State of Washington
Department of Health

Business Meeting Minutes
October 29, 2015
BlackRiver Training and Conference Center
Cedar/Duwamish Rooms
800 Oakesdale Ave. S.W.
Renton, WA 98057

CONVENE
Chair Al Linggi called the meeting to order at 9:03 a.m.

Commission Members:
Al Linggi, RPh, MBA
Dan Rubin MPP, Public Member, Vice Chair
Christopher Barry, RPh,
Steve Anderson, RPh
Sepi Soleimanpour, RPh, MBA-HA
Elizabeth Jensen, PharmD
Maureen Sparks, CPhT
Nancy Hecox, PharmD
Olgy Diaz, Public Member
Judy Guenther, Public Member
Cheryl Adams, PharmD
Gary Harris, RPh,

Guest / Presenters:
Billy Chow, RPh for Bartell Drugs
Amy Pashinski, RPh for Bartell Drugs Call Center Manager
Keith Koscielski, RPh from Shopko Pharmacy
Steve Wanaka, RPh Director of Pharmacy for Seattle Children's Hospital
Doug Beck, RPh from Schick Shadel Hospital

Absent Commission Member:
Tim Lynch, PharmD
Arun Sambataro, Public Member
Matthew Ronayne, RPh

Staff Members:
Joyce Roper, AAG
Christopher Humberson RPh, Executive Director
Greg Lang, Pharmacy Investigator
Lisa Roberts, RPh. Pharmacy Consultant
Cathy Williams, RPh, Pharmacist Consultant
Doreen Beebe, Program Manager
Siri Thompson, Rules Coordinator
Irina Tiginyanu, Pharmacy Technician Analyst
Leann George, Secretary Senior
Gordon MacDonald, RPh, Chief Investigator
Grace Cheung, Pharmacy Investigator

Doug Beck RPH, from Schick Shadel
CALL TO ORDER
1.1 Approval of Business Meeting Agenda.

1.2 Approval of September 17, 2015 Meeting Minutes.

MOTION: Elizabeth Jensen moved that the commission approve 1.1. Gary Harris second. **MOTION CARRIED: 12-0.**

MOTION: Judy Guenther moved that the commission approve 1.2 with amendments. Chris Barry second. **MOTION CARRIED: 12-0.**

CONSENT AGENDA

Items listed under the consent agenda are considered routine commission matters and will be approved by a single motion of the commission without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda.

2.1 NPLEx Monthly Report Acceptance
- September 2015

2.2 Pharmacies and Other Firm Application Approval
- New and Closed Pharmaceutical Firms Report

2.3 Pharmacy Technician Training Program Approval
a. Community Health Care

2.4 Pharmacy Technician – Specialized Functions Approval
a. Allenmore Hospital Tech check Tech

2.5 Automated Drug Distribution Device Approval
a. Confluence – Acudose
b. Schick Shadel Hospital
c. Seattle Children's South Clinic

The commission requested that Items 2.3, 2.4, 2.5 (a) be pulled from the Consent Agenda for further discussion. Items 2.6, 2.7 2.8, & 2.9 were deleted from the consent agenda.

MOTION: Maureen Sparks moved that the commission approve items 2.1, 2.2, & 2.5 (b & c) on the consent agenda. Dan Rubin second. **MOTION CARRIED: 12-0.**

Old Business

Bartell Drugs

Cathy Williams introduced Billy Chow and Amy Pashinski from Bartell Drugs. Amy led the power point providing the required status report for their Call Center that was approved July 2014.

Goals
- Targeted workflow balancing throughout our network of stores
- Maintain and/or improve specific store level metrics
- Increased time for local staff to perform clinical services as we continue to diversify our clinical service offerings
- Perform and support targeted clinical services

Principal Functions

- Transfers less than 10% of store transfers
- New Prescription Data Entry less than 5% of store data entry

Q.A. Assessment

- Direct technician supervision and spot check
- Random spot checks logged by call center pharmacist on 1 out of every 10 scripts
- Every transferred in prescription will be verified by call center pharmacist before release to requesting host store
- Screen replication of call center tech work terminal on display at the call center pharmacist terminal
- Final verification always conducted by store pharmacist

Challenges

- Workflow Issues
  - Prior Authorizations
  - Drug not covered
- Staffing at both call center and store level
- Notification of completed Rx Transfers
  - Manual notification by call center pharmacist to requesting host store
- Store Level Adoption
  - Initial transition to new model of workflow was difficult for stores

Employment Survey Results

- Technician Workflow Data- Entry Benefits
  - Dispensing - 80%
  - Paperwork – 70%
  - Expired Medications – 55%
  - Returns – 55%
- Pharmacist Workflow Activities
  - Counseling -83%
  - Immunization – 60%
  - MTM – 23%
  - Travel Consultations 23%

Future

- More complex patient case management
  - 3rd Party
  - Specialty Pharmacy
- Patient compliance communications
- Inception of provider status for pharmacists (2017)
- Initial MTM workup, actual CMRs delivered or performed in store by store level pharmacist
- Training and on boarding new staff
- 98% support continuing the call center because of the value to the stores

Billy Chow said what he learned is he would spend more time in helping employees understand they didn't need to focus on data entry. Getting them to shift their core focus (mindset) of data entry, as trivial as it sounds it was significant and took a few months and will help for the future. There was minimal discussion regarding promise time and having pre-verification turned off didn't affect anything. Bartell Drugs runs patient surveys all the time.

MOTION: Christopher Barry moved that the commission approve the report and allow the program to continue and report back in one year. Sepi Soleimanpour second. Steve Anderson recused himself. **MOTION CARRIED: 11-0.**

Review Commission Policy #36

Doreen Beebe led the discussion with the commission regarding the suggested changes to Commission Policy #36 permitting intern registration for postgraduate participation in residency or specialized internship programs. She explained the amendments that were made.

Commission and staff discussed some pieces of the language in the Policy that will need more review and work. Staff will go back make some amendments after listening to the concerns from the commission.

MOTION: Christopher Barry moved that staff will work with Joyce Roper and make revisions to Policy #36 and bring back to the December business meeting for commission approval. Elizabeth Jensen second. **MOTION CARRIED: 12-0.**

Extending 2016 Business Meeting

Chris Humberson led the discussion to confirm the commission is still interested. Also, to discuss the logistics for extending the business meetings in 2016 to one and one half day with the intent to dedicating Friday to rule development and other strategic planning. These Friday's are promised to the ad judiciary courts office for hearings. Each commission member provided Mr. Humberson their concerns, opinion and whether or not it would work for them.

MOTION: Dan Rubin moved that staff plan for additional meeting time on the Friday after the business meetings preferably in the morning and preferably in the same location as the business meeting. Steve Anderson second. **MOTION CARRIED: 12-0.**

New Business

Joyce Roper discussed the implementation of Engrossed Second Substitute Bill 5052 as it relates to the Governor's veto message directing the department/commission to review and prepare a report on the rescheduling of marijuana. The Governor vetoed two sections in Second Substitute Bill 5052, which proposed to remove medical marijuana from Schedule 1 in the state's Uniform Controlled Substances Act, chapter 69.50 RCW. The Department of Health has been instructed by the Governor to prepare a report in consultation with stakeholders prior to the 2016 legislative session. The Department has a number of responsibilities under E2SSB 5052 and has staff working on those responsibilities. That group has offered to undertake the stakeholdering responsibilities to prepare the requested report. Statutorily, PQAC has the authority to reschedule controlled substances.

Joyce asked the commission what level of involvement they would like in this process. Nancy Hecox volunteered to represent PQAC during the stakeholdering process, working with the DOH staff implementing E2SSB 5052. Elizabeth Jensen, Gary Harris, and Steve Anderson said they wanted to go on record opposing the rescheduling of marijuana until the federal controlled substances act is changed. Tim Lynch, who was not present at the meeting but asked it to be

shown that he also does not support reclassification.

MOTION: Maureen Sparks moved that Nancy Hecox represent and update the commission during the implementation of this part of Engrossed E2SSB 5052. Judy Guenther second. **MOTION CARRIED: 9-0.**

DOH Network via Citrix

Taylor Linke, HSQA Business Practice & Productivity Manager presented information on Health System Quality Assurance Division's move to electronic information systems for Boards and Commissions. We are moving to an electronic information system for all of your official board business

Phased Implementation

1.	Citrix Account Creation	July 2015- December 2015
2.	Business Meeting Materials	January 2016
3.	Credentialing Materials	2016
4.	Enforcement Materials	2016

Current System:

- Email documents to personal or work computers. If these documents are named in a public disclosure request, personal or work computer could be subject to legal discovery.
- Mail documents to home or office. There have been some cases of lost and mishandled deliveries.
- Print and mail meeting and hearings documents to all participants is costly.

New System:

- We will keep the information and files needed to do department-related business electronically and move them behind the department's firewalls.
- We will provide an account (Citrix) to reach those files from home or work computer.
- Your program manager, executive director, investigative staff members and legal staff members will post documents you need to do your work to your personal folder on the department's network. You will work on and save documents to your folder on the department's network rather than to your personal or work computer.
- You will be able to use any brand of computer, any operating system and any browser. You will continue to be responsible for your own personal and/or work equipment.

Court Ruling: Declared that government officials have no reasonable expectation of privacy when using private devices. Information stored on private devices and in private accounts is subject to public disclosure. The agency desires to establish a method that maintains a record of all communications with members.

Risk Mitigation: In an effort to mitigate the risks and concerns associated with the transference of sensitive and sometimes confidential information, Health Systems Quality Assurance (HSQA) is implementing a secure electronic process to provide a secure method to accomplish the critical regulatory work statutorily outlined for health professional board, commission, and committees.

Process Improvements:

- Reduced costs by eliminating the need to print and mail documentation to health professional board, commission and committee members.
- Established consistency for process and product across programs and regulatory authorities.

•Process optimization and efficiency to increase capacity for ongoing regulatory work.
•Alignment of activities in support of the agency mission.

Today

- The commission received Welcome Packets
- Demonstration

Ongoing

- Citrix User Guide
- HSQA Call Center
- Recorded Webinar

Expectations

- Today Mobile Computing Form
- In 7 days Log-In
    - Survey
- In 30 days NO Personal Email

The commission members were given a chance to ask Taylor questions and discuss concerns. Taylor encouraged the commission members to contact herself or Doreen Beebe with any questions, suggestions of methods that would make things better for future and any other input.

New Business

Pharmacy Technician Specialized Functions and Ancillary Utilization Plans

Doreen Beebe led the discussion regarding the concerns brought forward at the September business meeting on Pharmacy Technician Specialized Functions and Ancillary Utilization Plans.

With many internal transitions and staff retiring some information during training may not have been passed on clearly. We rely on what is written in rule. She provided the commission the laws that apply to AUP and specialized functions. IV admixtures are specialized functions under the law and should have been placed on the consent agenda for Commission approval.

Prior to the DOH re-org, approval letters were sent, but since the re-org, for some unknown reason, this practice did not continue. Credentialing staff and PQAC staff agreed they should be sending approval letters and will work together to reinstitute the process of sending letters of approval.

Joyce reminded the Commission and staff that under the *Yoshinaka* and *Seymour* cases, if the statute requires the Commission's approval, the Commission cannot delegate that decision to staff. Staff can review and prepare for the final approval but the commission must be the approving body.

Some of the issues discussed: Why would "Transcribing orders" be in the template AUP when this doesn't happen much, if at all, anymore. It was noted that the sample AUP was approved by a past board and the current Commission could change the sample to update it to current practices. There was discussion on how to handle the issue of past AUPs, particularly specialized

functions, which did not come before the Commission for approval. It was agreed that some form of communication should be sent out. In addition, the requirement for Commission approval could delay the opening of new pharmacies if they have to wait for Commission approval of their AUPs, since our meetings are 6 weeks apart. The question arose about being able to use a panel of Commissioners to approve the AUPs. Gordon MacDonald asked the commission and staff to provide written direction on how to handle these during inspections. The investigators will be given written direction once the commission choses how to move forward.

MOTION: Cheryl Adams moved that Maureen Sparks, Chris Humberson, Irina Tiginyanu and Doreen Beebe will look into the scope and size of the issue and bring back preliminary recommendations on how to move forward at the December meeting. They will consult with Joyce. Secondly, they will develop updated template/guidelines and provide inspectors an updated guideline on how to handle AUPs while in the field. The commission will have a panel to review and approve AUPs. Steve Anderson second, Dan Rubin abstained. **MOTION CARRIED: 11-0.**

Implementation of Engrossed Substitute Senate Bill 5460

Engrossed Substitute Senate Bill 5460 – Section 1

Doreen Beebe put the document up for the commission members to discuss and share their input and led the discussion on the implementation of Bill 5460. The law adds a new section to chapter 70.41 RCW regarding hospital licensing and regulation. It allows a practitioner in a hospital to prescribe and distribute a limited supply of pre-packaged emergency medication to patients discharged from the emergency department (ED) when access to community or hospital pharmacy services are not available within 15 miles by road or if consistent with hospital policy the patient has no reasonable ability to access a community or outpatient pharmacy. In collaboration with applicable hospital staff, the director of the hospital pharmacy must develop policies and procedures to implement this practice.

The commission discussed and agreed with most of the document and asked for an amendment to add “outpatient” before “hospital pharmacy” in a sentence at the beginning of the first paragraph in the document.

MOTION: Dan Rubin moved that the commission authorize staff to proceed with rule making with the CR 101 process on rules to implement SB 5460, section 1. Nancy Hecox second. **MOTION CARRIED: 12-0.**

Open Forum

Jeff Rochon WSPA

- There was been talk about the need for an appeals process in the inspection process. WSPA members would like a more formal process to defend inspection results.
- Many members are inquiring about the Compounding rules status and what the next steps are.

The board adjourned for Executive Session and Case Presentations at 12:05 p. m.

The board reconvened from Executive Session and Case Presentations at 1:05 p.m.

New Business Cont'd

Consent Agenda Items Pulled for Discussion

2.3 Pharmacy Tech Training Program Approval

a) Community Health Care

Chris Barry has a question whether assistants can "Return to Stock" and it is a specialized function and asked for this to be clarified. Irina Tiginyanu explained that it means return to a shelf in its existing bottle.

MOTION: Chris Barry moved to approve **2.3 (a)**. Maureen Sparks second. **MOTION CARRIED: 12-0.**

2.4 Pharmacy Technician – Specialized Functions Approval

a) Allenmore Hospital Tech check Tech

Chris Barry asked about certified technicians aren't all technicians supposed to be certified. Do they have IV Add mixture as a specialized function? Maureen explained they do now.

MOTION: Cheryl Adams moved that the commission approve Allenmore Hospital specialized function for Tech check Tech **2.4 (a).** Elizabeth Jensen second. **MOTION CARRIED: 12-0.**

2.5 Automated Drug Distribution Device Approval

a) Confluence – Acudose

Nancy Hecox had a concern that the ADDD override guidelines are 2 and half years old. Cathy Williams shared that per her request for this information this was given to her. This is the current policy there will be an update but there won't be any changes.

MOTION: Nancy Hecox moved that the commission approve **2.5 (a).** Judy Guenther second. Cheryl Adams recused herself. **MOTION CARRIED: 11-0.**

Review Guidelines for Implementing Emergency Substitute House Bill 1625

Chris Humberson shared the developed guidelines with the commission and asked if they had any input and guidance from the commission. He gave a brief background and Medical Services program for the implementation of Substitute House Bill 1625.

One suggestion from the commission was to amend the guidelines to say, "A statement of responsibility" that should read Pharmacy designee shall ensure the pharmacy practices and complies with all federal and state laws and regulations. Maybe to place this in the first paragraph that states the purpose.

MOTION: Chris Barry moved the commission move this document forward with suggested amendment. Steve Anderson second. **MOTION CARRIED: 12-0.**

Correspondence:
Chris Humberson discussed a document sent out by Roadrunner Pharmacy it was a letter of concern by a couple US representatives regarding compounding for pet use. FDA has come up with guidelines that they should be held to US 797. No further discussion.

Requests
List and Label Request
Cambia Health Solutions asked the commission to recognize them as a professional association to receive a list for commercial purposes to assist their credentialing department with updating data in their internal system.

MOTION: Chris Barry moved that panel A deny the request from Cambia Health Solutions as a professional association. This denial is because they are not a professional or educational organization. Steve Anderson second. **MOTION CARRIED: 4-0.**

Shopko
Cathy Williams introduced Keith Koscielski, RPh from Shopko Pharmacy. The commission had already viewed and reviewed the power point presentation provided to them in the meeting materials. Keith Koscielski did brief the commission on some of his presentation. Than allowed for the commission to make comments or ask questions regarding any concerns.

Shopko's Pharmacy Computerized Workflow system is called "EPS Workflow". It has the optional capability to balance and share work between Shopko pharmacies. This system has the capability to control what tasks are being shared with a 'sister' pharmacy and what tasks need to be done at the 'home' pharmacy. The goal of the system is to balance and share tasked between Shopko Pharmacies. The sharing and balancing of task reduces pharmacist workload and increases patient safety.

As a part of a workload balancing group, pharmacies are currently allowed to share between them only the ***Data Entry*** and ***Data Verification*** steps in the process.

Shopko allows only pharmacies licensed within that same state to workload balance with one another. Within the application Shopko has set up different publishing scopes and retrieval stores that determine what stores share with what stores. Each state will have their own unique publishing scope that directs the system to only share pharmacy's tasks with other pharmacies with that same publishing scope.

The concern from the commission was, whether or not the pharmacist that does the final verification is able to view the hard copy prescription. Yes, this is put in the file via a photographic image and the pharmacist that does the counseling has the ability to see the hardcopy. How often does the original prescription show up for the verification process? There

is an option within the system that can be turned on to allow the pharmacist doing the "first" refill the hard copy will be displayed. Is there a setting that can display the prescription for every refill? Keith wasn't sure but will look into it and turn it on.

MOTION: Elizabeth Jensen moved that the commission approve Shopko requests to implement workload balancing in its Washington pharmacies, with the contingency that if the system allows the prescription to be displayed for every refill that it be turned on, if the system only has the ability to display the prescription on the "first" refill than that must be turned on immediately. With a one year follow up. Nancy Hecox second. **MOTION CARRIED: 12-0.**

Schick Shadel Hospital

Lisa Roberts led the discussion by providing a brief back ground of Schick Shadel Hospital. Schick Shadel Hospital is a sixty bed hospital that serves as an acute medical detox treatment facility. The pharmacy is open daily from 0900 to 1730 and employs one full-time pharmacist and three per diem pharmacists. Currently no pharmacy technicians are employed. The pharmacy would be utilizing their remote medication order processing vendor during closed hours of pharmacy operations (approximately 16 hours/day). Lisa introduced Doug Beck RPH, from Schick Shadel Hospital.

Since the commission has already viewed the power point for his request to use of remote medication order processing services Doug Beck offered to answer any questions. He was asked about the average of orders done after hours. The average number of orders is two. The average range can be zero to six orders after hours. However, there are times at 2 am intoxicated patients show up. There are about 20 medications on this list. The intent will be to pair that down with Medication Review being able to evaluate the orders to prevent any drug interactions. The full list is in the ADDD's request that was submitted in the Consent Agenda.

MOTION: Elizabeth Jensen moved that the commission approve Schick Shadel Hospital's request to use of remote medication order processing services, this motion was amended with a requirement to report back a written follow-up in one year to include: error reporting by type; specific outcomes of the quality assurance program; number of any security breaches (if any); number of users in the system; number of daily transactions including those currently reported; and, feedback from hospital, medical and pharmacy staff. Nancy Hecox second. **MOTION CARRIED: 12-0.**

Seattle Children's Hospital

Cathy Williams introduced Steve Wanaka, RPh, and Director of Pharmacy for Seattle Children's Hospital (SCH). Steve asked the commission to approve his requests to use remote medication order processing for locations specified in its proposal. The current request is to **exp**and this program to allow all SCH pharmacists at all SCH pharmacy sites (Seattle main campus, Bellevue, and the Seattle Children's South Clinic) to perform remote medication order processing for hospital and clinic administered medications.

A question from the commission regarding "Narcotics for Patient Specific" in the SCH ADDD and how is it decided when to put a narcotic into the ADDD. Steve shared that this will most likely not come up but sometime there is a baby who is weening off a narcotic so the hospital will draw these for "patient specific". This is not something that happens in a clinical setting. Steve was asked to explain why 100% of medications are on override list. It is a contingency that will enable the provider to still provide

medication in a situation where communication between systems may have broken down. This is not to be used routinely. A comment made from the commission that this is excellent.

MOTION: Chris Barry moved that the commission approve the request for SCH to expand the use of remote medication order processing for locations specified in its proposal with a written follow up one year to report back on: outcomes data from the quality assurance program looking at any changes in error rates; allocation of workload to support clinical activities; and, assessment of staff. Steve Anderson second. **MOTION CARRIED: 12-0.**

Committee Reports

Technology Committee

Al Linggi provided an update on the status of the Technology Committee. There have been three meetings for about two hours each. We have received excellent input from the different market places on how they currently use these devices and how they would like to use it. There's been a lot of work put in from the committee and especially Lisa Roberts. The committee plans to start the putting this work out there for some stakeholders input. The work is not done but they are moving forward.

Pharmacy Business Practices Committee

The Pharmacy Business Practices Committee met on October 6th to continue discussion concerning Draft PIC and Shared Accountability Rules. The committee reviewed and engaged in open discussion with the stakeholders regarding their comment/concerns.

No definitive action was taken by committee members at this meeting—it was purely carried out as a way to discuss the rule proposals and comments with stakeholders and among committee members. The discussion was very productive and brought forth insights and new ideas into the difficult process of composing these rules. I would like to thank all the stakeholders for their positive input and support as well as the committee members who were all physically present at this meeting.

There is a meeting scheduled for October 30, 2015. We'll continue open discussion and comment review, with the focus being WAC 246-869-062 Responsibilities of the PIC. The goal is to wrap up our preliminary review of the rules proposals and comments without coming to any conclusions as to what the final draft will actually contain, and begin to transition into the next category of BP rules, Quality Assurance. QA and inspection are both addressed in the Accountability rules being discussed, so it will only be possible to compose a final draft when QA is completed by the BPC and the committee writing the inspection rules nears completion of its work.

Inspection Process Rules Committee

Cheryl Adams updated the commission the status and any work that has been done by the Inspection process rules committee. At the last PQAC Business meeting, the commission agreed to combine the two work groups (inspection priorities/ inspection process rule writing). We have requested and received the reports from the Investigations department. We are in the process of scheduling our next inspection meeting. The two chairs feel like the committee is too big. There was a small discussion on the committee size and who should be on this committee. Chris Barry

made it clear he wants to continue to participate in the committee.

Pharmacy Compounding Rules Committee
Chris Humberson updated the commission on where the compounding work is. A second draft was released by DOH before Brittany Mahung left for maternity leave. The comments are being collated right now. However, in October USP released a draft revision which is a substantial change. Chris reached out to the committee members asking them their input on the newly released draft from USP and the next steps for them. The new draft certainly contains significant changes but the concern is that it could be a year before the new draft is released by USP.

Commission Members' Open Discussion and Reports

Commission Member Reports
Sepi Soleimanpour reported:

- She attended the technology committee meeting
- Participated in a couple long term care meetings

Chery Adams reported:

- She was able to participate in a hospital inspection with an inspector
- Cheryl attended the tour provided by Laurie St. Ours at a long term care facility and pharmacy
- She participated in the redraft of the LTC letter
- Attended the WRAPP Training in Tumwater
- Cheryl also attended a WSPA Health Systems leadership meeting and tried to update the laws and rules at this meeting. Thanks to Jeff Rochon who helped her.

Judy Guenther reported:

- She attended the long term care facility tour as well
- Participated in the WRAPP training in Tumwater

Olgy Diaz reported:

- She attended the long term care facility tour
- Assisted Cheryl Adams in drafting the LTC letter

Maureen Sparks reported:

- She sat in via conference call as a listener to the LTC meetings
- Maureen attended an ASHP Pharmacy Technician Training Accreditation visit in Texas

Christopher Barry reported:

- He participated in the LTC project

Dan Rubin reported:

- He has been working hard and chairing the business practice meetings
- He has also been participating in the LTC meetings
- Dan attended the LTC facility tour in Yakima with other members
- He and Al Linggi met with staff at DOH

Elizabeth Jensen reported:

- She took the long term care facility tour
- She has attended via conference call the LTC meetings as a listener
- Elizabeth has attended the business practice meeting
- She will be absent at the December 11, 2015 business meeting she will be moving to a new pharmacy.

Steve Anderson reported:

- Steve attended the meeting of the Oklahoma Board of Pharmacy in Oklahoma City for my interview with the board to complete my pharmacist license requirements for their state. Their board members and executive director asked him to convey greetings to the commission and an open invitation to tour their new building and attend one of their meetings if any of us are ever in the vicinity. He set in on a significant portion of their meeting, including the open disciplinary hearings they conduct as part of their agenda. They face exactly the same issues concerning patient safety as we do.
- He attended the business practice meeting in Shoreline and the one in Lynwood.
- Steve was a panelist on the Pharmacy 500 Professional Identity Panel at the UW SOP for the incoming class.
- October 9th and 22nd he attended the webinars for the draft letter to the legislature concerning LTCF's
- October 23rd Mr. Anderson taught the Intro to Pharmacy Law class to the first year pharmacy students at the UW SOP. In that lecture he emphasized notification requirements for interns, so hopefully we will have at least one class that correctly reports change of address, practice site, and any brushes with the law.

Gary Harris reported:

- He attended the pharmacy business practices meetings
- Gary held a UW Pharmacy Alumni Association retreat planning session at his home a nice potluck and social time.
- He serves on the UW Campaign as Co-Chair for the School of Pharmacy

Nancy Hecox reported:

- She has participated in the technology committee, assisted with the LTC document, and attended the pharmacy business practice meetings
- Nancy did some research at DOH regarding inspections and complaints. She did put together a document on her research and contains UDA information.
- She did a presentation on "Drug Addiction Medicine" for the federal courts here in the state of Washington. Attendees were Federal Officers, Federal AG's, DOC, probation officers, and drug court staff.

Al Linggi reported:

- He facilitated three long term care meetings
- Chaired one Technology committee

Staff Reports

Executive Director

Chris Humberson reported:

- He attended a Take Back Summit Day in Lynwood for the morning session. This was a joint summit including the state as well as Snohomish and King County with many different interested parties and stakeholders.
- Chris also attended a Veterinary Association Meeting in Kent to discuss the FDA Compounding Guidance for pharmacies for veterinary practice.
- He attended most of the committee meetings either in person or on phone
- He has also kept up with his monthly meetings with Jeff Rochon at WSPA
- A couple meeting with Hospital Association
- Participated on legislative work group on opioids in September
- Mr. Humberson did a law CE for WSPA for Technician Day in Renton

Assistant Attorney General
Joyce Roper reported:

- She has been busy with Medical Marijuana integration into the recreational marijuana market. DOH staff has been conducting rules hearings and stakeholder meetings in three primary areas.
    1) Developing a data base which will be voluntary for patients
    2) There is going to be a new certification issued by DOH for "Medical Marijuana Consultants"
    3) Marijuana products safe handling requirements
- Joyce and the AAGs for the Veterinary Board of Governors and the Department of Fish and Wildlife are in consultation on the question of the authority for wildlife rehabilitators who work in partnership with veterinarians and who are regulated by the Department of Fish and Wildlife to possess, store and administer drugs for their work as wildlife rehabilitators.

Pharmacist Consultants
Lisa Roberts reported:

- She participated in the LTC conference calls
- She attended the Drug Take back Summit in Lynwood for the entire day sponsored by DEA and Governor's Office. This was a very interesting meetings and great ideas.
- Lisa has been working with the pharmacy Intern Kyle Wu, today is his last day
- E-prescribing update SureScripts sent out a letter by the Monday after the business meeting in Yakima. She has been working through dozens of programs around 50 of them at this point.

Cathy Williams reported:

- She thanked Lisa Roberts and Chris Humberson for all the support and work they have done with the Intern Kyle Wu.

Kyle Wu reported:

- He has worked on drafting policy brief on USP Compounding draft that came out and he looked at USP 800.
- He spent most of the time working under Chris, Lisa and Cathy to learn about what pharmacists do.

Pharmacist Supervising Investigator
Gordon MacDonald reported:

- Attended the WRAPP Orientation it was very well done. He came away with much greater appreciation for the WRAPP program.
- He gave a Law Presentation to a group of technicians and pharmacists in Spokane
- Gordon either listened in or attended most of the committee meetings
- Met with Jeff Rochon with Mr. Humberson on a monthly basis
- Met with Cheryl Adams regarding the inspection process and some of the challenges the inspectors are facing.

Grace Cheung reported:

- She was assigned investigations only for the past year and half and is happy to be back in the field.
- The main challenge the inspectors face in the field continues to be the gap with unclear rules or previous decisions that were made in the past compared to the present.
- The inspectors really appreciate and need written clarification communication from the commission so we can all be on the same page. This will allow for clarity for all from the pharmacies, pharmacist and investigators.

Open Forum

The purpose of the open forum is to provide the public an opportunity to address the Commission on issues of significance to or affecting the practice of pharmacy and that are not related to topics for which a hearing has or will be scheduled.

Commissioners' open discussion

This is an opportunity for the commission members to openly discuss related to items or issues relevant to commission business/pharmacy practice.

Cheryl Adams commented about how she really liked the process of asking the stakeholders/public for comment after each motion.

She asked if there is a way to shorten the process of reviewing ADDD's? Al's response is that the technology committee is working these things out and there really are different uses of these systems. Most of this is process and we just need to get down to good credible safe process that ensures patient safety and redundancy when the system doesn't work.

Elizabeth Jensen was thinking that even if something is on the consent agenda she does feel an obligation to look through all of them. The idea of all the AUP's that will need to be reviewed causes her a feeling of being overwhelmed.

Dan Rubin mentioned he would like to hear more from public when asked if there were any comments from the stakeholders/public. He also mentioned a concern about electing new Chair and Vice-Chair and felt it was a vague process. Chris Humberson and Christopher Barry both suggested that commission members that are interested in being Chair or Vice-Chair submit their names by Thanksgiving. When the December Commission Packet goes out the names will appear for the other commission members to decide on how to vote.

Christopher Barry wanted to discuss the budget the issue was there was no detail in the spread sheet provided to them and there was a significant difference to the before and after total. Doreen Beebe explained that the information provided to her is usually detailed. This time due to a system update this wasn't provided or available. If she is provided the proper report in the interim she would be happy to share that with the commission. There will be a much more detailed report provided in December.

BUSINESS MEETING ADJOURNED

There being no further business, the board adjourned at 4:45 pm

Respectfully Submitted by:

_____

Leann George, Program Support

Approved December 11, 2015

_____

Al Linggi, Chair

Washington Pharmacy Quality Assurance Commission