



## CPhM Townhall Q&A

### Council Composition and Competencies

**Q:** What will the pre-determined competencies for selecting council members be, and how will it be decided?

**A:** Competencies will be determined based on the principles of good governance and ensuring the public interest. Examples include knowledge of governance, regional representation, and cultural and workplace diversity. The competencies will be developed and approved by Council and posted to the CPhM website along with the process for application.

These processes will be developed and put in place based on the final bylaws approved by Council.

**Q:** Why not move to 11 (Council) members now?

**A:** Although the RHPA sets out a limit of 11 members for Council, there is no specific timetable for CPhM to come under this legislation. As such, the 12-member Council was proposed as a transitional step, and when it is confirmed by government that the pharmacy professions will be moving under the RHPA, the additional revision to Council composition will be made. This is a straightforward revision that will be made to the bylaws at that time.

**Q:** What role will individual members have? Will actions of council be ratified at an annual meeting?

**A:** The ability for an individual to have a role in CPhM governance has not changed.

All CPhM members, referred to as registrants in the proposed bylaws, will continue to have the ability to participate in the governance of the organization by serving on committees and council. There will also be continued opportunity to participate in public consultations, attend general meetings of Council, and attend the Annual General Meeting of registrants.

Council is required to consult with registrants when developing new bylaws; this Townhall session is part of the consultation process. Following consultation, Council has authority to approve a set of revised bylaws.

**Q:** I have not seen any comments addressing the risk of a self-perpetuating council. Can you please speak to that?

**A:** Under the proposed bylaws, all Council members will serve a maximum of two consecutive three-year terms. Following completion of these two terms, they will not be able to seek an additional term until at least two years have elapsed since the expiry of their last term. Therefore, any individual Council

member can serve a maximum of six years consecutively. This, and the staggered terms, will ensure that there is always a mix of new and experienced voices on Council with a variety of backgrounds and perspectives.

### Appointment Process and Representation

**Q:** Can you comment on the process for appointing members to standing committees?

Executive Committee will take on the responsibility of reviewing all expressions of interest for committee service and making recommendations to Council for approval.

Registrants are encouraged to submit an expression of interest for committee service for consideration. Committee appointments will be made in June, at the beginning of each annual governance cycle, and at other times throughout the year, as necessary, to fill vacancies.

**Q:** The College has stated the intention to move to an appointed council. What other health professions in Canada use appointed councils other than Manitoba Nurses?

**A:** There are numerous regulatory bodies across Canada that have adopted an appointment process for Council selection including:

- College of Registered Nurses of Alberta
- College of Occupational Therapists of Manitoba
- College of Midwives of Alberta
- College of Occupational Therapists of Alberta
- College of Acupuncturists of Alberta

**Q:** Will these changes align with the shift towards RHPA, and what are the timelines for CPhM to fall under RHPA?

**A:** Yes, these changes are intended to support the transition to the RHPA in future. There is no specific timeline for when this transition will take place. CPhM Council is using the structure of the RHPA to inform the revisions to the bylaws and overall governance structure to minimize the revisions needed when the pharmacy professions are moved to regulation under the RHPA.

**Q:** How will the public be made aware they are able to attend Council meetings and see the details of new governance structure?

**A:** As is current practice, all Council meetings dates and times will be posted online, and this information will be shared in other CPhM publications. Similarly, the new bylaws and associated policies and processes will be posted online for public access.

**Q:** How does the College plan to ensure diverse perspectives, including those from the Indigenous communities in Manitoba, are included in the regulation of Pharmacy?

**A:** As part of its application and selection process, Council will determine a list of competencies that they are seeking for Council members in any particular term. These competencies will include representation of Indigenous perspectives as well as governance, regional representation, and workplace diversity.

**Q:** How do the other RHP's select their Councils in Manitoba? Election, or appointed?

**A:** The majority of regulated health professions in Manitoba continue to use elections as their council selection process, however the direction, both provincially and nationally, is to move towards a competency-based application even for those organizations that continue to use elections, to ensure that the individual applying for a role on the governance council or board has the necessary knowledge, skills, and experience to serve on the governing body.

### Regulatory Changes and Implementation

**Q:** Will the pharmacy regulations be replaced by policy documents?

**A:** No, the Pharmacy Regulations will be maintained under The Pharmaceutical Act. There will be additional policy documents developed to support the governance of Council and the processes of governance and regulation.

**Q:** Would it be possible to have more than one pharmacy technician for better representation, like other provinces?

**A:** Currently the proposal is for one pharmacy technician to be appointed to Council. This decision was based on a simple ratio of the number of pharmacists and pharmacy technicians currently registered with CPhM. Council may revise the composition requirements by amending bylaw in the future.

**Q:** What is the timing between appointments to ensure staggering? How does this proposed change affect the current terms of current council members?

**A:** The proposed bylaws include an implementation plan to allow for the staggering of Council member terms. Current pharmacy professional Council member terms expire on May 31, 2024. The bylaws indicate that new appointees will serve terms of 1, 2 or 3 years. Following this implementation period all members will serve three-year terms (unless there is need for a mid-term replacement; those replacements will serve only the remainder of the original term).

**Q:** With these proposed changes, it appears that Council will appoint all new members of Council? Is that correct?

**A:** The Appointments Committee will review all applications for Council members, based on the pre-determined set of competencies. A slate of appointees will be presented for Council confirmation.

### Expert Involvement and Decision-Making

**Q:** How are experts identified for College consultation? How does the College ensure they are receiving varied perspectives from experts?

**A:** As a self-regulated profession, registrants are key experts in any consultation process. Council conducts general consultations on various policy and other proposed documents to provide all pharmacy professionals registered in Manitoba with an opportunity to submit comment.

Further, Council also engages subject matter experts in the field of governance who have knowledge and experience specific to health-profession regulatory bodies. These individuals are selected by a process of requests for proposals, environmental scan, and research of current best practice in the field of health-profession regulation.

**Q:** How do you protect against organizational bias in the appointment of council members?

**A:** The Appointments Committee is bound to present a slate of council members for the upcoming term that meet a pre-determined set of competencies, criteria, and diverse representation.

As well, the proposed bylaw package includes an article dedicated to a robust set of fiduciary obligations of council members and committee members. As with all its work, Council as a whole, has a fiduciary obligation to govern in the public interest to the best of its ability. Furthermore, every individual Council member must commit to an oath of office and pledge to avoid perceived and actual conflicts of interest. It is anticipated that the proposed bylaws will reduce conflict of interest and bias issues.

**Q:** Are you proposing the non-government council members be non-pharmacists?

**A:** As per *the Pharmaceutical Act*, Council is made up of pharmacy professionals and public representatives appointed by the Minister.

The proposed council composition will be a mix of public representatives, appointed by the Minister, and pharmacy professionals, selected through an appointment process. Public representatives must make up a minimum one third of the total number of Council members.

**Q:** How do the proposed bylaws ensure council appointees have diverse perspectives and prevent successive appointments of people with comparable views?

**A:** The proposed appointments process requires the Appointments Committee to ensure that there are a wide variety of perspectives on Council, representing different geographical areas, cultural and work environment perspectives, backgrounds, etc., based on a pre-determined set of competencies.

The competencies will set out certain qualities that all Council members will be expected to have and certain qualities that some, but not all, Council members will be expected to have.

The use of these competencies in the selection process will provide opportunity to build a well-skilled and diverse set of perspectives and backgrounds at the Council table.

**Q:** What will be the breakdown of appointed pharmacists VS public representatives? Also, do we have any input on the criteria for government selection?

**A:** As per *the Pharmaceutical Act*, a minimum one-third of Council must be public representatives, appointed by the Minister.

The proposed bylaws suggest there will be twelve members on Council:

- Six appointed pharmacists
- One appointed pharmacy technician
- Four public representatives
- One ex-officio

The Dean of the College of Pharmacy, Rady Faculty of Health Sciences, University of Manitoba or designate, will be ex-officio, a voting member of Council.

Public representatives are appointed by the Minister of Health. While CPhM advises the Minister of changes to the bylaws, the competencies expected, and term limits of pharmacy professionals on Council, the Minister has the discretion to appoint individuals to serve as public representatives they deem qualified and for the length of time they wish.

**Q:** How will proposed bylaw changes as well as potential organizational bias be evaluated for effectiveness?

**A:** Evaluation is a significant aspect of ongoing Council work and good governance. Council is committed to evaluating its processes, projects and programs through regular and systematic monitoring. Council also currently evaluates the effectiveness of its work and intends to continue doing so in future.