

Bill 41 Regulations – Issue and Options Analysis

Issue #3: Pharmacy Technicians



Date: September 10, 2009 (revised)

Introduction and Background

PricewaterhouseCoopers LLP (“PwC”) has been engaged to work with the Manitoba Pharmaceutical Association (“MPhA”) and the Manitoba Society of Pharmacists (“MSP”) to assist with building consensus around thirteen issues, which were identified by the Steering Committee (see Appendix A), and which relate to the Bill 41 Regulations, thereby facilitating progress towards approval of the Regulations.

On March 5, PwC facilitated a Stakeholder Mapping Workshop that was attended by members of the Steering Committee and a representative of Manitoba Health and Healthy Living (“MHHL”). This workshop resulted in validation of the key stakeholders and a documented understanding of which stakeholder organizations/groups were perceived to be most interested in being engaged in consultations regarding each of the thirteen issues.

On April 7, 2009, PwC facilitated a full-day retreat (“Retreat”) involving several representatives of MPhA and MSP, and a representative of MHHL. During the retreat, PwC facilitated a series of discussions regarding twelve of the thirteen identified issues; the “Distance Care” issue was not addressed during the retreat because it was deemed too complex for productive discussion within the time available. During the Retreat, MSP and MPhA agreed upon specific action plans for seven of the twelve issues that were discussed; MSP and MPhA also agreed that further facilitated consultation was merited in relation to the remaining five issues.

At the Retreat, MPhA and MSP agreed to the following Action Plan regarding the Pharmacy Technician regulations:

- MPhA will review the MSP’s position statement that responded to the report issued by the MPhA subcommittee of pharmacy technicians; the recommendations in this report proposed amendments to draft regulations pertaining to pharmacy technicians;
- MPhA and MSP will strike a task force committee to consider the feasibility of using phased implementation approaches for hospital/institutional practices and community practices; and
- MPhA will seek direction/clarification from Government on the preferred regulatory framework for Technicians (i.e. under which Act will Technicians be regulated and will Technicians be regulated by MPhA or another college/association).

On August 25, 2009, PwC facilitated a Focus Group with representatives from key stakeholder groups to this issue. The objectives of the Focus Group were as follows:

- To ensure that the Option Paper accurately reflects significant perspectives held by key stakeholders;
- Where necessary, to improve common understanding of the intent of the Regulations and/or stakeholder concerns;
- To build consensus around the most popular/preferred options for resolving stakeholder concerns, which will be presented to MPhA members in a Town Hall Meeting on September 16; and
- To help facilitate subsequent approval of a (revised) Bill 41 Regulations document by the MPhA membership.

Overview of Issue

At present, the role of *Pharmacy Technician* is not a regulated profession in the Province of Manitoba; there is no definition or authoritative criteria that must be met to be recognized as a qualified pharmacy technician, and there is no provincial program for registering pharmacy technicians. To ensure common understanding of the information presented here and in the Focus Group discussions, it is important to clearly differentiate between the following terms (used in relation to the profession of pharmacy technician): “qualified”, “registered”, and “regulated”. Whether or a not pharmacy technician is “qualified” must be determined by specific, documented criteria that are established by a recognized authority. Accordingly, MPhA has set out specific criteria for the “Qualification of Pharmacy Technicians” in the Section 52(2) of the draft Bill 41 Regulations. Registration of “Qualified Technicians” would require an authority to maintain a voluntary list of pharmacy technicians that have satisfied the qualification criteria; thereby providing stakeholders a means to confirm whether a given technician is *qualified* (against the authority’s defined criteria).

The (December 2007) draft Regulations did not explicitly require registration of qualified pharmacy technicians because the new Pharmaceutical Act (i.e. Bill 41) does not define a registration or regulatory authority for Pharmacy

Technicians. The criteria that were defined in the draft Regulations for recognition as a *qualified* Pharmacy Technician were either (i) graduation from an accredited program or (ii) successfully completion of an examination approved by Council or (iii) work experience and a competency assessment acceptable to Council. However, on July 27, 2009, MPhA Council passed a motion supporting the idea that the criteria should be modified to require either (i) successfully passing the national Pharmacy Technician Qualifying Exam, or (ii) work experience and a competency assessment acceptable to Council.¹

Regulation is highly differentiated from *registration*; *regulation* of a profession imposes many standards and requirements beyond that of registration; for example, legislated regulatory authority over a profession generally includes, but is not limited to, investigative authority, disciplinary authority, and the authority to impose mandatory standards of practice; none of the cited examples are provided by simple *registration*.

To date, the Government of Manitoba has not made either a legislative or policy commitment to any particular regulatory framework for Pharmacy Technicians. The Government has indicated that Pharmacy Technicians could make an application to the Government of Manitoba to form their own regulatory college under the Regulated Health Professions Act, when it comes into force; however, this option does not necessarily preclude other options for regulation of Pharmacy Technicians, including the possibility that Technicians could be regulated by the Manitoba College of Pharmacists (i.e. the future MPhA). Accordingly, the December 2007 draft Regulations were developed in the absence of a defined regulatory framework for Pharmacy Technicians.

The currently in-force Regulations to the Pharmaceutical Act do not make explicit reference to *Pharmacy Technicians*; however, they permit licensed pharmacists to delegate certain tasks to other persons (i.e. persons who are not licensed pharmacists) working under the direct supervision of a licensed Pharmacist. Some hospitals have implemented pilot programs that facilitate an expanded role for pharmacy technicians; one such pilot program is the *tech-check-tech* program that permits a technician to check certain work performed by another technician; however, even under these pilot programs, the final check and sign-off is still presently performed by a licensed pharmacist. Other Canadian jurisdictions have moved, or are in the process of moving towards expanded roles for pharmacy technicians (see the jurisdictional comparison below and Appendix C – Blueprint for Pharmacy). Similarly, there is generally broad support for advancement of the role of pharmacy technician in Manitoba, which will involve pharmacists delegating some activities previously conducted only by licensed pharmacists.

During the review of Pharmacy Technicians, it is important to remember and understand the definition of “dispense”, as being the means to provide a drug pursuant to a prescription but does not include the administration of a drug. This definition does not include the “final check”. The definition of “final check” is described under the proposed regulations 52(4c) as performing a final check on the packaging or pre-packaging of drugs, container selection, and labeling performed by another technician, student or intern, prior to dispensing.

Options Paper

The remainder of this document provides information and background related to this issue, which may help you in preparing for the focus group. Specifically, the following information has been provided:

- **Issue Analysis and Suggested Course of Action:** A summary analysis of the issue and suggested course(s) of action that reflect the concerns, perspectives, and directional recommendations that evolved in the Focus Group on this issue and from prior consultations, and research.
- **Summary of Positions:** A summary of the positions of MPhA Council, the MSP (Board), MHHL, CACDS, the Pharmacy Technician Sub-committee, and CAPT-MB has been provided. This summary identifies each stakeholder’s high-level concerns and/or current opinion regarding the issue.
- **Jurisdictional Comparison:** A high-level summary of how other jurisdictions in Canada address the issue has been provided; and

¹ As of year 2015, only persons who have graduated from a CCAPP approved program will be able to write the Pharmacy Technician *Qualifying* Exam. Until 2015, persons who write and pass the Pharmacy Technician *Evaluating* Exam will also be eligible to write the Pharmacy Technicians Qualifying Exam.

- **Background:** The background document provides additional detail regarding the issue, including pertinent sections of the proposed draft regulations, detailed information on stakeholder concerns and/or positions; and a more detailed summary of how key jurisdictions within Canada address the issue.

Issue Analysis and Suggested Course(s) of Action

The following table breaks the issue down into a number of constituent concerns, articulates key perspectives associated with each of the concerns, and advocates one or more course of action to address the concerns. Please note the following points regarding the manner in which information has been organized and presented within the table:

- The **Situation** column contains information that PwC understands to be factual and is necessary to understand the corresponding *concerns*.
- The listed **Concerns** were identified through the work conducted prior to the Focus Group and/or during the Focus Group itself. Listing of a concern does not imply that the concern has been validated, nor does it imply that the concern is widely held; listing of a concern simply acknowledges that the concern has been expressed by one or more stakeholders. The *concerns* were grouped according to commonality of the respective *situation*, *perspectives*, and *suggested course of action*.
- The **Perspectives** are arguments, claims, and assertions, which may be based on facts, anecdotal information, and/or opinions. Inclusion of a *perspective* does not imply that the underlying assertion has been validated. Concerns relate to the situation and concerns are either supported or refuted by the *perspectives*.
- The **Suggested Course of Action** reflects PwC's analysis of the respective situation, concerns, and perspectives. In most cases, the suggested course of action aligns very closely with the directional recommendations from the Focus Group; in some cases the suggested course of action also reflects additional research and analysis that PwC conducted after the Focus Group.

Situation	Concerns	Perspectives	Suggested Course of Action
<p>Bill 41 enables MPhA to define the duties that a Pharmacist may delegate to a Pharmacy Technician in the Bill 41 Regulations.</p> <p>To date, the Government of Manitoba has not officially committed to regulation of Pharmacy Technicians.</p> <p>Three of four of the reference jurisdictions are moving towards regulation of Pharmacy Technicians under the Pharmacy College; the remaining reference jurisdiction is moving towards regulation of pharmacy technicians, but has not yet committed to a particular regulatory framework.</p>	<ul style="list-style-type: none"> • Are the draft Regulations compatible with future regulation of pharmacy technicians? If yes, are they compatible with regulation of pharmacy technicians by MPhA or a new, independent college? • MPhA is of the understanding that the Government will not support regulation of pharmacy technicians under MPhA; however, the local chapter of the Canadian Association of Pharmacy Technicians has expressed a preference to have Manitoba Pharmacy Technicians regulated by MPhA (i.e. the College of Pharmacists) rather than being regulated by a new, independent college that regulates Technicians exclusively. 	<ul style="list-style-type: none"> • The draft Regulations are compatible with future regulation of Pharmacy Technicians by MPhA or by another College. • There is general agreement that an expanded role for pharmacy technicians is complementary and important to an expanded scope of practice for pharmacists. • There is general agreement that Manitoba should be moving towards regulation of Pharmacy Technicians. • There may be efficiencies of scale associated with regulation of Pharmacy Technicians under MPhA versus regulation under a new, independent college. • With respect to the reference jurisdictions, Manitoba will be an anomaly if it chooses to regulate Technicians under a college other than the college that regulates Pharmacists. 	<ul style="list-style-type: none"> • Stakeholders, (e.g. MPhA, CAPT, MSP, CSHP, and Government) should engage in dialogue and work towards an explicit agreement regarding a future regulatory framework for Pharmacy Technicians.

Situation	Concerns	Perspectives	Suggested Course of Action
<p>The draft Regulations define the credentials that one must obtain to be recognised and registered as a Pharmacy Technician.</p> <p>If the draft Regulations are approved (in the currently contemplated form) and come into force in the near future, there will be many persons who have been practicing as pharmacy technicians who do not have the required credentials to be automatically recognized as a Pharmacy Technician.</p> <p>MPhA Council recently passed a motion that supported revisions to the wording of the qualification criteria for automatic recognition as a pharmacy technician. The intent of the motion was to bring the Regulations into alignment with nationally recognized qualification criteria for pharmacy technicians, which involves passing the national Pharmacy Technician Qualifying Exam.</p> <p>As of year 2015, only persons who have graduated from a CCAPP approved program will be able to write the Pharmacy Technician Qualifying Exam. Until 2015, persons who write and pass the Pharmacy Technician Evaluating Exam will also be eligible to write the Pharmacy Technicians Qualifying Exam.</p>	<ul style="list-style-type: none"> • Are the qualification criteria for pharmacy technicians, which are defined in the draft Regulations, compatible with the future vision for Pharmacy Technicians? • How do the qualification requirements in the Regulations accommodate continuation of practice for those persons who are presently practicing as a Pharmacy Technician, but do not have the credentials to automatically qualify to be recognized as a Pharmacy Technician once the Regulations come into force? • Does Section 52.2(c), which allows a person who “has work experience and passed a competency assessment acceptable to council” to be registered as a qualified Pharmacy Technician, facilitate the continuation of practice discussed in the preceding bullet? • Will MPhA Council receive a flood of applications for recognition of Pharmacy Technicians under (the current) Section 52.2 (c) immediately after the regulations come into force? • Does Section 52.2(c) jeopardize recognition of MB Pharmacy Technicians in other Provinces? 	<ul style="list-style-type: none"> • If persons who are currently working as pharmacy technicians, but do not have the credentials required to qualify as a Pharmacy Technicians under the Regulations, must cease practicing as pharmacy technicians once the Regulations come into force, the Regulations will be disabling, rather than enabling, to many stakeholders through the transition period. • It is important that the Regulations allow persons who are presently practicing Pharmacy Technicians to continue to practice in this role through the transition to Province-wide Regulation of all Pharmacy Technicians. • Most stakeholders agreed that 2015 is a feasible deadline for persons currently working as Pharmacy Technicians, but who have not graduated from a CCAPP approved pharmacy technician program, to write the new Pharmacy Technician Evaluating Exam. 	<ul style="list-style-type: none"> • MPhA Council to confirm that the draft Regulations (with the contemplated revisions) anticipate future Regulation of Pharmacy Technicians in Manitoba; however, in the interim, the proposed qualification criteria will ensure that only highly qualified persons will be able to assume the title of Pharmacy Technician and the associated privileges (e.g. delegated responsibility). • MPhA Council to ensure that there is a feasible and well understood process to facilitate continuation of practice for persons who are currently practicing as Pharmacy Technicians, but who do not presently meet the automatic qualification criteria (i.e. have not passed the PTQE exam) through the transition period. • MPhA Council should clarify the motion pertaining to the Pharmacy Technician qualification criteria that it passed on July 27, 2009 to make specific and correct reference to the relevant exams and/or programs.

Situation	Concerns	Perspectives	Suggested Course of Action
<p>The draft Regulations allow pharmacists, at their discretion, to delegate certain duties, including the “Final Check” to qualified (i.e. registered) Pharmacy Technicians.</p> <p>Historically, a Pharmacist has always been responsible and accountable for the “Final Check”.</p> <p>The term “Final Check” appears four times in the Dec 3, 2007 Draft Regulations, but is not defined in the Regulations or the Act; furthermore, the term “Final Check” is not used in the currently in-force Act or Regulations.</p>	<ul style="list-style-type: none"> Given that the term “Final Check” is not explicitly defined, there are various interpretations for term “Final Check”. The concept of a “Final Check” may differ between practice environments. Lack of clarity regarding what is intended by the explicit reference to the “Final Check” is causing considerable differences in understanding, leading to consternation. It is not clear whether the draft Regulations permit a prescription to be filled under any or all circumstances without a Pharmacist ever looking at the medication; i.e. could a pharmacist provide the counselling, but delegate all other aspects of preparing and dispensing the prescription? 	<ul style="list-style-type: none"> Defining the term “Final Check” would be difficult and problematic because the concept of a “Final Check” varies between practice environments and pharmacy-specific processes. Would it be more effective to define the duties and responsibilities that a Pharmacist can not delegate to a Pharmacy Technician instead of defining what can be delegated? Can the term “Final Check” be removed from the Regulations? The Regulation should facilitate delegation of technical tasks while prohibiting delegation of professional tasks. In the absence of a common, robust definition of the “Final Check” there is debate as to whether the “Final Check” is technical or professional. Hospital pharmacy has had at least 10 years of experience with an expanded role for pharmacy technicians, which has been achieved through pilot projects; however, community pharmacy has not yet had the opportunity to pilot these roles. Before community is allowed to implement these expanded roles in all settings they also should have to pilot these duties. Hospital may be ready now for the expanded 	<ul style="list-style-type: none"> MPhA Council to revise the Regulations that permit Pharmacists to delegate duties to Pharmacy Technicians such that the term “Final Check” is not used explicitly in the Regulations. MPhA Council to consider the 2006 “Guidelines for the Delegation of Functions to Pharmacy Technicians” as published by the CSHP as a possible model for defining the potential scope of discretionary delegation of responsibilities to Pharmacy Technicians.

Bill 41 Regulations – Issue and Options Analysis
 Issue #3: Pharmacy Technicians

Situation	Concerns	Perspectives	Suggested Course of Action
		<p>technician role, in order to legitimize their current practice but these new duties should be phased in for community pharmacy.</p> <ul style="list-style-type: none"> • Pharmacists and pharmacies should be held responsible and accountable for establishment and compliance with good, safe processes, which may involve delegation by Pharmacists to qualified individuals; explicit reference to a “Final Check” is problematic because the term is not definitive. • Removal of the reference to the “Final Check” would not undermine the enabling value of the Regulations. 	

Situation	Concerns	Perspectives	Suggested Course of Action
<p>There is widespread uncertainty as to how delegation of duties that have traditionally been carried out by a Pharmacist or under the direct supervision of a Pharmacist affect a Pharmacist’s liability and the cost of a Pharmacist’s liability insurance.</p>	<ul style="list-style-type: none"> • If a Pharmacist delegates duties to a Pharmacy Technician and the Technician makes an error or is negligent, to whom does the liability attach? • Does delegation of duties by a Pharmacist to a Pharmacy Technician impact the cost of a Pharmacist’s liability insurance? Does the cost of the Pharmacist’s liability insurance further depend on whether the Technician is registered or regulated? • Until such time when Pharmacy Technicians are regulated, does all accountability for a Pharmacy Technicians work rest with the delegating Pharmacist or does some accountability rest with the Technician, even without regulation of Technicians? • How do responsibility and accountability link to liability and liability insurance? How are these concepts differentiated? 	<ul style="list-style-type: none"> • Most stakeholders agree that the (intent of the) qualification criteria that was supported by motion of Council at the July 27, 2009 Council meeting is appropriate to ensure that Pharmacy Technicians are duly qualified to carry out the duties that may be delegated to them; however, a few stakeholders are concerned that there is a liability and/or liability issue with delegation to an unregulated, albeit qualified technician. • If Pharmacy Technicians were to be regulated by the same “College” as Pharmacists, the “College” could require that Pharmacy Technicians require liability insurance. • The implications to the attachment of liability and the cost of liability insurance resulting from delegation of duties by a Pharmacist to a Pharmacy Technician are inconsistently understood or perceived by Members. • Representatives from large chain stores (e.g. grocery and drugstore) assert that these businesses will take a careful, methodical, and conservative approach to implementing an expanded role for Technicians. 	<ul style="list-style-type: none"> • MPhA and MSP should engage appropriate professional advisors and obtain guidance regarding the implications to the attachment of liability and the cost of liability insurance resulting from delegation of duties by a Pharmacist to a Pharmacy Technician. The guidance should consider any differences between the implications of delegation to qualified but unregulated Technicians and delegation to qualified and regulated Technicians (delegation to unqualified Technicians is not an option being Contemplated). The resulting guidance should be made available to all Manitoba Pharmacists.

Issue #3: Pharmacy Technicians

Summary of Positions

MPhA Council	MSP (Board)	MHHL
<ul style="list-style-type: none"> ▪ MPhA Council notes that the current draft of the Regulations grants Pharmacists discretion as to the tasks that are delegated to a technician and the duties that a technician can perform. ▪ MPhA Council believes there is a need for an expanded role for technicians in all environments. ▪ MPhA Council stated that it was previously told by Government that pharmacy technicians would not, or could not, be regulated by MPhA, ▪ Technicians are trained, qualified persons that competently perform the technical aspects of drug distribution and pharmacy practice. 	<ul style="list-style-type: none"> ▪ MSP (Board) endorses delegation to Pharmacy Technicians, as proposed, except that the expanded role of technicians be restricted to hospital practice only, at least until pharmacy technician becomes a regulated profession. ▪ MSP (Board) believes a common model cannot be applied to both hospital and retail environments (until such time that technicians are regulated) because of fundamental differences between hospital and retail environments; in a retail environment, corporate management will influence the allocation of roles and responsibilities between pharmacists and Pharmacy Technicians. ▪ MSP (Board) stated that <i>delegation of the final check</i> in community practice is one of its significant concerns with the pharmacy technician regulations. ▪ MSP (Board) believes Pharmacy Technicians should be a regulated profession, preferably by MPhA, which would enable Technicians to assume a larger role, similar to other jurisdictions. ▪ MSP supports the recommendations made by the MPhA Pharmacy Technicians Sub-committee (Sept 15, 2008 report). 	<ul style="list-style-type: none"> ▪ MHHL notes that the manner in which Pharmacy Technicians are utilized in a hospital environment differs from the Pharmacy Technician role in the community/retail environment. ▪ MHHL believes that (unregulated) technicians cannot be delegated the final check

CACDS	Pharmacy Technician Sub-committee	CAPT-MB
<ul style="list-style-type: none"> ▪ CACDS is of the opinion that the duties of Pharmacy Technicians demand more clarification. ▪ CACDS recognizes that MPhA Council can only define a Pharmacy Technician and their responsibilities but recommends concrete interpretations of specific details (e.g., definition of a "new" prescription, etc.). 	<p>Subcommittee recommended the following:</p> <ul style="list-style-type: none"> ▪ Pharmacy Technicians should be regulated, preferably by MPhA, with their own competency requirements, discipline process and liability insurance. ▪ Final check of the product should only be permitted to Pharmacy Technicians who have passed the Pharmacy Examining Board of Canada ("PEBC") examinations, undergone retraining programs and are registered, regulated and possess liability insurance. ▪ Only regulated Pharmacy Technicians should operate a tele-pharmacy remote site or satellite pharmacy. ▪ Pharmacy Technicians in hospitals should be exempt from the requirements of the Regulations to the Pharmaceutical Act. 	<p>CAPT-MB recommended the following in "Opening the Door" <i>The Need for Regulation of Manitoba Pharmacy Technicians Report</i> (April 2008)</p> <ul style="list-style-type: none"> ▪ The new Pharmaceutical Act of 2006 has opened the door for pharmacy technicians to be permitted increased responsibilities. ▪ Regulation of pharmacy technicians as a separate class of healthcare professionals will provide for the safe transfer of certain regulated duties of a pharmacist and will ensure that patient safety is not placed at risk.

Proposed Action Plan:

The MPhA Council and the MSP Board agreed upon the following Action Plan at the April 7, 2009 Retreat:

MPhA to review the MSP's position statement on the subcommittee report that includes proposed amendments.

MPhA and MSP will strike a task force committee to consider the feasibility of using phased implementation approaches for hospital/institutional practices and community practices.

MPhA to seek direction/clarification from Government on the preferred regulatory framework for Technicians; i.e. under which Act will Technicians be regulated and will Technicians be regulated by MPhA or another college/association.

Jurisdictional Comparison

	Ontario	Saskatchewan	Alberta	British Columbia
Are Pharmacy Technicians Regulated?	<ul style="list-style-type: none"> ▪ No. ▪ Enabling legislation introduced in 2007. 	<ul style="list-style-type: none"> ▪ No. ▪ Involved in the national initiative. 	<ul style="list-style-type: none"> ▪ No. ▪ Enabling legislation introduced. 	<ul style="list-style-type: none"> ▪ No. ▪ Involved in the national initiative.
Proposed Regulatory Body	<ul style="list-style-type: none"> ▪ OCP. 	Undetermined.	<ul style="list-style-type: none"> ▪ ACP. 	<ul style="list-style-type: none"> ▪ CPBC.
Current State	<ul style="list-style-type: none"> ▪ PEBC Pilot Qualifying Exam for Pharmacy Technicians is being offered in August 2009. 	<ul style="list-style-type: none"> ▪ SCP has begun an incremental adoption of NAPRA standards of practice. 	<ul style="list-style-type: none"> ▪ Health Professions Act was amended to include Pharmacy Technicians and registration began in January 2008. 	<ul style="list-style-type: none"> ▪ Developing the framework required for the regulation of Pharmacy Technicians.
Future Changes	<ul style="list-style-type: none"> ▪ The Health Systems Improvement Act (HSIA), which enables regulation of Pharmacy Technicians will come into effect at a future date, when the registration regulation and entry to practice process is in place (anticipated by 2010). 	<ul style="list-style-type: none"> ▪ NAPRA standards will be adopted when finalized under the authority of the new By-laws. ▪ Strategic goal of College to implement a regulatory process to support the use of qualified technicians in an optimal supportive role for pharmacists. 	<ul style="list-style-type: none"> ▪ In progress of developing regulations, scheduled to coincide with national efforts in 2010. 	<ul style="list-style-type: none"> ▪ Strategic goal of College to regulate Technicians by 2010.
Current state: Final Check and dispensing	<ul style="list-style-type: none"> ▪ No. 	<ul style="list-style-type: none"> ▪ No. 	<ul style="list-style-type: none"> ▪ No. 	<ul style="list-style-type: none"> ▪ No.
Future Changes: Final Check and dispensing	<ul style="list-style-type: none"> ▪ Yes ▪ In progress of developing regulations. 	<ul style="list-style-type: none"> ▪ Yes ▪ In progress of developing regulations. 	<ul style="list-style-type: none"> ▪ Yes ▪ In progress of developing regulations. 	<ul style="list-style-type: none"> ▪ Yes ▪ In progress of developing regulations.

Background

Issue #3: Pharmacy Technicians	
Draft Pharmaceutical Regulations: Policy Document, December 3, 2007	
Delegation to Pharmacy Technicians	52(1) A member may not delegate any task to a person under this section unless the person is qualified as a Pharmacy Technician.
Qualification of Pharmacy Technicians	52(2) A person is qualified as a Pharmacy Technician if the person is at least 18 years of age and: <ul style="list-style-type: none"> (a) has graduated from a program of Pharmacy Technician training approved by council; (b) has passed any examinations approved by council; or (c) has work experience and passed a competency assessment acceptable to council.
Continuing qualification of Pharmacy Technicians	52(2.1) A person qualifying under section 52(2) is entitled to have his or her qualification continue upon: <ul style="list-style-type: none"> (a) continued work in a pharmacy under the supervision of a member; and (b) participation in professional development and quality assurance programs as determined by council.
Limits on delegation to Pharmacy Technicians	52(3) A Pharmacy Technician may engage in the following aspects of the practice of pharmacy, under the supervision of a member: <ul style="list-style-type: none"> (a) compounding; (b) dispensing, subject to approval under s.50(d) and any standards related to counselling the patient;² (c) operating a tele-pharmacy remote site; and (d) identifying and assessing when drug-related problems require referral to the member.
Duties of Pharmacy Technicians	52(4) In addition to the duties described in 54(2), the following duties supporting the practice of pharmacy may be performed by a Pharmacy Technician, under supervision of a member and in accordance with applicable practice directions: <ul style="list-style-type: none"> (a) reviewing the information on the prescription for legibility and compliance with federal and

² "dispense" means to provide a drug pursuant to a prescription but does not include the administration of a drug;

Issue #3: Pharmacy Technicians	
	<p>provincial regulations;</p> <ul style="list-style-type: none"> (b) replenishing drug storage containers and dispensing machines; (c) performing a final check on the packaging or pre-packaging of drugs, container selection, and labelling performed by another technician, student or intern, prior to dispensing; (d) entering prescription information into a pharmacy database; (e) providing instruction to a person on how to operate a medical device but not provide any explanation involving the interpretation of the results or value of the device; (f) inquiring of the practitioner, and receiving the instruction, of whether an existing prescription can be refilled as previously prescribed and without any changes to the prescription; (g) collecting information from a patient for a patient profile; and (h) entering the pharmacy when it is closed and, with the exception of (e), (f) and (g), perform the duties listed under this section.
Pharmacy technicians in training	52(5) Notwithstanding anything in this section and subject to section 55, a Pharmacy Technician in training may perform the duties under subsection 3 and 4 under the direct supervision of a member or a Pharmacy Technician.
Duties of other persons	54(1) A person other than a member, intern, Pharmacy Technician, or student may not engage in or be delegated any aspects of the practice of pharmacy.
Limits on duties of other persons	<p>54(2) A member may permit a person other than a member, intern, Pharmacy Technician or student, to do the following duties provided they are performed under supervision and in accordance with applicable practice directions:</p> <ul style="list-style-type: none"> (a) preparing and pre-packaging a drug for dispensing; (b) selecting an appropriate container; (c) attaching the prescription label to the container; (d) recording and retrieving data regarding a patient or prescription; (e) collecting demographic information from a patient; and

Issue #3: Pharmacy Technicians	
	(f) managing drug inventory.
Pharmacy manager to arrange supervision	55(1) A pharmacy manager must take reasonable steps to ensure that supervision is provided to interns, Pharmacy Technicians, students and other persons in accordance with this part, the standards of practice and any relevant practice directions.
Safe use of automation	55(1.1) A pharmacy manager must take reasonable steps to ensure that automated or computerized systems used in prescription filling processes in the pharmacy are in good working order and perform their intended tasks in a safe and appropriate manner.
Member to supervise	55(2) A member must take reasonable steps to ensure that his or her supervision of interns, Pharmacy Technicians, students and other persons is provided in accordance with this part, the standards of practice and any relevant practice directions.
Delegation to qualified persons	55(3) A member must not delegate a task to any person, unless that person is reasonably qualified and competent to engage in the specified task.
Oversight of delegations	55(4) A pharmacy manager must take reasonable steps to ensure that members under his or her supervision are competent in the practice of pharmacy being performed and members do not delegate tasks to any person or require a person to do a task, unless that person is reasonably qualified and competent to engage in the specified task.
Delegation is not required	55(5) An owner or pharmacy manager must not require a member to delegate a task to an intern, Pharmacy Technician, student or other person if the member is uncertain the person is reasonably qualified and competent to engage in the intended task.
General operation	56 Notwithstanding anything else in this part, a member or owner may delegate a task to any person, without providing supervision, to the extent that the task is related primarily to the general operation of the business or institution, and not to the care of patients
Positions	
MPhA Council Position / Comments	<p>Meeting: Retreat April 7, 2009</p> <ul style="list-style-type: none"> ▪ MPhA Council notes that the current draft of the Regulations grants Pharmacists discretion as to the tasks that are delegated to a technician and the duties that a technician can perform.

Issue #3: Pharmacy Technicians	
	<ul style="list-style-type: none"> ▪ MPhA Council believes there is a need for an expanded role for technicians in all environments. ▪ MPhA Council stated that it was previously told by Government that pharmacy technicians would not, or could not, be regulated by MPhA. <p>Meeting: Council, July 27th, 2009</p> <ul style="list-style-type: none"> ▪ Council passed a motion supporting the idea that Pharmacy Technicians should be accredited subject to being graduates of an accredited pharmacy technician program as well as writing and passing the PEBC OSPE, in order to be a qualified Pharmacy Technician.
MSP (Board) Position / Comments	<p>Meeting: Retreat April 7, 2009</p> <ul style="list-style-type: none"> ▪ MSP (Board) endorses delegation to Pharmacy Technicians, as proposed, in hospital practice only. ▪ MSP (Board) notes a common model cannot be applied to both hospital and retail environments (until such time that technicians are regulated) because of fundamental differences between hospital and retail environments; in a retail environment, corporate management will give direction on the allocation of roles and responsibilities between pharmacists and Pharmacy Technicians. ▪ MSP (Board) stated that “delegation of the final check” in community practice is one of its significant concerns with the pharmacy technician regulations. ▪ MSP (Board) believes Pharmacy Technicians should be a regulated profession preferably by MPhA, which would enable Technicians to assume a larger role, similar to other jurisdictions. ▪ MSP supports the recommendations made by the MPhA Pharmacy Technicians Sub-committee (Sept 15, 2008 report). <p>Document: MSP Position Statement February 27, 2009</p> <p>In relation to regulations developed under the authority of 73(1)(h), as outlined in the December 2007 Regulation Discussion Document, the Manitoba Society of Pharmacists has identified a significant issue. Expanding the scope of practice of Pharmacy Technicians to the retail sector has not been mandated by MPhA members. A motion to provide Pharmacy Technicians with expanded responsibilities as proposed in the Regulation Discussion Document was defeated at an MPhA Special General Meeting.</p>

Issue #3: Pharmacy Technicians	
	<p>Until such time that Pharmacy Technicians are regulated, Pharmacy Technicians expanded scope of practice should not be defined.</p> <p>MSP is in support of increasing the role of pharmacists and regulated Pharmacy Technicians. Enhanced patient care can be achieved with an expanded scope of practice for both pharmacists and regulated Pharmacy Technicians.</p>
MHHL	<p>Meeting: Retreat April 7, 2009</p> <ul style="list-style-type: none"> ▪ MHHL notes that the manner in which Pharmacy Technicians are utilized in a hospital environment differs from the Pharmacy Technician role in the community/retail environment. ▪ MHHL believes that (unregulated) technicians cannot be delegated the final check
CACDS	<ul style="list-style-type: none"> ▪ CACDS is of the opinion that the duties of Pharmacy Technicians demand more clarification. ▪ CACDS recognizes that MPhA Council can only define a Pharmacy Technician and their responsibilities but recommends concrete interpretations of specific details (e.g., definition of a "new" prescription, etc.).
CAPT-MB	<ul style="list-style-type: none"> ▪ The new Pharmaceutical Act of 2006 has opened the door for pharmacy technicians to be permitted increased responsibilities. ▪ Regulation of pharmacy technicians as a separate class of healthcare professionals will provide for the safe transfer of certain regulated duties of a pharmacist and will ensure that patient safety is not placed at risk.
Surveys	<p>Documents: Questionnaire 3 – Pharmacy Technicians and Other Persons</p> <ul style="list-style-type: none"> ▪ 53 percent of respondents (88 respondents) agree that technicians should be registered or regulated. ▪ 77 percent of respondents agree with the qualifications defined in 52(2) for Pharmacy Technicians ▪ Respondents agree that technicians may engage in the following aspects of the practice of pharmacy: <ul style="list-style-type: none"> - compounding – 96 percent; - dispensing – 69 percent; - identifying and assessing when drug-related problems require referral – 60 percent. ▪ At least 87 percent of respondents support the

Issue #3: Pharmacy Technicians	
	<p>delegation of tasks to a Pharmacy Technician under the supervision of a pharmacist as set forth in 52(4) subsections (a), (b), (d) through (g). However only 46 percent of respondents supported the delegation of the final check set forth in 52(4)(c).</p> <ul style="list-style-type: none"> ▪ Only 43 percent of respondents support these changes if it results in an increased cost for professional liability insurance for the pharmacists supervising the technicians. ▪ 58 to 80 percent of respondents support the delegation of specific tasks to other persons under the supervision of a pharmacist as set forth in 54(2). <p>April 2007: MPhA Discussion Document Membership Response</p> <ul style="list-style-type: none"> • Section 52: 62% (127) in favour • Section 54: 89% (175) in favour • Section 55: 89% (175) in favour <p>July 2007: MPhA Discussion Document Membership Response</p> <ul style="list-style-type: none"> • Section 52(2) 85% in favour • Section 52(3) 80% in favour • Section 52(4) 63% in favour • Section 52(5) 87% in favour • Section 54(2) 89% in favour
MPhA Pharmacy Technician Subcommittees	<p>Document: Report to the MPhA September 15, 2008</p> <p>The subcommittee's recommendations are summarized as follows:</p> <ul style="list-style-type: none"> ▪ Pharmacy technicians should be regulated, preferably by MPhA, with their own competency requirements, discipline process and liability insurance. ▪ Final check of the product should only be permitted to Pharmacy Technicians who have passed the Pharmacy Examining Board of Canada ("PEBC") examinations, undergone retraining programs and are registered, regulated and possess liability insurance. ▪ Only regulated Pharmacy Technicians should operate a tele-pharmacy remote site or satellite pharmacy. ▪ Pharmacy technicians in hospitals should be exempt from the requirements of the Regulations to the Pharmaceutical Act.

Issue #3: Pharmacy Technicians	
MPhA Explanation Document: February 6th, 2008	<p>Section 52 Pharmacy Technicians</p> <p>This section provides a definition of technician and what areas of the practice of pharmacy can be delegated to technicians. Remember that “dispense” means to provide a drug to the patient pursuant to a prescription (i.e. give to a patient and/or send it on delivery). It is possible, therefore, for a student or technician to dispense a drug when the prescription is approved by the pharmacist for filling under section 50(d) and the patient counselling has occurred. Realizing that dispensing is the actual giving of the drug to the patient, it would be difficult for the regulations to only permit a pharmacist to “dispense”. This section would also allow for the tele-pharmacy remote sites where the technician, and not the pharmacist, might be the person in the same demographic location as the patient.</p> <p>Technicians may also be able to identify drug related problems, through the data entry process for example, and then bring this information to the attention of the pharmacist.</p> <p>Section 52(4) lists other things a technician can do, that really are not included in the definition of the practice of pharmacy. The final check on the prepared medication pursuant to a prescription, for example, is not covered in the practice of pharmacy. So the final check is under section 52(4) whereas “dispensing” is under 52(3) because that is under the practice of pharmacy.</p> <p>Some members expressed concern that technicians are not qualified to perform the delegations and duties that are listed. Others suggested that Community Practice Pharmacy be excluded from this section for the time being and have this section only apply to hospitals. Council reviewed these concerns and is convinced that technicians can be qualified to safely perform the activities described in the Regulations Discussion Documents regardless of the practice site. As a reminder, there is no obligation for the pharmacist to delegate to a technician or to permit the “other duties” being performed under their supervision.</p> <p>Section 52(2.1) is new and was added to the Draft Regulations Policy Document to address the need for the continuing qualification of a pharmacy technician.</p> <p>Section 55(1.1) Safe Use of Automation</p> <p>This section is new and was included to address the responsibility of the pharmacy managers to ensure that any automated or computerized systems used in the prescription filling processes are working properly and safely. Pharmacists working with an automated system would not necessarily be held accountable should,</p>

Issue #3: Pharmacy Technicians	
	<p>unbeknownst to him or her, some of the automation installed or system used in the pharmacy was error prone, not being maintained or of poor quality.</p> <p>Section 55(5) Delegation not Required</p> <p>This is a new section that provides the necessary authority for a pharmacist to refuse to delegate if there is uncertainty about the qualifications or competence of the individual.</p>
Pharmacy Technicians in Other Jurisdictions	
Ontario	<p>The Health Systems Improvement Act (HSIA), 2007 (Bill 171), passed by the Ontario Legislature on June 4, 2007, enables the regulation of Pharmacy Technicians. The Regulation of Pharmacy Technicians will allow for support of pharmacists in the provision of more comprehensive patient care services and promotion of optimal pharmacy services for the public.</p> <p>OCP Update on Regulation of Pharmacy Technicians Webcast Dec 2008:</p> <ul style="list-style-type: none"> ▪ The HSIA which enables regulation of Pharmacy Technicians will come into effect at a future date, when the registration regulation and entry to practice process is in place (anticipated by 2010). ▪ Pharmacy Technicians will be recognized as self-regulated and accountable health professionals. ▪ Regulated Pharmacy Technicians will support pharmacists who wish to realize a fuller role in Medication Therapy Management. ▪ Registration is voluntary, for the individual and the employer. ▪ Two levels of technical support will exist; technicians and assistants (title protection will distinguish these roles to the public). <p>Proposed Regulatory Authority:</p> <ul style="list-style-type: none"> ▪ Ontario College of Pharmacists
Saskatchewan	<p>SCP Discussion Paper on the Regulation of Pharmacy Technicians in Saskatchewan, January 28, 2008</p> <p>“Council must consider whether or not the SCP should seek legislative authority to regulate the practice of Pharmacy Technicians by establishing a new class of licensure for registered Pharmacy Technicians.”</p> <p>“Under the Pharmacy Act (1996), the SCP has the authority to make bylaws governing the delegation of tasks to technicians. However this delegation is</p>

Issue #3: Pharmacy Technicians	
	<p>described in the standards that were in place at the time the revised act was proclaimed.</p> <p>Since then, the SCP has begun an incremental adoption of NAPRA standards of practice. The current list of functions outlined by SCP primarily distinguishes between technical and cognitive activities, and pharmacists must still supervise the technical functions. All of this will be replaced by the NAPRA standards when finalized under the authority of the new bylaws. Technicians are accounted for in a ratio in the current standards.” (page 8).</p> <p>Options:</p> <ol style="list-style-type: none"> 1. Registration by the SCP; 2. Regulation by the SCP; and 3. Self Regulation by their own body. <p>No response from the Council was noted nor was any subsequent action noted to be taken.</p> <p>Proposed Regulatory Authority:</p> <ul style="list-style-type: none"> ▪ Not determined to date.
<p>Alberta</p>	<p>In September 2006, the Council of Pharmacists passed a motion supporting the regulation of Pharmacy Technicians.</p> <ul style="list-style-type: none"> ▪ A register has been created in the ACP by-laws (Bylaw 51) and, ACP council approved the updated <i>Criteria for Recognition of Pharmacy Technician Programs</i>. ▪ In approving the criteria, council noted that the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) is planning to accredit Pharmacy Technician training programs and the Pharmacy Examining Board of Canada (PEBC) is developing a national qualifying exam for Pharmacy Technicians. Both of these national initiatives are targeted for completion in 2009. For this reason, the approved criteria are provisional and will be reviewed when program accreditation and a national qualifying exam are available. <p>Criteria for Recognition of Pharmacy Technician Programs</p> <p>The <i>Pharmacists Profession Regulation</i> includes the following definition of a Pharmacy Technician: <i>an individual who has successfully completed a Pharmacy Technician program recognized by the Council and who is registered in the Pharmacy Technician register provided for in the by-laws.</i></p>

Issue #3: Pharmacy Technicians	
	<p>Proposed Regulatory Authority:</p> <ul style="list-style-type: none"> ▪ Alberta College of Pharmacists.
British Columbia	<p>The regulation of Pharmacy Technicians has been underway for many years and will ultimately result in the creation of a new healthcare profession.</p> <p>As a regulated professional, Pharmacy Technicians will have their own scope of practice outlining the specific functions for which they will be responsible and ultimately held accountable. Additionally, the profession will establish the competencies (i.e., knowledge, skills and abilities) required to perform this scope, and practitioners will have to demonstrate that they meet these standards by initially successfully completing a national entry-to-practice exam(s) and then through ongoing professional development and assessment requirements.</p> <p>In BC, six major national initiatives are underway or completed in this area; these include:</p> <ol style="list-style-type: none"> 1. Education Outcomes for Pharmacy Technician Programs; 2. Entry-to-practice competencies for Pharmacy Technicians; 3. Accreditation of Pharmacy Technician training programs; 4. Evaluation of entry-to-practice examinations for Pharmacy Technicians; and 5. Development of bridging programs. <p>Proposed Regulatory Authority:</p> <ul style="list-style-type: none"> ▪ College of Pharmacists of British Columbia.
National Association of Pharmacy Regulatory Authorities	<p>In 2007, NAPRA released Professional Competencies for Canadian Pharmacy Technicians at Entry to Practice, a document intended to serve as a foundation for national educational, accreditation and examination standards for Pharmacy Technicians in Canada.</p> <p>This document outlines the knowledge, skills, abilities and attitudes required at the point of entry into the profession, and it assumes that Pharmacy Technicians will be a regulated profession.</p> <p>Specific competency categories include:</p> <ul style="list-style-type: none"> ▪ Competency #1: Legal, Ethical, and Professional Responsibilities; ▪ Competency #2: Professional Collaboration and Teamwork; ▪ Competency #3: Drug Distribution: Prescription and Patient Information;

Issue #3: Pharmacy Technicians	
	<ul style="list-style-type: none">▪ Competency #4: Drug Distribution: Product Preparation;▪ Competency #5: Drug Distribution: Product Release;▪ Competency #6: Drug Distribution: System and Inventory Controls;▪ Competency #7: Communication and Education;▪ Competency #8: Management Knowledge and Skills; and▪ Competency #9 Quality Assurance.

Appendix A - Brief Overview of the 13 Issues

- 1. Pharmacy Manager Qualifications:** requirement to satisfy a number of practice hours as a pharmacist or a training program in order to be eligible to become a pharmacy manager;
- 2. Professional Liability Insurance:** requirement for both pharmacists and pharmacies to carry professional liability insurance.
- 3. Pharmacy Technicians:** the ability of the Regulations to establish qualifications, experience and other assessments that must be held by a pharmacy technician and the role and duties they can perform.
- 4. Pharmacist Profiles:** the development of a profile for certain health care professionals (i.e., in this case, for each Pharmacist) – a record which includes personal, professional, and other information for the purpose of being made available to the public.
- 5. Pharmacist Prescribing:** the ability of pharmacists to prescribe medication and /or treatment. .
- 6. Tele-pharmacy:** the provision of pharmacy services to residents in remote communities that do not have reasonable access to pharmacy services. (See section 37 of draft)
- 7. Central Fill Component:** the ability of Hospital and Community Pharmacies to package medication and fill prescriptions for another pharmacy.
- 8. Extended Practice Pharmacists & Specialty Care Practice:** the establishment of extended practice pharmacists, and the role of the Extended Practice Advisory Committee.
- 9. Inducements:** the offering or providing of gifts, rebates, bonuses, or inducements while engaging in the practice of pharmacy.
- 10. Practice Directions / Standards of Practice:** the ability of the Council to make practice directions in over 20 discrete areas.
- 11. Distance Care Component:** the standards required to provide services to patients who do not attend the pharmacy in person. This can involve International Pharmacy Services (“IPS”), inter-province services, and intra-province services.
- 12. Personal Health Identification Number (“PHIN”):** a prescription may not be dispensed unless a patient profile made and retained; in cases where the patient is a Manitoba resident that has been assigned a PHIN, the PHIN of the patient shall be recorded in the profile in accordance with the appropriate practice directions.
- 13. Record Keeping:** the need for Pharmacists to maintain records and documentation related to work conducted.

Appendix B – Focus Group Preparation Materials

This Issue and Options Analysis has been developed to provide context and structure to the Focus Group concerning Pharmacist Technicians.

Despite the general support for an enhanced role for pharmacy technicians, stakeholders have raised the following concerns or *sub-issues* regarding the regulations pertaining to pharmacy technicians:

- i. An expanded role for pharmacy technicians may reduce the number of pharmacists required in the Province of Manitoba, resulting in reduced demand for licensed pharmacists;
- ii. Although the Regulations clearly state that Pharmacists have *discretion* whether to delegate tasks to pharmacy technicians, some pharmacists are concerned that management might try to exert influence over a pharmacist's discretion to maximize the cost efficiencies derived from delegation to technicians; and
- iii. Some pharmacists are concerned with the liability implications arising from delegating work, particularly the Final Check, to pharmacy technicians; these concerns include (a) whether liability for a technician's work attaches to the pharmacist or to the pharmacy and (b) the potential impact exercising the discretionary right of delegation may have on the cost of the respective pharmacist's liability insurance.

N.B. the purpose of the above list is to acknowledge concerns that have been expressed some stakeholders and to provide structure for the Focus Group discussions; inclusion of a concern in this list does not imply that the concern has been validated. Furthermore, inclusion of a concern does not imply that the concern is common to the majority of Manitoba Pharmacists.

Purpose

The purpose of this focus group is to discuss the concerns that have been raised by stakeholders and to identify the preferred option to resolve the above noted concerns.

Discussion Questions

In order to foster a knowledgeable and fruitful discussion of this issue during the focus group, the following questions are being provided for your thoughtful consideration when you prepare to participate in the Focus Group.

1. What are the prerequisites for delegation of professional activities described under section 52(3) of the draft Regulations, including the Final Check, to a pharmacy technician? Do these prerequisites differ between a hospital and community/retail environment?
2. Is it appropriate to define the role of pharmacy technicians in the Regulations in the absence of a defined plan for a regulatory framework for pharmacy technicians?
3. How should Pharmacy Technicians be regulated? (e.g., through MPhA, independent College, etc.).
4. Should the role of pharmacy technicians in community practice be equivalent to, or different from, the role of pharmacy technicians in hospital practice?
5. Should pharmacists be able to delegate the Final Check to a pharmacy technician in all practice environments, and if so, under what conditions, if any?
6. Is the current concept of "registering" technicians under Bill 41 with no direct regulatory authority over the technicians a barrier to the utilization of the technicians in a practice setting?

7. Many other jurisdictions will require regulated and/or registered pharmacy technicians to graduate from an approved education program **and** successfully complete a national qualifying examination. MPhA Council supports this concept in principle. Do you feel this should be a requirement in Manitoba as well?

Potential Options

A summary of options has been provided. These are intended to provide additional focus to the discussion. Additional options posed by members of the focus group are welcomed;

#	Concerns	Option 1	Option 2
i	An expanded role for pharmacy technicians may reduce the number of pharmacists required in the Province of Manitoba, resulting in reduced demand for licensed pharmacists	Maintain existing wording of the December 2007 draft regulations.	Revise the draft Regulations by reducing the scope of the pharmacist technicians' role, possibly by removing the ability to delegate the Final Check.
ii	Although the Regulations clearly state that Pharmacists have <i>discretion</i> whether to delegate tasks to pharmacy technicians, some pharmacists are concerned that management might try to exert influence over a pharmacist's discretion to maximize the cost efficiencies derived from delegation to technicians.	Maintain existing wording of the December 2007 draft regulations.	Maintain existing wording of the December 2007 draft regulations with respect to Hospital practice, but change the scope of responsibilities that may be delegated to technicians in community practice, or define a phased in approach to community practice.
iii	Some pharmacists are concerned with the liability implications of delegating work, particularly the Final Check, to pharmacy technicians; these concerns include (a) whether liability for a technician's work attaches to the pharmacist or to the pharmacy and (b) the potential impact discretionary delegation may have on the cost of the delegating pharmacist's liability insurance.	Conclude the benefits of an expanded role for pharmacy technicians outweigh any implications relating to liability and, therefore, maintain the wording of the December 2007 draft regulations.	Consult with leading insurance providers to better understand how they view the liability implications of the changes in Regulation; using the insight gained, revise the regulations to mitigate any unacceptable liability implications.

Appendix C – Blueprint for Pharmacy