

# Newfoundland and Labrador Pharmacy Board



## By-Laws

July 2016

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## **Part I By-laws**

1. These by-laws may be cited as the Pharmacy Board By-Laws.
2. New by-laws or changes in the by-laws may be enacted from time to time by the board in accordance with section 11 of the act.

## **Part II Definitions**

3. In these by-laws,
  - a) unless the context otherwise requires or a separate definition is provided, words and phrases defined in the *Pharmacy Act, 2012* hereinafter called "the act", or the regulations passed pursuant to the act have the same meaning in these bylaws.
  - b) words imparting the singular shall include the plural and vice versa, words imparting the masculine gender shall include females, and words imparting persons shall include bodies corporate.
  - c) "Registrant" means any person registered with the Board in accordance with sections 14, 15, 15 and 17 of the act.

## **Part III Members of the Board**

4. The board is defined in subsection 5(1) of the act and consists of:
  - a) seven members elected from and by pharmacists in accordance with the by-laws;
  - b) two members appointed by the minister under subsection 6(1) of the act who are not pharmacists;
  - c) two members appointed by the board under subsection 6(2) of the act who are not pharmacists;
  - d) the Dean of the School of Pharmacy of Memorial University of Newfoundland and Labrador;
  - e) a pharmacy technician elected from and by pharmacy technicians in accordance with the by-laws; and
  - f) the Registrar of the board appointed by the other members of the board in accordance with the by-laws, who shall not vote on a matter before the board, its Executive Committee or another committee of the board.

## **Part IV Board Composition**

### **Electoral Zones and Representation**

5. Subject to the act and these by-laws, the board may:
  - a) divide the province into electoral zones for the purpose of nomination for election of members to the board, and the holding of general meetings of the board, and may rearrange the boundaries of such zones and increase or decrease their number, provided that such rearrangement shall not take place more often than once in every two year period; and

- b) specify the number of persons who may be elected as a member or members of the board from the electoral zones, and the number from one zone may be specified to vary from the number from another zone.
6. For the purposes of electing members of the board, Newfoundland and Labrador is divided into seven zones. One member of the board shall be elected from each of the electoral zones, with the exception of Zone 7, from which two members of the board shall be elected. The seven zones are as follows:
- a) Zone 1 - metropolitan St. John's area, Conception Bay South to Holyrood, and Southern Shore to Trepassey;
  - b) Zone 2 – the Conception Bay North/Trinity South peninsula, beginning at Avondale and extending west to Port Blandford, including Placentia and the Cape Shore to (but not including) Trepassey, the Burin peninsula, the Trinity North/Bonavista South Peninsula;
  - c) Zone 3 – west of Port Blandford to the Hampden junction, and that part of the South Coast that does not include Burgeo and Ramea;
  - d) Zone 4 – west of the Hampden junction including White Bay, Northern Peninsula, Labrador, West Coast extending to Port-aux-Basques, and that part of the South Coast that includes Burgeo and Ramea;
  - e) Zone 5 – pharmacists employed the majority of their time in a hospital;
  - f) Zone 6 – pharmacy technicians; and
  - g) Zone 7 – “at large”
7. In the event a member requires a ruling on the exact limits of zone boundaries, the board's ruling will be final.
8. Elected members of the board shall be elected for a term of three years, which shall commence at the end of the Annual General Meeting of the board at which the results of the election were proclaimed.
10. Pharmacists are entitled to be nominated or vote in the zone in which they practice the majority of their time or zone 7 with the exception of:
- a) pharmacists who practice the majority of their time in a hospital who are entitled to be nominated or vote only in zone 5 or zone 7; and
  - b) pharmacists who do not have a principal place of practice where the principal place of residence shall decide the zone for nominating and voting purposes.
11. Pharmacy technicians are entitled to be nominated or vote only in Zone 6.
12. The Registrar shall act as returning officer for the board elections.

### **Election Procedures**

13. The election of board members shall take place each year in accordance with the following schedule.
- a) Elections for Zones 1 and 4 shall be held in the year 2015 and every three years thereafter;
  - b) Elections for Zones 2 and 3 shall be held in the year 2016 and every three years thereafter; and
  - c) Elections for Zones 5, 6 and 7 shall be held in the year 2017 and every three years thereafter.
14. Nominations shall proceed as follows:
- a) Registrants shall be advised of their right to nominate at least 90 days prior to the Annual General Meeting of the board.

- b) Registrants may nominate more than one registrant in their zone.
  - c) Nominations must be signed by at least two registrants entitled to vote in the zone for which the nomination is made and shall bear the consent of the registrant nominated.
  - d) Nominations must be received by the Registrar at least 60 days prior to the Annual General Meeting of the board.
15. If the number of valid nominations for a zone is equal to or less than the number of members of the board to be elected from that zone, the persons nominated shall be declared elected.
  16. If the number of valid nominations for a zone is greater than the number of members of the board to be elected from that zone, an election shall take place and voting shall be conducted by any means that maintains the security and confidentiality of the voting process.
  17. If the call for nominations does not produce enough nominees to fill the vacancies, the registrants entitled to vote in the zone shall be so advised and invited to resubmit nominations ("the second call").
  18. In the event that no nominations are received within 30 days of the second call, the vacancy shall be filled by an appointment of the board.
  19. Registrants shall be advised of their right to vote at least 30 days prior to the Annual General Meeting of the board.
  20. Voting results shall be tabulated by the returning officer not less than 7 days prior to the Annual General Meeting of the board.
  21. In the case of a tie vote, the Registrar shall immediately conduct a recount, and if the results are not altered must select the successful nominee by random draw.

### **Vacancies**

22. Where a vacancy occurs in the elected membership of the board, the remaining members of the board shall appoint another member from the zone represented by the former member, and the replacement member shall hold office until the next Annual General Meeting, unless the term of office of the replacement member is terminated earlier.
23. Where a vacancy occurs in the appointed membership of the board,
  - a) If the member was appointed by the Minister, the Minister may appoint a person to fill the vacancy, and the replacement member shall hold office for the remainder of the term of the person in whose place the replacement member is appointed, unless the term of the replacement member is terminated earlier.
  - b) If the member was appointed by the board, the board may appoint a person to fill the vacancy, and the replacement member shall hold office for the remainder of the term of the person in whose place the replacement member is appointed, unless the term of the replacement member is terminated earlier.
24. The exercise of the powers of the board shall not be impaired by reason of a vacancy in its membership.

## Other

25. If it is later discovered that there was some defect in the election or appointment of a person purporting to be a member of the board, all acts performed by the board shall be as valid and effectual as if that defect had not existed.

## Part V Officers of the Board (Executive Committee)

26. The officers of the board shall be referred to as the Executive Committee, and shall consist of:
  - a) the immediate Past-Chair;
  - b) the Chair;
  - c) the Vice-Chair;
  - d) an Executive Member; and
  - e) the Registrar (*ex-officio*).
27. The election of officers is to take place at a meeting of the board to be held within 15 days of the Annual General Meeting.
28. The Vice-Chair and the Executive Member shall be elected by the members of the board from the members of the board by open vote or by secret ballot if requested by any member of the board.
29. The immediate Past-Chair may be a voting member of the Executive so long as he or she is a voting member of the board.

## Term of Office

30. The term of office for Executive Committee members shall be as follows:
  - a) The term of office of the Executive Member shall commence upon his/her election and conclude at the end of the Annual General Meeting of the board that follows his/her election to that office.
  - b) The term of office of the Vice-Chair shall commence upon his/her election and conclude at the end of the Annual General Meeting of the board that follows his/her election to that office. At the conclusion of the Vice-Chair's term of office he/she shall assume the office of Chair.
  - c) The term of office of the Chair shall be a period of one year, concluding at the end of the Annual General Meeting of the board that follows his/her having assumed that office. At the conclusion of the Chair's term of office he/she shall assume the office of immediate Past-Chair.
  - d) The term of office of the immediate Past-Chair shall be a period of one year, concluding at the end of the Annual General Meeting of the board that follows his/her having assumed that office.

## Vacancies

31. In the event of a vacancy in the officers of the board, the board shall appoint a replacement at the next meeting of the board, and the replacement member shall hold office for the remainder of the term of the person in whose place the replacement member is elected, unless the term of office of the replacement member is terminated earlier.

32. Where a vacancy occurs in the office of Chair, the Vice-Chair shall immediately assume the office of Chair and shall hold office for the remainder of the term of the previous Chair, unless the term of office of the replacement Chair is terminated earlier.
33. The exercise of powers of the Executive Committee shall not be impaired by reason of a vacancy in its membership, provided there remain three members, two of whom must be elected board members, to exercise such powers.

### **Powers**

34. The Chair shall perform all duties incident to the office of Chair and shall have other powers and duties as may from time to time be assigned to the Chair by the board.
35. The Vice-Chair shall be vested with all powers and shall perform all the duties of the Chair in the absence of the Chair. The Vice-Chair shall also have such other powers and duties as may from time to time be assigned to the Vice-Chair by the board.
36. The Executive Committee shall consider and take action upon all matters delegated to it by the board and all matters which require attention between meetings of the board.
37. In taking action pursuant to Section 36 of these by-laws, the Executive Committee may exercise all the powers of the board subject to any restrictions imposed by resolution of the board or by the act, the regulations or these by-laws.
38. All acts of the Executive Committee shall, if within the scope of its authority, be effective as the acts of the board, unless and until amended or rescinded by the board.
39. If it is later discovered that there was some defect in the election or appointment of a person purporting to be a member of the Executive Committee, all acts performed by the Executive Committee shall be as valid and effectual as if that defect had not existed.

### **Registrar**

40. The board shall appoint the Registrar of the board for such term of office and on such conditions as the board may deem advisable.
41. Employment contracts between the Registrar and the board, which shall include identifying the duties of the Registrar as well as payment for those duties, shall be negotiated by the Executive Committee.
42. The Registrar is responsible for planning and implementing the work of the board, in accordance with the policies and objectives approved by the board.
43. The Registrar is responsible for carrying out the duties and responsibilities conferred on the Registrar by the Pharmacy Act and any regulations passed pursuant to it.
44. The Registrar is responsible for the administration of the board office and its staffing and management, and is accountable to the board with respect to it.
45. The Registrar is responsible to the board for the management and operation of the Apothecary Hall Trust.
46. The Registrar is responsible for controlling matters relating to the finances of the board.

47. The Registrar shall perform such additional duties as may from time to time be required by the board.

## **Part VI Meetings of the Board**

48. The Chair shall preside at all meetings of the Board. The Chair shall regulate the order of such meetings and shall decide all questions of order.
49. At all meetings of the Board, the Robert's Rules of Order shall be observed in addition to the following:
- a) A quorum of the board is 50% plus one member, one of whom shall be a member appointed to represent the public interest.
  - b) All meetings shall be called to order as soon after the hour of meeting as there shall be a quorum present.
  - c) The Chair may cancel any meeting if there is not a quorum present within 30 minutes after the meeting was due to commence.
  - d) No motion shall be discussed unless it has been seconded.
  - e) All speakers must address the Chair.
  - f) The Chair's decision on a point of order shall be final.
50. While the goal is consensus, at all meetings of the board, a majority vote of the board members present and entitled to vote shall decide any issue before the board.
51. Where there is a tie vote on a motion or resolution of the board, that motion or resolution shall be considered to be defeated.
52. A meeting of the board may be held by use of teleconference or equivalent simultaneous audio or audiovisual means, and in such event, the members participating in such meetings shall be deemed for all purposes to be present at the meeting.
53. A resolution signed by all the board members entitled to attend meetings of the board shall have the same force and effect as a resolution duly passed at a regularly convened meeting of the board.
54. A Board member may waive notice of a meeting of the board in writing, by telephone, facsimile transmission or other electronic means.

### **Regular Board Meetings**

55. The board shall meet not less than three times in each calendar year at such times and places as it may determine.
56. Where possible, board members will be notified at least 14 calendar days prior to each regular meeting of the board.

### **Special Board Meetings**

57. The Chair or a majority of voting board members may call a special meeting of the board, upon notice delivered to all board members, at least twenty-four hours before the time fixed for the meeting, stipulating the business to be considered at such a meeting.

### **Annual General Meetings**

58. The board shall hold an Annual General Meeting at such a time and place as may be decided by the board, to which all pharmacists and pharmacy technicians shall be invited.
59. For all Annual General Meetings, notice of at least 14 calendar days shall be given to all pharmacists and pharmacy technicians and such notice shall contain the particulars of business to be transacted at the meeting.

### **Executive Committee Meetings**

60. The Executive Committee shall meet at the call of the Chair who shall preside at all meetings at which he or she is present. Meetings may also be held at the request of the majority of the Executive Committee.

## **Part VII Committees and Other Appointments**

61. Subject to the act, the regulations and these by-laws, committees appointed by the board shall serve for a term as specified in the committee's terms of reference, or in the absence thereof, at the pleasure of the board.

### **Auditor**

62. The Board shall appoint an auditor or a firm of auditors, who shall be a chartered accountant or a firm of chartered accountants, on an annual basis.
63. The auditor shall examine all accounts, books, and securities of the board and shall submit a statement of the affairs and financial position of the board on an annual basis.
64. The auditor shall receive remuneration as approved by the board.

### **Solicitor**

65. The board may appoint a solicitor or other such agent, as it deems appropriate from time to time.
66. The solicitor shall receive remuneration as approved by the board.

## **Part VIII Registration and Licensing**

### **Registers**

67. The Registrar shall establish and maintain registers for all categories of registration as follows:
  - a) pharmacists;
  - b) pharmacy interns;
  - c) pharmacy students; and
  - d) pharmacy technicians.

68. The Registrar shall establish and maintain a register of all licensed pharmacies.

### **Information on Registers**

69. The register of pharmacists shall contain each pharmacist's:

- a) proper name;
- b) home address;
- c) home telephone number;
- d) e-mail address;
- e) place of employment;
- f) registration type;
- g) voting zone;
- h) date of birth;
- i) gender; and
- j) notation of any additional authorizations granted by the board.

70. The register of pharmacy interns shall contain each pharmacy intern's:

- a) proper name;
- b) home address;
- c) home telephone number;
- d) e-mail address;
- e) date of birth; and
- f) gender.

71. The register of pharmacy students shall contain each pharmacy student's:

- a) proper name;
- b) home address;
- c) home telephone number;
- d) current mailing address;
- e) current telephone number;
- f) e-mail address;
- g) expected year of graduation;
- h) date of birth; and
- i) gender.

72. The register of pharmacy technicians shall contain each pharmacy technician's:

- a) proper name;
- b) home address;
- c) home telephone number;

- d) e-mail address;
  - e) place of employment;
  - f) registration type;
  - g) voting zone;
  - h) date of birth; and
  - i) gender.
73. The register of licensed pharmacies shall contain for each pharmacy:
- a) corporate name;
  - b) trading name;
  - c) mailing address;
  - d) telephone number;
  - e) e-mail address;
  - f) zone;
  - g) the name of the pharmacist-in-charge;
  - h) the names of any pharmacists, pharmacy interns, pharmacy students or pharmacy technicians employed by that pharmacy;
  - i) the names, addresses and professions of all persons who own the pharmacy or partners in a partnership that owns or operates the pharmacy; and
  - j) the names, addresses and professions of all persons who are shareholders of a company that owns or operates the pharmacy, except where the company is a publicly traded corporation.
74. Any registrant who changes his or her place of employment for more than 45 consecutive days shall make the necessary change to the register.

### **Certificate of Initial Registration**

75. Once a person's name has been entered in the register of pharmacists or the register of pharmacy technicians, that person shall be given a certificate of initial registration under the seal of the board and signed by the Chair and the Registrar, or those other officers or persons that the board may prescribe.

### **Annual Certificate of Registration**

76. Each year, the Registrar shall issue an annual certificate of registration to a person who has applied and met the requirements of the act and the regulations.
77. An annual certificate of registration shall expire on December 31 of each year or on the effective date of cancellation or suspension of the certificate of registration, whichever date occurs first.

### **Initial Pharmacy Licence**

78. Not less than 30 days before opening or acquiring a pharmacy, a corporation, partnership or individual must apply to the board for approval and such application shall include, at a minimum:
- a) the name of the proposed pharmacist-in-charge;

- b) the names, addresses and professions of all persons who own the pharmacy or partners in a partnership that owns or operates the pharmacy; and
  - c) the names, addresses and professions of all persons who are shareholders of a company that owns or operates the pharmacy, except where the company is a publicly traded corporation.
  - d) the proposed corporate name and trading name of the pharmacy;
  - e) the proposed date of opening or acquisition of the pharmacy; and
  - f) the address of the proposed pharmacy.
79. Prior to approving an application to open a new pharmacy, the Registrar or a designated agent may:
- a) conduct a pre-opening assessment of the proposed pharmacy; and
  - b) require the pharmacist-in-charge to rectify any deficiencies noted in the assessment prior to being permitted to open for business.
80. A pharmacy licence is non-transferable but may be amended to reflect:
- a) a change of pharmacist-in-charge;
  - b) a change of name of the corporate or trading name of the pharmacy; or
  - c) a change of location of the pharmacy.
81. Any relocation or renovation of an existing pharmacy shall be subject to an application and assessment process intended to verify that the pharmacy continues to meet the minimum standards of pharmacy operation and standards of pharmacy practice approved by the board.

### **Annual Pharmacy Licence**

82. Each year, the Registrar shall issue an annual pharmacy licence to a pharmacist-in-charge who has applied and met the requirements of the act and the regulations.
83. An annual pharmacy licence shall expire on December 31 of each year or on the effective date of cancellation or suspension of the licence, whichever date occurs first.

### **Conditional Pharmacy Licence**

84. A pharmacist-in-charge may apply to the Board for a conditional pharmacy licence if there are special circumstances whereby the pharmacy may not meet all the requirements of the Board's Standards of Pharmacy Operation, Standards of Pharmacy Practice, or any requirements of the Pharmacy Regulations at the time of opening or licence renewal.
85. The application referred to in section 84. must be in writing, be signed by the pharmacist-in-charge, describe the special circumstances and be accompanied by the applicable fee.
86. The Board may consider an application for conditional licensure and, if it deems the circumstances to reasonably justify the issuing of a conditional licence and it is satisfied that the deficiencies will be rectified in a timely manner, may issue a conditional pharmacy licence for a period of time not to exceed 90 days.
87. If after the 90 day period, the deficiencies have not yet been rectified, the pharmacist-in-charge may apply to have the conditional licence extended.

88. The application referred to in section 87. must be in writing, be signed by the pharmacist-in-charge, describe the circumstances surrounding the request for an extension and be accompanied by the applicable fee.
89. The Board may consider a request for an extension of the conditional licence and, if it deems the circumstances to reasonably justify the requested extension, issue a new conditional licence for an additional 60 days.
90. The extension referred to in section 89. may be granted no more than once for a total period of conditional licensure not to exceed 150 days.
91. Once all deficiencies have been rectified, the pharmacist-in-charge must apply for the usual unconditional pharmacy licence, which shall be accompanied by the applicable fee.
92. If the Board is satisfied that the deficiencies have been rectified and that the pharmacy is now in compliance with the Board's Standards of Pharmacy Operation, Standards of Pharmacy Practice, and all requirements of the Pharmacy Regulations, it may issue a usual unconditional pharmacy licence.

## **Part IX Code of Ethics and Professional Misconduct**

### **Code of Ethics**

93. The Board adopts a Code of Ethics for registrants, appended to these by-laws (see Appendix A)

### **Professional Misconduct Defined**

94. The term professional misconduct for the purposes of considering an allegation or a complaint and the institution of disciplinary proceedings includes but is not limited to including:
  - a) breach of the Code of Ethics or Standards of Pharmacy Practice approved by the board;
  - b) failure to abide by the terms, conditions or limitations of a certificate of registration;
  - c) practicing pharmacy while not covered by a policy of professional liability insurance acceptable to the board;
  - d) providing false or misleading information or documents to the board with respect to his or her qualifications or eligibility for registration or renewal ;
  - e) falsifying or failing to maintain appropriate patient and prescription records;
  - f) announcing or holding out by a registrant that the registrant has special qualifications that are not in fact possessed by the registrant;
  - g) practicing pharmacy while the ability to practice pharmacy is impaired;
  - h) knowingly permitting the premises in which a pharmacy is located to be used for unlawful purposes;
  - i) knowingly charging or submitting a false or misleading amount for the dispensing of a prescription or for services rendered to a patient;
  - j) charging or submitting an amount or fee for services rendered to a patient that is excessive or unreasonable in relation to the service provided;
  - k) dispensing or selling an excessive, improper or unreasonable amount of a drug;
  - l) improperly using the authority to practice pharmacy;

- m) having a conflict of interest;
- n) refusing to allow the Registrar or a designated agent to enter at a reasonable time the pharmacy in which the registrant is engaged in the practice of pharmacy for the purpose of an assessment or investigation;
- o) practicing outside of the registrant's area of competence;
- p) displaying a lack of knowledge, skill or professional judgment or showing disregard for the welfare of the public to an extent that demonstrates unfitness to carry out the responsibilities of a pharmacist or pharmacy technician; or
- q) such conduct or acts relevant to the practice of pharmacy that would reasonably be regarded as disgraceful, dishonorable or unprofessional.

**Part X**  
**Reimbursement of Expenses**

95. The board may reimburse the expenses of board members, adjudication tribunal members or other persons attending pre-approved provincial or national meetings as representatives of NLPB, or conducting pre-approved NLPB business in accordance with the Policy on Expense Claims approved by the board (see Appendix B).

# Newfoundland and Labrador Pharmacy Board



## Code of Ethics

September 2014

## **Appendix A**

### **Preamble**

Pharmacy professionals play a pivotal role in the continuum of health care provided to patients. The responsibility that comes with being an essential health resource is significant. To retain the high level of trust and respect that is given to pharmacists and pharmacy technicians by patients, the public and other health professionals, pharmacists and pharmacy technicians must be both competent and professional in all they do. As professionals, pharmacists and pharmacy technicians are challenged and expected to abide by a higher standard of conduct.

Ethics are the foundation for professional behavior, actions and attitudes. The Newfoundland and Labrador Pharmacy Board Code of Ethics reflects what the pharmacy profession stands for and reinforces what is unique about the contribution registrants make to patients, to society and to their professions. Consistent ethical behavior creates a positive image of the individual that extends to the image of the profession. In contrast, unethical practices and decisions create a negative image of and diminish trust and credibility about the individual and raise suspicion about the profession.

The Code of Ethics supports the NLPB in fulfilling its mandate to protect the public, enables the NLPB to provide direction to registrants faced with ethical dilemmas and serves as a benchmark for monitoring and addressing registrant's conduct.

### **Ethical Principles**

1. Registrants hold the health and safety of each patient to be of primary consideration.
2. Registrants maintain a professional relationship with each patient.
3. Registrants respect the autonomy, values and dignity of each patient.
4. Registrants respect and protect the patient's right to confidentiality.
5. Registrants respect the patient's right to receive care.
6. Registrants observe the law, preserve high professional standards and uphold the dignity and honour of the profession.
7. Registrants continuously improve their professional knowledge and skills.
8. Registrants cooperate with colleagues and other health care professionals to ensure optimal patient-centred care.
9. Registrants contribute to the health care system and to societal health needs.
10. Registrants act to enhance and nurture the profession of pharmacy.

## **Appendix A**

### **Guidelines for Application**

#### **1. Registrants hold the health and safety of each patient to be of primary consideration.**

- 1.1. Registrants place the health and well-being of their patients at the centre of their professional practice.
- 1.2. Registrants use their specialized knowledge and skills to make informed decisions that are in best interests of their patients and the public.
- 1.3. Registrants provide prescription and non-prescription medications, services and health related-products that are safe, effective and of good quality.
- 1.4. Registrants advocate for and protect the well-being of each patient, especially those who are vulnerable or disenfranchised.
- 1.5. Registrants take all reasonable steps to prevent harm to patients.

#### **2. Registrants maintain a professional relationship with each patient.**

- 2.1. Registrants respect the professional relationship with the patient and act with honesty, integrity and compassion in such a way as to build the patient's trust and confidence in the registrant.
- 2.2. Registrants treat all those they serve with courtesy and respect.
- 2.3. Registrants listen to patients to seek understanding of the patient's needs, values and desired health goals.
- 2.4. Registrants engage in patient-centred care and encourage patients to participate in decisions regarding their health.
- 2.5. Registrants maintain appropriate professional boundaries with patients and ensure any relationship is only for the benefit of those they serve.
- 2.6. Registrants limit treatment of themselves or immediate family members only to minor conditions, emergency circumstances or when another appropriate health professional is not readily available.

#### **3. Registrants respect the autonomy, values and dignity of each patient.**

- 3.1. Registrants recognize and respect that each patient has different needs, beliefs, values, experiences, and preferences that will influence their attitudes towards health care and their desired health goals.
- 3.2. Registrants provide their patients with information that is truthful, accurate, objective, and understandable so that the patients are able to make informed choices about their health care.
- 3.3. Registrants are committed to providing care that is sensitive to, but not prejudiced by, race, religion, social or marital status, gender, sexual orientation, age or health.
- 3.4. Registrants respect the right of a competent patient to make informed decisions about their care including the choice to refuse treatment, care or professional services.
- 3.5. Registrants respect the dignity of patients with diminished competence and seek to involve them, to an appropriate extent, along with their agent or caregiver, in decisions regarding their health.

## **Appendix A**

### **4. Registrants respect and protect the patient's right to confidentiality.**

- 4.1. Registrants understand, respect and comply with all relevant legislation pertaining to the privacy and confidentiality of personal health information.
- 4.2. Registrants protect the patient's privacy during consultations and keep confidential all information acquired in the course of professional practice.
- 4.3. When collecting personal health information, registrants inform patients of the purposes for collecting the information, any potential uses of the information, and who may be expected to have access to it.
- 4.4. Registrants only collect or access personal health information for the purposes of providing care to the patient.
- 4.5. Registrants only use or disclose personal health information with the consent of the patient, unless the consent is exempted by law.
- 4.6. Registrants only use or disclose personal health information for the purposes for which it was collected, except with the consent of the patient or as required by law.
- 4.7. Before using or disclosing personal health information registrants take reasonable steps to ensure that the information is accurate, complete and up-to-date.

### **5. Registrants respect the patient's right to receive care.**

- 5.1. Registrants provide appropriate medications and services to their patients.
- 5.2. Registrants who are unable to provide appropriate medications or services to their patients take reasonable steps to ensure patient care is not jeopardized.
- 5.3. Registrants who do not provide medications or services to patients because of a conscientious objection, including personal, moral, or religious reasons, inform pharmacy management of their objections at the earliest possible opportunity. Pharmacy management provides reasonable accommodation of the registrant's right of conscience and develops an appropriate means to ensure the medications or services are provided in as timely and convenient a manner as possible.
- 5.4. Registrants play a role in assisting patients to navigate the healthcare system, including referring them to other appropriate healthcare providers, services and community resources.
- 5.5. Registrants continue to provide services to their patients until the services are no longer wanted or required, until another provider has assumed responsibility for the patient or until the registrant has provided reasonable notice of termination of the relationship.
- 5.6. While there is no expectation that medications and services are provided free of charge, registrants will not abandon the professional relationship with the patient simply because the patient is unable to pay.
- 5.7. Registrants plan for continuity of care to their patients in the event of conscientious objection, labour disputes, pharmacy relocation or closure, natural disasters or situations where continuity of care may be interrupted.

## **Appendix A**

### **6. Registrants observe the law, preserve high professional standards and uphold the dignity and honour of the profession.**

- 6.1. Registrants obey the laws, regulations, standards and policies of the profession, both in letter and in spirit.
- 6.2. Registrants do not condone unethical or unprofessional conduct by colleagues, co-workers or other healthcare professionals and report, such behaviour to the appropriate authorities.
- 6.3. Registrants embrace the ethical principles of the profession and do not engage in activity that will undermine public trust in or bring discredit to the profession.
- 6.4. Registrants do not jeopardize another registrant's ability to provide optimal patient care or obey the laws, regulations, standards and policies of the profession.
- 6.5. Registrants raise concern if policies, systems, working conditions, or the actions, performance or health of others has the potential to compromise patient care or public safety or is in conflict with the laws, regulations, standards or policies of the profession.
- 6.6. Registrants do not practice under conditions which compromise their freedom to exercise professional judgment or which cause a deterioration of the quality of their professional service or care.
- 6.7. Registrants recognize and avoid conflicts of interest that may arise in the course of their work. If conflicts of interest do arise, they should be disclosed and addressed in the best interest of the patient and public safety as soon as possible.
- 6.8. Registrants do not offer inducements to, or enter into arrangements with, prescribers that could affect the prescriber's independent professional judgment in prescribing or that could interfere with the patient's right of choice of a pharmacy.
- 6.9. Registrants do not accept inducements or have arrangements with others that could reasonably be perceived as affecting the registrant's independent professional judgement or affect the quality of patient care.
- 6.10. Registrants do not offer inducements to patients that are conditional on or related to the patient obtaining medications or services from the registrant.
- 6.11. Registrants only participate in advertising and promotion that upholds the dignity and honour of the profession and which are within the boundaries of the law.

### **7. Registrants continuously improve their professional knowledge and skills.**

- 7.1. Registrants are responsible for continually evaluating and improving their professional knowledge and skills.
- 7.2. Registrants are aware of the limitations of their knowledge and skills and only practice within the boundaries of their professional competence.
- 7.3. Registrants respond constructively to the outcomes of quality assurance assessments as well as other evaluations and reviews of their professional performance and undertake additional education and training when required.

## **Appendix A**

### **8. Registrants cooperate with colleagues and other health care professionals to ensure optimal patient-centred care.**

- 8.1. Registrants respect the values and abilities of colleagues and other health care professionals.
- 8.2. Registrants consult with colleagues or other health care professionals, when appropriate, to benefit the patient.
- 8.3. Registrants refer their patients to other health care professionals or agencies when appropriate.
- 8.4. Registrants work collaboratively, and maintain professional relationships, with colleagues to ensure patients' needs are met when transferring prescriptions, inventory, etc.
- 8.5. Registrants seek opportunities to work collaboratively with other health care professionals to foster a collaborative approach to healthcare and professional development.

### **9. Registrants contribute to the health care system and to societal health needs.**

- 9.1. Registrants promote health, wellness and disease prevention.
- 9.2. Registrants promote positive changes in the health care system by actively participating in health policy development, review and revision.
- 9.3. Registrants support cost-effective therapies, the rational use of medications and services and the prudent use of health care resources.
- 9.4. Registrants promote fair and equitable access to health care resources and services.
- 9.5. Registrants support the appropriate use, and the reduction of abuse and misuse, of drugs.
- 9.6. Registrants serve as a health resource and participate in programs to educate the public about health.
- 9.7. Registrants foster the advancement of knowledge by supporting scientifically and ethically valid research.
- 9.8. Registrants support environmental stewardship by promoting the safe disposal of drugs and related products.

### **10. Registrants act to enhance and nurture the profession of pharmacy.**

- 10.1. Registrants act with honesty and integrity when interacting with patients, colleagues and other health care professionals.
- 10.2. Registrants contribute to the ongoing development of the profession by participating in the education and training of students and interns as well as other health care providers.
- 10.3. Registrants recognize that self-regulation of the profession is a privilege and that each registrant has an ongoing responsibility to merit this privilege and support the mandate of the Newfoundland and Labrador Pharmacy Board.

## Appendix B



# Newfoundland and Labrador Pharmacy Board

## Policy on Expense Claims

Last revised February 21, 2015

The board may reimburse the expenses of board members, adjudication tribunal members or other persons attending pre-approved provincial or national meetings as representatives of NLPB, or conducting pre-approved NLPB business. Such reimbursement shall be made on the basis of actual expenditures incurred, up to the allowable limits as specified below, and normally upon submission of receipts.

1) The following guidelines apply for reimbursement of expenses:

- a) All expense claims must be submitted to the Registrar on an Expense Claim Form, supported by receipts, and signed by the person submitting the claim.
- b) HST or other applicable taxes paid must be separated out and reported on claims form.
- c) Airfare expenses will be reimbursed based on standard economy rates. Whenever possible, reservations should be made sufficiently in advance to take advantage of early booking discounts.
- d) Reimbursement is allowed for taxis, airport buses, subways or shuttles used in the performance of NLPB or other approved business. Expenses will be reimbursed as incurred, with receipts.
- e) Auto rental, limited to the smallest vehicle appropriate and available, will be reimbursed when this is the most appropriate or cost effective means of transportation. Rental fees and gasoline expenses will be reimbursed as incurred, with receipts.
- f) The use of personal automobiles will be reimbursed at the Canada Revenue Agency (CRA) rate (<http://www.cra-arc.gc.ca/tx/bsnss/tpcs/pyrll/bnfts/tmbll/wnc/rt-eng.html>).
- g) Parking expenses will be reimbursed as incurred, with receipts.
- h) Hotel expenses will be reimbursed based on standard economy room rates. Personal incidental expenses such as mini-bar charges, laundry, in-room movies and personal telephone calls will be the responsibility of the individual.
- i) Meal expenses, including gratuities, will be reimbursed as the actual expenses to a maximum of the following without receipts:
  - i) Breakfast - \$15.00 per person
  - ii) Luncheon - \$25.00 per person
  - iii) Dinner - \$50.00 per person
- j) No reimbursement will be given for meals supplied by the Board, for meals purchased instead of those provided by the Board, or for meals included in a conference or other registration fee.

## **Appendix B**

- k) Despite the abovementioned, a person, when exposed to unusually high meal costs, may be reimbursed his or her actual expenses for a meal based on proof of payment presuming that the expenses claimed are reasonable and justifiable in the circumstances.
  - l) No reimbursement will be given for alcoholic beverages, except as a component of the daily meal allowance.
  - m) Required registration fees may be paid in advance or reimbursed to the individual as incurred.
  - n) Miscellaneous expenses such as telephone calls, photocopying, supplies, or postage incurred on behalf of NLPB will be reimbursed upon submission of receipts.
  - o) Income Replacement Allowances may be paid to Board members for attendance at Board meetings or to members of the Complaints Authorization Committee or Disciplinary Panel for attendance at meetings or hearings of adjudication tribunals.
- 2) When necessary or appropriate, expenses can be reimbursed in advance with the approval of the Registrar.
- 3) Claims for expenses outside of these guidelines require prior approval of the Executive Committee.