

OCP STRUCTURE AND FUNCTION

Jurisprudence Seminar

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OCP Jurisprudence Examination

- Multiple choice format
 - choice from 3 or 4 options with only one correct answer
- Time allotted for exam is 2.5 hours
- NAPRA Drug Schedule and Summary of Federal and Provincial Laws (available on OCP website) are provided as references during exam
- Assesses practical interpretation of relevant legislation and policies, and awareness of college role/function



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Mission Statement

“The mission of the Ontario College of Pharmacists is to regulate the practice of pharmacy, through the participation of the public and the profession, in accordance with standards of practice which ensure that our members provide the public with quality pharmaceutical service and care.”



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Mandate

- To protect the public

Public
Interest
(OCP)

vs.

Self
Interest
(professional
associations
e.g.OPA)

Priorities of the College

1. Enforce Self-Regulation
2. Develop/Maintain Communication Channels:
 - Pharmacy Connection
 - OCP Webpage
 - Dedicated section “For the Public”
 - Communications Committee

Cont'd...

Priorities of the College

3. Patient Medication Safety
4. Develop Standards of Practice
5. Maintain a Quality Assurance Program



Stakeholder Relationships

- Faculty and School of Pharmacy – U of Toronto and U of Waterloo
- Pharmacy Technician education programs
- National Association of Pharmacy Regulatory Authorities (NAPRA)
- Other Health & non-Health Regulatory Colleges

- Ontario Pharmacists' Association (OPA)
- Canadian Society of Hospital Pharmacists (CSHP)
- Canadian Pharmacists' Association (CPhA)

Cont'd...



Stakeholder Relationships

- Provincial Government
 - Office of the Fairness Commissioner
 - Ministry of Health
 - Ontario Drug Benefit
 - Drug Programs Branch
 - Program Policy Branch
 - Health Force Ontario

- Federal Government
 - Health Protection Branch
 - Bureau of Drug Surveillance

Council/Committee Structure

Council Composition (under RHPA)

- 17 elected pharmacists (incl. 2 hospital pharmacists)
- Dean, Faculty of Pharmacy, University of Toronto
- Director, School of Pharmacy, University of Waterloo
- 9-16 public members (appointed by government)
- 2 pharmacy technician observers

Cont'd...

Council/Committee Structure

Council Elections

- Held every August (Terms of Office staggered)
- President, Vice President
- Committees
- Nominating Committee

Cont'd...

Council/Committee Structure

Role of Council Members

- Confidentiality
- Conflict of Interest
- Speaking on behalf of OCP
- Dealing with Questions
- Current issues

Cont'd...

OCP Statutory Committees*

- Executive
- Inquiries, Complaints and Reports (ICRC) -
formerly Complaints
- Discipline
- Quality Assurance
- Patient Relations
- Fitness to Practice
- Registration
- Accreditation (under Pharmacy Act)

*RHPA

Cont'd...



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OCP Standing Committees*

- Professional Practice
- Finance
- Communications

*OCP By-laws



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OCP Working Groups

- Standards of Practice Working Group
- Pharmacy Technicians Working Group

Meetings of Council

- 1 Procedure - Roberts Rules
- 2 4 Meetings Annually
- 3 Council materials distributed in advance
- 4 OCP Council Report
 - Summarizes Council Decisions
 - Published in Pharmacy Connection & on website
- 5 Council mailings
 - Twice weekly

Current Issues

- Regulation of Technicians
- Standards of Practice
- Quality Assurance Program
- Proposed changes to scope of practice & controlled acts to enhance the role of the pharmacists
- Remote Dispensing
- Labour Mobility



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Strategic Plan 2009

Five Strategic Directions (in brief)

1. Optimize the scope of practice of our members, as it evolves, for the purpose of achieving positive health outcomes.
2. Embrace the use of technology and innovation to improve the quality and safety of patient care, and to achieve operational efficiency
3. Foster inter-professional collaboration to achieve coordinated patient-centred care and promote health and wellness

Cont'd...



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Strategic Plan 2009

4. Promote and enhance relationships with the public, the government, our members, and other health care professionals through effective communication.
5. Fulfill our core mandate of self-regulation in an environment of continuous quality improvement in a fiscally responsible manner

Pharmacy Practice in Ontario



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Controlled Acts (RHPA, 27-29)

- 27.(2)
 8. Prescribing, dispensing, selling or compounding a drug as defined in subsection 117 (1) of the Drug and Pharmacies Regulation Act, or supervising the part of a pharmacy where such drugs are kept.



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Current Authorized Acts (Pharmacy Act C.36.s4)

In the course of engaging in the practice of pharmacy, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to dispense, sell or compound a drug or supervise the part of a pharmacy where drugs are kept. 1991, c. 36, s. 4.



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Current Scope of Practice (Pharmacy Act, 1991, C.36 s.3)

- The practice of pharmacy is the custody, compounding and dispensing of drugs, the provision of non-prescription drugs, health care aids and devices and the provision of information related to drug use.

Bill 179

Proposed changes to allow pharmacists

- more authorized acts
- expanded Scope of Practice

Levels of Registration with OCP

- Registered Pharmacy Student
- Pharmacy Intern
- Pharmacist
- *Future* - Pharmacy Technician



Conditions of Registration – Pharmacy Technician

- Pharmacy technicians will have the authority to dispense and compound under defined terms and conditions (e.g. final check and release)
 - in an accredited pharmacy, with a pharmacist physically present
 - in other situations under the supervision or direction of a pharmacist



Conditions of Registration – Pharmacy Technician

- Shall not supervise the part of the pharmacy where drugs are kept
- Shall not delegate any controlled acts

Pharmacy Technician Proposed Scope of Practice

- Pharmacy technicians will practice within the scope of their profession (defined in the NAPRA Competency Document and Standards of Practice - TBD)
- Proposed scope re: counseling:
“Shall only counsel a patient, directly or indirectly, with respect to a drug or medical condition, when the counseling does not require therapeutic knowledge or clinical analysis or assessment”

Protected Titles

- “apothecary”, “druggist”, “pharmacist” or “pharmaceutical chemist”, or an equivalent in another language
- Up to \$25,000 fine for a first offence and \$50,000 for a second or subsequent offence
- *In future*, “pharmacy technician”



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Privileges of Registration

Registered Pharmacy Students may perform the authorized acts **under direct supervision**:

- dispense prescriptions
- take prescriptions by telephone, if the pharmacist is comfortable
- dialogue with patients under direct supervision of a pharmacist



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Privileges of Registration

Registered Pharmacy Interns may perform the authorized acts **independently** *with mutual agreement* from the preceptor

Interns require supervision: a pharmacist must be available for consultation if necessary.



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Preceptors

Pharmacists registered with OCP who are

- licensed to practice pharmacy in Ontario
- licensed for at least one year in Canada
- providing direct patient care for at least 18 hours a week as a pharmacist
- in good standing with OCP



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Preceptors

Pharmacists registered with OCP who

- are prepared to take responsibility for supervising and assessing a student/intern
- have declared any potential conflict of interest with student/intern
- have attended a preceptor training workshop offered by the College



Personal Professional Liability Insurance

- OCP By-law in 2007
- Registration requirement for all Part A Pharmacists and Interns
- Transportable in Ontario
- \$2 million
- To support expanding role



Maintaining Pharmacist Registration

- **Part A**
 - practicing direct patient care
 - 600 hours / 3 years
 - eligible for practice review
- **Part B**
 - still a member of the College
 - not allowed to provide direct patient care
 - must successfully complete Practice Review to move to Part A



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Quality Assurance Program

- **Maintain Learning Portfolio**
- **Phase I**
 - 20% complete self-assessment
- **Phase II**
 - 200-300 randomly chosen pharmacists
 - clinical knowledge
 - standardized patient interviews