Pursuant to section 5 of the Advisory Council on the Status of Women Act R.S.P.E.I. 1988, Cap. A-6 Council made the following appointments:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catherine Rankin</td>
<td>26 July 2014</td>
</tr>
<tr>
<td>Summerside (reappointed)</td>
<td>to 26 July 2016</td>
</tr>
<tr>
<td>Yvonne Deagle Miminegash (vice Marcia Enman, term expired)</td>
<td>9 September 2014 to 9 September 2017</td>
</tr>
</tbody>
</table>

Council, having under consideration Order-in-Council EC2014-235 of April 8, 2014, rescinded the said Order effective September 2, 2014, thus rescinding the appointment of Douglas Carr as Acting Comptroller on that date.

It is ORDERED that a Proclamation be issued proroguing the Fourth Session of the Sixty-fourth General Assembly of the Province effective the 8th day of November, A.D. 2014.
EXECUTIVE COUNCIL ___________________________ 9 SEPTEMBER 2014

EC2014-523

LEGISLATIVE ASSEMBLY
(FIFTH SESSION, SIXTY-FOURTH GENERAL ASSEMBLY)

PROCLAMATION TO CONVENE

Council ORDERED that the Legislative Assembly of this Province be called to meet for the Despatch of Business on Wednesday, the 12th day of November, A.D. 2014, at the hour of two o’clock in the afternoon and that a proclamation be issued forthwith.

EC2014-524

MUNICIPALITIES ACT
COMMUNITY OF CENTRAL BEDEQUE
AND
COMMUNITY OF BEDEQUE
AMALGAMATION

Having under consideration a recommendation from the Minister of Finance, Energy and Municipal Affairs and pursuant to section 9 of the Municipalities Act, R.S.P.E.I. 1988, Cap. M-13, Council ordered:

(1) that the Community of Central Bedeque and the Community of Bedeque amalgamate to form one municipality;

(2) that the new municipality have the status of a community;

(3) that the new municipality be named the Community of Bedeque and Area;

(4) that the municipal boundaries of the Community of Bedeque and Area be the perimeter boundaries (excluding the common boundary) of the Community of Central Bedeque and the Community of Bedeque, said boundaries being as described in proclamations issued pursuant to Order-in-Council No. 1038/66 of October 26, 1966 for the Community of Central Bedeque and Order-in-Council No. EC44/78 of January 12, 1978 for the Community of Bedeque;

(5) that for purposes of the November 3, 2014 municipal election, the community shall consist of two wards with boundaries following former community lines with a maximum of three councillors to be elected in each ward and a chairperson to be elected at large;

(6) that the amalgamation take effect on November 17, 2014, the date the newly elected council takes office;

(7) that the disposition of assets and liabilities be the responsibility of the new Council to carry out in accordance with provisions of the Municipalities Act, R.S.P.E.I. 1988, Cap. M-13, the Planning Act, R.S.P.E.I. 1988, Cap. P-8 and any other applicable legislation;

(8) that the Community of Bedeque and Area may provide all the services outlined in section 30 of the said Municipalities Act.
Pursuant to section 11 of the Optometry Act R.S.P.E.I. 1988, Cap. O-6, the following regulations were made by the Prince Edward Island College of Optometrists after consultation with the Association and with the approval of the Lieutenant Governor in Council:

1. Clauses 15(4)(a) and (b) of the Optometry Act Licensure Regulations (EC473/95) are amended
   (a) by the deletion of the word “Minister” and the substitution of the word “College”; and
   (b) by the deletion of the words “section 14.1 of the Pharmacy Act” and the substitution of the words “section 15.1 of the Act”.

2. These regulations come into force on September 22, 2014.

EXPLANATORY NOTES

SECTION 1 reflects that the College now authorizes qualified optometrists to prescribe therapeutic drugs under the Optometry Act, instead of the Minister under the repealed Pharmacy Act.

SECTION 2 provides for the commencement of these regulations.


Pursuant to section 51 of the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6.1, the Council of the College of Pharmacists, with the approval of the Lieutenant Governor in Council, made the following regulations:

PART I – PERMIT AND OPERATING REQUIREMENTS

Interpretation

1. In these regulations, Definitions

   (a) “facsimile transmission” means a transmission of the exact image of a document using a facsimile machine;

   (b) “package”, as a verb, includes to label;

   (c) “professional service” means a service provided by a member for a fee, other than a dispensing fee, and includes
     (i) administering a drug or vaccine, and
     (ii) conducting a medication review.
2. The Registrar shall keep and maintain a record of the following for a period of 20 years after receipt:
   (a) applications and any supporting documentation submitted for a permit or an endorsement or to renew a permit or an endorsement;
   (b) reports, written submissions and orders related to or resulting from an inspection.

Requirements for Permit Holder

3. (1) For the purposes of obtaining a permit under section 8 of the Act, an applicant shall meet the following requirements:
   (a) the applicant has not been found guilty of an offence or disciplined by a professional regulatory body for conduct that, in the opinion of the Registrar or the Council, as the case may be, renders the applicant unsuitable to operate a pharmacy;
   (b) where the applicant is a corporation, (i) the corporation is in good standing under the Canada Business Corporations Act (Canada), R.S.C. 1985, c. C-44, the Companies Act R.S.P.E.I. 1988, Cap. C-14 or the Extra-Provincial Corporations Registration Act R.S.P.E.I. 1988, Cap. E-14 under which it was incorporated or registered, and (ii) the letters patent or articles of incorporation of the corporation permit the corporation to carry on the business of operating a pharmacy.

   (2) For the purposes of renewing a permit under section 11 of the Act, the permit holder shall
   (a) continue to meet the requirements in clauses (1)(a) and (b), if applicable, for an applicant; and
   (b) meet the following requirements:
      (i) the permit holder is not in default in the payment of any fees required to be paid to the College,
      (ii) the permit holder is operating the pharmacy to which the permit applies in accordance with the Act and these regulations.

Requirements for Pharmacy

4. (1) For the purposes of section 8 and 11 of the Act and as a term and condition of the operation of a pharmacy under a permit, a pharmacy shall be designed and equipped
   (a) with a floor area of sufficient size for safe and orderly operation;
   (b) to be wheelchair accessible;
   (c) with external signage identifying the name of the pharmacy and the hours of operation;
   (d) to be secured with locks and an alarm system to prevent or detect unauthorized entry;
   (e) for the storage and controlled availability of drugs in compliance with section 23 of the Act and any other applicable enactments;
   (f) in a manner that permits the effective cleaning of all surfaces within the pharmacy;
   (g) with a private patient consultation area, out of public view;
   (h) with sufficient lighting and ventilation; and
   (i) with a dispensary that is made inaccessible to the public by physical barriers and equipped in accordance with subsection (2).

   (2) The dispensary in a pharmacy shall be equipped with
   (a) a sink with hot and cold running water;
   (b) cleaning supplies for hand washing and the cleaning of utensils and equipment;
   (c) a work surface of sufficient size for the preparation of prescription drugs for dispensing;
   (d) a refrigerator that
      (i) is used only for the refrigeration of drugs,
      (ii) is maintained at a temperature between 2 degrees Celsius and 8 degrees Celsius, and
      (iii) accurately displays, or contains a device that accurately displays, the temperature inside the refrigerator;
   (e) office equipment capable of copying and printing documents and sending and receiving documents or copies of documents;
   (f) a telephone;
   (g) equipment necessary for the safe and effective operation of the dispensary, including an adequate supply of
(i) metric graduates,
(ii) mortars and pestles,
(iii) spatulas,
(iv) funnels,
(v) stirring rods, and
(vi) ointment pads;
(h) an adequate supply of consumable materials, including
(i) bottles and caps,
(ii) plastic vials with caps, some of which shall be light-resistant,
(iii) ointment jars with caps,
(iv) child resistant containers and packages, and
(v) water that has been distilled, deionized or otherwise purified;
(i) where sterile products are compounded in the pharmacy, a
dedicated sterile compounding area with dedicated equipment and
supplies for sterile compounding;
(j) current editions of publications listed in subsection (3), in hard
copy or electronic form; and
(k) a computer system that meets the requirements of subsection (4).

(3) The publications referred to in clause (2)(j) are:
(a) a compendium of pharmaceutical specialties;
(b) a medical dictionary;
(c) legislation governing the practice of members and the operation
of a pharmacy, including:
(i) the Controlled Drugs and Substances Act (Canada) and its
regulations,
and its regulations,
(iii) the Drug Product Interchangeability and Pricing Act
R.S.P.E.I. 1988, Cap. D-15 and its regulations,
(iv) the Food and Drug Act (Canada) and its regulations,
N-01 and its regulations,
(vi) the Pharmaceutical Information Act R.S.P.E.I. 1988, Cap. P-
5.2 and its regulations,
(vii) the Pharmacy Act and its regulations,
R-10.1 and regulations and bylaws made pursuant to it by the
Council;
(d) reference materials respecting the following:
(i) compounding,
(ii) drug interactions,
(iii) evidence-based medicine,
(iv) general drug information,
(v) natural health products,
(vi) non-prescription drugs,
(vii) pediatrics,
(viii) pregnancy and lactation,
(ix) therapeutics.

(4) The computer system in the dispensary shall
(a) be capable of storing and reporting the information required in a
patient record;
(b) be capable of storing and reporting the information required in a
transaction describing the dispensing of a drug;
(c) enable members practising at the pharmacy to
(i) access Internet sites and other electronic resources required by
them to meet the standards of practice of the profession, and
(ii) display and print information from those sites as well as
resource materials referred to in subsection (3);
(d) incorporate sufficient security to ensure that only persons who
are authorized by the pharmacy have access to the system;
(e) have the ability to uniquely identify each staff member who has
been granted access to the system;
(f) have the ability to control which functions may be accessed by
each person employed in the pharmacy;
(g) create an accurate audit trail of persons using the system;
(h) be capable of collating and generating reports related to drugs
dispensed pursuant to prescriptions chronologically and by drug
name and strength, patient name and prescriber name;
(i) have sufficient speed and capacity to enable efficient and
effective practice by the members practising at the pharmacy; and
(j) require deliberate and auditable procedures to be carried out by the pharmacy or by a person authorized by the pharmacy before any information can be purged from the system.

Operation of a Pharmacy

5. A permit holder shall hold and maintain public liability insurance with coverage in the amount of at least five million dollars for the pharmacy operated under the permit.

6. Clause 21(1)(a) of the Act does not apply where another permit holder intends to operate a pharmacy under a permit in the same location.

Drug Schedules

7. Dimenhydrinate and its salts are designated as a Schedule II drug.

Prescriptions

8. (1) For the purposes of subsection 25(3) of the Act, subject to subsection (2), a prescriber may give a prescription
   (a) in writing,
      (i) to a patient or a representative of the patient, or
      (ii) to a pharmacist at a pharmacy, directly or by facsimile transmission, in accordance with section 9; or
   (b) verbally, directly to a pharmacist at a pharmacy.

   (2) A prescriber may only give a prescription for methadone to a pharmacist at a pharmacy by facsimile transmission in the form set out in the Schedule to these regulations.

   (3) A pharmacist who receives a prescription verbally from a prescriber shall transcribe the prescription in writing.

   (4) For the purposes of subsection 25(3) of the Act, a prescription shall contain the following information:
      (a) the date the prescription is given;
      (b) the name of the patient;
      (c) the name, business address and business contact information of the prescriber;
      (d) the name, quantity, form, and strength of the drug prescribed;
      (e) directions for the use of the drug prescribed;
      (f) the number of refills and the minimum interval between refills, if applicable;
      (g) the signature of the prescriber or the transcriber, as the case may be.

   (5) A prescription given in writing is valid for submission to a pharmacy for up to one year after the date it is given.

   (6) A prescription is valid for refill, if applicable, for one year after the date it is given or until the refills run out, whichever occurs sooner.

   (7) The pharmacist who assesses a prescription on receipt in a pharmacy shall initial the prescription.

   (8) The pharmacist or pharmacy technician who provides, or authorizes the provision of, a drug to a patient or a representative of a patient, pursuant to a prescription, shall initial the prescription.

9. (1) Where a prescriber gives a prescription by facsimile transmission, the prescriber shall send it directly to a pharmacy.

   (2) A pharmacist or a pharmacy technician shall verify the origin of a facsimile transmission of a prescription to a pharmacy and be satisfied as to the authenticity of the prescription before it is dispensed.

   (3) In addition to the information required by subsection 8(4), a prescription given by facsimile transmission shall contain
      (a) the name of the pharmacy and the fax number it is being sent to;
      (b) an indication that the facsimile transmission is confidential; and
      (c) certification that
         (i) the prescription represents the original of the prescription,
         (ii) the addressee is the only intended recipient, and
         (iii) the original prescription will be invalidated and retained by the prescriber so that it cannot be reissued.
Packaging Prescription Drugs

10. For the purposes of clause 26(a) of the Act, the following information shall be recorded on the drug container or drug package label for a prescription drug dispensed in an individual container or drug package in a pharmacy:

(a) the date the drug is dispensed;
(b) the name of the patient;
(c) the name of the prescriber;
(d) the name, business address and business contact information of the pharmacy;
(e) the identification number of the prescription;
(f) the following information about the drug dispensed:
   (i) the brand or generic name of the drug,
   (ii) the manufacturer of the drug,
   (iii) the drug information number or natural product number assigned to the drug by Health Canada,
   (iv) the strength, dosage form and quantity of the drug;
(g) the number of refills remaining, if applicable;
(h) directions respecting the use of the drug dispensed.

11. (1) A pharmacist or pharmacy technician may, with the approval of the patient or a representative of the patient, package in a multiple drug package two or more drugs in solid form that are to be taken orally, if a pharmacist or pharmacy technician is satisfied it is appropriate to do so after considering factors including

(a) the directions of the manufacturer for each drug;
(b) the physical or chemical form of each drug;
(c) the sensitivity of each drug to light;
(d) the therapeutic compatibility of the drugs; and
(e) the risk of chemical interaction between the drugs.

(2) A pharmacist or pharmacy technician who packages drugs in a multiple drug package in a pharmacy shall ensure that the compartments of the multiple drug package are

(a) sealed without the application of heat; and
(b) either
   (i) designed to show any resealing, or
   (ii) not resealable.

(3) For the purposes of clause 26(a) of the Act, the following information shall be recorded on a multiple drug package label:

(a) the date the multiple drug package is dispensed;
(b) the name of the patient;
(c) the name, business address and business contact information of the pharmacy dispensing the multiple drug package;
(d) the identification number of the multiple drug package;
(e) instructions respecting when each compartment is to be accessed and the drug or drugs contained within taken;
(f) any other necessary instructions respecting the multiple drug package, including instructions respecting storage; and
(g) in respect of each type of drug contained in the multiple drug package
   (i) the name of the prescriber,
   (ii) the identification number of the prescription for the drug,
   (iii) the brand or generic name of the drug,
   (iv) the manufacturer of the drug,
   (v) the drug information number or natural product number assigned to the drug by Health Canada,
   (vi) the strength, dosage form and quantity of the drug,
   (vii) a description of the form of the drug by size, shape, colour and markings,
   (viii) the number of refills remaining, if applicable, and
   (ix) directions respecting the use of the drug.

12. Where a Schedule I drug or a Schedule II drug is prepared or repackaged in a pharmacy for later use, the pharmacist or pharmacy technician who prepares or repackages the drug shall ensure the following information is recorded on the container or package in which the drug is stored in the dispensary:

(a) the name of the drug;
(b) the strength or concentration of the drug, if applicable;
(c) recommended dosages of the drug;
(d) the manufacturer’s identification number, the lot number and the expiry date of the drug, if applicable;
(e) the drug information number or natural product number assigned to the drug by Health Canada;
(f) any special instructions respecting preservation of the drug;
(g) any special precautions respecting the drug, including side effects or interactions.

Patient Record

13. For the purposes of clause 26(b) of the Act, an electronic patient record shall be maintained in a pharmacy respecting each patient for whom a prescription drug is dispensed, containing
(a) information respecting the patient, including his or her
   (i) name,
   (ii) address and contact information,
   (iii) date of birth,
   (iv) known allergies and allergic reactions,
   (v) primary medical practitioner or nurse practitioner, if applicable, and
   (vi) provincial health number, if necessary for purposes permitted under the Provincial Health Number Act R.S.P.E.I. 1988, Cap. P-27.01;
(b) information respecting each prescription submitted for the patient during the past two years, including
   (i) the name of the prescriber,
   (ii) the name of the drug prescribed,
   (iii) the identification number of the prescription,
   (iv) directions for the use of the drug prescribed,
   (v) the number of refills and the minimum interval between refills, if applicable;
   (vi) with respect to each time a drug is dispensed pursuant to the prescription,
       (A) the date the drug is dispensed,
       (B) the brand or generic name of the drug,
       (C) the manufacturer of the drug,
       (D) the drug information number or natural product number assigned to the drug by Health Canada,
       (E) the strength, dosage form and quantity of the drug,
       (F) the number of refills remaining, if applicable, and
       (G) the name of the pharmacist or pharmacy technician who prepared and packaged the drug; and
(c) where any prescription drugs have been dispensed to the patient in a multiple drug package, with respect to each multiple drug package dispensed during the past two years
   (i) the multiple drug package number,
   (ii) the prescription number of each drug contained in the multiple drug package,
   (iii) a description of the multiple drug package sufficient to enable its duplication, and
   (iv) the name of the pharmacist or pharmacy technician who prepared and packaged the drugs.

Transfer of Prescription

14. (1) A pharmacist or a pharmacy technician in a pharmacy may, pursuant to section 30 of the Act, transfer a prescription to another pharmacy
   (a) by facsimile transmission, to a pharmacist or pharmacy technician at the other pharmacy; or
   (b) verbally, directly to a pharmacist or a pharmacy technician at the other pharmacy.

   (2) The pharmacist or pharmacy technician transferring the prescription shall
   (a) provide the following information to the pharmacist or pharmacy technician receiving the prescription:
       (i) the date the prescription was given,
       (ii) the name of the patient,
       (iii) the name, business address and business contact information of the prescriber,
       (iv) the identification number of the prescription,
       (v) the name, quantity, form, and strength of the drug prescribed,
(vi) directions for the use of the drug prescribed,
(vii) the number of refills and the total quantity of the drug remaining to be dispensed under the prescription,
(viii) the minimum interval between refills, if applicable,
(ix) the date the drug was first dispensed and the date of the last refill,
(x) the quantity most recently dispensed, if different from the quantity prescribed,
(xi) the name, business address and business contact information of the pharmacy from which the prescription is being transferred,
(xii) the name of the pharmacist or pharmacy technician transferring the prescription; and
(b) make a record of
(i) the date the prescription is transferred,
(ii) the name, business address and business contact information of the pharmacy to which the prescription is transferred,
(iii) the name of the pharmacist or pharmacy technician that transferred the prescription, and
(iv) where the prescription is transferred verbally, the name of the pharmacist or pharmacy technician at the other pharmacy who received the transfer.

(3) A pharmacist or pharmacy technician transferring a prescription by facsimile transmission shall include the following information in the facsimile transmission:
(a) the name of the pharmacy and the fax number it is being sent to;
(b) an indication that the facsimile transmission is confidential.

(4) The pharmacist or pharmacy technician receiving a prescription transferred by facsimile transmission shall verify the origin of the transmission and be satisfied as to its authenticity before the prescription is dispensed at that pharmacy.

(5) The pharmacist or pharmacy technician receiving a prescription transferred verbally shall transcribe the prescription in writing.

PART II – CENTRALIZED PRESCRIPTION PROCESSING

Interpretation

15. In this part,
(a) “central-fill pharmacy” means a pharmacy in which central-fill services are provided;
(b) “central-fill services” means the preparation and packaging of a prescription drug on behalf of a pharmacy to which the prescription is submitted or a hospital in which the prescription is ordered;
(c) “originating pharmacy” means a pharmacy in which central-fill services are utilized in relation to some or all prescriptions submitted to it.

Notice Requirements

16. (1) A permit holder shall provide notice to the Registrar, in the form required by the Council, at least 30 days in advance of commencing to provide or utilize central-fill services in the pharmacy operated under the permit.

(2) A permit holder shall provide notice to the public, in accordance with subsection (3),
(a) for at least 30 days in advance of commencing to utilize central-fill services in the pharmacy operated under the permit; and
(b) each day thereafter until central-fill services cease to be utilized in the pharmacy.

(3) The notice required under subsection (2) shall
(a) be in writing;
(b) be posted in the area of the pharmacy where prescriptions are submitted by patients or representatives of patients to the dispensary; and
(c) indicate
(i) that prescription drugs dispensed in the pharmacy may be prepared and packaged in a central-fill pharmacy,
(ii) that personal information of the patient that is necessary to facilitate the provision of central-fill services may be shared with a central-fill pharmacy, and
(iii) the name, business address and business contact information of each central-fill pharmacy to which requests for central-fill services are submitted from the originating pharmacy.

(4) Where a prescription is submitted to a pharmacy that gives notice as required in subsections (2) and (3), the patient is deemed to consent to
(a) the disclosure, from the originating pharmacy to a central-fill pharmacy listed in the notice, of the personal information of the patient that is necessary to facilitate the provision of central-fill services; and
(b) the preparation and packaging of the drug prescribed in the prescription in a central-fill pharmacy listed in the notice.

(5) A permit holder who, immediately before these regulations come into force, having notified the Prince Edward Island Pharmacy Board as it existed under the former Act, operates a class I pharmacy in which central-fill services are utilized or provided, is deemed to meet subsection (1) and clause (2)(a), if applicable.

Request for Central-fill Services

17. (1) A pharmacist at an originating pharmacy shall submit a request for central-fill services to a central-fill pharmacy, in the form required by the Council, directly or by facsimile transmission or other electronic means.

(2) A request for central-fill services shall contain:
(a) the name of the patient;
(b) the address and contact information of the patient;
(c) the date of birth of the patient;
(d) the name, business address and business contact information of the originating pharmacy;
(e) the name of the pharmacist submitting the request;
(f) the name, business address and business contact information of the central-fill pharmacy.

(3) In addition to the information required in subsection (2), a request for central-fill services submitted by facsimile transmission shall contain
(a) the fax number the request is being sent to; and
(b) an indication that the facsimile transmission is confidential.

(4) The pharmacist who submits a request for central-fill services shall ensure a copy of the request is maintained in the originating pharmacy for a period of at least two years after the drug is dispensed.

Labels and Records

18. (1) Where a prescription drug is prepared and packaged in a central-fill pharmacy, “pharmacy” in sections 10 and 11 means the originating pharmacy.

(2) Where a prescription drug is prepared and packaged in a central-fill pharmacy, in addition to the information required in section 10 or subsection 11(3), as the case may be, the name, business address and business contact information of the central-fill pharmacy or a code representing the central-fill pharmacy shall be recorded on the label.

(3) Where a prescription drug is prepared and packaged in a central-fill pharmacy, in addition to the information required in paragraphs 13(b)(v)(A) to (G) and subclauses 13(c)(i) to (iv), the name, business address and business contact information of the central-fill pharmacy or a code representing the central-fill pharmacy shall be recorded in the patient record.

19. (1) With respect to each request for central-fill services received in a central-fill pharmacy, the pharmacist or pharmacy technician who prepares and packages the drug or drugs pursuant to the request shall ensure a record is maintained in the central-fill pharmacy containing
(a) a copy of the request;
(b) the lot number and expiry date of each drug prepared and packaged pursuant to the request; and
(c) the name of the pharmacist or pharmacy technician who prepared and packaged the drug or drugs.

(2) Records referred to in subsection (1) shall be maintained separately from records respecting patients of the pharmacy; and (b) for a period of at least two years.

PART III – STANDARDS

Compliance

20. (1) The permit holder, managing pharmacist of the pharmacy operated under the permit and members providing pharmacy services in that pharmacy shall comply with standards for the operation of a pharmacy and the sale of drugs to the public established or adopted under these regulations.

(2) The permit holder and the managing pharmacist of the pharmacy operated under the permit shall ensure that all members providing pharmacy services in that pharmacy comply with standards for the operation of a pharmacy and the sale of drugs to the public established or adopted under these regulations.

Advertising

21. (1) This section establishes standards that apply to advertisements in any form or medium respecting a pharmacy or members employed or engaged at a pharmacy.

(2) Advertisements shall (a) contain information that is factual, clear and verifiable; and (b) maintain the honour and integrity of member professions.

(3) Advertisements shall not (a) contain descriptive or qualifying words, including “professional”, “trusted”, “prompt”, “licensed”, “accurate”, “cheap”, or words of similar meaning or intent; (b) contain the words “specialist” or “expert” or words of similar meaning or intent; (c) claim or imply exclusivity of any aspect of the practice of pharmacy; (d) compare, directly or indirectly, the services of pharmacies or the abilities of members; (e) promise more effective services or better results; (f) express disapproval of, or criticize services provided in or by, other pharmacies or members employed or engaged in other pharmacies; (g) disclose personal information respecting patients without express consent; (h) advertise Schedule I drugs; (i) offer any inducement, including a gift, prize, rebate, bonus or loyalty points, in relation to prescription drugs, pharmacy services or professional services; or (j) in the opinion of the Council, (i) be inaccurate or misleading due to the inclusion or exclusion of information, (ii) misrepresent pharmaceutical knowledge or fact, or (iii) create unrealistic expectations respecting services or outcomes.

(4) An advertisement respecting a Schedule II drug may only contain (a) the name of the drug; (b) the classification of the drug; (c) the quantity of the drug available for sale; and (d) the price of the drug.

PART IV - GENERAL

22. For the purposes of clause 35(1)(b) of the Act, the Council may impose a minimum fine of $2,000 and a maximum fine of $10,000.

23. The following regulations are revoked: (a) Pharmacy Act Authorization Regulations (EC575/92); (b) Pharmacy Act Drug Schedule Regulations (EC287/05); (c) Pharmacy Act Standards Regulations (EC618/87).
24. These regulations come into force on September 22, 2014.

**SCHEDULE**

<table>
<thead>
<tr>
<th>Methadone Prescription Fax Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>For Patients on Methadone Maintenance Treatment</td>
</tr>
</tbody>
</table>

**Pharmacy Name:**

**Fax:**

**Patient Name:**

**PHN:**

<table>
<thead>
<tr>
<th>Rx</th>
<th>Methadone ______ mg</th>
<th>___________</th>
<th>Dose in words</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>p.o. Once Daily</td>
<td>(each dose to be individually bottled, labelled and mixed in juice)</td>
<td></td>
</tr>
</tbody>
</table>

Start Date: ___________  End Date: ___________ Inclusive

Total Doses: ___  Total Observed Doses: ___  Total Take-home doses (carries): ___

Drink observed doses in the pharmacy on days circled:

<table>
<thead>
<tr>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
<th>Sun</th>
</tr>
</thead>
</table>

Special instructions:

Hold prescription if two or more consecutive doses are missed and contact prescriber. Notify prescriber if a dose is missed or if there are any concerns about this prescription.

Physician Signature

Print Name

License #

Date

Prescriber Certification

This prescription represents the original of the prescription drug order. The pharmacy addressee noted above is the only intended recipient and there are no others. The original prescription has been invalidated or retained so that it cannot be re-issued.

Verification: This certifies the above prescription has been transmitted only to the pharmacy indicated.

Name of Sender: _______________________  Date Sent: __________________________

**EXPLANATORY NOTES**

**SECTION 1** defines terms used in these regulations.

**SECTION 2** sets out records the Registrar is required to keep and the time period the records are to be kept.

**SECTION 3** sets out the requirements an applicant must meet to obtain a permit and the requirements a permit holder must meet to renew a permit.

**SECTION 4** sets out the requirements for the design and equipment of a pharmacy, in particular the dispensary.

**SECTION 5** sets out the insurance coverage required for a pharmacy.

**SECTION 6** sets out an exception to a requirement in the Act upon ceasing to operate a pharmacy.

**SECTION 7** designates Dimenhydrinate (Gravol) and its salts as a Schedule II drug.
SECTION 8 sets out the form and manner in which prescriptions must be given for the purposes of the Act. It contains special provisions regarding prescriptions for methadone and prescriptions given verbally. It provides that a prescription is valid for submission to a pharmacy and for refill, if applicable, for up to one year after the date the prescription is given. It requires pharmacists and pharmacy technicians responsible for certain activities of dispensing to initial the prescription.

SECTION 9 sets out requirements related to prescriptions sent by facsimile transmission.

SECTION 10 sets out requirements for labels on individual containers or drug packages.

SECTION 11 sets out requirements related to multiple drug packages.

SECTION 12 sets out requirements for labels on containers or drug packages containing drugs that have been prepared or repackaged in a pharmacy for later use.

SECTION 13 sets out requirements respecting electronic patient records.

SECTION 14 sets out requirements related to transferring a prescription from one pharmacy to another.

SECTION 15 defines terms used in Part II of these regulations.

SECTION 16 sets out notice requirements related to providing or utilizing central-fill services. It provides for implied patient consent where proper notice is given. It also includes a transitional provision for pharmacies that are utilizing or providing central-fill services when these regulations come into force.

SECTION 17 sets out requirements related to requests for central-fill services.

SECTIONS 18 and 19 set out additional requirements respecting labels and records where a drug is prepared and packaged in a central-fill pharmacy.

SECTION 20 requires compliance with standards for the operation of a pharmacy and the sale of drugs to the public established or adopted under these regulations.

SECTION 21 establishes standards that apply to advertisements in any form or medium respecting a pharmacy or members employed or engaged at a pharmacy.

SECTION 22 sets out the minimum and maximum fines that the Council may impose under clause 35(1)(b) of the Act.

SECTION 23 revokes the Pharmacy Act Authorization Regulations (EC575/92), the Pharmacy Act Drug Schedule Regulations (EC287/05) and the Pharmacy Act Standards Regulations (EC618/87).

SECTION 24 provides for the commencement of these regulations.
EC2014-528

PHARMACY ACT
PHYSICIAN DISPENSARY REGULATIONS
REVOCATION

Made by the Prince Edward Island Pharmacy Board, after consultation with the Council of the Prince Edward Island Pharmacists Association, pursuant to section 8 of the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6, and approved by the Lieutenant Governor in Council.

1. The Pharmacy Act Physician Dispensary Regulations (EC617/87) are revoked.

2. These regulations come into force on September 22, 2014.

EXPLANATORY NOTES

SECTION 1 revokes the Physician Dispensary Regulations made under the Pharmacy Act.

SECTION 2 provides for the commencement of these regulations.

EC2014-529

PUBLIC HEALTH ACT
IMMUNIZATION REGULATIONS

Pursuant to section 72 of the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1, Council made the following regulations:

1. In these regulations, “vaccine” means a biological preparation that is designed to induce a protective immune response to a particular disease.

2. (1) A medical practitioner, nurse practitioner or nurse, or a pharmacist registered in Part A of the pharmacists register under the Pharmacist and Pharmacy Technician Profession Regulations under the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, who administers a vaccine to a patient shall report to the Chief Public Health Officer the following information in respect of each vaccination:
   (a) the name of the patient;
   (b) the date of birth of the patient;
   (c) the sex of the patient;
   (d) the patient’s civic address;
   (e) the patient’s provincial health number;
   (f) the product name of the vaccine administered to the patient;
   (g) the date on which the vaccine was administered;
   (h) the name and location of the clinic or other place where the vaccine was administered.

(2) The reports created under subsection (1) shall be submitted to the Chief Public Health Officer quarterly or as otherwise directed by the Chief Public Health Officer.

3. (1) A person referred to in subsection 2(1) who administers a vaccine to a patient shall record the following information in respect of each vaccination:
   (a) the patient’s name, address, provincial health number, date of birth and sex;
   (b) the name of the vaccine and the dose administered;
   (c) identification of the manufacturer and lot number of the vaccine;
   (d) the route of administration and the location on the patient’s body where the vaccine was administered;
   (e) the name of the medical practitioner, nurse practitioner, nurse or pharmacist who administered the vaccine;
   (f) the date on which the vaccine was administered.

(2) A record created pursuant to subsection (1) shall be retained by the medical practitioner, nurse practitioner, nurse or pharmacist, as the case may be, for a period of not less than 10 years from the date of...
administration of the vaccine, and the record shall be provided to the
Chief Public Health Officer upon request.

4. An occurrence of an adverse event following immunization (AEFI) shall be reported by the medical practitioner, nurse practitioner, nurse or pharmacist who observes the adverse event following a vaccination administered by that person, or to whom the patient presents himself or herself, as soon as observed and, in any case, not later than 24 hours after observation, to the Chief Public Health Officer.

5. These regulations come into force on September 22, 2014.

EXPLANATORY NOTES

SECTION 1 defines “vaccine” for the purposes of the regulations.

SECTION 2 requires a medical practitioner, nurse practitioner or nurse, or a pharmacist registered in Part A of the pharmacists register under the Pharmacist and Pharmacy Technician Regulations under the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, who administers a vaccine to a patient to report specified information about the patient and the vaccine to the Chief Public Health Officer.

SECTION 3 requires a medical practitioner, nurse practitioner or nurse, or a pharmacist registered in Part A of the pharmacists register under the Pharmacist and Pharmacy Technician Regulations, who administers a vaccine to a patient to record and retain specified information about the patient and the vaccine. The records created under this section must be retained for not less than 10 years from the date of administration of the vaccine, and must be provided to the Chief Public Health Officer on request.

SECTION 4 requires a medical practitioner, nurse practitioner, nurse or pharmacist who observes a patient experiencing an adverse event following immunization, or to whom a patient presents himself or herself with a complaint of an adverse event following immunization, to report the occurrence as soon as observed and not later than 24 hours after observation to the Chief Public Health Officer.

SECTION 5 provides for the commencement of these regulations.

EC2014-530

REGISTERED NURSES ACT
NURSE PRACTITIONER REGULATIONS
AMENDMENT

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I.1988, Cap. R-8.1, the Association of Registered Nurses of Prince Edward Island, with the approval of the Lieutenant Governor in Council, made the following regulations:

1. The enacting clause of the Registered Nurses Act Nurse Practitioner Regulations (EC91/06) is revoked and the following substituted:

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I.1988, Cap. R-8.1, the Association of Registered Nurses of Prince Edward Island, with the approval of the Lieutenant Governor in Council, made the following regulations:

2. Clause 1(d) of the regulations is revoked.

3. Subsection 6(1) of the regulations is amended

(a) in subclause (g)(iii), by the deletion of the period after the word “touch” and the substitution of a semi-colon; and

(b) by the addition of the following after subclause (g)(iii):

(h) where authorized to do so by a written authorization issued under section 7, the prescribing of a drug or class of drugs listed in the written authorization.
4. Section 7 of the regulations is revoked and the following substituted:

7. (1) A nurse practitioner who wishes to prescribe a drug or class of drugs shall apply to the Registrar, in accordance with subsection (2), for a written authorization.

(2) An applicant for a written authorization to prescribe a drug or class of drugs shall
   (a) submit an application to the Registrar, in the form required by the Registrar, specifying each drug or class of drugs that the applicant wishes to be authorized to prescribe; and
   (b) provide proof satisfactory to the Registrar that the applicant has the training and education to competently prescribe each drug or class of drugs specified in the application.

(3) For the purposes of considering an application made in accordance with subsection (2), the Registrar shall follow the Nurse Practitioner Medication Prescription Guidelines established by the Committee under subsection 8(6).

(4) On considering an application made in accordance with subsection (2) and the guidelines referred to in subsection (3), the Registrar shall
   (a) issue a written authorization to the applicant respecting each drug or class of drugs, if any, specified in the application that the Registrar is satisfied the nurse practitioner has the training and education to competently prescribe; and
   (b) give written notice to the applicant respecting each drug or class of drugs, if any, specified in the application that the Registrar is not satisfied the nurse practitioner has the training and education to competently prescribe.

(5) A written authorization issued by the Registrar under this section shall
   (a) indicate the name of the nurse practitioner in respect of whom the authorization is given;
   (b) specify the date on which the authorization is given; and
   (c) specify each drug or class of drugs that the nurse practitioner is authorized to prescribe.

(6) Upon issuing a written authorization under this section, the Registrar shall promptly provide a copy of the authorization to
   (a) the College of Pharmacists; and
   (b) each collaborating medical practitioner of the nurse practitioner.

5. Section 8 of the regulations is amended

(a) by the revocation of clause (2)(d) and the substitution of the following:
   (d) one member shall be a pharmacist who is a member of the College of Pharmacists, established under the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, and is nominated by the Council of the College of Pharmacists;

(b) in subsection (12), by the deletion of the word “Minister” and the substitution of the word “Registrar”.

6. These regulations come into force on September 22, 2014.

EXPLANATORY NOTES

SECTION 1 rewords the enacting clause of the regulations.

SECTION 2 revokes a definition for “Pharmacy Board”, which has been dissolved.

SECTION 3 indicates that prescribing a drug or class of drugs authorized by a written authorization is part of the practice of a nurse practitioner. This was previously stated in subsection 7(1) of the regulations.

SECTION 4 amends the process through which a nurse practitioner applies for, and may be issued, a written authorization to prescribe a drug or class of drugs. Due to recent legislative changes, the Minister of
Health and Wellness no longer issues written authorizations under the Pharmacy Act. This section provides for the Registrar to receive and assess an application and issue a written authorization, if he or she determines the applicant is qualified to competently prescribe a drug or class of drugs referred to in the application.

The section requires the Registrar to consider the Nurse Practitioner Medication Prescription Guidelines in making a determination respecting an application. The section also sets out the information a written authorization shall contain and requires the Registrar to provide a copy of a written authorization to the College of Pharmacists and each collaborating medical practitioner of the nurse practitioner to whom the written authorization has been issued.

SECTION 5 amends the composition of the Nurse Practitioner Diagnostic and Therapeutics Committee to include a member of the College of Pharmacists who is nominated by the Council of the College, instead of the Pharmacy Board. The College of Pharmacists is the successor regulatory body to the Pharmacy Board. The section also provides for the Registrar, instead of the Minister, to seek advice from the Committee.

SECTION 6 provides for the commencement of these regulations.

REGULATED HEALTH PROFESSIONS ACT
DESIGNATION REGULATIONS

Pursuant to section 2 of the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, the Lieutenant Governor in Council made the following regulations:


2. The following professions are designated, pursuant to section 2 of the Act, as regulated health professions:
   (a) the practice of pharmacists;
   (b) the practice of pharmacy technicians.

3. These regulations come into force on September 22, 2014.

EXPLANATORY NOTES

SECTION 1 provides a definition of “Act” for the purposes of the regulations.

SECTION 2 designates two professions as regulated health professions: the practice of pharmacists and the practice of pharmacy technicians.

SECTION 3 provides for the commencement of these regulations.

REGULATED HEALTH PROFESSIONS ACT
PRACTICE OF PHARMACISTS AND PHARMACY TECHNICIANS REGULATIONS

Pursuant to section 2 and subsection 96(1) of the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, Council made the following regulations:

1. In these regulations, “Act” means the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1;

2. “adapt” means to modify the dose, formulation or regimen of a drug that has been prescribed by a prescriber for a patient;
(c) “central fill services” means central fill services as defined in the General Regulations under the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6.1;

(d) “College” means the College of Pharmacists established under section 2;

(e) “competent”, in relation to the performance of a reserved act, means that a pharmacist or pharmacy technician has the requisite knowledge, skill and judgment to perform that act;

(f) “device” means a medical device as defined in the Food and Drugs Act (Canada) that is provided to a patient, including but not limited to:
   (i) inhalers,
   (ii) blood glucose monitoring machines,
   (iii) nebulizer machines;

(g) “direct supervision” means direct supervision as defined in section 1 of the Pharmacist and Pharmacy Technician Profession Regulations;

(h) “dispensary” means a dispensary as defined in the Pharmacist and Pharmacy Technician Profession Regulations;

(i) “drug” means a drug as defined in the Pharmacy Act;


(m) “patient” means a patient as defined in the Pharmacy Act;

(n) “pharmacist” means a person who is registered as a pharmacist on the register of pharmacists of the College;

(o) “Pharmacist and Pharmacy Technician Profession Regulations” means the Pharmacist and Pharmacy Technician Profession Regulations made under the Regulated Health Professions Act;

(p) “pharmacy” means a pharmacy as defined in the Pharmacy Act and, except where indicated otherwise, includes a premises or place in a hospital or health care centre where drugs are stored, compounded, dispensed or provided to a patient;

(q) “pharmacy technician” means a person who is registered as a pharmacy technician on the register of pharmacy technicians of the College;

(r) “prescriber” means a prescriber as defined in the Pharmacy Act;

(s) “representative” means an adult who attends at a pharmacy on behalf of a patient to obtain a drug prescribed for the patient;

(t) “Schedule I, Schedule II and Schedule III drugs”, or any of them, means a drug listed in Schedule I, Schedule II or Schedule III of the National Drug Schedules as defined in the Pharmacy Act;

(u) “standards of practice” means standards of practice with respect to the practice of pharmacists or pharmacy technicians as established or adopted by the College;

(v) “supervision” means supervision of a pharmacy technician employed in a hospital or health care centre that is provided by a pharmacist who is
   (i) registered in Part A of the pharmacists register under the Pharmacist and Pharmacy Technician Profession Regulations, and
   (ii) either physically present or on call;

(w) “test”, except where the context otherwise requires, means a test respecting
   (i) international normalized ratio (INR), or
   (ii) glycated haemoglobin (haemoglobin A1c or HbA1c);

(x) “therapeutic substitution” means the prescribing of a drug for a patient that contains chemically different active ingredients than a
drug originally prescribed by a prescriber for the patient, but that is expected to deliver a similar therapeutic effect.

College

2. The College of Pharmacists is hereby established pursuant to subclause 2(1)(b) of the Act as the College for the regulated health profession of pharmacist and the regulated health profession of pharmacy technicians.

Authority to Practice - General

3. (1) No person shall engage in the practice of pharmacy as a pharmacist unless the person holds a certificate of registration as a pharmacist under the Pharmacist and Pharmacy Technician Profession Regulations.

(2) Subject to subsection (3), and any conditions on his or her certificate of registration, a pharmacist may engage in the practice of pharmacists as set out in these regulations.

(3) A pharmacist shall not act beyond the scope of practice of pharmacists as set out in these regulations.

4. (1) No person shall engage in the practice of pharmacy as a pharmacy technician unless the person holds a certificate of registration as a pharmacy technician under the Pharmacist and Pharmacy Technician Profession Regulations.

(2) Subject to subsection (3), and any conditions on his or her certificate of registration, a pharmacy technician may engage in the practice of pharmacy technicians as set out in these regulations.

(3) A pharmacy technician shall not act beyond the scope of practice of pharmacy technicians as set out in these regulations.

Authorization to Perform Reserved Activity

5. The following are reserved activities under section 86 of the Act that a pharmacist is authorized to perform:

(a) administering, if the pharmacist holds certification in accordance with section 16 of the Pharmacist and Pharmacy Technician Profession Regulations, a substance by any of the methods listed in clause 16(1)(a) of those regulations;

(b) prescribing, dispensing, selling or compounding drugs or supervising the part of a pharmacy where drugs are kept, in accordance with the Pharmacy Act and these regulations.

6. (1) Subject to subsection (2) or (3), the reserved activity under section 86 of the Act of dispensing, selling or compounding drugs is a reserved activity that a pharmacy technician is authorized to perform in accordance with these regulations and subsection 24(2) of the Pharmacy Act.

(2) A pharmacy technician who is employed in a pharmacy shall perform the reserved activity only under the direct supervision, and a pharmacy technician who is employed in a hospital or health care centre may only perform the reserved activity under the supervision, of a pharmacist who

(a) complies with the requirements of subsection 8(2); and

(b) is satisfied that the delegation to the pharmacy technician is appropriate.

(3) A pharmacy technician who is employed in a central fill pharmacy shall perform the reserved activity only under the direct supervision of a pharmacist who

(a) complies with the requirements of subsection 8(3); and

(b) is satisfied that the delegation to the pharmacy technician is appropriate.

7. (1) Despite an authorization under these regulations to perform a reserved activity, a pharmacist or a pharmacy technician shall only perform the reserved activity if the pharmacist or the pharmacy technician is competent to perform it and, in the opinion of the pharmacist, the reserved activity is appropriate in the clinical circumstances.
(2) A pharmacist or pharmacy technician who performs a reserved activity shall do so in accordance with the applicable standards of practice for that reserved activity.

Scope of Practice - Pharmacists

8. (1) The scope of practice of pharmacists includes:
   (a) prescribing, dispensing, selling or compounding drugs;
   (b) monitoring drug therapy and advising on the contents, therapeutic values and hazards of drugs;
   (c) advising on the use, calibration, effectiveness and hazards of devices used in connection with drugs or to monitor health status, and assisting or training patients in the use of self-administered devices;
   (d) promoting the health, prevention and treatment of diseases, disorders and dysfunctions through monitoring and management of drug therapy;
   (e) identifying and assessing drug-related problems, and making recommendations to prevent or resolve them; and
   (f) counselling persons respecting healthcare and drug-related therapies, whether the counselling takes place in a pharmacy or elsewhere.

(2) When dispensing a drug for a patient or supervising a pharmacy technician who is dispensing a drug for a patient, it is the pharmacist’s duty to
   (a) evaluate the patient’s prescription;
   (b) assess the patient and the patient’s health history and medication record;
   (c) determine whether the proposed drug therapy is appropriate for the patient;
   (d) fulfil the pharmacist’s responsibilities to counsel the patient, when appropriate, and to monitor the patient’s drug therapy; and
   (e) ensure that any conditions prescribed by an enactment or the standards of practice are complied with.

(3) Notwithstanding subsection (2), when supervising a person who is providing central fill services, it is the duty of a pharmacist to ensure that the person compounds, prepares, packages and dispenses drugs in compliance with any conditions prescribed by the Pharmacy Act and regulations and the standards of practice.

9. In addition to the activities listed in section 8, a pharmacist who meets the qualifications set out in the Pharmacist and Pharmacy Technician Profession Regulations and who is in good standing with the College may, subject to any restrictions or conditions on that pharmacist’s certificate of registration, engage in any of the practices set out in sections 10 to 18.

10. (1) Subject to subsection (2), section 11 and subsection 19(1), a pharmacist may adapt a prescription, or make a therapeutic substitution in respect of a prescription, if
   (a) the prescription is valid and is not expired or spent;
   (b) the pharmacist believes that it is in the best interests of the patient to adapt the prescription or make the therapeutic substitution, as the case may be, in accordance with
      (i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
      (ii) the code of ethics established or adopted by the College, and
      (iii) any applicable practice directives issued by the College for the purposes of this section;
   (c) the pharmacist discusses with the patient or representative the nature of, and reasons for, the proposed adaptation or therapeutic substitution, as the case may be;
   (d) the pharmacist advises the patient or representative of the relative prices of the drug specified in the prescription and the drug as the pharmacist proposes to adapt it or the drug the pharmacist proposes to substitute, as the case may be; and
   (e) after complying with clauses (c) and (d), the pharmacist obtains the consent of the patient or representative to the proposed adaptation or therapeutic substitution, as the case may be.

(2) No pharmacist shall adapt a prescription, or make a therapeutic substitution in respect of a prescription, for a monitored drug.
11. (1) Where a prescriber is of the opinion that a prescription he or she is giving should not be adapted, the prescriber may prohibit adaptation by clearly writing on the prescription the words “No Adaptation”.

(2) Where a prescriber is of the opinion that, with respect to a prescription he or she is giving, a therapeutic substitution should not be made, the prescriber may prohibit therapeutic substitution by clearly writing on the prescription the words “No Therapeutic Substitution”.

(3) A person who dispenses a prescription shall comply with the instructions of a prescriber given in accordance with subsection (1) or (2) when dispensing the prescription initially and when dispensing any refills of the same prescription, unless the prescriber otherwise instructs.

12. (1) A pharmacist who adapts a prescription or makes a therapeutic substitution shall

(a) notify the prescriber who gave the original prescription, verbally or in writing, as soon as possible, respecting the adaptation or therapeutic substitution, as the case may be; and

(b) retain a record respecting the notification required under clause (a) for a period of 10 years after the date on which the notification was provided.

(2) A pharmacist who makes a therapeutic substitution shall provide a clear reference to the original prescription on the prescription for the drug substituted.

(3) A person who dispenses a prescription given by a pharmacist making a therapeutic substitution shall record the name of the pharmacist in the place where the name of the prescriber is to be recorded in the patient record and on the drug container label or multiple drug package label.

(4) A person who dispenses a prescription that has been adapted by a pharmacist shall record the nature of the adaptation in the patient record.

13. (1) Subject to subsections (3) and (5) and subsection 19(1), a pharmacist may give a continued care prescription to a patient for a drug, other than a monitored drug, if the following conditions are met:

(a) the patient had a prescription, given by a prescriber, for the same drug;

(b) the original prescription has expired or all authorized refills have been dispensed;

(c) it is not reasonably possible for the patient to obtain a subsequent prescription for the drug from the prescriber who gave the original prescription before the original prescription expires or the patient finishes the last refill of the original prescription;

(d) the patient has an immediate need to continue treatment with the drug;

(e) the original prescription was dispensed at the same pharmacy from which the pharmacist is giving the prescription; and

(f) the pharmacist believes that it is in the best interests of the patient to give the person a prescription for the drug, in accordance with

(i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,

(ii) the code of ethics established or adopted by the Council, and

(iii) any applicable practice directives established by the Council.

(2) Subject to subsection (3), no pharmacist shall give a continued care prescription for a monitored drug to any person.

(3) A pharmacist may give a prescription to a patient under subsection (1) for a benzodiazepine drug if

(a) the patient was given the original prescription for the drug for the treatment of a convulsive disorder; or

(b) an unplanned discontinuation of the drug places the patient at risk of experiencing a seizure.

(4) A pharmacist who gives a continued care prescription shall

(a) provide a clear reference on the continued care prescription to the original prescription;

(b) notify the prescriber who gave the original prescription, orally or in writing, as soon as possible, that a continued care prescription has been given to the patient; and
(c) retain a record respecting the notification required under clause (b) for a period of 10 years after the date on which the notification was provided.

(5) No pharmacist shall
(a) give a continued care prescription to a patient for an amount of a drug that exceeds the amount authorized per refill under the original prescription;
(b) authorize refills of a continued care prescription; or
(c) give consecutive continued care prescriptions to a patient for the same drug.

14. (1) Subject to subsection (4) and subsection 19(1), a pharmacist may give an emergency prescription to a patient for a drug, other than a monitored drug, if the pharmacist
(a) is satisfied that there is an immediate need for drug therapy;
(b) is satisfied that it is not reasonably possible for the patient to see another health professional in a timely manner to obtain the prescription;
(c) believes that it is in the best interests of the patient to give the patient a prescription for the drug, in accordance with
(i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
(ii) the code of ethics established or adopted by the Council, and
(iii) any applicable practice directives established by the Council; and
(d) discusses with the patient or representative the nature of the emergency prescription.

(2) No pharmacist shall give an emergency prescription for a monitored drug to any person.

(3) A pharmacist who gives an emergency prescription shall
(a) only prescribe a limited and interim supply of the drug to ensure that the patient’s health or life is not at risk;
(b) notify the patient’s usual pharmacist, orally or in writing, as soon as possible, that an emergency prescription has been given to the patient; and
(c) retain a record respecting the notification required under clause (b) for a period of 10 years after the date on which the notification was provided.

(4) No pharmacist shall
(a) authorize refills of an emergency prescription; or
(b) give consecutive emergency prescriptions to a patient for the same drug.

15. (1) In this section and in sections 16 to 18, “certification” means current certification in extended practice as authorized by the Council under section 15 of the Pharmacist and Pharmacy Profession Regulations.

(2) Subject to subsection (2), a pharmacist who holds certification may order and receive the results of a test, if
(a) the pharmacist believes that it is in the best interests of the patient for the pharmacist to order and receive the results of the test in accordance with
(i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
(ii) the code of ethics established or adopted by the College, and
(iii) any applicable practice directives issued by the College; and
(b) the pharmacist
(i) provides the patient or the representative with sufficient information for the patient or the representative to make an informed and voluntary decision regarding the test, and
(ii) obtains the informed consent of the patient or the representative.

(3) A pharmacist who orders and receives the results of a test shall advise the patient or the representative of the results of the test in accordance with the standards of practice.

(4) A pharmacist shall advise the patient’s primary health care provider as soon as reasonably possible of any changes in the patient’s
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drug therapy initiated by the pharmacist as the result of a test ordered by the pharmacist under this section.

(5) A pharmacist who orders a test shall as soon as possible forward the results to the patient’s usual health care provider in either of the following circumstances:

(a) the test results reveal an issue that is outside the pharmacist’s knowledge, skills and competencies; or
(b) the pharmacist considers it to be in the best interests of the patient to involve another health care provider.

(6) A pharmacist shall keep the patient’s primary health care provider informed of the general state of the patient’s health as revealed by the tests ordered by the pharmacist.

(7) If a patient does not have a primary health care provider, the pharmacist shall do one or both of the following, as appropriate in the circumstances, for the purposes of subsections (3) to (5):

(a) counsel the patient to obtain emergency or other medical care;
(b) advise the patient about available health care resources.

(8) A pharmacist who orders and receives the results of a test shall create and maintain for a period of not less than 10 years a record of the following:

(a) the patient’s name and address;
(b) the test ordered and the reason for ordering it;
(c) the name of the pharmacist ordering the test;
(d) the date the test was ordered;
(e) the results of the test and the date they were received;
(f) the primary health care provider to whom the results were forwarded, if any, and the date they were forwarded;
(g) any recommendations made to the primary health care provider and the date they were forwarded.

(9) A pharmacist may interpret and advise patients respecting the results of patient-administered automated tests.

16. (1) For the purposes of this section, “minor ailment” means an ailment listed in Schedule A to these regulations.

(2) Subject to subsection (3) and subsection 19(1), a pharmacist who holds certification may give a prescription for a drug to a patient for treatment of a minor ailment if the pharmacist

(a) believes that it is in the best interests of the patient to give the prescription in accordance with
   (i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
   (ii) the code of ethics established or adopted by the College, and
   (iii) any applicable practice directives issued by the College;
(b) provides the patient or the representative with sufficient information for the patient or the representative to make an informed and voluntary decision regarding the prescription; and
(c) obtains the informed consent of the patient or the representative.

(3) No pharmacist shall give a prescription under this section for a monitored drug to any person.

(4) A pharmacist who gives a prescription to a patient for treatment of a minor ailment shall

(a) notify the patient’s usual health care provider, orally or in writing, as soon as possible, that the prescription has been given to the patient; and
(b) retain a record respecting the notification required under clause (a) for a period of 10 years after the date on which the notification was provided.

17. (1) In this section, “vaccine” means a biological preparation listed in Schedule B to these regulations that is designed to induce a protective immune response to a particular disease.

(2) A pharmacist who holds certification may prescribe a vaccine for a patient if the pharmacist

(a) is satisfied that there is a need for the patient to be vaccinated;
(b) believes that it is in the best interest of the patient to give the patient a prescription for the vaccine, in accordance with
(i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
(ii) the code of ethics established or adopted by the College, and
(iii) any applicable practice directives issued by the College;
(c) provides the patient or the representative with sufficient information for the patient or the representative to make an informed and voluntary decision regarding the vaccination; and
(d) obtains the informed consent of the patient or the representative.

(3) Subject to subsection (4) and section 18, a pharmacist who holds certification may administer a drug prescribed by a prescriber or a vaccine to a patient if
(a) the pharmacist believes that it is in the best interests of the patient to administer the drug or vaccine, as the case may be, in accordance with
(i) accepted standards of practice as set out in the NAPRA Model Standards of Practice for Canadian Pharmacists,
(ii) the code of ethics established or adopted by the College, and
(iii) any applicable practice directives issued by the College;
(b) the pharmacist
(i) provides the patient or the representative with sufficient information, including the cost of the drug or vaccine and its administration, for the patient or the representative to make an informed and voluntary decision regarding the administration of the drug or vaccine, and
(ii) obtains the informed consent of the patient or the representative.

(4) A pharmacist who holds certification may administer a drug or vaccine to a patient by any of the following means:
(a) orally, including sublingual and buccal;
(b) injection, including intradermal, subcutaneous or intramuscular;
(c) topically, including ophthalmic, otic and intranasal; and
(d) via inhalation.

(5) A pharmacist who is completing a course or program for certification in a method of administration of a drug or vaccine specified in subsection (4) may administer a drug or vaccine using that method if, while doing so, he or she is under the direct supervision of
(a) a pharmacist who is certified in that method; or
(b) another health care professional who is permitted and competent to administer a drug or vaccine using that method.

18. (1) Subject to subsection (2), a pharmacist who holds certification may use a method of administration of a drug or vaccine specified in subsection 17(4) to administer a drug or vaccine to a patient as follows:
(a) a vaccine, including influenza vaccine, to a patient over the age of 18 years;
(b) influenza vaccine by injection to a patient between the ages of 5 and 18 years;
(c) influenza vaccine by intranasal means to a patient 2 years of age or older;
(d) a drug other than a vaccine to a patient 5 years of age or older.

(2) A pharmacist who administers a drug or vaccine to a patient using a method of administration specified in subsection 17(4) shall monitor the patient’s post-administration response to the injection for any adverse events following the immunization (AEFI) and shall report any adverse effects as required by the Immunization Regulations under the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1.

(3) A pharmacist who administers a vaccine to a patient shall comply with the reporting and record keeping provisions set out in the Immunization Regulations under the Public Health Act.

(4) A pharmacist who administers a drug by any method to a patient shall create and retain a record of the following for a period of 10 years:
(a) the patient’s name and address;
(b) the name of the drug and total dose administered;
(c) for an advanced method, identification of the manufacturer, the Drug Identification Number or Natural Product Number, lot number and expiry date of the drug;
(d) for an advanced method, the route of administration and the location on the patient’s body where the drug was administered;
(e) the name of the pharmacist administering the drug.
19. (1) A pharmacist shall not prescribe, adapt a prescription or make a therapeutic substitution in respect of a prescription for a drug unless:

(a) the pharmacist has made reasonable inquiries for the purpose of assessing whether the drug will be safe and effective for the patient in the circumstances, including inquiries respecting

(i) the patient’s symptoms,

(ii) the patient’s medical history,

(iii) the patient’s allergies,

(iv) other medications the patient may be taking, and

(v) any other information reasonably necessary in the circumstances;

(b) the pharmacist has assessed the patient in person;

(c) the pharmacist has complied with applicable practice directions and standards; and

(d) unless the prescription is being issued for an in-patient of a hospital or health care centre, the pharmacist has discussed with the patient or representative any other reasonable and available therapeutic options and their cost.

(2) A pharmacist who gives a prescription under these regulations shall retain a record for a period of not less than 10 years after the date of the last dispense of

(a) the patient’s name and address;

(b) the patient’s date of birth;

(c) the name of the drug prescribed;

(d) the strength, where applicable, and quantity of the drug prescribed;

(e) the directions for use;

(f) the number of refills available to the patient, if any;

(g) the name of the member pharmacist giving the prescription;

(h) the date of the prescription; and

(i) the treatment goal, diagnosis or clinical indication at the time the prescription was given.

20. A pharmacist may use the following titles, abbreviations and initials:

(a) pharmacist;

(b) registered pharmacist;

(c) BSc. Pharm.;

(d) Ph.C.;

(e) R.Ph.;

(f) Pharm. D.;

(g) ACPR or Accredited Pharmacy Residency Programs.

21. (1) The scope of practice of pharmacy technicians is restricted to:

(a) receiving written prescriptions and gathering, entering and storing prescription and patient information;

(b) preparing and compounding prescriptions;

(c) checking and dispensing a prescription, if the prescription was prepared by another person;

(d) storing and repackaging products;

(e) assisting with the management of systems for drug distribution and inventory control;

(f) transferring prescriptions to and receiving prescriptions from other pharmacies;

(g) teaching patients about the use of devices;

(h) participating in the research, development, implementation and evaluation of quality assurance and risk management policies, procedures and activities; and

(i) teaching the practice of pharmacy technicians.

(2) A pharmacy technician who is employed in a pharmacy shall at all times perform the activities listed in subsection (1) only under the direct supervision of a pharmacist in accordance with subsection (3).

(3) A pharmacist who is responsible for direct supervision of a pharmacy technician shall

(a) be practising in the same pharmacy as the pharmacy technician;
(b) be authorized to perform the restricted activity in respect of which the pharmacist is providing direction to the pharmacy technician; and
(c) ensure there is a system in place in the pharmacy premises that complies with the standards of practice established under the Pharmacist and Pharmacy Technician Profession Regulations and under which
(i) the pharmacist is available to consult with, provide guidance to and, if necessary, provide assistance to the pharmacy technician, and
(ii) the involvement of the pharmacy technician in the reserved activity authorized under subsection 6(1) can be monitored and assessed.

4. A pharmacy technician who is employed in a hospital or health care centre shall at all times perform activities listed in subsection (1) only under the supervision of a pharmacist in accordance with subsection (5).

5. A pharmacist who is responsible for the supervision of a pharmacy technician shall
(a) be authorized to perform the restricted activity in respect of which the pharmacist is providing direction to the pharmacy technician; and
(b) ensure there is a system in place in the pharmacy premises that complies with the standards of practice established under the Pharmacist and Pharmacy Technician Profession Regulations and under which
(i) the pharmacist is available to consult with, provide guidance to and, if necessary, provide assistance to the pharmacy technician, and
(ii) the involvement of the pharmacy technician in the reserved activity authorized under subsection 6(1) can be monitored and assessed.

6. A pharmacy technician shall not counsel a patient, directly or indirectly, about a drug or a medical condition.

7. A pharmacist shall not delegate the responsibility to counsel a patient to a pharmacy technician.

22. A pharmacy technician may use the following titles, abbreviations and initials:
(a) pharmacy technician;
(b) Pharm.Tech.;
(c) Ph.T.;
(d) R.Ph.T.

Professional Misconduct

23. The College shall, for the purposes of section 57 of the Act, and in addition to the penalty applicable pursuant to section 93 of the Act in respect of a contravention of the regulations, consider a contravention of the following provisions by a pharmacist to constitute professional misconduct:
(a) section 3;
(b) section 4;
(c) section 5;
(d) section 6;
(e) section 10;
(f) subsection 11(3);
(g) subsection 13(1), (2) or (5);
(h) subsection 14(1), (2) or (4);
(i) subsection 15(2) or (3);
(j) subsection 16(2);
(k) subsection 17(2) or (3);
(l) subsection 18(1) or (2);
(m) subsection 19(1);
(n) subsection 21(6) or (7).
Offences

24. A person who contravenes subsection 3(1) or 4(1) is guilty of an offence for the purposes of clause 93(1)(a) of the Act and is liable on summary conviction to a fine as set out in that section.

Additional Objects of the College

25. In addition to the objects set out in subsection 4(2) of the Act, the College has the following additional objects:

(a) subject to the Food and Drugs Act (Canada), to establish the terms and conditions of sale for drugs and devices;
(b) to ensure that the public is protected from the unauthorized or inappropriate sale of drugs or devices;
(c) to superintend the operation of pharmacies that are subject to the Pharmacy Act;
(d) to establish, maintain and promote standards for pharmacies that are subject to the Pharmacy Act, including standards respecting the ownership and operation of those pharmacies.

General

26. Schedules A and B to these regulations are hereby adopted and form part of these regulations.

27. These regulations come into force on September 22, 2014.

Schedule A

For the purposes of section 16, the following are minor ailments:

(a) allergic rhinitis;
(b) calluses or corns;
(c) contact allergic dermatitis (allergic skin rash);
(d) cough;
(e) dandruff;
(f) dysmenorrhea (pre-menstrual and menstrual pain);
(g) dyspepsia (indigestion);
(h) emergency contraception;
(i) fungal infections of the skin;
(j) gastro-esophageal reflux disease (heartburn);
(k) hemorrhoids;
(l) herpes simplex (cold sores);
(m) mild acne;
(n) mild headache;
(o) mild to moderate eczema;
(p) mild urticaria (hives, bug bites and stings);
(q) minor joint pain;
(r) minor muscle pain;
(s) minor sleep disorders;
(t) nasal congestion;
(u) nausea;
(v) nicotine dependence;
(w) non-infectious diarrhea;
(x) oral fungal infection (thrush);
(y) oral ulcers (canker sores);
(z) sore throat;
(aa) threadworms or pinworms;
(bb) vaginal candidiasis (yeast infection);
(cc) warts (excluding facial and genital warts);
(dd) xerophthalmia (dry eyes).

Schedule B

In accordance with sections 17 and 18, pharmacists are authorized to administer vaccines for the following diseases:

(a) diphtheria and tetanus;
(b) diphtheria, tetanus and acellular pertussis;
(c) hepatitis A and hepatitis B;
(d) herpes zoster;
(e) pneumococcal disease;
(f) human papillomavirus;
(g) influenza.
EXPLANATORY NOTES

SECTION 1 establishes definitions for the purposes of the regulations.

SECTION 2 establishes the College of Pharmacists as the College for the regulated health profession of pharmacists and the regulated health profession of pharmacy technicians, pursuant to subclause 2(1)(b)(iii) of the Act.

SECTION 3 prohibits any person from engaging in the practice of pharmacy as a pharmacist unless the person holds a current certificate of registration as a pharmacist under the Pharmacist and Pharmacy Technician Profession Regulations. The section also prohibits a pharmacist from acting beyond the scope of practice of pharmacists as set out in the regulations.

SECTION 4 prohibits any person from engaging in the practice of pharmacy as a pharmacy technician unless the person holds a current certificate of registration as a pharmacy technician under the Pharmacist and Pharmacy Technician Profession Regulations. The section also prohibits a pharmacy technician from acting beyond the scope of practice of pharmacy technicians as set out in the regulations.

SECTION 5 authorizes a pharmacist to perform specified activities that are reserved activities under section 86 of the Act.

SECTION 6 authorizes a pharmacy technician to perform specified activities that are reserved activities under section 86 of the Act. A pharmacy technician who is employed in a pharmacy, including a central fill pharmacy, shall only perform the specified activities under the direct supervision of a pharmacist. A pharmacy technician who is employed in a hospital or health care centre shall only perform the specified activities under the supervision of a pharmacist.

SECTION 7 provides that, despite an authorization to perform a reserved activity, a pharmacist or pharmacy technician shall only perform the reserved activity if competent to do so and, in the opinion of the pharmacist, the reserved activity is appropriate in the clinical circumstances. In performing a reserved activity, a pharmacist or pharmacy technician shall do so in accordance with the applicable standards of practice.

SECTION 8 sets out the scope of practice of pharmacists and the duties of a pharmacist who is supervising a pharmacy technician.

SECTION 9 provides that, in addition to the activities listed in section 8, a pharmacist who meets the qualifications set out in the Pharmacist and Pharmacy Technician Profession Regulations may, subject to any conditions on the pharmacist’s certificate of registration, engage in the practices set out in sections 10 to 18.

SECTION 10 authorizes a pharmacist to adapt a prescription or make a therapeutic substitution in respect of a prescription where the specified conditions are met, except where the prescription is for a monitored drug.

SECTION 11 authorizes a prescriber to prohibit adaptation or therapeutic substitution by a pharmacist by writing “No Adaptation” or “No Therapeutic Substitution”, as the case may be, on the prescription, and requires a pharmacist to comply with that instruction.

SECTION 12 sets out the requirements for a pharmacist who adapts a prescription or makes a therapeutic substitution in respect of a prescription to provide notice to the prescriber who gave the original prescription and the information that must be recorded by the dispenser.

SECTION 13 authorizes a pharmacist to give a continued care prescription to a patient for a drug where the specified conditions are met, except where the drug to be prescribed is a monitored drug other than a benzodiazepine drug. The section prohibits a pharmacist from giving a continued care prescription for an amount of a drug that exceeds the amount authorized per refill under the original prescription, from
refilling a continued care prescription and giving consecutive continued care prescriptions to a patient for the same drug.

SECTION 14 authorizes a pharmacist to give an emergency prescription to a patient for a drug where the specified conditions are met, except where the drug to be prescribed is a monitored drug. The section prohibits a pharmacist from refilling an emergency prescription and giving consecutive emergency prescriptions to a patient for the same drug.

SECTION 15 authorizes a pharmacist who holds current certification in extended practice under the Pharmacist and Pharmacy Technician Profession Regulations to order and receive the results of a test as defined in clause 1(w) of the regulations where the specified conditions are met. A pharmacist who orders and receives a test is required to notify the patient’s primary health care provider of any changes in the patient’s drug therapy initiated by the pharmacist based on the results of the test. A pharmacist who orders and receives a test is required to forward the results to the patient’s primary health care provider where the test results reveal an issue that is outside the pharmacist’s knowledge, skills and competencies or where the pharmacist considers it in the patient’s best interests to do so.

SECTION 16 authorizes a pharmacist who holds current certification in extended practice under the Pharmacist and Pharmacy Technician Profession Regulations to order and receive the results of a test as defined in clause 1(w) of the regulations where the specified conditions are met. A pharmacist who orders and receives a test is required to notify the patient’s primary health care provider of any changes in the patient’s drug therapy initiated by the pharmacist based on the results of the test. A pharmacist who orders and receives a test is required to forward the results to the patient’s primary health care provider where the test results reveal an issue that is outside the pharmacist’s knowledge, skills and competencies or where the pharmacist considers it in the patient’s best interests to do so.

SECTION 17 authorizes a pharmacist who holds current certification in extended practice under the Pharmacist and Pharmacy Technician Profession Regulations to order and receive the results of a test as defined in clause 1(w) of the regulations where the specified conditions are met. A pharmacist who orders and receives a test is required to notify the patient’s primary health care provider of any changes in the patient’s drug therapy initiated by the pharmacist based on the results of the test. A pharmacist who orders and receives a test is required to forward the results to the patient’s primary health care provider where the test results reveal an issue that is outside the pharmacist’s knowledge, skills and competencies or where the pharmacist considers it in the patient’s best interests to do so.

SECTION 18 establishes the age limits of patients to whom a drug or vaccine may be administered by a pharmacist under section 17.

SECTION 19 sets out additional requirements that must be met by a pharmacist in prescribing, adapting a prescription or making a therapeutic substitution in respect of a prescription, including the records to be kept.

SECTION 20 lists the professional titles and abbreviations that may be used by a pharmacist.

SECTION 21 establishes the scope of practice of pharmacy technicians and requires that a pharmacy technician who is employed in a pharmacy shall perform those activities only under the direct supervision of a pharmacist. A pharmacy technician who is employed in a hospital or health care centre shall perform the activities only under the supervision of a pharmacist. The section also sets out the requirements for direct supervision and supervision by a pharmacist. The section further prohibits counseling of patients about a drug or medical condition by pharmacy technicians and prohibits a pharmacist from delegating the responsibility to counsel a patient to a pharmacy technician.

SECTION 22 lists the professional titles and abbreviations that may be used by a pharmacy technician.

SECTION 23 lists provisions of the regulations the contravention of which by a pharmacist shall be considered professional misconduct for the purposes of section 57 of the Act.

SECTION 24 provides that a contravention of subsection 3(1) or 4(1) is an offence for the purposes of clause 93(1)(a) of the Act and subject to a fine as set out in that section.

SECTION 25 establishes further objects of the College in addition to those set out in subsection 4(2) of the Act.
SECTION 26 adopts the Schedules to the regulations.
SECTION 27 provides for the commencement of the regulations.

EC2014-533
REGULATED HEALTH PROFESSIONS ACT
PHARMACIST AND PHARMACY TECHNICIAN PROFESSION REGULATIONS

Pursuant to subsection 96(2) of the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1, the Council of the College of Pharmacists, with the approval of the Lieutenant Governor in Council, made the following regulations:

1. In these regulations,

(a) “accredited degree program in pharmacy” means
   (i) a Bachelor of Science in Pharmacy or Pharm. D. degree program in Canada approved by the Council or accredited by the Canadian Council for Accreditation of Pharmacy Programs, or
   (ii) a program that has been determined by the Pharmacy Examining Board of Canada to be the equivalent of an approved or accredited pharmacy degree program referred to in subclause (i);

(b) “accredited pharmacy technician training program” means
   (i) a pharmacy technician training program in Canada approved by the Council or accredited by the Canadian Council for Accreditation of Pharmacy Programs, or
   (ii) a program that has been determined by the Pharmacy Examining Board of Canada to be the equivalent of an approved or accredited pharmacy technician training program referred to in subclause (i);

(c) “Act” means the Regulated Health Professions Act R.S.P.E.I. 1988, Cap. R-10.1;

(d) “College” means the College of Pharmacists established under section 2 of the Practice of Pharmacists and Pharmacy Technicians Regulations;

(e) “Council” means the Council of the College;

(f) “direct patient care” means direct patient care as set out in section 6;

(g) “direct supervision” means the direct supervision of a pharmacist, pharmacy student, pharmacy intern, pharmacy technician or pharmacy technician student that is provided by a pharmacist who is registered in Part A of the pharmacists register and who is physically present in the dispensary;

(h) “dispensary” means a dispensary as defined in the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6.1, and includes a dispensary in a hospital or health facility;

(i) “examination” means the examination in jurisprudence, ethical standards and standards of practice approved by the College for use in assessing the competencies of an applicant for registration as a pharmacist or pharmacy technician, unless the context indicates otherwise;

(j) “extended practice” means a practice listed in section 16;

(k) “NAPRA” means the National Association of Pharmacy Regulatory Authorities;

(l) “patient” means a patient as defined in the Pharmacy Act;

(m) “pharmacist” means a person who is registered as a pharmacist in the register of pharmacists of the College;

(n) “pharmacy” means a pharmacy as defined in the Pharmacy Act;
(o) “pharmacy intern” means a person who is registered as a pharmacy intern in the pharmacy interns register of the College; pharmacy intern
(p) “pharmacy student” means a person who is registered as a pharmacy student in the pharmacy students register of the College; pharmacy student
(q) “pharmacy technician” means a person who is registered as a pharmacy technician in the pharmacy technicians register of the College; pharmacy technician
(r) “pharmacy technician student” means a person who is registered as a pharmacy technician student in the pharmacy technician students register of the College; pharmacy technician student
(s) “Practice of Pharmacist and Pharmacy Technicians Regulations” means the Practice of Pharmacist and Pharmacy Technicians Regulations made under the Act; Practice of Pharmacist and Pharmacy Technicians Regulations
(t) “preceptor” means a preceptor designated under section 20; preceptor
(u) “supervision” means supervision as defined in clause 1(v) of the Practice of Pharmacist and Pharmacy Technicians Regulations. supervision

Registers

2. The Registrar shall establish and maintain the following registers in accordance with the Act and these regulations:

(a) the pharmacists register;
(b) the pharmacy interns register;
(c) the pharmacy students register;
(d) the pharmacy technicians register;
(e) the pharmacy technician students register.

Pharmacists Register

3. (1) In addition to the requirements of section 17 of the Act, the Registrar shall establish and maintain in the pharmacists register a Part A and a Part B.

(2) The Registrar shall not register an applicant for registration or renewal of registration in the pharmacists register in both Part A and Part B of the register at the same time.

(3) In addition to the information required under section 17 of the Act, the Registrar shall record in the pharmacists register
(a) a notation and the date of each voluntary surrender of registration; and
(b) the date of a pharmacist’s retirement from practice or, if the pharmacist dies while still practising, the date of the pharmacist’s death.

4. (1) An applicant for registration in the pharmacists register shall provide the following to the Registrar:
(a) an application in the form approved by the Council on which the applicant has clearly indicated whether the applicant is requesting registration in Part A or Part B of the register;
(b) proof satisfactory to the Registrar that the applicant meets the qualifications and requirement set out in subsection (2) for registration in Part A or subsection (3) for registration in Part B; and
(c) payment of the fees established by the bylaws.

(2) Subject to section 5, an applicant is entitled to be registered in Part A of the pharmacists register if the Registrar is satisfied that the applicant has
(a) submitted an application in accordance with clause (1)(a);
(b) successfully completed an accredited degree program in pharmacy;
(c) successfully completed the examination;
(d) provided written verification that the applicant is in good standing with the professional regulatory body in another jurisdiction in which the applicant is or was previously authorized to practise pharmacy, if any;
(e) provided proof of fulfilment of the requirements respecting practice experience in accordance with subsection 16(2) or (3);
(f) provided proof of professional liability insurance coverage as required by section 21;
(g) provided proof of identity;
(h) provided proof that the applicant has successfully completed the Pharmacy Examining Board of Canada’s qualifying examinations and, if applicable, its evaluating examination;
(i) provided evidence satisfactory to the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline in respect of a matter that, in the Registrar’s opinion, makes the applicant unsuitable to practise pharmacy;
(j) provided proof that the applicant is currently certified in cardiopulmonary resuscitation and first aid as required by the standards of practice;
(k) met NAPRA’s standard Language Proficiency Requirements for Licensure as a Pharmacist in Canada; and
(l) paid the fees established by the bylaws.

(3) An applicant is entitled to be registered in Part B of the pharmacists register if the Registrar is satisfied that the applicant has:
(a) submitted an application in accordance with clause (1)(a);
(b) successfully completed an accredited degree program in pharmacy;
(c) successfully completed the examination;
(d) provided written verification that the applicant is in good standing with the professional regulatory body in another jurisdiction in which the applicant is or was previously authorized to practise pharmacy, if any;
(e) provided proof of fulfilment of the requirements respecting practice experience in accordance with subsection 16(2) or (3);
(f) provided proof of identity;
(g) provided proof that the applicant has successfully completed the Pharmacy Examining Board of Canada’s qualifying examinations and, if applicable, its evaluating examination;
(h) provided evidence satisfactory to the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline in respect of a matter that, in the Registrar’s opinion, makes the applicant unsuitable to practise pharmacy;
(i) met NAPRA’s standard Language Proficiency Requirements for Licensure as a Pharmacist in Canada; and
(j) paid the fees established by the bylaws.

(4) Subject to subsection (5), an applicant who is licensed or registered as a pharmacist in another Canadian jurisdiction is entitled to be registered if the Registrar is satisfied that the applicant has:
(a) successfully completed the examination;
(b) provided written verification that the applicant is in good standing with the professional regulatory body in the other jurisdiction;
(c) provided proof of identity;
(d) provided proof that the applicant is currently certified in cardiopulmonary resuscitation and first aid as required by the standards of practice;
(e) provided proof of professional liability insurance coverage as required by section 21, if applicable; and
(f) paid the fees established by the bylaws.

(5) An applicant referred to in subsection (4) who is eligible to be registered shall be registered in the same or an equivalent class as the class in which the applicant is registered in the other jurisdiction.

(6) Practice experience obtained in another Canadian jurisdiction may be counted toward an applicant’s qualifications, if in the opinion of the Registrar it is equivalent to practice experience in the province.

5. (1) Where an applicant under subsection 4(2) has not held registration in the three or more calendar years immediately preceding the application, the Registrar, if satisfied that the applicant meets the requirements of subsection 4(2), has successfully completed the refresher program required under clause 8(3)(c) and has paid the fee set out in the bylaws, may
(a) register the applicant for a period of six months, subject to subsection (3), on the condition that the applicant
(i) successfully complete 140 hours of practice experience within that six-month period for each year or part of a year during which the person was not registered, under the preceptorship of a pharmacist registered in Part A of the pharmacists register, or
(ii) successfully complete
(A) within that six-month period, 280 hours of practice experience under the preceptorship of a pharmacist registered in Part A of the pharmacists register, and
(B) within the year immediately preceding the application, the Pharmacy Board of Canada’s qualifying examination; and
(b) issue to the applicant a certificate of registration that states
(i) the name of the preceptor who will be required to provide direct supervision of the applicant, and
(ii) the name and address of the pharmacy or pharmacies where the applicant is authorized to practise during the term of the permit.

(2) The provisions of subsections 17(1), (2) and (4) and section 18 respecting the practice experience to be acquired by pharmacy interns apply to the practice experience required to be obtained by an applicant under subsection (1), with the necessary changes.

(3) The Registrar may, if satisfied that it is appropriate to do so, and on payment of the fee established by the bylaws, extend the term of a conditional registration under subsection (1) for one additional period of six months.

(4) If, on the expiry of the term of conditional registration under subsection (1), including an extension granted under subsection (3), if any, the Registrar is satisfied that the applicant has complied with the requirements of subsection (1) and continues to meet the requirements of subsection 4(2), the Registrar shall remove the condition from the applicant’s registration and issue a certificate of registration accordingly.

(5) If the Registrar is not satisfied that an applicant has complied with the requirements set out in subsection (1) or continues to meet the requirements of subsection 4(2), the Registrar shall refer the application to the Council.

(6) On receipt of an application referred by the Registrar under subsection (5), the Council shall review the application and
(a) if satisfied that the applicant meets the requirements set out in subsection (1) and continues to meet the requirements of subsection 4(2), direct the Registrar to register the applicant in Part A of the pharmacists register and to issue a certificate of registration to that effect;
(b) if not satisfied that the applicant meets the requirements set out in subsection (1) or continues to meet the requirements of subsection 4(2), provide to the applicant, in writing, its reasons for denying the application.

(7) Where an applicant under section 4 for registration in Part A of the pharmacists register has not held registration within the three calendar years immediately preceding the application, the applicant, in addition to meeting the requirements of subsection 4(2), shall provide proof satisfactory to the Registrar that the applicant has completed the continuing education requirements set out in subsection 19(1) during the year immediately preceding the application.

6. Only a pharmacist registered in Part A of the pharmacists register is entitled to practise pharmacy in circumstances that require the pharmacist to provide direct patient care, which includes but is not limited to the following:
(a) providing pharmacy services to the public, including counselling patients or providing information or education to patients respecting the use of prescription and non-prescription drugs, health care aids or devices;
(b) compounding, dispensing, prescribing and having custody of drugs;
(c) supervising the compounding or dispensing of drugs and the dispensary;
(d) reviewing patients’ prescriptions;
(e) performing a patient profile or a medication review for a patient;
(f) administering a drug or vaccine to a patient;
(g) prescribing a drug or adapting or making a therapeutic substitution in respect of a prescription for a drug.

7. (1) Subject to subsection 8(4), a pharmacist registered in Part B of the pharmacists register...
(a) shall not provide direct patient care to a patient;
(b) shall not provide advice to a patient, whether directly or indirectly;
(c) shall not dispense drugs;
(d) shall not supervise a dispensary;
(e) shall not be designated a managing pharmacist under section 16 of the Pharmacy Act;
(f) shall not supervise the practice of a pharmacy intern, pharmacy student or pharmacy technician except as authorized by the Council under section 19; and
(g) shall, when working in a pharmacy or any other environment where patient care is being provided, clearly identify himself or herself as a pharmacist who is not authorized to provide direct patient care.

(2) Every certificate of registration issued to a pharmacist registered in Part B of the register shall state the prohibitions and conditions set out in subsection (1) in addition to any other conditions imposed by the Council.

8. (1) A pharmacist may apply to the Registrar at any time for transfer from Part A to Part B of the pharmacists register.

(2) On application by a pharmacist to be transferred from Part A to Part B of the register, the Registrar shall transfer the pharmacist to Part B of the register.

(3) A pharmacist may apply to the Registrar for a transfer from Part B to Part A of the register by providing proof satisfactory to the Registrar that the pharmacist
(a) has met the requirements of subsection 19(1) with respect to continuing education;
(b) has obtained a permit under subsection (4) and successfully completed the practice experience requirements set out in subsection (7);
(c) has successfully completed the refresher program required by Council;
(d) has obtained professional liability insurance that meets the requirements of section 21;
(e) holds current certification in cardiopulmonary resuscitation and first aid as required by the standards of practice; and
(f) has paid the fees established in the bylaws.

(4) For the purpose of a transfer from Part B to Part A of the pharmacists register, a pharmacist registered in Part B of the pharmacists register may apply to the Registrar in the form approved by the Council for a permit to provide direct patient care and dispense drugs under the direct supervision of a preceptor.

(5) An applicant under subsection (4) shall provide to the Registrar, in writing,
(a) the name or names of the pharmacist or pharmacists who will be acting as preceptor;
(b) the name and address of the pharmacy or dispensary at which the applicant proposes to practise under the supervision of the preceptor; and
(c) the date on which the applicant proposes to commence practising.

(6) The Registrar shall review an application submitted under subsection (4) and, if Registrar satisfied that it is appropriate to do so, may issue a permit in writing specifying
(a) the name of the preceptor who will be required to provide direct supervision of the applicant;
(b) the name and address of the pharmacy or dispensary where the applicant is authorized to practise; and
(c) the term of the permit, which, subject to subsection (9), shall not exceed six months.

(7) Subject to subsection (8), an applicant under subsection (4) shall, within the six-month term of the permit,
(a) successfully complete 140 hours of practice experience that meets the requirements of clause 17(2)(b) for each year during which the applicant was not registered in Part A of the pharmacists register,
under the preceptorship of a pharmacist registered in Part A of the pharmacists register; or
(b) successfully complete
   (i) 280 hours of practice experience that meets the requirements of clause 17(2)(b) under the preceptorship of a pharmacist registered in Part A of the pharmacists register, and
   (ii) within the year immediately preceding the application, the Pharmacy Board of Canada’s qualifying examination.

(8) The provisions of subsections 17(1), (2) and (4) and section 18 respecting the practice experience to be acquired by pharmacy interns apply to an applicant under subsection (4) with the necessary changes.

(9) If the Registrar is satisfied that it is appropriate to do so, the Registrar may, on application by a pharmacist who holds a permit under subsection (4) and payment of the fee established in the bylaws, extend the term of the permit for one additional term of up to six months.

(10) The Registrar shall review an application submitted under subsection (3) and, if satisfied that the pharmacist has met the requirements of subsections (3) and (7), the Registrar shall register the pharmacist in Part A of the register and issue a certificate of registration to that effect.

(11) If the Registrar is not satisfied that the pharmacist has met the requirements of subsections (3) and (7), the Registrar shall refer the application to the Council.

(12) On receipt of the application referred by the Registrar under subsection (11), the Council shall review the application and
   (a) if satisfied that the pharmacist has met the requirements of subsections (3) and (7), direct the Registrar to register the pharmacist in Part A of the register and to issue a certificate of registration to that effect;
   (b) if not satisfied that the pharmacist has met the requirements of subsections (3) and (7), provide to the pharmacist, in writing, its reasons for denying the application.

9. (1) A pharmacist may apply to the Registrar, in the form approved by the Council, for renewal of registration in Part A or Part B of the pharmacists register.

(2) A pharmacist applying for renewal of registration in Part A of the pharmacists register shall submit the following with an application made under subsection (1):
   (a) proof satisfactory to the Registrar that the pharmacist continues to meet the qualifications and requirements that he or she was required to meet for initial registration under the Act;
   (b) proof satisfactory to the Registrar that the pharmacist meets the requirements of subsection (3); and
   (c) payment of the fees established by the bylaws.

(3) A pharmacist is entitled to a renewal of registration in Part A of the pharmacists register if the pharmacist has
   (a) either
      (i) provided proof satisfactory to the Registrar that the pharmacist has completed the continuing education requirements set out in subsection 19(1) during the year immediately preceding the application, or
      (ii) provided proof satisfactory to the Registrar that the pharmacist has successfully met the standards set out in NAPRA’s National Model Continuing Competence Program for Canadian Pharmacists;
   (b) provided proof satisfactory to the Registrar that the pharmacist has met the requirements of clauses 4(2)(f), (g), (i) and (j);
   (c) practised direct patient care as set out in section 6 for a minimum of 180 hours in the year immediately preceding the application for renewal; and
   (d) paid the fees established in the bylaws.

(4) A pharmacist applying for renewal of registration in Part B of the pharmacist register shall submit payment of the fees established by bylaw with an application made under subsection (1).
(5) A pharmacist who has submitted an application and fees in accordance with subsection (4) is entitled to a renewal of registration in Part B of the pharmacist register.

Pharmacy Interns Register

10. (1) A person may apply to the Registrar, in the form approved by the Council, for registration or renewal of registration in the pharmacy interns register.

(2) An applicant shall provide the following with an application made under subsection (1):
   (a) proof satisfactory to the Registrar that he or she meets the qualifications and requirements set out in subsection (3); and
   (b) payment of the fees established by the bylaws.

(3) An applicant is entitled to be registered in the pharmacy interns register if the Registrar is satisfied that the applicant has:
   (a) submitted an application in accordance with subsection (1);
   (b) successfully completed an accredited degree program in pharmacy;
   (c) provided proof of professional liability insurance coverage as required by section 21;
   (d) provided proof of identity;
   (e) provided evidence satisfactory to the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary;
   (f) provided a copy of the current training agreement entered into with the preceptor under section 18;
   (g) met NAPRA’s standard Language Proficiency Requirements for Licensure as a Pharmacist in Canada; and
   (h) paid the fee established by the bylaws.

Pharmacy Students Register

11. (1) A person may apply to the Registrar, in the form approved by the Council, to be registered in the pharmacy students register.

(2) An applicant shall provide the following with an application made under subsection (1):
   (a) proof satisfactory to the Registrar that he or she meets the qualifications and requirements set out in subsection (3) or subsection (4); and
   (b) payment of the fees established by the bylaws.

(3) An applicant is entitled to be registered in the pharmacy students register if the Registrar is satisfied that the applicant has:
   (a) submitted an application in accordance with subsection (1);
   (b) provided proof of enrolment in an accredited degree program in pharmacy;
   (c) provided proof of identity;
   (d) provided proof of professional liability insurance coverage as required by section 21;
   (e) provided evidence to the satisfaction of the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary;
   (f) provided a copy of the current training agreement entered into with the preceptor under section 18;
   (g) provided the name of the applicant’s preceptor and the location of the pharmacy at which the training will be delivered; and
   (h) paid the fee established by the bylaws.

(4) A pharmacy student may apply to the Registrar, in the form approved by the Council, for renewal of registration in the pharmacy students register.

(5) An applicant shall submit the following with an application made under subsection (4):
   (a) confirmation satisfactory to the Registrar that the applicant remains enrolled in an accredited degree program in pharmacy;
   (b) evidence satisfactory to the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary.
discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary;
(c) provided proof of professional liability insurance coverage as required by section 21;
(d) provided the name of the applicant’s preceptor and the location of the pharmacy at which the training will be delivered; and
(e) paid the fee established by the bylaws.

Pharmacy Technicians Register

12. (1) The Registrar shall ensure that a member is not registered as a pharmacy technician in the pharmacy technicians register and as a pharmacist in the pharmacists register at the same time.

(2) In addition to the information required under section 18 of the Act, the pharmacy technicians register shall contain
(a) a notation and the date of each voluntary surrender of registration; and
(b) the date of a pharmacy technician’s retirement from practice or, if the pharmacy technician dies while still practising, the date of the pharmacy technician’s death.

13. (1) A person may apply to the Registrar, in the form approved by the Council, to be registered in the pharmacy technicians register.

(2) An applicant shall provide the following with an application made under subsection (1):
(a) an application in the form approved by the Council;
(b) proof satisfactory to the Registrar that the applicant meets the qualifications and requirements set out in subsection (3) or subsection (4); and
(c) payment of the fees established by the bylaws.

(3) An applicant is entitled to be registered in the pharmacy technicians register if the Registrar is satisfied that the applicant has:
(a) submitted an application in accordance with subsections (1) and (2);
(b) successfully completed either
   (i) an accredited pharmacy technician training program, or
   (ii) an accredited degree program in pharmacy;
(c) successfully completed the examination;
(d) successfully completed the Pharmacy Examining Board of Canada’s qualifying examinations and, if applicable, its evaluating examination;
(e) provided written verification that the applicant is in good standing with the professional regulatory bodies in which the applicant is or was previously authorized to practise pharmacy technology or pharmacy, as the case may be;
(f) provided proof of either
   (i) in the case of an applicant who graduated prior to December 31, 2011, the completion of at least 560 hours of postgraduate practice experience under the supervision of a preceptor within the three years immediately preceding the application, or
   (ii) in the case of an applicant who graduated after January 1, 2012, the completion of at least 280 hours of postgraduate practice experience under the supervision of a preceptor within the three years immediately preceding the application;
(g) provided proof of professional liability insurance coverage as required by section 21;
(h) provided proof of identity;
(i) provided evidence to the satisfaction of the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline in respect of a matter that, in the Registrar’s opinion, makes the applicant unsuitable to practise pharmacy;
(j) satisfied the Registrar that the applicant meets NAPRA’s standard Language Proficiency Requirements for Licensure as a Pharmacy Technician in Canada; and
(k) paid the fee established by the bylaws.

(4) An applicant who does not meet the requirements of clauses (3)(b) and (f) is entitled to be registered in the pharmacy technicians register if the Registrar is satisfied that the applicant meets the other requirements
of subsection (3) and has obtained the following qualifications on or before December 31, 2018:
(a) successful completion of a bridging program to educate and train persons as pharmacy technicians accredited by the Canadian Council for Accreditation of Pharmacy Programs;
(b) completion of at least 2,000 hours of work experience in a direct patient care pharmacy practice in Canada in the three-year period immediately preceding entering the program referred to in clause (a);
(c) successful completion of the examination;
(d) successfully completion of the Pharmacy Examining Board of Canada’s qualifying examinations and, if applicable, its evaluating examination;
(e) successful completion of an assessment of the following professional skills under the direction of a preceptor appointed by the Council:
(i) documentation of the drug distribution process,
(ii) prescription transfers,
(iii) technical check for accuracy in checking 500 consecutive prescriptions,
(iv) procedures respecting the release of a prescription to a patient,
(v) professional collaboration, and
(vi) communication and education.

(5) An applicant who is licensed or registered in another Canadian jurisdiction is entitled to be registered as a pharmacy technician if the Registrar is satisfied that the applicant has
(a) successfully completed the examination;
(b) provided written verification that the applicant is in good standing with the professional regulatory bodies by which the applicant is or was previously authorized to practise pharmacy;
(c) provided proof of identity;
(d) provided proof of professional liability insurance coverage as required in section 21; and
(e) paid the fees established in the bylaws.

(6) Practice experience obtained in another Canadian jurisdiction may be counted toward an applicant’s qualifications if the Registrar considers it to be equivalent to practice experience in the province.

14. (1) A pharmacy technician may apply to the Registrar, in the form approved by Council, for renewal of registration in the pharmacy technicians register.

(2) An applicant shall submit the following with an application made under subsection (1):
(a) proof satisfactory to the Registrar that the applicant meets the qualifications and requirements set out in subsection (3); and
(b) payment of the fees established by the bylaws.

(3) An applicant is entitled to a renewal of registration if the applicant has
(a) completed the continuing education requirements as set out in section 19(1) during the year immediately preceding the date on which the application is submitted to the Registrar;
(b) provided proof of professional liability insurance coverage as required in section 21; and
(c) subject to subsection (4), practised as a pharmacy technician pursuant to section 20 of the Practice of Pharmacy and Pharmacy Technicians Regulations for a minimum of 180 hours in the year immediately preceding the application for renewal.

(4) An applicant who has not accumulated the required number of hours of direct patient care under clause (3)(c) is entitled to renewal of registration if the applicant has successfully completed a refresher program approved by the Council.

Pharmacy Technician Students Register

15. (1) A person may apply to the Registrar, in the form approved by the Council, to be registered in the pharmacy technician students register.
(2) An applicant shall provide the following with an application made under subsection (1):
   (a) proof satisfactory to the Registrar that he or she meets the qualifications and requirements set out in subsection (3) or subsection (4); and
   (b) payment of the fees established by the bylaws.

(3) An applicant is entitled to be registered in the pharmacy technician students register if the Registrar is satisfied that the applicant has:
   (a) submitted an application in accordance with subsection (1);
   (b) provided proof of enrolment in or successful completion of either
      (i) an accredited pharmacy technician training program, or
      (ii) an accredited degree program in pharmacy;
   (c) provided proof of identity;
   (d) provided proof of professional liability insurance coverage as required by section 21;
   (e) provided evidence to the satisfaction of the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary;
   (f) provided a copy of the current training agreement entered into with the preceptor under section 18;
   (g) provided the name of the applicant’s preceptor and the location of the pharmacy or dispensary at which the training will be delivered; and
   (h) paid the fee established by the bylaws.

(4) A pharmacy technician student may apply to the Registrar, in the form approved by the Council, for renewal of registration in the pharmacy technician students register.

(5) An applicant shall submit the following with an application made under subsection (4):
   (a) confirmation satisfactory to the Registrar that the applicant remains enrolled in
      (i) an accredited pharmacy technician training program, or
      (ii) an accredited degree program in pharmacy;
   (b) evidence satisfactory to the Registrar that the applicant has not been convicted of an offence or been subject to professional discipline for a matter that, in the Registrar’s opinion, makes the applicant unsuitable to work in a dispensary;
   (c) provided proof of professional liability insurance coverage as required by section 21;
   (d) provided the name of the applicant’s preceptor and the location of the pharmacy or dispensary at which the training will be delivered; and
   (e) paid the fee established by the bylaws.

16. (1) For the purposes of these regulations and the Practice of Pharmacist and Pharmacy Technicians Regulations, extended practice by a pharmacist includes any of the following activities:
   (a) administering a vaccine or drug therapy to a patient
      (i) by intradermal, subcutaneous or intramuscular injection,
      (ii) orally, including sublingual and buccal administration,
      (iii) topically, including ophthalmic, otic and intranasal administration, and
      (iv) by inhalation;
   (b) on and after April 1, 2016, dispensing methadone and suboxone;
   (c) prescribing drugs for minor ailments as authorized in the Practice of Pharmacist and Pharmacy Technicians Regulations;
   (d) ordering and interpreting the tests for patients specified in the Practice of Pharmacist and Pharmacy Technicians Regulations.

(2) Only a pharmacist who holds a valid and subsisting certificate in extended practice issued under this section may engage in extended practice.

(3) A pharmacist registered in Part A of the pharmacists register may apply to the Registrar, in the form approved by the Council, for a certificate in extended practice.
(4) An applicant shall provide with an application made under subsection (3) proof that the applicant has
(a) completed the education and training requirements relating to certification in extended practice set out in Schedule B to these regulations; and
(b) paid the fees established by the bylaws.

(5) If the Registrar is satisfied that the pharmacist meets the requirements set out in subsection (4), the Registrar may issue a certificate in extended practice to the pharmacist subject to any conditions that the Registrar considers advisable.

(6) If the Registrar is not satisfied that the pharmacist meets the requirements set out in subsection (4), or if the pharmacist objects to the conditions imposed on the certificate issued by the Registrar under subsection (5), the Registrar shall refer the application to the Council.

(7) On receipt of an application referred by the Registrar under subsection (6), the Council shall review the application and
(a) if the Council
   (i) is satisfied that the pharmacist meets the requirements set out in subsection (4), direct the Registrar to issue a certificate in extended practice to the pharmacist, or
   (ii) is not satisfied that the pharmacist meets the requirements set out in subsection (4), provide to the pharmacist, in writing, its reasons for denying the application; and
(b) if the Council
   (i) is satisfied that the conditions imposed by the Registrar under subsection (5) are appropriate, confirm the conditions, or
   (ii) is not satisfied that the conditions imposed by the Registrar under subsection (4) are appropriate, direct the Registrar to issue a certificate in extended practice to the pharmacist
      (A) without those conditions,
      (B) with no conditions, or
      (C) subject to any other conditions the Council considers appropriate.

(8) A certificate in extended practice expires on March 31.

(9) A pharmacist may apply for renewal of a certificate in extended practice by
(a) submitting an application in accordance with subsection (3);
(b) providing proof satisfactory to the Registrar that the pharmacist has complied with the requirements of section 2 of Schedule B to these regulations; and
(c) paying the fee established in the bylaws.

Practice Experience

17. (1) Subject to subsections 4(6) and 13(6), practical training programs for members shall be delivered
(a) at a pharmacy, dispensary or other facility approved by the Registrar; and
(b) under the preceptorship of a pharmacist or a pharmacy technician who has been designated as a preceptor by the Council.

(2) Subject to subsection (5), the following practice experience satisfies the requirements of clause 4(2)(e) with respect to applicants who have successfully completed an accredited degree program in pharmacy in Canada:
(a) eight weeks of practice experience that was undertaken by the applicant as a pharmacy student during the applicant’s enrolment in an accredited degree program in pharmacy;
(b) eight weeks of practice experience that was undertaken by the applicant as a pharmacy intern that includes the following topics:
   (i) orientation to the pharmacy and its practice,
   (ii) a review of the applicable legislation,
   (iii) pharmaceutical care of patients,
   (iv) the dispensing process,
   (v) communication with other health care providers and patients,
   (vi) non-prescription drug products, and
   (vii) pharmacy management practices.

(3) Subject to subsection (5), the required practice experience for the purposes of clause 4(2)(e) with respect to applicants who have
successfully completed an accredited degree program in pharmacy outside Canada is
(a) twenty weeks of practice experience in a dispensary; and
(b) one week of monitoring by a preceptor appointed by the Council.

(4) Subject to subsection (5), the following practice experience meets the requirements of clause 13(3)(f) with respect to applicants who have successfully completed an accredited pharmacy technician training program or an accredited degree program in pharmacy in Canada:
(a) legal, ethical and professional responsibility;
(b) professional collaboration and teamwork;
(c) drug distribution methodology, and in particular
(i) prescription and patient information management,
(ii) product preparation,
(iii) product release, and
(iv) system and inventory control;
(d) public and peer education in the use of devices and health care aids;
(e) management of financial aspects associated with the provision of drugs, supplies, devices and health care aids; and
(f) quality assurance and the avoidance of medication errors.

(5) The following practice experience does not satisfy the requirements of clause 4(2)(e):
(a) any practice experience that a preceptor designates as unsatisfactory;
(b) if the applicant’s registration as a pharmacy student or pharmacy technician student was revoked, any practice experience completed by the applicant as a pharmacy student after the date of the incident that led to the revocation;
(c) if the applicant’s registration as a pharmacy intern expired, any practice experience completed by the applicant after the expiry date.

18. (1) Every pharmacy student, pharmacy technician student and pharmacy intern shall, before commencing a period of practice experience in a pharmacy, be registered in the pharmacy students, pharmacy technician students or pharmacy interns register, as the case may be; enter into a training agreement with a preceptor; and file a copy of the training agreement with the Registrar.

(2) A training agreement between a preceptor and a pharmacy student, pharmacy technician student or pharmacy intern continues in effect from the date of filing with the Registrar until March 31 of the following year, unless it is sooner terminated
(a) by either the pharmacy student, pharmacy technician student or pharmacy intern, as the case may be, or the preceptor;
(b) on the preceptor’s ceasing to be registered or the preceptor’s registration being suspended; or
(c) on the pharmacy student’s, pharmacy technician student’s or pharmacy intern’s ceasing to be registered.

(3) A pharmacy student, pharmacy technician student or pharmacy intern shall enter into a new training agreement with another preceptor before applying to transfer to that preceptor.

(4) A pharmacy student, pharmacy technician student or pharmacy intern shall
(a) record the number and nature of hours worked in a form approved by Council;
(b) ensure that the record is initialled by the preceptor as to the number and nature of hours worked; and
(c) submit the form to the Registrar at the conclusion of each completed work period or as directed by the Registrar.

Continuing Education Requirements

19. (1) A pharmacist registered in Part A of the pharmacists register and a pharmacy technician shall, in the year immediately preceding an application for renewal of registration, complete at least 20 hours of continuing education in accordance with this section.

(2) Subject to subsection (3), continuing education comprises the following subject areas:
(a) patient care;
(b) professional collaboration;
(c) ethical, legal and professional responsibility;
(d) drug, therapeutic and practice information;
(e) drug distribution;
(f) communication and education;
(g) management knowledge and skills;
(h) safety and quality assurance;
(i) health promotion;
(j) administration of drugs and vaccines by pharmacists;
(k) prescribing by pharmacists;
(l) preceptorship;
(m) on and after April 1, 2016, dispensing of methadone and suboxone.

(3) All continuing education shall be approved by one of the following bodies

(a) the Canadian Council for Continued Education in Pharmacy;
(b) Dalhousie Continuing Pharmacy Education;
(c) the Accreditation Council for Pharmacy Education; or
(d) the Council.

(4) The Council may require a pharmacist or pharmacy technician who fails to comply with subsection (1) to

(a) successfully complete a continuing professional education program approved by the Council;
(b) pass an examination administered or approved by the Council; or
(c) comply with both clauses (a) and (b), within the period specified by the Council.

(5) A member shall

(a) keep a record, in a form satisfactory to the Registrar, of the activities that the member undertakes for the purpose of this section; and
(b) provide, on the request of and in accordance with the directions of the Registrar, copies of the record referred to in clause (a).

**Preceptors**

20. (1) A pharmacist or a pharmacy technician may apply in the form approved by the Council for designation as a preceptor if the pharmacist or pharmacy technician

(a) has practised pharmacy for at least one year;
(b) is registered under these regulations; and
(c) has entered into a training agreement with a pharmacy intern, pharmacy student or pharmacy technician student, as the case may be, under which the pharmacist or the pharmacy technician agrees to provide direct supervision of the pharmacy intern, pharmacy student or pharmacy technician student, as the case may be, for at least half of the time the pharmacy intern, pharmacy student or pharmacy technician student, as the case may be, works in the pharmacy during the term of agreement.

(2) A pharmacist may apply in the form approved by the Council for designation as a preceptor if the pharmacist meets the requirements of clauses (1)(a) and (b) and has agreed to act as preceptor to an applicant pursuant to subsection 5(1) or a pharmacist pursuant to subsection 8(4).

(3) The Council may designate a pharmacist or pharmacy technician as a preceptor if the Council is satisfied that the pharmacist or pharmacy technician meets the requirements of subsection (1) or (2), as the case may be.

(4) The Council shall refuse to designate a pharmacist or a pharmacy technician as a preceptor if

(a) the Council or another Canadian pharmacy or other professional regulatory body has made a finding against the pharmacist or the pharmacy technician of professional misconduct, negligence or incompetence;
(b) the Council is satisfied that the pharmacist or pharmacy technician does not meet the requirements of subsection (1) or (2), as the case may be; or
(c) a prohibition against serving as a preceptor has been imposed by the Council under clause 24(2)(d) and has not expired.
(5) A pharmacist may act as preceptor to any of the following: Authority - pharmacist
(a) a pharmacy intern;
(b) a pharmacy student;
(c) a pharmacy technician; or
(d) a pharmacy technician student.

(6) Only a pharmacist registered in Part A of the pharmacists register may act as a preceptor to a pharmacist registered in Part B of the pharmacists register who is practising pharmacy under a permit issued by the Registrar under subsection 8(5). Idem

(7) A pharmacy technician may act as a preceptor only to a pharmacy technician or a pharmacy technician student. Idem - pharmacy technician

(8) A preceptor ceases to be qualified as a preceptor, and the preceptor’s designation is revoked, if Revocation
(a) the preceptor’s registration expires, is suspended or is revoked; or
(b) the preceptor is the subject of a finding referred to in clause (3)(a).

(9) The Registrar shall, where a preceptor ceases to be qualified, notify the preceptor and any person to whom the pharmacist or pharmacy technician was acting as preceptor of the loss of qualification and the revocation of the preceptor’s designation, by written notice mailed to the person’s most recent address in the records of the Registrar. Notice

(10) A preceptor shall
(a) not act as preceptor pursuant to subsection 5(1) or 8(4) or under a training agreement with more than one pharmacist, pharmacy intern, pharmacy student, pharmacy technician or pharmacy technician student, as the case may be, during the same time period;
(b) carry out the responsibilities of a preceptor in accordance with these regulations; and
(c) ensure that the pharmacist, pharmacy intern, pharmacy student, pharmacy technician or pharmacy technician student, as the case may be, has the opportunity to complete the requisite practice experience. Duties

Insurance Coverage

21. (1) Every pharmacist registered in Part A of the pharmacists register and every pharmacy technician, pharmacy intern, pharmacy student and pharmacy technician student shall obtain and maintain professional liability insurance in an amount not less than $2,000,000. Insurance coverage

(2) The professional liability insurance policy shall Requirements respecting policy
(a) be issued by an insurer authorized to conduct business in Prince Edward Island;
(b) be issued in the name of the individual insured;
(c) apply to any practice setting in Prince Edward Island;
(d) have a policy limit of not less than $2,000,000 per claim or occurrence and an aggregate limit of not less than $2,000,000, excluding legal or court costs;
(e) cover liability for any professional service the member may be authorized to provide under these regulations;
(f) allow an extended reporting period of at least three years in the case of a claims-based policy and have a minimum retroactive date of five years in the case of an occurrence-based policy;
(g) have a maximum deductible of $5,000 per claim;
(h) include a term to the effect that the insurer will notify the College if the policy is cancelled, expires or ceases to meet the requirements of these regulations; and
(i) include a term to the effect that the policy continues in force in conformity with these regulations until the notice required by clause (h) is received by the College.

(3) A person required to be insured under these regulations shall Current certificate
ensure that the Registrar is provided with the most current certificate of professional liability insurance from the person’s insurer that confirms that the person is insured and that the insurance complies with the regulations.
Conflict of Interest

22. It is a conflict of interest for a member to place himself or herself in or accept a situation which, in the opinion of Council,

(a) results, by connection with his or her pharmaceutical practice, in monetary or other personal gain other than that earned from the sale of products and the performance of professional services in his or her practice, or in gain for a prescriber of drugs as a consequence of his or her prescribing; or

(b) puts his or her professional integrity or his or her rendering of services at risk of being controlled or detrimentally influenced by other persons or by factors other than his or her professional judgment of what is best for the patient.

23. The Council may find a member guilty of professional misconduct if the member has

(a) failed to abide by the terms of registration;

(b) failed to abide by the code of ethics;

(c) exceeded the person’s scope of practice, as established in the Practice of Pharmacist and Pharmacy Technicians Regulations;

(d) an unresolved conflict of interest;

(e) failed to maintain current patient records;

(f) attempted to deal with a patient’s problem which the member recognizes or should, in the Council’s opinion, recognize as being beyond the scope of his or her competence or expertise;

(g) failed to refer a patient appropriately when the member recognizes or should, in the Council’s opinion, recognize, a condition requiring the attention of another health professional;

(h) permitted, in circumstances within his or her control, an unauthorized person to perform any of the member’s functions except as may be authorized under the Practice of Pharmacist and Pharmacy Technicians Regulations;

(i) maintained in his or her records, or signed, issued or submitted a record, report, certificate, claim or similar document which the member knows or should know contains false or misleading information or which, by omitting significant information, may give a misleading impression;

(j) gave information regarding a patient’s condition or treatment to a person other than the patient or the patient’s representative without the consent of the patient, unless required to do so by law or for a purpose directly related to the patient’s care;

(k) purported to have a qualification or special expertise which the member does not in fact possess;

(l) engaged in the practice of pharmacy while the member’s ability to perform any professional act was impaired by alcohol or another drug or substance;

(m) failed to cooperate with an appraisal or investigation authorized by the Council;

(n) failed to dispense a prescription with full labelling information and such other instruction or advice as is required under the Pharmacy Act;

(o) engaged in advertising that is, in the opinion of the Council, a contravention of section 92 of the Act or of the regulations under the Pharmacy Act;

(p) attempted or carried out, without previously informing and obtaining the advice of the Council, research based on methods which do not conform to the member’s training or to generally recognized contemporary custom;

(q) failed to comply with directions issued by the Council in accordance with the Act and regulations; or

(r) performed an act associated with the practice of pharmacy which, in the opinion of the Council, would reasonably be regarded as dishonourable to the member’s profession or seriously offensive to a patient.

24. (1) The Council may find a member guilty of professional incompetence if it concludes that a patient suffered demonstrable harm or serious risk of harm which can reasonably be attributed to something which the member did or failed to do or failed to take into account, if the act or omission was inconsistent with generally accepted standards of practice and procedures, and cannot be justified by the member to the satisfaction of the Council.
2. The terms and conditions that may be imposed by a hearing committee of the Council under clause 58(2)(d) of the Act shall be appropriate to the conduct of the respondent and include, but are not limited to,

(a) a requirement that the respondent undergo random urine testing;
(b) prohibiting a respondent who is a pharmacist registered in Part A of the pharmacists register from being designated as a managing pharmacist under subsection 16(1) of the Pharmacy Act;
(c) a requirement that the respondent work only under the direct supervision of a pharmacist registered in Part A of the pharmacists register or a pharmacy technician, as the case may be; and
(d) prohibiting a respondent who is a pharmacist or pharmacy technician from acting as a preceptor.

3. A term or condition imposed by a hearing committee of the Council under clause 58(2)(d) of the Act applies during the period of time specified by the hearing committee.

25. The criteria to be considered by a hearing committee of the Council for the purposes of imposing a fine under clause 58(2)(h) of the Act shall include

(a) the extent of the pharmacist’s or pharmacy technician’s awareness of the fault;
(b) the degree of risk or harm to the patient;
(c) the potential further risk to the public;
(d) the potential effect upon the person’s profession;
(e) the potential effect upon the person’s ability to earn his or her livelihood;
(f) any restitution or remediation voluntarily undertaken by the person.

26. The Canadian Council for Accreditation of Pharmacy Programs is hereby designated as an accreditation body for the purposes of subclause 12(2)(c)(ii) of the Act.

27. Upon the request of a professional regulatory body in another jurisdiction regulating the practice of pharmacy or the use of titles relating to pharmacy, the Registrar shall disclose to that body

(a) the nature of any ongoing complaints, investigations or hearing respecting a member; and
(b) the nature and disposition of any complaint, investigation or hearing respecting a member
   (i) that was resolved by agreement or by an order made with the consent of the member, or
   (ii) where the hearing committee determined that the conduct of the member constituted professional misconduct or incompetence.

28. (1) Schedules A and B to these regulations are hereby adopted and form part of these regulations.

(2) The standards set out in Schedule A to these regulations are hereby adopted as amended from time to time and form part of these regulations.

(3) A pharmacist is responsible for ensuring that the standards set out in Schedule A to these regulations apply to pharmacists and are complied with by the pharmacist and any person practising pharmacy under the supervision or preceptorship of the pharmacist.

(4) A pharmacy technician is responsible for ensuring that the standards set out in Schedule A to these regulations apply to pharmacy technicians and are complied with by the pharmacy technician and any person practising pharmacy under the supervision or preceptorship of the pharmacy technician.

(5) In addition to the requirements of the Act, the Practice of Pharmacist and Pharmacy Technician Regulations and these regulations, a member shall practise in a manner that is consistent with

(a) the standards set out in Schedule A to these regulations;
(b) the code of ethics established by the Council; and
(c) the practice directives established by the Council.

(6) A copy of these regulations, the Practice of Pharmacist and Pharmacy Technician Regulations, the standards, the code of ethics, and

Documents available to public
directives shall be made available for public inspection during regular business hours in the office of the Registrar.

Health Profession Corporations

29. The name of a member’s health profession corporation and any business name or partnership name under which the corporation carries on the practice of pharmacy shall
(a) be, in the opinion of the Council, in good taste, dignified, and professional; and
(b) not contain the words “and Company”, “and Associated” or “and Partners”, or similar words, unless a member other than the member denoted in the name is also carrying on the practice of pharmacy on behalf of the corporation.

30. In addition to the requirements of section 15 of the Act, an applicant for a permit to operate as a health profession corporation is required to provide with the application
(a) a copy of the corporation’s letters patent or articles of incorporation, as applicable, including any amendments; and
(b) proof acceptable to the Registrar that the corporation is in good standing in accordance with the legislation under which it was incorporated.

31. In addition to the requirements of subsection 17(3) of the Act, the Registrar shall include in the record for each health profession corporation for which a permit has been issued
(a) the registered business address, telephone number, facsimile number and e-mail address of the corporation; and
(b) the date of issuance of the corporation’s permit.

Transitional Provisions

32. (1) On the coming into force of this section, a pharmacist who holds a valid and subsisting license issued under the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6
(a) is deemed to be registered in Part A of the pharmacists register; and
(b) notwithstanding subsection 9(1) and clause 9(3)(c), is, on or before March 31, 2015, entitled to renewal in Part A of the pharmacists register.

(2) On the coming into force of this section, a pharmacy student who is registered under the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6, is deemed to be registered in the pharmacy students register under these regulations, and an agreement entered into between the pharmacy student and a pharmacist for the purposes of practical training that is in force on the coming into force of this section is deemed to be a training agreement for the purposes of section 18 of these regulations.

33. These regulations come into force on September 22, 2014.

SCHEDULE A

1. The following standards established by the National Association of Pharmacy Regulatory Authorities apply to pharmacists and pharmacy technicians, as the case may be:
(a) Model Standards of Practice for Canadian Pharmacists;
(b) Model Standards of Practice for Canadian Pharmacy Technicians;
(c) Supplemental Standards of Practice for Schedule II and III Drugs;
(d) Language Proficiency Requirements for Licensure as a Pharmacist in Canada;
(e) National Model Continuing Competence Program for Canadian Pharmacists.
SCHEDULE B

1. The following are the training programs required to be successfully completed by a pharmacist for a certificate in extended practice under section 16:
   (a) for the purposes of clause 16(1)(a), the Canadian Council for Continued Education in Pharmacy Competency Mapped Immunization and Injection Education and Training Program or a program recognized by a Canadian pharmacy regulatory authority as the equivalent of that program;
   (b) for the purposes of clause 16(1)(b), the Centre for Addition and Mental Health Opioid Dependence Treatment Core Course or a course approved by the Council as equivalent to that course;
   (c) for the purposes of clause 16(1)(c), an education program for minor ailment prescribing approved by the Council; and
   (d) for the purposes of clause 16(1)(d), an education program in laboratory testing and interpretation approved by the Council.

2. A pharmacist applying for renewal of a certificate in extended practice under subsection 16(3) shall provide proof to the Registrar on request that the pharmacist, in the year immediately preceding the application for renewal,
   (a) has administered at least one injection; or
   (b) has successfully completed a refresher course in the education and training program referred to in clause 1(a).

EXPLANATORY NOTES

SECTION 1 establishes definitions for the purposes of the regulations.

SECTION 2 requires the Registrar to establish and maintain the pharmacists register, the pharmacy interns register, the pharmacy students register, the pharmacy technicians register and the pharmacy technician students register.

SECTION 3 provides that the pharmacists register shall be divided into a Part A and a Part B, and that an applicant for registration or renewal shall not be registered in both Part A and Part B at the same time. The section also requires the Registrar to record in the pharmacists register, in addition the information required under section 17 of the Act, the date of a voluntary surrender of registration, the date of a pharmacist’s retirement from practice and, in the case of a pharmacist who dies while practising, the date of the pharmacist’s death.

SECTION 4 establishes the application process and specifies the information, proof of qualifications and other requirements to be provided by an applicant for registration in either Part A or Part B of the pharmacists register.

SECTION 5 provides for the registration in Part A of the pharmacists register of an applicant who is applying less than three years, or three years or more, after graduation from an accredited degree program in pharmacy, and sets out the additional requirements in education and practical experience required of the applicant in each situation.

SECTION 6 provides that only a pharmacist registered in Part A of the pharmacists register is permitted to practise pharmacy in a setting that requires the pharmacist to provide direct patient care. Direct patient care includes, but is not limited to, the activities listed in clauses (a) to (g).

SECTION 7 prohibits a pharmacist registered in Part B of the pharmacists register from providing direct patient care and engaging in other specified activities unless the pharmacist has obtained a permit from the Council to provide direct patient care and dispense drugs under the supervision of a preceptor.
SECTION 8 authorizes an application by a pharmacist to transfer between Part A and Part B of the pharmacists register. There are no special requirements for a transfer from Part A to Part B. For a transfer from Part B to Part A, the pharmacist must provide proof that the pharmacist has met the continuing education requirements of section 18, has successfully completed the Council’s refresher program, has obtained the required professional liability insurance and holds current certification in cardio-pulmonary resuscitation and first aid.

SECTION 9 establishes the process and requirements for renewal of registration in Part A and Part B of the pharmacists register.

SECTION 10 establishes the application process and specifies the information, proof of qualifications and other requirements to be provided by an applicant for registration in the pharmacy interns register.

SECTION 11 establishes the application process and specifies the information, proof of qualifications and other requirements to be provided by an applicant for registration in the pharmacy students register.

SECTION 12 requires the Registrar to ensure that a member is not registered as a pharmacy technician and as a pharmacist at the same time. The section also requires the Registrar to record in the pharmacy technicians register, in addition to the information required under section 17 of the Act, the date of a voluntary surrender of registration, the date of a pharmacy technician’s retirement from practice and, in the case of a pharmacy technician who dies while practising, the date of the pharmacy technician’s death.

SECTION 13 establishes the application process and specifies the information, proof of qualifications and other requirements to be provided by an applicant for registration in the pharmacy technicians register.

SECTION 14 establishes the process and requirements for renewal of registration in the pharmacy technicians register.

SECTION 15 establishes the process and requirements for renewal of registration in the pharmacy technician students register.

SECTION 16 establishes the nature of extended practice by a pharmacist and provides that only a pharmacist who holds a valid certificate in extended practice may engage in it. A pharmacist registered in Part A of the pharmacists register may apply to the Registrar for a certificate in extended practice. The additional education and training requirements for the certificate are set out in Schedule B to the regulations. A certificate in extended practice may be issued subject to any conditions the Registrar considers advisable.

SECTION 17 establishes the practical experience required to be completed as a pharmacy student and pharmacy intern by an applicant for registration in the pharmacists register, and as a pharmacy technician student by an applicant for registration in the pharmacy technicians register.

SECTION 18 requires a pharmacy intern, pharmacy student or pharmacy technician student, prior to commencing a period of practice experience, to be registered in the appropriate register, to enter into a training agreement with a preceptor and to file a copy of the training agreement with the Registrar. The pharmacy intern, pharmacy student or pharmacy technician student is required to record the number and nature of hours worked, ensure that the record is initialed by the preceptor and submit the record to the Registrar at the end of the period of practice experience.

SECTION 19 establishes specific requirements in continuing education that must be met for renewal of registration by pharmacists registered in Part A of the pharmacists register and by pharmacy technicians.
SECTION 20 authorizes the Council to designate a pharmacist or pharmacy technician who meets the qualifications set out in the section as a preceptor. A pharmacist who is designated as a preceptor may supervise a pharmacy student, pharmacy intern, pharmacy technician or a pharmacy technician student. A pharmacist registered in Part A of the pharmacists register may supervise a pharmacist registered in Part B of the pharmacists register who is practising pharmacy under a permit issued by the registrar under subsection 7(5). A pharmacy technician who is designated as a preceptor may supervise only a pharmacy technician or a pharmacy technician student.

SECTION 21 requires every pharmacist registered in Part A of the pharmacists register and every pharmacy technician, pharmacy student, pharmacy technician student and pharmacy intern to obtain and maintain professional liability insurance in an amount not less than $2,000,000, and sets out in detail the requirements the policy of insurance must meet.

SECTION 22 clarifies the circumstances that would constitute a conflict of interest for a member.

SECTION 23 sets out the circumstances in which a hearing committee of the Council may find a member guilty of professional misconduct.

SECTION 24 sets out the circumstances in which a hearing committee of the Council may find a member guilty of professional incompetence, and sets out the terms and conditions that may be imposed by the hearing committee on a member’s registration under clause 58(2)(d) of the Act when it has made a finding of professional incompetence against the member.

SECTION 25 sets out the criteria to be considered by a hearing committee of the Council in determining the amount of a fine to be imposed under clause 58(2)(h) of the Act.

SECTION 26 designates the Canadian Council for Accreditation of Pharmacy Programs as an accreditation body for the purposes of subclause 12(2)(c)(ii) of the Act.

SECTION 27 authorizes the Registrar to disclose specified information about a member on request to a professional regulatory body in another jurisdiction that regulates the practice of pharmacy.

SECTION 28 adopts Schedules A and B to the regulations and further adopts the standards set out in Schedule A to the regulations as amended from time to time, and provides that the standards form part of the regulations. The section further provides that, with respect to the standards that apply to a pharmacist, it is the pharmacist who is responsible for ensuring that the standards are complied with, and with respect to the standards that apply to a pharmacy technician, it is the pharmacy technician who is responsible for ensuring that the standards are complied with.

SECTION 29 sets out rules respecting the name to be used by a health profession corporation that carries on the practice of pharmacy.

SECTION 30 specifies requirements to be provided by an applicant for a permit to operate as a health profession corporation in addition to those specified in section 15 of the Act.

SECTION 31 specifies the information, in addition to that required by subsection 17(3) of the Act, to be recorded by the Registrar in respect of each health profession corporation for which a permit has been issued.
SECTION 32 provides that, on the coming into force of the section, a pharmacist who holds a valid and subsisting license issued under the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6, is deemed to be registered as a pharmacist in Part A of the pharmacists register under the regulations, and entitled to a renewal of registration in Part A until March 31, 2015. The section further provides that a pharmacy student who is registered under the Pharmacy Act R.S.P.E.I. 1988, Cap. P-6, is deemed to be registered as a pharmacy student under the regulations, and an agreement entered into by the pharmacy student and a pharmacist for the purpose of practical training that is in force is deemed to be a training agreement for the purpose of section 17 of the regulations.

SECTION 33 provides for the commencement of these regulations.