President Stanton G. Ades called the Public Board Meeting to order at 9:00 a.m.

Attendance

<u>Commissioners Present</u>: Stanton G. Ades, W. Irving Lottier, Jr., John Balch; Melvin Rubin; Raymond Love; Jeanne Furman; Wayne Dyke, Ramona McCarthy-Hawkins, and Donald Yee

Commissioners Absent: Rev. William Johnson

Board Counsel: Paul Ballard, Assistant Attorney General and Linda Bethman, Staff Attorney

Board Staff: LaVerne G. Naesea, Executive Director; James Slade, Legislative Officer; Deitra Gail, Compliance Specialist; Joan Lawrence, Public Information and Education Officer; Shirley Costley, Personnel/Fiscal Officer and Latonya Dickerson, Board Secretary

Guests: Kathryn Lavriha, Barr Labs; Liz Pujolas, NACDS; and Howard Schiff, MPhA

Recusals

President Ades asked Board members to indicate if they had any conflicts of interest with agenda items.

Corrections and Approval of Minutes (4/16/03)

Page 2.

- -Second line, change the word 'committee' to 'bill';
- -Under Bioterrorism Task Force section, tenth line, should read "Dr. Love stated that the Task Force identified key Board members who will be activated and deployed to the...;
- -Under Canadian Importations, third line, should read "Federal Bills have been introduced and are based on the premise that it is not a <u>legal</u> practice to <u>import these</u>..."

Page 5

Under PEAC section, second line, 'Hannibal' should read 'Handelman'; and delete the sentence "The meeting will take place in the evening to allow appropriate time to review cases".

Page 6, third paragraph, change "or unlabeled" to "labeled"; under the heading Foreign Graduate Requirements, second paragraph delete last sentence.

Page 7, heading Licensing Questions, last sentence should read "The Board asked Mr. Ballard to respond that the veterinarian may only dispense medications to her own patients"; third paragraph, change "valves" to "vials"; Under Inactive Status for Retirees, should Read "The Board decided not to have an inactive status, but to add inactive pharmacists on the mailing list to receive updated information; under the heading Privacy Notification delete the word give, and add an apostrophe to the word months.

Throughout the minutes, change "HIPPA" to "HIPAA".

Page 8, heading Council of Boards Report, first line should read "Council of Boards".

Dr. Love moved to accept the April 16, 2003, meeting minutes with the corrections listed above. Mr. Melvin Rubin seconded the motion. Motion passed.

President/Executive Committee Report

Nominations/Elections Results

The election results held at the Board meeting, April 16, 2003, included Mr. Ades, President, Mrs. Furman, Treasurer, and Mr. Rubin, as Secretary. The term for each officer will begin July 1, 2003.

Bio-terrorism and Emergency Preparedness Task Force

The focus of the Bioterrorism meeting on April 18, 2003 was to respond to a request from Arlene Stephenson, DHMH regarding the Board of Pharmacy sharing volunteer names and contact information with the local health departments. The Board will train the Local Health Department (LHD) liaison, defining roles and responsibilities of the liaison. Future Phase I training, and additional funding for training issues were also discussed.

The Board received a letter from Health Resources and Services Administration stating that they will provide approximately \$26,000,000 to support the training of a workforce of healthcare professionals to address Bioterrorism and other public health emergencies. There will be a technical assistance workshop on available funds and how to apply Wednesday, May 28, 2003 in Washington, D.C. The Boards are eligible to apply for a component of the funds. The task force recommends to the Board to apply for the funding. Dr. Love recommendation was to form a joint venture with the School of Pharmacy to obtain joint funding.

President Ades announced an surprise drill at the end of July involving the Board, DHMH, Mema, and a local health department representative to focus on communication.

The next Bioterrorism Meeting is Friday, June 6, 2003.

Incident Command Systems and Public Health

The Bioterrorism Task Force members will attend the Incident Command Systems workshops scheduled May 28, 2003, June 3[,] 2003 and June 5, 2003. The workshop will provide professionals assigned to make decisions in emergencies or crisis management with working knowledge of Incident Command Systems (ICS) as it applies to the Public Health environment.

Meeting with Baltimore City on Naloxone

The Baltimore City Health Department received funding for a program, called "Staying Alive". This project is to reduce the risk of narcotic overdose. Physicians would prescribe naloxone for partners of addicts and train them on how to administer it. The partner will then administer the drug to the addict during an overdose.

The Baltimore City Health Department wrote the Office of the Attorney General a letter asking the following questions:

(1) Would a physician who prescribes naloxone as part of the Staying Alive

program be subject to criminal prosecution or professional censure?

(2) Would an individual to whom naloxone is prescribed be vulnerable to criminal prosecution if that individual administered the drug to someone experiencing a heroin overdose?

The Office of the Attorney General responded to the questions by stating

- (1) A physician who prescribed naloxone to a participant in the proposed Staying Alive program, for treatment of that participant, would not be liable to criminal prosecution or professional censure. However, if the physician prescribed the drug to a participant with the understanding that the participant would administer the drug to another individual who is not a patient of the physician, the physician may be subject to criminal prosecution and disciplinary action for aiding the unauthorized practice of medicine and for violation of State laws relating to prescription drugs.
- (2) Similarly, a participant in the program would not be liable to criminal prosecution if the participant were prescribed naloxone through the program for the participant's own use. However, if the participant were prescribed the drug, on the understanding that he or she would administer it to another unidentified person, the participant may be subject to criminal prosecution for the unauthorized practice of medicine, for the unlicensed provision of emergency medical services, and for violation of State laws pertaining to prescription drugs.

Board Vacancies

The Board has vacancies open for the chain and consumer positions.

Mr. Lottier's term expires April 30, 2003. However, he has not been replaced yet.. Mrs. Anna Liberman, of the Nominations Office is reviewing vacant positions.

Board Action

The Board passed a motion to send a letter to the Nominations Office asking the status of appointment to the chain and consumer positions.

Executive Director's Report – LaVerne Naesea

Staff Updates

Ms. Naesea reported that effective July 1, 2003, Mr. Jim Slade will be employed 100% for the Board of Pharmacy. Mr. Slade will provide training and supervision during the first legislative session to the new Legislative Officer for the Board of Social Work.

DHMH personnel staff conducted a desk audit for Mr. Slade last week. The Board of Pharmacy is working on an upgrade for Mr. Slade.

Effective July 1, 2003, Ms. Tamarra Banks will be returning to the Information Technology Unit fulltime. Ms. Naesea said that several alternatives for assigning a permanent Licensing Unit Supervisor are being considered.

Office of Administrative Hearings formula for fees

The estimate cost per case for referrals to the Office of Administrative Hearings (OAH) is \$13, 803. The OAH estimates how much each case will cost based on prior cases held. The Agency is required to project two years in advance the number of cases each Board anticipates sending to the OAH. If the Department does not exceed the estimated number of cases, the money is still taken from Boards' budget and forwarded to OAH. If the Board of Pharmacy begins sending cases to the OAH, fees may need to be increased again.

Buprenorphine Meeting –Med Chi

Ms. Naesea, Mr. Lottier, and Mr. Freedman of DDC attended a briefing on buprenorphine on May 19, 2003 at Medical and Chirurgical Faculty of Maryland (MedChi). The FDA presented an orientation on the new drug, which can be prescribed by physicians to addicted patients. Mr. Lottier reported that the meeting was well attended. The purpose of the meeting was to make physicians aware of the special training needed to be able to use buprenorphine in their office. There is a mandatory 8-hour CEU training course for participating physicians. The training can be completed online. There are 51 physicians in Maryland qualified to write buprenorphine prescriptions. Twenty-three of the qualified physicians are located in Baltimore City.

Incidentally, Maryland has the largest two-year drop in emergency room treatment for narcotic overdoses. This reduction is attributed to the methadone program. Buprenorphine is supposedly better than methadone because the patient does not have to go to a center to get the dosage every two or three days. The patient is able to get a prescription at a pharmacy. By adding naloxone to the buprenorphine, the abuse potential is reduced. Each physician has a maximum of 30 patients they are allowed to treat at one time. A copy of the CEU disk was given to physicians. Ms. Putz will be reviewing the CEU disk. Ms. Naesea received a business card from the company that manufacturers buprenorphine. The Company gave the Board permission to put its name and contact information on the BOP website. Any pharmacy can buy and dispense buprenorphine. Pharmacy owners are required to make sure the physician is certified to write prescriptions for the drug and can call a special DEA phone number to verify if a physician is certified to prescribe buprenorphine. The listing of eligible physicians and their phone numbers are available on the Internet

The initial treatment is given in a doctor's office when the physician prescribes buprenorphine. The pharmacist should give specific information to the patient. There will be an article in the BOP Newsletter in July.

<u>Dedication of New Pharmacy School Building</u>

Mr. Dyke and Mrs. Naesea attended the dedication of a new Pharmacy School Building at the University of Maryland. The building will be used primarily for research. The pharmacy school has the top two floors and the other four floors are for the medical school. They will be sharing resources in the basement of the building. Ms. Naesea reported that the reception was very nice.

NABP Survey

Ms. Naesea requested NABP to do a survey of Pharmacist Compliance Officers throughout the country to find out the average salary.

Board Action

The Board passed a motion to make the above mentioned request of NABP.

NABP Annual Meeting

Mrs. Furman reported on the resolutions submitted during the NABP 99th Annual Meeting held May 3-7, 2003, in Philadelphia, PA.

- Resolution No. 99-1-03, Association Name Change, Committee recommendation was not to pass. The Executive Committee will study the feasibility of NABP changing its name.
- Resolution 99-2-03, mandatory Continuing Education on Medication Safety,
 Committee recommendation was not to pass. NABP encourage its member boards of
 pharmacy to require, for license renewal, the completion of a minimum of two (2) hours
 of continuing education programming on the topic of medication safety.
- Resolution 99-3-03, Limited Access to Prescription Medications, Committee recommendation was to pass. The NABP Executive Committee in collaboration with the Food and Drug Administration (FDA) and the Pharmaceutical Research and Manufacturers of America (PhRMA) will commission a task force to study the public health consequences of restricted access policies and programs.
- Resolution No. 99-4-03, Changing Role of Pharmacists, Committee recommendation was to pass. NABP will continue its efforts to assist state boards of pharmacy, state and national pharmacy organizations, and public relations efforts to educate the public at large and legislative representatives regarding the changing roles of pharmacists, provision of pharmaceutical care, and regulating for outcomes.
- Resolution 99-5-03, Reimportation of Medications, Committee recommendation was to pass. NABP will maintain its efforts to eliminate this dangerous and unlawful practice, continue to support the efforts of the state boards that are taking action against the pharmacies and facilitators involved in these activities, and encourage the FDA to continue its efforts to enforce the existing laws on importation and reimportation of drugs; that NABP express its concern over the effect that pricing policies for pharmaceuticals are having on the public health; and that NABP continue to work with NAPRA and other entities to address this issue and communicate with Canadian provincial authorities in order to obtain enforcement proceedings in Canada to eliminate this practice.
- Resolution 99-6-03, Federal Regulation of Nutritional Supplements Containing Ephedrine Derivatives, Committee recommendation was to pass. NABP petition the

DEA to remove any exemptions that it may have granted for ephedrine products containing therapeutically significant quantities of other active medicinal ingredients.

Resolution 99-7-03, Continuing Pharmacy Practice Competency, Committee
recommendation was to pass. The boards, colleges and schools of pharmacy encourage,
endorse, and support the efforts of NABP, the American Council on Pharmaceutical
Education (ACPE), and the American Association of Colleges of Pharmacy (AACP) to
instill and perpetuate the concepts of continuing professional development in students
and pharmacists.

During the NABP Annual Meeting the following officers and members were elected to the Association's 2003-2004 Executive Committee:

President: Donna S. Wall, PharmD Chair: John A. Fiacco, RPh President-elect: Donna M. Horn, RPh

Treasurer:

Dennis K. McAllister, RPH, FASHP
Executive Committee Member:

Howard C. Anderson, Jr, RPh
Michael Mone, RPh, JD
Executive Committee Member:

Oren M. Peacock, Jr, RPh
Executive Committee Member:

Gary A. Schnabel, RPh, RN
Executive Committee Member:

Charles R. Young, MS, RPh, CFE
Executive Committee member-at-Large:

Lawrence H. Mokhiber, BS, MS, RPh

NABP's 100th Annual Meeting and Centennial Celebration will be April 24-28, 2004, at the Fairmont Hotel, Chicago, IL.

The NABP Fall Legislative Conference will be September 14-16, 2003, at the Renaissance Mayflower Hotel, Washington, DC.

HIPAA Frequently Asked Questions

The frequently Asked Questions handout from NABP was prepared to outline information that must be made available to inspectors and procedures that must be followed in order to ensure compliance with the HIPAA regulations to assist with inspection responsibilities. Mrs. Melissa Madigan, Professional Affairs Manager, can be reached for additional information at (847) 698-2612. Ms. Naesea will ask Drug Control to review the questions and distribute the handout during their inspections if they feel it is appropriate.

NABP Committee Volunteers

Executive Officers and members of the state boards of pharmacy who want to volunteer to serve on the Association's committees and task forces in 2003-2004 should send a written request and a current vitae to Donna Wall, NAPB's president no later than May 31, 2003.

Regulations/Legislative Officer Report

Board Packet Survey

Mr. Slade asked the public to complete a Board Packet Survey. This survey is completed every year for inclusion in the Board's Managing for Results Report. Presently, thirty-three interested parties receive the public packet. Recipients were encouraged to complete the survey.

Regulations Status Report of 5/8/03

Drug Therapy Management regulations are expected to be published June 2003. The Board of Nursing submitted comments. Mr. Slade responded to the comment and will provide a copy to Board members.

Profile – Pharmacy (Current Status of Legislation) 5/11/03

The final profile for pharmacy will be provided in next months' public board packet.

- HB 17 Maryland Pharmacy Assistance Program Eligibility This was signed and changes how income and asset levels are determined for pharmacy assistance.
- HB 143 Health & Government Operations/Finance & Budget & Taxation Moves the Med Bank from the Maryland Health Care Foundation to Med Bank Inc. It also broadens the eligibility for Med Bank to people who have been accepted to the Manufacturer Patient Assistance Program. This bill extends Med Bank existence to June 2006.
- HB 164 Health Occupations Medical Review Committees –
 Maryland Health Care Commission's (HCC) bill. This bill was signed. It
 creates a patient safety center that is designated by MHCC. This is a step
 towards helping mandatory reporting. If a center is not designated by June 30,
 2005 then it expires.
- SB 211 Short-Term Prescription Drug Subsidy Plan Enrollment (emergency bill) Proposed because it was anticipated that money would be left over because the enrollment limit was 30,000. The limit was changed to what- ever enrollment number the funds will support. This bill was signed.
- SB 376 Health-Pharmacies-Electronic Reimbursement by the Department of Health & Mental Hygiene (DHMH) This bill requires pharmacists to submit a claim electronically to Departments to be paid. This does not include PBMs.
- S 648 Public Health Service Act Will create funds to help pharmacy students who agree to serve in areas of critical shortages. This will also create funds so that schools can recruit faculty.
- HB 684 Pharmacists-Practice Information on Generic Drug Option This bill will

be effective October 1, 2003. The Board will have to adopt procedures allowing a consumer to notify the Board when a pharmacist fails to provide information required in paragraph 1 of subsection 12-504 and advising a pharmacist to bring the pharmacist into compliance with the requirements of paragraph (1) of this subsection. This bill will be referred to the Practice Committee.

HB 761 Task Force Requires to Study the Reorganization of DHMH – Which passed and Requires the study the reorganization of DHMH. The Board will monitor the progress of this bill.

Bill Proposal 12-315

In June of every year, the Boards have to submit an initial proposal for potential departmental legislation. The Boards as a whole are considering three bills. One bill is included in the packet, which would allow a panel of Board representatives to hear a case and make recommendations to the full Board.

Board Action

Mrs. Furman moved that this Board join the other Boards in proposing the bill to the Department during the next legislative session. Dr. Love seconded the motion. The Board passed the motion.

Regulation Proposal

Mr. Slade submitted a proposal from the Council of Boards that would extend the statute of limitation for a misdemeanor to three years. Specifically, they want to change the courts and judicial proceedings to say, that a prosecution for a misdemeanor offense under Health Occupation could be instituted within three years after the offense was committed. Presently, the statue of limitation is one year.

Board Action

Mrs. Furman moved to support the proposal to increase the statute of limitation to three years. Mr. Rubin seconded the motion. The motion was carried.

Disciplinary Proceedings

The third bill is increasing the penalty provisions in Board Practice Act. They want to increase the penalty for misdemeanor to \$2,500 for the period of confinement. This allows the Attorney General to file cases in circuit court for unauthorized practice.

Board Action

Dr. Love moved that the Board endorse a proposal to increase the penalty provisions in the Boards Practice Act. Mrs. Furman seconded the motion. The Board passed the motion.

Compelling Purpose Regulations

The Board discussed the memorandum dated April 25, 2003 from Mr. Slade concerning the compelling purpose regulations. Mr. Ballard asked the Board to change term "Board" to "custodian of records" so that the Board approval would not be needed to send certain information to listed entities. Changing the language would allow the Board's Executive Director to perform the task without convening the Board for a vote.

Board Action

Mr. Balch moved to change the word Board to "custodian of records". The motion carried.

SB 500, DHMH, Maryland State Board of Physicians (MBP)

SB 500 allows the MBP to contract with one or more non-profit entities for peer review. If the reviewers have a conflict, they can obtain a third reviewer for the case. This bill has two standards of care for Board cases. The MBP can sanction a physician or dismiss a case with the majority vote of a quorum as opposed to the full Board. The breakdown of the MBP will be eleven practicing licensed physicians, including one doctor, two of osteopath appointed by the Governor with the advice of the Secretary, one licensed practicing physician appointed by the Governor, one representative of the Department, one certified physician assistant, one practicing licensed physician with a full time faculty appointment to serve as a representative of an academic medical institution, one consumer member, and one public member knowledgeable in risk management and quality assurance. Mr. Slade will provide Board members with a summary of the bill.

Board Action

The Board passed a motion to review the revise version of the bill.

PEAC

Mr. Rubin did not attend the most recent meeting at PEAC. Mrs. Furman stated that PEAC had been invited to the disciplinary meeting but it was rescheduled.

Pharmacy Practice Committee

Dr. Love gave the Board an update on the Pharmacy Practice Committee. The Committee held a meeting on May 7, 2003.

Response to Informal DTM Comments

Mr. Slade made a request to put the Response to Informal Comments for Drug Therapy management on the Board website and to also email it to people who sent the Board comments.

Dr. Love requested any Board member with comments about the DTM regulations to respond no later than Wednesday, May 28, 2003, to Mr. Slade.

Board Action

The Board voted to place the Response to Informal Comments for Drug Therapy Management on its website.

Pharmacist Dispensing in Non-Pharmacy Setting

The Committee reviewed comments on the draft regulations. It discussed circumstances under which pharmacists would be allowed to dispense from a site that does not have a pharmacy license.

The Committee revised the draft regulations to allow a pharmacist to dispense and distribute if the pharmacist is located in the office of an authorized prescriber and whose primary duties involve drug therapy management.

<u>Title 10 DHMH – Chapter 18 Delegation of Duties By a Licensed Physician</u> To a Licensed Pharmacist During a Catastrophic Health Emergency

The proposed bill would allow a licensed physician to delegate authority to prescribe and the authority to administer medications to a licensed pharmacist for a patient potentially exposed or exposed to a deadly agent provided the delegation is limited to prescribing and administering medications under a medication protocol during the existence of a catastrophic health emergency. The Maryland Board of Physicians' Assistant Attorney General will propose the language to his Board.

Board Action

The Board passed a motion to accept the language for Title 10, DHMH, Chapter 18 Delegation of Duties By a Licensed Physician to a Licensed Pharmacist During a Catastrophic Health Emergency.

Nurses Assisting Patients in Adult Day Care Settings

The Practice Committee recommended allowing a nurse to assist patients in filling the pillbox. The memorandum asked the Board's position on patients who live independently, self administering medications from a medicine pillbox prepared by a licensed nurse.

The Practice Committee recommended allowing a nurse to assist patients who live independently by putting the medication in the pillbox. However, the nurse should not accept responsibility for no patient administering medication. This will help insulate nurses from additional liability. The Committee prepared a draft letter addressed to Ms. Benner (included in the addendum board packet). Mr. Ades recommended that the following sentence be included in the letter to Ms. Benner "There are pharmacies that will dispense medication in such a manner that individualizes dosages to the patient which will promote safety and minimize opportunity for medication errors". Dr. Love accepted the language on behalf of the Committee, because it is consistent with the Committee's position.

Board Action

Dr. Love moved that the Board adopt the opinion expressed in the letter as amended. Mrs. Ramona McCarthy-Hawkins seconded the motion. The motion passed.

I.V. Inspections

The Division of Drug Control (DDC) asked the Board to appoint a Board member to work with the DDC on looking at I.V. Inspections. Mr. Yee volunteered to represent the Board.

Nurse Dispensing

Mr. Yee gave the Board an update on the Nurse Dispensing Committee, which apparently is experiencing certain difficulties in implementing adopted policies and procedures.

Pharmacy Technician

Mr. Slade asked the Board if they wanted to make pharmacy technician a departmental bill this year. The Practice Committee has been working on the language. The language requires multiple changes in multiple sections of the Pharmacy Practice Act.

Mrs. Furman recommended that the Board move forward on the pharmacy technician initiative because it is a patient safety issue a pharmacy shortage issue and a medication error issue. The regulations will give the Board jurisdiction over technicians.

Board Action

Mrs. Furman moved that Mr. Slade prepare a legislative proposal on Pharmacy Technicians for submittal to the department. Dr. Love seconded the motion. The Board passed the motion.

International Drug Sales

Mr. Rubin said that the Committee divided the problem into three issues and will take immediate action on the first. They identified three area of focus (1) Reviewing applicable State and Federal Laws that are possibly being broken, and how to enforce them; (2) Developing internal policies for investigating and disciplining suspected foreign drug sales; and (3) developing consumer and practitioner education.

Mr. Rubin suggested that the Committee immediately review (1) pharmacies being solicited nationwide, and paid \$10 to \$15 per prescription; (2) Store front dispensing; and (3) Canadian importation. Mrs. Furman said that an article would be placed in the newsletter to let practitioners know that their licenses will be in danger if they break pharmacy law dispensing regulations.

Long Term Care Committee

The Long Term Committee has finalized the first set of LTC Regulations. The Practice Committee will review the regulations and present them at the next public board meeting. The deadline for Long Term Care Regulations is July 1, 2003. Once the regulations are completed the Committee will work on proposed change to meet patient needs that are not addressed by current laws and regulations.

Licensing Committee

The Licensing Committee met on May 20, 2003. The Committee introduced a draft sample letter that will go to pharmacists who do not renew their license. The letter will also be mailed to the State where the pharmacist is practicing.

Board Action

The Board passed a motion approving the 3rd notice letter to be mailed to pharmacists who have not renewed their pharmacist licenses.

Licensing Unit Statistics

Mr. Dyke reported on the Licensing Unit statistics, included in the public board packet. There were 13 new licensees by reciprocity for the month of April 2003.

House Bill 936

HB 936 requires the issuing authority of certain licenses or permits issued by the State to verify through the Office of the Comptroller that certain taxes and unemployment contributions have been paid or that payment has been provided for in a certain manner. It becomes effective July 1, 2003. The Board discussed several concerns regarding how the new law will be implemented.

Board Action

Dr. Love moved that the Board Council and Board Staff meet with appropriate individuals from DHMH and Comptroller's office to develop a procedure to implement House Bill 936 for the Boards. Mr. Yee seconded the motion. The Board passed the motion.

Name Change Regulation

Mr. Slade said he had provided the Licensing Committee with a memorandum outlining a new chapter to be added to the regulations. The new chapter, COMAR 10.34.30, Name Change of Individual or entity Required to Possess a Pharmacy or Distribution Permit will require a pharmacy or distribution permit holder to change the name on a permit provided:

- The permit holder submits to the Board within 30 days of the name change, on a Board prepared form; and
- There is no other change in the status of the establishment including no change in controlling ownership interest, the type of business entity, or the location.

There is no fee for a name change provided the permit holder complies with Regulation .01 of the chapter. If a permit holder fails to comply with Regulation .01, the permit holder shall pay a \$100 fee, to the Board as established in COMAR 10.34.09.

Board Action

The Board voted to accept and publish the names change regulation.

On-Line Licensing Update

Ms. Tamarra Banks announced that the On-Line Licensing System would be up and running sometime in August 2003.

Disciplinary Committee

Pharmacist Rehabilitation Contract

Ms. Costley submitted the Request for Proposal (RFP) to the Division of Contracts for review and approval. The Division has a new policy, which requires a contract fulfillment team to review the RFP before it is issued. The members of the team will consist of representatives from

Department of Budget and Management (DBM), Attorney General's Office, Minority Business Enterprise, a Procurement Officer for contracts, and Ms. Naesea, Mrs. Putz, and Ms. Costley. Ms. Naesea recommended developing an evaluation team consisting of Ms. Naesea, Mrs. Putz and two Board members to evaluate the bids that are submitted. Ms. Furman and Mr. Rubin volunteered to represent the Board.

Pre-Inspection Community Pharmacy Form

Mr. Rubin presented a draft of the Pre-Inspection Community Pharmacy form. He has made changes to the form to separate questions about activities which pharmacist are not legally required to perform.

Board Action

Dr. Love moved to add the word optional in Section 3 - Confidentiality and Section 4 – Informational. Mrs. Ramona McCarthy-Hawkins seconded the motion. The Board motion passed.

Consent Orders on the Website

Ms. Gale reported that she received a telephone call from Mrs. Janet Brown who wanted to know how Boards disseminate information to the public regarding informal orders, consent order, etc. Ms. Brown wanted to know if the Board of Pharmacy currently places consent orders on the website. Ms. Gale informed Ms. Brown that consent orders are not placed on the website, but that she would approach the Board with the possibility of doing so. Ms. Gale discussed the topic in Committee. The Committee recommended that the topic be referred to the Board for discussion.

Board Action

Mrs. Furman moved that the Board add a disciplinary section to the newsletter and to the website. When the information is placed on the website, the date of last updating should be included. Dr. Love seconded the motion. The Board motion passed.

DDC Inspection

Ms. Putz prepared a draft form letter addressed to pharmacies that were cited for deficiencies during the latest inspection. The letter asks permit holders to make necessary corrections in order to have the pharmacy meet required standards. The letter also informs the pharmacies that a reinspection to review and determine their compliance with pharmacy laws may occur anytime after 60 days.

Board Action

The Board passed a motion to adopt the form letter.

Patient Information Form

Mr. Rubin presented a draft Patient Information form for the Board's approval. It will be included with material mailed to people that request complaint forms. Dr. Love suggested adding

an additional sentence to explain that the Board cannot release information about certain actions taken without permission.

Board Action

Mrs. Furman moved to accept the patient information form with the amendment. Dr. Love seconded the motion. The motion was passed.

Public Relations

State Fair

Ms. Lawrence stated that the State Fair will take place August 23 – September 1, 2003. DHMH will purchase a table during the 10-day duration. There will be no cost to the Board. DHMH will allow the Board to set up for 1-2 days. Ms. Lawrence contacted MSHP who agreed to assist the Board with items to give away. MSHP offered to help volunteer during this event.

Annual Report

Ms. Lawrence is working on 2002 and 2003 reports simultaneously. She will be disseminating the 2002 report at the MPHA conference in two weeks.

Council of Boards Report

Mr. Rubin has been nominated to chair the Council of Boards. He is uncontested as of the date of the Board meeting.

Correspondence

Mr. Slade reported that the Board received a response from Mr. Ronald F. Guse, Manitoba Pharmaceutical Association dated April 21, 2003 in response to the correspondence the Board mailed him on March 25, 2003. The letter is included in the Board packet.

The meeting adjourned at 12:30 p.m.