

College of Pharmacists
of British Columbia

Annual Report 2020/2021

Regulating pharmacy practice
in the public interest

College of Pharmacists of BC

Duty to Protect Patient Safety

The College of Pharmacists of BC's role is to protect the public by licensing and regulating pharmacists and pharmacy technicians and the pharmacies where they practice. We are responsible for making sure every pharmacy professional in BC is fully qualified and able to provide the public with safe and ethical pharmacy care.

The College receives its authority from, and is responsible for, administering provincial pharmacy legislation.

Health Professions Act, Section 16, Duty and objects of a college:

- 16 (1) It is the duty of a college at all times
- (a) to serve and protect the public, and
 - (b) to exercise its powers and discharge its responsibilities under all enactments in the public interest.

Vision

Better health through excellence in pharmacy.

Mission

The College regulates the pharmacy profession in the public interest. We set and enforce standards and promote best practices for the delivery of pharmacy care in British Columbia.

Values

The College of Pharmacists of British Columbia's activities and decisions are based on the following values:

We are Professional and Ethical

We achieve this by:

- promoting and maintaining the highest standards of ethical conduct;
- taking responsibility for our actions and their results;
- engaging meaningfully with all stakeholders; and
- acting with honesty and integrity.

College of Pharmacists of BC

We Deliver Quality Service

We achieve this by:

- being consistent in our processes and messaging;
- executing proper research and due diligence;
- providing accurate and useful information;
- having transparent processes; and
- being timely and responsive.

We Build Quality Relationships

We achieve the by:

- listening to others;
- maintaining confidentiality;
- acknowledging the perspective of others;
- recognizing & respecting the capabilities of others; and
- being non-judgemental, open, and honest with others.

We Promote a Culture of Excellence

We achieve this by:

- being solution oriented;
- being adaptable and innovate;
- collaborating to identify best practices;
- fostering the development of the organization and the individual.

The College acknowledges with respect that the College of Pharmacists of BC is located on the unceded and traditional territories of the Coast Salish peoples – sk̓w̓x̓ wú7mesh úxwumixw (Squamish), sel̓íl witulh (Tsleil-Waututh), and x̓w̓m̓əθk̓w̓əy̓əm (Musqueam) nations whose historical relationships with the land continue to this day.

2020/21 Annual Report

This Annual Report reflects on the College's work in protecting patient safety in the 2020/21 fiscal year. All statistical information, Board and committee member listings reported in this 2020/21 Annual Report are based on the fiscal year ending February 28, 2021.

Strategic Plan

Implementation of Goals and Objectives in this Strategic Plan will reflect high quality personcentred care for all British Columbians, which involves creating conditions in which people feel respected, and providing equitable care that considers systemic racism among Black, Indigenous and People of Colour.

The specific emphasis on Black, Indigenous and People of Colour included here is intended to reflect the historical and ongoing impact of systemic racial injustices and is in no way meant to exclude other vulnerable populations.

Cultural safety and humility and social justice are essential to this work, in addition to considering the social context of individuals seeking care and the needs of caregivers.

Goal 1: The public is given evidence-informed, person-centred, team-based care.

Standards of Practice under the *Health Professions Act* will be reviewed and modernized to support the best evidence-informed care, enabling practice innovation while ensuring safety based on the principles of Right Touch Regulation. Continuity of care, team-based care and collaboration will also be supported throughout by designing Standards to be applicable to any environment where pharmacy services may be provided.

The College will also draw on insights from a variety of sources including provincial emergencies such as the COVID-19 pandemic experience and the overdose crisis, complaint outcomes, practice reviews, medication Incidents, and other emerging best practices and research to ensure pharmacy practice regulation in BC enables the public to receive safe, evidence-informed, person-centred, care.

Goal 2: To enable practice innovation through regulation that enhances health and wellness of the public and ensures patient safety.

Working to ensure that the practice of pharmacy meets or exceeds the standards set out to protect the public and maintain their trust.

Goal 3: To have the public and health professionals trust pharmacy professionals as valuable resources who are acting first and foremost in the public interest.

With increasing team-based care, it is important that pharmacy professionals are seen as a trusted, valuable, accessible resource by the public and others on the care team.

The College will seek to learn more about what the public expects of pharmacy professionals and will develop a Bill of Rights to build awareness of how pharmacy professionals can help care for British Columbians as part of the care team.

Transparency will be important throughout this work.

Strategic Plan

Goal 4: To align with Government priorities and have strong, collaborative engagement with all healthcare providers to advance person-centred, interdisciplinary care.

Effective collaboration is vital to enable innovation and implement positive change in the healthcare system.

The implementation of a new provincial health profession regulatory framework together with the College's work towards modernizing its Standards of Practice and development of a Patient Bill of Rights closely aligns the College and Government in working towards improving the health and wellness of British Columbians.

The College also wants to encourage greater collaboration between healthcare professionals and support team-based care.

[Read the entire plan](#)

Commitment to Improve Cultural Safety and Humility

The College believes that cultural safety and humility are vital for the provision of fair and equal health services, as well as the creation of a healthcare environment free of racism and discrimination, where individuals feel safe and respected.

[Read more about Addressing Racism and Discrimination in BC's Health System](#)

Cultural Safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the healthcare system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care.

Cultural Humility is a life-long process of reflection to understand individual and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a life-long learner when it comes to understanding another's experience.

Released in December 2020, the report [“In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C Health Care”](#) found that the majority of Indigenous people in BC have encountered racism and discrimination within our health care system, whether as a patient or a health care worker. Indigenous respondents described experiencing stereotyping, unacceptable personal interactions and poorer quality of care, as well as noting that they do not feel safe when accessing health care services and interacting with health providers.

In 2017, [the College pledged its commitment to improving BC pharmacy professionals' work with First Nations and Aboriginal People](#) however, the gravity of the findings forced us to take a step back and re-examine our role as health care leaders. Our job is to protect patients and the public by ensuring that the professionals we regulate provide safe, ethical and quality care. And yet, the continued existence of widespread systemic discrimination, and inequitable health outcomes for Indigenous Peoples makes it clear that we have not done enough.

System racism and intolerance toward Indigenous worldviews and traditional approaches to health, as well as the enduring legacy of colonialism all present as persistent barriers for Indigenous people when accessing appropriate health care services.

In response to the report, the College has been working with Indigenous experts and other health regulators in BC to take immediate action toward dismantling Indigenous-specific racism within BC's health care system and to lead a culture of anti-racism among the professionals we regulate.

Highlights from our work over the past fiscal year include:

- As part of the BC Health Regulators Cultural Safety Task Force, developed a Health Profession Regulator's Indigenous Cultural Safety and Humility Education Toolkit proposal which was approved by the BC Health Regulators.

Commitment to Improve Cultural Safety and Humility

- Raised awareness of [regulated health professionals duty to report racist behaviours](#) in the healthcare system.
- Raised awareness of [National Indigenous Peoples Day](#) and sharing resources with health professionals to help them practice culturally safe patient care.
- Raised awareness of the impacts of residential schools on First Nations communities through participation in Orange Shirt Day, [including sharing information with pharmacy professionals](#), and hosting a virtual Orange Shirt Day Ceremony with College staff.
- [Encouraged contributions](#) from registrants to Dr. Mary-Ellen Turpel-Lafond's investigation into Indigenous-specific racism in BC's health care system.
- Along with BC's Health Regulators, welcomed and supported the [In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#) report, which outlines the findings and recommendations from the Addressing Racism: An Independent Investigation into Indigenous-specific Racism in BC Health Care led by Mary Ellen Turpel-Lafond.
- Along with BC's Health Regulators, welcomed and supported the [In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#) report, which outlines the findings and recommendations from the Addressing Racism: An Independent Investigation into Indigenous-specific Racism in BC Health Care led by Mary Ellen Turpel-Lafond.
 - [Committed to working with the Ministry of Health and other partners](#) to reflect the recommendations within the report and take actions that will support changes in the health care system to eliminate Indigenous-specific racism, systemic racism, prejudice, and discrimination.
 - Dissected and summarized the report in an [article intended to discuss its findings with pharmacy professionals](#), and reinforce our commitment to Cultural Safety and Humility for First Nations people in BC.

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COVID-19 Pandemic

On March 11, 2020, the World Health Organization declared the novel coronavirus, COVID-19, a pandemic, citing concern over alarming levels of spread and severity across the globe.

The pandemic brought with it many challenges to respond to, challenges which will continue to evolve in the coming years.

Since the onset of the COVID-19 public health emergency, the pharmacists, pharmacy technicians and pharmacies we regulate have been vital in ensuring British Columbians continue to receive the medications and the knowledge they need to manage, prevent and treat a multitude of diseases and symptoms.

Throughout 2020, in order to support the response to this new disease as part of BC's health system, the College worked closely with the Ministry of Health, the Ministry of Mental Health and Addictions, the BC Centre for Substance Use and other partners to share vital information and enact practice changes for pharmacy professionals intended to reduce unnecessary practice strain and provide broader flexibility to continue to ensure adequate continuity of care for BC patients.

Here are some of the things the College did to support BC's response to the COVID-19 pandemic:

- Provided regular updates and guidance to BC's patients and pharmacy professionals through our dedicated resource page: bcpharmacists.org/COVID19.
- [Recognized BC's pharmacy professionals](#) for their commitment to providing continuity of care and working on the frontlines to provide high quality pharmacy care to British Columbians during this pandemic.
- Worked with the Ministry of Health to maintain the viability of our health care system by [encouraging pharmacists to provide emergency supplies to patients with expired prescriptions, including narcotics, psychiatric drugs and anti-psychotics for chronic conditions](#). Pharmacists were also given latitude to provide early refills for people so that they could self-isolate.
- [Provided self-isolation guidance](#) for pharmacy professionals who have been deemed critical to the operation of their pharmacy, as well as additional guidance for critical pharmacy staff on appropriate measures to take in order to protect their colleagues, patients and the public.
- [Developed a risk-assessment tool](#) to assist pharmacy managers and owners in determining the necessary self-isolation measures needed for pharmacy staff affected by COVID-19.
- Released a [joint statement on the unproven therapies for COVID-19](#) together with the BC College of Physicians and Surgeons and the BC College of Nurses and Midwives, in order to address misinformation about potentially dangerous uses of existing medications.
- [Accelerated the implementation of new delivery requirements for Opioid Agonist Treatment](#) to support continuity of care for BC OAT patients. These requirements allow pharmacists to use their professional judgement to deliver drugs to a patient if they feel it is safe, appropriate and in the best interest of the patient to do so.
- [Amended the Pharmacy Operations and Drug Scheduling Act Bylaws and the Community Pharmacy Standards of Practice](#) to allow temporary exemptions for prescriptions of controlled substances. These

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amendments align with Health Canada's temporary exemptions to the *Controlled Drugs and Substances Act*, and permit pharmacists to transfer a prescription for a controlled substance, and to accept verbal and faxed prescriptions for controlled substances.

- [Granted CE exemptions for the Professional Development and Assessment Program \(PDAP\) for all registrant renewals between March 31, 2020 and February 28, 2021](#), in order to alleviate the added pressure and responsibility placed on BC's pharmacy professionals as a result of COVID-19.
- [Issued a temporary exemption](#) allowing injectable drugs, previously dispensed for the purpose of providing Medical Assistance in Dying (MAiD), to be returned to inventory during the COVID-19 pandemic.
- Enabled eligible individuals to apply for temporary registration to provide pharmacy services - including COVID-19 vaccinations - during the COVID-19 pandemic, by amending the *Health Professions Act Bylaws*.
- Administered the Jurisprudence Exam (JE) as a computer-based examination by partnering with Prometric. The JE may be taken on-site at a Prometric Test Center or as a remotely proctored online examination at a location that meets the requirements.

Opioid Overdose Crisis

British Columbia is facing dual health emergencies, with the COVID-19 pandemic compounding and escalating the existing opioid overdose crisis, which was declared a public health emergency in April 2016.

Learn More: [ReadLinks – Dual Health Emergencies: BC's Opioid Crisis and the COVID-19 Pandemic \(September 30, 2020\)](#)

The opioid overdose crisis continues to have a major impact on the province. Since the COVID-19 pandemic was declared a public health emergency in March 2020, the BC Coroners Service detected a sustained increase in illicit drug toxicity deaths. In total, 1,716 people died of illicit drug overdoses in 2020, a 74% increase in deaths over 2019. Further to that, an additional 320 people died of illicit drug overdoses in January and February 2021.

February 2021 marked the 11th consecutive month in which the province recorded over 100 overdose deaths.

Acknowledging the marked increase in overdose deaths following the onset of the COVID-19 pandemic, the College worked closely with the Ministry of Health, Ministry of Mental Health and Addictions, and BC Center on Substance Use to respond. The College quickly implemented a number of policy changes and temporary exemptions across British Columbia to support continuity of care for people with substance use disorders during the COVID-19 pandemic.

Changes to The Delivery Requirements for Opioid Agonist Treatment (OAT)

In the context of COVID-19, the College recognized the importance of maintaining British Columbians' access to controlled substances for medical treatments, including OAT. In March 2020, the College Board approved new delivery requirements for Opioid Agonist Treatment, allowing pharmacists to use their professional judgement to deliver the drugs to a patient if they feel it is safe, appropriate and in the best interest of the patient to do so. As a result, prescribers no longer need to authorize delivery for OAT drugs.

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Previously, Professional Practice Policy-71 allowed pharmacists working in community pharmacies to deliver methadone for maintenance to a patient's home only if the prescribing physician authorized delivery due to the patient's immobility. These changes aimed to improve access to OAT for patients whose care may benefit from delivery, while ensuring the safety of both the patient and the pharmacist involved.

Given the onset of the COVID-19 pandemic in early March, the College Board decided to accelerate the implementation of these requirements in order to support continuity of care for BC OAT patients.

Learn More: [News – Changes to the Delivery Requirements for OAT Now In Effect \(March 17, 2020\)](#)

Temporary Authorizations for the Delivery of Opioid Agonist Treatment by Non-Pharmacists

Further to the changes to the delivery requirements for OAT noted above, in April 2020, the College also implemented temporary amendments to PPP-71 that allow pharmacists to authorize regulated health professionals to deliver OAT.

These temporary amendments also allowed pharmacists to authorize pharmacy employees, including pharmacy technicians and pharmacy assistants, to deliver OAT on a pharmacist's behalf in *exceptional circumstances* where it is not possible for a pharmacist or other regulated health professional to deliver the OAT drug.

These temporary authorizations align with Health Canada's temporary exemption under the *Controlled Drugs and Substances Act* (CDSA), to maintain Canadian's access to controlled substances as needed for medical treatments during the COVID-19 pandemic which includes permitting pharmacy employees to deliver prescriptions of controlled substances to patient's homes or other locations where they may be (e.g. self isolating).

Learn More: [News - BC's COVID-19 Response: Temporary Authorizations for the Delivery of Opioid Agonist Treatment by Non-Pharmacists](#)

New Harmonized Controlled Prescription Program Form

In February 2020, the Board approved amendments to the [Controlled Prescription Program](#) forms to create a harmonized form.

The [Controlled Prescription Program](#) (CPP) is a duplicate prescription program created to prevent forgeries and reduce inappropriate prescribing of drugs listed in Schedule 1A. Prescriptions for drugs specified in the CPP must be written on a duplicate form specifically developed for this purpose.

Prior to these amendments, there were two CPP forms in use, a generic CPP form used for the majority of controlled prescriptions, and a methadone CPP form which is used to prescribe methadone for maintenance treatment.

The College led the development of the new harmonized form in order to increase patient access to OAT therapy. Currently, only OAT prescribers have the methadone CPP form. The new form also reflects the updated OAT delivery guidance. Most notably, the form no longer requires physician authorization for delivery, but rather allows prescribers to specify when delivery is not permitted.

[The new harmonized CPP form is expected to be available in June 2021.](#)

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Learn More: [News – New Controlled Prescription Program Form Coming Soon](#)

Amendments to Training Deadlines for Opioid Agonist Treatment

In November 2020, the College Board approved amendments to Professional Practice Policy 66: Opioid Agonist Treatment (PPP-66) to extend the deadline for transitioning to the Opioid Agonist Treatment Compliance and Management Program for Pharmacy (OAT CAMPP), from March 31, 2021 to September 30, 2021.

In November 2018, the Board approved amendments to PPP-66 to phase out [the College's Methadone Maintenance Treatment \(MMT\)](#) training program and transition to the new [OAT-CAMPP](#), developed by the Ministry of Health (Ministry) and the British Columbia Pharmacy Association (BCPhA). PPP-66 initially required that registrants complete the applicable components of OAT-CAMPP by March 30, 2021.

However, in March 2020, the in-person OAT-CAMPP training was suspended due to the sudden onset of the COVID-19 public health emergency.

The BCPhA has now developed an on-line version of OAT-CAMPP. It has been accredited by the Canadian Council on Continuing Education in Pharmacy (CCCEP), and the first OAT training workshops begin on November 20, 2020.

The 6-month training deadline extension was made to recognize the impact of COVID-19 and the temporary suspension of the OAT-CAMPP. Registrants employed in a community pharmacy that provides pharmacy services related to opioid agonist treatment are strongly encouraged to complete the OAT-CAMPP program as soon as practicable.

Addressing Racism and Discrimination in BC's Health System

There have been a number of recent events that serve to remind us of how much work we still need to do toward dismantling systemic racism and discrimination from our society and health system.

The first was the discovery of the remains of 215 children on the site of the former Kamloops Indian Residential School. This was followed shortly after by a targeted, hate-motivated attack on a Muslim family in London, Ontario.

Our thoughts are with the Tk'emlúps te Secwépemc First Nation, Indigenous People in BC, and Canada's Muslim Community. We share your grief, stand with you in solidarity, and remain committed to ensuring that these atrocities and their resulting patterns of trauma are respectfully acknowledge and appropriately addressed in every decision we make.

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Learn More:

- [ReadLinks - The College Stands with The Tk'emlúps te Secwépemc First Nation and All of Canada's Indigenous Communities](#)
- [ReadLinks – Registrar's Message: On The Anti-Muslim Attack in London, Ontario](#)
- [Racism in Health Care: An Apology to Indigenous People and a Pledge to Be Anti-Racist](#)

2020 highlighted a number of social issues that required deeper consideration of our role as a health regulator in BC.

We mourned with Black communities and allies across the US, Canada and abroad, for the deaths of George Floyd, Ahmaud Arbery, Breonna Taylor, Tony McDade and countless others, at the hands of police brutality and a culture of systemic racism and violence.

We were disturbed to learn about the irrefutable evidence for Indigenous-specific racism within our own healthcare system, as well as the [surge in anti-Asian hate crimes in Vancouver during the pandemic](#).

These events prompted us to recognize and acknowledge the internal biases we may not realize we hold, and to ask ourselves how we may be contributing to the systemic racism and discrimination present throughout North America.

It is a common and unfortunate misconception that BC and Canada are somehow exempt from the racism, discrimination and stigma faced by our neighbours in the US. However, racial discrimination and oppression are some of the most significant determinants of health outcomes in Canada and they need to be addressed at all levels of our health system.

As a regulator, the College governs over 9,000 registered pharmacists and pharmacy technicians in British Columbia, and it is our duty to ensure that the health professionals we regulate provide safe and ethical care to all British Columbians.

As part of this duty, the College acknowledges that we, as an organization and regulator, need to step up and lead the charge for systemic change with the goal of eliminating the everyday impacts of discrimination and racism within BC's health system.

As health professionals, the most important thing we can do is to show our country's Black, Indigenous and Other People of Colour our unending support and remind patients in these communities that we are in this together.

While we are encouraged by the progress made leaders and organizations over the past year, we must continue to combat the racism faced by BIPOC and other marginalized communities in BC.

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Here are some of the ways we did that in 2020/2021:

Black Lives Matter

The College of Pharmacists of British Columbia stands against racism in solidarity with the Black community.

On May 25, 2020, we watched in horror as George Floyd, a 46-year old Black man, lost his life after Minneapolis police officers took a series of actions that violated the policies of the Minneapolis Police Department during his arrest.

In the days and months that followed, we witnessed and participated in a massive outpour of global support for Black Communities and allies as they stood against police brutality and a culture of systemic racism and violence.

In response, College Registrar Bob Nakagawa pledged the College's commitment to developing a plan to raise awareness of, and actively combat, the racism faced by Black People in BC. To help enact this change, the College established a Black Lives Matter Working Group focused on identifying ways that the College, as both an organization and regulator, can take action and reinforce the fact that Black Lives Matter, and that racism, in any form, has no place in our health system.

Over the coming year, the Black Lives Matter Working Group will be working to develop an Anti-Racism Framework to guide our organization as we work to dismantle systemic racism and eliminate discrimination based on race, ethnicity, culture, gender, and sexual orientation from both our health system and our own policies as an employer.

Additionally, all College staff will be participating in anti-oppression training over the coming fiscal year. This training is intended to empower and enable staff to view and approach the world, and their work at the College, through an anti-oppressive lens. This training is an important component of the College's organizational strategy toward holding ourselves accountable as an anti-racist organization, and ensuring that unconscious bias does not impact the work we do as a regulator.

Learn More: [Registrar's Message – Black Lives Matter](#)

Investigation into Indigenous-Specific Racism

On June 19, 2020, BC Health Minister Adrian Dix announced an investigation into disturbing allegations of racism in BC's health system. Staff in one or more BC emergency rooms were said to have been

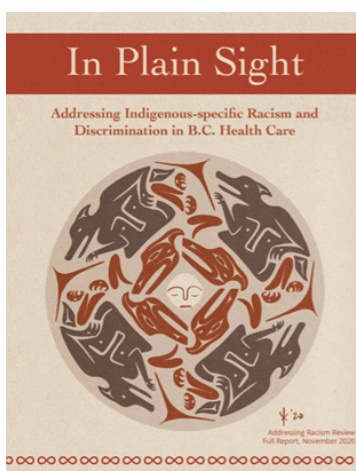
playing a "game" involving guessing the blood alcohol content of patients coming into the ER for help, in particular Indigenous patients.

The College, along with BC's Health Regulators were in full support of the investigation, led by Dr. Mary Ellen

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Turpel-Lafond (Aki-Kwe), and the culminating report ["In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care."](#)

Released in December 2020, the report found that the majority of Indigenous People in BC have encountered racism and discrimination within our health care system, whether as a patient or a health care worker.



Indigenous respondents described experiencing stereotyping, unacceptable personal interactions and poorer quality of care, as well as noting that they do not feel safe when accessing health care services and interacting with health providers.

Based on consultations with almost 9,000 Indigenous peoples and health care workers, the report's findings illustrated how our current health-care system continues to limit access to medical treatment and negatively affects the health and wellness of Indigenous peoples.

In 2017, the College pledged its commitment to improving BC pharmacy professionals' work with First Nations and Aboriginal People however, the gravity of these findings forced us to take a step back and re-examine our role as health care leaders. Our job is to protect patients and the public by ensuring that the professionals we regulate provide safe, ethical and quality care. And yet, the continued existence of widespread systemic discrimination, and inequitable health outcomes for Indigenous Peoples makes it clear that we have not done enough.

System racism and intolerance toward Indigenous worldviews and traditional approaches to health, as well as the enduring legacy of colonialism all present as persistent barriers for Indigenous People when accessing appropriate health care services.

In response to the report, the College has been working with Indigenous experts and other health regulators in BC to take immediate action toward dismantling Indigenous-specific racism within BC's health care system and to lead a culture of anti-racism among the professionals we regulate. **We encourage all health professionals to review the report and reflect on the findings.**

Year in Review

Learn More:

- [Racism in Health Care: An Apology to Indigenous People and a Pledge to Be Anti-Racist](#)
- [ReadLinks – Regulated health professionals have a duty to report racist behaviour in the health system](#)
- [ReadLinks – BC's Health Regulators welcome report from investigation into Indigenous-specific racism](#)
- [ReadLinks – In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#)

Message from our Board Chair, and Registrar & CEO



Board Chair Claire Ishoy, and Registrar & CEO Bob Nakagawa reflect on the state of pharmacy practice in BC.

We now have 1,505 pharmacies, 6,617 pharmacists and 1,693 pharmacy technicians serving the public in BC.

2020 Was About Doing Our Part

As we reflect on the work we've done in 2020, we first want to acknowledge and thank BC's pharmacists and pharmacy technicians, who did their part to provide safe and effective patient care during these uncertain times. We would also like to recognize and appreciate all of BC's health professionals, as well as the public, for doing your part to bend the curve and see us through this challenging year.

2020 was unlike any year that we've ever experienced. From responding to COVID-19 and the opioid overdose crisis, to taking a stand against racism in our country and our healthcare system, this past year has challenged us both as a health regulator, and as individual members of society. And we are not out of the woods yet, which is why each and every one of us must continue to do our part as we move toward immunization for all British Columbians.

Our role as a regulator hinges on protecting the public by making sure every pharmacist and pharmacy technician in BC is fully qualified and able to provide safe and effective pharmacy care. In 2020, this meant constantly adapting to an ever-changing social landscape. It meant practising physical distancing and wearing masks. It meant dealing with overwhelming quantities of public health information, guidance and recommendations and translating it into tangible strategies for providing high-quality pharmacy care. But most importantly, it meant continuing to do our part as health professionals to honour our duty and responsibility to British Columbians.

Doing Our Part to Respond to COVID-19

It's now been well over a year since the World Health Organization declared the novel coronavirus, COVID-19, a pandemic and BC's pharmacists and pharmacy technicians were asked to step up and adapt their practices in new ways to ensure that our health system remained viable and responsive during this extraordinary time.

Throughout 2020, pharmacists and pharmacy technicians have played a vital role in supporting our province's COVID-19 response efforts on the frontlines by responding to ever-changing safety protocols, upholding the highest standards of safe and ethical pharmacy practice and, most recently, by providing vaccinations to British Columbians as part of BC's Immunization Plan.

Message from our Board Chair, and Registrar & CEO

Early in the pandemic, pharmacy professionals were relied upon to provide refills and emergency supplies of medications to patients in an effort to help patients avoid non-essential visits with primary care providers. Many others provided their patients with knowledge and clarity regarding misinformation about unproven therapies for COVID-19. We also saw retired, former, non-practising, and student pharmacists step up to help reduce the strain on our health professionals by applying for temporary registration.

We also recognize the difficult decisions faced by pharmacy managers and owners in addressing potential exposures within their pharmacies and dealing with the strain of staff shortages and self-isolation requirements.

As a regulator, it was vital for us to work closely with the Ministry of Health, Provincial Health Officer, and BC Centre for Disease Control, and other health partners as part of British Columbia's response to the pandemic. Timely and essential updates and clear expectations for providing safe and ethical pharmacy care were an essential part of our response. We introduced several practice and policy changes in a very short period to support pharmacy professionals in caring for their patients as they adapted to this evolving situation. In implementing these changes, our focus was, and continues to be, on following the principles of *Right Touch Regulation*, reducing unnecessary strain and giving pharmacists and pharmacy technicians broader flexibility to continue to provide safe and ethical care, while doing their part to prevent the spread of COVID-19.

[Learn more about how we supported BC's response to COVID-19](#)

Doing Our Part to Address the Opioid Overdose Crisis

While COVID-19 captured headlines and, in many ways, changed how we practice both as health professionals and as a regulator, it was not the only health crisis that demanded our attention in 2020.

Since the COVID-19 pandemic was declared a public health emergency in March 2020, our province's ongoing opioid overdose crisis continued to escalate to unprecedented levels. In total, 1,716 people died of illicit drug overdoses in 2020, a 74% increase over 2019.

Pharmacy regulation in the context of dual public health emergencies meant maintaining British Columbia's access to controlled drugs and substances for medical treatments and working with partners in the health system to increase access to Opioid Agonist Treatment (OAT) for those with substance use disorder.

To that end, we introduced a number of changes to the delivery requirements for OAT allowing pharmacists to use their professional judgement to deliver drugs to a patient if they feel it is safe, appropriate and in the best interest of the patient to do so. Further to that, we also implemented temporary amendments that allow pharmacists to authorize other regulated health professionals, such as pharmacy technicians, to deliver OAT.

Message from our Board Chair, and Registrar & CEO

Additionally, we also led the development of a new harmonized Controlled Prescription Program form to prevent forgeries and increase patient access to OAT.

[Learn more about what we did to address the escalating opioid overdose crisis in 2020](#)

Doing Our Part to Combat Systemic Racism

We were also appalled to learn of the extensive evidence of Indigenous-specific racism in BC's health system, as presented in Dr. Mary-Ellen Turpel-Lafond's "In Plain Sight" Report. While these findings were at once both saddening and discouraging for us as a regulator, they also come as no surprise, given what we know about the pervasiveness of racism throughout all facets of society.

These events forced us to consider our role as a regulator and as a voice in public health; to consider the role we play in combatting racism in Canada and North America. To that end, in May 2020, we established a Black Lives Matter Working Group within the College focused on identifying ways that we can reinforce anti-racist perspectives throughout our health system.

In addition to this, we have also been working with Indigenous knowledge keepers and professionals, as well as our fellow health regulators to take immediate action toward dismantling Indigenous-specific racism within BC's health system and further embed culturally safe practices within all levels of health profession regulation.

We will be guided by Indigenous elders and professionals, the recommendations contained in the In Plain Sight report, and by the legal and ethical requirements to provide respect, dignity and equitable health care for Indigenous people in BC.

While we recognize that the fight against systemic racism in Canada is far from over, we remain confident in, and inspired by, the actions taken by leaders such as Dr. Turpel-Lafond, and the resilience of the BIPOC communities in our country and will continue to support them unconditionally as we move toward a more equitable society.

[Learn more about what we did to combat racism and discrimination in BC's health system](#)

Beyond this, we continue to make progress toward our Canada Award for Excellence, Innovation and Wellness – Gold Certification, and worked with the Provincial Health Services Authority to enable pharmacies across BC to use CareConnect, an Electronic Health Record offering community pharmacists access to lab values and important patient-centric information to support direct patient care. It is through initiatives like these that we continue to adapt and respond to an ever-changing provincial health landscape, and ensure that we are poised for the future of health profession regulation.

Message from our Board Chair, and Registrar & CEO

On behalf of the College Board and Staff, we invite you to read our annual report and learn about how the College is working to ensure a high standard of safe and ethical pharmacy care is available to all British Columbians during these challenging times.

Stay safe.



Claire Ishoy, Chair



Bob Nakagawa, Registrar

Message from Our Public Board Members



Public representation is vital to the College Board's ability to function, and to make decisions that reflect the public's best interests. The College Board relies on its public members to bring unique and valuable insights and oversight in order to help us maintain a well-rounded, comprehensive decision-making process.

Public members are appointed by the Minister of Health and, *as required by the Health Professions Act*, must not comprise less than one-third of the total Board membership.

As public members of the Board of the College of Pharmacists of British Columbia, we represent the perspective of all British Columbians in the governance of pharmacy practice in BC.

2020 was a difficult year for people around the world, and British Columbia was no different. In March 2020, the World Health Organization declared the novel coronavirus, COVID-19, a pandemic, and since then, all of our lives have been upended as we continue to respond to this public health emergency.

The onset of COVID-19 presented a number of significant challenges for pharmacy regulation in BC. Pharmacy professionals were asked to adapt to constant, ongoing practice changes in order to provide continuity of care for British Columbians, in addition to dealing with the stresses of potential exposure within their pharmacies.

As a College, our focus was on ensuring ethical and quality pharmacy care continued to be available for all British Columbians. As a Board, we carefully considered and approved changes that brought broader flexibility in how pharmacy care could be provided in response to this crisis without compromising safety.

The COVID-19 pandemic also compounded and escalated BC's existing opioid overdose crisis, requiring us to think of new ways to support British Columbians with substance use disorders. To that end, we introduced new delivery requirements for Opioid Agonist Treatment (OAT), as well as temporary authorizations for OAT delivery by non-pharmacists. This was done to ensure continuity of care for patients with substance use disorders by maintaining access to OAT in situations where they may be self-isolating or otherwise immobile.

Beyond living within the context of dual public health emergencies, the past year shed additional light on the extent to which racism and discrimination is experienced by Black, Indigenous, Asian and other racialized communities in our society and within our health system. As representatives of the public, we were encouraged by the work done by both the

Message from Our Public Board Members

College Board and staff in calling out racism for what it is and working to ensure that BIPOC communities in our province are supported when accessing healthcare services.

Notably, we are pleased with the work being done, alongside Indigenous leaders and our fellow health regulators, to put into practice, the recommendations put forth by Dr. Mary-Ellen Turpel-Lafond (Aki-Kwe) in her 'In Plain Sight' Report on Indigenous-specific racism in B.C. health care. We are also pleased with the establishment of a Black Lives Matter Working Group within the College focused on identifying ways that the College can actively combat the racism faced by Black People in BC.

Finally, we'd like to acknowledge the work being done by the Patient Advisory Network of BC (BC-PAN). BC-PAN's 16 public advisors continue to work with the College and other health regulators to provide valuable perspectives and voices to health regulation in BC, and we look forward to continuing to engage with them in the coming fiscal year. We'd also like to recognize those members of the public, as well as registrants and other stakeholders who provided responses to both our Website Engagement Survey, and our Customer Satisfaction Survey.


Your feedback and diverse opinions continue to be an invaluable resource, enabling us to strengthen our relationship with British Columbians in order to continue to improve the ways in which we deliver professional and ethical care. And this relationship remains at the core of our mandate to protect the public through the regulation of pharmacy practice in BC.

Though 2020 presented us with a number of new challenges, with its long history as a leader in Canadian health regulation, the College is well-positioned to continue to improve health, safety, and equity for all British Columbians through excellence in pharmacy practice.

As the current public representatives, we are honored to share this ambition with, and be a part of, such a progressive, dedicated and focused Board.



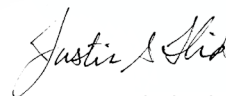
Tracey Hagkull
Government Appointee



Anne Peterson
Government Appointee



Katie Skelton
Government Appointee



Justin Singh Thind
Government Appointee

Board



Claire Ishoy, *Chair*
District 7
Community Hospital



Steven Hopp, *Vice-Chair*
District 4
Kootenay/Okanagan



Alex Dar Santos
District 1
Metropolitan Vancouver



Christine Antler
District 2
Fraser Valley



Andrea Silver
District 3
Vancouver Island/Coastal



Michael Ortynsky
District 5
Northern BC



Anca Cvaci
District 6
Urban Hospitals



Bal Dhillon
District 8
Pharmacy Technicians



Tracey Hagkull
Government Appointee



Anne Peterson
Government Appointee



Katie Skelton
Government Appointee



Justin Singh Thind
Government Appointee

Governance

The College of Pharmacists of BC regulates the pharmacy profession by registering pharmacy professionals and licensing the pharmacies in British Columbia where they work. The College receives its authority from the government of BC through the *Health Professions Act* (HPA) and the *Pharmacy Operations and Drug Scheduling Act* (PODSA).

The College Board is the elected and appointed body that leads the organization. In fiscal year 2019/2020, the Board consisted of seven elected pharmacists, one elected pharmacy technician and four government appointees.

The Board governs the College to ensure that it fulfills its legislative mandate, mission and vision in an efficient and effective manner. The Board also ensures that the College is accountable to the general public for competent, conscientious and effective pharmacy practice.

In addition to the College Registrar and staff, the Board utilizes a number of committees, which consist of College registrants and public members. College committees work to achieve their identified goals and objectives, and each committee Chair reports to the Board on an annual basis.

Prior to taking office, all elected and publicly appointed Board members must take and sign an Oath of Office acknowledging their understanding and commitment to the College's duty to serve and protect the public.

Oath of Office

I do swear or solemnly affirm that:

- I will abide by the Health Professions Act and I will faithfully discharge the duties of the position, according to the best of my ability;
- I will act in accordance with the law and the public trust placed in me;
- I will act in the interests of the College as a whole;
- I will uphold the objects of the College and ensure that I am guided by the public interest in the performance of my duties;
- I have a duty to act honestly;
- I will declare any private interests relating to my public duties and take steps to resolve any conflicts arising in a way that protects the public interest;
- I will ensure that other memberships, directorships, voluntary or paid positions or affiliations remain distinct from work undertaken in the course of performing my duty as a Board member.

Commitment to Cultural Humility 2020/21 Progress

Cultural Safety Concepts

The first key objective in fulfilling the College's commitment to cultural humility and safety is to change and influence the values and attitudes of both its registrants and staff. This involves embedding the concepts and principles of cultural humility and safety into the College's current internal processes. The College will also build on the First Nations Health Authority's #ItStartsWithMe campaign to build awareness of cultural humility and safety, while encouraging pharmacy professionals and staff to reflect on cultural humility and safety and make a pledge as part of the campaign. Leadership from the College Board and executive will help set an example for pharmacy professionals and staff by demonstrating their commitment through participation in cultural safety activities.

In December 2020, the College welcomed the [In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#) report, which outlines the findings and recommendations from the Addressing Racism: An Independent Investigation into Indigenous-specific Racism in BC Health Care led by Mary Ellen Turpel-Lafond. The College is committed to being guided by the recommendations in the report as we work to become anti-racist, and to support pharmacy professionals to do the same.

Commitment to Cultural Humility 2020/21 Progress

Activity	Deliverables	Progress
Board member education on the concepts and principles of cultural humility and safety	<ul style="list-style-type: none"> Integrate the First Nations Health Authority's cultural safety and humility webinars and the National Indigenous Cultural Safety Learning Series webinars into the Board's annual orientation. Recommend Board members to complete the provincial San'yas Indigenous Cultural Safety Training. Encourage Board members to read the Truth and Reconciliation report and the Health Inequalities and Social Determinants of Aboriginal Peoples' Health report. 	<p>Complete - College Board Cultural Safety and Humility content package has been developed and shared.</p> <p>The package includes:</p> <ul style="list-style-type: none"> BC Health Regulators Declaration of Commitment to Cultural Safety and Humility in the Regulation of Health Professionals First Nations Health Authority's Policy Statement on Cultural Safety and Humility Our Commitment to Cultural Humility (College Strategy) Cultural Safety and Humility Definitions

Commitment to Cultural Humility 2020/21 Progress

- Relevant webinars including [the cultural safety and humility webinar series](#) from FNHA and the [National Indigenous Cultural Safety Learning Series webinars](#)
- Recommended reading materials including the [Truth and Reconciliation](#) report and the [Health Inequalities and Social Determinants of Aboriginal Peoples' Health](#) report
- Information on the [San'yas Indigenous Cultural Safety Training](#) including that the College can cover the cost of the course if requested.
- First Nations Health Authority's [Creating a Climate for Change Resource Booklet](#)
- Information on how to make a [cultural safety and humility pledge](#) and join into the **"#ItStartsWithMe"** me campaign

The Cultural Safety and Humility content package is included in the College Board's intranet as well as the College Board's orientation package.

Commitment to Cultural Humility 2020/21 Progress

Board members make a cultural safety and humility pledge as part of the **"#ItStartsWithMe"** campaign.

- Board members and their cultural humility pledges captured through photos and shared online through ReadLinks and the **"#ItStartsWithMe"** campaign

Ongoing - The College has joined into the **"#ItStartsWithMe"** campaign primarily through social media.

Moving forward the College intends to build greater awareness of the #istartswithme campaign with pharmacy professionals and the public through ReadLinks articles, and social posts and presentations

Build on the First Nations Health Authority's **"#ItStartsWithMe"** campaign to engage more pharmacist and pharmacy technicians

- College extension of **"#ItStartsWithMe"** campaign with a focus on pharmacist and pharmacy technicians commitment to cultural safety and humility, including:
 - ReadLinks articles to build awareness of cultural safety and humility concepts and principles and encourage **"#ItStartsWithMe"** pledges
 - **"#ItStartsWithMe"** graphics and posts across all social media channels to build awareness of cultural safety and humility and encourage pharmacy professionals to make a cultural safety and humility pledge

Ongoing – The College has joined into the **"#ItStartsWithMe"** campaign primarily through social media.

Moving forward the College intends to build greater awareness of the **"#ItStartsWithMe"** campaign with pharmacy professionals and the public through ReadLinks articles, and social posts and presentations.

Commitment to Cultural Humility 2020/21 Progress

Building staff awareness and understanding of cultural safety and humility

- Sharing cultural safety and humility information, resources and events with staff through the College’s intranet.

Ongoing – The College has begun sharing cultural safety and humility content with staff through its employee intranet.

Moving forward the College plans on providing more information and resources, and sharing more cultural humility events through the College’s intranet and other communication methods.

Commitment to Cultural Humility 2020/21 Progress

Integrate cultural safety and humility into organizational policies

- Develop a cultural safety and humility policy to be included in the College's employee handbook.
- Support cultural safety and humility through the College's wellness plan (currently under development).

Ongoing – The College has developed a Workplace Diversity Policy and a Health and Wellness Policy which have been added into the College's employee handbook.

The Workplace Diversity Policy provides a definition and sets out expectations relating to workplace diversity. As part of this policy, in accordance with the [Employment Equity Act](#), the College will make reasonable efforts to ensure that it is a representative employer of women and men, members of visible minority groups, people with disabilities and First Nations and Aboriginal Peoples at all the organization's operations. The College will endeavor, where feasible, to make every effort to equalize the under-utilization of designated target groups.

In order to establish a working environment that respects and values differences, the College is also committed to fostering open communication by sharing information and resources on diversity (including information on cultural safety and humility) with all its employees and stakeholders; and providing applicable educational programs relating to diversity management.

Commitment to Cultural Humility 2020/21 Progress

		Moving forward the College will continue to review and assess where organizational policies may need to be revised or developed to support cultural humility and safety for First Nations and Aboriginal Peoples.
Integrate cultural safety and humility into new staff onboarding process	<ul style="list-style-type: none"> Highlight the College's commitment to cultural safety and humility when onboarding new staff including sharing the policy in the employee handbook. Encourage new staff to learn about and reflect on cultural safety by sharing resources (such as the cultural safety and humility webinars) and encourage new staff to make a cultural safety and humility pledge as part of the "#ItStartsWithMe" campaign. Include employment equity in our recruitment strategy. 	<p>Ongoing – The College's new Workplace Diversity Policy includes expectations for employment equity. All job postings now reflect the College's diversity commitment.</p> <p>Moving forward the College will be working on developing its approach for ensuring staff are aware of our commitment and are encouraged to learn about cultural safety and humility, including participation in the "#ItStartsWithMe" campaign.</p>
Demonstrated leadership and public acknowledgement of commitment to cultural safety and humility	<ul style="list-style-type: none"> Incorporate of College's commitment to cultural safety and humility into all public reports and presentations. Recognize indigenous lands we are speaking on through a land acknowledgement. 	Completed – The College has updated its processes to ensure it recognizes indigenous lands we are speaking on through a land acknowledgement and has incorporated its commitment to cultural safety and humility into all public reports and presentations.

Commitment to Cultural Humility 2020/21 Progress

Take specific actions to observe and incorporate the recommendations contained in the In Plain Sight report into our work as a regulator.

- Consistent publication of articles and statements that both outline our support for the Report as well as provide pharmacy professionals with key insights as to how to incorporate these recommendations within their own practices.

Ongoing – Since the report was published in December 2020, the College has published the following articles:

- [ReadLinks: BC's Health Regulators welcome report from investigation into Indigenous-specific racism](#)
- [ReadLinks: In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in BC Health Care](#)

Commitment to Cultural Humility 2020/21 Progress

Partnership and Engagement

In order to inform our transition to a more culturally inclusive healthcare environment for BC's First Nations and Aboriginal People, the College will focus efforts toward building and strengthening relationships with local communities to involve them in the decisions that affect them.

Activity	Deliverables	Progress
Include First Nation's groups in decisions that affect them	<ul style="list-style-type: none"> Identify, engage and partner with First Nations groups and organizations to reach out to and hear from more First Nations stakeholders. Produce engagement packages to help First Nation's groups share engagement opportunities with the College. Collaborate on cross-social media promotion to strengthen relationships with local communities and involve them in College engagements. 	<p>Ongoing – The College has continues to identify ways it can engage and partner with more First Nations and Aboriginal People in its consultations.</p> <p>The College worked with the First Nations Health Authority to develop a more culturally inclusive set of demographic questions to include in its surveys.</p> <p>The College consulted the First Nations Health Authority for guidance in updating its 'Naloxone' and 'State of Emergency' resources to better serve First Nations communities.</p> <p>The College shared COVID-19 vaccine information for Indigenous People in BC in a ReadLinks Article, as well as on its COVID-19 resource page.</p>

Commitment to Cultural Humility 2020/21 Progress

Build organizational awareness of First Nations cultural celebrations and events

- Share First Nations cultural celebrations and events through the College's intranet.

Ongoing – On September 30, 2020, College Staff celebrated Orange Shirt Day by wearing orange in recognition of the harm the residential school system has left on generations of indigenous families and their communities.

Additionally, the College published a [ReadLinks article](#) about Orange Shirt Day in order to further raise awareness about cultural safety and humility.

On June 19, 2020, the College published a [ReadLinks article](#) focused on Indigenous History Month. The article shared information about First Nations, Inuit and Metis peoples, and spoke about the efforts made by the First Nations Health Authority in supporting wellness events for First Nations Communities.

Moving forward the College will continue to learn about First Nations cultural celebrations and events to increase our organizational awareness.

Commitment to Cultural Humility 2020/21 Progress

Learning, Knowledge Exchange & Quality Health

In order to address the healthcare service gaps and unmet needs of BC's First Nations population, the College will work to build the principles of cultural humility and safety into its communications messaging and training requirements. This process will involve conducting culturally safe research respecting ceremony and tradition and encouraging pharmacy professionals to learn about and reflect on the best practices for cultural safety and humility in service delivery.

Activity	Deliverables	Progress
Reflect on our cultural safety and humility progress	<ul style="list-style-type: none"> Report on activities to improved cultural safety and humility within our Annual Report, including number of: <ul style="list-style-type: none"> pledges made webinars participated in by College staff and Board events attended to engage with First Nations, articles and educational materials releases hours committed in work associated with improving cultural safety and humility ReadLinks articles that capture the organization's reflection and successes on cultural safety and humility, including Board member reflections on their pledges where possible. 	<p>The College's 2017/18 Annual Report sets out a new annual process of reflecting on progress towards meeting our commitments each year..</p> <p>This includes a regularly updated table outlining the various action items within the commitment as well as the progress we've made on each of them.</p>
Build pharmacy professional and patient awareness of cultural humility, cultural safety and systematic racism	<ul style="list-style-type: none"> Establish ReadLinks series on cultural safety, humility to build understanding of the concepts and principles, educate pharmacy professionals and patients and identify how to prevent 	<p>Ongoing – In 2018, the College has published some established a Cultural Humility and Safety ReadLinks Series to help pharmacy professionals learn about the culture and experiences of First Nations and Aboriginal Peoples in BC,</p>

Commitment to Cultural Humility 2020/21 Progress

instances of systematic racism. The series will feature:

- First Nations Health Authority cultural humility webinars
- other cultural safety and humility training opportunities, such as the [San'yas Indigenous Cultural Safety Training](#).
- insight into First Nation's culture and communities across BC
- important statistics and information about First Nations people that dramatically differ and what the numbers are
- social media to promote the series with pharmacy professionals and patients
- Continue to expand the information and resources available on the dedicated cultural safety and humility landing page [bcpharmacists.org/humility](#)

the importance of acknowledging racism in healthcare, and the role of cultural humility and safety in providing care.

The College continued to build awareness of the dedicated landing page at [bcpharmacists.org/humility](#) to share feature our commitment, strategy, and other cultural safety and humility resources with pharmacy professionals and patients.

Moving forward the College will be developing and recruiting more articles for the [ReadLinks Series](#) and adding additional resources to the landing page.

Build organizational awareness of cultural humility, cultural safety and systematic racism

- Establish Lunch and Learns for College staff to learn about cultural safety, humility and systematic racism using First Nations Health Authority cultural humility webinars and discussion questions to encourage reflection.

Ongoing - In the past year, the College has shared information, as well as recaps of our experiences at various First Nations events through its Intranet and at Staff meetings.

Additionally, staff who volunteered to represent the College at various First Nations

Commitment to Cultural Humility 2020/21 Progress

- Establish a cultural safety and humility article series for the College's intranet to share information about First Nation's culture and communities and educational resources with staff.

events and conferences were taken through an orientation covering topics including:

- Cultural Safety and Humility
- Systemic Racism
- How racism impacts the health of first nations
- The disproportionate effect that the opioid crisis is having on First Nations Communities
- The implications of the evidence of Indigenous-specific racism within BC's health system, as presented in the In Plain Sight Report.

Moving forward the College will be developing and sharing more resources with College staff through the employee intranet, staff meetings, and other activities.

Board

Audit and Finance Committee

Mandate

To provide recommendations to the Board relating to the annual audit and financial management of the College.

Membership

Steven Hopp (Chair)
 Alex Dar Santos (Vice-Chair, effective November 20, 2020)
 Bob Nakagawa (Registrar)
 Mary O'Callaghan (staff resource)
 Christine Antler (until November 20, 2020)
 Anca Cvaci (effective November 15, 2019)
 Tracey Hagkull (Vice-Chair, until November 20, 2020)
 Claire Ishoy (effective November 20, 2020)

Number of Meetings: 4

Accomplishments of the Year

- Reviewed annual audit and auditor's recommendations with the auditors.
- Reviewed the annual investment report and policy.
- Reviewed the budget impacts of the COVID-19 health crisis.
- Reviewed and recommended approval of the 2021/22 annual budget.

Goals for Next Fiscal Year

- Review the annual audit.
- Review the investment annual report and policy.
- Monitor the current year financial reports and multi-year estimates.
- Review annual budget.
- Review financial reports.
- Consider recommendation of either extension of BDO audit services contract or a competitive bid for audit services.

Board

Governance Committee

Mandate

To provide recommendations to the Board on matters relating to Board Governance.

Membership

Anne Peterson (Chair)

Christine Antler (Vice-Chair, effective November 20, 2020)

David Pavan (staff resource)

Anca Cvaci

Claire Ishoy (Vice-Chair, until November 20, 2020)

Katie Skelton

Number of Meetings: 1 teleconference, 6 videoconferences

Accomplishments of the Year

- Refined the applicant evaluation form for the annual committee appointments
- Shared our committee member appointment process and applicant evaluation form with the College of Dental Surgeons of BC as requested
- Formalized the Board Chair and Vice-Chair election process by developing questions to pose to Board Chair and Vice-Chair candidates and discussing about desired candidate attributes
- Reviewed Board meeting evaluation survey results and implemented process changes as suggested
- Made amendments to Board Reference and Policies

Goals of Next Fiscal Year

- Finalize the Board competency matrix
- Review Board policies and manuals and recommend revisions to these documents.
- Review and make recommendations regarding Board member orientation and ongoing development.
- Review and make recommendations on policies and practices related to the recruitment, election and/or appointment of Board and committee members.
- Provide advice and guidance on Board evaluations, including Board meeting evaluations and Board member evaluations.
- Assess and make recommendations regarding the governance-related needs of the Board.
- Continue to review committee TOR and update as needed.

Board

Legislation Review Committee

Mandate

To provide recommendations to the Board and the Registrar on matters relating to pharmacy legislation and policy review.

Membership

Justin Thind (Chair)

Andrea Silver (Vice-Chair)

Christine Paramonczyk (staff resource)

Bal Dhillon

Claire Ishoy

Number of Meetings: 4

Accomplishments of the Year

Over the past year, the Legislation Review Committee recommended the following changes to policy, bylaws, fees and Standards of Practice¹:

Legislation	Amendments
<i>Health Professions Act</i> (HPA) Bylaws	<p>March 2020</p> <ul style="list-style-type: none"> • Approval to amend the Standards of Practice regarding verbal orders. • Approval to file fee schedule amendments with the Minister of Health.
	<p>August 2020</p> <ul style="list-style-type: none"> • Approval to extend an implementation plan to adopt the Model Standards for Pharmacy Compounding of Non-hazardous Sterile Preparations and the Model Standards for Pharmacy Compounding of Hazardous Sterile Preparations from May 2021 to July 2022, due to the COVID-19 emergency.
	<p>January 2021</p> <ul style="list-style-type: none"> • Approval to post bylaw amendments regarding temporary registration under a declared emergency for public comment. • Approval to file bylaw amendments regarding temporary registration under a declared emergency with the Minister of Health. • Approval to post bylaw amendments in Schedule "C" to recognize PharmAchieve's Drug Administration Course for public comment.

Board

Pharmacy Operations and Drug Scheduling Act (PODSA) Bylaws

March 2020

- Approval to file fee schedule amendments with the Minister of Health.

January 2021

- Approval to file PODSA fee amendments with the Minister of Health.

Professional Practice Policies (PPP)

March 2020

- Approval to amend PPP-54 Identifying Patients and Patient Representatives in Community Pharmacy and Telepharmacy Settings.
- Approval to amend PPP-59 Pharmacy Equipment.

October 2020

- Approval to amend the training deadline included in PPP-66 Opioid Agonist Treatment.

Drug Schedules Regulation (DSR)

August 2020

- Approval of a framework to remove natural health products from the Drug Schedules Regulation.

¹ Please note that this annual report only includes amendments that obtained LRC approval. In 2020, due to need to address the COVID-19 epidemic in an expedited fashion, there were multiple bylaw and policy amendments that proceeded for Board approval without first being approved by the LRC. That process was enabled by the following March 2020 Board decision: *"Approve all legislative changes to temporarily bypass the Legislation Review Committee and to go directly to the Board for approval amid COVID-19 pandemic."*

Goals for Next Fiscal Year

- Initiate scoping a comprehensive review and reform of legislative requirements under the Standards of Practice.
- Review and analyze amendments to the Health Professions Act, anticipated to be released by the provincial government. In addition, develop bylaw amendments, to implement the Health Professions Act changes.
- Implementation of bylaws adopting the National Association of Pharmacy Regulatory Authorities Model Standards for Sterile Compounding.

Engaging with the Public and Registrants

In the 2020/21 fiscal year, the College conducted a number of stakeholder engagements and collaborated with health care partners to help solicit input on College initiatives, policies and bylaws.

Public Advisory Network of British Columbia

The College continues to be a part of, and contribute to, the [Public Advisory Network of British Columbia \(BC-PAN\)](#). BC-PAN is a public advisory group comprised of multiple health regulatory Colleges and a group of public advisors with a mandate to bring the public voice and perspective to health regulation in BC.

BC-PAN was formed on September 25, 2019 with the goal of encouraging more comprehensive and meaningful public engagement on important issues related to health-care regulation in BC. The public members are asked to provide their feedback on a variety of topics to help guide professional standards and policies, strategic priorities, and communications directed at the public.

The health regulators involved in the BC-PAN include the:

BC College of Nurses and Midwives

- College of Chiropractors of BC
- College of Dental Surgeons of BC
- College of Dietitians of BC
- College of Occupational Therapists of BC
- College of Opticians of BC
- College of Pharmacists of BC
- College of Physical Therapists of BC
- College of Physicians and Surgeons of BC
- College of Traditional Chinese Medicine Practitioners and Acupuncturists of BC

There are currently 16 public advisors involved with the BC-PAN. The public advisors have varying levels of experience interacting with healthcare professionals and were selected to represent the diversity of the BC population.

Engaging with the Public and Registrants

Over the course of the 2020/2021 fiscal year, the College participated in three public engagements with the BC-PAN group. During these meetings, the following topics were discussed:

Responding to the COVID-19 pandemic

- Virtual Care
- Cultural Safety and Humility
- Social Media Standards for Health Professionals
- Equalizing the power balance during the complaints process
- Improving Codes of Ethics
- Public Registers

The College looks forward to continuing this valuable work as part of the BC-PAN over the coming fiscal year.

Website Engagement Survey

From December 17, 2020 to January 31, 2021, the College conducted a Website Engagement Survey to gather input from the public, pharmacy professionals and other health care partners on their experiences using our website (bcpharmacists.org) and how we can improve it.

As a regulator, the College aims to be forward-thinking and able to anticipate change to support good pharmacy practice and continue to ensure safe and ethical pharmacy care for British Columbians.

We want to ensure that our website continues to provide both the public and health professionals with an accessible and trusted resource for information related to pharmacy practice and regulation in BC.

bcpharmacists.org is a vital point of contact between the College and members of the public, as well as pharmacy professionals, and other health partners. As the College continues to progress in how it ensures safe and ethical pharmacy care for British Columbians, it is important that our website continues to evolve with us.

Access to information and content delivery are vital components of health regulation. The College's website enables us to [fulfill a number of our organizational values](#) including: consistency and transparency in our processes and messaging; providing accurate and useful information; and engaging meaningfully with all stakeholders.

Feedback gathered from the survey will help us make necessary improvements to our website to ensure that we are providing you with the most seamless access possible to the information you need.

Learn More: News – [News - We Need Your Input on the College's Website](#)

Engaging with the Public and Registrants

Customer Satisfaction Survey

From October 20 to November 27, 2020, the College hosted its third-annual Customer Satisfaction Survey to collect feedback on our performance from our external stakeholders.

As a fundamental component of BC's health system, the College of Pharmacists of BC is committed to serving and protecting the public. A big part of how we do this is by providing good customer service through the delivery of high quality services and assistance.

The survey was completed by a total of 741 respondents, attracting significant public participation with over 6% of respondents identifying as members of the public.

The feedback gathered through this survey will be used to inform the College's ongoing service objectives and ensure that we continue to deliver professional and ethical service that enables us to meet our mandate of protecting the public through the regulation of pharmacy practice in BC.

[Learn more about the 2020 Customer Satisfaction Survey](#)

Ensuring Professional Excellence

The College ensures that the practice of pharmacy meets or exceeds the standards set out to protect the public through its Practice Review Program, continuing education requirements and complaints process.

Practice Review Program

The Practice Review Program is an in-person review of a pharmacy professional's practice and the pharmacy where they work. The program aims to protect public safety by improving compliance with College Bylaws and Professional Practice Policies and ensuring consistent delivery of pharmacy services across BC.

When the COVID-19 pandemic was declared a public health emergency in March 2020, scheduled reviews were cancelled and open reviews with outstanding action items were postponed until July 2020. The College will not resume onsite *Pharmacy Professionals Reviews* until BC reaches the last phase of its Restart Plan, which is conditional on wide vaccinations, along with low case counts and low COVID-19 hospitalizations. Until then, *Pharmacy Professionals Reviews* will be conducted virtually.

The College began to conduct virtual reviews in October 2020 and has since conducted over 480 *Pharmacy Professionals Reviews* using the new virtual review model. By launching a new virtual review model as part of the Practice Review Program, the College has been able to continue to protect public safety through this important quality assurance process, while mitigating COVID-19 transmission risk, given the significant travel requirements associated with onsite reviews.

Under the Practice Review Program, every pharmacy and pharmacy professional in BC will be reviewed to ensure they meet College standards. The Program's multi-year time frame allows for all pharmacies and pharmacy professionals currently practising in BC to be reviewed on a cyclical basis.

The Practice Review Program is split into two components: the *Pharmacy Review* and the *Pharmacy Professionals Review*. Both components are based entirely on College Bylaws and Professional Practice Policies.

The *Pharmacy Review* process is built upon the College's previous inspection process and focuses on the legislated physical requirements of a pharmacy and the responsibilities of a pharmacy manager. Community pharmacies are evaluated on 12 mandatory and four non-mandatory categories for sites that provide sterile compounding, residential care, opioid agonist treatment, and/or injectable opioid

Ensuring Professional Excellence

agonist treatment. Hospital pharmacies are evaluated on 12 mandatory categories and five non-mandatory categories for sites that provide sterile compounding, non-sterile compounding, residential care, bulk repackaging and ambulatory services. Notably, the residential care services review in both hospital and community settings was a new component added to the non-mandatory categories in April 2019.

The *Pharmacy Professionals Review* is grounded in Board-approved focus areas that were identified as having the most impact on patient safety. The focus areas differ between pharmacists and pharmacy technicians.

Focus areas for pharmacists in community or hospital practice:

- Patient Identification Verification
- Profile Check
- Counselling
- Documentation

Focus areas for pharmacy technicians in community and hospital practice:

- Patient Identification Verification
- Product Distribution
- Collaboration
- Documentation

Practice Review Program Statistics 2020/21

Type of Review	Phase	Pharmacy	Pharmacy Professionals	Pharmacists	Pharmacy Technicians
In-Person	1	10	27	23	4
Virtual	1	0	370	322	48
In-Person	2	1	19	15	4
Virtual	2	0	111	67	44

PDAP Exemptions for CE Submissions During COVID-19

In response to the increasing demands on BC's pharmacies and pharmacy professionals during the COVID-19 pandemic, PDAP exemptions were granted for registrant renewals between March 2020 and February 2021; as well as to pharmacists and pharmacy technicians who wished to be reinstated after being non-practicing and/or former status for **less** than 90 days.

The College ensures pharmacy professionals meet the continuing education requirements through the [Professional Development and Assessment Program](#) (PDAP), which requires that each pharmacy professional must complete a minimum of 15 hours of continuing education each year, including a minimum of 5 hours of accredited learning. However, the sudden onset of the COVID-19 pandemic in BC and around the world resulted in the cancellation of a number of in-person CE courses and programs.

Ensuring Professional Excellence

As of March 2021, all registrants are once again required to complete their PDAP requirements prior to their registration renewal deadline.

Learn More: [News - CE Submission Requirements to Resume for March 2021 Renewals and Onwards](#)

PRP Insights and Related Articles

Trends in observations made by Compliance Officers during practice reviews also drive the regular PRP publication called PRP Insights. PRP Insights articles are articles written and available through ReadLinks on the College's website that address areas identified by the PRP review process. The publication of articles plays a key role in maintaining patient safety by raising awareness, educating, and clarifying issues for pharmacy professionals in order to improve compliance in their practice. The Practice Review Program published the following PRP Insights articles in 2020/2021:

- [PRP Insights: Residential Care – Part 2 \(August 26, 2020\)](#)
- [PRP Insights: Electronic Signatures Clarified \(October 14, 2020\)](#)
- [PRP Insights: Addressing Gaps in the Provision of Patient Counselling in Community and Hospital Settings \(January 05, 2021\)](#)
- [PRP Insights: Entering Schedule II, III and Unscheduled Drugs on a Patient's Record \(January 05, 2021\)](#)

Ensuring Professional Excellence

Practice Review Committee

Mandate

To monitor standards of practice to enhance the quality of pharmacy care for British Columbians.

Membership

Tracey Hagkull (Chair)
 Michael Ortynsky (Vice-Chair)
 Ashifa Keshavji (staff resource)
 Naveen Aujla
 Marilyn Chadwick
 Patrick Chai
 Sally Chai
 Yonette Harrod
 Amy Ku
 Alison Rhodes
 Lorena Salamat
 Deepa Topiwalla
 Peter Williams

Number of Meetings: 3 videoconferences

Accomplishments of the Year

- Presented the 2019-20 Fiscal Year Report to the Board
 - Review Data and Registrant Feedback Survey Results
- Launched Virtual Reviews for pharmacy professionals in response to the COVID-19 Pandemic, development included:
 - Environmental scan of other Pharmacy Regulatory Authorities
 - Preliminary Privacy Impact Assessment
 - IT development of a new PRP application
 - Development of new registrant resources
 - Developed new registrant feedback survey
- Published 6 PRP Insights Articles in Readlinks

Goals for Next Fiscal Year

- Present the 2020-21 Fiscal Year Report to the Board
 - Review Data and Registrant Feedback Survey Report
- Explore development of Virtual Reviews for pharmacies
- Conduct reviews to meet review targets
- Prepare PRP Insights Articles for Readlinks
- Develop and implement the following additional review criteria
 - Telepharmacy
 - Injectable Opioid Agonist Treatment

Ensuring Professional Excellence

Quality Assurance Committee

Mandate

To ensure that registrants are competent to practice and to promote high practice standards amongst registrants.

Membership

Michael Ortynsky (Chair, effective November 15, 2019)

Sunny Gidda (Vice-Chair)

Ashifa Keshavji (staff resource)

Hani Al-Tabbaa

Tessa Cheng

Tracey Hagkull

John Hope

Lena Hozaima

Katherine Langfield

Frank Lucarelli (Chair until November 15, 2019)

Anthony Seet

Rebecca Siah

Man-Fung Allen Wu

Number of Meetings: 4

Accomplishments of the Year

- CE Audits
 - Developed structure, process, criteria and tools
 - Conducted initial CE Audits
 - Summarized findings and identified areas for improvement
 - Presented results to the Board
- Received legal opinion to update policies
- Launched new feedback survey for PDAP CE submission through portal and App

Goals for Next Fiscal Year

- CE Audits

Ensuring Professional Excellence

- Make improvements as identified from the initial CE Audits
 - Conduct CE Audits
 - Review and monitor results
 - Summarized findings to develop the first CE Audits report
- Update program policies
- Monitor results from the new feedback survey for PDAP CE submission through portal and App
- Determine if a registrant learning needs survey is required based on Board direction
- Update program policies
- Update registrant feedback survey
- Determine if a registrant learning needs survey is required based on Board direction

Developing Practice Requirements to Protect Patient Safety

We develop and amend our bylaws, policies and practice standards to protect public safety. We also consider, develop and recommend changes to pharmacy practice requirements that are needed to increase public safety and improve patient outcomes.

Within the context of dual health emergencies, the College introduced a number of bylaw, policy and practice changes to support our province's response to both the COVID-19 pandemic and the opioid overdose crisis.

Learn More:

- [COVID-19 Pandemic](#)
- [Opioid Overdose Crisis](#)

New Requirements for Verbal Prescription Orders

On June 19, 2020, new requirements for the written records of verbal prescriptions to be filled at community pharmacies came into effect.

The new requirements address a barrier whereby hospital discharge prescriptions written by pharmacists via verbal authorization from a practitioner are often not accepted by community pharmacies and residential care facilities.

The new requirements provide an additional subsection acknowledging verbal prescriptions as valid if the written record includes:

- The name and regulatory college identification number of the practitioner
- The name, college identification number and signature or initial of the registrant who received the verbal prescription

This means that all written records of verbal orders to be filled at a community pharmacy must now meet these requirements. This includes written records of verbal orders taken by registrants in the community.

Learn More: [News– New Requirements for Verbal Prescription Orders \(June 16, 2020\)](#)

Amendments for PPP-58: Medication Management

In May 2020, the Board approved amendments to the adaptation of transferred prescriptions and the limitation on drug categories for therapeutic substitution as part of Professional Practice Policy-58: Medication Management (Adapting a Prescription) to support patient care during the COVID-19 public health emergency.

Developing Practice Requirements to Protect Patient Safety

In light of the COVID-19 pandemic, the College reviewed PPP-58 for opportunities to support patient care during the ongoing public health emergency. Based on the review, temporary amendments were made to:

- Permit the adaptation of transferred prescriptions; and
- Remove the limitation on drug categories for therapeutic substitution where there is a drug shortage.

These amendments will remain effective for the duration of the [COVID-19 public health emergency in British Columbia](#).

Learn More: [Amendments to Professional Practice Policy-58: Medication Management \(Adapting a Prescription\)](#)

Registering Pharmacy Professionals and Licensing Pharmacies

Registering Pharmacists and Pharmacy Technicians

All pharmacists and pharmacy technicians in British Columbia must register with the College in order to practice in the province. In addition, all pharmacies in the province must be approved and issued a licence from the College in order to operate.

The College registration process ensures that pharmacy professionals meet the 'entry to practice' standards and possess the knowledge, skills and abilities to be able to provide safe pharmacy care. Registrants must meet annual professional development and continuing education requirements to demonstrate ongoing competence in professional practice. Registration is valid for 12 months and must be renewed annually.

Registrants must also complete a criminal record check and carry professional liability insurance as a requirement of their registration.

The College is responsible for maintaining a register which lists all the registered pharmacy professionals and licensed pharmacies in BC, and makes information related to limits, conditions, suspensions or cancellations of a registrant publicly available on the College website.

Licensing Pharmacies

As the licensing body for all pharmacies in the province, the College regulates the ownership and operation of BC pharmacies in accordance with the *Pharmacy Operations and Drug Scheduling Act* (PODSA), the *Health Professions Act* (HPA), and the Regulations and bylaws of the College under these Acts.

Community, Hospital and Telepharmacy Pharmacy Licences are valid for 12 months and must be renewed annually.

Temporary Registration Supports BC's COVID-19 Response

Given the anticipated increased demand for pharmacists and pharmacy technicians to help with BC's response to the pandemic, in April 2020, the College developed amendments to the Health Professions Act Bylaws to enable eligible individuals to apply for temporary registration with the College to provide pharmacy services during the COVID-19 pandemic.

Individuals who may be eligible for temporary registration with the College during the COVID-19 pandemic, include:

Registering Pharmacy Professionals and Licensing Pharmacies

- Former Registrants
- Non-Practising Registrants
- Pharmacy Graduates (including UBC) who are not yet Full Pharmacists
- Pharmacy Students from Outside of BC

Following its implementation in April 2020, over 93 individuals received Temporary Registration from the College during the 2020/21 fiscal year. Eligible individuals are able to apply for temporary registration with the College to provide pharmacy services during this emergency period. Unlike other types of registration classes, temporary registration is granted only for the period of the declared emergency and it will end on a date determined by the Registrar or the Registration Committee.

There are four classes under this type of registration and their differences are summarized in the table below:

Class	Who is Eligible to Apply?	Scope of Practice
Temporary Pharmacist	<ol style="list-style-type: none"> 1. Currently registered as the equivalent of a full pharmacist in another jurisdiction in Canada or in the United States, and have no limitations, restrictions or conditions on practice; OR 2. Former registrant who was registered as a full pharmacist within the last 3 years; OR 3. Non-practising pharmacist who was registered as a full pharmacist within the last 3 years. 	Can perform restricted activities/pharmacy services as if they are a full pharmacist, including drug administration by injection and intranasal route if applicable.
Temporary Pharmacy Technician	<ol style="list-style-type: none"> 1. Currently registered as the equivalent of a pharmacy technician in another jurisdiction in Canada, and have no limitations, restrictions or conditions on practice; OR 2. Former registrant who was registered as a pharmacy technician within the last 3 years; OR 3. Non-practising pharmacy technician who was registered as a pharmacy technician within the last 3 years. 	Can perform restricted activities/pharmacy services as if they are a pharmacy technician.
Temporary Limited Pharmacist	<ol style="list-style-type: none"> 1. Pharmacy graduates who have completed their Structural Practical Training (SPT) requirements but not all the required assessments for registration; OR 2. Pharmacy graduates who have completed their Jurisprudence Exam, PEBC Evaluating (if applicable) and Qualifying Exams, but not their SPT. 	Can perform restricted activities/pharmacy services under the direct supervision of a full pharmacist.
Temporary Student Pharmacist	<ol style="list-style-type: none"> 1. Pharmacy students enrolled in a recognized pharmacy education program outside BC. 	Can perform restricted activities/pharmacy services under the direct supervision of a full pharmacist.

Registering Pharmacy Professionals and Licensing Pharmacies

Eligible applicants may apply for temporary registration through the [College's Temporary Registration Application Process](#).

Learn More: [News – Temporary Registration Now Available to Support BC's COVID-19 Response](#)

Remote Options for Jurisprudence Examination

The College partnered with Prometric to administer the JE as a computer-based examination. The JE may be taken on-site at a Prometric Test Center or as a remotely proctored online examination at a location that meets the requirements.

Learn More: [Jurisprudence Exam Information](#)

Registration and Licensure

2020/21 Licensure Statistics

Licensed Pharmacies	2020/21	2019/20	2018/19
Community			
Beginning of year	1370	1358	1353
Add: Opening	60	37	32
Add: Change of Licence Type	0	1	0
Add: Reinstated	0	1	1
Add: Transfer from Suspended	0	0	–
Less: Suspended	0	0	0
Less: Cancelled	-3	-1	-1
Less: Permanently Closed	-22	-25	-26
Less: Change of Licence Type	0	0	-1
Less: Licence Expired (Eligible to Reinstate)	-1	-1	–
Fiscal year end	1404	1370	1358
Hospital			
Beginning of year	73	72	71
Add: Opening	0	1	1
Add: Change of Licence Type	0	0	0
Add: Reinstated	0	0	–
Add: Transfer from Suspended	0	0	–
Less: Suspended	0	0	–
Less: Cancelled	0	0	–
Less: Permanently Closed	0	0	0
Less: Change of Licence Type	0	0	0
Less: Licence Expired (Eligible to Reinstate)	0	0	–
Fiscal year end	73	73	72

Registration and Licensure

2020/21 Licensure Statistics

Licensed Pharmacies	2020/21	2019/20	2018/19
Education			
Beginning of year	4	4	4
Add: Opening	0	0	0
Add: Change of Licence Type	0	0	–
Add: Reinstated	0	0	–
Add: Transfer from Suspended	0	0	–
Less: Suspended	0	0	–
Less: Cancelled	-1	0	–
Less: Permanently Closed	0	0	0
Less: Change of Licence Type	0	0	0
Less: Licence Expired (Eligible to Reinstate)	0	0	–
Fiscal year end	3	4	4
Satellite			
Beginning of year	11	9	9
Add: Opening	2	2	1
Add: Change of Licence Type	0	0	0
Add: Reinstated	0	0	–
Add: Transfer from Suspended	0	0	–
Less: Suspended	0	0	–
Less: Cancelled	0	0	–
Less: Permanently Closed	0	0	-1
Less: Change of Licence Type	0	0	0
Less: Expired (Eligible to Reinstate)	0	0	–
Fiscal year end	13	11	9

Registration and Licensure

2020/21 Licensure Statistics

Licensed Pharmacies	2020/21	2019/20	2018/19
Telepharmacy			
Beginning of year	13	13	12
Add: Opening	0	1	0
Add: Change of Licence Type	0	0	1
Add: Reinstated	0	0	–
Add: Transfer from Suspended	0	0	–
Less: Suspended	0	0	–
Less: Cancelled	0	0	–
Less: Permanently Closed	-1	0	0
Less: Change of Licence Type	0	-1	0
Less: Licence Expired (Eligible to Reinstate)	0	0	–
Fiscal year end	12	13	13

Registration and Licensure

2020/21 Registration Statistics

Pharmacist Pre-Registration	2020/21	2019/20	2018/19
Category (# of new applicants)			
Canadian Free Trade Agreement (CFTA)	96	124	131
New Grad/Non-CFTA	12	24	24
IPG/USA	56	59	76
Reinstatement	21	28	36
CFTA-Reinstatement	15	16	21
Fiscal year end total (# of new applicants)	200	251	288

Registration and Licensure

2020/21 Registration Statistics

Full Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	6354	6269	6079
Add: New registrants (includes Transfer from Temporary Registration)	329	359	392
Add: Reinstated	17	22	36
Add: Reinstated Following Late Registration Renewal	60	44	–
Add: Transfer from Suspended	9	9	9
Less: Transfer to Former (voluntary or > 90 days late)	-195	-248	-216
Less: Transfer to Non-Practising	-14	-19	-15
Less: Transfer to Former (Eligible for Late Registration Renewal)	-65	-69	–
Less: Deceased	-3	-3	-4
Less: Suspended (by Complaints and Investigations)	-15	-10	-12
Less: Cancelled (by Complaints and Investigations)	0	0	0
Fiscal year end total*	6477	6354	6269

Registration and Licensure

2020/21 Registration Statistics

Non-Practicing Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	53	49	49
Add: Transfer from Full Pharmacist	13	20	15
Add: Reinstated Following Late Registration Renewal	5	1	–
Add: Transfer from Temporary	0	–	–
Add: Transfer from Suspended	0	0	–
Less: Reinstated to Full Pharmacist	0	-2	-3
Less: Transfer to Former (voluntary or > 90 days late)	-10	-13	-12
Less: Transfer to Former (Eligible for Late Registration Renewal)	-5	-2	–
Less: Transfer to Temporary	-4	-	-
Less: Deceased	0	0	0
Less: Suspended (by Complaints and Investigations)	0	0	0
Less: Cancelled (by Complaints and Investigations)	0	0	0
Fiscal year end total*	52	53	49

Registration and Licensure

2020/21 Registration Statistics

Limited Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	4	3	1
Add: New applicants	0	9	6
Add: Reinstated Following Late Registration Renewal	0	0	–
Add: Transfer from Suspended	0	0	–
Less: Registered as Full Pharmacist	0	-7	-4
Less: Transfer to Former (voluntary or > 90 days late or exceeded maximum # of renewals)	0	0	–
Less: Transfer to Former (Eligible for Late Registration Renewal)	-1	-1	–
Less: Deceased	0	0	–
Less: Suspended (by Complaints and Investigations)	0	0	–
Less: Cancelled (by Complaints and Investigations)	0	0	–
Fiscal year end total	3	4	3
Student Pharmacists Registration	2020/21	2019/20	2018/20
Year 1	225	228	221
Year 2	226	215	212
Year 3	210	216	219
Year 4	217	210	203
Fiscal year end total	878	869	855

Registration and Licensure

2020/21 Registration Statistics

Student (Non-UBC) Pharmacists Registration	2020/21	2019/20	2018/19
Fiscal year end total	13	4	13
Student Temporary Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	0	–	–
Add: New Applicants	6	–	–
Add: Transfer from Suspended	0	–	–
Less: Cease Registration (voluntary)	0	–	–
Less: Registered as Other Registration Classes	-1	–	–
Less: Deceased	0	–	–
Less: Suspended (by Complaints and Investigations)	0	–	–
Less: Cancelled (by Complaints and Investigations)	0	–	–
Fiscal year end total	5	–	–

Registration and Licensure

2020/21 Registration Statistics

Limited Temporary Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	0	–	–
Add: New Applicants	220	–	–
Add: Transfer from Other Categories	0	–	–
Add: Transfer from Suspended	0	–	–
Less: Transfer to Full Pharmacist	-176	–	–
Less: Cease Registration (voluntary) and Transfer Back to Previous Category	-3	–	–
Less: Deceased	0	–	–
Less: Suspended (by Complaints and Investigations)	0	–	–
Less: Cancelled (by Complaints and Investigations)	0	–	–
Fiscal year end total	41	–	–

Registration and Licensure

2020/21 Registration Statistics

Temporary Pharmacists Registration	2020/21	2019/20	2018/19
Beginning of Year	0	–	–
Add: New Applicants (including transfer from non-practising and former)	49	–	–
Add: Transfer from Suspended	0	–	–
Less: Transfer to Full Pharmacist	-5	–	–
Less: Cease Registration (voluntary) and Transfer Back to Previous Registration Classes	0	–	–
Less: Deceased	0	–	–
Less: Suspended (by Complaints and Investigations)	0	–	–
Less: Cancelled (by Complaints and Investigations)	0	–	–
Fiscal year end total	44	–	–

Registration and Licensure

2020/21 Registration Statistics

AUTHORIZED FOR ADMINISTRATION BY INJECTION & INTRANASAL ROUTE	2020/21	2019/20	2018/19
Pharmacists (Full and Limited)	4345	4203	4109
Pharmacists (Temporary, Temporary Limited, Temporary Student)	36	–	–
UBC Students (3 ^{re} and 4 th year)	285	344	306
Fiscal year end total	4666	4547	4415

Registration and Licensure

2020/21 Registration Statistics

Pharmacy Technician Pre-Registration	2020/21	2019/20	2018/19
Category (# of new applicants)			
Canadian Free Trade Agreement (CFTA)	17	20	17
New Grad	96	115	113
Reinstatement	7	7	11
CFTA-Reinstatement	2	1	1
Fiscal year end total (# of new applicants)	122	143	142

Pharmacy Technician Registration	2020/21	2019/20	2018/19
Beginning of Year	1654	1576	1510
Add: New Registrants (Included Transfer from Temporary Registration)	75	107	94
Add: Reinstated	6	7	14
Add: Reinstated Following Late Registration Renewal	10	9	–
Add: Transfer from Suspended	0	0	0
Less: Transfer to Former (voluntary or >90 days late)	-37	-28	-34
Less: Transfer to Non-Practising	-2	-2	-6
Less: Transfer to Former (Eligible for Late Registration Renewal)	-18	-15	–
Less: Deceased	0	0	0
Less: Suspended (by Complaints and Investigations)	-1	0	-2
Less: Cancelled (by Complaints and Investigations)	0	0	0
Fiscal year end total	1687	1654	1576

Registration and Licensure

2020/21 Registration Statistics

Non-Practising Pharmacy Technician Registration	2020/21	2019/20	2018/19
Beginning of Year	3	7	5
Add: Transfer from Pharmacy Technician	2	2	6
Add Reinstated Following Late Registration Renewal	0	0	0
Add: Transfer from Suspended	0	0	–
Less: Reinstated to Pharmacy Technician	0	-4	-1
Less: Transfer to Former (voluntary or >90 days late)	-2	-1	-3
Less: Transfer to Former (Eligible for Late Registration Renewal)	0	-1	–
Less: Deceased	0	0	0
Less: Suspended (by Complaints and Investigations)	0	0	0
Less: Cancelled (by Complaints and Investigations)	0	0	0
Fiscal year end total	3	3	7

Registration and Licensure

2020/21 Registration Statistics

Temporary Pharmacy Technicians Registration	2020/21	2019/20	2018/19
Beginning of Year	0	–	–
Add: New applicants (including Transfer from Non-Practising and Former)	5	–	–
Add: Transfer from Suspended	0	–	–
Less: Transfer to Full Pharmacist	-2	–	–
Less: Cease Registration (voluntary) and Transfer Back to Previous Registration Classes	0	–	–
Less: Deceased	0	–	–
Less: Suspended (by Complaints and Investigations)	0	–	–
Less: Cancelled (by Complaints and Investigations)	0	–	–
Fiscal year end total	3	–	–

Registration and Licensure

Application Committee

Mandate

To review pharmacy licence applications that have been referred to the committee and determine whether to issue, renew or reinstate a licence with or without conditions.

Membership

John Beever (Chair)
 Derek Lee (Vice-Chair)
 Doreen Leong (staff resource)
 Christine Antler
 Neil Bruan
 George Budd (until April 30, 2020)
 Dianne Cunningham
 Natasha Edgar (effective May 1, 2020)
 Kris Gustavson
 Trevor Hoff
 Jennifa James (effective May 1, 2020)
 Jasdeep Johal (effective May 1, 2020)
 Robert Lewis
 Kevin Ly (until April 30, 2020)
 Lysa Leong (effective May 1, 2020)
 Sarah Masson (effective May 1, 2020)
 Nima Moazen
 John (Curtis) Omelchuk (effective May 1, 2020)
 Surbhi Singh (until April 30, 2020)
 Katie Skelton
 Justin Thind (until April 30, 2020)
 Sorell Wellon
 Mark Zhuo
 Number of Teleconferences: 20 videoconferences

Accomplishments of the Year

- Conducted an overall review of eligibility case files and incomplete pharmacy files.

- Drafted and revised communication materials for licensure processes – Pharmacy Licensure Guide, ReadLinks articles, webpages and correspondence.
- Pharmacy applications referred to the AC:
 - 10 pharmacy files related to eligibility criteria.
 - 31 pharmacy files were incomplete/late

Goals for Next Fiscal Year

- Annual in-person/virtual meeting/orientation/training to review Application Committee decisions, administrative law and decision making including applying conditions to a pharmacy licence.
- Annual review and revision of all communication materials including FAQs, Pharmacy Licensure Guide, licensure pages on College website and correspondence letters/emails.

Registration and Licensure

Drug Administration Committee

Mandate

To review, develop and recommend the standards, limits and conditions under which a registrant may administer a drug or substance to patients and to maintain patient safety and public protection with respect to authorized pharmacist's administration of injections to patients or administration of drugs by intranasal route to patients.

Membership

Wilson Tsui (Chair)
 Bing Wang (Vice-Chair)
 Doreen Leong (staff resource)
 Jenny Cheung
 Alex Dar Santos
 Wendy Woodfield (effective May 1, 2020)
 Julia Zhu
 Number of Meetings: 3 videoconferences

Accomplishments of the Year

- Provided the Board an update on the status of Drug Administration Committee's (DAC) recommendations made to them at its February 15, 2019, to remove the restrictions on drug administration by injection and intranasal route (June 12, 2020).
- Received an update on the work of the Safe Drug Administration by Pharmacists Working Group (May 25, 2020).
- Recommended proposed amendments to the Drug Administration by Injection and Intranasal Route Standards, Limits and Conditions to the Board (September 18, 2020).

Goals for Next Fiscal Year

- To remove the restrictions on the Drug Administration by Injection and Intranasal Route Standards, Limits and Conditions.
- Have the "Drug Administration by Pharmacists" Report presented to the Ministry of Health (March 9, 2021).

Registration and Licensure

Jurisprudence Examination Sub-Committee

Mandate

To ensure that the Jurisprudence Examination remains a valid and reliable assessment instrument.

Membership

Bal Dhillon (Chair)

Christopher Szeman (Vice-Chair)

Doreen Leong (staff resource)

Angel Cao

Brian Kim

Ali Ladak

Kent Ling

Tara Oxford

Asal Taheri

David Wang

Number of Meetings: 1 in-person; 1 videoconference

Accomplishments of the Year

- Key policies, processes, exam results and item statistical data reviewed and approved.
- Secured Prometric, an assessment and testing organization to facilitate administration of the Jurisprudence Exam for both in-person and remote proctor testing.
 - Transitioned to computer-based testing (CBT).
 - Secured new item bank platform.
- Revised all Jurisprudence Exam communications materials ie. Jurisprudence Exam Information Guide, College website, confirmation letters and results letter to applicants.

Goals for Next Fiscal Year

- Annual review of all Jurisprudence Exam policies and Jurisprudence Exam communication materials.
- Launched Jurisprudence Exam Modernization Project (delayed from 2020 due to COVID).
 - Develop project plan and timelines.
 - Conduct Jurisprudence Exam blueprint, item writing, item review and standards setting.

Registration and Licensure

Registration Committee

Mandate

To ensure that registrants meet the conditions or requirements for registration as a Member of the College.

Membership

Raymond Jang (Chair)
 Dana Elliot (Vice-Chair)
 Doreen Leong (staff resource)
 Atamjit Bassi (effective May 1, 2020)
 Avena Guppy
 Sukjiven (Suki) Gill (until April 30, 2020)
 Chelsea Huang
 Coral Kalliciak (effective May 1, 2020)
 Derek Lee (until April 30, 2020)
 Vanessa Lee
 Jihyun (Amy) Lim
 Natasha Patel (effective May 1, 2020)
 Mikolaj Piekarski
 Traci Skaalrud
 Katie Skelton
 Lorraine Unruh (until April 30, 2020)
 Number of Meetings: 7 videoconferences

Accomplishments of the Year

- Key policies, processes and exam results reviewed and approved including the Registration Committee Policies and Jurisprudence Exam results.
- Reviewed and updated all communication materials including webpages, correspondence letters and Registration Committee procedures.
- Applications reviewed:
 - Pharmacist Pre-registration Application – Canada Free Trade Agreement – Extension of validity period of pre-registration application (N=1).

- Pharmacist Pre-registration Application – International Pharmacy Graduate – Structured Practical Training Exception (N=9).
- Pharmacist Pre-Registration Application – International Pharmacy Graduate – Extension of validity period of the Structured Practical Training and Jurisprudence Exam result (N=1).
- Pharmacist Jurisprudence Exam – Exam accommodation (N=1).
- Pharmacy Technician Pre-Registration Application – Canadian Graduate – Structured Practical Training Exception (N=2).

Goals for Next Fiscal Year

- Annual review of all registration policies
- Review and recommend bylaw changes related to pre-registration and registration requirements, and number of assessment attempts.
- Launch online registration and pre-registration process for all registration categories.
- Annual review and revision of all communication materials including FAQs, registration pages on College website and correspondence letters/emails.

Complaints and Investigations

College registrants have a legal and ethical obligation to promote and protect the best interests of their patients. The majority of College registrants are competent and skilled practitioners who work hard to uphold this obligation and maintain patient confidence by providing safe and effective pharmacy care.

However, there are times when a patient, co-worker, employer or other health care professional may have a concern about the pharmacy care delivered by a pharmacist or pharmacy technician. The College's complaints resolution process is designed to deal with such circumstances and is grounded in the College's mandate to protect the public.

Contacting the College about a Complaint

If you have a concern about the care you received from a pharmacist or pharmacy technician, the best place to start is to speak directly with that person about your concern. Simple miscommunications are often at the root of many complaints, and although it may be difficult, a face-to-face discussion is often the best way to resolve an issue.

If you are unable to resolve the concern with the pharmacist or pharmacy technician, please contact the College's complaints line at 1-877-330-0967.

Learn more about the complaints process at bcpharmacists.org/complaints.

Posting of Discipline Hearing Notifications

The College publishes citations and Discipline Hearing Notifications as individual items in the ['News' section of its website](#). These notifications will also appear on the College's homepage. The College may include information about upcoming Discipline Hearing Notifications in its monthly 'ReadLinks Roundup' email, which is sent to all pharmacists and pharmacy technicians.

Previously, citations for Discipline Committee hearings were published under ['Discipline Hearing Notifications'](#) on the College's website 2-4 weeks prior to a scheduled hearing.

When the College's Discipline Committee takes action under [Section 39 \(2\) of the Health Professions Act](#) ("HPA"), these actions are published as ['Complaints Outcomes'](#) on the College's website.

As a Health Professions College under the *Health Professions Act*, the College's mandate is to serve and protect the public. Greater transparency assures the public that they can trust their pharmacies, pharmacists, and pharmacy technicians to provide safe and effective pharmacy care.

[Learn more about our complaints and discipline publication policy.](#)

Complaints and Investigations

Summary of Relevant Statistics

The College's Inquiry Committee investigates complaints and concerns regarding a registrant's conduct, competency and/or ability to practice and decide on an appropriate course of action pursuant to legislation. All complaints are received and resolved by:

- informal resolution through remediation and correspondences,
- formal complaints process with resolution through remedial activities, reprimands, suspensions and practice restrictions, or
- referral to the registrar with direction to issue a citation and begin disciplinary proceedings.

In 2020/21, the Inquiry Committee received and opened 150 complaints which involved over 270 registrants. Panels of the Inquiry Committee convened on 66 occasions to review and dispose of 137 cases and to reconsider 100 cases. Majority of these cases were resolved by way of consent with the registrant and resolved by remedial action. There were 8 registrants whose cases were reviewed and disposed of by the committee but have yet to sign their consent agreements at the time of reporting. There were two cases where the Inquiry Committee directed the Registrar to issue citations whereby the registrants failed to respond to the College. One registrant agreed to cancel his registration with the College.

The Inquiry Committee took no further action for 41 registrants as the conduct or competence of the registrant was found to be satisfactory or the complaint was unsubstantiated. The Inquiry Committee also took actions it considered appropriate to resolve the matter between the complainant and the registrant in 52 cases, whereby the registrant's conduct and competence was found to be unsatisfactory but relatively minor. These actions may include reminders and recommendations for better practice and written letters of apologies to the complainants.

Six registrants' citations and discipline hearings were cancelled as the matters were resolved by consent pursuant to section 37.1 or section 36 of the HPA. Section 37.1(1) of the HPA states that the registrant may give the Inquiry Committee a written proposal at any time before the commencement of a discipline hearing. In these instances, the orders are considered to be orders made by the Discipline Committee.

Section 35 Extraordinary Action

If the Inquiry Committee considers an action necessary to protect the public during the investigation of a registrant or pending a hearing of the discipline committee, it may, by order,

- impose limits or conditions on the practice of the designated health profession by the registrant, or
- suspend the registration of the registrant.

This action is only used in rare situations where it is necessary to protect the public in cases where there is an urgent public protection issue. In 2020/21, the Inquiry Committee made orders to

Complaints and Investigations

impose limits and conditions on a registrant's pharmacy practice pursuant to section 35(1)(a) of the HPA, pending investigation into the registrants' practice or discipline hearing. These included but are not limited to:

- not be involved in any way in the preparation, compounding, manipulation and/or dispensing of injectable and/or sterile products to patients/clients or health care providers/prescribers for office use;
- not act as a pharmacy manager or owner, to not act as a preceptor to students or be responsible for the supervision of other staff and/or registrants; and
- must work under the direct supervision of another registrant acceptable to College staff.

Health Professions Review Board

Under section 50.53 the HPA, the Health Professions Review Board ("HPRB") can:

- on application by a complaint under section 50.6, review the adequacy of the investigation conducted by the Inquiry Committee and the reasonableness of its disposition;
- on application by a registrant or complainant under section 50.57, review the timeliness of an investigation.

In 2020/21, there was one HPRB review requested by a complainant and the HPRB confirmed the disposition of the Inquiry Committee.

Summary of Inquiry Committee Dispositions

Medication Dispensing Errors

The most common complaints received at the College continue to be complaints related to medication dispensing errors, such as:

- patients receiving the incorrect medication or strength of medication;
- medications being dispensed and/or delivered to the wrong patient;
- prescription labels containing incorrect information, or information inconsistent with the original prescription;
- patients receiving expired medication; and
- blister packaging errors, such as incorrect quantities and incorrect medication inside individual blisters.

In all the above instances, the root cause of the errors was an inadequate final check and/or inadequate patient counselling.

For most complaints involving a medication dispensing error, the Inquiry Committee took a remedial approach in its dispositions. Registrants who had been responsible for the final check and/or patient counselling for a prescription, but who had not followed legislative requirements for these steps, were requested to sign consent agreements containing terms and conditions in order to prevent an error from occurring again. Examples of such terms include:

Complaints and Investigations

- reviewing legislative requirements for final check and/patient counselling, and then signing a declaration to indicate understanding and future compliance;
- undertaking (ie. make a written, professional commitment) to take certain steps to change or enhance their practice to prevent a recurrence of the error;
- reading an article and/or taking a course related to preventing medication errors; and
- writing a written reflection regarding their learnings from the article/course.

Professional Misconduct

The Inquiry Committee reviewed and disposed of cases related to professional misconduct that did not involve pharmacy practice. These cases included conduct such as, not responding to the College in a timely manner, or in some cases not at all, altering legal documents and registrants misrepresenting themselves. To resolve these matters, the registrants consented to terms imposed by the Inquiry Committee that included:

- reviewing the College's code of ethics tutorial;
- paying a fine;
- consenting to letters of reprimand in the range of one year to permanent; and
- not being a preceptor or supervisor of pharmacy students for a period of time.

Inaccurate PharmaNet Recordkeeping

The Inquiry Committee disposed of cases related to inaccurate processing of daily-dispensed prescriptions and/or weekly or monthly processing. The Inquiry Committee determined that pharmacy staff dispensed prescriptions to patients for a quantity of seven days but processed those prescriptions once daily onto PharmaNet. This practice resulted in inadequate prescription preparation, inaccurate clinical assessments, incomplete PharmaNet checks, and false final checks. This practice ultimately resulted in inaccurate PharmaNet records for the involved patients.

The Inquiry Committee requested that the involved registrants consented to terms imposed by the Inquiry Committee that included:

- fines ranging from \$1000 - \$7500
- limits and conditions on being a pharmacy manager
- complete the Jurisprudence Exam
- complete an Ethics Course
- letters of reprimand

Opioid Agonist Treatment

The Inquiry Committee reviewed a number of cases where other practitioners had submitted complaints about the way pharmacist registrants had dispensed OAT therapy to their patients. The practitioners were concerned that the registrants dispensed treatment contrary to their direction. For example, registrants were identified as having provided carries or split doses to patients where they were not authorized by the practitioner. The pharmacists involved in the incidents cited

Complaints and Investigations

many factors for their decision making, including inadequate transitions in care, the inability to communicate with prescribers, and COVID related measures put into place by the Public Health Officer.

In most cases, the Inquiry Committee determined that the College registrants dispensed treatment contrary to the practitioners' orders in response to scenario specific challenges and did so to ensure continuity of care. The Inquiry Committee reminded the registrants that their actions were considered exceptions to the rule, and that the registrants were required to follow PPP-66 and their associated policy guides when dispensing OAT. Further, in each case the Inquiry Committee identified potential knowledge gaps in the registrants' practice and directed registrants to complete remedial coursework to address these gaps.

Complaints and Investigations

Complaints and Investigations Statistics

March 1, 2020 and February 28, 2021

Intake Activities	
Total number of calls/emails	1056
Inquiry Committee Activities	
Number of Health Professions Act section 33 (formal) complaints opened/ received by the Inquiry Committee	150
• Number of registrants involved	271
Formal Complaint Issues Breakdown	
Medication related (Includes: incorrect drug/quantity/dose, incorrect label, incorrect patient, drug interaction, compounding error, inaccurate PharmaNet recordkeeping, inaccurate delivery)	47
Privacy / Confidential	9
Professional misconduct (Includes: sexual misconduct, off-duty conduct, conduct unbecoming, unprofessional conduct, breach of undertaking, incentives, regulatory non-compliance)	41
Competency and practice issues (Includes: knowledge issues, professional judgment issues, inadequate patient counselling, inaccurate recordkeeping, poor supervision of staff and management of pharmacy)	44
Medication review	2
Fitness to practice (Includes: Duty to report)	11
Unauthorized practice (Includes: practicing without licence, practicing outside of scope, sale of scheduled drugs on unlicensed premised)	35
Unlawful activity (Includes: forgery, theft, diversion)	4
Methadone	15
Other	5

Complaints and Investigations

Complaints and Investigations Statistics

Total Number of Meetings	
Number of files disposed/reviewed	289
• Number of new files disposed	137
• Number of reconsiderations*	100
• Number of Pharmacy Operations and Drug Scheduling Act section 18 reports	52
Dispositions**	
Health Professions Act Section 33(6)(a) No further action	41
Health Professions Act Section 33(6)(b) Letter of advice, directed for further investigation, letter of apology, referred to another entity	52
Health Professions Act Section 33(6)(c) & 36(1) Consent agreement (Remedial action by consent, reprimand)	182
Health Professions Act Section 33(6)(d) Direct Registrar to issue citation	2
Health Professions Act Section 32(3)(a) & section 32(3)(b) Dismissal by Registrar	1
Health Professions Act Section 32.2(4)(b) Duty to report	4
Health Professions Act Section 32.3(3)(b) Duty to report respecting hospitalized registrant	4
Health Professions Act Section 37.1(1) Consent order	4
Cancellation of registration	1
Total number of complaints via HPRB	1

* Some files have been reconsidered more than once

** Some files may have more than one disposition (e.g. The registrant may have agreed to sign a consent agreement and

Complaints and Investigations

Discipline Committee

Mandate

Hear and make a determination of a matter referred to the committee regarding a registrants conduct, competency and/or ability to practice, pursuant to legislation.

Membership

Derek Lee (Chair)
 Heather Baxter (Vice-Chair)
 David Pavan (staff resource)
 Christina Alacron
 Rapinder Chahal
 Christina Chan
 Vaughn Chauvin
 Dianne Cunningham
 Alison Dennis
 Neelam Dhaliwal
 Baldeep Dhillon
 Anneke Driessen
 Jeffrey Huang
 Nerys Hughes
 Edwin Kry
 Howard Kushner
 Peter Lam
 Dominique Marcotte
 Leza Muir
 Anne Peterson
 Annette Robinson
 Omar Saad
 Sophie Sanfacon
 Gurinder Saran
 Carol Segal
 Paulo Tchen
 Gabriella Wong

Number of Meetings

Number of citations for discipline hearing issued: 1

Number of hearing days: 2

Number of discipline files heard in court: 0

Number of cases completed: 6

Summary

During the 2020/21 fiscal year, one citation for discipline hearing was issued. The majority of complaints that prompted the issuing of a citation were ultimately resolved through consent orders; therefore, six outstanding citations issued from the previous year were cancelled. The registrants and the Inquiry Committee agreed to resolve all matters by way of a Consent Order under section 37.1 of the HPA or Consent Agreement under section 36(1) of the HPA.

No discipline and penalty decisions were issued by the Discipline Committee in 2020/21.

Discipline Committee findings are posted on [College's website](#).

Complaints and Investigations

Inquiry Committee

Mandate

Investigate complaints and concerns regarding a registrants conduct, competency and/or ability to practice and decide on an appropriate course of action pursuant to legislation.

Membership

Michelle Harrison (Chair, effective May 1, 2020)
 Sammy Lee (Vice-Chair, effective May 1, 2020)
 David Pavan (staff resource)
 Enreet Aujla
 Dorothy Barkley
 Joy Bhimji
 Janice Butler (until May 1, 2020)
 Ming Chang (Vice-Chair, until April 30, 2020)
 Karen Dahri
 Meribeth Deen
 Sukhvir Gidda
 Lori Hurd
 Helen Jennens
 Debbie Johannesen
 Sanjeev Khangura
 I fan Ko
 Mona Kwong
 James Mercer
 Janice Munroe
 Alison Rhodes
 Alana Ridgeley
 Nathan Roeters
 Kristoffer Scott
 Kelsey Scyner
 Cameron Stockdale
 Justin Thind
 Susan Troesch (Chair, until April 30, 2020. Until June 30, 2020)
 Roberta Walker

Complaints and Investigations

Ann Wicks (until April 30, 2020)

Joyce Wong

Wilson Yee

Marco Yeung

Accomplishments of the Year

Notable Complain Outcomes

Inquiry Committee outcomes are publicly available on the [College's website](#).

Advisory Committees

The College's advisory committees are composed of registered pharmacists and pharmacy technicians, as well as members of the public.

Committees assist the College in meeting its legislated mandate to protect the public by ensuring practitioners have the knowledge, skills and abilities to provide safe and effective pharmacy care.

Ethics Advisory Committees

The Ethics Advisory Committee provides recommendations to the Board or the Registrar on matters relating to the Code of Ethics, Conflict of Interest Standards and any other related policies or guidelines.

Pharmacy Advisory Committees

The Pharmacy Advisory Committee provides recommendations to the Board or the Registrar on matters relating to pharmacy practice issues.

Advisory Committees

Ethics Advisory Committee

Mandate

To provide recommendations to the Board or the Registrar on matters relating to the Code of Ethics, Conflict of Interest Standards and any other related policies or guidelines.

Membership

Bal Dhillon (Chair)
Robson Liu (Vice-Chair)
David Pavan (staff resource)
Shivinder Badyal
Alison Dempsey
Patricia Gerber
Jamie Graham
Tara Lecavalier
Vanessa Lee
Alan Low
Jing-Yi Ng
Audra Spielman
Number of Meetings: 0

Accomplishments of the Year

- The Ethics Advisory Committee has not met during this reporting period.

Goals for Next Fiscal Year

- Advise the Board on issues relating to ethics and Patient Relations.
- Review terms of reference as needed.
- Conduct scheduled meetings as needed.

Advisory Committees

Pharmacy Advisory Committee

Mandate

To provide recommendations to the Board or the Registrar on matters relating to pharmacy practice issues.

Membership

Anca Cvaci (Chair)
 Andrea Silver (Vice-Chair)
 Ashifa Keshavji (staff resource)
 Elissa Aeng
 Rapinder Chahal
 Ming Chang
 Karen Dahri
 James Davis
 Thao Do
 Jennifer Dunkin
 Dana Elliot
 Ivana Gojkovic
 Steven Hopp
 Mohinder Jaswal
 Fatima Ladha
 Karen LaPointe
 Aita Munroe
 Tara Oxford
 Kris Scott
 Aaron Sihota
 Aaron Tejani
 Lanai Vek
 Sorell Wellon
 Cindy Zhang

Number of Meetings: 0

Advisory Committees

Accomplishments of the Year

- Attended engagement sessions and/or provided subject matter expertise on the development of standards of practice relevant to the following projects:
 - NAPRA Model Standards of Practice for Continuous Quality Improvement and Medication Incident Reporting

Goals for Next Fiscal Year

- Continue to review issues related to the practice of pharmacy that have been directed to the committee by the Board or the Registrar
- Continue to support the Practice Review Committee on the maintenance of the Practice Review Program

Financials

College of Pharmacists of British Columbia
Financial Statements
Year ended February 28, 2021

Financials

College of Pharmacists of British Columbia
Financial Statements
Year ended February 28, 2021

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Financials



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www.bdo.ca

BDO Canada LLP
1100 Royal Centre
1155 West Georgia Street PO Box 11101
Vancouver BC V6E 3P3 Canada

Independent Auditor's Report

To the Board of Directors of
College of Pharmacists of British Columbia

Opinion

We have audited the financial statements of the College of Pharmacists of British Columbia (the "College"), which comprise the Statement of Financial Position as at February 28, 2021, and the Statements of Operations, Changes in Net Assets and Cash Flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information.

In our opinion, the financial statements present fairly, in all material respects, the financial position of the College as at February 28, 2021, and its results of operations, changes in net assets and cash flows for the year then ended, in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of this report. We are independent of the College of Pharmacists of British Columbia in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

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

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Financials



As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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 College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

BDO Canada LLP

Chartered Professional Accountants

Vancouver, British Columbia
June 18, 2021

Financials

College of Pharmacists of British Columbia Statement of Financial Position

For the year ended February 28 2021 2020

Assets

Current

Cash and cash equivalents	\$ 1,697,026	\$ 930,720
Short-term investments (Note 2)	1,586,425	1,399,060
Accounts receivable	121,420	103,122
Prepaid expenses and deposits	309,389	316,387
	<u>3,714,260</u>	<u>2,749,289</u>

Interest in College Place Joint Venture (Note 3)	1,420,590	1,491,429
Long-term investments (Note 2)	3,252,849	4,050,927
Development costs (Note 4)	77,386	197,255
Tangible capital assets (Note 5)	607,626	683,497
	<u>\$ 9,072,711</u>	<u>\$ 9,172,397</u>

Liabilities and Net Assets

Current

Accounts payable and accrued liabilities (Note 6)	\$ 798,453	\$ 692,971
Current portion of capital lease obligations (Note 7)	10,946	9,987
Deferred revenue (Note 8)	5,618,719	5,302,615
Deferred contributions (Note 9)	-	60,237
	<u>6,428,118</u>	<u>6,065,810</u>


Capital lease obligations (Note 7)	21,773	32,719
	<u>6,449,891</u>	<u>6,098,529</u>


Net Assets

Unrestricted net assets	-	370,508
Restricted Fund	1,999,770	2,000,000
Invested in tangible capital assets	574,909	640,791
College Place Joint Venture (CPJV) replacement reserve	48,141	62,569
	<u>2,622,820</u>	<u>3,073,868</u>

	<u>\$ 9,072,711</u>	<u>\$ 9,172,397</u>
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On behalf of the Board:


Digitally signed by Claire Shroy
DN: cn=Claire Shroy, o=College of Pharmacists of BC,
c=CA, email=claire.shroy@pharmacists.org,
c=CA, Date: 2021.06.22 10:18:37 -07'00'
 Director


 Director

The accompanying notes are an integral part of these financial statements.

Financials

College of Pharmacists of British Columbia Statement of Operations		
For the year ended February 28	2021	2020
Revenues		
Pharmacy fees	\$ 3,640,134	\$ 3,481,388
Pharmacist fees	4,922,779	4,778,400
Technician fees	906,881	871,649
Other	194,972	118,314
College Place Joint Venture income (Note 3)	82,244	100,178
Grants (Note 9)	63,877	10,237
Investment income	136,068	139,314
Total revenues	9,946,955	9,499,480
Expenses		
Board and Registrar's office	394,103	546,605
Communications and engagement	83,266	80,876
Complaints and investigations	242,359	250,249
Finance and administration	1,846,592	1,744,307
Grant distribution	50,000	41,228
Policy and legislation	29,897	46,337
Practice reviews	13,306	198,863
Quality assurance	40,038	58,273
Registration and licensure	133,724	203,554
Salaries and benefits	7,261,269	6,833,655
Amortization	289,021	314,025
Total expenses	10,383,575	10,317,972
Deficiency of revenues over expenses	\$ (436,620)	\$ (818,492)

The accompanying notes are an integral part of these financial statements.

Financials

College of Pharmacists of British Columbia Statement of Changes in Net Assets For the Year ended February 28, 2021

	Invested in Tangible Capital Assets	CPJV Replacement Reserve	Unrestricted	Restricted Fund	2021 Total	2020 Total
Balance, beginning of year	\$640,791	\$62,569	\$370,508	\$2,000,000	\$3,073,868	\$3,887,801
Deficiency of revenue over expenses	(169,151)	-	(267,469)	-	(436,620)	(818,492)
Investment in tangible capital assets	93,282	-	(93,282)	-	-	-
Transfers from Restricted Fund	-	-	230	(230)	-	-
Share of CPJV replacement reserve	-	(14,428)	-	-	(14,428)	4,559
Repayment of capital lease principal	9,987	-	(9,987)	-	-	-
Balance, end of year	\$574,909	\$48,141	-	\$1,999,770	\$2,662,820	\$3,073,868

The accompanying notes are an integral part of these financial statements.

Financials

College of Pharmacists of British Columbia Statement of Cash Flows		
For the year ended February 28	2021	2020
Cash provided by (used in)		
Operating activities		
Deficiency of revenues over expenses	\$ (436,620)	\$ (818,492)
Items not affecting cash		
Amortization of tangible capital assets	169,152	169,190
Amortization of development costs	119,869	144,835
Share of College Place Joint Venture Income	(82,244)	(100,178)
	(229,843)	(604,645)
Changes in non-cash working capital		
Accounts receivable	(18,298)	(34,351)
Prepaid expenses and deposits	6,998	(44,135)
Accounts payable and accrued liabilities	105,482	119,758
Deferred revenue	316,104	164,365
Deferred contributions	(60,237)	(10,237)
	120,206	(409,245)
Financing activity		
Capital lease repayments	(9,987)	(9,120)
Investing activities		
Purchase of tangible capital assets	(93,282)	(276,939)
Decrease in investments	610,713	325,848
Advances from College Place Joint Venture	138,656	154,142
	656,087	203,051
Increase (decrease) in cash and cash equivalents for the year	766,306	(215,314)
Cash and cash equivalents, beginning of year	930,720	1,146,034
Cash and cash equivalents, end of year	\$ 1,697,026	\$ 930,720

The accompanying notes are an integral part of these financial statements.

Financials

College of Pharmacists of British Columbia Notes to the Financial Statements

February 28, 2021

1. Summary of Significant Accounting Policies

a) Nature of Operations

The College of Pharmacists of British Columbia ("the College") is a regulatory body for pharmacists, pharmacy technicians and pharmacies of British Columbia to set and enforce professional standards for the profession. The College is designated under the Health Professions Act. For income tax purposes, the College is treated as a not-for-profit organization and is thereby exempt from income tax.

b) Basis of Accounting

The financial statements have been prepared by management using Canadian accounting standards for not-for-profit organizations ("ASNPO").

c) Use of Estimates

The preparation of financial statements in accordance with ASNPO requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Significant estimates included in these financial statements consist of the estimated useful life of tangible capital assets and development costs. Actual results could differ from management's best estimates as additional information becomes available in the future.

d) Revenue Recognition

The College follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which related expenses are incurred. Unrestricted revenues are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

License and registration fees received are deferred and recognized as revenue over the year.

Investment income includes interest revenue, realized gains and losses on sale of investments and unrealized gains and losses from changes in the fair market value of investments during the year.

e) Interest in College Place Joint Venture

The College Place Joint Venture (CPJV) is a jointly controlled enterprise in which the College holds 30% interest and another not-for-profit organization, the College of Dental Surgeons of British Columbia, hold a 70% interest. The College accounts for its joint venture using the equity method.

Financials

College of Pharmacists of British Columbia Notes to the Financial Statements

February 28, 2021

1. Significant Accounting Policies - Continued

f) Cash and Cash Equivalents

Cash and cash equivalents consist of bank balances and redeemable guaranteed investment certificates ("GICs") of terms of less than 90 days at purchase.

g) Development Costs

Program and implementation costs for internally generated assets have been deferred and are amortized on a straight-line basis over five years. Should the conditions for deferral cease to exist, the costs will be charged as a period expense.

h) Tangible Capital Assets

Tangible capital assets are recorded at cost less accumulated amortization. In the event that facts and circumstances indicate that the College's tangible capital assets no longer have any long-term service potential to the College, the excess of the asset's net carrying amount over any residual value is recognized as an expense in the statement of operations. Cost includes all amounts related to the acquisition and improvements of the capital assets including replacement of equipment. Tangible capital assets are amortized at the following annual rates:

Leasehold improvements	Straight-line over 10 years
Furniture and fixtures	Straight-line over 10 years
Office equipment	Straight-line over 5 years
Computer	Straight-line over 3 years
Software	Straight-line over 2 years.

i) Capital Leases

Leases which transfer substantially all the benefits and inherent risk related to the ownership of the property leased to the College are capitalized by recording as assets and liabilities the present value of the payments required under the leases.

j) Net Assets Held in Reserves

The restricted reserve fund represents net assets held in reserves that are internally restricted to provide a funding source for future financial obligations where the timing of the obligations cannot be precisely predicted, and to provide funding to address financial risks for which the timing and probability of a given event is uncertain. All reserves are approved by the College Board and are disclosed on the statement of financial position as net assets.

Financials

College of Pharmacists of British Columbia Notes to the Financial Statements

February 28, 2021

1. Summary of Significant Accounting Policies - Continued

k) Financial Instruments

The College initially measures its financial assets and financial liabilities at fair value. The College subsequently measures all of its financial assets and financial liabilities at cost or amortized cost.

Financial assets measured at cost or amortized cost include cash and cash equivalents, accounts receivables and investments.

Financial liabilities measured at cost or amortized cost include accounts payable and accrued liabilities.

Financial assets are tested for impairment when indicators of impairment exist. When a significant change in the expected timing or amount of the future cash flows of the financial asset is identified, the carrying amount of the financial asset is reduced and the amount of the write-down is recognized in net income.

l) Employee Future Benefits

The College and its employees make contributions to the Municipal Pension Plan which is a multi-employer joint trusted plan. This plan is a defined benefit plan, providing pension or retirement based on the member's age at retirement, length of service and highest earnings averaged over five years. As the assets and liabilities of the plan are not segregated by institution the plan is accounted for as a defined contribution plan and any College contributions to the plan are expensed as incurred.

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College of Pharmacists of British Columbia Notes to the Financial Statements

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2. Investments

Investments consist of guaranteed investment certificates ("GICs") with interest from 1.70% to 3.21% (2020 - 1.70% to 3.21%) with maturity dates from March 1, 2021 to May 20, 2025. GICs that matured between year-end and the date of the financial statement approval were reinvested under similar terms.

3. Interest in College Place Joint Venture

The College entered into an agreement dated March 3, 1989 to purchase 30% interest in a jointly controlled enterprise set up to acquire and develop a property. The College occupies space in the building and pays rent to College Place Joint Venture (CPJV). Included in Finance and Administrative expense is rent and operating costs paid to CPJV in amount of \$349,000 (2020: \$324,000).

The assets, liabilities, revenues and expenses of the joint venture at February 28, 2021 and for the year then ended are as follows:

	100% Joint Venture	30% College
Balance sheet		
Assets		
Current assets	\$ 617,430	\$ 185,229
Tangible capital assets and other assets	4,295,023	1,288,507
	<u>\$ 4,912,453</u>	<u>\$ 1,473,736</u>
Liabilities and equity		
Total liabilities	\$ 177,153	\$ 53,146
Total equity	4,735,300	1,420,590
	<u>\$ 4,912,453</u>	<u>\$ 1,473,736</u>
Statement of operations		
Revenues	\$ 1,069,149	\$ 320,745
Expenses	795,001	238,501
	<u>\$ 274,148</u>	<u>\$ 82,244</u>
Excess of revenue over expenses		

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College of Pharmacists of British Columbia Notes to the Financial Statements

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3. Interest in College Place Joint Venture - Continued

The College has two leases which expire on August 31, 2023. Rent payments until then are as follows:

Year	Amount
2022	312,063
2023	319,888
2024	161,900
	<u>\$ 793,851</u>

4. Development Costs

	Cost	Accumulated amortization	2021 Net book value	2020 Net book value
SkilSure solution	\$ 41,302	\$ 41,302	\$ -	\$ -
Technician Program	234,432	234,432	-	-
Pharmacy online renewal	62,184	62,184	-	-
Robbery prevention form	10,800	10,800	-	-
Mobile apps	35,000	35,000	-	7,000
Website	306,171	306,171	-	48,819
Online pre-registration	101,220	101,220	-	20,244
PODSA modernization	201,988	124,602	77,386	121,192
	<u>\$ 993,097</u>	<u>\$ 915,711</u>	<u>\$ 77,386</u>	<u>\$ 197,255</u>

5. Tangible Capital Assets

	Cost	Accumulated amortization	2021 Net book value	2020 Net book value
Leasehold improvements	\$ 1,252,658	\$ 857,051	\$ 395,607	\$ 463,446
Furniture and fixtures	385,271	317,429	67,842	86,480
Office equipment	266,604	205,765	60,839	39,192
Computer	530,668	447,330	83,338	93,037
Software	360,167	360,167	-	1,342
	<u>\$ 2,795,368</u>	<u>\$ 2,187,742</u>	<u>\$ 607,626</u>	<u>\$ 683,497</u>

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College of Pharmacists of British Columbia Notes to the Financial Statements

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6. Accounts Payable and Accrued Liabilities

Accounts payables and accrued liabilities include GST payable amounting to \$16,617 (2020 - \$32,532) as at February 28, 2021.

7. Capital Lease Obligation

The College is committed to pay an annual lease of \$14,281 with an effective interest rate of 10% for office equipment under a lease agreement. The lease will expire in October 2023.

8. Deferred Revenue

Deferred revenue represents the subsequent year's pharmacy licenses and registration fees received prior to year end.

9. Deferred Contributions

Deferred contributions represent the unamortized amount of grants received for future operating activities and programs. The amortization of deferred contributions is recorded as revenue in the statement of revenue and expenses.

	2021	2020
Balance, beginning of year	\$ 60,237	\$ 70,474
Grants received	-	-
Less amounts amortized to revenue	(60,237)	(10,237)
Balance, end of the year	\$ -	\$ 60,237

Financials

College of Pharmacists of British Columbia Notes to the Financial Statements

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10. Municipal Pension Plan

The College and its employees contribute to the Municipal Pension Plan (a jointly trustees pension plan) (the "Plan"). The Board of Trustees, representing Plan members and employers, is responsible for administering the Plan, including investment of assets and administration of benefits. The Plan is a multi-employer defined benefit pension plan. Basic pension benefits provided are based on a formula. As at December 31, 2019, the Plan has about 210,000 active members and approximately 105,000 retired members.

Every three years, an actuarial valuation is performed to assess the financial position of the Plan and adequacy of the funding. The actuary determines an appropriate combined employer and member contribution rate to fund the Plan. The actuary's calculated contribution rate is based on the entry-age normal cost method, which produces the long-term rate of member and employer contributions sufficient to provide benefits for average future entrants to the Plan. This rate may be adjusted for the amortization of any actuarial funding surplus and will be adjusted for the amortization of any unfunded actuarial liability.

The most recent valuation for the Municipal Pension Plan as of December 31, 2018, indicated a \$2.87 billion funding surplus for basic pension benefits on a going concern basis. As a result of the 2018 basic account actuarial valuation surplus, the rate stabilization account, which was set up to help offset potential future contribution rate increases, has a balance of about \$2.5 billion. The next valuation will be as at December 31, 2021.

Employers participating in the Plan record their pension expense as the amount of employer contributions made during the fiscal year (defined contribution pension plan accounting). This is because the Plan records accrued liabilities and accrued assets for the Plan in aggregate, resulting in no consistent and reliable basis for allocating the obligation, assets and costs to individual employers participating in the Plan.

The College of Pharmacists of British Columbia paid \$501,071 (2020 - \$481,957) for employer contributions to the plan in fiscal 2021. These contributions have been recorded as expenses on the Statement of Operations.

Financials

College of Pharmacists of British Columbia Notes to the Financial Statements

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11. Financial Instruments

The College's activities result in exposure to a variety of financial risks including risks related to credit, interest rate and liquidity risks. The risks that the College is exposed to this year are consistent with those identified in prior years.

Interest Rate Risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College is exposed to interest rate risk arising from the possibility that changes in interest rates will affect the value of its investments. Investments are all invested in guaranteed investment certificates.

Credit Risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. Credit risk is the risk that the counterparty to the transaction will not pay. The College is not exposed to any credit risk arising as the receivable is from the Government.

The College is also exposed to credit risk arising from the possibility that the financial institutions with which it maintains its cash balances and GICs will default. However, The College believes that its exposure to credit risk in relation to cash is low, as all of its cash and GICs are with reputable Canadian chartered financial institutions.

Liquidity Risk

Liquidity risk is the risk that the College encounters difficulty in meeting its obligations associated with financial liabilities. Liquidity risk includes the risk that, as a result of operational liquidity requirements, the College will not have sufficient funds to settle a transaction on the due date, will be forced to sell financial assets at value, which is less than what they are worth, or may be unable to settle or recover a financial asset. Liquidity risk arises from accounts payable and accrued liabilities and is mitigated by the College's investment in GICs as disclosed in Note 2.

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College of Pharmacists of British Columbia Notes to the Financial Statements

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12. Commitments

The College is committed to a contract for IT maintenance services, at a rate of \$8,790 per month, ending February 28, 2023. The College is committed to a lease agreement for a new postage machine, at a rate of \$652 per month, ending February 28, 2022.

Year	Amount
2022	113,306
2023	108,089
	<u>\$ 221,395</u>

13. Uncertainty due to COVID-19

COVID-19, declared a global pandemic by the World Health Organization in March 2020, has had a significant impact on the Canadian economy. As the impacts of COVID-19 continue, there will be further impact on the College, its stakeholders, employees, suppliers and other third party business associates. These circumstances could impact the timing and amounts realized on the College's assets and its ability to deliver services in the future. Given the dynamic nature of these circumstances, the duration of disruption and the related financial impact cannot be reasonably estimated at this time.

14. Contingent Liabilities

In the regular course of operations, legal claims are initiated against the College in varying and unspecified amounts. The outcome of any potential claims cannot reasonably be determined at this time. Any ultimate settlements will be recorded in the year in which the settlement occurs.