STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Olympia, Washington 98504

WASHINGTON STATE BOARD OF PHARMACY  
Business Meeting Minutes  
May 30, 2013  
Department of Health  
Point Plaza East Conference Room 152/153  
310 Israel Rd SE  
Tumwater WA 98501

CONVENE

Chair Christopher Barry called the meeting to order at 9:04 a.m. May 30, 2013

Board Members:  
Christopher Barry, RPh, Chair  
Emma Zavala-Suarez, Public Member  
Gary Harris, RPh,  
Elizabeth Jensen, PharmD  
Dan Rubin, Public Member  
Sepi Soleimanpour, RPh, MBA-HA

Guest / Presenters:  
Josh Bolin, NABP Government Affairs Director  
Thomas West, M.S., RPh, Pharmacy Operations  
for PharmaSyn, LLC  
Karen Headlee, Director of Shelter Operations for  
the Wenatchee Valley Humane Society  
Elizabeth Vincenzi, DVM Washington Federation of  
Animal Care and Control Agencies  
Howard Crabtree RPh, CEO Seattle Pharmacy Relief  
Beverly Schaefer, RPh for Katterman's Sand Point  
Sara Mcelroy, PharmD  
Carlos Lara, TypeHaus, Inc  
Chase Ferguson, Care Pharmacy of the West

Staff Members:  
Joyce Roper, AAG  
Christopher Humberson, Executive Director  
Grant Chester, Chief Investigator  
Pamela Sanders, Pharmacy Investigator  
Tim Fuller, Pharmacist Consultant  
Cathy Williams, Pharmacist Consultant  
Doreen Beebe, Program Manager  
Leann George, Secretary Senior
1.1 Approval of Business Meeting Agenda
1.2 Approval of the April 11, 2013 Business Meeting Minutes
1.3 Approval of the April 16, 2013 Special Meeting Minutes

MOTION: Elizabeth Jensen moved that the board approves 1.1 and 1.2. Gary Harris second. 
MOTION CARRIED: 6-0.

MOTION: Elizabeth Jensen moved that the board approves 1.3. Dan Rubin second. MOTION CARRIED: 6-0.

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

1) NPLEX Monthly Report Acceptance
2) Pharmacies and Other Firm Application Approval
3) Pharmacy Tech Training Program Approval
4) Ancillary Utilization Plan Approval
5) Pharmacy Technician – Specialized Functions Approval
   (a) Evergreen Hospital and Medical Center – Renewal
   (b) Ottersen’s Pharmaceutical Services – Renewal
   (c) Swedish Medical Center
6) Automated Drug Dispensing Device Approval
7) Electronic Prescription Transmission System Approval
8) Sample Drug Distribution Approval
9) Household Pharmaceutical Waste Take Back Program Approval
10) Tamper Resistant Prescription Paper/Pads Approval
   (a) Kaye-Smith Enterprises, Inc.

Items listed under the consent agenda are considered routine agency matters and will be approved by a single motion of the board without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda. Items 3, 4, 6, 7, 8, and 9 were deleted from the agenda.

MOTION: Elizabeth Jensen moved that the board approve items 1, 2, and 5, and remove Item 10 for discussion. Dan Rubin second. MOTION CARRIED: 6-0.
10) Tamper Resistant Prescription Paper/Pads Approval
   (b) Kaye-Smith Enterprises, Inc.

Elizabeth Jensen asked about the process for verifying that someone is valid to order paper. Vendors retain a copy of a person ordering papers license. Doreen Beebe clarified that they are asked to take reasonable steps to verify that the person ordering has a legal right to order the paper. There are no rules that establish a specific process. Through legal advice we were advised that we are approving the paper not the vendor. There is the expectation that the vendor is taking steps to verify the purchaser. Dan Rubin wanted clarification that this consent agenda item had no connection to the presentation regarding tamper resistant paper later on the agenda. Doreen Beebe assured him it was two very separate items.

**MOTION:** Dan Rubin moved that the board approve items 10. Sepi Soleimanzpour second.
**MOTION CARRIED:** 6-0.

**REPORTS**

Board Member

*Dan Rubin reported:*
- Dan will be going to the Utah School for alcoholism and other drug abuse. He invited other board members and staff to share issues with him regarding how to handle disciplinary matters such as; court action, investigations and anything else regarding drug use and treatment.

*Gary Harris reported:*
- Gary Harris attended Katterman’s lecture and The University of Washington Deans reception a while back he saw a lot of colleagues there.
- He wanted to share what a privilege and what a great time it’s been serving on the Board of Pharmacy.

*Elizabeth Jensen reported:*
- She attended the NABP Annual Meeting what a great opportunity to meet a lot of people. The topics were very current pharmacy issues. There were a lot of really interesting CE topics provided at this meeting.
- A great topic was about compounding versus manufacturing. The Executive Director of the Iowa Board of Pharmacy spoke of investigations he has been doing at compound pharmacies.
- One CE topic that Elizabeth found interesting was regarding Online Pharmacies and how to distinguish legitimate from illegitimate sites. Only 2 to 3 percent are legitimate pharmacies. It is really tough to distinguish the difference.
- Another topic was about veterinary pharmacy issues this is big and will get bigger. There was discussion about helping Pharmacy schools add this to the program to educate our future pharmacists.
Christopher Barry reported:

- Been reviewing cases that are involved with gray market he feels will be great to have more discussion regarding the gray market.

Executive Director

Christopher Humberson reported:

- The regular legislative session ended April 28th and they are now in special session. Sixteen pharmacy related bills were introduced with several passed into law. More on that in our legislative update session.
- Chris attended the WSPA Hospital Leadership Conference at Valley Medical in Renton to participate in discussions related to hospital pharmacy issues and fielded questions from the audience.
- He spoke at the WSPA New Drugs/New Laws session in Spokane on April 21st; a well attended session and will be attending the Northwest pharmacy Conference in Idaho this coming weekend to speak on Sunday. Worked with WSPA, the Veterinary Board of Governors and WSPA to include a CE on veterinary medicine related to pharmacy practice on the program on Friday morning.
- Chris attended two bill signings on behalf of the Board of Pharmacy, on HB 1800 Compounding of Medications and HB 1155, Electronic Transmission of Prescription information. At the bill signing Chris was also introduced to Senator Randy Becker, Chair of the Senate Health Care Committee who is looking forward to working with the Pharmacy Commission.
- After the initial posting and response, none of the candidates who applied for the rules position were suitable, so we are reposting the position to cast a wider net of qualified candidates, meanwhile Doreen is doing her usual fantastic job in managing this area for the board.
- Chris attended the NABP National Meeting in St. Louis with Elizabeth Jensen as the official board delegate. Elections for officers were held and seven resolutions were offered and passed after discussion, including Compounding, PBM accountability, Medical Office Compounding and one supporting the restriction or elimination of Quotas and Metrics being used in a pharmacy business setting. Oregon was awarded the Fred T. Mehaffey Award for their work on Business/Drug Outlet rules and the support of NABP to work with all boards of pharmacy nationwide was confirmed.
- Several interesting programs were presented on Pharmacy Compounding, Veterinary Pharmacy Issues and supply chain variations, Internet Pharmacy issues, Virtual Wholesalers and Distributors, Biosimilar Drugs, as well as the business meetings to discuss and vote on measures and elect officers.
- He have been assisting in any way possible regarding the OII search for a new Chief Pharmacy Inspector and we will be involved in the interviewing process for this critical hire.
- PQAC Update: Been busy speaking to interested parties regarding the application process for a seat on the Pharmacy Commission, with the goal of having a packet of candidates to submit to Governor Inslee’s office by July 1st for appointment. These would include a successor to Donna’s seat, as well as five other pharmacist members, two public members, and one pharmacy technician member. We have been assured that we will have some in place by our
September 5th meeting in Spokane as eight members will be required for a quorum to do business.

Consultant Pharmacists
Tim Fuller reported:
- There have been a number of Emergency Planning and response activities and one was a full scale exercise last week.
- Also related to Emergency Planning we are developing operational plan between local health jurisdiction and pharmacies.

Chief Investigator/Field Investigator
Grant Chester reported:
- Grant completed our six month (December 2012 – May2013) Pharmacy Inspection Customer Satisfaction Survey which is part of the information packet you have already received. The averages for Items 1 thru 6 have had a slight drop over the past 2 years which I believe is partially due to the influx of new pharmacist investigators. Customers that were very satisfied or satisfied dropped from 98.9% to 98.2%.
- The Board of Pharmacy’s disciplinary summary for the past four and half biennium. The number of complaints has risen and at the current rate will exceed 900 for the 2011-2013 biennium. Typically we close 77% of all complaints either before or after investigations. About 16% of complaints receive either informal or formal discipline and about 7% receive Notice of Corrections.

Pam Sanders reported:
- Compounding course online training target is for investigators to complete the course by the end of July. This course is a very interesting, intense training.
- She will be attending the Utah School of Alcoholism and other drug dependencies.
- Pam has been participating in the Emergency Response Planning activities.

PRESENTATIONS

National Association of Boards of Pharmacy – Compounding Action Plan and Pharmacy eProfiles
Chris Humberson introduced Josh Bolin, NABP Government Affairs Direct who presented this plan to the board.

Overview:
- Current Nonresident Pharmacy Regulatory Structure
- Existing NABP Infrastructure
- Enhancement of Existing Services
- Developing a Unified Resource
- Assistance from Member Boards

Nonresident Pharmacy Licensure Process Prior to NECC:
- Submit application and fee to the board
• Provide proof of licensure from state of domicile
• Submit copy of inspection or proof of inspection
  – Some states require on initial application, but not renewals

Problems with Current Nonresident System:
• Boards rely on resident state board’s oversight and inspection processes
• Boards differ in their oversight due to differences in
  – Regulatory Structures
  – Human Resources
  – Fiscal Resources
  – Inspection Processes
• Boards have had to make licensing decisions without complete information
• Due to varying resources, the weakest link breaks the entire system

Existing NABP Infrastructure:
• License Verification Services
• Disciplinary Clearinghouse – HIPDB reporting
• License Transfer for Pharmacists
• Accreditation Programs
• Contracted State Inspection Services
  – Resident Nonresident

Solution: Enhance Existing Infrastructure Verified Pharmacy Program (VPP):
• Extrapolate the successes of the Electronic Licensure Transfer Program® and apply it to nonresident pharmacies and facilities
• Create an e-Profile for each pharmacy and link to e-Profiles for key pharmacy personnel
• Verify that a qualified inspection has occurred and include this data within the pharmacy e-Profile

Need Assistance from Member Boards:
In order to make this work, we need to
• Establish and identify uniform inspection standards that will satisfy all states
  – USP 797/795 → Routine Inspections
• Establish these uniform inspection standards similar to competency assessment and accreditation programs
• Share license status changes and disciplinary actions in real time (NABP existing technology)

VPP – A Unified Resource for States:
• Verify pharmacy licenses (resident/nonresident)
• Verify pharmacist-in-charge licenses (resident/nonresident)
• Verify that a qualified inspection has occurred, either by NABP or the resident state in accordance with the established uniform standards
• Report any disciplinary action by another state
• All information will be packaged through VPP, within the Board e-Profile Connect interface

Josh Bolin asked the board members to provide him feedback on what he has presented. NABP wants the boards to be engaged. The goal is to have –a qualified inspection for these pharmacies. To reach this goal NABP is again asking that board members provide their thoughts and feedback on what pieces would make –a qualified inspection.
PharmaSync – Remote Order Entry
Tim Fuller led this presentation and introduced Thomas West, M.S., R.Ph, V.P. Pharmacy Operations for PharmaSyn, LLC. He presented the proposal to provide remote prescription processing services from its pharmacy in Spokane, WA to its licensed pharmacy in Milwaukie, Oregon.

Overview:
- PharmaSync, an Oregon LTC pharmacy, wishes to utilize a facility in Spokane to supplement their current prescription processing operations at the PharmaSync pharmacy in Milwaukie, Oregon. The orders processed would only be for the Oregon pharmacy. The pharmacy technicians at the Spokane operation will be supervised by a pharmacist and a three technician to one pharmacist ratio will be maintained. All pharmacy technicians and the pharmacist will be licensed in Washington State. A pharmacy license is being processed for the Washington facility.
- The requestors state that they have been unable to find pharmacy technicians in Oregon who have the skills to operate their new LTC Framework computer. That is the reason to utilize pharmacy technicians in Spokane.
- The Washington PharmaSynch facility will operate according to the following criteria.
  1) No storefront retail pharmacy operation will be established in Washington.
  2) No prescriptions for WA residents will be processed in this facility.
  3) The purpose of the facility is to supplement pharmacy data entry functions through remote order processing securely linked to the PharmaSync pharmacy system in Oregon.
  4) The Spokane facility will be -drugless- and will not have drugs or equipment for processing prescriptions.
- They have licensed the Milwaukie, Oregon pharmacy. They will license the Spokane facility as a nonresident retail pharmacy. The Oregon Board is about to post several new rules concerning Central Pharmacies, Central or Remote Processing, and Workload Balancing. Expect adoption by August.
- The PharmaSync request is for approval of the PharmaSynch Spokane facility to remotely process LTC medication orders. The request provides policies and procedures (included) that satisfy the Washington State Board Guidelines for Remote Processing of Medication Orders.

After listening to the presentation the board had some concerns. The plan seemed to change and the information they provided didn’t match the presentation. They also did not have a utilization plan.

The board tabled this presentation until the July 18, 2013 meeting. They would like to see updated documents on what exactly they are asking and a utilization plan.

Euthanasia Training Program
Karen Headlee, Director of Shelter Operations for the Wenatchee Valley Humane Society presented the euthanasia-training program and supplemental training materials for board approval.

Course Outline:
- Training shall consist of two parts; lecture and practical training.
• It will be taught by Karen Headlee, Director of Shelter Operations. (The first class will be instructed by Dr. Jerry Winters DVM in which Karen Headlee will attend, then Karen will teach all subsequent classes thereafter.)
• There will be a minimum of a 3 hour lecture to go over the Wenatchee Valley Humane Society Training Manual and 1 hour demonstration and hands on practice of techniques. If the materials cannot be covered sufficiently in the allotted four hours, additional time will be scheduled. Each Employee of the WVHS will have to log 3 dogs and 3 cat euthanasia’s with the Director of Shelter Operations before getting their certification.
• Trainees will be required to have and read the training manual developed by the Wenatchee Valley Humane Society. They will also have access to “The Humane Society of the United States Euthanasia Training Manual” by Rebecca H. Rhoads, DVM
• The details in these references shall be the basis for the training lecture.
• After completion of the training program, the student must pass a written test with a passing score of 75% or greater and pass a practical test consisting of euthanasia of a dog and a cat. The student will explain the complete process step-by-step while performing the procedure.
• Verbalized questions will focus on safety issues and what will be done if something goes wrong. After training is completed, a certificate will be awarded: – Certificate of Successful Completion of Washington State Board of Pharmacy Approved Euthanasia Training Course.
• The Wenatchee Valley Humane Society will keep a log of all people certified through this course and keep the record for 2 years after certification.

MOTION: Dan Rubin moved that the board approve Shelter Operations for the Wenatchee Valley Humane Society’s euthanasia-training program and supplemental training materials. Gary Harris second. MOTION CARRIED: 6-0.

Euthanasia Training Program
Elizabeth Vincenzi, DVM presented the Washington Federation of Animal Care and Control Agencies euthanasia-training program for board approval.

GOALS OF TRAINING
• Develop understanding of how to perform euthanasia correctly and humanely
  – Washington State laws
  – What is euthanasia
  – Drugs used
  – Injection techniques
  – Addressing problems
  – Verifying death
  – Developing protocols
  – Creating a space for euthanasia
  – Protecting yourself physically and emotionally
  – Record keeping requirements

AVMA PANEL ON EUTHANASIA
• IV injection of barbituates (sodium pentobarbital) is the preferred method for dogs, cats, small animals, and horses.
• Sodium pentobarbital is the only controlled substance allowed by Washington State Law for registered shelters to order and use. Can only be used for euthanasia.
SITE SECURITY FOR CONTROLLED SUBSTANCES
- Controlled substances (and legend drugs) must be stored in a substantially constructed, locked cabinet or drawer.
- If controlled substances are to be carried in a vehicle, field supply should be kept in locked metal box securely attached to inside of vehicle.
- Access to the drug supply should be limited to supervisors, veterinarians, and CETs
- Appropriate logs recording:
  - Main inventory
  - In-use inventory
  - Every 6 months inventory - WA
  - Biennial (every 2 years) inventory - DEA

EUTHANASIA CRITERIA
- Community expectations of animal shelters have changed over time
- Shelters should create criteria and protocols to address ways of increasing adoptions, reducing the number of unwanted animals, and selecting animals for euthanasia.
- Documentation of numbers can help educate the community on overpopulations and spur community action
- Age, health, temperament, physical condition, behavior, available space, breed
- Is there hope for alleviating pain or distress?
- In the present condition, does the animal pose a health or safety risk to other animals or people?

OVERVIEW OF EUTHANASIA
- Reason for euthanasia
- Behavior/medical issues to know about?
- Confirm that you have the right animal
- Scan for microchip
- Choose injection site
- Choose restraint method appropriate for the animal and injection site
- Perform euthanasia
- Confirm death

MOTION: Elizabeth Jensen moved that the board approve the Washington Federation of Animal Care and Control Agencies euthanasia-training program. Sepi Soleimanpour second. MOTION CARRIED: 6-0.

NAPLEX Study Plan
The pharmacy intern requesting authorization to re-take the North American Pharmacist License Examination was not able to make it to the board meeting so this item was postponed.

Non-Routine Collaborative Drug Therapy Agreements
Collaborative Drug Therapy Agreement (CDTA) Background:
Collaborative drug therapy agreements (CDTAs) must comply with RCW 18.64.011(23) definition of the practice of pharmacy and WAC 246-863-100 pharmacist prescriptive authority—prior notification of written guideline or protocol required (included).
Many years ago the CDTA were pharmacy-based with a contact pharmacist for each pharmacy having a CDTA. Ten years ago the board defined the pharmacist CDTAs as individual “credentials”. DOH staff set up a credentialing system to document the agreements for the individual pharmacists.

CDTAs of individual pharmacist collaborative agreements are recorded in the DOH credentialing computer. To process the greatly increasing numbers of CDTAs, however, the staff has worked with corporate entities and large pharmacies to help manage the paperwork associated with the credentialing process. Corporate management or pharmacy owners have now assumed control of pharmacist collaborative agreements from the individual pharmacist and have used the pharmacist CDTAs to implement questionable practices that could negatively impact public health and safety. Pharmacists have complained to the board staff that they are coerced to meet quotas without the resources needed. Communication with the CDTA authorizing physician is managed by the corporation or owner and the individual.

**Seattle Relief Agency Immunization Agreement**
Seattle Pharmacy Relief (SPR) provides temporary pharmacists as needed by pharmacies. The CEO Howard Crabtree wants the relief pharmacists to have immunization agreements so the relief pharmacists can maintain immunization services at the pharmacies. Howard submitted his immunization agreement to include the relief pharmacists. With a few minor changes the submitted immunization collaborative agreement is acceptable. The issue that has arisen is—who owns the immunization collaborative drug therapy agreement?

After further discussion the board has concerns that this has become a corporate to prescriber agreement not a pharmacist to prescriber agreement. Tim Fuller and Chris Humberson will work with Howard Crabtree on how to resolve this. Agreements will go back to individual pharmacist and prescriber relationship. It was suggested that Howard ask his prescriber to develop a CDTA with each pharmacists at the relief pharmacy.

**Treatment of Minor Ailments in an Ambulatory Setting**
Beverly Schaefer, RPh for Kattermans Sand Point Pharmacy shared a power point presentation with the board regarding her proposal for the board to accept this non-routine CDTA.

**History of Project**
- FDA consideration of 3rd class of drugs
  - Background
  - Testimony March 2012
  - Results – no opinion!
- How can we move forward locally?
  - Infrastructure: CDTA in Washington
  - Need: Develop list of potential drugs that pharmacists can use to treat minor ailments
  - Infrastructure + Need = Action!

**Overarching Goals**
- Increase access to health care using pharmacists’ clinical skills
- Decrease cost to the health care system
- Create additional revenue sources for pharmacists and WSPA

**First Steps**
• Identify unmet needs
  ○ Minor ailments
  ○ Patients in gray area of health care system
  ○ Experience in pharmacy/working with patients
• Utilize relationship with providers
  ○ Floated clinical pharmacist idea to several area MDs
  ○ Listened for MD concerns about pharmacist ability to initiate patient care

For the Patient
• Develop Patient Handout
  ○ Disease-state focused
  ○ Symptoms
  ○ Causes
  ○ Self-care
  ○ Treatments
  ○ Prevention
  ○ When to see provider
  ○ Increase patient awareness of pharmacist clinical consultation

Revenue Stream
• Individual Pharmacist
  ○ Charge for the services at selected market price
• WSPA
  ○ Charge for certificate training program

Next Steps
• Pharmacists in WA
  ○ Utilize educational opportunities
  ○ Confer with practitioner of choice for CDTAs
  ○ Use the CDTA list as a starting point
• Outcomes Measurement
  ○ Publication
  ○ Share model with others
• Beverly Schaefer, 1st Clinical Community Pharmacist
  ○ Expand program

MOTION: Elizabeth Jensen moved that the board accept Katterman’s Sand Point Pharmacy’s Treatment of Minor Ailments in an Ambulatory Setting. They are asked to report back after a year and provide the board with an update. Dan Rubin second. MOTION CARRIED: 6-0.

The board adjourned for Executive Session and Case Presentations at 12:00 p.m.

The board reconvened from Executive Session and Case Presentations at 1:30 p.m.
PRESENTATIONS  Cont’d
Tamper Resistant Prescription Pads/Paper
Carlos Lara, representing TypeHaus, Inc. demonstrated FormJet Prescription Secure, and a printing system intended to meet the tamper resistant security features required in RCW18.64.500.

About TypeHaus
- Developer of printing solutions for small, medium and enterprise business.
- Niche expertise in PCL5 (printer command language) print stream transformation and manipulation.
- Solution and technology partner with major printer manufacturers.
- Custom & ready-to-ship solutions: 1D and 2D barcodes, electronic forms, secure check printing, prescription printing and other elements to extend printing capabilities.

Reduce Costs
Tamper Resistant Paper
- Tamper resistant paper cost an average of $0.14 to $0.20 per page.
- Security risk with potential theft of tamper resistant paper.
- Blank paper cost: $0.001

Printer Hardware and Toner
- Avoid costly thermal printers.
- Use cost effective printer hardware.
- Eliminate costly specialty toner.
- Increase printer utilization.
- Eliminate tray locks.

Overview:
- Designed to prevent unauthorized copying of a completed prescription.
- Designed to prevent the erasure or modification of information written on the prescription.
- Designed to prevent the use of counterfeit prescriptions.

AuthentiGrid Security
- Maximize detection in order to minimize fraud.
- Taking security one step further.

FormJet PRO
- Resides between host application and the printer.
- FormJet solutions arrives pre-programmed.
- Regular printing is not affected.
- No third party software is required.
- Device is printer specific.
- Recalibration process (new printer)
- FormJet PRO adds security features as necessary and passes print job to the printer
- Quick and easy installation.

FormJet Enterprise
- Simplify enterprise wide deployment.
- Centralizing configuration and management.
- Easily supports over 100 printers.
• New prescription printers can be added on the fly.
• Small form factor PC.
• Yearly license model (per printer).
• No third party software required.
• All support provided by TypeHaus.

The board had serious concerns regarding the security of this printing system. This is on plain paper and there is no thermo chromatic ink. Some board members felt this could be confusing for pharmacists.

**MOTION:** Gary Harris moved that the board deny the proposal for TypeHaus Inc’s. use of FormJet Prescription Secure, printing system. Elizabeth Jensen second. Emma Zavala-Suarez abstained. **MOTION CARRIED: 5-0.**

**Automated Drug Distribution Devise Approval**
Chase Ferguson for Senior Care Pharmacy of the West presented a proposal for the non-resident pharmacy to provide services to multiple Avalon Health Centers located throughout the state via ADDDs.

**The Need**
• More demands for care givers time has created a greater need for pharmacies to have more medications readily available.
• Automated dispensing cabinets serve as a bridge between pharmacy and nursing to help overcome this issue.
• Why does this need extend beyond hospitals?
• Is it practical in long term care?

**The Problem**
• First generation cabinets have stationary/open pockets.
• This means very little security.
• Chance for miss-placement of drugs.
• Pharmacy labor moving to machine site for stocking.

**The Solution:**
Pyxis® CUBIE® System
• SEPERATION OF DUTY
  – Licensed pharmacy personnel **stock** the CUBIE® in the pharmacy, using the CUBIE® Replenishing station.
  – Nursing staff **load** the CUBIE® into the Pyxis® machine.
    • They can’t load it incorrectly.
    • They can’t touch the medication.
• SECURITY
  – The CUBIE® allows the medications to be securely transported.
  – A barcode on the CUBIE® used with the Pyxis® machine means the right drug gets stored in the right place.
— Once a nurse appropriately authenticates her logon and requests the pre-approved dose, he/she will only have access to the right drug.

**MOTION:** Elizabeth Jensen moved that the board approve the proposal from Senior Care Pharmacy of the West, the non-resident pharmacy to provide services to multiple Avalon Health Centers located throughout the state via ADDDS with the amendments suggested by the board. The amendments are; to clarify for emergency use only, terminate users and patients no longer at the facility within 12 hours and change authorized users to licensed pharmacist and pharmacist’s technicians. Gary Harris second. **MOTION CARRIED: 6-0.**

**DISCUSSIONS**

2013 Legislative Wrap-up and Rules Update
The board discussed implementation of legislation and updates on rulemaking activities.

**SHB 1182** Adds pharmacists to RCW 69.41.030 as a practitioner with CDTA; we are already in RCW 69.50 effective July 28, 2013.

**HB 1609** Renames the Board of Pharmacy to Pharmacy Quality Assurance Commission, increasing membership from 7 to 15 members. (10 pharmacists, 4 public, 1 technician) effective date 07/28/13 except section 45 (UDA) which becomes effective on 07/01/16.

**EHB 1538** Allows a registered nurse who is licensed under chapter 18.79 RCW and who is an employee of a local health department or district or a clinic or facility under contract with a local health department or district, may dispense a drug or device for purposes of prevention or treatment of a communicable disease or family planning. **Reintroduced and retained in present status in senate Rules Committee for 2nd reading on 05/13/13.**

**HB 1800** Allows the compounding of medications for physician offices, ambulatory surgical centers, or ambulatory surgical facilities to be used by a physician for ophthalmic purposes for non-specific patients effective 05/07/13.

**EHB 1808** Addresses the situation where a legal amount of marijuana is found at a retail store that holds a pharmacy license. The store manager or employee must promptly notify the local law enforcement agency, after notification to law enforcement the store manager or employee must properly dispose of the marijuana effective 07/28/13.

**HB 2022** Requires pharmacies and insurers to pay for up to one year’s supply of birth control medications at a time. **Reintroduced and retained in present status in house Rules Committee for 2nd reading on 05/13/13.**

**ESB 5104** Places epinephrine auto-injectors in schools, companion bill to HB 1578 effective 07/28/13.

**SSB 5148** Allows drug manufacturers, drug wholesalers, hospitals, pharmacies, nursing homes, boarding homes, adult family homes and medical clinics, to donate (return) drugs in an original sealed and tamper evident package, or open package, if it contains a single unit doses that remain intact (excluding controlled substances and with at least 6 month remaining on the expiration date). These donations may be made to a pharmacy for redistribution without compensation or the expectation of compensation. The pharmacy
may redistribute the drugs to another pharmacy, pharmacist, prescribing practitioner for use to treat uninsured and low income individuals effective on 07/01/14.

SB 5149  Concerning crimes against pharmacies, creates a one year sentencing enhancement for a person convicted of a robbery offense committed against a pharmacy effective on 07/28/13.

2SSB 5213  Requires managed care plans contracting with Medicaid to require that any patient with five or more prescriptions be placed in an automatic review process with a primary care provider to ensure appropriateness and screen for drug interactions at least annually effective on 07/28/13.

SSB 5416  Modifies RCW 69.41 and RCW 69.50 to allow electronic transfer of schedule II controlled substances and standardizes language. Substitute bill standardizes language in RCW 69.41 and RCW 69.50 effective 07/28/13.

SB 5459  Under certain circumstances, a pharmacist is allowed to dispense up to a 90 day supply if the valid prescription specified an initial quantity of less than a 90-day supply followed by refills. The pharmacist must notify the prescriber if dispensing an increase in dose units. Companion bill HB 1583 effective 07/28/13.

SSB 5524  Authorizes Washington pharmacies to fill prescriptions written by physician assistants in other states. Companion bill HB 1596 effective date 07/28/13.

SB5934  Recognizes limitation on individual pharmacy providers and allows for facilitated referral. Referred to senate Health Care Committee on 05/15/13.

Next major legislative date is June 11, 2013 which is the last day allowed for this special session.

Delegation of Authority
The board reviewed and discussed delegation of signature authority to department staff and delegation of decision-making under RCW 18.130.050(8) to act on behalf of the board on summary actions when a respondent is prohibited from practicing in another state due to unprofessional conduct.

MOTION: Dan Rubin moved that the board renew its delegation of signature authority to department staff and delegation of decision-making under RCW 18.130.050(8) to act on behalf of the board on summary actions when a respondent is prohibited from practicing in another state due to unprofessional conduct. Emma Zavala-Suarez second. MOTION CARRIED: 6-0.

Correspondence
The board discussed any correspondence received or distributed.
  a) Letter requesting clarification of patient counseling requirements.
  b) Just Culture Transformation – PowerPoint
  c) Response to Petition – Gerald Steel, PE – King Co Citizens Against Fluoridation, and WA Action for Safe Water

OPEN FORUM
The purpose of the open forum is to provide the public an opportunity to address the board on issues of significance to or affecting the practice of pharmacy that are not related to topics for which a hearing has or will be scheduled.
There being no further business, the board adjourned at 4:47 pm

PRESENTATION OF AGREED ORDERS

CLOSED SESSION

Next scheduled business meetings: July 18, 2013 – 9:00 a.m.
Blackriver Training and Conf Center
Puyallup Room
800 Oakesdale Ave SW
Renton, WA 98057

Respectfully Submitted by: Leann

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George, Program Support
Approved on July 18, 2013

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Christopher Barry, Chair
Washington State Board of Pharmacy