

Newfoundland and Labrador Pharmacy Board



**ANNUAL REPORT
2011**

MISSION STATEMENT

To protect the citizens of Newfoundland and Labrador by setting, governing and advancing the standards and scope of pharmacy practice and service.

STRATEGIC GOALS 2012-2013

- 1- Regulate and Govern the Profession so that the public receives quality pharmacy care and services*
- 2- Optimize the Practice of Pharmacy to enhance patient care*
- 3- Guide and Direct Continuous Professional Development of Pharmacists and others Involved in the practice of Pharmacy*
- 4- Promote and Advance the Profession through Collaborating and Building Partnerships with the Public and other Stakeholders*
- 5- Optimize Resources and processes to Improve Efficiencies in Both Present and Future Board Activities*

NLPB BOARD MEMBERS 2010-2011



Pictured (from left to right): Donald F. Rowe (Secretary-Registrar), Andrew Sweetapple (MUPS Representative), Dr. Linda Hensman (Executive Member, At Large), Brian Healy (At Large), Christina Tulk (Chair, Zone 4), Eugene Toope (appointed lay member), Dr. Deborah Kelly (Vice-Chair, Zone 1), Ray Gulliver (Zone 2), Dorothy Ainsworth (Zone 3), Keith Bailey (Past-Chair, At Large) Missing: Don Mifflin (appointed lay member)

MESSAGE FROM THE CHAIR

On behalf of the Board, our office team and the pharmacists of the province, I am very pleased to take this opportunity to reflect on our accomplishments of the past year and to look forward to the future of our profession. Although the past year has not been without its challenges, we continue to work diligently to expand the clinical role of our pharmacists in both our community and hospital practice. The future will bring about changes to our profession. As a group of dedicated health care professionals, we must view change as opportunity; opportunity to enhance patient care and to push the limits of our own careers.

I was pleased to address the pharmacists of the province during the PANL Conference in September 2010 as we decided to move the date of our Board AGM to coincide with this annual event. Our Board continues to strive towards reaching out to all of our pharmacists through the use of various media which includes the social mediums of Twitter and Facebook. It is of vital importance to keep our pharmacists both informed and engaged. As well, given the challenges of the past year, we believe that it is imperative to keep our public informed as well. They are, perhaps, our most important stakeholder.

It has been a personal goal of mine to capitalize on the momentum provided by the new Medication Management standards that were implemented in 2010. As a next step, our Board is pursuing Advanced Collaborative Pharmacy Practice and has recently launched a survey to gather information surrounding this endeavour. We are also working to establish standards of practice for immunizations. These initiatives will serve to improve patient care in our province.

We continue to move forward with the Regulation of Pharmacy Technicians in the province. This year the first PEBC Technician Evaluating Exam was written in the province in a number of locales. The Technician body is beginning to establish themselves in the province and we will continue to support and work with them as they move forward.

As I reflect on the past year, I am grateful for the opportunity to reach out to and increase the visibility of

the Board with our pharmacy students in the province. I took the opportunity to attend APAC – the joint MUN/DAL student conference – and I was truly honoured to read the Code of Ethics at the White Coat Ceremony in January. As a graduate of MUN School of Pharmacy, it gives me great pleasure to give back to the institution that supported me as a student. As such, I have taken advantage of my position as Chair this past year, to endeavour to improve our recognition as a Board with the students in an attempt to alter our perception as solely regulators to one of guidance and mentorship. I encourage all pharmacists to support the School of Pharmacy in their endeavours as well as our students as they represent the future of our profession. At this time I would like to personally thank Andrew Sweetapple, our student representative, for his interest in and participation with the Board this year.

Over the past three years, we have worked hard to meet the expectations outlined in our Strategic Plan. In April 2011, we took the opportunity to reflect on our successes and focus on a new set of goals for the next two to three years.

Representatives of various pharmacy stakeholders such as PANL, CSHP and the School of Pharmacy were invited to participate in another Strategic Planning session along with our Board members, committee chairs and office staff. Lynn Morrissey led the group in establishing a continued mandate and focus for our near future. The final version of our updated Strategic Plan will be presented within the coming months.

From an office standpoint, the addition of both Meghan Handrigan and Aileen O'Keefe to our team has made significant improvements in our office procedures and efficiencies. We are currently in the process of searching for a provider to update our database system in the hopes to offer extended services to our pharmacists. Ultimately, we would like our pharmacists to have the option of renewing their licenses online, tracking their CEs online and updating their information online.

I am happy to report stronger relations with our stakeholders from PANL. This year we extended an invitation to the PANL Council for one of their representatives to observe our Board meetings. Their

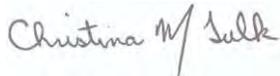
perspective and suggestions have been much appreciated by the Board members. Together, PANL and the Board will strive to enhance our profession in the province.

As our profession faces its challenges and changes, it is now, more than ever, important for all pharmacists to be engaged and involved. Our committees work tirelessly behind the scenes to meet the expectations of the Board and the pharmacists of the province. I would like to take this opportunity to thank each member for their commitment to our profession and encourage all pharmacists of the province to consider giving of their time to the various committees and initiatives of our Board.

On a personal note, I would like to take this opportunity to thank Don, Arlene and Melanie for their expertise, advice and support throughout my tenure as Board chair. As well, I would also like to recognize our Board members – Debbie, Linda, Keith, Ray, Brian, Eugene, Don and Andrew – for their commitment to the profession and their patience as I navigated my role as Board chair.

My sincere thanks to the pharmacists of the province who have entrusted me with the responsibilities of the Board chair. It has been a pleasure to work with you and for you.

Respectfully submitted,

A handwritten signature in blue ink that reads "Christina M. Tulk". The signature is written in a cursive style.

Christina M. Tulk
Chair

Chair Christina and Members of the Board:

I am pleased to present to you my eighteenth annual report as Secretary-Registrar.

It is the responsibility of the Board members to oversee the administration and fulfilment of the responsibilities related to the regulation of the practice of pharmacy in our province. This includes obligations with respect to registration of pharmacists and pharmacy students, licensing of pharmacies, ensuring adherence to standards of practice and the investigation and processing of complaints and disciplinary issues. The Board's staff members implement the policies and priorities established in the Strategic Plan adopted by the Board and to this end also provides administrative support to the Executive Committee and the various other Committees of the Board.

Another important function of the Board is to collaborate with other pharmacy regulatory authorities across Canada, both to present our province's viewpoint in the development of national consensus on pharmacy regulatory issues and also to ensure that our Board is knowledgeable about those issues, so that the standards of pharmacy practice and pharmaceutical care in this province are in tune with national standards and practices. The Board also plays an important role in collaboration with other health care professions in our province to ensure effective and coordinated health care to the citizens of our province, as far as possible.

Registration and Licensing Process and the Maintenance of Registers

The Registration and Licensing Committee's mandate includes:

- making recommendations to the Board regarding the Standards of Practice for Continuing Pharmacy Education
- accreditation of Continuing Education programs and
- the implementation and operation of a program of Continuing Professional Development (CPD).

The Committee also functions as the Board of Examiners and oversees the Board's Registration Examinations.

During the past year the Committee continued to review

the Standards of Pharmacy Practice for Continuing Pharmacy Education (Continuing Professional Development) guided by the previous years experience, the information gathered from the auditing of Learning Portfolios and direct feedback from pharmacists. The 2010 revision of the Standards of Practice reduced the duplication of documentation required under the previous Standards and also permitted simplification of the auditing process. This year the Committee used its authority under the revised Standards to grant an extension on compliance to one pharmacist based upon extenuating circumstances. That pharmacist has since complied with the requirements, and is now fully licensed.

In the audit of 2010 Learning Portfolios, a total of 175 pharmacists were selected for auditing of their CPD activities. One hundred were selected at random, while a further 75 (compared to 125 in 2010) were selected based on triggers related to the Professional Development Log submitted with their licence renewal application for 2011, or as follow-up to the audit of their 2009 activities. Of these 175 pharmacists, 173 submitted the required documentation for auditing and upon the first review by the committee (a process that took two days) 136 were found to be acceptable. Thirty-seven required further clarification (compared to 46 in 2010). After the second meeting of the committee two pharmacists were asked for further clarification still before final determination of compliance was confirmed. The pharmacist who was granted an extension subsequently submitted the required documentation and was found to be compliant. Four pharmacists who had not submitted the required documentation for audit were referred to the Complaints Authorization Committee and they subsequently complied with the requirements. There was one pharmacist, however, who never submitted the required documentation but whose licence to practice had been earlier suspended for other reasons.

The Committee now has four years of information gained from the audit process, including feedback and comments from the pharmacists involved. This information and feedback enables the Committee to consider further refinements and updating of various aspects of the program for the next year.

The registration of new pharmacy graduates usually takes place in early July, after the results of the PEBC Examinations have been released and the graduates' practice experience requirements have been completed. In April, 25 MUN Pharmacy students (of a class of 41) and two pharmacy students from Dalhousie University wrote our Registration Examination. All were successful and it is expected that they will register with the Board as pharmacists within the first weeks of July.

While there has been a slow but gradual increase in the number of practising pharmacists in the province, we continue to monitor the human resources needs of pharmacy, particularly at a time when the number of prescriptions filled in the province continues to increase, but at the same time in a period when there may be uncertainty about the future viability of some pharmacies. We also continue to monitor the number of pharmacists available for our hospital pharmacies, even though the difficulties in recruiting and retaining a sufficient number of pharmacists to offer the expanded clinical pharmacy services that are now expected in the hospital pharmacy setting appear not to be as severe as they have been in recent years.

The registration of new pharmacists and pharmacies and the annual licence renewal process has always been one of the core activities and responsibilities of our Board, as has been the ongoing maintenance of the various Registers kept by the Board. These duties had been managed on a day to day basis in the past by our Executive Assistant, Veronica Harvey, and had increased significantly over the years due to a number of factors, including a slow but steady increase in the number of pharmacists and pharmacies registered, the addition of a Pharmacy Student / Intern Register, increased pharmacist demographic information being collected and submitted to the Canadian Institute for Health Information (CIHI) to enable our participation in their Health Human Resources monitoring and research project, provision of pharmacist and pharmacy data to the Provider Registry of the NLCHI Pharmacy Network and increased administrative and documentation responsibilities arising from changes to the Practice Experience requirements of studentship / internship for pharmacy students seeking registration with our Board.

As a part of our major reorganization of office duties and procedures, and after Veronica Harvey had to go on extended medical leave in January of 2010, the Board

authorized a reallocation of the Executive Assistant position into two separate positions, that of Office Administrator and Registration and Licensing Administrator. The day to day management of the pharmacist, pharmacy and student registers is now handled by the Registration Administrator. The Registration and Licensing Administrator is also responsible for further development and administration of the database. Day to day functioning of the office is now handled by the Office Administrator, who is also becoming conversant with administration of the database, as a backup to the Registration Administrator, and is assuming responsibility for maintenance of the Board website and social media sites and publication of the Board's newsletter, *The Apothecary*.

In March of 2010 Ms. Aileen O'Keefe was hired as the Registration Administrator and Ms. Meghan Handrigan was hired as the Office Administrator. Both of these staff members have grown very quickly into their positions and familiarity with the Board's operations and they have played a significant role in updating and streamlining our day to day functioning. These additional staffing resources have also enabled the Board to work more effectively towards providing the background documentation that will be necessary to implement enhancements to pharmacy practice, and ultimately improved patient care in this province.

In addition to the increasing demands upon staff, there has continued to be problems experienced with the registration database that was installed in the fall of 2007. Over the past year we have been reviewing the systems used by our counterparts in other provinces and are considering the implementation of a new database that will also permit on-line registration and profile updating by registrants, as well as providing the capability for registrants to document their continuing professional development records into their own registration profiles.

Inspections and Monitoring of Adherence to Standards of Practice

The duties of the Deputy Registrar, besides conducting regular pharmacy visits and inspections, include coordinating the complaints and discipline process and guiding the activities of several Board committees, particularly with respect to professional practice issues and continuing professional development initiatives. Our

Assistant Registrar for the west coast and for hospital pharmacy issues continues to provide service, advice and availability to pharmacists in the western portion of the island and Labrador.

As in the past, our Deputy and Assistant Registrars' visits to pharmacies have included regular inspections, follow-up inspections, pre-opening inspections, change of location inspections, and visits when necessary related to pharmacy closures. Besides ensuring compliance with Standards of Practice and Operations with respect to documentation and record keeping, regular pharmacy visits now place more and more emphasis on the establishment and documentation of policies and procedures to ensure quality of patient care and the reduction, as much as possible, of the risk of medication errors. Inspections of pharmacies now pay more attention to professional practice issues, review of narcotic and controlled drug audits, and the documentation required under legislation. The Deputy Registrar and Assistant also review with pharmacists any revisions to Standards of Practice or Board policies. Particular emphasis in the coming year will be put upon new Standards of Practice related to Security and Accountability Procedures for Narcotics and Controlled Drugs in Community Pharmacies and the Standards of Practice related to Medication Management.

We also rely on these visits to pharmacies by the Deputy and Assistant Registrars to provide direct feedback and input from pharmacists in the actual day to day practice of pharmacy. From time to time they are also called upon to assist in the investigation of complaints that are received by the Board.

Two very significant disciplinary issues this past year have resulted in a significant amount of time having to be spent by our Deputy Registrar in reviewing documentation and working with our Board's lawyer in preparing for the required hearings of the Complaints Authorization Committee and Disciplinary Tribunal. This has resulted in a postponement of a number of regular pharmacy inspections that had been planned and a slowing of the review and updating of inspection procedure that was being done by the Deputy and Assistant Registrars.

Over the past year the Professional Practice Coordinator provided the primary background research and development support work, including standards drafting, to assist our various Committees in meeting the objectives

set by the Strategic Plan. Again this year considerable work has been done to review existing Standards of Practice and Board Policies. This has been accompanied by an on-going process of standardizing and updating these documents where necessary. The Professional Practice Coordinator has devoted considerable effort in the past year preparing background materials and information related to proposals for advanced practice by pharmacists, and the preparation of draft standards and regulations related to the introduction of regulated Pharmacy Technicians.

Other areas of focus this year have been revisions to the Continuing Professional Development Standards of Practice, to the Personal Care and Community Care Homes Standards of Practice, the Security and Accountability Standards related to Narcotics and Controlled Drugs, and initial drafting of Long Term Care Standards of Practice.

Administration of Complaints and Discipline Process

Allegations and Complaints On-going from Last Annual Report

Since our last annual meeting the Board has continued to deal with three formal written allegations against pharmacists or pharmacies, which had been previously reported to the Complaints Authorization Committee (CAC), but not yet completed. These allegations included:

Case #1

An allegation against a pharmacy from a third party payer regarding a number of prescriptions submitted to them for payment. The prescriptions questioned by the third party payer as a part of their audit of the pharmacy indicate there may be issues of failing to abide by certain federal or provincial regulations related to the practice of pharmacy.

The CAC decided that there were reasonable grounds to believe that conduct deserving of sanction had occurred and instructed the Secretary-Registrar to file the complaint against the pharmacist-in-charge and further recommended to the Board that the Secretary-Registrar conduct an investigation of the respondent's practice. A review of practice at the pharmacy has begun in preparation for the holding of a hearing of the disciplinary panel.

Case #2

An allegation from a third party payer that multiple claims for prescriptions filled at a pharmacy, upon audit, indicate there may be numerous issues of failing to abide by certain federal or provincial regulations related to the practice of pharmacy.

This allegation remains under investigation by the CAC, a process involving a considerable amount of review of documentation by our Deputy Registrar and lawyer, prior to further consideration by the panel. A report on the investigation will be presented to the Complaints Authorization Committee in the near future.

Case #3

An allegation was received from a physician that a patient had received a narcotic after the prescription had expired. The allegations were referred back to the Secretary-Registrar by the CAC for further investigation, and the Secretary-Registrar or the Deputy Registrar have been given the authority to appoint another person or persons as they deem necessary and appropriate to assist in the investigation. A Review of practice at the pharmacy by that pharmacist is also on-going.

After further investigation the CAC directed that the allegation be considered as a complaint and referred to the Disciplinary Tribunal.

New Allegations

Since our last annual meeting the Board has dealt with 15 new formal (written) allegations against pharmacists or pharmacies. These allegations included:

Case #1

An allegation was received concerning the conduct of a pharmacist while dispensing a narcotic to patients.

After consideration of the information presented, the CAC directed that the allegations be considered as a complaint and referred to a hearing of the Discipline Tribunal.

Case #2

An allegation was received concerning the conduct of a pharmacist while dispensing a narcotic, as well as other allegations of unprofessional conduct.

After consideration of the information presented, the CAC directed that the allegations be considered as a complaint and referred to a hearing of the Discipline Tribunal. Given the potential risk posed to the public if

the allegations made were correct, the CAC further recommended to the Board that the pharmacist's licence to practice be suspended immediately pending the outcome of a discipline hearing. Immediately following the decision of the CAC, a special meeting of the Board was called and the recommendation of the CAC was endorsed by the Board. The pharmacist's licence to practice was suspended and a public notice to that effect was circulated to all pharmacies in the province and to the public.

Case # 3

An allegation was received from the representative of a pharmacy in the province that a pharmacy in another community might not be adhering to the Board's Standards of Practice related to the faxing of prescriptions and the delivery of prescriptions.

After consideration of the information presented to it following an investigation, the CAC found that there was sufficient evidence of conduct worthy of sanction on the part of the respondent pharmacist and ordered that the pharmacist ensure that the Standards are adhered to completely and that a letter of caution be sent to the pharmacist pointing out specific areas of the standards where attention to adherence should be given.

Case # 4

An allegation was received from a mother that after returning home from having a prescription filled for her son she discovered that the bag also contained a prescription for another patient. This discovery took place after her son had already taken a dose of that other patient's medication (an antidepressant).

After review of the documents presented, the panel decided that there were reasonable grounds to believe that conduct deserving of sanction had occurred. The panel directed that the allegation be considered as constituting a complaint and that letters of caution be sent to the Pharmacist-in-Charge of the pharmacy and the pharmacist involved in the incident.

The panel directed that specific points that should be noted in the letters of caution are:

- That the use of baskets to separate prescriptions for different patients, as outlined in the policy and procedures developed for pharmacies, must be reinforced by all pharmacists and staff in the pharmacy.

- That counseling must take place on every new prescription and should take place on refills. Checking the prescription bottle or package at the time of counseling is a very important step that every pharmacist should be doing to help prevent medication errors.

The panel also directed that a report on this complaint be placed in the next edition of the Board's newsletter *The Apothecary*, on a no names basis, so that ALL pharmacists will be reminded by this incident of their responsibilities to review checking procedures, to counsel patients on original and repeat fillings of prescriptions, and to generally review policies and procedures in their pharmacy to ensure error prevention as much as possible.

At the same time, when making this decision and issuing these cautions, the panel recognized that the pharmacist had admitted that the incident had taken place and that they had responded to the patient in an appropriate manner. The panel also recognized that the pharmacist has indicated that the use of baskets would be reinforced at the pharmacy aimed at reducing the likelihood of medication errors and that all staff have been informed of the policies and procedures and instructed to follow them.

Case # 5

An allegation was received from the mother of a young child that when her sister brought a prescription for the child to the pharmacy the medication (an antihistamine syrup which is also available over the counter) offered by the pharmacist was outdated. The pharmacist responded that the medication prescribed was on back order from their usual wholesaler but that a bottle of the medication (which was outdated by about three weeks) had been obtained at another pharmacy and was available if her sister wanted to use that temporarily while in date stock was sought from other wholesalers. Alternatively, another similar product could be used instead. The mother chose not to take the outdated medication and the pharmacist contacted the prescribing physician, at which time the prescription was changed to the alternative product suggested by the pharmacist.

After consideration of the information placed before it, the panel ruled that there was no indication that the outdated medication in question had ever left the pharmacy, been administered to the patient, or been displayed in the patient self-selection area of the

pharmacy for possible purchase without the advice of a pharmacist. The panel was also of the opinion that, even if the outdated drug had been dispensed, it would not have posed a risk of injury to the patient. Consequently, the panel found there were not reasonable grounds to believe that the respondent had engaged in conduct deserving of sanction with respect to the practice of pharmacy and therefore, in accordance with section 39(2) of the *Pharmacy Act*, the panel dismissed the allegation.

Case # 6

An allegation was received from a patient that when a renewed prescription (for a laxative) that had been previously logged on at the pharmacy was dispensed some time later, the wrong medication (a blood pressure medication) was dispensed. Upon investigation of this incident on behalf of the CAC, it appeared that the drug prescribed had been incorrectly recorded when the prescription had been first logged on and that the error had not been detected at a number of steps, or by a number of pharmacists, involved in the dispensing process in place at that pharmacy. There were also concerns expressed that policies and procedures in place at the pharmacy may not have been followed by the pharmacists or enforced by the Pharmacist-in-Charge, or may not have been clear.

The Complaints Authorization Committee decided that there were reasonable grounds to believe that the respondents had engaged in conduct deserving of sanction, and therefore the allegation would be considered as constituting a complaint. The Panel ordered that appropriate letters of counsel be forwarded to each of the three staff pharmacists involved. With respect to the Pharmacist-in-Charge, it is the Pharmacist-in-Charge who is generally responsible for ensuring that appropriate policies and procedures are in place and followed in a pharmacy, and it appears that the practice of pharmacists logging in to a computer, not logging out, and allowing other pharmacists to use their computer codes was known to the pharmacy management at the pharmacy, at the time the subject prescription was logged in, and dispensed. That being the case, the Pharmacist-in Charge was responsible for allowing an unacceptable practice to continue.

The Panel ordered that the Pharmacist-in-Charge also receive a letter of counsel regarding the inappropriateness of allowing the subject practice to

continue. The Panel also recommended that the district office of the pharmacy be made aware of this Decision, and that it take into consideration the findings and recommendations in this Decision regarding policies and procedures in place in the pharmacy. The Panel also recommended that an article be placed in *The Apothecary*, on a no names basis, regarding the need for pharmacists to at all times be accountable for their actions in filling or dispensing a prescription, and advising that it is not acceptable for any pharmacist to allow another pharmacist to use his or her name at any stage of the filling or dispensing process.

Case #7

An allegation was received from a patient that his privacy had been violated when a pharmacist discussed his prescription and the medication he was prescribed in the presence of non-pharmacist staff whom he knew personally, and despite his having raised the issue of confidentiality with the pharmacist. The issue of the manner in which unneeded prescription information is destroyed was also raised.

Having considered the information before it, the Panel found that there were reasonable grounds to believe the respondent had engaged in conduct deserving of sanction and that the allegation be considered a complaint. The Panel directed that the Secretary-Registrar file the complaint against the respondent and refer it to the disciplinary panel. The case is now awaiting the setting of a date for the hearing.

Case #8

An allegation was received from a patient that when she brought a prescription for a thyroid medication, which she had not been prescribed before, to the pharmacy, the wrong drug (a blood pressure medication) was dispensed to her. It was after having taken the wrong medication and experiencing adverse effects that resulted in her being taken to the emergency department of the hospital that this error was detected. A response was received from the Pharmacist-in-Charge of the pharmacy. No further proceedings by the Board with respect to the complaint/discipline process and this allegation will take place and the case has been closed.

Case #9

An allegation was received by the CAC from the Chair of the Registration and Licensing Committee indicating that

four pharmacists had not complied with the audit requirements of the Standards of Practice regarding Continuing Professional Development. Having considered the information before it, the Panel found that there were reasonable grounds to believe the respondents had engaged in conduct deserving of sanction and that the allegation be considered a complaint.

The Committee recommended to the Board that if the requested documentation has not been received at the NLPB office by 10:00am, Friday March 25, 2011 the respondents' licenses to practice be suspended until they have adhered to the requirements for continuing education, and that the respondents' licenses be reinstated once they have provided documentation of the required continuing education satisfactory to the Registration and Licensing Committee. The required information was provided by all of the four pharmacists named before the deadline set and their licences to practice were not suspended.

Case #10

An allegation was received from a Pharmacist Supervisor indicating that a pharmacist under their supervision was failing to adhere to conditions of licensure imposed as a result of earlier discipline proceedings.

After consideration of the information placed before it, the Panel was of the opinion that there were reasonable grounds to believe the pharmacist had engaged in conduct deserving of sanction and the allegation be considered as constituting as a complaint.

The Panel instructed the Secretary-Registrar to file a complaint against the pharmacist and refer it to the Disciplinary Panel. After consideration of the concern for public safety, the panel further recommended to the Board that the pharmacist's licence to practice be suspended immediately pending the outcome of a hearing of an adjudication tribunal. Based on consideration of the allegations, and upon the recommendation of the CAC, the Board suspended the pharmacist's licence to practice.

Allegations Received but not yet Reviewed by the CAC

Four allegations have been received at the time of the writing of this report for which adequate information has not yet been gathered to prepare them for consideration by the Complaint Authorization Committee. These include:

Case # 11

An allegation has been received from a patient that they have been treated disrespectfully and unprofessionally by a pharmacist.

Case #12

An allegation has been received from the sons of a patient that their mother had been dispensed the wrong strength of her prescribed medication.

Case# 13

An allegation has been received from the wife of a patient that her husband had been dispensed the wrong strength of his prescribed medication and experienced severe withdrawal symptoms when he later received the correct strength.

Case # 14

An allegation has been received from a member of the public that a Pharmacist-in-Charge was aware of improper and unprofessional activity taking place on the part of a staff pharmacist and not taking action to stop it.

Case # 15

An allegation has been received from a patient that they have been treated disrespectfully and unprofessionally by a pharmacist with respect to the sale of over-the-counter codeine.

Legislative Committee and Professional Practice Committee

Revisions to the Drug Schedules in this province were made by the Minister in May 23, 2011, based upon the recommendations of our Board, which in turn are based on recommendations of the National Drug Scheduling Advisory Committee.

A comprehensive review and revision of the current *Pharmacy Regulations, Board Policies and Board Bylaws* was initiated in 2008 and regular updates continue. However, significant proposed amendments to the Pharmacy Regulations, much of them “housekeeping” amendments dating back to the implementation of the revised Pharmacy Act in 2005, have still not been dealt with by the Department of Justice and Health and Community Services. Development of proposed regulatory amendments to address the regulation of Pharmacy Technicians and to provide for advanced scope of practice for some pharmacists have still not progressed

as quickly as we would have wished. Renewed emphasis will be placed on these issues in the coming year.

A number of the Board’s Standards of Pharmacy Practice and Board Policies have been updated over the past year. These include Standards of Practice and policies related to:

- Continuing Professional Development
- Model Standards of Practice for Canadian Pharmacists
- Provision of Pharmaceutical Care to Personal Care and Community Care Homes
- Required and Recommended Reference Materials
- Requirements for Professional Liability Insurance for Pharmacists, Pharmacy Students and Interns
- Security and Accountability Procedures for Narcotics and Controlled Drugs in Community Pharmacies

School of Pharmacy

The School of Pharmacy at Memorial University is an invaluable partner to the Board and collaboration between the School and our Board continues to be essential to both partners. Dr. Linda Hensman, Director of the School of Pharmacy serves as an elected member of the Board and is a past Chair of the Board. She is currently the Board’s representative to the Board of the National Association of Pharmacy Regulatory Associations. Even before her election to the Board she attended Council/Board meetings in an observer status. She also continues as Chair of the Board’s Finance Committee.

Dr. Deborah Kelly, an Associate Professor at the School of Pharmacy, also serves as an elected member of the Board and the current Vice Chair of the Board. Dr. Barbara Thomas, another member of the faculty of the School of Pharmacy, serves as the Chair of the Board’s Registration and Licensing Committee and also represents our Board at the Canadian Council for Continuing Education in Pharmacy (CCCEP). Andrew Sweetapple has represented Memorial University Pharmacy Students as an observer at Board meetings during the past year.

Our Board and the School of Pharmacy jointly operate the practice experience program for pharmacy students and interns through the Joint Committee on Structured Practice Experience. This committee is a valuable interface between the School of Pharmacy and the Board

to ensure that pharmacy students are exposed to the day to day practice of pharmacy prior to completion of their academic and clinical training.

Our Board has representation on the Academic Council of the School of Pharmacy and actively supports the School's White Coat Ceremony at which new pharmacy students are welcomed into the profession each year. We also very much appreciate the continuing support that the faculty and staff of the School of Pharmacy have provided to our Board and its committees during this past year. This commitment and support enhances the capabilities and effectiveness of our Committees, and also demonstrates the importance to the profession of close supportive links between the Board and The School of Pharmacy.

Our Board is represented by the Deputy Registrar on the School of Pharmacy's Provincial Pharmacy Advisory Committee on Continuing Professional Development. This committee is advising the school as it develops a program of ongoing CPD for pharmacists.

Other External Partnering:

The Board places great importance on its contact and relations with other health care professions and agencies in fulfilling its responsibilities to protect the public interest in the practice of pharmacy. Pharmacists must play a more active role through formal, as well as informal, consultation and participation on committees and other working groups.

The Board continues appropriate collaboration with the Pharmacists' Association of Newfoundland and Labrador (PANL) to advance the profession of pharmacy and strengthen and improve the provision of pharmaceutical care to the public of our province. The Executive Director of PANL has been invited to attend Board Meetings as an observer.

The Board supports the work of the local branch of the Canadian Society of Hospital Pharmacists (CSHP) in its efforts to enhance pharmacy services to patients in hospital and related health care settings.

The Board continues its involvement at the national and regional level through its involvement with and representation at the National Association of Pharmacy Regulatory Authorities (NAPRA), the Council of Pharmacy Registrars of Canada (CPRC), the Pharmacy Examining Board of Canada (PEBC) and the Canadian Council on

Continuing Education in Pharmacy (CCCEP). It maintains involvement in the Canadian Pharmacists Association (CPhA) and the Canadian Society of Hospital Pharmacists (CSHP) through membership of Board staff. The Board regularly participates in regulatory discussions between various agencies of Health Canada and provincial pharmacy regulators and other health care stakeholders. All of this keeps us in contact with the happenings in other provinces and allows us input into national initiatives as well as being able to gather advice from our counterparts across the country. At the same time it keeps our Board focused on evolving standards of practice and the need to ensure that practice in this province is consistent with those changes in other parts of the country. For example, with the emphasis in the revised Mutual Recognition Agreement on harmonization of entry to practice requirements for pharmacists, the Board's collaborative with the other members of NAPRA to develop a centralized process for the accreditation of the credentials of international pharmacy graduates and to facilitate the transitioning of international graduates to the practice of pharmacy in Canada.

Our Board has been actively involved with the Canadian Institute for Health Information (CIHI) on the development of a Health Human Resources Database Development Project – Pharmacist Database. We continue our agreement with CIHI to provide anonymized data on the number of pharmacists practising in the province and demographic information about those pharmacists. As a part of this agreement our Board receives annual reports on the analysis of data, both on a national basis and also with specific reference to Newfoundland and Labrador information. This information will be more and more valuable in the future, particularly as comparative historical data accumulates and changing patterns or emerging trends can be identified.

Again this past year the Board has consulted with the Newfoundland and Labrador Centre for Health Information (NLCHI) regarding the implementation of the Pharmacy Network for this province. Three reference (pilot) sites were initially connected to the Network and general deployment officially began during the summer of 2010. It is anticipated that the remaining pharmacies in the province will be connected to the Network over the coming year. Our Board provides daily updates of our pharmacist register to the NLCHI Provider Registry and is represented on the Pharmacy Network Governance

Advisory Committee. Already important clinical information is being linked by the Network that will improve the provision of better and more rational health care to our population.

Conclusion

It continues to be my pleasure to oversee the day-to-day operations of the Board offices and implementation of the Board's policies and initiatives. Special thanks go to our Board Chair, Christina, and the other members of our Executive Committee for their time and energies in leading the Board over the past year.

We would again particularly extend our thanks and appreciation to our ministerial appointees to the Board, Donald Mifflin and Eugene Toope who have given devoted service to the Board, its Complaints Authorization Committee and its Finance Committee. The contribution made by lay members to our Board over the years has been very valuable and positive and we very much value the insight that they provide to the Board discussions and decisions. The reappointment of our two lay members last year for a further three year term recognizes, we feel, the significant and dedicated contribution that they have made to their responsibilities as public representatives.

Our Board has been very well served again this past year by our office staff. The issues faced by our Board seem to grow every year and dealing with these issues has been particularly challenging this past year as we adjust to the changes in staffing at the office and the operational reorganization and realignment of responsibilities. Both Aileen O'Keefe and Meghan Handrigan have done a magnificent job in learning the roles and responsibilities of their new positions at the same time that those roles and responsibilities were being established and defined. This was not an easy accomplishment, even for established and experienced staff members. My personal thanks goes to Aileen and Meghan for the dedication and enthusiasm that they have given to our Board and their willingness to become actively involved in finding ways to make our office operations as efficient as possible.

We also owe a debt of gratitude to the many pharmacists who have served the Board's various committees over the past year. Without the involvement of these committee members the Board would lose an important insight into the day-to-day reality of pharmacy practice. The involvement and insight of pharmacists at

the committee level is vital to the success of the Board. Special recognition must be given to the efforts and energy displayed by Sandra Carey as Chair of our Professional Practice Committee despite her incredible travel demands and workload at both the national and international level.

Joan O'Mara continues to be intimately involved with the Apothecary Hall Trust and the operation of the James J. O'Mara Pharmacy Museum. She is a veritable walking encyclopaedia of NPhA history, and a human database of registration history. Her continued contribution to the profession and particularly the operation of the museum is very much appreciated.

As I indicated earlier in this report, Melanie Healey has made a considerable contribution as our Professional Practice Coordinator and continues completion of the necessary background work required for the many issues being addressed by our Board. Melanie's thorough, efficient and organized approach to her work has enabled us to move these projects forward and to attain the goals set in our strategic plan to a far greater extent than we could have done on our own. I wish to personally thank Melanie for her excellent work, particularly at the frustrating times when reaching anticipated goals seems so elusive.

Finally, I cannot conclude my report without offering once again my sincere thanks to the Deputy Registrar, Arlene Crane, for the exceptional dedication and enthusiasm that she has given to her service to the Board over the past year. A significant amount of the success achieved by our Board over the past year has been as a result of Arlene's drive and commitment to keeping all our staff focused on the activities at hand. This past year has been particularly challenging with respect to the sheer number, and in some cases complexity, of the complaints and discipline issues for which Arlene has played the heavy lifting role. I cannot thank her enough for the assistance she has provided to me as Secretary-Registrar.

Respectfully submitted,



Donald F. Rowe, Secretary-Registrar
June 3, 2011

REGISTRATION & LICENSING STATISTICS

	2007	2008	2009	2010	2011
Community Pharmacists	374	379	383	452	484
Hospital Pharmacists	85	86	94	107	98
Part Time & Relief Pharmacists	65	52	49	*	*
Administration Pharmacists	30	29	32	40	37
Out of Province Pharmacists	7	7	5	5	5
Honorary Pharmacists	7	7	5	*	*
Wholesale Pharmacists	1	2	2	+	+
Total Practicing Pharmacists	569	562	570	604	630
Non Practicing Pharmacists	28	30	38	18	32
Total Membership	597	592	608	622	662
Total Number of Community Pharmacies:					
	185	187	190	195	194
Total Number of Hospital Pharmacies:					
	15	15	15	15	15

* Included with Regular Category (i.e. Community, Hospital, etc.)

+ Included with Administrative Pharmacists

All statistics are current as of June 3, 2011

<p><u>New Pharmacy Openings</u></p> <p>Breakwater Pharmacy, Portugal Cove-St. Phillips Gander Pharmachoice, Gander Green Bay South Pharmacy, Triton</p>
<p><u>Pharmacy Closures</u></p> <p>Lawton's Drugs, Kilbride</p>
<p><u>Members, or Former Members, Deceased</u></p> <p>Hugh Conroy, November 5, 2010 Kenneth Fleming, November 27, 2010 David McIsaac, April 27, 2011 Arch Knight, May 10, 2011</p>

DRAFT MINUTES OF 2010 ANNUAL GENERAL MEETING

SATURDAY SEPTEMBER 18, 2010

The meeting was called to order at 11:20 a.m. with the following in attendance:

Board Members

Keith Bailey (Chair)
Christina Tulk (Vice Chair)
Debbie Kelly (Executive Member)
Brian Healy
Dave Jenkins
Donald Mifflin
John Rideout
Eugene Toope

Staff

Donald Rowe
Arlene Crane
Melanie Healey
Meghan Handrigan

Observers

Jeff Poston

Regrets

Linda Hensman
Dorothy Ainsworth (Member Elect)
Ray Gulliver (Member Elect)

Pharmacists in Attendance:

Rick Abbott	Sheldon Baines	Barbara Ball	Dwight Ball	Natalie Beckett
Lisa Boyd	Gerald Burke	Janice Chalker	Karen Colbourne	Marjorie Cooney
Cathy Dicks	John Downton	Jason Druken	Deborah Elliott	Rod Elliott
Sean Funk	Terri Genge	Seumas Gibbons	Steve Gillingham	Catherine Goulding
Tom Healy	Carol Hipditch	Keith Hogan	Vince Hogan	Joanne Howlett
Joan Lynch	John Lynch	Douglas Manning	Monica McCarthy	Denise McGrath
Louise Moores	Greg Mosher	Phil O'Keefe	Vicki Parsons	Justin Peddle
Ron Pomeroy	Margot Priddle	Jeremy Reid	Joan Roach	Madonna Rose
Roy Saunders	Barb Scaplen	William Simmons	Todd Squires	Heather Tulk
Trent White	Ralph Winsor			

1.0 Call to Order & Adoption of Agenda

MOVED by C. Tulk, seconded by B. Healy to adopt the Agenda as presented. **CARRIED**

2.0 Minute of Silence in Memoriam

A minute of silence was held for the following pharmacists who had died since the last AGM:

Edward P. Galway	August 7, 2009
Neil P. Curtis	September 11, 2009
T. John Stowe	October 14, 2009
Brendan Hogan	November 17, 2009
Robert Loveys	June 2, 2010

3.0 Adoption of Minutes of Annual General Meeting of NLPB 2009

The Minutes of the Annual General Meeting of 2009, which were previously adopted at the June 11, 2010 Board Meeting, were presented. It was moved by D. Kelly and seconded by D. Jenkins that the Minutes of the 2009 AGM be accepted as presented. **CARRIED**

4.0 Business Arising from Minutes

There is no business arising from the Minutes.

5.0 Financial Statements for 2009

The Financial Statements for 2009, which were previously adopted at the June 11, 2010 Board Meeting, were presented. It was moved by D. Kelly and seconded by J. Rideout that the Financial Statements for 2009 be accepted by the meeting. **CARRIED**

6.0 Appointment of Auditor

MOVED by D. Kelly, seconded by D. Mifflin that the firm Harris Ryan Accountants be appointed as auditors of the Board for 2010-2011. **CARRIED**

7.0 Adoption of Annual Report

The Annual Report was previously adopted at the June 11, 2010 Board Meeting. It was moved by D. Kelly and seconded by D. Jenkins that the Annual Report be accepted by the meeting. **CARRIED**

8.0 Questions on Annual Report as distributed

Margot Priddle asked if the Board could supply an update on the Board Committees, including the Pharmacy Assistant's Committee.

A brief review of Board and Committee activities, with particular reference to Pharmacy Assistants and Pharmacy Technicians was provided by the Secretary-Registrar with input from Sandra Carey, Chair of the Professional Practice Committee.

9.0 Announcement of Results of Election of Board Members

The results of the election of members of the Board to represent Zones 2 and 3 were formally announced to the meeting. Those elected (both by acclamation) were:

Zone 2 – Ray Gulliver

Zone 3 – Dorothy Ainsworth

The Chair welcomed Mr. Gulliver and Ms. Ainsworth to the Board. Unfortunately, because of prior commitments, both were unable to attend the meeting.

10.0 Installation of New Board Chair

The outgoing Chair, Keith Bailey, recited the duties of the Board Chair to Christina Tulk, the Vice Chair, and after doing so passed her the Chair's gavel, inaugurating her as Board Chair for 2010-2011. Ms. Tulk then assumed the Chair of the meeting.

11.0 New Business

Recognition of Retiring Board Members

The new Chair expressed her personal thanks, and those of the Board, to John Rideout and David Jenkins for their service to the Board and presented them both with a Certificate of Appreciation.

12.0 Adjournment

The meeting adjourned at 11:45 am by a motion from Eugene Toope.

AUDITOR'S REPORT



INDEPENDENT AUDITOR'S REPORT

To the Members of the Newfoundland and Labrador Pharmacy Board

We have audited the accompanying financial statements of Newfoundland and Labrador Pharmacy Board, which comprise the statement of financial position as at December 31, 2010, and the statements of revenues and expenditures, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian generally accepted accounting principles, and for such internal control as management determines is necessary to enable the preparation of 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 financial statements based on our audit. We conducted our audit 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 financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the 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 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 financial statements.

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Newfoundland and Labrador Pharmacy Board as at December 31, 2010, and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

St. John's, Newfoundland and Labrador
June 7, 2011

A handwritten signature in cursive script that reads "Harris Ryan".

CHARTERED ACCOUNTANTS

Suite 202 120 Stavanger Drive, St. John's, NL Canada A1A 5E8
Phone: (709) 726-8324 Fax: (709) 726-4525

STATEMENT OF FINANCIAL POSITION

FOR THE YEAR ENDED DECEMBER 31, 2010

	2010	2009
ASSETS		
CURRENT		
Cash	\$ 502,087	\$ 611,225
Accounts receivable (Note 3)	5,912	11,552
Prepaid expenses	7,170	6,885
	515,169	629,662
CAPITAL ASSETS (Note 4)	231,886	240,768
LONG TERM INVESTMENTS	457,262	300,000
	\$ 1,204,317	\$ 1,170,430
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable (Note 5)	\$ 129,526	\$ 133,915
Fees and licenses collected in advance (Note 6)	538,655	505,080
	668,181	638,995
NET ASSETS		
Invested in capital assets	231,886	240,768
Internally restricted - Discipline legal fund (Note 8)	130,000	120,000
Unrestricted	174,250	170,667
	536,136	531,435
	\$ 1,204,317	\$ 1,170,430

STATEMENT OF CHANGES IN NET ASSETS

FOR THE YEAR ENDED DECEMBER 31, 2010

	Invested in capital assets	Internally Restricted Discipline Legal (Note 8)	Unrestricted	2010	2009
NET ASSETS - BEGINNING OF YEAR	\$ 240,768	\$ 120,000	\$ 170,667	\$ 531,435	\$ 492,250
Excess of revenue over expenditures	(12,356)	-	17,057	4,701	39,185
Capital assets purchased	3,474	-	(3,474)	-	-
Transfer	-	10,000	(10,000)	-	-
NET ASSETS - END OF YEAR	\$ 231,886	\$ 130,000	\$ 174,250	\$ 536,136	\$ 531,435

STATEMENT OF REVENUES AND EXPENDITURES

FOR THE YEAR ENDED DECEMBER 31, 2010

	2010	2009
REVENUE		
Pharmacist licenses	\$ 335,270	\$ 328,900
Business licenses	193,200	188,600
Non-practicing licenses	2,625	2,625
Other	13,627	14,641
Student registration	7,850	9,100
	552,572	543,866
OTHER REVENUE		
Discipline recoveries	-	20,165
Interest	11,752	9,796
	11,752	29,961
	564,324	573,827
EXPENDITURES (Schedule 1)	163,872	151,877
ADMINISTRATIVE EXPENSES		
Salaries and benefits	339,389	316,629
Board	15,259	18,410
Secretary/Registrar	10,188	6,820
Discipline - legal	9,207	20,379
Other committees	8,870	7,204
Deputy and Assistant Registrars	8,214	7,139
Executive	2,074	954
Professional affairs co-ordinator	1,627	1,157
Complaints and discipline	923	4,073
	395,751	382,765
EXCESS OF REVENUE OVER EXPENDITURES	\$ 4,701	\$ 39,185

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED DECEMBER 31, 2010

	2010	2009
OPERATING ACTIVITIES		
Excess of revenue over expenditures	\$ 4,701	\$ 39,185
Item not affecting cash:		
Amortization of property, plant and equipment	12,357	12,860
	17,058	52,045
Changes in non-cash working capital:		
Accounts receivable	5,640	25,132
Accounts payable	(4,388)	1,677
Fees and licenses collected in advance	33,575	18,170
Prepaid expenses	(285)	(1,192)
	34,542	43,787
Cash flow from operating activities	51,600	95,832
INVESTING ACTIVITIES		
Purchase of property, plant and equipment	(3,476)	(3,566)
Purchase of long term investments	(157,262)	(10,878)
Cash flow used by investing activities	(160,738)	(14,444)
INCREASE (DECREASE) IN CASH FLOW	(109,138)	81,388
Cash - beginning of year	611,225	529,837
CASH - END OF YEAR	\$ 502,087	\$ 611,225

EXPENDITURES (SCHEDULE 1)

FOR THE YEAR ENDED DECEMBER 31, 2010

	2010	2009
Audit and accounting	\$ 14,420	\$ 11,585
Advertising and promotion	207	-
Bad debts	6,361	-
Dues, fees, taxes	4,310	3,894
Donations	450	-
Insurance	2,261	2,228
Bank charges and fees	7,288	5,982
Legal, other than discipline	6,185	11,577
Postage	5,861	4,872
Office supplies	7,637	5,792
Amortization, other	4,357	4,530
New database	-	325
Lease of office equipment	2,167	2,292
Telephone	7,295	6,939
Per capita assessments	30,163	30,153
Consulting fees	105	14,960
Computer programming	7,194	6,102
Professional development	550	550
Schedule of building expenditures (Schedule 2)	57,061	40,096
	\$ 163,872	\$ 151,877

BUILDING EXPENDITURES (SCHEDULE 2)

FOR THE YEAR ENDED DECEMBER 31, 2010

	2010	2009
Building		
Amortization	\$ 8,000	\$ 8,330
Utilities and maintenance	37,048	20,905
Taxes and insurance	12,013	10,861
	\$ 57,061	\$ 40,096

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2010

1. PURPOSE AND NATURE OF THE ORGANIZATION

The Newfoundland and Labrador Pharmacy Board is the statutory governing and self-regulatory body for the pharmacy profession in Newfoundland and Labrador. It supports and protects the health and well-being of the public and promotes excellence in the practice of pharmacy by setting and enforcing high standards of practice, competency and ethical conduct. The Board is a not-for-profit organization and as such is not subject to either federal or provincial income taxes.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Revenue Recognition

Fees and licenses are due in advance at November 30 of each year for the following calendar year. Fees and licenses are recognized as revenue in the year to which they apply. Interest revenue is recognized as earned. Cost recoveries resulting from Discipline Committee orders are recognized only when there is an established payment agreement in place with the member and the agreement terms are current or, if in the opinion of the Board, there is a high probability that the cost will be recovered.

Long term investments

Long term investments consist of non-redeemable guaranteed investment certificates which are recorded at fair value.

Capital assets

Capital assets are stated at cost less accumulated amortization. Capital assets are amortized over their estimated useful lives at the following rates and methods:

Buildings	4%	declining balance method
Furniture and equipment	20%	declining balance method
Computer equipment	30%	declining balance method

Contributed services

The Board and its members benefit from contributed services in the form of volunteer time for various committees. Due to the difficulty of determining its fair value, contributed services are not recognized in these financial statements.

(continues)

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2010

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

Financial instruments

In accordance with section 3855, Financial Instruments - Recognition and Measurement, financial instruments are classified into one of the following categories: held for trading, held to maturity, loans and receivables, available for sale or other financial liabilities. The classification determines the accounting treatment of the instrument. The Organization has made the following classifications for its financial assets and financial liabilities:

Cash	Held for trading measured at fair value
Long term investments	Available for sale measured at fair value
Accounts receivable	Loans and receivables measured at amortized cost
Accounts payable	Other liabilities measured at amortized cost

Financial instruments measured at amortized cost are initially recognized at fair value and then subsequently measured at amortized cost.

Measurement uncertainty

The preparation of financial statements in conformity with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Such estimates are periodically reviewed and any adjustments necessary are reported in earnings in the period in which they become known. Actual results could differ from these estimates.

Capital management

Capital is comprised of the organization's net assets and any debt that it may issue. As at December 31, 2010, the organization's net asset position was \$536,136 and it had no outstanding debt. The organization's objectives when managing capital is to ensure it maintains adequate capital to continue to support its mandate and to protect its ability to meet its on-going liabilities. The organization is not subject to externally imposed requirements on capital.

Future changes in significant accounting policies

The following accounting standards have been issued by the Canadian Institute of Chartered Accountants (CICA) but are not yet effective for the organization. The organization is currently evaluating the effect of adopting these standards, which it expects to do in fiscal year 2012.

The Accounting Standards Board will be implementing Part III of the CICA Handbook Accounting Standards for Not-for-Profit Organizations effective January 1, 2012. The organization will be assessing the impact of the new standards on its financial statements over the next year. Early adoption is permitted for the new standards.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2010

3. ACCOUNTS RECEIVABLE

	2010	2009
Discipline recoveries	\$ -	\$ 7,261
Accrued interest	4,417	4,292
Other receivable	1,495	-
	\$ 5,912	\$ 11,553

4. CAPITAL ASSETS

	Cost	Accumulated amortization	2010 Net book value	2009 Net book value
Land	\$ 26,000	\$ -	\$ 26,000	\$ 26,000
Building	472,133	280,127	192,006	200,006
Computer equipment	25,407	19,956	5,451	5,203
Furniture and equipment	54,544	46,115	8,429	9,559
	\$ 578,084	\$ 346,198	\$ 231,886	\$ 240,768

5. ACCOUNTS PAYABLE

	2010	2009
Trade payables and accruals	\$ 19,713	\$ 29,763
HST and source deductions	76,475	74,868
Salaries, pension and severance	33,338	29,284
	\$ 129,526	\$ 133,915

6. FEES PAID IN ADVANCE

	2010	2009
Practicing members fees	\$ 344,670	\$ 315,150
Business licenses	191,360	187,680
Non-practicing members fees	2,625	2,250
	\$ 538,655	\$ 505,080

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2010

7. COMMITMENTS

The organization has entered into lease agreements for rental of office equipment requiring payments over the next three years as follows:

2011	\$	1,992
2012		1,992
2013		996
		<hr/>
	\$	<u>4,980</u>

8. INTERNALLY RESTRICTED FUNDS

The Board has internally restricted \$130,000 of unrestricted net assets to the Discipline Legal Fund to be used as a contingency against any exceptional litigation fees resulting from any future disciplinary actions. The balance in this fund will be reviewed annually and maintained at a level determined by the Board.

9. FINANCIAL INSTRUMENTS

Financial Risk Factors

The organization has exposure to liquidity risk and market risk

Liquidity Risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The entity monitors its cash balances and cash flow from operations to meet its requirements. The entity is exposed to this risk mainly in respect of its accounts payable.

Market Risk

Market risk is the risk that the fair value of future cash flows of a financial instrument will fluctuate because of changes in market rates. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk. The entity is mainly exposed to interest rate risk.

Interest rate risk

The organization has long term investments in non-redeemable guaranteed investment certificates and has no debt. The interest bearing investments have exposure to interest rate risk due to the fixed rates on these investments.

Fair value

The company's carrying value of cash, accounts receivable, and accounts payable approximates its fair value due to the immediate or short term maturity of these instruments.

The long term investments are carried at fair value.

COMMITTEES

COMPLAINTS AUTHORIZATION COMMITTEE

-responsible for considering allegations about the professional practice of pharmacists referred to it by the Secretary-Registrar.

Donald Mifflin, Chair
Current Board Members

DISCIPLINARY PANEL

-responsible for considering complaints referred to it by the Complaints Authorization Committee.

Bernd Staeben, Chair
Colleen Abbott-Hibbs
Mike Batt
Barry Downey
Stephen Gillingham
Denise O'Brien
Connie Burt, alternate
Janice Chalker
Walter Fleming
Jeff Fost
Ron Pomeroy
Wanda Spurrell
Jerry Young
Bill Simmons, alternate
Kathy Ann Cormier, lay representative

FINANCE COMMITTEE

-responsible to advise the Board on all matters pertaining to finance, including budgets, investments, long-term financing and any other financial matters as designated by the Board.

Linda Hensman, Chair
Sandra Carey
Brian Healy
Eugene Toope

JOINT COMMITTEE ON STRUCTURED PRACTICE EXPERIENCE

-makes recommendations to the Newfoundland & Labrador Pharmacy Board and the Council of the School of Pharmacy on all matters pertaining to the structured practice experience program including the placement of students, appointment and orientation of preceptors, educational materials and methods of evaluation to be used during the practice experience periods.

Pamela Carter
Ray Gulliver
Evelena Verge

LEGISLATIVE COMMITTEE

-responsible for pharmacy legislation including reviewing existing legislation and for drafting any amendments to current legislation.

Derrick Hierlihy, Chair
Carson Collins
David Galway
Brian Healy
Keith Hogan
Seumas Gibbons
Susan Gillingham
Trent White
Jerry Young

PROFESSIONAL PRACTICE COMMITTEE

-responsible for professional practice issues and the advancement of the scope of practice of pharmacists.

-may strike sub-committees or working groups on relevant professional practice areas with the approval of the Executive.

Sandra Carey, Chair

Sub-Committee on Long Term Care

Darlene Mansfield, Chair
Dwight Ball
Brian Healy
Derek Long
Jason Ryan
Ken Walsh

Sub-Committee on Advanced Practice

Sandra Carey, Chair
Sheldon Baines
Dwight Ball
Jason Druken
Scott Edwards
Debbie Kelly
Ashley Layden
Joanna McIsaac
Christina Tulk
Jerry Young

Sub-Committee on Pharmacy Technology Standards

Sandra Carey, Chair
Sheldon Baines
Juan Edwards
Rod Forsey
Elizabeth Woodford
Margot Priddle

Sub-Committee on Pharmacy Technician

Regulation

Sandra Carey, Chair
Keith Bailey
Lois Battcock
Rod Forsey
April LeGrow
Patricia Spurrell
Ken Walsh
Madonna Whelan
Pat Williams

Sub-Committee on Safe Medication Practices

Sandra Carey, Chair
Amy Conway
Rod Forsey
Susan Gladney-Martin

REGISTRATION & LICENSING COMMITTEE

-responsible for all matters relating to the requirements for initial registration and annual licensing of pharmacists, continuing pharmaceutical education and continuing professional development, and any other matters referred to it by the Board.

Barbara Thomas, Chair	Kraig Manuel
Darren Bursey	Jeremy Parsons
Patricia Clarke	Gerald Peckham
Scott Dawe	Leslie Phillips
Jason Druken	Jody Pomeroy
Susan Gladney-Martin	Jeremy Reid
Lynn Hartery	Jason Ryan
Debbie Kelly	Barbara Scaplen
Jason Kielly	Heather Seeley
Derek Long	Christina Tulk

EXTERNAL REPRESENTATIVES

Association of Registered Nurses of NL Nurse Practitioner Standards Committee

Margot Priddle

Canadian Council on Continuing Education in Pharmacy Board of Directors

Barbara Thomas

MUN School of Pharmacy Academic Council

Don Rowe

National Association of Pharmacy Regulatory Authorities Board of Directors

Linda Hensman

National Association of Pharmacy Regulatory Authorities National Advisory Committee on Licensing

Juan Edwards

National Committee on Regulated Pharmacy Technicians

Melanie Healey

Newfoundland and Labrador Centre for Health Information Pharmacy Network Governance Advisory Committee

Keith Bailey

Newfoundland and Labrador Interchangeable Formulary Advisory Committee

Keith Bailey

Pharmacy Examining Board of Canada Board of Directors

Karen Mercer

Provincial Advisory Committee on Opioid Treatment Services

Don Rowe

Provincial Pharmacy Advisory Committee for Continuing Professional Development

Arlene Crane



Newfoundland and Labrador Pharmacy Board

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