Initiated Smoking Cessation Program would enhance access to those trained pharmacists, throughout the province. The proposal requesting partnership and funding was delivered to the Minister at the end of October. The Manitoba Tobacco Reduction Alliance (MANTRA) and Faculty of Pharmacy, University of Manitoba are also partners in this program.

### **Medical Use Marihuana**

The Honourable Leona Aglukkaq, Minister of Health announced that the Government of Canada is proposing significant changes to the way Canadians obtain marihuana for medical purposes. The proposed regulations would provide access to quality-controlled marihuana for medical purposes to those Canadians who need it, while streamlining the process for applicants and their healthcare providers. The proposed regulations would provide access to quality-controlled marihuana for medical purposes to those Canadians who need it, while streamlining the process for applicants and their healthcare providers. The

government's goal is to treat dried marihuana like other narcotics used for medical purposes by creating conditions for a new, commercial industry that would be responsible for its production and distribution.

A key element of the proposed improvements to the Marihuana Medical Access Program would allow physicians and nurse practitioners to issue a medical document for a patient to access and possess marihuana for medical purposes. A second important change would allow distribution, in addition to distribution directly from the producer, of dried marihuana by pharmacists. The distribution through pharmacies would require the provincial government and professional licensing authorities to permit this activity in their province. Another key change is the removal of the categories of symptoms and conditions, and there would no longer be a requirement for some individuals to obtain the support of a specialist in addition to that of their primary care physician in order to access marihuana for medical purposes.

Notwithstanding the overall concern for lack of clinical data regarding the therapeutic value of cannabis and dried marihuana, the MPhA provided clear limitations on whether pharmacies and pharmacists can be involved with the distribution of medical use marihuana in Manitoba. Further information about those limitations is available by contacting the MPhA Office.

### **Discontinue Schedule F to regulation to FDA**

There are a number of amendments to the *Food and Drugs Act* under the federal Bill C-38. It is NAPRA's understanding that these changes include giving the Minister of Health the power to establish a list that sets out prescription drugs or classes of drugs and which may be incorporated by reference into the regulations of the *Food and Drugs Act*. The name will be changed to "Prescription Drug List". Under this new process, the listing of prescriptions drugs will not be required to be transmitted for registration or published in the Canada Gazette. This change will bring efficiency to the drug review and scheduling process.

### **Technicians to transfer prescriptions**

The federal government has drafted changes to the federal regulations to enable pharmacy technicians to transfer prescriptions. Presently the regulations under the *Food and Drugs Act* restrict this activity to pharmacists. In order for the federal change to be implemented in Manitoba, changes to the regulations of the *Pharmaceutical Act* would be needed.

### **The Missing Person's Act**

The Criminal Justice Division, Manitoba Justice, is in the process of organizing the roll out of *The Missing Person's Act* and regulation in Manitoba. In addition to a range of other types of information, the Act enables police to collect personal health information if they believe it will help to locate a missing person. The Act fills a gap for police by permitting the collection of information when there is no evidence of criminal activity at the time a person is reported missing. In planning for implementation of the Act, they will be drafting an informational bulletin about the legislation.

### **Manitoba Institute for Patient Safety (MIPS)**

The MPhA is a premier/founding member of MIPS and supported the Registrar to participate on the initial Board, as appointed by the Minister of Health. After the initial appointment, certain Board members needed to be elected by the members. I was re-elected to the MIPS Board in 2012 and thank you for the support of Council to allow my name to stand for re-election. In addition to Board responsibilities, I was re-elected as Vice Chair of the Board and remain on the Executive Committee. The Minister of Health appointed Ms. Jan Currie as the new Chair of the MIPS Board, replacing Mr. Reg Toews whose term expired (and was not eligible for re-appointment).



As members will note from Deputy Registrar Susan Lessard-Friesen's Report, MPhA and MIPS maintain a strong working relationships for patient safety and safer health care systems in Manitoba. Further information about the great work of MIPS is available through their website at: [www.mbips.ca](http://www.mbips.ca).

### **Committee Work and Teaching at the Faculty of Pharmacy, University of Manitoba**

Over the many years the MPhA has enjoyed and benefited from a close partnership with the Faculty of Pharmacy.

MPhA staff regularly participates and contributes to the course content and teaching responsibilities for the pharmacy practice jurisprudence section of the Pharmacy Skills Laboratory, offered in second year of the undergraduate program, and in the fourth year course, Current Topics. The objective of Current Topics is to build awareness and understanding of contemporary issues related to the profession and practice of pharmacy.

Earlier this year, MPhA office also served as a site for the 7 week fourth year elective program.

### **Drug Dispense Target State Data Review and Validation Working Group (DTSDRV)**

DTSDRV is a working group under the Health Information Standards Committee of Manitoba (HISC-MB). This group has completed a significant amount of work developing draft standards and sent out a health information standards document for broad stakeholder feedback and evaluation. Assistant Registrar Kim McIntosh is on this committee on behalf of MPhA.

### **PrISM**

The MPhA's oversight and involvement with the Prescription Information Services of Manitoba Inc. ceased on December 31<sup>st</sup>, 2012. This program did some great work during its existence under the MPhA and could have gone on to become a very strong influence for better and safe health care in Manitoba. PrISM was the prototype for the Manitoba Health's IMPROVE Program. PrISM is not dead and will gain new life at the Faculty of Pharmacy, University of Manitoba. The innovators and creators of the program received the MPhA's Centennial Award in 2010.

### **Manitoba Pharmaceutical Association turns 135 years old**

On February 2<sup>nd</sup>, 1878, the provincial Act to incorporate "the Pharmaceutical Association of the Province of Manitoba" was passed that included the licensing of all chemists, druggists, dispensing chemists and apothecaries. The first annual convention of the Pharmaceutical Association of Manitoba was held on August 23<sup>rd</sup>, 1897, in the "Sons of England Hall" on Portage Avenue in Winnipeg. The proceedings were opened and chaired by President Charles Flexon.

### **The District Five – National Association of Boards of Pharmacy**

Manitoba is scheduled to host these meetings that will take place in Winnipeg, from August 8<sup>th</sup> – 10<sup>th</sup>, 2013. District Five includes the Boards and (educational) Colleges from Minnesota, North Dakota, South Dakota, Nebraska, Iowa and Saskatchewan. The Registrar and the Dean of the Faculty of Pharmacy will serve as hosts for the weekend events. The Inn at the Forks will serve as the host hotel and all meetings will take place at the Inn at the Forks.

These District meetings discuss and collaborate on pharmacy regulatory and educational issues. Manitoba hosts these meetings once every seven years.

### **Staff changes at the MPhA**

On August 7<sup>th</sup>, 2012, MPhA hired a new Communications and Quality Assurance Coordinator. Ms. Lita Hnatiuk is a graduate of Creative Communications Diploma Program at Red River College (RRC) and is currently completing a combined degree/diploma, between RRC and the University of Winnipeg, to

graduate in June 2013 with a B.A. in Communications. Our Communications Consultant, Glenn Hildebrand, helped with the interview and hiring process which led to this important addition to our staff.

MPhA also recently hired a new Administrative Secretary. Her first day was February 11<sup>th</sup>, 2013, and she brings to MPhA team a solid background and experience in one-on-one communication and administrative competencies.

Many pharmacists contacting the MPhA office would have already dealt with Ms. Ronda Eros, our Professional Practice Consultant. Ronda was hired as a term position in June of 2012 and we are fortunate to be able to extend the term to June 2013.

### **White Coat Ceremony**

On September 17<sup>th</sup>, 2012, I was asked to be a guest speaker at the White Coat Ceremony. This ceremony is hosted by the Dean of the Faculty of Pharmacy and welcomes the students into the Faculty. The student's passage into becoming a professional is formally recognized through the presentation and drafting of a white coat by one of the esteemed pharmacists.

### **Update on 200 Taché Avenue**

Although the MPhA took possession of the new Pharmacy House, located at 200 Taché Avenue in Winnipeg, in 2009 and the renovation on the main level was completed shortly after possession, the lower level has had only minor work done. The renovation of the lower level was started shortly after the February 4<sup>th</sup>, 2013, Council meeting and will be completed around the end of April. The funding for the renovation has been from funds restricted in the 2012 and 2013 budget surpluses and through private donations. Executive Assistant Kathy Wright is the lead on this project and she is working with Mr. Bachu Purohit, a good friend of the MPhA.

### **In closing,**

This Annual General Meeting will mark the completion of the first year of the new Council and Executive Officers. There has been a strong collegial and productive working relationship between Council and staff. President Kyle MacNair has continued the strong leadership and the task orientated work ethic that was set by President Bugden during his term. It has been a pleasure to work with President MacNair, the other Executive Officers and Council over this past year. In turn, their support, guidance and thoughtful deliberations have been very helpful for me in the performance of my duties as Registrar. The MPhA is getting back on track and continues to grow, improve and increase our presence provincially, nationally and internationally in matters of public protection, patient safety and enhanced pharmacy practice.

We have some new faces around the MPhA office. This is an exciting time to have new staff members bringing enhanced skills and new ideas to improve our performance. The MPhA office has a very nice combination of new staff and longstanding staff in the office.

Administrative Assistant Ms. Bev Robinson is a stalwart presence in working with the many International Pharmacy Graduates that have come to Manitoba to begin their practice in Canada. Bev is also our key person for ensuring the database is working properly and our bills are paid. Her competency and commitment to MPhA is something that has been proven over the many years we have worked together. She is a key person that I rely upon.

Still relatively new to to our office is Ms. Lita Hnatiuk, Communications and Quality Assurance Coordinator. Lita has been a great asset to MPhA and she has enhanced the quality of our communications and the overall appearance of the MPhA website.

At the time of writing this report, the newly hired Administrative Secretary has just started with MPhA. We are fortunate to have the knowledge and experience this new member will bring to our staff.

Deputy Registrar Susan Lessard-Friesen has taken the task of being the resource person to the Complaints Committee over the last couple of years. The work of this committee requires an attention to detail and Susan's presence has increased the quality of the work done by the committee and the decisions they make. In addition, she continues to be a leader in Manitoba on issues of patient safety and we are very proud to see that she is receiving the Patient Safety Award as a result of her work and leadership in this area. I once stated to the media that MPhA is "wired for public protection" and, that being the case, Deputy Registrar Susan Lessard-Friesen is our "electrician". Susan and I have worked together for many years and her counsel and collaboration is invaluable for me and the MPhA.

Assistant Registrar Kim McIntosh continues to be a leader in the province, and nationally, on matters of education, continuing education and professional development on issues of methadone, administration of drugs (by injection), technician education and training, assessment for prescribing, etc. In addition she has taken on additional tasks to apply her knowledge and expertise in the emerging areas of pharmacy practice. We are very fortunate to have Kim on our staff.

The Executive Assistant to the Registrar, Ms. Kathy Wright, is well into her second year with the MPhA. She will tell you there is a sharp learning curve when coming into the MPhA office and the many, many things we do, planned and unplanned, during the day. However, Kathy's abilities and talents have smoothed-out that curve and her contribution, since day one, has been exceptional. Kathy has been instrumental in getting our online database to function properly and the members will see continued improvement and access to information as a result of her work. She is also the office manager for MPhA and she has done a great job in bringing-on quality staff to improve the work we do. My work life has become more manageable since Kathy has joined MPhA, for which I am truly grateful.

Assistant Registrar Ross Forsyth remains on leave from the office.

As mentioned earlier, Ms. Ronda Eros has joined our staff in a term position as Professional Practice Consultant. Her day to day support for the pharmacists and others calling into the office, and for the office staff, is greatly appreciated by all who have benefited from her assistance and practice knowledge. Mr. Rem Weiss continues to do our field operations on a contract basis. His vast knowledge about pharmacy and business practices has also been extremely helpful to many pharmacists, owners and the public.

MPhA continues to very well served by its legal counsel, Mr. David Marr and Mr. Joseph Pollock. David and Joey are always available for needed support and expert opinions.

We are in an exciting time, but it has taken far too long for the regulations to be completed and passed for the proclamation of the December 2006 *Pharmaceutical Act*. However, we are ever so close to bringing the practice of pharmacy in Manitoba to a level that makes the best use of the knowledge and skills of pharmacist. The goals of the changes were to enhance patient access to trained health care providers, to remove the current underutilization of pharmacists and to enhance patient care. I will continue to be a part of this process and usher these important changes to completion. However, the time and energy it takes to write, re-write, consult, collaborate, participate, and commensurate on the regulations does not leave much "free" time for the issues of the day. I know there are many e-mails and calls that I have not returned in a timely manner, but it is not by my choice. My final note of appreciation, therefore, goes to the members for their support and patience in the conduct of my duties.

Respectfully submitted,  
Ronald F. Guse, Registrar

**University of Manitoba Faculty of Pharmacy  
Student Registrations in 2012**

Three-hundred one (301) applications were received to enter first-year pharmacy for the 2012 – 2013 sessions. The following students were accepted:

Maira Ahmed	Julie Hernandez	Katherine Moore
Bruce Audit	Jacy Howarth	Leah Pritchett
Kanwal Aulakh	Kevin Huang	Aaron Quach
Cara Berndt	Ji-Yeon (Rosa) Hur	Inderpaul Ruprai
Alexei Berdnikov	Mariam Jarkas	Karen Schellenberg
Andrew Blais	Soo Hyeon Kim	Kirill Schroth
Annika Botha	Tyson Kornelsen	Kyra Skrupski
Aaron Brick	Jessica Kort	Harris Sohail
Matthew Buchok	Vanessa Kowbel	Yaechan Son
Doris Cheung	Andrew Kraemer	Marlena (Marlee) Stewart
Amanda Church	Alby Kusno	Andrew (AJ) Stewart
Candace Derksen	Erika Lehmann	Kali Stocki
Alanna Doell	Melissa Lu	Joyce Ummandap
Jasmine Duthie	Lauren Luo	Alexis Wanner
Sophie Fiola	Riley MacCharles	Michael Wiebe
Felicia Foster	Nicholas Malzahn	Emily Wright
Holly Grabowecky	Camille Manansala	Ao Xiao
Jenna Hawkins	Felix Michoutchenko	
Megan Hay	Stephanie Monnin	

**Registration of Graduates from the  
University of Manitoba Faculty of Pharmacy in 2012**

<b>Name</b>	<b>Registration Date</b>	<b>Name</b>	<b>Registration Date</b>
AGPALZA, Alvin	July 9, 2012	JONES, Karli	December 31, 2012
BELL, Kaila	July 9, 2012	JURIC, Danijel	July 10, 2012
BROWN, Krista	July 13, 2012	KAWCHUK, Kaley	July 20, 2012
CHARLES, Anastasia	July 9, 2012	KENDALL, Samantha	December 20, 2012
CORTENS, Jessica	July 9, 2012	LAMONT, Jennifer	July 12, 2012
DELAVAU, Laura	December 20, 2012	LOVE, Melody	July 9, 2012
DUCHEMINSKY, Jordan	August 13, 2012	MADDISON, Arleigh	July 16, 2012
DRUMMOND, Jenny	August 21, 2012	MATWYCHUK, Megan	July 10, 2012
DWILOW, Michael	July 31, 2012	MOROZ, Stephanie	July 9, 2012
EINARSON, Blair	July 9, 2012	NGUYEN, David	December 20, 2012
ENS, Karin	July 30, 2012	NOEL, Harvey	July 9, 2012
FANG, Victor	July 9, 2012	PANKEWICH, Joel	July 9, 2012
FEHR, Michael	July 9, 2012	PANOS, George	December 21, 2012
GALATIUK, Chelsea	July 10, 2012	PAPINEAU, Rebecca	July 9, 2012
GORDON, Kayleigh	August 24, 2012	POZDIRCA, Olga	July 9, 2012
GRAHAM, Ashley	July 20, 2012	PROUT, Michael	July 9, 2012
HACAULT, Caitlin	August 7, 2012	RONDEAU, Christopher	July 9, 2012
HORNSTEIN, Benjamin	July 12, 2012	RUKHRA, Jasbir	July 9, 2012
HUSARIK, Christine	July 9, 2012	RUPRAI, Jasdeep	July 13, 2012
JANDAVS, Kristina	July 10, 2012	SAN MIGUEL, Sheryl-Rose	July 9, 2012
JASSAL, Mandeep	July 12, 2012	SANDERSON, Carly	July 9, 2012

SHAWARSKY, Mark July 18, 2012  
 SHOME, Devarshi July 9, 2012  
 SKAYMAN, Kyle July 10, 2012  
 SMITH, Shannon July 13, 2012

SOCHAN, Christopher July 13, 2012  
 WARNEZ, Stephanie August 9, 2012  
 WONG, Derek July 12, 2012

**Registration of Graduates from Schools or Colleges  
 other than the University of Manitoba**

<b>Name</b>	<b>Country / Province, Year</b>	<b>Registration Date</b>
ABD EL MALAK, Jakleen	Egypt, 1997	June 4, 2012
ABD EL MESSIH, Diana	Egypt, 2007	November 19, 2012
ABD EL SAYED, Magda	Egypt, 1983	July 17, 2012
ABDEL HADI ALBASSIOUNY, Ahmed	Egypt, 1995	March 9, 2012
ABOUHAMMRA, Adel Adly Helmy	Egypt, 2004	May 1, 2012
AGAMI, Zeina	United Kingdom, 2010	June 4, 2012
AL BADAWI, Abdel Hadi	Palestine, 1999	April 17, 2012
AL FATOUHI AL JUNDI, Ameen	United Arab Emirates, 2001	January 20, 2012
ALVEZA, Ma. Berta	Phillipines, 1988	June 4, 2012
ANIS, George	Egypt, 2007	November 19, 2012
ATWAL, Harbinder	United Kingdom, 1997	October 18, 2012
AWAD ALLAH, Shereen	Egypt, 2001	May 1, 2012
AYOUB, Noha	Egypt, 1997	July 18, 2012
BADGER, Cory	Saskatchewan, 2012	September 14, 2012
BAHAJAJ, Mais	Jordan, 2008	January 31, 2012
BASILY, Michael	Egypt, 2000	October 3, 2012
BEBAWY, Peter	Egypt, 2005	April 25, 2012
CHAWLA, Ravi	India, 2003	August 21, 2012
CYRIAC, Sheril	India, 1997	May 17, 2012
DAVE, Kavita	India, 2004	September 10, 2012
DOSS, Ghada	Egypt, 2007	December 17, 2012
DYCK, Robert	Saskatchewan, 1981	January 30, 2012
ELAFIFI, Ahmed	Egypt, 2000	December 17, 2012
ELSAIGH, Amru	United Kingdom, 2011	October 18, 2012
ELSAYED, Elsayed	Egypt, 2006	April 10, 2012
GAYED, Dina	Egypt, 2008	June 12, 2012
GEORGE, Maged	Egypt, 2003	August 31, 2012
GEORGE, Naju	India, 1994	May 10, 2012
GERGIS, Ragaa	Egypt, 1990	April 2, 2012
GHARBIA, May	Jordan, 2012	July 17, 2012
GIRGUES, Louis	Egypt, 1983	August 10, 2012
GOUDA, Emanowella	Egypt, 2009	January 30, 2012
GOURGY, Georgina	Egypt, 2003	April 2, 2012
GUIRGUIS, Threse	Egypt, 2007	February 15, 2012
HABIB, Rania	Egypt, 2008	September 10, 2012
HANNA, Ramez	Egypt, 2003	February 9, 2012
HEJAZI, Haleh	Australia, 2011	October 31, 2012
HIRMINA, Peter	Egypt, 2002	November 1, 2012
IBRAHIM, Nermine	Egypt, 2000	August 31, 2012
IBRAHIM, Noha	Egypt, 2001	May 1, 2012
JACOB, Peter	Egypt, 2010	May 1, 2012
JAFRI, Zahra	Pakistan, 1995	May 22, 2012
LAD, Kiran	Australia, 2011	December 17, 2012

LANH, Long	Saskatchewan, 2011	February 23, 2012
LAU, Abby	Saskatchewan, 2009	May 11, 2012
LEE, Kam-Lam	Alberta, 1985	May 11, 2012
LESKIV, Vira	Ukraine, 1987	March 21, 2012
LO, Aaron	USA, 2011	February 23, 2012
MAHMUD, Simani	Bangladesh, 1996	September 10, 2012
MANKARIOUS, Maged	Egypt, 2011	November 14, 2012
MASUD, Muhammad	Bangladesh, 2000	June 22, 2012
MEYER, Daniel	Saskatchewan, 2012	October 3, 2012
MIELKE-VASIC, Susanne	Ontario, 1980	January 12, 2012
MIKHAEL, Rafik	Egypt, 2003	July 11, 2012
MOHAMMED, Ahmed	Egypt, 2007	May 1, 2012
MOK, Kitty	Alberta, 2011	March 21, 2012
MOYNIHAN, Stephen	Australia, 2010	June 22, 2012
PATEL, Bhargavkumar	India, 2003	November 30, 2012
PATEL, Dushyantkumar	India, 2000	June 6, 2012
PATEL, Hemin	India, 2009	March 6, 2012
QAWASMI, Tahani	Jordan, 2001	July 10, 2012
QI, Cindy	Alberta, 2001	March 7, 2012
QOUSSOUS, Dima	Jordan, 1990	July 10, 2012
RAMOS, Razelle	Philippines, 2005	March 5, 2012
RIZK, Zizette	Egypt, 1984	June 12, 2012
RYAN, Mark	Saskatchewan, 2009	July 10, 2012
SAAD, Hany	Egypt, 2000	November 30, 2012
SALIB, Ramy	Egypt, 2001	October 12, 2012
SAWIRES, Mohsen	Egypt, 1996	April 10, 2012
SCHROEDER, Brittany	Saskatchewan, 2011	January 20, 2012
SHAH, Keyur	India, 2008	July 16, 2012
SHAH, Sujay	India, 2008	September 10, 2012
SHAHID, Dina	Egypt, 2001	September 10, 2012
SHAHAZARI, Parvin	Iran, 1990	November 1, 2012
SIDDIQUI, Abdul	India, 2003	March 6, 2012
STETSYK, Nataliya	Ukraine, 2003	October 18, 2012
SUBARA, Ljiljana	Czech Republic, 2010	January 12, 2012
TABAN, Katayoun	Iran, 2003	May 22, 2012
TANG, Chengfu	China, 2007	May 10, 2012
TAWADROUS, Amgad	Egypt, 2003	February 23, 2012
THOMAS, Betsy	India, 2006	April 25, 2012
TIWANA, Ricky	England, 2011	June 6, 2012
TODARY, Maria	Egypt, 2004	March 21, 2012
YEUNG, Yolanda	Nova Scotia, 2012	October 3, 2012
YOSSEF, Hany	Egypt, 1978	August 31, 2012

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**New Pharmacies Opened  
(January 1, 2012 to December 31, 2012)**

<b>Pharmacy Name</b>	<b>Location</b>	<b>Date Opened</b>
Prana Pharmacy	Winnipeg	February 16, 2012
South Point Pharmacy	Winnipeg	April 9, 2012
Osborne Village Pharmacy Ltd.	Winnipeg	April 16, 2012
The Medicine Shoppe Pharmacy #329	Brandon	April 16, 2012
East St. Paul Pharmacy	East St. Paul	June 8, 2012
Shoppers Drug Mart #2514	Winnipeg	June 12, 2012

The Medicine Shoppe Pharmacy #331	Winnipeg	July 3, 2012
Maples Pharmacy	Winnipeg	July 6, 2012
Express Scripts Canada Pharmacy	Winnipeg	July 17, 2012
Tache Pharmacy at Seven Oaks Hospital	Winnipeg	August 13, 2012
Sobeys Reenders Square Pharmacy	Winnipeg	August 27, 2012
Medi-Care Pharmacy – Maples	Winnipeg	September 18, 2012
North Point Pharmacy	Winnipeg	September 20, 2012
Winnipeg Beach Pharmacy	Winnipeg Beach	September 24, 2012
Grunthal Pharmacy	Grunthal	October 1, 2012
Health-Wellness Pharmacy	Winnipeg	October 25, 2012
Medocare	Winnipeg	November 2, 2012
CinDen Pharmacy #2	Winnipeg	November 26, 2012
Autumnwood Medical Pharmacy	Winnipeg	November 26, 2012
St. Malo Pharmacy Ltd.	St. Malo	December 31, 2012

**Pharmacies Closed  
(January 1, 2012 to December 31, 2012)**

<b>Pharmacy Name</b>	<b>Location</b>	<b>Date Closed</b>
Jan Pharmacy	Winnipeg	February 3, 2012
Canada US Pharmacy	Winnipeg	February 13, 2012
Rexall Pharma Plus #4978	Winnipeg	April 10, 2012
Zellers Pharmacy #290	Winnipeg	May 8, 2012
Zellers Pharmacy #134	Winnipeg	May 9, 2012
Zellers Pharmacy #348	Winnipeg	June 13, 2012
Zellers Pharmacy #489	Brandon	June 19, 2012
P.S.I. Pharmacy Services & CanAmerica Drugs	Winnipeg	July 1, 2012
Zellers Pharmacy #196	Winnipeg	July 2, 2012
Zellers Pharmacy #103	Winnipeg	July 9, 2012
MedSmart Pharmacy	Winnipeg	November 11, 2012
Drugstore Pharmacy #9063	Winnipeg	November 22, 2012
Steinbach Clinic Pharmacy	Steinbach	December 28, 2012

**Change of Ownership / Name Change / Location Change  
(January 1, 2012 to December 31, 2012)**

<b>PHARMACY NAME TO FROM</b>	GV Pharmacy Inc. Cairns Pharmacy Ltd.	January 1, 2012
<b>OWNERSHIP CHANGE TO FROM</b>	GV Pharmacy Inc. Cairns Pharmacy Ltd.	
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Riverton Pharmacy St. Wannas Pharmacies Ltd. Isaac Hanna	January 1, 2012
<b>PHARMACY NAME TO FROM</b>	Grace Hospital Pharmacy Grace General Hospital Pharmacy	January 1, 2012
<b>OWNERSHIP CHANGE TO FROM</b>	Winnipeg Regional Health Authority Grace General Hospital	
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Danial Pharmacy S & P Ventures Ltd. G and K. Sidhu Pharmacy Inc.	January 21, 2012

<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Pharmasave #451 PSC Holdings Ltd. Viking Pharmacy Ltd.	February 7, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Pharmasave Health Centre #470 PSC Holdings Ltd. Arctic Drugs (1994) Ltd.	February 7, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Pharmasave #471 PSC Holdings Ltd. Scathco (1994) Ltd.	February 7, 2012
<b>PHARMACY NAME TO FROM</b>	Swan Health Care Plus Pharmacy Pharmasave #457	March 7, 2012
<b>PHARMACY NAME TO FROM</b>	SPS Pharmacy & Providen Pharmacy Logistics Stream Pharmacy Solutions	March 9, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Shoppers Drug Mart #2422 Ahmed Samy Pharmacy Ltd. 5983135 Manitoba Ltd.	March 21, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	St. Boniface Pharmacy St. Boniface Pharmacy Ltd. Laurette Boktor, Youhanna Morcos, Mirana Morcos	April 26, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	NorthMart Pharmacy All Nation Pharmacy The North West Company LP 4698721 Manitoba Ltd.	May 14, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Shoppers Drug Mart #530 Guilbert Apothecary Ltd. 4536593 Manitoba Ltd.	May 20, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Shoppers Drug Mart #544 Glen Pauch Pharmacy Inc. Scott McGibney Drugs Ltd.	June 17, 2012
<b>PHARMACY NAME TO FROM LOCATION TO LOCATION FROM</b>	My Care Pharmacy Zellers Pharmacy #164 986 Portage Avenue, Winnipeg MB 1485 Portage Avenue, Winnipeg MB	June 29, 2012
<b>PHARMACY NAME LOCATION TO LOCATION FROM</b>	Elie Pharmacy 7 Main Street, Elie MB 1 Main Street, Elie MB	June 29, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Alentex Pharmacy Medisystem Pharmacy Manitoba Limited Paragon Nordic Pharmacy Ltd.	August 1, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Paragon Nordic Pharmacy Ltd. 8214484 Canada Inc. Paragon Nordic Pharmacy Ltd.	August 1, 2012



<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Teulon Pharmacy 8214476 Canada Inc. Duncan Pharmacy Ltd.	August 1, 2012
<b>PHARMACY NAME TO FROM LOCATION TO LOCATION FROM</b>	Rasha Pharmacy Zellers Pharmacy #473 15-584 Pembina Highway, Winnipeg MB 1120 Grant Avenue, Winnipeg MB	July 27, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	Brathwaite's Pharmacy F.W.B. Brathwaite Pharmacy & Brathwaite's Pharmacy Brathwaite's Pharmacy McCallum Holdings Ltd.	August 3, 2012
<b>PHARMACY NAME LOCATION TO LOCATION FROM</b>	Safety Drugs 101-355 Ellice Avenue, Winnipeg MB 307 Hargrave Street, Winnipeg MB	August 23, 2012
<b>PHARMACY NAME LOCATION TO LOCATION FROM</b>	Al-Shifa Pharmacy 867 Portage Avenue, Winnipeg MB 713 Portage Avenue, Winnipeg MB	September 1, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	South Sherbrook Pharmacy Namaka Pharmacies Inc. 5008026 Manitoba Ltd.	September 7, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	Whites' Drug Store Whites' Drug Store Ltd. 4289758 Manitoba Ltd. Whites' Drug Store Ltd.	October 1, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	St. Pierre Pharmacy Pharmacie St. Pierre Pharmacy 6519530 Manitoba Ltd. 62308 Manitoba Ltd.	October 1, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	Rexall #7405 Matcel Pharmacy Pharmx Rexall Drug Stores Ltd. 4434242 Manitoba Ltd.	October 27, 2012
<b>PHARMACY NAME TO FROM</b>	Nordic Pharmacy Paragon Nordic Pharmacy	November 1, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Altona Community Memorial Health Centre Pharmacy Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Beausejour District Hospital Pharmacy Interlake Eastern Regional Health Authority Beausejour District Hospital	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Boundary Trails Health Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012

<b>PHARMACY NAME FROM OWNERSHIP CHANGE TO FROM</b>	Brandon RHC Pharmacy Brandon RHA Pharmacy Prairie Mountain Health Brandon RHA	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Carman Memorial Hospital Pharmacy Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012
<b>PHARMACY NAME FROM OWNERSHIP CHANGE TO FROM</b>	Churchill Health Centre Pharmacy Churchill RHA Inc. Pharmacy Winnipeg Regional Health Authority Churchill RHA Inc.	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Dauphin Regional Health Centre Pharmacy Prairie Mountain Health Parkland Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Flin Flon General Hospital Pharmacy Northern Regional Health Authority Nor-Man Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Gillam Hospital Dispensary Northern Regional Health Authority Nor-Man Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Gimli Community Health Centre Pharmacy Interlake Eastern Regional Health Authority Interlake Regional Health Authority	November 16, 2012
<b>PHARMACY NAME FROM OWNERSHIP CHANGE TO FROM</b>	IERHA Hospitals Pharmacy IRHA Hospitals Pharmacy Interlake Eastern Regional Health Authority Interlake Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Morris General Hospital Pharmacy Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Neepawa Health Centre Pharmacy Prairie Mountain Health Neepawa Health Centre	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Notre Dame Hospital Pharmacy Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Pine Falls General Hospital Pharmacy Interlake Eastern Regional Health Authority Pine Falls General Hospital	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Portage District General Hospital Pharmacy Southern Regional Health Authority RHA Central Manitoba Inc.	November 16, 2012

<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Russell Health District Pharmacy Prairie Mountain Health Russell Health District	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Shoppers Drug Mart Bethesda Hospital Pharmacy Southern Regional Health Authority Bethesda Hospital Bethesda Place	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Stonewall & District Health Centre Pharmacy Interlake Eastern Regional Health Authority Interlake Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Swan Valley Health Centre Pharmacy Prairie Mountain Health Swan River Valley Hospital	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	The Pas Health Complex Pharmacy Northern Regional Health Authority Nor-Man Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Thompson General Hospital Pharmacy Northern Regional Health Authority Nor-Man Regional Health Authority	November 16, 2012
<b>PHARMACY NAME OWNERSHIP CHANGE TO FROM</b>	Shoppers Drug Mart #551 Pidwinski Pharmacy Ltd. 6008675 Manitoba Ltd.	December 2, 2012
<b>PHARMACY NAME TO FROM OWNERSHIP CHANGE TO FROM</b>	Ken's Pharmacy #7406 Ken's Pharmacy Altona Inc. Pharmx Rexall Drug Stores Ltd. Ken's Pharmacy Altona Inc.	December 3, 2012

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### **Licensing**

During the fiscal year ending on December 31, 2012, the following licenses and memberships were issued:

- 1,349 Patient Care Licenses
- 18 Non-Patient Care Licenses
- 174 Non-Practicing Licenses
- 8 Honorary Life Members
- 7 Honorary Members
- 31 Mailing Notice Members

Shop Licenses were issued to 381 Pharmacies:

- 334 Community (Non-IPS)
  - 7 Community (IPS)
  - + 40 Hospital
  - 381 Total Shop Licenses
-

## **Passages**

Since our last Annual Meeting, a number of our esteemed and valued Members have passed on, namely:

Jean Rose	June 25, 2012
Patricia Taylor	July 10, 2012
Charles Newbury	July 11, 2012
Stuart Douglas	October 11, 2012
Archie Orlikow	December 6, 2012
Melville Waddell	December 21, 2012
Sharon Moncek	February 6, 2013
Ronald Connors	February 21, 2013

**Deputy Registrar Report  
To the MPhA Annual General Meeting  
Saturday, April 6<sup>th</sup>, 2013**

**Quality Assurance/Continuous Quality Improvement Initiatives**

The Deputy Registrar oversees Quality Assurance (QA)/Continuous Quality Improvement (CQI) initiatives and activities of the MPhA.

**In MPhA Operations and Processes**

**MPhA Database and Information Management System**

Throughout 2012 the MPhA has continued to engage the services of OlaTech Corporation a local, web-based, software development company to design and implement a comprehensive and highly reliable information and database management system to meet the unique and specific needs of our members, the public and our complex communication, regulatory and licensing processes.

Accomplishments in 2012 with respect to transition to the new system include implementation of:

- a module to facilitate reporting on the registration and licensure for international pharmacy graduates as required by the Office of the Manitoba Fairness Commissioner (OMFC)
- a bi-weekly e-bulletin to members called *The MPhA Friday Five*
- an online registration system for pharmacy preceptors, students and interns
- an online professional development system for pharmacists to record participation in learning activities directly into their profile on the MPhA database
- a more streamlined online licence renewal system for pharmacies in which the pharmacy manager is also the owner of the pharmacy

We thank members for their feedback and comments as we continue to transition to the new information and database management system.

**The Fair Registration Practices in Regulated Professions Act and the Office of the Manitoba Fairness Commissioner**

It is the responsibility of The Office of the Manitoba Fairness Commissioner (OMFC) to ensure that all provincial regulatory authorities (PRAs) are in compliance with the *Fair Registration Practices in Regulated Professions Act (FRPRPA)*. To determine whether a regulator's assessment and registration practices are fair and in compliance with the FRPRPA, the OMFC:

- has developed reporting requirements for all PRAs to report data at certain points within their registration and licensing processes for international graduates and provide aggregate data on domestic graduate licensees on an annual basis
- is conducting a Registration Review with each of the 36 regulated professions in the province

For the purposes of the Registration Review, a single, broad fairness standard has been followed: *Dedicated and fair practices are applied for the assessment and registration of internationally educated applicants. Policies and procedures are documented, consistently followed and periodically reviewed to ensure their effectiveness.*

The MPhA's Registration Review began on April 25<sup>th</sup>, 2012. A sub-committee, including the Past President, Administrative Assistant, Registrar and Deputy Registrar, was formed to oversee and respond to the OMFC Registration Review Process. The sub-committee compiled information in response to OMFC questions for presentation at a June 1<sup>st</sup> Field Visit. Included in this information were responses prepared by the Pharmacy Examining Board of Canada (PEBC) and the National Association for Pharmacy Regulatory Authorities' (NAPRA's) Project Manager for the International Pharmacy Graduates' Gateway to Canada Project. The OMFC reviewed this information and on June 14<sup>th</sup> provided the MPhA with an assessment report including recommendations. It was then the responsibility of the MPhA to address the recommendations contained in this report by developing an Action Plan. An Action Plan approved by Council was prepared and submitted to the OMFC on June 28<sup>th</sup>. The OMFC's 2012 Registration Review was completed on July 12<sup>th</sup>. Council has been provided with the MPhA Final Registration Review Report which has been posted on the OMFC website ([www.manitobafairnesscommissioner.ca](http://www.manitobafairnesscommissioner.ca)).

In her Statement of Compliance, the Fairness Commissioner acknowledged,  
*"A number of the Association's assessment and registration practices are commendable. To mention some significant examples: the Association's Internship Manual provides IPGs comprehensive information and supports transparent assessments. Important work has been done ensuring proper training for preceptors. As well, the Association has participated at the national level in the development of NAPRA's IPG Gateway to Canada Project, which promises a progressive resource for IPGs."*

While the registration review process has been completed, continued work remains to address the recommendations as outlined in the MPhA's Action Plan. As one of the first steps in this on-going work, an in-person meeting was held at the MPhA on November 1<sup>st</sup> that included Mr. John Pugsley, Registrar of the Pharmacy Examining Board of Canada (PEBC), the MPhA sub-committee established for the OMFC Review and a representative from the OMFC. The purpose of this first meeting was to begin to discuss concerns raised by the OMFC regarding the value of the PEBC Evaluating Exam and the ability of applicants to appeal decisions related to the content of the PEBC Qualifying Exams. It is anticipated that meetings on these issues will continue throughout 2013.

### **National Association of Pharmacy Regulatory Authorities' (NAPRA's) IPG Gateway to Canada Project**

MPhA staff have been involved throughout 2012 in on-going discussions with the NAPRA team responsible for implementation of the International Pharmacy Graduate (IPG) Gateway to Canada Project. The IPG Gateway to Canada Project involves the development of a single portal or point of entry for IPGs seeking licensure in Canada. The Gateway is scheduled to be launched in the Spring of 2013. Recent meetings with the NAPRA team have involved establishing the data set for the Gateway Project to ensure that all required applicant information, documentation and examination results are accessible to the MPhA.

### **In Pharmacy Practice**

#### **MPhA QA/CQI Program**

At the direction of Council and in keeping with the goals and strategies of the MPhA, staff and the Professional Development (PD) Committee have been involved in a review and evaluation of competency and performance assessment tools being using in other jurisdictions to assist healthcare providers maintain competence and improve practice. The information gathered will be used to help guide and enhance performance assessment processes for pharmacists as part of the MPhA QA/CQI Program.

## **The Manitoba Institute for Patient Safety's *Learn to be Safe* Program An Interprofessional Simulation Learning Experience**

Learn to be Safe – A Simulation Learning Experience is a toolkit developed by the Manitoba Institute for Patient Safety (MIPS). The MPhA was represented on the working group that oversaw the development of this novel interprofessional education program. Using real life case scenarios based on the Canadian Patient Safety Institute's (CPSI) Safety Competencies and the Canadian Interprofessional Health Collaborative's competencies for collaborative care, healthcare students and practitioners in Manitoba are using role playing to learn safety lessons. Since its launch in June of 2010, the program has been used by various groups throughout the province including fourth year pharmacy students in their Current Topics course. An article has recently been published on CPSI's website ([www.patientsafetyinstitute.ca](http://www.patientsafetyinstitute.ca)) which highlights the MPhA's involvement with this program.

## **Competencies for Pharmacists Administering Injections**

In 2012, the provincial pharmacy regulatory authorities (PRAs) across Canada have come together to discuss and adopt national competencies for pharmacists administering injections. All the PRAs, including the MPhA, have expressed interest in pursuing national competencies. Presently the fourteen "Immunization Competencies for Health Professionals" developed by the Public Health Agency of Canada along with a 15<sup>th</sup> competency addressing administration of drugs that are not vaccinations, have been proposed. It is hoped that these national competencies would enable labour mobility and lead to nationally recognized Administration of Injections Programs and a national recertification process for pharmacists across this country.

## **National Pharmacy Technician Bridging Program**

NAPRA has received funding for a National Bridging Curriculum for pharmacy technicians and internationally trained pharmacists through Human Resources and Skills Development Canada (HRSDC). Throughout 2012, the MPhA has participated on the NAPRA National Committee on Regulated Pharmacy Technicians to develop this national bridging program for pharmacy technicians.



## **The Network for Interprofessional Continuing Professional Development for the Health Professions in Manitoba**

Over the past few years there has been mounting evidence in support of the contribution of collaborative patient-centered practice to improving patient health outcomes by facilitating access to healthcare, fostering the provision of quality care and quality improvement, enhancing satisfaction of patients and health care providers, and improving patient safety. Beginning in 2009 the MPhA PD Committee embarked on an innovative initiative to create a network of partners in the province to plan, develop, and deliver competency-based interprofessional continuing professional development (iCPD) programming designed specifically to meet the learning needs of health professionals. iCPD Manitoba is that network of partners representing each of the regulated health professions (undergraduate programs and regulators) in the province, Prescription Information Services of Manitoba, the Manitoba Institute of Patient Safety, the Health Insurance Reciprocal of Canada, and provincial organizations providing continuing professional development for health professionals.

At the end of 2011, the Core Partner Group of iCPD Manitoba was involved in the development of a proposal made to the Manitoba Opportunities Fund (MOF) offered through the Office of the Manitoba Fairness Commissioner (OMFC). This proposal was made by the MPhA, as the provincial regulatory authority in partnership with the Manitoba Institute for Patient Safety and iCPD Manitoba. The proposal requested financial support to develop an interprofessional education program based on the MIPS *Learn to be Safe* simulation learning experience and designed specifically for newly licensed international graduates in medicine, nursing and pharmacy to promote and build competence in providing collaborative patient-centered care and to improve patient safety.

The OMFC has expressed great interest in this project since its inception and had agreed to provide funding for this one-year project in two phases. The MPhA received funding in the amount of \$18,377.00 for Phase I of the project which began in early April of 2012. Phase I involved completion of a needs assessment process involving focus group sessions with international graduates in nursing, medicine and pharmacy at several locations within the province. A second layer of this needs assessment involved an environmental scan of regulators, employers and instructors of international graduates in nursing, medicine and pharmacy. Results from this needs assessment process were used to form the basis of a discussion document on the challenges that may exist for internationally trained health providers practising in rural areas of the province to engage in and maintain collaborative relationships with other health providers in Manitoba. This discussion document was to be used by the Advisory Group in Phase II of the project to inform program development. However, due to federal changes in the operation and funding of the provincial nominee program, funding provided through the MOF was dramatically cut and could no longer support Phase II of the project. The MPhA thanks the OMFC for their support provided to this project to date.

### **NAPRA's National Advisory Committee on Pharmacy Practice**

The mandate of the new National Advisory Committee on Pharmacy Practice (NACPP) is to ensure that the National Model Licensing program and its components as well as the *Mobility Agreement for Canadian Pharmacists* maintain their relevancy as pharmacy practice evolves, and to advise NAPRA on matters pertaining to pharmacy practice at the national level.

Responsibilities of the NACPP include:

- Monitoring the National Model Licensing Program components including the *Professional Competencies for Canadian Pharmacists at Entry to Practice* and the *Model Standards of Practice for Canadian Pharmacists*, to ensure they continue to meet the needs of NAPRA members in the protection of the public.
- Conducting reviews of NAPRA documents on a regular basis to ensure continuous quality assurance.
- Identifying areas in provincial/territorial licensing processes where development and/or standardization would be beneficial to NAPRA members.
- Occasionally researching and recommending to the Board a national regulatory position on emerging issues.
- Addressing matters regarding pharmacy practice which may be referred from the Board or the Council of Pharmacy Registrars of Canada from time to time.

Currently the NACPP is involved in reviewing and revising the competency documents for pharmacists and pharmacy technicians at entry-to-practice. A workshop was held on November 19<sup>th</sup> to 21<sup>st</sup> in Ottawa that included members of the NACPP as well as representatives from the PEBC, Association of Faculties of Pharmacy of Canada and pharmacy technician groups from Alberta, Ontario, British Columbia and Saskatchewan. At this workshop, participants developed a first draft of revised competency documents for both pharmacists and pharmacy technicians. The revisions attempt to standardize definitions and terminology used in the two documents, confirm existing competency statements and include new competency statements related to expanded scope of practice activities respectively.

### **In Pharmacies**

#### **MPhA QA/CQI Program:**

#### **Quality Assurance (QA) Self-Assessment and Onsite Inspection Process**

The goal of this segment of the MPhA QA/CQI Program is for each pharmacy to undertake a MPhA QA Self-Assessment on an annual basis and for an onsite inspection and practice review to be conducted at



the pharmacy at least once within a 5-year period. For the period January 1<sup>st</sup> to December 31<sup>st</sup>, 2012, a total of 40 routine inspections were conducted at community (35) and hospital pharmacies (5) within the province. An additional 86 pharmacy inspections were conducted during this time period in association with new pharmacy openings, pharmacy renovations and pharmacy relocations.

At December 31<sup>st</sup>, 2012, there were three hundred and seventy nine licensed pharmacies in Manitoba.

Manitoba Location	Hospital	Community (Includes IPS)	Total (Includes IPS)	IPS
Winnipeg	12	207	219	7
City or Town (population 10,000 to 50,000)*	7	34	41	-
Rural	21	98	119	2
Total	40	339	379	9

\*

\* Manitoba municipal populations of 10,000 to 50,000 include Thompson, The Pas, Portage la Prairie, Winkler/Morden and Brandon

During the period January 1, 2012, to December 31, 2012, there were seven pharmacy closings and eleven pharmacy openings.

Change	Winnipeg	City or Town (population 10,000 to 50,000)*	Rural Manitoba (population < 10,000)	Total
Pharmacies Closing	11	1	1	13
Pharmacies Opening	15	1	4	20

\* Manitoba municipal populations of 10,000 to 50,000 include Thompson, The Pas, Portage la Prairie, Winkler/Morden and Brandon

### **Through Complaints Resolution**

As part of the MPhA's commitment to enhance quality of care and patient safety in Manitoba pharmacies, Council has requested that the Complaints Committee communicate information on medication incidents through the regularly published *Practice Advisories for Patient Safety* column of the MPhA Newsletter. It is hoped that by communicating this information, pharmacists will be provided with an opportunity to reflect on the incident and their own practice to discover ways to improve.

Number of Complaints Filed Annually

2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
46	37	53	44	12	18	12	16	16	25	34

### **Issues and Trends Identified Through the Inspection Process and Complaints Resolution**

#### **Privacy and Confidentiality of Personal Health Information**

In 2012, the Complaints Committee brought forward to Council's attention an issue that has been the cause of several complaints before the committee in recent months. This issue relates to the lack of privacy and confidentiality experienced by several patients with respect to the use and exchange of personal health information (PHI) within the pharmacy. In some cases, the complaint has been filed by

the patient while in other cases, other customers of the pharmacy who have viewed or overheard the PHI of another patient have filed the complaint.

Specific examples of the lack of privacy and confidentiality in relation to the use and exchange of PHI within the pharmacy include:

- prescription information left in view of other patients/customers in the dispensary or on the dispensary counter
- prescription information and discussions with pharmacists involving medication/medical histories and patient counseling on medications overheard by other patients/customers in the pharmacy
- use of PHI by pharmacy managers and owners to solicit the transfer of patient prescriptions from one pharmacy to another

In response to identification of this issue, Council has developed a multifaceted strategy to explore and address the issue. As part of this strategy, articles have been published in the both the *MPhA Newsletter* and *MPhA Friday Five* to bring awareness to the problem. As well, a member survey is currently being developed by the Faculty of Pharmacy at the University of Manitoba, to engage the membership, explore the issue further and look for ways to improve privacy and confidentiality of PHI in pharmacies.

### **Licensed International Prescription Service (IPS) Pharmacies, Call Centres and Rogue Internet Drug Outlets**

Since the inception of the “internet pharmacy” industry over a decade ago, the MPhA has worked diligently to fulfill its mandate of public protection. Today, the MPhA is seen as a leader in this country and the US for our efforts in tackling the tough problems associated with this industry as we continue to work with Health Canada, law enforcement, NAPRA and the National Association of Boards of Pharmacy (NABP) to ensure patient safety.

In the early days, we saw licensed pharmacies providing prescription services to international patients predominantly in the US. At the height of this activity, there were 66 licensed pharmacies in Manitoba designated as IPS pharmacies. Today we find that the industry has changed dramatically. Currently only 9 IPS pharmacies remain in the province. At first glance it may seem that the situation is well-controlled as MPhA licensed IPS pharmacies operate in compliance with the regulations, standards of practice and guidelines. However, as we consider the threat to patient safety presented by call centres and rogue internet drug outlets sourcing less costly drug supplies globally from unknown, potentially unregulated and perhaps illicit drug manufacturers, we can begin to understand that the situation today is significantly more dangerous for patients who are unaware. Working within the limitations of our legislation and jurisdiction, the MPhA has attempted to shut down these call centres and rogue internet drug outlets claiming to be licensed by the MPhA, only to find the business re-opened under a different address outside of our jurisdiction. These efforts have significantly increased the workload of field office staff and we continue to look for more effective approaches to tackling this tough problem.

### **Communication and Member/Professional/Public Relations**

#### **Partners Seeking Solutions with Seniors**

Since 2001, Partners Seeking Solutions with Seniors (PSSS) has comprised a network of over 60 concerned stakeholders who have come together to promote awareness and increase knowledge concerning issues of substance misuse and abuse among older adults and to facilitate access to and the adoption of a range of evidence-based prevention and treatment options. Stakeholders in PSSS include seniors, senior-serving organizations, health care organizations and individual practitioners, addiction service providers, self-help groups, government and academia. Pharmacists and pharmacies comprise

nearly 10% of PSSS stakeholders. PSSS initiatives include a Peer Helping Program and programs developed to bring awareness to the problem.

The MPhA has been a partner in the PSSS network since 2003 and has been represented on the PSSS Board of Directors since 2009.

### **Household Hazardous Material and Prescribed Material Stewardship Regulation – The Manitoba Medications Return Program**

The *Household Hazardous Material and Prescribed Material Stewardship Regulation* was introduced in Manitoba in February of 2010. This regulation requires manufacturers of pharmaceuticals and natural health products, classified as household hazardous waste (HHW), to set up stewardship programs for the responsible disposal of unused or expired medications. The Post Consumer Pharmaceutical Stewardship Association (PCPSA), an association representing pharmaceutical manufacturers has set up and funds the *Manitoba Medications Return Program* for the public to return unused or expired medications through their community pharmacies free-of-charge. This program provides pharmacists and pharmacies with even greater assistance in helping the public, their clients, dispose of unused or expired medication in an environmentally-safe manner. MPhA staff has been involved in working with the Manitoba Society of Pharmacists' Public Relations Committee and PCPSA on development and implementation of a public awareness campaign on the MMRP which was one of the themes highlighted during the 2012 Pharmacy Awareness Week.

### **2012 MPhA Apprentice**

As has been the case for several years now, the MPhA had the pleasure of hiring a pharmacy student, Ms. Melissa Gobin, as the 2012 MPhA Apprentice during the summer months. Melissa's assistance over the summer proved to be invaluable and we thank her for willingness to jump in and help out with a variety of tasks. Some of the tasks Melissa was involved in during her time at the MPhA included providing general office support, cataloguing of artifacts and interviewing some of our senior pharmacists as we plan for the pharmacy museum, research related to pharmacy practice issues and member inquiries and providing assistance with professional development program events.

One of Melissa's most notable accomplishments this summer was her work in partnership with the Manitoba Institute for Patient Safety (MIPS), the Institute for Safe Medication Practices-Canada (ISMP) and the Canadian Patient Safety Institute (CPSI) on development of a presentation package for pharmacists and other healthcare professionals. The goal of this novel presentation package is to build awareness and empower patients to become actively involved in working with their healthcare team to improve medication safety. For more detailed information on this presentation package, please refer to the next section of this report.

The MPhA received a grant in the amount of \$4,500.00 through the Canada Summer Jobs Program to assist with reimbursement for the summer MPhA Apprentice position in 2012.

### **Manitoba Institute for Patient Safety (MIPS) Medication Safety Presentation Package**

Work continues in partnership with the Manitoba Institute for Patient Safety (MIPS), the Institute for Safe Medication Practices-Canada (ISMP) and the Canadian Patient Safety Institute (CPSI) on development of a presentation package for pharmacists and other healthcare professionals. The goal of this presentation package is to engage and empower patients to become actively involved in working with their healthcare team to improve medication safety. The presentation package incorporates resources and tools developed by MIPS such as the *It's Safe to Ask* Medication Card and *S.A.F.E. Toolkit* as well as other resources

developed by ISMP and CPSI. The presentation is designed to include a core content section with supplement sections focusing on areas of special consideration such as children, teens and home medication safety, natural health products, home chemotherapy and traveling with medications. Plans are for the presentation package to be launched at a public forum held in conjunction with CancerCare Manitoba in the evening of March 6, 2013. Over the next few months the MPhA will be involved in working with MIPS, ISMP and pharmacists from CancerCare Manitoba and the community with expertise in home chemotherapy to finalize the content and focus group test the presentation. Rather than simply providing patients with tips on safe medication use, this presentation package represents a fresh approach to actively engaging patients and healthcare professionals to work together to improve medication safety.

In closing, I would like to thank MPhA Council, the Registrar and my co-workers at the MPhA for their continued guidance and support throughout a very busy and productive 2012.

Respectfully submitted,  
Susan Lessard-Friesen  
Deputy Registrar



# The Manitoba Pharmaceutical Association

## Professional Development Committee

Report to the MPhA Annual Meeting

April 6, 2013

The Winnipeg Convention Centre, Winnipeg, MB

### Membership

Josiah Akindo	Teryl Moore
Manjit Bains	Olasumbo Ojo
Jenna Bolton	Amy Oliver
Shawn Bugden, Past Chair	Kristine Petrasko, Chair
Divna Calic	Farah Joy Rashid
Cenzina Caligiuri	Megan Scott, Pharmacy Student
Laura Delavau	Advit Shah
Fran Gira	Trevor Shewfelt
Kathy Hunter	Roger Tam
Susan Lessard-Friesen, Deputy Registrar	Pat Trozzo
Courtney Marion	Tobi Tse
Kim McIntosh, Assistant Registrar	Lyndsay Van De Vijsel, CSHP-MB Liaison
Todd Mereniuk	

The MPhA PD Committee is comprised of pharmacists from a wide variety of practice areas including community and hospital pharmacy practice, administration and academia. These pharmacists share a strong commitment to life long learning in pharmacy and unparalleled dedication to ensuring pharmacists in this province have access to quality professional development programming to assist in meeting individual learning needs and improve practice. We are pleased to have pharmacy students also sit on the Committee. A few long-time members resigned and we thank them for their many years of guidance and service to the PD Committee. We'd like to say a special thank you to Dr. Daniel Sitar who retired from the Committee this year after serving on the PD Committee for approximately sixteen years. His commitment has been commendable.

We are fortunate to have many continuing members as well as new graduate pharmacist members and pharmacy students, which results in a perspective that is innovative, informed and reflects leading edge pharmacy practice. We were pleased to have Kristine Petrasko chair the Committee again this year. She has been an active participant and enthusiastic contributor on the Committee for several years and is currently the Vice President of the MPhA Council. Our sincere thanks and appreciation are extended to Kristine and all members of the PD Committee for their time and commitment.

The PD Committee would like to recognize the excellent support provided by the MPhA staff. We wish to extend our thanks and appreciation to Lita Hnatiuk, Kathy Wright, Bev Robinson, and Pamela Gordon for their outstanding assistance. To Ronald Guse, Registrar, Susan Lessard-Friesen, Deputy Registrar, and Kim McIntosh, Assistant Registrar, we appreciate your continued support and guidance.

### The MPhA Professional Development Programs

The MPhA offered eight professional development programs in 2012 but perhaps the most anticipated program was the Administration of Injections Training Program for Manitoba Pharmacists. One hundred and five members of the Manitoba Pharmaceutical Association had the opportunity to participate in the

Administration of Injections Practical Skills Workshops and successfully completed the program in August and September. The evaluations of the workshop were overwhelmingly positive. As well, starting in December 2012, the Faculty of Pharmacy at the University of Manitoba incorporated the injections training program into the curriculum for third year pharmacy students.

The MPhA was pleased to collaborate with the Canadian Society of Hospital Pharmacists – Manitoba Branch, Faculty of Nursing, University of Manitoba, Faculty of Pharmacy, University of Manitoba, Manitoba Health, and the Manitoba Society of Pharmacists on the Administration of Injections Training Program for Manitoba Pharmacists. Many individuals were involved in the development of the program. The MPhA would like to acknowledge all those who helped with the development of the program and would like to send special thanks to Theresa Bowser from the Faculty of Nursing, and Casey Sayre, Chris Louizos and Lavern Vercaigne from the Faculty of Pharmacy, University of Manitoba, for their countless hours of hard work and dedication to the program. The MPhA would also like to thank and recognize the Faculty of Pharmacy for graciously covering many of the developmental and start-up costs for the injections program. The MPhA is extremely grateful for their contributions to the program.

The Administration of Injections Practical Skills Workshop received accreditation for 6.5 CEU from the Canadian Council on Continuing Education in Pharmacy (CCCEP). The entire certificate program was accredited by CCCEP for a total of 22.5 CEU. The Manitoba injections training program was also awarded stage 2 accreditation status meaning that when the program is taken in its entirety, it meets the requirements of a CCCEP Continuing Education Certificate Program. The program was determined to have ‘substantially met’ the adopted fifteen competencies established by the provincial regulatory authorities for immunization and injections as a requirement for pharmacist injection education.

In 2012, the Professional Development Committee provided eight programs comprising a total of 46.5 accredited professional development hours (equivalent to 46.5 CEU).

**The PD Committee gratefully acknowledges the sponsors listed below who have provided educational grants to support professional development programming for Manitoba pharmacists in 2012.**

February 8, 2012	Oral Anti-Cancer Agents: Bridging the Gap MPhA Accredited for 2.0 CEU Speakers: Olga Pozdirca, 4th year student, Faculty of Pharmacy, University of Manitoba and Pat Trozzo, B.Sc.(Chem), B.Sc.(Pharm), BCPS, FCSHP Sponsored by: MPhA Partnered with: CancerCare Manitoba
March 17, 2012	Rivaroxaban: Expanding Beyond Orthopedic Prophylaxis MPhA Accredited for 2.0 CEU Speaker: Dr. Peter Thomson, B.Sc.Pharm, Pharm.D. Sponsored by: Bayer HealthCare
April 2, 2012	More Than Just Doping – Substance Abuse in Sport: What Every Pharmacist Should Know MPhA Accredited for 2.0 CEU Speaker: Dr. Dean Kriellaars, Ph.D. CEP., Department of Physical Therapy, School of Medical Rehabilitation, University of Manitoba Sponsored by: MPhA

May 3, 2012	<p>Clinical Podiatry and Pharmacy  MPhA Accredited for 1.5 CEU  Speaker: Dr. Amar M. Gupta, Podiatrist, BSc. (Hons) Pod. Med., PgCert.  Theory Podiatric Surgery  Sponsored by: MPhA</p>
May 16, 2012	<p>EYE CARE - A Practical Approach to Dry Eye Syndrome and Artificial Tears &amp; Important Aspects of Contact Lens Care Solutions  MPhA Accredited for 2.0 CEU  Speaker: Dr. Mehdi Alai, Optometrist  Sponsored by: MPhA</p>
September 5, 2012 September 7, 2012	<p>The Administration of Injections Training Program for Manitoba Pharmacists Workshop is CCCEP accredited for 6.5 CEU, online program “Immunization Competencies Education Program” (ICEP) available through Advancing Practice CCCEP accredited for 14.5 CEU, and online Manitoba-specific Module available through Advancing Practice CCCEP accredited for 1.5 CEU.  Speakers at Workshop: Casey L. Sayre, Pharm.D., APhA Pharmacy-Based Immunization Delivery certified, Ph.D. Student, Pharmaceutical Sciences, Faculty of Pharmacy, University of Manitoba and Theresa Bowser, RN, BN, Instructor, Faculty of Nursing, University of Manitoba  Sponsored by: MPhA and the Faculty of Pharmacy, University of Manitoba  Partnered with: Faculty of Nursing, University of Manitoba</p>
November 17, 2012	<p>Principles for the Provision of Methadone By Manitoba Pharmacists Workshop  MPhA Accredited for 6.0 CEU (plus 1.5 CEU for required pre-reading of Methadone Guidelines and 5.0 CEU for watching CME DVD)  Speakers: Floyd Lee, B.Sc.Pharm, Broadway Pharmacy; Laurie Magee, RPN, Team Leader, Methadone Intervention and Needle Exchange Program, Addictions Foundation of Manitoba; Kim McIntosh, B.Sc.Pharm, Assistant Registrar, MPhA; and Nicole Nakatsu, B.A. Kines, B.Sc.Pharm, Practice Development Pharmacist, Winnipeg Regional Health Authority  Sponsored by: MPhA</p>
December 6, 2012	<p>What’s New in COPD?  MPhA Accredited for 2.0 CEU  Speakers: Kristine Petrasko, B.Sc.Pharm, CRE, Regional Pulmonary Program Educator (WRHA), Deer Lodge Centre and Dr. Jamie Falk, B.Sc.Pharm, Pharm.D., Clinical Pharmacist – Family Medicine/Primary Care, WRHA Clinical Assistant Professor – Faculties of Medicine and Pharmacy, University of Manitoba, Kildonan Medical Centre  Sponsored by: MPhA</p>

Once again in 2012, the MPhA has provided funding to support programs developed by the PD Committee to address specific learning objectives in areas including legislation, patient safety, quality assurance/continuous quality improvement and therapeutic areas that have been suggested by pharmacists on program evaluations.

Live, interactive videoconferencing has provided pharmacists in rural areas with many more professional development opportunities. Over the past year, the PD Committee has provided MPhA PD programs whenever possible via videoconference to 20 rural videoconference sites across the province including Ashern, Arborg, Brandon, Dauphin, Flin Flon, Gimli, Hodgson, Killarney, Portage la Prairie, Neepawa, Notre Dame de Lourdes, Norway House, Roblin, Russell, Steinbach, St. Pierre, Swan River, The Pas, Thompson and Morden/Winkler.

Videoconferencing and webcasting of PD programs has provided an enhanced learning experience for pharmacists practicing in rural and urban centers alike. A recording of most programs is posted on the sbrc.tv website and may be accessed by pharmacists at anytime. These advances have allowed pharmacists from across the province to make a connection, to share their experience and knowledge, and to gain a much broader perspective on pharmacy practice in a variety of communities.

### **Videoconference Site Coordinators**

Videoconferencing is an expensive technology for program delivery owing to the high degree of technical support necessary. One way in which costs may be reduced is to have volunteer videoconference site coordinators trained to operate equipment and serve as the contact person to coordinate activities at the far-end site. We were very fortunate to have the following pharmacists agree to serve as our videoconference site coordinators for 2012. To each of them, we extend our sincere thanks and appreciation for their time and effort, which has allowed us to provide educational programs through videoconferencing to pharmacists in rural Manitoba.

Kathy Adriaansen – Neepawa	Christine Klimuk - Swan River
Jay Boschman – Portage la Prairie/Brandon	Ken Marek – Portage la Prairie
Blaire Cairns - Grandview	Martin Michaels - Hodgson
Lise Durand – Notre Dame de Lourdes	Whitney Mitchell - Roblin
Victor Eyolfson - Arborg	Real Mulaire – St. Pierre
Kerry Fitzpatrick – Gillam	Spencer Reavie – Russell
Claire Gillis - Gimli	Derrick Sanderson - The Pas
Joey Gwozdz – Steinbach	Trevor Shewfelt - Dauphin
Brent Havelange – Russell	Jennifer Thackeray – Thompson
Chris Johnson – Killarney	Corey Thompson - Flin Flon
Russ Keeler - Ashern	Jeff Wooster – Morden/Winkler

### **The MPhA Professional Development Requirement and Learning Portfolio System**

To support continuing competence and practice improvement, pharmacists in this province, like most of their colleagues across this country, in the U.S., the U.K. and other jurisdictions around the globe, have adopted the concept of continuing professional development (CPD). The CPD model is best described as a cyclical process that promotes self-assessment, development of a plan for learning, participation in planned learning activities, documentation of learning and reflection on learning outcomes.

Originally introduced in April 2002, a major revision of the MPhA Learning Portfolio System took place during 2004. Owing to the significant input from pharmacists during the revision process, the revised system represents a truly collaborative effort while maintaining the integrity of the CPD model. The professional development requirements of the revised system may be summarized as follows:



1. Pharmacists must maintain a learning portfolio and document their learning activities on the existing Professional Development Log (PDL) sheets of the MPhA Learning Portfolio or alternate suitable form. (From 2013 onward, the online PD Log is the only method pharmacists may use to submit their learning activities.)
2. Pharmacists are required to participate in a minimum of 25 hours of learning activities between November 1<sup>st</sup> and October 31<sup>st</sup> each year of which a minimum of 15 hours (equivalent to 15 CEUs) must be accredited learning activities. The balance of 10 hours of learning activities may include non-accredited or accredited learning activities.
3. All pharmacists who participate in a minimum of 50 hours of learning activities between November 1<sup>st</sup> and October 31<sup>st</sup> of each year, of which a minimum of 30 hours (equivalent to 30 CEUs) are accredited learning activities, will receive a MPhA Certificate of Life Long Learning in Pharmacy.
4. *Although major learning projects are still a desirable part of the learning portfolio, they are considered optional.*
5. At licence renewal, all pharmacists are required to update their online PD Log with their learning activities.
6. Following the licence renewal period, a 20% random selection of practicing pharmacists is made and pharmacists selected are required to submit the CEU Certificates and/or other documents in support of their participation in the accredited learning activities listed on their PDLs. In the revised system, all practicing pharmacists are entered into the selection pool each year and therefore, pharmacists may be selected in consecutive years. This annual review is conducted by MPhA staff.

The PD Committee continues to rely on feedback from pharmacists on ways in which the learning portfolio system may be improved and adapted to fit today's busy pharmacy practice, while continuing to support maintenance of competence and improvement of practice. Over the course of 2012, the Committee has continued to consider and discuss additional objective assessment tools that pharmacists may use to assist in providing more meaningful self-assessments and identification of individual learning needs. The self-assessment tool of the MPhA Learning Portfolio represents only one model. Currently, models incorporating knowledge assessments and peer and practice reviews are being used by pharmacists in other provinces. There has been renewed interest among the provincial regulatory authorities for pharmacy to work more collaboratively on the development of performance assessment tools and continuous quality improvement processes to assist pharmacists. The PD Committee continues to examine these and other performance assessment tools to determine their acceptability and effectiveness for pharmacists in Manitoba.

### **2012 Learning Portfolio Summary and Professional Development Log**

At licence renewal, pharmacists are required to submit their Professional Development Log documenting they have met the professional development requirement for the period of November 1<sup>st</sup> to October 31<sup>st</sup> and listing the accredited and non-accredited learning activities they have participated in during this period.

2011 was the first year that pharmacists were required to submit their PD Log electronically.

In 2012, MPhA implemented the online PD Log, and the majority of pharmacists reported their learning activities via the new process. The 2011-2012 PD year is the last year members could submit their PD Log by any other format.

Starting in the 2012-2013 PD year, members must log on to the MPhA website and enter their learning activities in the online PD log. This will be the only way members may submit their professional development from now on. The online PD Log can be accessed by logging into the mpha.ca website as members do to renew their pharmacist licence.

This year, 61% of practicing members utilized the online PD Log. The other 39 % sent in their PD activities on the previous PD Log in Word or Excel. Feedback from members has been very positive and we thank those that took the time to provide comments and suggestions. The MPhA continues to improve the online PD Log whenever possible.

### **Pharmacists Awarded Certificates of Achievement**

The following pharmacists have been awarded a MPhA Certificate of Life Long Learning in Pharmacy in recognition of their outstanding participation in professional development activities during the 2012 PD Year. Recognition is provided each year to pharmacists who have participated in a minimum of 50 hours of professional development activities of which a minimum of 30 hours involves participation in accredited learning activities.

The MPhA congratulates the following pharmacists on their achievement:

Murvin Abas	Shawn Bugden	Victor Fang
Karam Abd El Nour	Dayna Catrysse	Daryl Fediuk
Ahmed Abdel Hadi	William Cechvala	Michael Fehr
Albassiouny	Miro Cerqueti	Rowena Fernando
Alvin Agpalza	Ryan Chan	Linda Foley
Elizabeth Arauz-Tijerino	Anastasia Charles	Grace Frankel
Robert Ariano	Lengim Chen Ingram	Christin Franken
Marian Attia	Kelly Cheung	Julie Funk
Joanna Ayotte	Arnold Chew	Chelsea Galatiuk
Cory Badger	Harjot Chohan	Medhat Gelo
Manjit Bains	Julie Choy	Jennifer Gibson
Linda Barnes	Janice Coates	M. Claire Gillis
Eugene Baron	Jessica Cortens	Kathryn Gorber
Kristin Bartram	Lilanie Cruz	Kayleigh Gordon
Melvin Baxter	Marcin Cychowski	Ashley Graham
Allison Bell	Laura Delavau	Ruby Grymonpre
Kaila Bell	Pritpal Dhanjal	Kimi Guilbert
B. Marie Berry	Melissa Dowd	Saminder Gujral
Angel Bhathal	Terry DUBYTS	Caitlin Hacault
Anwar Bhojani	Jordan Ducheminsky	Kevin Hamilton
Mona Boctor	Ingrid Dueck	Rebecca Hamilton
Brent Booker	Erica Dueck	Ashraf Hanna
Jacinte Bosc	Drena Dunford	Kari Hanneson
Marnie Boyle	Michael Dwilow	Krysten Harder
Jasvir Brar	Blair Einarson	Jennifer Hayward
Corinne Brockman	Ronald Elder	Lorraine Hilderman
Krista Brown	Karin Ens	Peter Hirmina
Alysha Buck	Crystal Evans	Tara Hoop

Benjamin (Noah) Hornstein  
Curtis Hughes  
Shannon Hunter  
Christine Husarik  
David Huston  
Bassem Ibrahim  
Randa Istafanous  
Melissa Jacobs  
Kristina Jandavs  
Mandeep Jassal  
Russel Jose  
Danijel Juric  
Komal Kaler  
Kaley Kawchuk  
Samantha Kendall  
Kerry Kent  
Cheryl Kessler  
Rhonda Kitchen  
Nancy Kleiman  
Meghann Klowak  
Elmer Kuber  
Linda Kuber  
Britt Kural  
Florence Kwok  
Tannis Kyrzyk  
Carey Lai  
Jennifer Lamont  
Jana Lane  
Alan Lawless  
Gwen Lawson  
Danny Lee  
Lindsay Lemanski Filz  
Christine Leong  
Wilfird Lessak  
Susan Lessard-Friesen  
Katherine Lewis  
Thomas Ling  
Jugnu Lodha  
Abe Loewen  
Beverly Loewen  
Christopher Louizos  
Melody Love  
Melvin Love  
Dora Ma  
Janice Macalino  
Arleigh Maddison  
Janice Magnusson  
Mary Makarios  
Amarjeet Makkar  
Tara Maltman-Just  
Kristopher Marcinowski  
Julie Mark  
Amy Marriott

Megan Matwychuk  
Nicole Mauthe  
Margo McCrae  
Scott McDougall  
Kimberly McIntosh  
Suzanne McKay  
David McKay  
Meghan McKechnie  
Anokhi Mehta-Sachdev  
Daniel Meyer  
Martha Mikulak  
Stephanie Moroz  
Arlene Nabong  
Nicole Nakatsu  
Michael Namaka  
Geoffrey Namaka  
Sheila Ng  
David Nguyen  
Thanh Nguyen  
Harvey Noel  
Jamie Nolan  
Debra Nolan  
Olga Norrie  
Amanda Nunn  
Olasumbo Ojo  
Robin Oliver  
Amy Oliver  
Joel Pankewich  
George Panos  
Rebecca Papineau  
Virendrakumar Patel  
Kristine Petrasko  
Siegfried Pfahl  
Olga Pozdirca  
Mathilda Prinsloo  
Michael Prout  
Sonal Bachu Purohit  
Noureen Qamar  
Erin Ramalho  
Colin Repchinsky  
Derek Risbey  
Janine Rivest  
Gayle Romanetz  
Christopher Rondeau  
Brenda Rosenthal  
Jasbir Rukhra  
Jasdeep Ruprai  
Ligy Russel  
Venkateswara Sajja  
Sheryl-Rose San Miguel  
Carly Sanderson  
Tatiana Sandhurst  
Dinah Santos

Charles Scerbo  
Chris Schellenberg  
Gerri Scott  
Shawna Secord  
Advit Shah  
Mark Shawarsky  
Adel Shenoda  
Trevor Shewfelt  
Devarshi Shome  
Marilyn Sidhu  
Robert L.J. Sitarz  
Kyle Skayman  
Glenda Sloane  
Timothy Smith  
Shannon Smith  
Suzanne Soble  
Christopher Sochan  
Alice Studney  
Roger Tam  
Sylvia Tang  
Jennifer Thackeray  
Meera Thadani  
Tinu Thomas  
Ivana Thordarson  
Michael Tomiak  
Chris Tsang  
Dana Turcotte  
Sheryl Tymchyshyn  
Julia Walker  
Jennifer Wallace  
Ashley Walus  
Stephanie Warnez  
Michael Watts  
Zhanni Weber  
Jennifer Wiebe  
Sonya Wight  
Brooke Wilson  
Elizabeth Wilson  
Gwen Wischniewski  
Donna Woloschuk  
Derek Wong  
Dennis Wong  
Horst Wuerfel  
Cindy Yap-Wong  
Yolanda Yeung  
Amany Younan  
Amanda Young  
Amir Youssef  
Irene Yu  
Osama Zaki  
Sheryl Zelenitsky

## **Resources**

Over this past year, the PD Committee has continued to work to provide pharmacists with access to a broad range of educational programs and resources both in-house and via the MPhA PD webpage. Resources available in the MPhA Library include accredited continuing education (CE) programs, videos/DVDs on a variety of therapeutic areas, speaking packages for pharmacists, select pharmacy practice journals and references and access to a computer workstation to search online resources. A listing of the complete collection of resources housed in the MPhA Library may be found on the PD webpages of the MPhA website at [www.mpha.ca](http://www.mpha.ca).

The PD pages have been updated to include many new listings of accredited CE programs and resources. In addition, many of the MPhA PD programs have either been recorded onto DVD or posted on the sbrctv website and are available to pharmacists free-of-charge. Titles and topics of these recorded programs are listed on the PD pages of the website.



**The Canadian Council on Continuing Education in Pharmacy ([www.cccep.ca](http://www.cccep.ca))**

*“Advancing pharmacy practice through quality continuing pharmacy education.”*

The Canadian Council on Continuing Education in Pharmacy (CCCEP) is the national coordinating and accrediting body for continuing pharmacy education in Canada. Its members are appointed by the provincial pharmacy regulatory organizations. CCCEP members also include representatives from several national pharmacy organizations such as the Canadian Association of Pharmacy Technicians (CAPT), the Association of Faculties of Pharmacy of Canada (AFPC), the Canadian Society of Hospital Pharmacists (CSHP) and the Canadian Pharmacists Association (CPhA). Assistant Registrar, Kim McIntosh, is the Manitoba Delegate on the CCCEP Board.

## **CCCEP Strategic Plan 2008-2011 Update**

### **Standards for CCCEP Accreditation**

The new *Standards for CCCEP Accreditation* were completed. The creation of the new standards included extensive stakeholder consultations during the development phase and again prior to implementation of the standards. The new standards are based on eleven principles: quality learning experience, outcomes-focused learning, evidence-based, fair and objective, relevant to practice, transfer to practice, learner feedback, learner success, ongoing improvement, sponsorship and educational grants, bias and influence free, transparent, and informed learner choice. A set of new guidelines were developed to provide guidance for program providers on the application of the new standards to program submissions. Training sessions were held across Canada on the new standards and guidelines prior to taking effect on July 1, 2012.

### **Program Provider Policy and Sponsorship Guidelines**

The new guidelines on sponsorship were put on hold in order to review the results of the initial stakeholder consultations. It was determined that CCCEP needed to develop clearer guidelines on the roles and responsibilities of program providers. The result was the development of a program provider policy that was approved-in-principle by the Board of Directors following a consultation with providers on the draft policy. The program provider policy and new sponsorship guidelines will be completed in 2012-2013.

## **Stage 2 Review of Immunization and Injection Programs**

CCCEP introduced a new accreditation process for immunization and injection certificate programs. The Stage 2 accreditation review is undertaken following the initial review for CCCEP accreditation. The Stage 2 phase reviews the extent to which the program meets the 15 competencies established by the provincial regulatory authorities for immunization and injections. Programs reviewed as Stage 2 are recognized by the regulatory authority as meeting the requisite requirements for immunization and injections training. Pharmacists who attend a program accredited at the Stage 2 Certificate Level are eligible to be authorized to provide immunizations and injections within the regulations established by the provincial regulatory authority. The Stage 2 accreditation is currently recognized by the Ontario College of Pharmacists.

## **CCCEP Strategic Plan 2012-2015**

The Board of Directors completed the development of the *2012-2015 Strategic Plan: Building Excellence*. The plan is driven by three goals that will be achieved through the accomplishment of eight objectives:

- Program Excellence - to promote excellence in continuing professional development.
  - Objective 1: Excellence in program accreditation
  - Objective 2: Implement New Standards
- Practice Excellence - to support innovation and excellence in pharmacy practice.
  - Objective 3: Access to CPD Opportunities
  - Objective 4: Encourage Programs that Meet Learning Needs
  - Objective 5: Support inter-professional practice
  - Objective 6: Facilitate Practice Enhancement
- Organizational Excellence - to ensure CCCEP operates consistent with its mission and meets expectations of stakeholders.
  - Objective 7: Professional Image
  - Objective 8: Effective and Efficient Operations

Respectfully submitted,  
Kristine Petrasko, Chair  
Kim McIntosh, Assistant Registrar

## **Standards of Practice Committee Annual Report 2012-2013**

The role of the Standards of Practice Committee is to review, revise and/or develop minimum standards to guide pharmacists in their pharmacy practice. The intent is to ensure that a satisfactory minimum practice level is maintained throughout Manitoba. Methods of implementation include Practice Directions, Guidelines, and Policies through recommendations to Council.

The following is a report on the issues brought before the committee and their current status.

### **Practice Directions**

As in the past, the Committee focused primarily on the development of the Practice Directions that support the 2006 Pharmaceutical Act. In 2011, the work started with the development of a template that continues to be used for all Practice Directions. After approval of the template by Council, the Committee proceeded with the development of Practice Directions with initial focus on those that needed to be developed in their entirety (versus those developed based on existing standards of practice).

Over the course of the year, the Committee participated in the development of 12 of the 28 identified Practice Directions with a thirteenth reviewed in January 2013. The Practice Direction writers have played a significant role in the Committee's ability to complete its review process in a timely fashion. As the Practice Directions are developed by the contract writers, vetted by the Standards of Practice Committee and reviewed by Council, they have been broadly circulated for consultation with the members and stakeholder organizations as per MPhA Policy on Practice Directions. The Practice Directions that were required to be completed de novo have now largely been created. The development process for the outstanding Practice Directions should be facilitated by the fact that the content will largely be based on existing practice standards.

### **Committee Members**

The position of Standards of Practice Committee Chair was shared between Councillor Kurt Schroeder and Pat Trozzo.

A special thank you is extended to members of the Standards of Practice Committee for their ongoing and tireless dedication. The upcoming year should be both challenging and rewarding as the Committee continues its work to complete the Practice Directions.

MPhA members interested in participating in this process or other areas of standards development are encouraged to submit their name by contacting the Association office. Teleconference meeting attendance is available for members located in rural/remote areas. All participation is welcome.

### **Respectfully submitted**

**Pat Trozzo, Committee Chair**

#### ***2012-2013 Standards of Practice Members***

Shouren Bose	Amy Oliver
Sheri Dyck	Gayle Romanetz
Nicholas Honcharik	Kurt Schroeder
Sheldon Kokorudz	Marilyn Sidhu
Jane Lamont	Alison Supina
Jugnu Lodha	Pasquale Trozzo
Tara Maltman-Just	Kathy Wright, MPhA Staff
Scott McFeetors	
Todd Mereniuk	
Nicole Nakatsu	
Geoffrey Namaka	

**National Association of Pharmacy Regulatory Authorities Report to Annual General Meeting**  
**Annual General Meeting**  
**April 6<sup>th</sup>, 2013**

The National Association of Pharmacy Regulatory Authorities (NAPRA) Board of Directors met in April 2012 and November 2012. A teleconference was also held on February 20<sup>th</sup>, 2013, for review and discussion of pertinent items that could not be delayed until the April 13<sup>th</sup> and 14<sup>th</sup>, 2013, face to face meeting of the Board.

During 2012 meetings, the following key items were discussed:

**1. Injection Competencies for Canadian Pharmacists**

The Board approved the “Supplemental Competencies on Injection for Canadian Pharmacists”. With the competencies approved, organizations such as Canadian Council on Continuing Education in Pharmacy (CCCEP) will use them as the basis for approving injection training courses, which will allow provincial pharmacy regulatory authorities to be assured that CCCEP accredited courses meet the nationally accepted requirements.

As well, with pharmacists trained to meet these nationally accepted competencies, labour mobility will be facilitated with the goal of allowing pharmacists who were trained in one jurisdiction to move to another jurisdiction without having to re-train to provide injections.

The issue of recertification requirements for injection authority is currently being reviewed by the Council of Pharmacy Registrars of Canada and the NAPRA Board.

**2. Pharmacy Practice Management Systems: Requirements to Support NAPRA Standards of Practice**

The Board approved in principle the updated report “Pharmacy Practice Management Systems: Requirement to Support NAPRA Standards of Practice” which was distributed on two occasions for stakeholder review and feedback. Information management systems used by pharmacy professionals (referred in this document as pharmacy practice management systems or PPMS) must support the delivery of patient care including the dispensing of drugs in accordance with Canadian regulations and standards. They must also do much more such as the ability to record, display, store, and exchange patient specific information in a manner that optimizes workflow within pharmacy teams. PPMS must also facilitate both information exchange with external systems, such as electronic health records, and processes such as electronic prescribing, while simultaneously preserving the confidentiality and security of all personal health information processed or transmitted. This document will set the minimum requirements of systems used by pharmacists and pharmacy technicians in their delivery of quality care and services.

**3. Verified Internet Pharmacy Practice Sites (VIPPS) Program in Canada**

The Board approved a small group to begin a dialogue with the National Association of Boards of Pharmacy (NABP) regarding the possibility of developing a process for VIPPS accreditation in Canada. In the absence of interest at a national level, NABP will work directly with individual PRAs to establish an accreditation process.

**4. Health Canada’s Changes to the Marihuana Medical Access Program**

NAPRA Board approved the following policy items in regards to the anticipated amendments to the *Medical Marihuana Medical Access Regulations (MMAR)*:

- From a public protection perspective, NAPRA supports the elimination of production of marihuana in personal homes and having the only legal source of dried marihuana be commercial producers licensed by Health Canada

- NAPRA is of the view that only products that have gone through the drug approval process in Canada and have received either a Drug Identification Number (DIN), a Natural Product Number (NPN), a Drug Identification Number – Homeopathic Medicine (DIN-HM) Exemption Number (EN) should be sold by pharmacists. (Dry marihuana has not received any of these numbers from Health Canada.)
- NAPRA understands the dilemma faced by the Government of Canada regarding the Courts’ decision to grant patients the right to have access to marihuana for medical purposes; however, it cannot endorse its use without the substance having undergone the same review process as for any other approved drugs on the Canadian market.

#### **5. International Pharmacy Graduate (IPG) Gateway Project**

NAPRA continues with the project which is schedule to be piloted in early 2013. The Gateway Program will be the national centre of first contact for IPGs wanting to be registered and licensed in a province in Canada. Through the national Agreement on Internal Trade, the common requirements for registration have been established in each of the provinces (with slight variation in Quebec). The Gateway Project will become the information source for international inquires and the application of these requirements. This process will remove some of the duplication of work occurring in the provinces, develop a centre of knowledge and expertise and become the central Canadian contact for IPGs.

#### **6. NAPRA Member’s Fee Increases for 2013**

NAPRA Board approved a 2.5% increase in the 2013 members’ fees. Consensus was not achieved as Manitoba was not in favor, but stood aside. Manitoba argued that, with the capitation rate capped for large provinces, applying the 2.5% increase on the capped fee will lead to more rapid increase in disproportional fee per pharmacist going to the smaller provinces.

#### **7. National Bridging Program for Regulated Pharmacy Technicians**

The Board approved the proposed governance structure for the “National Bridging Program for Newly Regulated Pharmacy Technicians”. The project structure consists of a Steering Committee, an Advisory Committee and a Project Management Team. In order for the project to move quickly, the members of the currently convened “International Pharmacy Graduates’ Gateway to Canada” project Steering Committee will be assigned as the Steering Committee for this project as well. The existing National Committee for Regulated Pharmacy Technicians will act as the Advisory Committee. A Project Manager, hired by NAPRA for the duration of the project, and NAPRA’s Executive Director will make up the Project Management Team.

#### **8. Blueprint for Pharmacy Revised Priorities and Steering Committee**

The Blueprint for Pharmacy (BP) National Coordinating Office (NCO) revised their priorities, as recommended by the Blueprint for Pharmacy Steering Committee (as an expert panel uniquely positioned to make recommendations for pan-Canadian pharmacy practice change), as follows:

1. Define the future of pharmacy education in Canada
2. Enhance experiential education in hospitals and primary care
3. Track and forecast pharmacy human resources requirements
4. Undertake a national public relations campaign about the value of the pharmacist
5. Ensure uptake of the Canadian Pharmacy Services Framework business model
6. Facilitate integration of regulated pharmacy technicians
7. Commission a third party ‘value of pharmacy’ economic assessment
8. Accelerate legislative and regulatory changes to expand scope of practice for pharmacists and pharmacy technicians
9. Support the rollout of pan-Canadian clinical decision support tools
10. Facilitate integration of e-prescribing and drug information systems into community and hospital pharmacies

The Board reaffirm NAPRA’s commitment to the Blueprint vision and reaffirm that one NAPRA representative, the Executive Director, will be on the Steering Committee in an advisory role.



#### **9. National Drug Schedules (NDS) Program Review**

At the April 2012 meeting the Board unanimously supported the concept that NAPRA should have a role in the administration of the NDS. All but one member further agreed that NAPRA should continue to “own” the NDS program. Going forward, there was further discussion about the elements of the NDS program that require change in order to achieve long-term stability. The Board approved the following activities (Alberta did not support, but stood aside):

- 1) Pursue the preparation of a strategy for communication discussions with federal/provincial/territorial governments and, when appropriate, prepare a business plan.
- 2) Provide the National Ad-Hoc Drug Scheduling Review Committee with the mandate to take appropriate measures to prepare for the discussions with the federal/provincial/territorial governments within the allocated budget (\$30,000). This will involve a targeted effort to obtain “buy in” from stakeholders such as consumers groups. The Committee will report to the Board on the status of the activities at each Board meeting. Furthermore, the Committee will bring to the Board’s attention the result of the discussions with the federal/provincial/territorial governments for direction and decision ideally by fall 2013. The Committee will also bring to the Board’s attention any budgetary needs that may exceed \$30,000.
- 3) Revise the Committee’s terms of reference and established the committee to be Bob Macguire (BC), Bob Nakagawa (BC), Manon Lambert (QC), Kyle MacNair (MB) and Tracey Wiersema (ONT)
- 4) Ask the Committee to also keep the Executive Committee and CPRC informed and involved in the review as a sounding board.

#### **11. Public Health Agency of Canada (PHAC)–Travel Health Capacity Building Working Group.**

Since the last report the PHAC working group approved eight draft recommendations targeted at supporting provinces and territories in increasing capacity in the delivery of travel health services. The recommendations were sent out to key stakeholders, including NAPRA, and frontline practitioners for review.

The travel health field is concerned with the health of travellers; the prevention of infectious diseases and environmental risk; as well as the personal safety; responsible travel; and early identification and appropriate disposition of post-travel illness. For the purpose of these recommendations, the practice of travel health includes the individualized assessment and management of identified travel-related health risks using competent risk communication skills, understanding of the global epidemiology of diseases and conditions affecting international travellers, fundamentals of immunization and vaccinology, and basic pharmacology including important drug-drug and drug-disease interactions.

NAPRA provided a written response with overall support of the recommendations, but questioned the intent of certain recommendations therein.

Respectfully Submitted:  
Kyle MacNair, NAPRA Board Representative  
Ronald Guse, Registrar

**Board of Examiners Report**  
**- Neal Davies, Chair**

The Board of Examiners met several times over the past year. The majority of the agenda involves the review and approval of applicants for registration and licensure in Manitoba. Manitoba has had an increase in the number of international pharmacy graduates (IPGs) wanting to enter pharmacy practice in Canada through Manitoba. During 2012, there were seventy-eight international pharmacy graduates have registered with MPhA, compared to forty-seven in the year 2011.

The increased influx of IPGs can be, mostly, attributed to registration and licensing changes that recently occurred in the province of Ontario. This increase in applicants has put an additional strain on the MPhA registration and licensing processes and on the pharmacists of Manitoba to be preceptors during the required internship. The commitment of the Board and MPhA is to process the applications in a timely, but thorough manner. The Board recognizes and appreciates the professional responsibility and commitment of the many Manitoba pharmacists who have offered their time, knowledge and experience to be preceptors.

During the course of the year, the Board made the following determinations:

The Board established a requirement that letters of standing cannot be dated back more than 24 months. For most applicants this is not problematic. Should the applicant be unable to get a letter of standing from their foreign jurisdiction of first licensure, they can provide a notarized affidavit confirming: 1) the inability to provide a current letter of standing and the reason(s); 2) the applicant has not worked as a pharmacist since leaving the country of last licensure; and, 3) there is no history or outstanding matters of discipline or complaint investigation as a pharmacist.

The Board temporarily suspended the use of the TOEFL-iBT fluency assessment until further notice.

I would like to thank the members of the Board of Examiners for their time, commitment and thoroughness in performing their duties. The Board recognizes the hard work of Administrative Assistant Ms. Bev Robinson and Registrar Ronald Guse and is most appreciative of their support throughout the year.

Respectfully submitted on behalf of the Board,  
Neal Davies, Chair

**Board Members:**

Gayle Romanetz

Kyle MacNair

Jarrid McKittrick (effective June 2012)

Kim Sharman

Barbara Sproll (until end of June, 2012)

**Awards & Nominating Committee Report  
To M.Ph.A. Council  
February 4, 2013**

The Awards & Nominating Committee makes the following recommendations for awards for 2013:

Pfizer Bowl of Hygeia – Lothar Dueck  
2012 Pharmacist of the Year – Grant Lawson  
Bonnie Schultz Memorial Award for Practice Excellence – Jamie Falk  
Patient Safety Award – Susan Lessard-Friesen  
Centennial Award – No recipient at this time.  
Honorary Member – No recipient at this time  
Honorary Life Membership – Lois Cantin

The awards for the Bowl of Hygeia, the Pharmacist of the Year, the Bonnie Schultz Memorial Award for Practice Excellence, and the Patient Safety Award will be presented at the Annual Awards Banquet on Saturday, April 6, 2013, at the Delta Hotel. The Honorary Life Membership Award will be presented at the Annual Awards Luncheon on Sunday, April 7, 2013, at the Winnipeg Convention Centre.

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**The following members will receive 50 Year Gold Pins and Certificates:**

Ted Bartman  
Garry McManus  
Jud Scales  
Allan Shinfield  
Orville Wagner

**The following members will receive their 25 Year Silver Pins and Certificates:**

Murvin Abas	Warren Hicks	Sam Nocita
Angela Adamson	Vincent Huynh	Petr Prochazka
Caterina Bueti	Barbara Khoe	Marty Sexton
Darwin Cheasley	Jeannie Lee	Grant Sklar
Carla Dribnenky	Donald Scott	Tamara Strecker
Cecile Dumesnil	McFeetors	Edmund Yu
Ronald Eros	Sandra Negrey	

The 25 year and the 50 year award recipients will be honored at the Annual Awards Luncheon scheduled for Sunday, April 7, 2013, at the Winnipeg Convention Centre.

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**The following recipients received the following M.Ph.A. Awards in 2012:**

MPhA Gold Medal: Kaley Kawchuk  
MPhA Silver Medal: Arleigh Maddison  
MPhA Silver Medal in 3<sup>rd</sup> Year Pharmacy: Devin Ross  
MPhA President's Prize: Christopher Sochan

Stewart G. Wilcox Award: Heidi Marschall

Dr. J. R. Murray Scholarship: Caitlin Hacault

William G. Eamer / MPhA – Post-Graduate Scholarship: Casey Sayre

William G. Eamer / MPhA – Undergraduate Awards:

3<sup>rd</sup> year: Jordan Nash

2<sup>nd</sup> year : Ashley Ewasiuk

1<sup>st</sup> year: Ryan Persaud

Entering: Jenna Hawkins

The student awards have been presented to the recipients by the University of Manitoba Faculty of Pharmacy; however, the MPhA is pleased to include the awards in the program for the Awards Luncheon.

Respectfully submitted,  
Shawn Bugden, Committee Chair

**Awards & Nominating Committee Members:**

Shawn Bugden, Chair

Neal Davies, Dean

Diane Ferguson

Leann McCannel

Scott McFeetors

Jarrid McKitrick

Grant Lawson

Penny Shefrin

**Governance Committee Report to Annual General Meeting  
April 6th, 2013  
Winnipeg, Manitoba**

The Governance Committee has been established as a standing committee of the Manitoba Pharmaceutical Association (MPhA). The committee reviews and monitors the effectiveness of the governance of structures of MPhA.

Our efforts in the past year were focused in the following areas:

**Council Calendar**

The committee, with the support of Council, has been working toward the establishment of a calendar for Council. This calendar would establish important events and meeting dates and assist in overall planning for the organization. The calendar seeks to entrench key activities (budget planning, strategic planning, elections etc.) into the annual planning for Council. The preliminary version has been established but it will continue to be developed into a valuable tool for this Council and all that follow.

**MPhA Organizational Structure Chart**

The committee has reviewed and recommended an enhanced organization chart that captures the relationships between Registrar, MPhA staff, the Ministry of Health, Council and MPhA committees with lines of accountability and linkages to the current *Pharmaceutical Act*.

**Preceptor Approval**

The committee is exploring ways to enhance the efficiency of preceptor approval. It is hoped that a revised process can be established shortly that will ensure the timely approval of preceptors for internships.

**Board Evaluation and Meeting Assessment**

Board evaluation was conducted in 2010 by Council. The Governance Committee considers periodic board/council evaluation to be good practice. The committee has recommended that board evaluation occur regularly. A review of the previous Council evaluation suggested that a simplified process might produce better results. The committee also recommends regular meeting evaluation to facilitate appropriate feedback to enhance the efficiency and effectiveness of Council meetings.

**Election Process Review**

The committee continued its review of election processes. This review will continue into 2013/14 as Council moves toward the changes necessary under the *Regulated Health Professions Act*.

**Council Website**

The committee has recommended that a website (or a portion of the current website) be created to house Council resources and meeting materials. This password protected website would allow archiving of materials and ensure that all council has ready access to all necessary resources.

The committee wishes to recognize and thank Ronald Guse for his support to our committee.

On behalf of the committee and submitted respectfully,  
Shawn Bugden, chair

Committee members  
Gary Cavanagh  
Bill Regehr

Kim Sharman  
Kyle MacNair

**Finance & Risk Management Committee Report**  
**To the 2013 Annual General Meeting of the Manitoba Pharmaceutical Association**

The initial business of the Committee was to conclude outstanding business from the previous year regarding the Terms of Reference, which included some of the duties and responsibilities of the discontinued Compensation and Performance Committee. The recommended Terms of Reference were approved by Council on October 1, 2012.

The Committee also held a meeting on September 24, 2012, to review the recommendations of the Executive Committee with respect to the 2013 Budget. The recommendations of this meeting were presented by the Chair of the Committee during the 2013 budget discussions at the October 2012 Council meeting.

The Committee's focus has been for a broader risk management of the MPhA through general discussion and preliminary assessment of the MPhA's current policies and procedures including but not limited to insurance and liability coverage, the Health and Safety Policy, and the Investment Policy. It should be noted that the Committee has concluded the review of the Investment Policy and made recommendations to Council which were subsequently approved. It is the goal of the Committee to finish reviewing all of the aforementioned policies in 2013 and explore the possibility of developing a "Risk Management Plan" and "Risk Management Policy" as discussed at the December 10, 2012, Council Meeting.

In addition to these activities, the Committee also receives and reviews the MPhA's budget updates with projections and variances as well as the latest investment report at each quarterly meeting.

As Chair, I thank the Committee volunteers for their effort, insight, and recommendations, and thank the Registrar for his support and participation.

Respectfully submitted on behalf of the committee  
Geoff Namaka, Executive Treasurer

**Committee Members:**

Carol Davis	William Eamer	Ronald Guse
Rob Jaska	Kim Sharman	Penny Shefrin

**Report of the Representative to the Pharmacy Examining Board of Canada**  
For the Annual General Meeting of the Manitoba Pharmaceutical Association  
April 6<sup>th</sup>, 2013  
Winnipeg, Manitoba

Established in 1963 by a Special Act of Parliament, the Pharmacy Examining Board of Canada (PEBC) is the national certification body for the pharmacy profession in Canada. As a non-profit organization, PEBC has been assessing the qualifications and competence of candidates for licensing by pharmacy provincial regulatory authorities for 50 years. Plans are underway to acknowledge this milestone in the next year.

It has been an honour to serve as the representative of the Manitoba Pharmaceutical Association on the Board of PEBC again this past year. In 2012/13, I completed my second year in expanded role as a member of the Executive Committee for PEBC. I also now serve as the Chair of the Finance Committee. Dr. Lavern Vercaigne of the Faculty of Pharmacy, University of Manitoba continued to serve as a representative of the Association of Faculties of Pharmacy of Canada (AFPC) to PEBC and Chair of the Committee on Examinations in 2012/13. On March 2<sup>nd</sup>, 2013, Dr. Vercaigne officially completed two terms of service to PEBC as an AFPC appointee. During this time he has made substantial and valuable contributions to PEBC. These efforts were very much appreciated and his shoes will be difficult to fill.

Individual PEBC Board members continue to provide pharmacy students with a live orientation to the PEBC process. As the MPhA appointee I provided this orientation presentation to the 4<sup>th</sup> year pharmacy students at the University of Manitoba on January 3<sup>rd</sup>, 2013.

The Pharmacy Technician Evaluating & Qualifying Technician Exams are an important component of the work of PEBC. Approximately 2000 Pharmacy Technicians, having successfully completed the Qualifying Exams, have been registered with PEBC. Discussions between PEBC and the provincial regulatory authorities regarding the 2015 deadline for Pharmacy Technician Evaluating Exam occurred in 2012. PEBC has agreed in principle with the idea of extending the deadline. The final decision on deadline revision is expected shortly but a deadline of 2018 with individual provinces given the ability to impose shorter deadlines if required seems likely. The move at NAPRA to create a national bridging program that provides educational structure to the training between the Evaluating Exam and the Qualifying Exam is welcome. Once this national bridging program is in place, Manitoba may be in a position to bring the Qualifying Exam for technicians to our province for the first time.

PEBC has created a Computer-Based Testing Steering Committee to investigate the feasibility of the use of computer-based testing by PEBC. The initial reports of this committee are expected in 2013. The preliminary assessment suggests that although initial development costs are high computerized testing at PEBC may offer some advantages not possible with the current pencil and paper multiple choice format.

The development and delivery of a national examination for pharmacist and pharmacy technicians is a major undertaking. PEBC is nationally and internationally recognised for excellence in the job they do. This excellence is achieved through the active partnership between PEBC and the profession. On behalf of PEBC, I want to thank the dedicated pharmacists and pharmacy technicians that participate in the PEBC process. Your efforts make this excellence possible.

Thank you for the honour of serving as the PEBC Board member for Manitoba so that I might also contribute to the pursuit of excellence in the evaluation process for our profession.

PEBC – “Providing Excellence in Certification for the Pharmacy Profession”

Respectfully submitted,  
Shawn Bugden  
Board Member for Manitoba  
Executive Committee Member, The Pharmacy Examining Board of Canada

## Faculty of Pharmacy Report 2012-2013

### 1. Dean's Message

It is my pleasure to provide the Dean's message for the 2012 annual report to MPhA. As I contemplate the past year it brings to mind our many accomplishments and special achievements. The Faculty of Pharmacy went through a comprehensive accreditation process in 2011-2012 that was successful. In cooperation with the Faculty of Nursing, MPhA and various stakeholders we have begun to implement new immunization training to students and fellow pharmacists. Together, we have won numerous awards, enjoyed various social activities including the first Mr. Pharmacy event for prostate cancer, built new clinical practitioner offices in on the second floor of the Apotex centre, built a state of the art video conferencing facility, the William Eamer Conference room; built an additional student lounge the College of Pharmacists of Manitoba Gold Medal Lounge, inaugurated new commemorative sticks, added information monitors on the first floor, as well as installed a filtered water system and recreational games in the student lounge.

I have also enjoyed continuing to foster relationships with alumni and friends of the Faculty. I have visited over 50% of Manitoba's pharmacies on my tour of the profession so far ([http://umanitoba.ca/faculties/pharmacy/pharm\\_locations.html](http://umanitoba.ca/faculties/pharmacy/pharm_locations.html)), I have also established a Distinguished Alumni Award and hosted 10, 20, 30, 40, 50 and 60 year class reunions with our alumni. The Grand Rounds Alumni Seminar Series from 1962-2012 was also very successful. We welcome your individual and collective feedback and have developed a recent grad survey to rate our graduates and to ensure students are meeting our educational outcomes post-graduation and your pharmacy needs. We have also developed a new Faculty strategic plan that will dovetail with Manitoba's new *Pharmaceutical Act* and regulations once they are implemented. We were pleased to welcome Dr. Ted Lakowski from the University of British Columbia as a full-time assistant professor to the Faculty in July 2012. We also welcome Dr. Jamie Falk from the WRHA as a full-time assistant professor to the Faculty in March 2013 and Dr. Stephen Setter from the USA as a full-time associate professor to the Faculty in April 2013. These pharmacists will build on a strong foundation of excellent teachers and productive researchers and clinicians within the Faculty of Pharmacy as we move forward towards our own Pharm.D. program. Faculty members have published extensively in top peer reviewed journals and represented the Faculty of Pharmacy and University of Manitoba very well internationally. Local research has influenced pharmaceutical development, clinical practice and health policy internationally.

In the fall, 55 new pharmacy students were welcomed to the Faculty. Our current student body is now not only heavily involved with their academic pursuits, they also find the time to volunteer and participate in community activities such as the CIBC Run for the Cure, Career Trek, Health Career Quest Summer Camp, the WISH Clinic and Biomedical Youth Camp. Part of the mission of the Faculty of Pharmacy is to train the best pharmacists possible, and then deliver that product into the hands of those who need it most. I am proud to say that I have seen first-hand our students being metamorphosed and contributing to the pharmaceutical care in our health-care system. I have also witnessed their valued recognition by our citizens. It stands as affirmative proof that the training we foster at the University of Manitoba Faculty of Pharmacy is being deployed in a purposeful way for the citizens of Manitoba who require it.

Our Manitoba winterized resilience and our determination to trail-blaze at the Faculty of Pharmacy is what can ultimately make the difference in patients' lives. I am proud of what we have accomplished over the past year, and I look forward to the year ahead. There is still much to be accomplished in recalibrating our programs and the profession of pharmacy in the 21<sup>st</sup> century. I would like to thank everyone for their professional commitment which facilitates the success of the Faculty of Pharmacy.



## 2. Outstanding Teacher Awards 2011-2012

1<sup>st</sup> year Ms. Nancy Kleiman  
2<sup>nd</sup> Year Dr. Leann Chee  
3<sup>rd</sup> Year Dr. Sheryl Zelenitsky  
4<sup>th</sup> Year Dr. Lavern Vercaigne

## 3. Research

In research success investigators in the Faculty of Pharmacy have received a total funding of \$1,143,779 in 2011-2012.

Some of the major grants are:

Dr. Hope Anderson was awarded \$357,491 from the CIHR operating grant for her project entitled *Protective signaling by PPARs in cardiac hypertrophy*.

Dr. Shawn Bugden was awarded \$6,525 from the University of Manitoba URGP grant for his project entitled *Cross sectional analysis of opioid use in Manitoba*.

Dr. Neal Davies was awarded \$50,000 from Washington State University for his project entitled *In vitro and in vivo characterization of Phycox in dogs with naturally occurring osteoarthritis*.

Dr. Ruby Grymonpre was awarded \$25,000 from the International Research Network in IPE&P and CIHR; and \$24,487 for her project entitled *Interprofessional collaboration: Impact on health human resources out-comes*.

Dr. Brian Hasinoff was awarded \$629,276 for a CIHR operating grant for his project entitled *Targeting topoisomerase II*.

Dr. Emmanuel Ho was awarded \$28,000 from the University of Manitoba Thorlakson fund for his project entitled *Novel nanomedicine for the active targeting of lymphoid tissue*.

Dr. Sheryl Zelenitsky was awarded \$20,500 contract fund for her project entitled *LINEZOLID: Comparing MRSA monotherapies to combinations under standard and septic shock infection site conditions in an in vitro infection model*

In graduate studies seven students were awarded a graduate degrees in Pharmacy including:

Dr. Daryl Fediuk, Dr. Parvez Vora, Dr. Michelle Nelson, and Dr. Hong Tao Li who were all awarded the Doctor of Philosophy in Pharmacy while three students were awarded a Master of Science in Pharmacy including Bolanle Akinwumi, Andy Chen and Sarah Li

## 4. Undergraduate Admissions

In September 2012, we welcomed 55 new students into the Faculty of Pharmacy. This maintained a similar enrollment as the previous year to help meet the demand for pharmacists. The statistics for the 55 students in the 2012 B.Sc.(Pharm.) admission cohort compared with the 2011 cohort are provided below. We plan to admit up to 60 students in 2013/14.

Applications for admission to the B.Sc. (Pharm) stayed relatively static from last year, with the number slightly decreasing from 307 to 301. The five-year average is 280. Applications remain strong despite new admissions amendments to the AGPA and the use of repeated courses. The average entry level GPA

for the regular pool was 4.06 consistent with the five-year average of 4.07. In 2012, 89% of successful applicants were graduates from high schools in Manitoba, with 27% from rural locations. 62% of the current admission cohort is female and 38% of the current admission cohort is male. There are currently 13 aboriginal students (6.1%) enrolled in the Faculty of Pharmacy (self-declared). In the first year class of 2012/13 out of 55 students:

- . 19 had 1 year of university level studies completed
- . 13 had 2 years of university level studies completed
- . 10 had 3 years of university level studies completed
- . 13 had completed one or more degrees prior to be admitted to the Faculty

The age of a Faculty of Pharmacy student ranges from 18-30 and the average age is 20.8.

### **Number of Undergraduate Students**

#### **Enrolment 2011/12 2012/13**

Year 1	53	55
Year 2	53	51
Year 3	57	52
Year 4	48	55
<b>Total</b>	<b>211</b>	<b>213</b>

### **Graduate Exit Survey**

In the fall of 2011, the Faculty of Pharmacy implemented a comprehensive program evaluation plan. As such, the exit survey of graduands was expanded to include an online survey and facilitated focus groups to provide feedback on their Pharmacy education and transition to the profession. Invitations to participate were extended to 48 students in the 4th Year Pharmacy class (Graduating Class of 2012).

The following summarizes the responses from 45 students including 44 who completed the online survey and 45 who participated in the focus groups in March 2012. All respondents planned to obtain licensure to practice pharmacy. There was also interest in pursuing further studies in a Pharm.D. (32%), Masters or Ph.D. in pharmacy (11%), non-pharmacy degree (11%) or pharmacy residency (9%). Only 11% indicated a lack of interest in pursuing more formal education or training.

Of the 45 respondents, 22 (49%) indicated that they had already secured a practice position following graduation. One person indicated that they had not secured a position, and 22 respondents skipped the question. Of those with positions, 68% were with a chain pharmacy, 18% with an independent pharmacy and 14% with a hospital pharmacy. Seventy-seven percent of practice sites were in Winnipeg, whereas 23% were outside the city but within the province of Manitoba. Respondents indicated a salary of \$80,000-100,000 in 65% of cases and >\$100,000 in 35% of cases.

When asked about their 10 year practice goals, 23 responded with plans to work with a chain pharmacy (35%), hospital pharmacy (26%), independent pharmacy (22%), government (4%) and undecided (13%). When asked about their interest in pursuing ownership of a retail pharmacy, 26% of respondents indicated “yes”, 30% indicated “no” and 44% were unsure.

The exit survey/focus groups gathered valuable feedback from graduands on the Pharmacy curriculum. The following summarizes the results from 44 students who responded to this part of the online survey, in addition to data collected during the focus groups. Students agreed (71%) or strongly agreed (23%) that they are prepared to apply the specialized body of pharmacy knowledge for the benefits of patients and the profession. Eighty-four percent also agreed or strongly agreed that they are able to work collaboratively as a part of an inter-professional team. Strengths of the pharmacy curriculum were

identified as the small class sizes and strong clinical program with access to expert clinicians and practitioners in courses and experiential training. Some opportunities for follow-up include a restructuring of pharmacy pre-requisites and the 1st year pharmacy program, and enhancing the quality control and improvement measures for instruction and student assessment.

## **5. 2012 PEBC Results and Student Success**

The University of Manitoba Faculty of Pharmacy Class of 2012 was ranked fourth in Canada (in terms of overall pass rate) in the 2012 Pharmacy Examining Board of Canada (PEBC) Qualifying Examination, however we ranked first overall in the Multiple Choice Portion of the Examination.

While Manitoba offers one of the smaller Pharmacy programs in Canada (ranked 9 of 10 in terms of student numbers), our performance in the national qualifying examination has typically been good with graduates achieving a number one ranking on the exam four times in the last seven years.

Our student pharmacists have also been active in fundraising \$14,687 for Breast Cancer research and \$2,780 for Prostate Cancer research, donated countless hours to Pharmacy Awareness week, various interprofessional education initiatives and have garnered a number of undergraduate student awards during the course of 2012-2013.

## **6. Senior Co-Stick Message**

First off, I must say I am extremely humble and grateful for my peers who have elected me as their representative. Not only has the past year been an amazing and unique set of experiences, but also the past four years within the Faculty have been the most exciting, yet challenging times I've faced. Having said that, with graduation approaching, I know my classmates and I have many new experiences and challenges ahead of us.

Having the opportunity to be Senior Co-stick, I have gotten to work with a lot of great people, not only within the Faculty, but on the University of Manitoba Pharmacy Student Association's (UMPhSA) Student Council. There is no doubt that I am privileged to work with some of the brightest and most hard working students within the student body who have accomplished remarkable feats in the past year; not only academically but in extracurricular activities and more. We've had a myriad of successful events within the Faculty this year.

In social events, we started the year off with a Meet and Greet in early September for the newcoming Pharmacy students which included a "welcome back" party at Cheers. This event was soon followed up with the 5th annual Red Party in mid-September, which went "pink" in support of Breast Cancer where we raised more money for the Canadian Breast Cancer Foundation than all other Canadian Pharmacy schools! In terms of sports, we've organized golf tournaments, sport pools and currently planning a curling bonspiel and the annual Alumni hockey game. CAPSI has been busy with bowling nights and lunch and learns, but some of the more notable things were the Run for the Cure which raised more money than any other Pharmacy school in Canada (again!). 50 lucky students also attended CAPSI's annual Professional Development Week (PDW) in Montreal where we came in first in the Compounding Competition! We also came in 3rd in the Pharmafacts Bowl. Congratulations guys! UMPhSA also continues to take part in the WISH (Winnipeg Interprofessional Student-run Health) Clinic and hosted another successful Career Fair. The student body is also continuing to give back to the community through charities for those who are less fortunate, such as Christmas Hampers.

Now, I've saved the best for last. This year, we crowned our first ever Mr. Pharmacy at the Mr. Pharmacy Pageant. This event put some friendly rivalry competitions between eight bachelors (two students from each year) in a hilarious and fun evening. Competitions included pill counting, ethical trivia (by none

other than Mr. Ron Guse himself) and a talent contest ranging from juggling to singing and dancing (by a giant Lego man!). The evening was attended by students, professors, MSP and MPhA and would not have been possible without the support of the Faculty of Pharmacy and the hard work of many volunteers. The event was awe-inspiring and brought colleagues together under one roof for a fantastic evening that we hope to continue as an annual event.

So maybe you can see why I am so grateful to get to work with this amazing group of people that I am honoured to call colleagues. We have set the bar high and made our Faculty well-known and stand out from others across Canada. As I've said in the beginning, I am thankful for the experiences over the past four years and wouldn't change a thing. I want to thank everyone for this amazing opportunity and the Faculty for their amazing support, mentorship, care and guidance as I wouldn't be where I am today without them. Having said that, I look forward to what the future will bring for me and my fellow classmates (as we prepare for our PEBCs) and everyone else in the Faculty of Pharmacy.

*Scott Andresen, Senior Co-Stick*

## **7. Philanthropy**

At the Faculty of Pharmacy, we are fortunate to have dedicated alumni who choose to support our program. We view our alumni as valuable partners who generously give to us financially and provide us that essential "margin of excellence". This support enables the Faculty to attract the most talented staff and students, to stimulate world class researchers and provide the best facilities for both.

During 2012, we were very grateful to receive 150 gifts to the Faculty of Pharmacy for a total of \$340,100. Highlights include a very generous gift of \$100,000 that was given to create a student bursary by Cecile Bellec in honour of her best friend and partner Rudy Goldman Dip Pharm 1937. As well, 54 former senior, lady and co-sticks contributed over \$7, 200 to purchase a beautiful set of handcrafted walking canes that represent the office of the student co-sticks and replace the previous set and for plaques and engraving for the sticks for many years to come. Finally, the members of the Manitoba Pharmaceutical Association have continued to support the Faculty with total contributions to the Faculty of Pharmacy since 1983 at almost \$2.2 million. Thank you to all the members of our profession for their collective efforts to continue advancing the education of outstanding pharmacists for the citizens of Manitoba.

## **8. Report on Funding Received from the Manitoba Pharmaceutical Association, 2012**

The Faculty of Pharmacy has a mission to create an educational environment that facilitates the integration of pharmacy scholarship in the areas of practice, research and service to effect optimal health outcomes for individuals and communities, and the advancement of the profession of pharmacy. We are pleased to be joined in this mission by the pharmacists of Manitoba who contribute to the delivery of the professional program in many ways, including a financial contribution as part of the annual licensing process. The funds collected by The Manitoba Pharmaceutical Association (MPhA) on behalf of The University of Manitoba, Faculty of Pharmacy from the levy on all pharmacists for practicing licenses in 2012 were \$145,800. The funds were allocated to the following initiatives in support of the professional program.

Develop immunization program; \$6,500

Structured Practical Experiential Program [SPEP] and Skills Labs support; \$39,964

Course/conference attendance by practice faculty; \$20,750

Support for the Standardized Patient program (PHRM 1100, PHRM 2100 and PHRM 3100). Support included standardized patient training, case planning and development workshops; \$9,240

Computer and software for clinical instruction; \$4,500

Admissions essay workshop for markers; \$3,000  
Lab equipment purchases for skills laboratory; \$5,300  
Creation of new clinical practitioner office suite on 2<sup>nd</sup> floor for practice development; \$ 43,000  
Practise faculty memberships; \$455  
Accreditation co-ordinator and program evaluation; \$13,091

We continue to be grateful for your support and look forward to developing new initiatives associated with the Manitoba Pharmaceutical Act and the new regulations.

Graduation is May 30, 2013, at the Brodie Centre on the University of Manitoba Bannatyne campus, followed by Convocation at the Fort Garry campus. All Pharmacy alumni are welcome to attend.

Sincerely,

Neal M. Davies BSc(Pharm), Ph.D., R.Ph.  
Dean and Professor  
Faculty of Pharmacy

Portions of this report have been abstracted from the full Faculty of Pharmacy Annual Report for July 1, 2011 to June 30, 2012. Available as a pdf document on the Faculty website at [http://umanitoba.ca/faculties/pharmacy/media/Annual\\_Report11\\_12.pdf](http://umanitoba.ca/faculties/pharmacy/media/Annual_Report11_12.pdf) and from the Pharma News Winter 2012 Alumni Report also available as a pdf document on the website ([http://umanitoba.ca/faculties/pharmacy/media/Pharma\\_News\\_Winter\\_2012.pdf](http://umanitoba.ca/faculties/pharmacy/media/Pharma_News_Winter_2012.pdf)).

## **Student Liaison Report Annual General Meeting- April 6, 2013**

Overall, the student council and student body had another great year in the Faculty of Pharmacy. Many great changes have been made and many great events were planned and successfully executed.

### Academic Events

Many events were held this year by student council. Some of which include the Career Fair on October 1<sup>st</sup> 2012 in the Brodie Atrium at the University of Manitoba. 13 businesses and all pharmacy students were in attendance to make this a great success. Another large event was PDW, which was held in Montreal from January 9-13, 2013. 45 students from the University of Manitoba were in attendance. Students will also participate in Pharmacist Awareness Month, formerly Pharmacist Awareness Week. Plans are to get students involved in information booths on campus and presentations to high school students. On top of these larger events, many noon-hour lunch and learn sessions and symposiums were held, to allow some out-of-school information sessions for the students.

### Fundraising Events

The Faculty of Pharmacy donated money to two main causes this year. Breast cancer and prostate cancer. To raise money for breast cancer, a social was held with all ticket sale proceeds going to breast cancer research. Students also participated in the Run for the Cure. The students in the Faculty of Pharmacy were presented an award for their large contribution to breast cancer research. The total monetary value donated was just over \$12,000. A Mr. Pharmacy pageant was incorporated into our annual Christmas banquet, which raised \$2,870 for prostate cancer research.

### Sporting Events

Many sporting events were organized by student council's sports rep. Some of which were a golf outing, students attending a bomber game, an evening of curling, the option to participate in a hockey pool and the annual Alumni hockey game. Every year students really look forward to participating in these sporting events with their peers.

### Purchases

Many updates have been made to the student lounge this year by purchasing items through the endowment fund. Purchases include dishes and cutlery for the student lounge, Keurig and Tassimo machines and a safe for students to keep student council money in when situations arise that require large amounts of money to be kept for the day. A small lounge has also been created in the basement of Apotex for students to use, rather than only having the large and very busy 2<sup>nd</sup> floor lounge.

### New student council positions

It has been discussed that we may need a couple of new positions on student council. These include a WISH representative, whose role would be to work with the interprofessional representative since WISH makes up a majority of our faculty's interprofessional efforts. Another position needed is a sponsorship representative. Their role would involve the creation of sponsorship lists and form letters for requests to be used in future. They would help CAPSI, the grad committee and organizers for individual events.

Elections will soon be taking place, so 2013-2014 will be another exciting year for student council with a lot of new faces! I would be pleased to answer any questions or comments about any of the student council's 2012-2013 events.

Respectfully submitted,

Melissa Gobin  
Student Liaison

**The Manitoba Pharmaceutical Association**

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