

**HB 2879 Advisory Committee Meeting
September 22, 2015 1:30-3:30pm
Board of Pharmacy; 800 NE Oregon Street Portland 97232**

Minutes

ATTENDEES

- | | |
|--|--|
| <input type="checkbox"/> Helene Rimberg | <input type="checkbox"/> Roberto Linares |
| <input type="checkbox"/> Emily Elman | <input type="checkbox"/> Marc Watt |
| <input type="checkbox"/> Nicole Krishnaswami | <input type="checkbox"/> Gary Miner |
| <input type="checkbox"/> Christy Cowgill | <input type="checkbox"/> Fiona Karbowicz |
| <input type="checkbox"/> Sarah Wickenhagen | <input type="checkbox"/> Doan Pham, BOP Intern |
| <input type="checkbox"/> Lorinda Anderson | |

Unable to Attend: Pete Palacio, Maria Rodriguez, Crystal Bryan

Agenda Item	Desired Outcome
Welcome	Introductions
Review of 9.8.15 Meeting	❖ The Committee reviewed and approved draft minutes from 9.8.2015 meeting.
Committee Discussions	<ul style="list-style-type: none"> ❖ The Committee reviewed drafts of the Oregon Self-Screening Risk Assessment Questionnaire and Oregon Standard Procedures Algorithm. Minor edits to be added and reviewed at upcoming meetings by Pharmacy Board (10.8.2015) and Advisory Committee (10.13.2015). These two documents are specifically named in the draft rules and are therefore essential, required forms to be used by participating pharmacists (and pharmacies). ❖ The Committee reviewed the “Follow-Up Questionnaire” <ul style="list-style-type: none"> ▪ The title may be misleading and will be renamed to something along the lines of “Re-Evaluation or Alternative Therapy Assessment” ❖ The Committee discussed the appendices, aka “Toolkit” <ul style="list-style-type: none"> ▪ Visit Summary. Minor edits were made to the language. Additional information lines to be added to the Visit Summary for specific instructions/recommendations for the pharmacist to provide to patient, including notes. The Committee sees the Visit Summary as an important element to these procedures, as it will provide for clear communication to patients and other care providers about the contraceptive prescribed or clear communication why contraception was NOT prescribed. It is also a form mentioned in the draft rules, but the Committee understands that each pharmacy may want to tailor it to their own company. That is authorized as long as they retain all elements set forth by this template. ▪ Health Department locations by area. A list of clinics will be a very useful appendix for pharmacists who must refer patients to a clinician. The Oregon Health Authority (OHA) has this information and shared it with the Committee. It will be included in the appendices. ▪ Available contraceptives (COC and POP list). The Committee has not

	<p>definitively made a determination about the necessity of this component.</p> <ul style="list-style-type: none"> ▪ Family Planning methods ▪ Patch and pill summary guides. The OHA is working on edits to the current forms. ▪ Others? Committee members may continue to suggest additional resources for the group to consider adding to the published appendices. <p>❖ The Committee began their review of the draft rules. Suggestions included:</p> <ul style="list-style-type: none"> ▪ Define “Clinical Visit”. OHA and Gary will work on a definition. ▪ Making some of the language more specific and restructuring some sentences in the Training Program section. ▪ Will there be a CE requirement? Group members discussed this and tentatively stated that there is an inherent professional requirement to maintain competency in all areas of practice, however it is to be discussed at the Pharmacy Board meeting on 10.8.2015 ▪ Records retention. As this now involves records beyond a traditional pharmacy’s drug dispensing record, the Committee discussed the concept of medical records, “charting”, etc. We will have Board counsel look into statutory mandates.
Good of the Order	<p>❖ Next steps</p> <ul style="list-style-type: none"> ▪ Communication/Outreach ▪ Other?