



College of  
Pharmacists  
of Manitoba

# Annual Report 2021



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# Protecting the Public

The College of Pharmacists of Manitoba (CPhM) exists to protect the public interest by regulating pharmacy practice under the authority of *The Pharmaceutical Act* (The Act) of Manitoba.



## The College of Pharmacists of Manitoba:

- Establishes qualifications, standards of practice, and practice directions for pharmacy professionals.
- Lists qualified pharmacy technicians and licenses qualified pharmacists.
- Licenses community, hospital, and clinical practice pharmacies according to set operating requirements and standards.
- Ensures pharmacy professionals engage in ongoing learning to continually enhance competence to practice.
- Responds to concerns and complaints about the conduct and/or competence of pharmacy professionals.
- Promotes practice excellence and supports pharmacy professionals and pharmacies to employ continuous quality improvement strategies to provide safe, quality pharmacy care.



## Mission

To protect the health and well-being of the public by ensuring and promoting safe, patient-centred, and progressive pharmacy practice in collaboration with other healthcare providers.



## Vision

Leader in patient safety by creating the framework for collaborative and innovative patient-centred pharmacy practice.

### Life-Long Learning

We continue to enhance our knowledge and competency.

### Accountability

We are responsible for our actions in an open and transparent manner.

### Excellence

We strive to be innovative and attain high-quality and exemplary performance.

### Collaboration

We strive to include teamwork and partnership.

### Integrity

We act with professional, fair and honest conduct.

### Respect




We are considerate of the values and needs of others.

## Values

# Strategic Plan 2021-2024

The COVID-19 pandemic demonstrates the important role that pharmacy professionals serve in delivering care to Manitobans. With the expansion of pharmacist scope of practice in recent years, it is more important than ever that relationships between pharmacists, patients, and prescribers are founded on principles of integrity, trust, and equity.

CPhM Council has identified three pillars which encompass CPhM's strategic priorities to promote integrity, trust, and equity in pharmacy practice and regulation. They are:

-  **Support pharmacy professionals in effectively delivering services that meet the social and cultural needs of all patients.**
-  **Promote quality pharmacy services by ensuring pharmacy professionals are aware of and adhere to professional standards and expectations.**
-  **Promote safety in pharmacy services and ethical practice.**



For more information the CPhM strategic plan and how to provide feedback on the plan and its priorities, click [here](#).



# Message from the Registrar & President

Twenty Twenty-One has been a year characterized by continuing challenges amid the pandemic, resilience, and advancement in the provision of pharmacy care across our province. The College of Pharmacists of Manitoba (CPhM) presents the 2021 Annual Report acknowledging the unwavering efforts of pharmacy professionals, with support provided by CPhM Council and staff, and in collaboration with other health care providers, to meet the ongoing and emergent health needs of Manitobans.

The CPhM is grateful to pharmacy professionals for their dedication and resilience during several years of additional personal and professional strain. Thank you for your commitment and steadfast efforts to rise to the challenges presented by the pandemic to provide safe, quality pharmacy care to your patients.

Throughout the past year, so too did the CPhM successfully navigate the operational challenges presented by the pandemic to meet its mandate of protection of the public interest. In collaboration with public health leaders and Government, Council supported pharmacy professionals in delivering effective pharmacy care and advancing that care to include COVID-19 vaccinations and testing, and the treatment of self-limiting conditions in communities throughout the province. These efforts were critical in ensuring Manitobans receive the care they need closer to home.

In partnership with Manitoba Health and Seniors Care, amendments to the Regulation were introduced to permit pharmacist prescribing for recurrent uncomplicated cystitis in non-pregnant women. Within only a few short weeks, 44 pharmacists across the province had already undertaken the additional training to become qualified and received CPhM authorization to deliver this much needed care through community pharmacies. These amendments were part of a larger proposal for Regulatory Improvements that the CPhM set before Government for final review and approval just prior to the pandemic. The Regulatory Improvements are aimed at streamlining patient access to safe, quality care through pharmacist prescribing of

drug therapy and vaccines for additional self-limiting conditions, expanding the list of publicly funded vaccines that may be administered by pharmacists, and permitting pharmacists to ensure continued care for patients receiving chronic medication therapy during times of drug shortages. The CPhM has already engaged the Minister on moving forward with this larger proposal to further advance the care provided by pharmacists.

In June 2021, the College launched Safety IQ, Manitoba's community pharmacy continuous quality improvement (CQI) program. What began as a pilot with twenty community pharmacies in 2017 has grown into a mandatory provincial program for more than 450 community pharmacies and counting. Safety IQ expands on the requirement for community pharmacy professionals to report and learn from medication incidents and near-miss events, to include the national sharing of incident information and learnings to improve patient safety across the country. Research indicates that employing proactive approaches to reducing medication errors is especially critical during times when workload stresses may be impacting pharmacy operations. The CPhM congratulates pharmacy professionals for recognizing that in the most challenging times of the pandemic, implementation of Safety IQ can assist in ensuring they provide the best possible pharmacy care to their patients.

Council and staff embarked on a strategic planning process in 2021 to develop the strategic roadmap for the organization and guide decisions over the next three years, the 2021-24 Strategic Plan. Cultural safety, inclusion, and diversity, continuous improvement to quality assurance programs, and promoting safe, ethical pharmacy practice make up the three pillars of this ambitious plan. To begin, Council and staff walked a path of humility and insight through Indigenous Cultural Safety training.

Some of the most inspirational leaders of our time have spoken about the opportunities that can exist to demonstrate and develop will and determination when confronted with challenge. Advancing pharmacy care through the treatment of additional self-limiting conditions, COVID vaccination and testing, and implementing continuous quality improvement programs such as Safety IQ are only some of the opportunities seized by pharmacy professionals across this province. The commitment and dedication of pharmacy professionals to considering and implementing better ways to provide safe, quality pharmacy care to the public and vulnerable patients in Manitoba during trying times, has been truly inspiring.

Thank you.



**Wendy Clark**  
President

A handwritten signature in blue ink, appearing to read 'W. Clark'.

**Susan Lessard-Friesen**  
Registrar

A handwritten signature in blue ink, appearing to read 'Susan Lessard-Friesen'.

# Message from a Public Representative

I am grateful to contribute as a public representative on CPhM council. Public representatives on council have a responsibility to ensure the public's perspective is considered in CPhM decisions. Public representation is vital to regulatory discussions, as it contributes to effective decision-making that reflects the public's best interests. It is my duty to provide perspectives that contribute to CPhM's comprehensive decision-making process. The public representative role is critical in protecting and serving patients who have placed their trust in the pharmacy profession.

When I reflect on 2021, I am impressed how pharmacists have continually adapted to respond to the COVID-19 pandemic, all while maintaining a high standard of patient care. Between vaccine administration, rapid testing implementation, and ever evolving public health measures, pharmacists in Manitoba were instrumental in the pandemic response. I applaud the efforts of these dedicated individuals for their commitment to their profession and the public.

In 2021, a large portion of my time at CPhM involved the Complaints Committee. This committee re-affirmed my appreciation for CPhM's commitment to public protection. With each incoming complaint, CPhM staff undertake a significant amount of work, aiming to ensure there is fair representation for all parties involved. I appreciated how committee members valued my input, and helped facilitate the role of public representation throughout each complaint resolution process.

In the past year, I've observed CPhM Council and Committee Members strive to uphold the mandate of the college, through their commitment to patient-centred, safe delivery of pharmacy care and regulatory excellence. I look forward to continuing my role as a public representative on Council, and I'm honoured to work alongside such a dedicated group of professionals. I look forward to being a part of the progress in 2022.



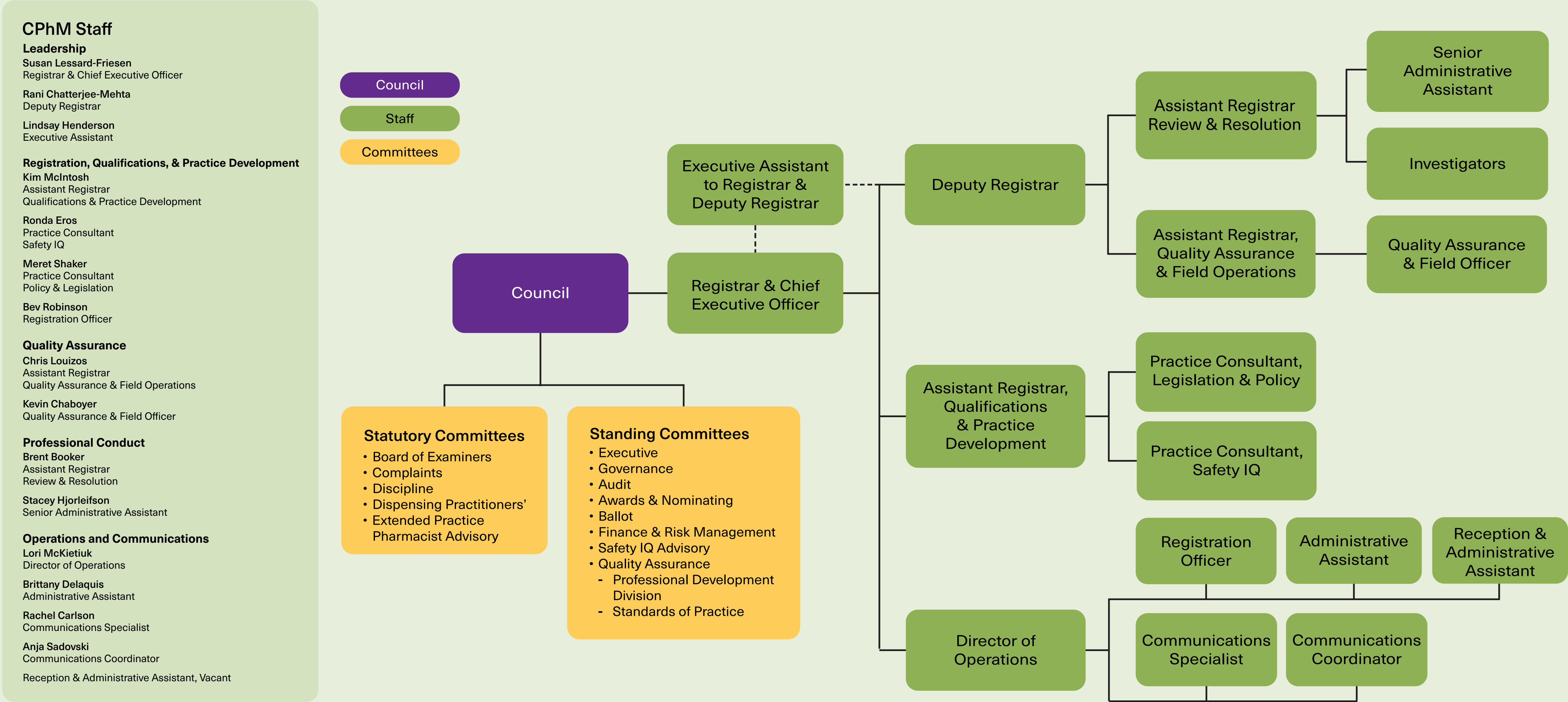
**Tory Crawford**  
Public Representative

A handwritten signature in black ink, appearing to read 'Tory Crawford'.



# Governance & Operational Structure

The structure of CPhM is established in accordance with legislation and Council directions. The overarching goal of the governance and operational structure is to ensure CPhM meets its mandate of protecting the public interest in keeping with Council’s strategic initiatives and in collaboration with stakeholders.



# Council & Committee Membership

Council is responsible for governing CPhM. Council is made up of elected CPhM registrants and public representatives appointed by the Minister of Health and Seniors Care. Council meetings are open to the public.

## Officers

Wendy Clark, President  
Sonal Purohit, Vice President  
Kevin Hamilton, Past President  
Jane Lamont, Executive Treasurer

## Councillors

Sonal Purohit, Vice President, District 1  
Alanna Doell, Pharmacist, District 1  
Ashley Walus, Pharmacist, District 1  
Ryan Buffie, Pharmacist, District 1  
Wendy Clark, President, District 2  
Kevin Hamilton, Past President, District 2  
Drupad Joshi, Pharmacist, District 2  
Jane Lamont, Executive Treasurer, District 2  
Ravi Pandya, Pharmacist, District 2  
Amanda Andreas, Public Representative  
Tory Crawford, Public Representative  
Donna Forbes, Public Representative,  
Don Himbeault, Public Representative  
Bharti Kapoor, Public Representative  
(to May 2021)  
Dr. Lalitha Raman-Wilms, Dean, College of  
Pharmacy, Rady Faculty of Health Sciences,  
Universty of Manitoba

## Liaisons to Council

**CSHP-Manitoba Branch Liaisons:**  
Nicole Hager, CSHP (from June 2021)  
Brenda Rosenthal, CSHP (to May 2021)  
**College of Pharmacy, U of M, Student Liaisons:**  
Marianna Pozdirca, U of M College of Pharmacy,  
Student (from July 2021)  
Marina Rofaeil, U of M College of Pharmacy,  
Student (to June 2021)  
**Pharmacists Manitoba Liaisons:**  
Dr. Brenna Shearer, Pharmacists MB  
(to July 2021)  
Amy Oliver, Pharmacists MB  
(August to September 2021)  
Tanjit Nagra, Pharmacists Manitoba  
(from November 2021)  
**PEBC Liaison:**  
Dinah Santos, PEBC  
**Pharmacy Technician Liaison:**  
Stephen Jackson, Pharmacy Technician

## Governance Committee

**Mandate:** To provide initial and ongoing review of, and to make recommendations to Council about, the governance structure of CPhM.

<b>Kevin Hamilton, Chair</b>	Don Himbeault
Amanda Andreas	Jennifer Ludwig
Gary Cavanagh	Glenda Marsh

## Board of Examiners

**Mandate:** To consider and decide on applications for registration and conditional registration in accordance with The Act.

<b>Dr. Lalitha Raman-Wilms, Chair</b>	Don Himbeault
Wendy Clark	Brenda Rosenthal
Nicole Hager	

## Finance Risk Management Committee

**Mandate:** To oversee the financial affairs of the CPhM and be responsible for making recommendations to Council regarding organizational risk.

<b>Jane Lamont, Chair</b>	Bharti Kapoor (to May 2021)
Tory Crawford (from June 2021)	Susan Lessard-Friesen
Carol Davis	Jennifer Ludwig
Bill Eamer	Ashley Walus

## Audit Committee

**Mandate:** To provide oversight and review the CPhM year-end draft financial statements before they are submitted to Council and to make recommendations to Council with regard to year-end financial statements.

<b>Bill Eamer, Chair</b>	Bharti Kapoor (to May 2021)
Tory Crawford (from June 2021)	Ashley Walus
Carol Davis	

## Dispensing Practitioners’ Committee

**Mandate:** To consider and decide on applications from practitioners who are not members, in accordance with section 11 of the Regulation to *The Act*.

**Rani Chatterjee-Mehta, Chair**  
Chris Louizos

## Awards & Nominating Committee

**Mandate:** To recommend to Council the recipients of The Pharmacist of the Year, Bonnie Schultz Memorial Award for Pharmacy Practice Excellence, Patient Safety Award, Honorary Life Membership, Honorary Membership, Centennial Award, and other awards of the CPhM as Council determines.

<b>Kevin Hamilton, Chair</b>	Glenda Marsh
Ron Guse	Leanne McCannel
Grant Lawson	Donald (Scott) McFeetors
Nicole Hager (from June 2021)	Dr. Lalitha Raman-Wilms
Jennifer Ludwig	Brenda Rosenthal (to May 2021)

## Complaints Committee

**Mandate:** To address formal complaints submitted by a patient or their agent, a co-worker, employer, or healthcare professional, through the established complaints resolution process.

<b>Pat Trozzo, Chair</b>	Bharti Kapoor (to May 2021)
Barbara Sproll, Vice-Chair	Tim Saunders (to November 2021)
Tory Crawford (from June 2021)	Mike Sloan
Donna Forbes	

## Discipline Committee

**Mandate:** To hear matters referred by the complaints committee pertaining to actions, practice or judgment not reflective of standards og practice and conduct required by the legislation and Code of Ethics.

<b>Ron Eros, Chair</b>	Don Himbeault
Shannon Trapp, Vice-Chair	Nicholas Honcharik
Eddie Ahoff	Britt Kural
Amanda Andreas	Jenny Luc
Ron Corrigan	Martha Mikulak
Luba Fedorkiw	Zahid Zehri

## Extended Practice Pharmacist Advisory Committee

**Mandate:** To provide oversight and make recommendations to Council on matters that relate to extended practice pharmacists as described in part 12 of the Regulation to *The Act*.

<b>Dr. Robert Ariano, Chair</b>	Jamison Falk
Amanda Andreas	Donna Forbes
Dr. Anna Ziomek, CPSM	Don Himbeault
Dr. Brent Kvern, CPSM	Bharti Kapoor (to May 2021)
Tory Crawford	Sharon Smith
Deb Elias, CRNM	Ashley Walus
Cheryl Dika, CRNM	Barb Wasilewski, MHSC

## Quality Assurance Committee

**Mandate:** To serve as a resource to Council by providing oversight, monitoring and evaluation of CPhM’s quality assurance/continuous quality improvement program and make recommendations to Council on program enhancements for the purpose of improving pharmacy practice and patient safety.

<b>Cenzina Caligiuri, Chair</b>	Robin Hidlebaugh	Ryan Persaud
Ryan Buffie	Judy Lee-Wing	Gayle Romanetz
Jennifer Butler	Donald (Scott) McFeetors	Kurt Schroeder
Linda Carroll	Arlene Nabong	Pat Trozzo
Tracy Claeys	Sheila Ng	
Alanna Doell	Anu Okunnu	
Robert Francis	Amy Oliver	

## Quality Assurance Committee: Standards of Practice Division

**Mandate:** To serve as a resource to Council for reviewing, recommending, and keeping current the standards of practice, practice directions, and practice guidelines for the purpose of improving pharmacy practice, patient health outcomes and patient safety.

<b>Robin Hidlebaugh, Chair</b>	David Lee	Ripudaman Singh Randhawa
Amir Baksh	Judy Lee-Wing	Gayle Romanetz
Alanna Doell	Tara Maltman-Just	Adelaine Saria
Sheri Dyck	Donald (Scott) McFeetors	Kurt Schroeder
Lisa Havixbeck	Sarah Myk	Pat Trozzo
Nicholas Honcharik	Bernadette Ogoms	Michael Wiebe
Jane Lamont	Amy Oliver	
Christopher Lawson	Ryan Persaud	

## Quality Assurance Committee: Professional Development Division

**Mandate:** To establish areas for continuing competence programs, and promote and facilitate participation in professional development programs, required for maintaining competence and improving practice as a pharmacist or pharmacy technician in Manitoba. To act as a resource to Council by making recommendations for assessing the competence and performance of pharmacists.

<b>Ryan Buffie, Chair</b>	Cenzina Caligiuri	Tim Smith
Rizwan Ahmed	Gholam Reza Ebrahimian	Pat Trozzo
Bolanle Aina	David Lee	Lorraine Woods
Lindsay Alvero	Sheila Ng	
Grace Badejo	Olasumbo Ojo	
Susan Balagus	Olena Serwylo	



# Pharmacy Professionals and Pharmacies

## Registration and Licensing of Pharmacy Professionals

- > **1,696** Practicing pharmacists registered and licensed.
- > **138** Pharmacy students registered.
- > **34** Licensed pharmacists have qualified and are designated as an Extended Practice Pharmacist in a specialty area.
- > **46** Interns registered.
- > **228** Listed pharmacy technicians.
- > **17** New pharmacy technicians listed in 2021.

Of the 89 pharmacists registered and licensed for the first time in Manitoba in 2021:

- > 45% were domestic pharmacy graduates.
- > 39% were international pharmacy graduates.
- > 16% were licensed pharmacists from other provinces and territories who had moved to Manitoba to practice.



# Pharmacy Professionals and Pharmacies



## Pharmacist Authorized Practices

- **1108** Pharmacists authorized to administer drugs and vaccines by injection.
- **940** Pharmacists authorized to prescribe drugs for self-limiting conditions.
- **44** Pharmacists authorized to prescribe drug therapy for uncomplicated cystitis.
- **231** Pharmacists authorized to order lab tests.
- **639** Pharmacists authorized to prescribe drug therapy for smoking cessation.

## Pharmacies Licensed

Of the 486 pharmacies licensed in Manitoba in 2021:



- **450 were community pharmacies.**
- **1 was a clinical practice pharmacy.**
- **35 were hospital pharmacies.**





**CPhM commends pharmacy professionals for their dedication to providing safe, effective pharmacy care to Manitobans during a prolonged and unrelenting public health emergency.**

# Responding to COVID-19

Amid the ongoing COVID-19 pandemic, CPhM continued to support pharmacy professionals in the delivery of safe, quality pharmacy services to Manitobans. In collaboration with public health leaders, government offices, stakeholder organizations, and other healthcare providers, CPhM took an active role on a number of task force groups aimed at extending pharmacy services in community pharmacies throughout Manitoba to meet emerging public health needs.

**The enactment of extended pharmacy services in 2021 by Ministerial Order included:**

- Permitting authorized pharmacists and pharmacy interns to administer COVID-19 vaccines at community pharmacies.
- Lowering the age of administration to five (5) years of age and older for COVID-19 and Influenza vaccines.
- Enabling pharmacists to administer and interpret rapid antigen tests and rapid molecular (non-PCR) tests to detect COVID-19 in community pharmacies.

Pharmacy professionals across the province rose to the challenge of ensuring that patients and the public continued to have access to pharmacy care throughout 2021 despite the significant challenges they faced.



# Maintaining Quality Assurance

In healthcare, quality assurance refers to activities that ‘assure’ or promise to maintain and improve quality of care. As the regulator of pharmacy practice in Manitoba, CPhM assures quality and safety of care by assessing the quality of pharmacy practice and professional competence, supporting continuous quality improvement, and remediating unsafe practices in care delivery.

## Learning Portfolio Review

Pharmacists must maintain a three-year record of their learning activities by

- entering each accredited and non-accredited learning in their online Professional Development profile; and
- retaining supporting documents or evidence as proof of completing every learning activity claimed in their PD profile.

CPhM conducts an annual Learning Portfolio Review as a check to make sure pharmacists have met the continuing professional development (CPD) requirements for maintaining their licence to practice.

Pharmacists must complete a minimum of **25 hours of CPD**.



Minimum **15 hours of CPD** must be from accredited activities as recognized by an accrediting organization.



Pharmacists keep a **Learning Portfolio** of CPD activities that must be available for CPhM review.



## Pharmacy Site Inspections

Pharmacy site inspections ensure that facilities, policy and procedures and practices meet CPhM standards for patient safety and care.

From new pharmacy openings to routine inspections, CPhM inspectors ensure that pharmacy managers and pharmacists have the knowledge and tools to meet practice requirements.

Pharmacy site inspections were transitioned to an entirely virtual format at the start of the COVID-19 pandemic. CPhM inspectors have now implemented a hybrid model, utilizing both virtual and in-person inspections as appropriate. In-person inspections are prioritized using a risk-based approach.



**50** Inspections Complete



# Maintaining Quality Assurance

## Safety Improvement in Quality (Safety IQ)

On June 1, 2021, community pharmacies across Manitoba implemented the Safety IQ program. Safety IQ is a continuous quality improvement (CQI) program that expands on the existing requirements for community pharmacy professionals to report and learn from medication incidents and near-miss events to improve the quality and safety of their practices.

Despite the pressures and demands of the COVID-19 pandemic, community pharmacies began and continued reporting medication incidents (MI) and near-miss events (NME) to the National Incident Data Repository (NIDR) hosted by the Institute for Safe Medication Practices Canada (ISMP Canada) throughout the second half of 2021. Medication safety specialists from ISMP Canada analyze de-identified (anonymous) aggregate MI and NME data to make recommendation for medication safety improvements to healthcare professionals across Canada. Safety IQ ensures that the lessons learned in Manitoba community pharmacies are shared nationally to prevent patient harm in other jurisdictions.

Locally, community pharmacies continually assess pharmacy practices to improve patient safety. Pharmacy teams proactively analyze their systems and processes to identify areas of risk in their practice using a **safety self-assessment (SSA)**.



73

Pharmacies have completed a SSA

Pharmacies also take a reactive approach to CQI by

- analyzing individual MI and NME and developing action plans to prevent recurrence;
- examining MI and NME data on a quarterly basis to identify trends within their pharmacy and opportunities for improvement; and
- conducting at least one CQI meeting per year with the majority of staff present to review and make improvements to pharmacy processes.



51

Pharmacies have completed a formal CQI meeting

CPhM thanks all community pharmacy professionals for their commitment to CQI and patient safety throughout the COVID-19 pandemic and beyond.

## Safety IQ: By the Numbers

Near-Miss Events Reported  
(Medication Not Dispensed to the Patient)



937

Medication Incidents Reported  
(Medication Dispensed to the Patient)



241

Total number of reports: 1,178

## Informal Concern Resolution

Members of the public often seek support and assistance from CPhM to resolve their concerns without submitting a formal complaint. Shared learning and CQI are the goals of informal concern resolution. Informal concern resolution is an opportunity to educate pharmacy professionals, mend relationships, and inform the public about how pharmacy practice is regulated in Manitoba.

CPhM contacts the pharmacist to explore and resolve the concern.



185 concerns resolved with informal resolution.

Concern is communicated to CPhM and details are gathered.



# Complaint Resolution

## Formal Complaint Process



Complaints Outcomes 2021	
Referred to Discipline	2
Formal Correspondence	21
Censures	8
Monitoring Program(s)*	3
Quality Assurance Education	6
Licence Suspensions	2
Voluntary Surrenders	2

\*May include requirements for drug/alcohol screening, counselling, and/or assessment.

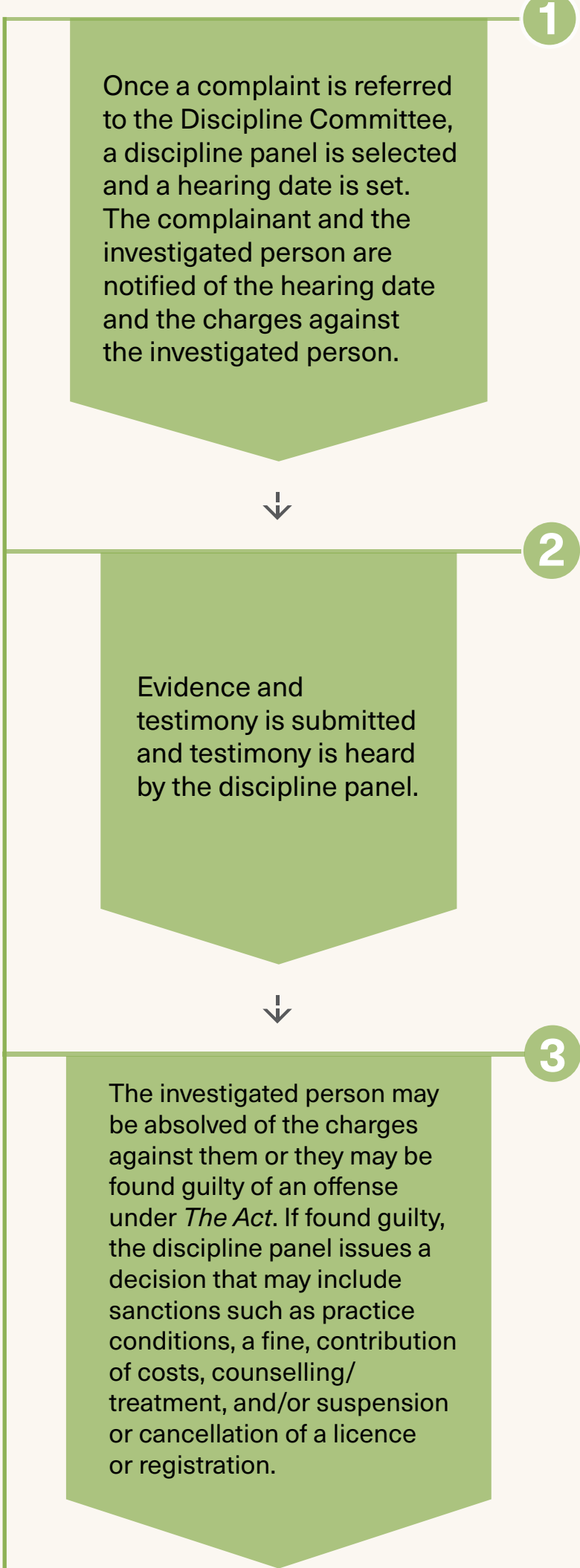
- Anyone can submit a formal complaint to the CPhM.
- CPhM recieved 45 formal complaints.
- The Complaints Committee resolved 49 outcomes in 31 cases of formal complaints.

➤ The Complaints Committee referred two cases to the Discipline Committee in 2021.

Discipline Outcomes 2021	
Total Resolved Cases	1
Misconduct by Type	
Professional Misconduct	1
Operational Misconduct	0
Narcotic Accountability	1
Drug Diversion	0
Privacy Breach	0
Discipline Imposed	
Fine	1
Contribution to Costs	1
Practice Restrictions	1
Monitoring Program(s)*	0
Licence Suspensions	0

\*May include requirements for drug/alcohol screening, counselling, and/or assessment.

## Discipline Process





# Reducing Patient Safety Risks: Narcotic & Controlled Substances

## Adult Inquest Review Committee (AIRC): Shared Learning from Prescription Drug Related Deaths

The AIRC reviews unexpected deaths of people in Manitoba between the ages of 18 to 65. In collaboration with the College of Physicians and Surgeons of Manitoba, CPhM examines deaths involving opioids, benzodiazepines/z-drugs, and other sedating/psychoactive drugs to share lessons and recommendations on prescribing and dispensing practices.

CPhM contacts the pharmacy professionals involved in these unexpected deaths with one of the following letters:

- **Educational letter:**

Feedback is given using standardized evidence-based quality indicators (e.g., concomitant prescribing of opioids and benzodiazepines) based on concerns identified, including resources.

- **Letter requiring a response:**

Requests additional information from the pharmacy team (e.g. overview of care provided to the patient, copies of prescriptions, pharmacist documentation and interventions, etc.), and operational changes instituted to prevent similar cases in the future. If the response received is satisfactory, pharmacies are then provided with education and resources for further reflection.

Thorough review of patient care through medical examiner files provides robust educational opportunities for pharmacy teams across the province including case studies available at [cphm.ca](https://cphm.ca). These specific learnings are used for continuous quality improvement in practice, including ongoing practice review with reflection and the implementation of practice improvements when necessary.



**20** cases of overdose deaths reviewed with pharmacy professionals.

CPhM sent a total of **25 letters** to pharmacy professionals, including educational and response required letters.



*Free Overdose in the Era of COVID-19 and Approaching Mental Health in Pharmacy Practice* professional development event delivered to pharmacy professionals.

**4** case studies based on AIRC findings shared with pharmacy professionals through CPhM publications and website.



# Reducing Patient Safety Risks: Narcotic & Controlled Substances

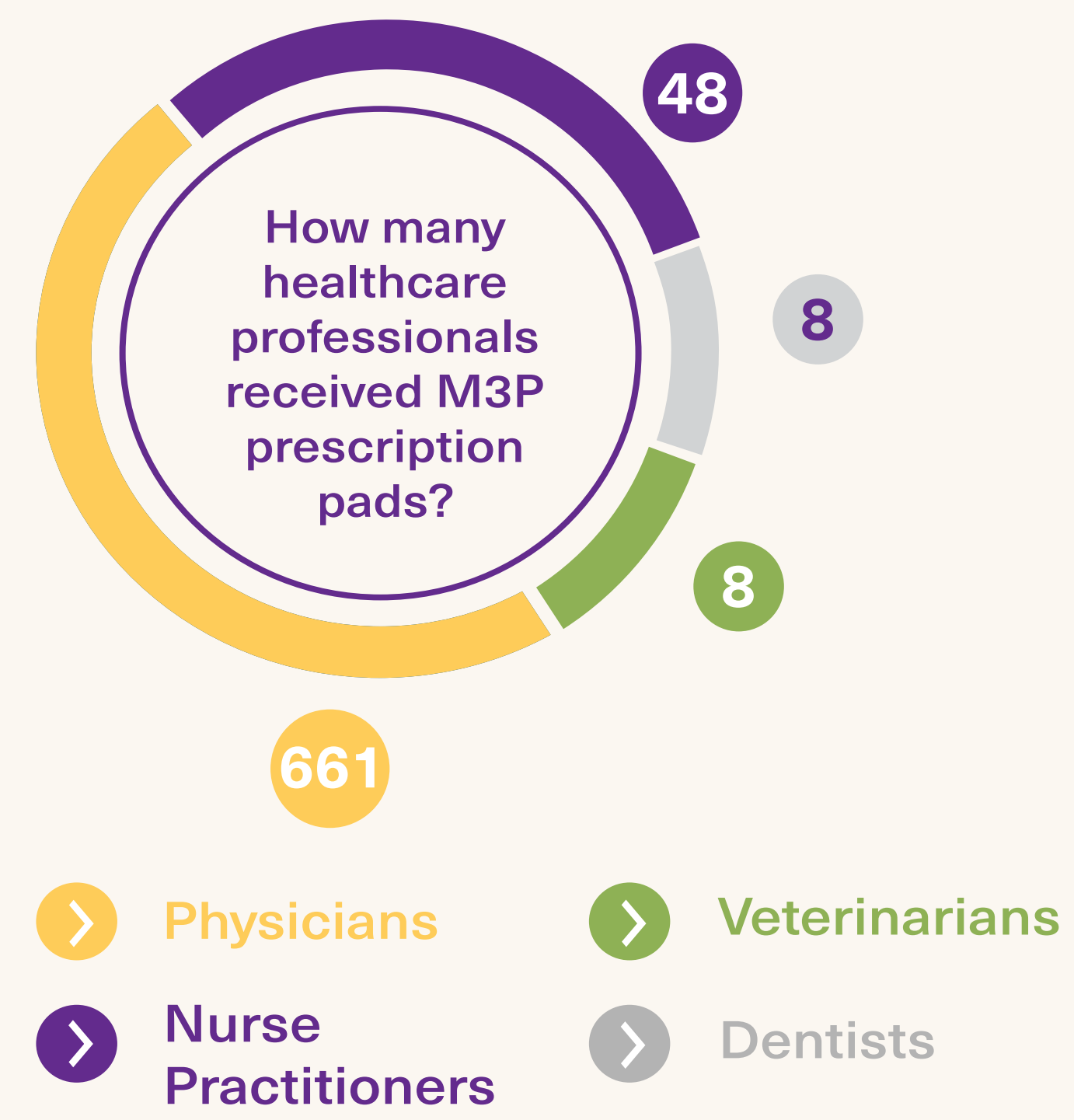
## Manitoba Prescribing Practice Program

The Manitoba Prescribing Practices Program (M3P) is a collaborative management system that aims to minimize the diversion of controlled and narcotic medications from legal to illegal markets or uses by

- sharing information on the use of controlled substances with healthcare professions, regulatory authorities, and federal, provincial and territorial governments;
- managing an M3P prescription forgery alert system for pharmacy professionals so they can address forgery and diversion issues in their practice; and
- providing data on prescription forgery, drug misuse, and drug diversion of controlled and narcotic medications to inform the prescribing and dispensing practices of Manitoba healthcare practitioners.

> **4,358**  
M3P prescription pads issued to healthcare professionals.

> **20**  
Emergency M3P prescription pads issued.



 **36 Forgery Alerts Sent to Pharmacy Managers**

> **33** Forged Prescriptions for Non-M3P Drugs.

> **3** Missing or Stolen M3P Prescription Forms.

> **2** Forged Prescriptions for M3P Drugs.



# Financial Statements

## For the complete audited 2021 Non-Consolidated Financial Statements, click here.

### Report of the Independent Auditor on the Summary Non-Consolidated Financial Statements

To the Members of College of Pharmacists of Manitoba

#### Opinion

The accompanying summary non-consolidated financial statements, which comprise the summary non-consolidated statement of financial position as at December 31, 2021 and the summary non-consolidated statements of revenues and expenses and changes in net assets for the year then ended, are derived from the audited non-consolidated financial statements of College of Pharmacists of Manitoba (the "College") for the year ended December 31, 2021.

In our opinion, the summary non-consolidated financial statements are a fair summary of the audited non-consolidated financial statements, on the basis described in the Management's Responsibility for the Summary Financial Statements section of our report.

#### Summary Non-Consolidated Financial Statements

The summary non-consolidated financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary non-consolidated financial statements and the auditors' report thereon, therefore, is not a substitute for reading the audited non-consolidated financial statements and the auditors' report thereon.

#### The Audited Non-Consolidated Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited non-consolidated financial statements in our report dated March 24, 2022.

#### Management's Responsibility for the Summary Non-Consolidated Financial Statements

Management is responsible for the preparation of a summary of the non-consolidated audited financial statements on the following basis:

The summary non-consolidated financial statements include the major totals and subtotals from the related complete non-consolidated financial statements dealing with matters having a pervasive or otherwise significant effect on the summary non-consolidated financial statements.

#### Auditors' Responsibility

Our responsibility is to express an opinion on whether the summary non-consolidated financial statements are a fair summary of the audited non-consolidated financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".



Chartered Professional Accountants

#### Summarized Statement of Financial Position

As at December 31, 2021 (in thousands of dollars)	2021	2020
<b>Assets</b>		
Current		
Cash	\$ 2,391	\$ 1,265
Marketable Securities	3,297	3,759
Other	65	79
	5,753	5,103
Long-term	1,258	1,283
	\$ 7,011	\$ 6,383
<b>Liabilities</b>		
Current		
Accounts payable and accrued liabilities	\$ 186	\$ 165
Deferred income	2,560	2,511
Other	113	19
	2,859	2,795
	4,152	3,591
<b>Net Assets</b>	\$ 7,011	\$ 6,386

#### Summarized Statement of Revenue and Expenses and Changes in Net Assets

As at December 31, 2021 (in thousands of dollars)	2021	2020
<b>Revenue</b>		
Pharmacist fees	\$ 1,707	\$ 1,652
Pharmacy fees	1,048	974
Pharmacy technician fees	37	26
Other income	35	30
Fines and cost recovery	6	26
Investment income, net	270	252
Manitoba Prescribing Practices Program	76	85
	3,179	3,045
<b>Expenses</b>		
Regulatory and other operations	2,139	2,075
Complaints and discipline proceedings	270	163
NAPRA levy	64	64
Awards and contributions	34	13
Other items	35	33
Manitoba Prescribing Practices Program	76	85
	2,618	2,433
Excess of revenues over expenses	561	612
Net assets, beginning of year	3,591	2,979
Net assets, end of year	\$ 4,152	\$ 3,591