

November 26, 2018

Christine Paramonczyk
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By EMAIL: legislation@bcpharmacists.org

And To:

Meghan Thorneloe Director of Regulatory Initiatives, Professional Regulation Branch Clinical Integration, Regulation and Education, Ministry of Health 1515 Blanshard Street PO Box 9649 STN PROV GOVT Victoria, BC V8W 9P4

By EMAIL: PROREGADMIN@gov.bc.ca

Dear Madam/Sir:

Re: Patient Relations Program bylaw

The BC Pharmacy Association thanks the College of Pharmacists of BC for the opportunity to provide comments on the proposed Patient Relations Program Standard which has been posted for public comment until **December 13, 2018.**

BACKGROUND

Section 16(2)(f) (f) of the HPA requires the College "to establish, for a college designated under section 12 (2) (h), a patient relations program to seek to prevent professional misconduct of a sexual nature;"

Section 84 of the College Bylaw under the HPA requires the Board to establish a patient relations program to seek to prevent professional misconduct, including misconduct of a sexual nature, which is defined in ss. 84(4) as (a) sexual intercourse or other forms of physical sexual relations between the registrant and the patient; (b) touching of a sexual nature, of the patient by the registrant, or (c) behavior or remarks of a sexual nature by the registrant towards the patient, but does not include touching, behavior and remarks by the registrant towards the patient that are of a clinical nature appropriate to the service being provided.

COMMENTS

We have reviewed the Patient Relations Program Standard and the Patient Relations Program Information document. Given the complexities of investigating these types of complaints, at this time we believe the College has struck a practical balance between ensuring complainants are supported and heard, and the need to respect the legal rights of registrants involved in an administrative proceeding. We look forward to reviewing the results of the evaluation of the program in due course.

We understand that the existing complaints process would be followed when investigating a complaint of professional misconduct of a sexual nature. We respectfully suggest that the procedures should also anticipate that a complainant could be a caregiver, family member or other third party other than the victim.

The BCPhA thanks the College for the opportunity to provide these comments.

A copy of this letter will be posted on the BCPhA website.

Yours Sincerely,

Geraldine Vance

John Vana.

CEO

Cc:

Hon. Adrian Dix, Minister of Health