

SINGAPORE PHARMACY COUNCIL



A Guide to

Compulsory CPE

for

Pharmacists

Version 2.1

| September 2018

Table of Contents

Introduction.....	1
Acknowledgements	2
Glossary of Terms and Acronyms	4
The Rationale for Compulsory CPE	5
The Different Classes of Practising Certificates (PCs).....	8
Pharmaceutical (Patient) Care	9
CPE Points Requirements for the Renewal of PCs	10
Concession on CPE Points Requirement	16
Key Considerations Before Embarking on a CPE Activity	19
The CPE Points Award System.....	25
Advice to Pharmacists.....	28
Q and A from Feedback	30
Annex A Approved journals and textbooks on pharmaceutical (patient) care	42
I. Journal Titles	42
II. Book Titles	43
Annex B Online CPE resources	44
Annex C: List of recommended local websites.....	49
Annex D: Format for CPE dossier	50

Introduction

This Guide has been put together by the CPE Accreditation Committee which is appointed by the Singapore Pharmacy Council.

In working on the Guide, the Committee has tried to capture the many scenarios it has encountered since the introduction of the Continuing Professional Education (CPE) scheme. Information on compulsory CPE is presented in the form of Frequently Asked Questions (FAQs) for ease of understanding by pharmacists.

Singapore Pharmacy Council

Acknowledgements

The Singapore Pharmacy Council wishes to acknowledge the contribution made by members of the CPE Accreditation Committee in the preparation of this Guide.

CPE Accreditation Committee

Ms Tan Mui Ling Senior Lecturer Department of Pharmacy National University of Singapore	Chairperson
Ms Wendy Ang Principal Clinical Pharmacist Pharmacy Department Changi General Hospital	Member
Mr James Cheong Senior Director, Clinical Operations, Greater China Boehringer Ingelheim	Member
Mr Ivan Chew Yong Chia Head of Commercial Eu Yan Sang (S) Pte Ltd	Member
Ms Imelda Halim Senior Regulatory Specialist Therapeutic Products Branch Health Products Regulation Group Health Sciences Authority	Member
Mr Kwan Yew Huat Managing Director Pharmaforte Singapore Pte Ltd	Member
Ms Tan Swee Chin Area Manager Operations NTUC Health Co-Operative Limited	Member
Mr Richmond Ng Deputy Manager Singapore Pharmacy Council	Secretariat

In addition, the Singapore Pharmacy Council wishes to acknowledge the contribution made by members of the Pro Tem CPE Accreditation Committee of 2006 in formulating the principles for continuing professional education for pharmacists in Singapore.

Pro Tem CPE Accreditation Committee

Mrs Tan Shook Fong	Chairperson
---------------------------	--------------------

Ms Elaine Teo	Secretary
A/Prof Ngiam Tong Lan	Member
A/Prof Lee How Sung	Member
Ms Wong Lilian	Member
Ms Tan Mui Mui	Member
Ms Tan Lay Kheng	Member
Ms Imelda Halim	Member
Mr Koe Khoon Poh	Member
Dr Lou Huei-xin	Member
Ms Hui Foong Mei	Member

Glossary of Terms and Acronyms

Accreditation	The process by which an accreditation agency, through initial and periodic evaluation, grants recognition to an organisation that has met established criteria.
Professional Registration System (PRS)	The online system which records CPE activities and the CPE points awarded.
CPE	Continuing professional education
CPE AC	The CPE Accreditation Committee.
CPE providers	These are the internal or external agents (companies, education agencies, professional or governmental bodies etc.) that plan and deliver the structured learning programmes for CPE. CPE providers have to be accredited by an accreditation agency, such as the Singapore Pharmacy Council. The Pharmaceutical Society of Singapore (PSS) is an example of an accredited CPE provider .
CPE points	These are the points earned by a pharmacist after taking part in a CPE activity.
Medicinal product	Any substance or article that is defined as a “Medicinal product” in the Medicines Act (Chapter 176)
Qualifying period (QP)	The period of time, determined by the Singapore Pharmacy Council, during which the CPE points earned by a pharmacist can be used to renew his Practising Certificate.
Practising Certificate (PC)	The certificate issued by Singapore Pharmacy Council which gives registered pharmacists the right to practice pharmacy in Singapore.
Pharmacist	A person registered under the “Pharmacists Registration Act” and has a valid practising certificate issued under this Act.
Pharmaceutical (Patient) Care	The direct, responsible provision of medication-related care for the purpose of achieving definite outcomes that improve or maintain a patient’s quality of life.
Pharmacist Registration Number (PRN)	A unique identification number given to each pharmacist upon his/her successful registration with Singapore Pharmacy Council.
PSS	Pharmaceutical Society of Singapore
Registered pharmacist	A person who is registered as a pharmacist under the “Pharmacists Registration Act”.
SPC	Singapore Pharmacy Council
SMC	Singapore Medical Council
The Act	The Pharmacists Registration Act (PRA)
The Council	The Singapore Pharmacy Council
Therapeutic Product	A health product categorised as a therapeutic product in the First Schedule to the Health Products Act (Chapter 122D) (Amendment of First Schedule) Order 2016
The Regulations	The Pharmacists Registration (Practising Certificates) Regulations.

The Rationale for Compulsory CPE

Q1 What is CPE?

- A** Continuing Professional Education (CPE) refers to the planned and structured learning programmes provided by an internal or external agent that are designed to promote the continual development of knowledge, skills and attitudes of a practitioner beyond the entry-level professional qualifications or formal degree.

Examples of CPE programmes include:

- a) Live programmes such as lectures, seminars, conferences, short courses, and postgraduate courses
- b) Structured learning programmes

In a wider context, CPE activities may also include self-reading, research and publication, and presentation of research findings or original ideas at conferences.

Q2 What is the rationale behind making CPE compulsory for pharmacists registered in Singapore?

- A** Ethically, all professionals, including pharmacists, must engage in CPE. The purpose of CPE for pharmacists is to achieve professional self-improvement so as to protect the public from being harmed by professional incompetence, as stated in the our Code of Ethics:

“7. A pharmacist shall keep abreast of advancements in pharmaceutical knowledge so as to maintain a high standard of competency in professional practice for the assurance of effective outcomes and safety in patients.

7.1. A pharmacist shall embrace continuous professional development as a form of personal responsibility to ensure knowledge and skills are kept up to- date and relevant to the field of practice.

7.2. A pharmacist shall keep up with and be prepared to engage new technology in delivering quality services and products to his patients.

7.3. A pharmacist shall be prepared to learn and apply new knowledge and skills to expand his roles and responsibilities in the healthcare system.”

Thus, CPE should not be viewed solely for the purposes of advancing our own job scope or career. It is done for the good of the country and society.

Mandatory CPE has become the norm for the healthcare professionals in advanced countries. Our medical and dental counterparts in Singapore also have mandatory CME/CPE in place. A first class medical service in Singapore requires the support of a first class pharmaceutical service. Compulsory CPE for pharmacists helps to achieve this objective.

Q3 Which is the body responsible for administering compulsory CPE and what are its roles?

A The Singapore Pharmacy Council (the Council) has been empowered by the Pharmacists Registration Act 2007 (the Act) to administer compulsory CPE for pharmacists. The Council is the national CPE accreditation agency for pharmacy. It is responsible for setting up the framework and the criteria for accrediting CPE providers and programmes, and to ensure that pharmacists meet the compulsory CPE requirements when they renew their Practising Certificates (PC). The Council is advised and supported in this function by the CPE Accreditation Committee, specifically set up for this purpose.

Thus, in exercise of its powers conferred by section 74 of the Act, the Council, with the approval of the Minister for Health, has made its regulations – the Pharmacists Registration (Practising Certificates) Regulations 2008 - to which the present Guide shall refer.

Q4 Who regulates the practice of pharmacy in Singapore and what constitutes the “Practice of Pharmacy”?

A The Singapore Pharmacy Council regulates the practice of pharmacy in Singapore. The “Practice of Pharmacy” has been defined in Schedule One of the Act as any act or activity that applies the knowledge and science of pharmacy to the following areas:

- (a) Interpreting, evaluating and implementing prescriptions of persons authorised by law to prescribe medication;
- (b) Compounding, labelling, dispensing, distributing and administering medication;
- (c) Initiating and modifying medication therapy in accordance with the collaborative practice agreements established and approved by healthcare facilities or voluntary agreements with persons authorised by law to prescribe medication;
- (d) Patient assessment and counselling for the purpose of recommending and dispensing medication;
- (e) Managing medication therapy;
- (f) Evaluating medication use;
- (g) Manufacturing and distributing medicinal products/therapeutic products; and
- (h) Quality assurance of medicinal products/therapeutic products.

The above definition of pharmacy practice is far-reaching. It gives the legal footing to pharmaceutical (patient) care, as embodied by items (a) to (f) above. It also recognises the professional roles played by pharmacists in the manufacturing, quality assurance, and distribution of medicinal products/therapeutic products - thus justifying the various licenses, permits, entrusted to pharmacists by law.

Q5 Who can practise pharmacy in Singapore?

A A person who is registered as a pharmacist under the PRA and holding a valid PC can practice pharmacy in Singapore. The Act also prohibits an unauthorized person from practising pharmacy in Singapore.

An unauthorised person means:

- (a) a person who is not a registered pharmacist; or
- (b) a registered pharmacist who does not have a valid PC; and who has not been exempted under the Act.

In the Act, a “registered pharmacist” means a person who is registered as a pharmacist under the Act. If a registered pharmacist failed to obtain a PC, he is not permitted to do anything covered by items (a) to (h) of **Q4** in the practice of pharmacy. On the other hand, a registered pharmacist, who has a valid PC, can practise pharmacy in areas designated in his PC (see **Q10**). By inference, such a registered pharmacist would be considered an authorised person to practise pharmacy in Singapore.

Q6 Registered pharmacists are given certain professional privileges under the Health Products Act, Medicines Act, Poisons Act, and Misuse of Drugs Act. Can they carry on enjoying these privileges without a PC as long as they are registered?

A Firstly, they are not permitted to practise pharmacy under the Act as they are classified as an unauthorized person. Secondly, the definition of a “pharmacist” in the above-mentioned Acts has been revised as follows:

“Pharmacist” means a person registered under the “Pharmacists Registration Act 2007” and has in force a valid practising certificate issued under this Act.

Q7 What is the legal status of a registered pharmacist when he fails to renew his PC?

A When a registered pharmacist fails to renew his PC, his registration status will be noted as “On Register without valid PC” in the Register of Pharmacists. A registered pharmacist with no valid PC may return to active practice when he satisfies the stipulated CPE and fees requirement stated in the Regulations 2008 (see **Q14**).

For a pharmacist who does not renew his PC for a continuous period of 5 years, the Act will remove his name from the Register of Pharmacists.

If a pharmacist’s name has been removed from the Register of Pharmacists, the only way for reinstatement is by application for **restoration**, which involves passing the forensic examination and competency examination, meeting the stipulated CPE and fees requirement, and any other prescribed requirements set by the Council.

Q8 What is the professional status of a registered pharmacist who does not hold a valid PC?

A A registered pharmacist who does not hold a valid PC is legally not allowed to practise pharmacy. For all intent and purpose, he is no different from any other person who is not a registered pharmacist.

In view of the wide-ranging prohibitions listed in section 28 of the PRA, a registered pharmacist, who is not in active practice, is strongly recommended to hold a PC under the less-demanding “inactive” category (see **Q10b**).

The Different Classes of Practising Certificates (PCs)

Q9 Unlike other health professionals, pharmacists are employed in diverse areas. Are there more than one class of PC for pharmacists?

A There are three classes of PCs issued by the Council in the form of PC, PC (Inactive) and Specialist PC. The three classes of PCs are different with respect to their CPE requirements (see **Q13**).

(a) PC

This is the standard PC issued by the SPC for pharmacists practising in all areas of pharmacy.

PC (Inactive)

For pharmacists who are no longer practising pharmacy, not working or on long term overseas residence, they may submit a declaration of inactive status to the Council whom, at its discretion, will issue them with a **PC (Inactive)**. This PC has a much lower CPE point requirement. This PC is suitable for non-active pharmacists who still like to hold themselves out as pharmacists in their interaction with the public and other professionals. PC (Inactive) thus prohibits the holders to practise in all areas of pharmacy practice defined by Schedule One of the Act. However, in situations not involving the practice of pharmacy, they are allowed to take or use the name or title of pharmacist, pharmaceutical chemist, druggist, apothecary, or any other word in any language having the same meaning, or being to the like intent.

PC (Inactive) holders will not lose their legal status as a registered pharmacist and they may return to active practice, with approval from the Council, after satisfying the CPE point requirement as stipulated in the Regulations (See **Q14**). “Active practice” means the practice of pharmacy, whether on a full-time

or part-time basis, or as a locum.

Holders of PC (Inactive) must exercise great care when expressing opinion in public regarding the practice of pharmacy. They may speak freely on policy matters, but must qualify themselves as inactive pharmacists when dealing with any technical aspect of pharmacy practice to which they have little current experience.

(b) Specialist PC

The Pharmacists Registration Act 2007 made provisions for the accreditation and registration of specialist pharmacists.

Pharmacists who wish to be registered as a specialist must first acquire accreditation by the (Pharmacy) Specialists Accreditation Board (“PSAB”).

Once the application is successful, the PSAB will issue the pharmacist with a certificate of accreditation. The pharmacist can then apply for specialist registration with the certificate to SPC. SPC will review the eligibility of the pharmacist for specialist registration. Accreditation is currently only for one of the five following areas:

1. Oncology
2. Advanced Pharmacotherapy - Cardiology
3. Advanced Pharmacotherapy - Infectious Diseases
4. Advanced Pharmacotherapy - Geriatrics
5. Advanced Pharmacotherapy - Psychiatry

Holders of Specialist PC can practise in all areas of pharmacy. Becoming specialists enable members of the profession to be better equipped to deal with the complex cases in hospitals which are growing problems as Singapore’s population ages. Specialist PC allows the holder to use the title “specialist” when practising in that branch of specialty stated on his PC.

Pharmaceutical (Patient) Care

Q10 What is pharmaceutical (patient) care and what are the categories of pharmacists that the Council consider to be working in the pharmaceutical (patient) care area?

A Pharmaceutical (patient) care is defined as the direct, responsible provision of medication-related care for the purpose of achieving definite outcomes that improve or maintain a patient’s quality of life. It is a collaborative process that aims to prevent or identify and solve medicinal product/health product and health related problems. Thus, according to the above definition, one may classify the professional practice described under (a) to (f) of the First Schedule of the Act as pharmaceutical (patient) care (see **Q4**).

The provision of appropriate individualised care to a patient, or a member of the

public, is the primary objective of pharmaceutical (patient) care. Thus, the Council considers “pharmacists working in the pharmaceutical (patient) care areas” as those working in retail pharmacies, restructured hospitals, specialty centres, private hospitals, private clinics, polyclinics, community hospitals, hospices, nursing homes, SAF medical centres, and in any place where pharmaceutical (patient) care is given to a patient, a member of the public, or a clinical trial subject.

Pharmacists working in the clinical research areas may be construed as providing pharmaceutical (patient) care to their clinical trial subjects if any part of their activities falls within the definition given in the above paragraphs.

CPE Points Requirements for the Renewal of PCs

Q11 What are CPE points and how are they awarded?

A The CPE points are semi-quantitative measurement of the effort put into CPE by a pharmacist. They are directly related to the time spent on CPE activity. The Council has set up criteria for the award of CPE points to a diverse range of CPE activities. Pharmacists may obtain points by taking part in programmes organised by CPE providers accredited by the Council. Pharmacists may also obtain points from self-study and other activities recognised by the Council (See **Q14** for details of the point award system).

Q12 What is the meaning of “qualifying period”? How does a pharmacist renew his PC at the end of the qualifying period?

A The “qualifying period” is the stipulated period during which a pharmacist may accumulate the requisite CPE points for the renewal of his PC. It covers 24 calendar months.

The following are the qualifying periods for the next ten years of CPE:

- 1 September 2014 to 31 August 2016
- 1 September 2016 to 31 August 2018
- 1 September 2018 to 31 August 2020
- 1 September 2020 to 31 August 2022
- 1 September 2022 to 31 August 2024

Normally, the Council will call for the renewal of PCs four months before the expiry of the PCs. **Any application for renewal of a PC must be made no later than one month before the expiry of the PC (i.e. by 30th November of every even year)**, and shall be made in such manner, and accompanied by such fee, as the Council may prescribe. Late application fees are chargeable to any application made later than one month before the expiration of the PC.

The new 2-year PC is valid from the 1st January of the following year to the 31st

December of the next year. The renewal of a PC is not automatic. The Council may refuse to renew a PC if the registered pharmacist fails to comply with any condition that has been prescribed by the Council.

Pharmacists who are unable to earn enough points by the end of the qualifying period will be given a grace period of up to 3 months, i.e. until the 30th November, to meet the requirement. In other words, they have 24 + 3 months to meet their CPE requirement. **Points earned during this grace period cannot be reused again for the following qualifying period.** Thus, the next qualifying period will be shortened by up to three months for this group of pharmacists. For administrative reasons, the Council does not encourage repeated use of the grace period, as it would effectively shift the date of PC renewal to December, and also increase the risk of having to pay late fees if renewal was made after 30th November.

If pharmacists are still unable to earn enough points by 30th November, they may use the month of December to meet the requirement. **Note that late renewal application fees are chargeable to any PC Renewal application made in the month of December.** Similar to the grace period, points earned during this period cannot be reused again for the following qualifying period and the next qualifying period will be shortened by up to an additional one more month.

Figure 1 illustrates the sequence of qualifying periods and grace periods that span from 2014 to 2016.

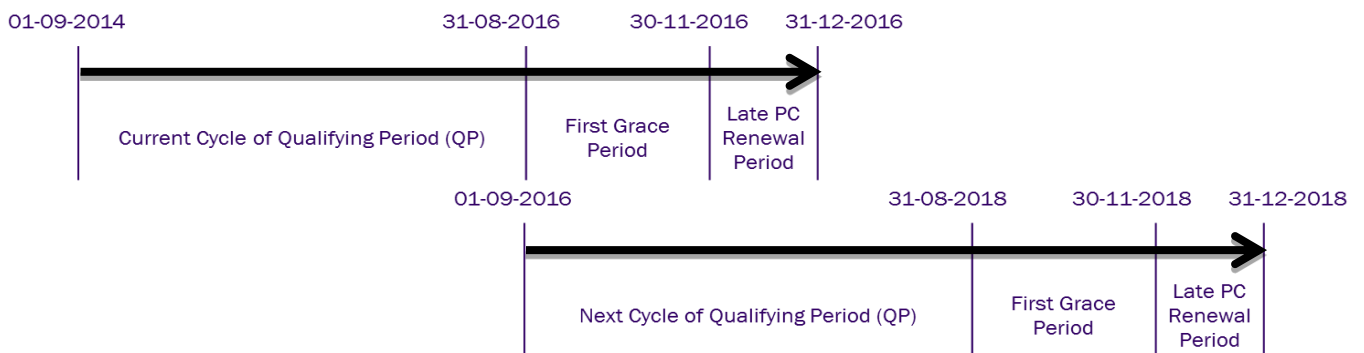


Fig 1. The two cycles of qualifying period that span from 2014 to 2018. Note the grace and late renewal period of the first cycle overlaps with the beginning part of the second cycle.

Table 1 AREA OF COMPETENCIES FOR ALL PHARMACISTS

	PHARMACEUTICAL (PATIENT) CARE COMPETENCIES	SUBJECTS
A	<p>Sound decision-making and problem-solving in relation to drug therapy</p> <ul style="list-style-type: none"> - Evaluating drug orders/prescriptions - Therapeutic drug monitoring - Medication reviews - Establishing and maintaining patient medication records - Drug utilisation review - Cost-benefit evaluation - Provision of drug information 	<ul style="list-style-type: none"> i. Disease states – aetiology, epidemiology, disease management, and drug therapies ii. Clinical pharmacology and pharmacotherapy iii. Clinical pharmacokinetics iv. Clinical pharmacodynamics v. Adverse Drug Reactions – including management vi. Interactions – drug-drug, drug-food, drug-supplements vii. Pharmaceutical dosage forms in clinical practice viii. Pharmacoeconomics ix. New drugs and therapies x. Clinical practice guidelines/protocols
B	<p>Making a positive contribution to patients' and customers' good health</p> <ul style="list-style-type: none"> - Health education and promotion - Appropriate management of common symptoms - Appropriate sale or supply of, and advice-giving with, dietary products, medical appliances/devices and reagents 	<ul style="list-style-type: none"> i. Effects of lifestyle on health ii. Pharmacotherapy and non-pharmacological management of common symptoms and minor ailments iii. Clinical appliances and devices – stoma appliances, incontinence appliances, trusses, graduated compression hosiery, wound management products, oxygen appliances, nebulisers, home care appliances, diagnostic tests and devices iv. Nutritional/dietary products and health supplements v. Herbal supplements
C	<p>Effective interpersonal skills with patients, customers, care-givers, and other professionals</p>	<p>Communication skills in relation to patient management and collaboration with other healthcare professionals:</p> <ul style="list-style-type: none"> i. Written, verbal and non-verbal communication ii. Patient-counselling iii. Negotiation skills iv. Influencing and persuading

	NON- PHARMACEUTICAL (NON-PATIENT) CARE COMPETENCIES	SUBJECTS
D	<p>Drug development and provision of good quality medicinal products/therapeutic products</p> <ul style="list-style-type: none"> - clinical research/clinical trials - drug regulatory affairs/drug registration - procurement - storage - labelling - compounding/production - marketing - supply/dispensing 	<ul style="list-style-type: none"> i. Nature of medicinal products/therapeutic products/raw materials ii. Pharmaceutical / cosmeceutical formulation and compounding – including sterile products, cytotoxics etc. iii. Good distribution practices iv. Good manufacturing practices v. Quality control and assurance practices vi. Good clinical practice vii. Pharmaceutical marketing viii. Drug regulatory affairs
E	<p>Effective and efficient management of pharmaceutical services and operations within the organisation/institution and healthcare system</p>	<p>Application to pharmacy management/ operations:</p> <ul style="list-style-type: none"> i. Information technology and other technological advances ii. Human resource management and development iii. Organisation change and management iv. Resource management - time, inventory control etc. v. Customer services
F	<p>An appropriate awareness of professional and social issues affecting pharmacy and pharmacists</p>	<ul style="list-style-type: none"> i. Pharmacy laws and ethics ii. Healthcare system – social, behavioural, and administrative aspects of the local healthcare system and population iii. National and international quality standards related to pharmacy and healthcare
G	<p>The effective and efficient application of scientific data and information to achieving and supporting evidence-based practice</p>	<p>Application to pharmacy & medicine:</p> <ul style="list-style-type: none"> i. Research methodologies and skills ii. Biostatistics iii. Literature search and evaluation iv. Laboratory, clinical, behavioural or health services research

Q13 What is the compulsory CPE points requirement for the renewal of PC?

A To obtain the class of PC of their choice, pharmacists are required to earn sufficient CPE points during the qualifying period by taking part in the approved CPE activities that are related to the competencies of pharmacists (see Table 1). The requisite CPE point requirement for the renewal of each class of PC is given in Table 2. **There will be no rolling over of points to the next qualifying period if pharmacists accumulated greater than the requisite CPE points.**

Table 2 CPE Points Requirement for Renewing a Practising Certificate

<i>Class of PC applied for</i>	<i>Requisite CPE points</i>	<i>Minimum % of requisite CPE points from specific programmes</i>	<i>Qualifying period</i>
PC	50 points	30% of the requisite CPE points (15 points) from pharmaceutical (patient) care programmes	The period of 24 months preceding the relevant date
PC (Inactive)	20 points	None	The period of 24 months preceding the year in which the current PC expires
Specialist PC	50 points	30% of the requisite CPE points (15 points) from pharmaceutical (patient) care programmes in that branch of pharmacy speciality. E.g. If pharmacist is registered in Oncology, he must obtain at least 15 points from pharmaceutical (patient) care programmes in Oncology	The period of 24 months preceding the relevant date

Note to Table 2:

- i) The PC allows the holder to practise in all areas of pharmacy practice. **PC (Inactive)** prohibits the holder to practise in all area of pharmacy practice. **Specialist PC** allows the holder to use the title “specialist” when practising in that branch of specialty stated on his PC.
- ii) The “**relevant date**” means the date that is 4 months before the expiry date of the practising certificate to be renewed. E.g. if the PC expires in 31 December 2016, the relevant date will be 31 August 2016.

For pharmacists desirous of obtaining the PC, they must obtain 50 CPE points over the qualifying period of 24 months, of which no less than 15 CPE points must have been obtained in the pharmaceutical (patient) care areas as defined by competencies **A, B** and **C** of Table 1. These CPE points are known as pharmaceutical (patient) care **points** in contrast to CPE points earned outside the pharmaceutical (patient) care areas (i.e. competencies **D, E, F** and **G** of Table 1) which are designated non-pharmaceutical (non-patient) care **points**. Refer to Figure 2 for PC renewal process.

The Council allows non-active pharmacists to apply for **PC (Inactive)** which has a

lowered CPE points requirement of only 20 points during the qualifying period of 24 months. Non-active pharmacists are those not working as full-time, part-time, or locum pharmacists, or currently on long term residence overseas. **Holders of a PC (Inactive) cannot practise pharmacy but they can make use of the title pharmacist, and other official names, in situations not involving the practice of pharmacy.**

Pharmacists who are registered in a branch of pharmacy under the Register of Specialists will be granted a **Specialist** PC when they are first registered in that branch of pharmacy. They may apply for the renewal of the **Specialist** PC after obtaining at least 50 CPE points over 24 months of qualifying period, of which no less than 15 points are from pharmaceutical (patient) care programmes in that branch of pharmacy. Holders of **Specialist** PC may use the title “specialist” in the branch of pharmacy to which they are registered as a specialist.

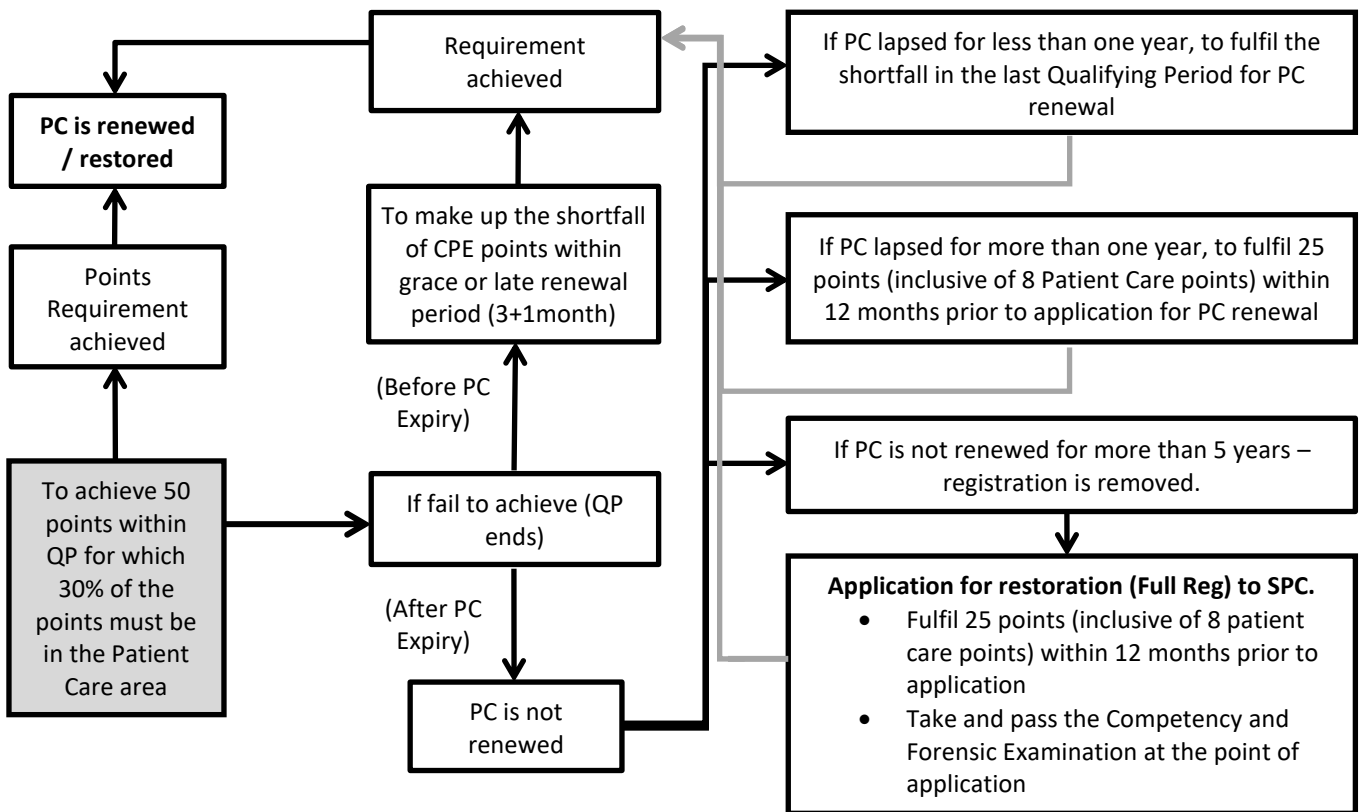


Fig 2. PC renewal and restoration process for pharmacists (CPE only, excluding additional requirements)

Concession on CPE Points Requirement

Q15 Does the Council allow pro-ration of CPE points requirement under certain circumstances?

A There is only one circumstance under which the CPE points requirement may be pro-rated:

A pharmacist who was issued a PC which is valid for less than 2 years. This will occur for the case of:

- a. newly registered pharmacists,
- b. inactive pharmacists who have been approved to resume active practice,
- c. pharmacists who have been granted PC after expiry of PC within 5 years, and
- d. pharmacists whose names were restored to the Register.

Pro-ration is allowed because the remaining qualifying period applicable to these pharmacists is shorter than the normal 24 months.

The pro-ration is calculated as follows:

$$\text{Requisite CPE points} = \frac{B}{730} \times 50 \text{ points}$$

where 730 (in days) stand for the qualifying period of 24 months, and B is the number of days between the date of issue of the current PC and the end of the qualifying period. In cases where the calculated requisite points are less than 2, then 2 points should be used instead. Two points are the expected points earned in one month. A person who has been granted a PC just a few days before the closing date of the qualifying period should have little difficulties obtaining the 2 points as there is ample time to do so due to the grace period (See **Q13**, pg. 13), although it is best to fulfil CPE requirement as soon as possible to avoid any potential delays in renewal and fees incurred due to late renewal.

Q16 What requirements are needed for:

- (a) Registered pharmacists without valid PC returning to active practice
- (b) Pharmacists holding PC (Inactive) converting to standard PC?

A (a) A registered pharmacist without a valid PC may return to active practice by making an application to the Council online through the Professional Registration System (PRS). A late renewal fee will be charged, and CPE requirement has to be met based on the following scenarios:

- i. For registered pharmacists who have not held a PC for exactly a year or less, he will need to fulfil any remaining shortfall of CPE point

- requirement from the previous QP.
- ii. For registered pharmacists who have not held a PC for more than a year but less than 5 years, he will need to accumulate at least 25 CPE points (inclusive of 8 pharmaceutical (patient) care points) immediately preceding the date of his PC application.
- (b) When a pharmacist holding a PC (Inactive) wishes to resume active practice, the Council may grant him a PC after he has obtained a minimum of 25 CPE points (inclusive of 8 pharmaceutical (patient) care points) during the preceding 12 months from the date he has indicated to the Council when he wishes to resume active practice.

For both scenarios, the pharmacist will be entitled to pro-ration of CPE requirement during the next PC renewal cycle. (See Q15 for the pro-ration calculation).

Q17 What happens to the PC of a pharmacist when (a) he is suspended, or (b) his name is removed from the Register of Pharmacists, as a result of a disciplinary action undertaken by the Council?

A A person, who has had his registration as a pharmacist cancelled or suspended under Part VI of the Act, must surrender his PC to the Council within 14 days of being notified by the Council. In the case where an appeal is pending, the Council may specify such other period of time within which the person must surrender his PC.

While an order of suspension of registration remains in force, the Act dictates that the person concerned shall not be regarded as being registered under the Act, notwithstanding that his name still appears in the Register. However, immediately on the expiry of such order, his rights and privileges as a registered pharmacist shall be reinstated. In other words, he has no right to hold a PC while being suspended, but that right is re-instated to him when the suspension order expires.

As the Act stipulates that the period of suspension must not exceed 3 years, and if the latter falls within the qualifying period, nothing needs to be done by the suspended person as his PC will be returned to him when the suspension order expires. However, he must comply with the full CPE point requirement when it comes to renewing his PC, notwithstanding that he had spent part of the qualifying period suspended from pharmacy practice.

If the period of suspension straddles between two qualifying periods, the person concerned may apply to renew his PC on the due date, upon full compliance with the CPE points requirement. The Council will return him his renewed PC when the period of suspension expires. Thus in both cases, it is important for the person to carry on CPE activities even though he is under suspension.

When a person's name is removed from the Register of Pharmacists, he is no longer a registered pharmacist. The Act forbids him, or his agent, to apply for the restoration of his name to the Register until the stipulated period of suspension has passed. To apply, he would have to fulfil the restoration requirement as stated in Q7, and it would also be subject to Council's approval.

Q18 What are the requirements to apply for PC (Inactive)?

- A** Pharmacists can apply for PC (Inactive) if they fulfil one of the following three criteria:
- i. Not under any employment (Not Working)
 - ii. Working in a non-pharmacy related area
 - iii. Have resided overseas continuously for at least 12 months

Not working status is applicable only if pharmacists are not under any employment. Once issued with the PC (Inactive), pharmacists will need to inform SPC if they intend to start working again. Pharmacists will have to convert their PC (Inactive) or apply for Normal PC prior to commencement of employment.

Working in non-pharmacy related area status is applicable only if pharmacists are not using the knowledge of pharmacy in their work. Once issued with the PC (Inactive), pharmacists will need to inform SPC if they intend to start practising pharmacy again. Pharmacists will have to apply for Normal PC.

Overseas status is applicable only if pharmacists have resided overseas for at least 1 year. (I.e. if pharmacists start overseas residency on 01/12/2016, they can only apply from 01/12/2017 onwards). Once issued with the PC (Inactive), pharmacists will need to inform SPC if they intend to return to Singapore. Upon returning to Singapore to practice, they will have to convert their PC (Inactive) or apply for a Normal PC.

Once PC (Inactive) application is approved, the CPE requirement will be lowered to 20 points during the qualifying period of 24 months. Renewal is still needed every 2 years at the same rate as normal PC. Exception is only given to inactive – not working, where the renewal fee is lowered.

To resume normal PC, pharmacists will need to fulfil 25 CPE points (8 pharmaceutical (patient) care points) within 12 months prior to the resumption date. No fees is need for the conversion (except for inactive – not working)

Application for PC (Inactive) can be done online through the Professional Registration System (PRS).

The System of Checks and Balances on CPE Points Requirement

Q19 How does the Council check on the CPE points claim made by pharmacists?

A The Council operates under an honour system that relies mainly on the honesty of pharmacists. Depending on the category listed in Table 4, the submission of supporting documents might be optional or mandatory.

Auditors of the Council may randomly check on their CPE records to verify the truthfulness of their CPE claims. Records of all CPE activities, and evidence of participation (receipt of fees paid, certificate of attendance/participation/completion, event programme schedule, statement of credit, copy/abstract of readings/publication/presentations, completed self-assessment exercises, book/journal reviews, etc.), must therefore be kept in a dossier for this purpose. Pharmacists are liable to disciplinary action for dishonesty if audits prove that they have made false claims over their CPE points.

Audits are generally conducted randomly with a fine comb. Personal interviews may be conducted in some cases. Pharmacists are advised to keep notes of their CPE activities as reference to these notes is allowed during the interviews. Notes are particularly useful if pharmacists need to convince the auditor that the CPE lectures they attended are particularly useful to pharmacy.

Key Considerations Before Embarking on a CPE Activity

Q20 What are the key things to look for before pharmacists embark on a particular CPE activity?

A There are four things to consider, failing which pharmacists may be denied CPE points or the type of CPE points that they desire.

Firstly, pharmacists must be sure that the particular CPE activity is relevant to pharmacy.

Generally, any CPE activity that is related to the pharmacy competencies listed in Table 1 shall be taken as relevant to pharmacy. Column 1 of Table 1 lists out the 7 categories of competencies of a pharmacist, and column 2 spells out the academic/professional subjects that support these competencies.

Pharmacists must also be clear about the specific type of CPE points they may be getting. Please note that pharmaceutical (patient) care points are only awarded to programmes or activities that are related and contribute to the competency of a pharmacist in pharmaceutical (patient) care areas. These areas come under categories **A**, **B** and **C** of Table 1. On the other hand, non-pharmaceutical (non-patient) care points are awarded to programmes or activities that are related to non-pharmaceutical (non-patient) care areas. These areas come under categories **D**, **E**, **F** and **G** of Table 1. It is obligatory for pharmacists to study Table 1 carefully to know the activities that will lead to pharmaceutical (patient) care points and non-

pharmaceutical (non-patient) care points.

Secondly, pharmacists must be certain that an accredited CPE provider has organised or produced that CPE programme/event.

The Singapore Pharmacy Council is the national accreditation agency for CPE providers in pharmacy. The accreditation of CPE providers serves to ensure that the programmes/activities they organise or produce are up to the quality standards set out by the Council. The accredited CPE providers are also empowered by the Council to assign CPE points for each programme they organise or produce according to the Council's guidelines.

The Council may, as a general practice, accept any CPE provider/programme that has been approved by the national accreditation agencies of certain developed countries where CPE activities are well developed. The accepted national accreditation agencies are listed in Table 3. The CPE programmes that have been accredited by these accreditation agencies shall be accepted as meeting the quality guidelines prescribed by the Council. In general, the Council shall accept the same CPE points assigned to these programmes by the respective accreditation bodies if they followed the rule of one CPE point for one hour of CPE activity. In situations where CPE points are not awarded according to this formula, pharmacists are advised to follow the Council's CPE point award system given in Table 4.

Table 3 LIST OF ACCEPTED ACCREDITATION AGENCIES

CPE Accreditation Agency	Acronym	Country
Accreditation Council for Pharmacy Education	ACPE	USA
Accreditation Council for Continuing Medical Education	ACCME	USA
Canadian Council for Continuing Education for Pharmacists	CCCEP	Canada
College of Pharmacy Practice	-	UK
International Association for Continuing Education and Training	IACET	USA
Pharmaceutical Guild of Australia	PGA	Australia
Association of Australian Clinical Pharmacists	AACP	Australia
Pharmaceutical Society of Australia	PSA	Australia
Singapore Medical Council	SMC	Singapore

Thirdly, pharmacists should read from a list of books and journals recommended by the Council if they wish to minimise the rejection of claims from the reading of non-recognised materials.

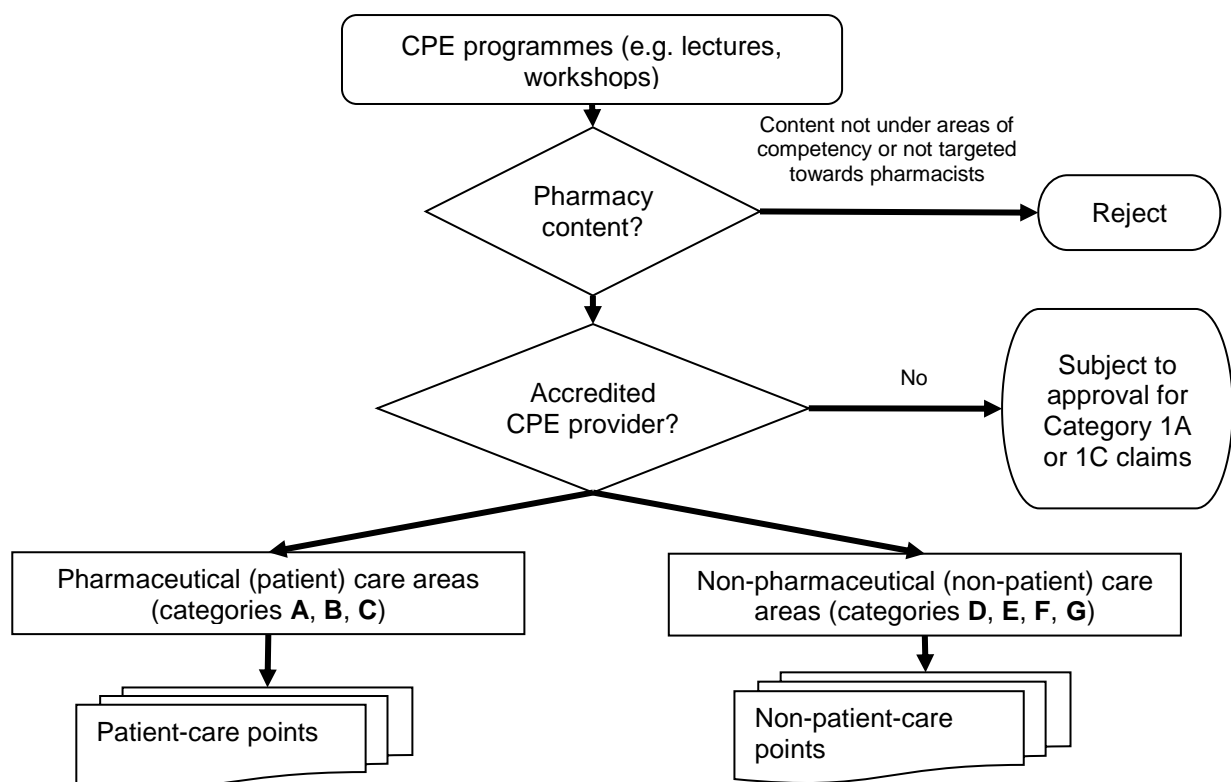
The list of recommended books and journals is accessible from the Council's website. The Council shall update the list from time to time upon recommendation by the CPE Accreditation Committee.

Fourthly, pharmacists must make sure that their participation of the CPE activity is verifiable by the Council.

For “live programmes” such as talks, seminar etc., providing the PRN and signing of the attendance sheet and keeping the certificate of attendance and programme schedule at the event is critical. For self-study distance learning programmes (online or offline), there must be a knowledge assessment component (e.g. MCQ, short test) to give evidence that pharmacists have taken part in the learning activity. For self-study programmes without an assessment component, or self-reading of books/journals, pharmacists must write a brief review in each case, stating how they have benefited professionally from such an activity or provide a copy/abstract of the reading. For pharmacists who are not accustomed to précis writing, it is sufficient to quote relevant statements from each article that are deemed to benefit them professionally. The verification of these self-study events is by random audit of their CPE dossier.

Q21 Please explain the above by means of decision trees.

A Example 1



Example 2

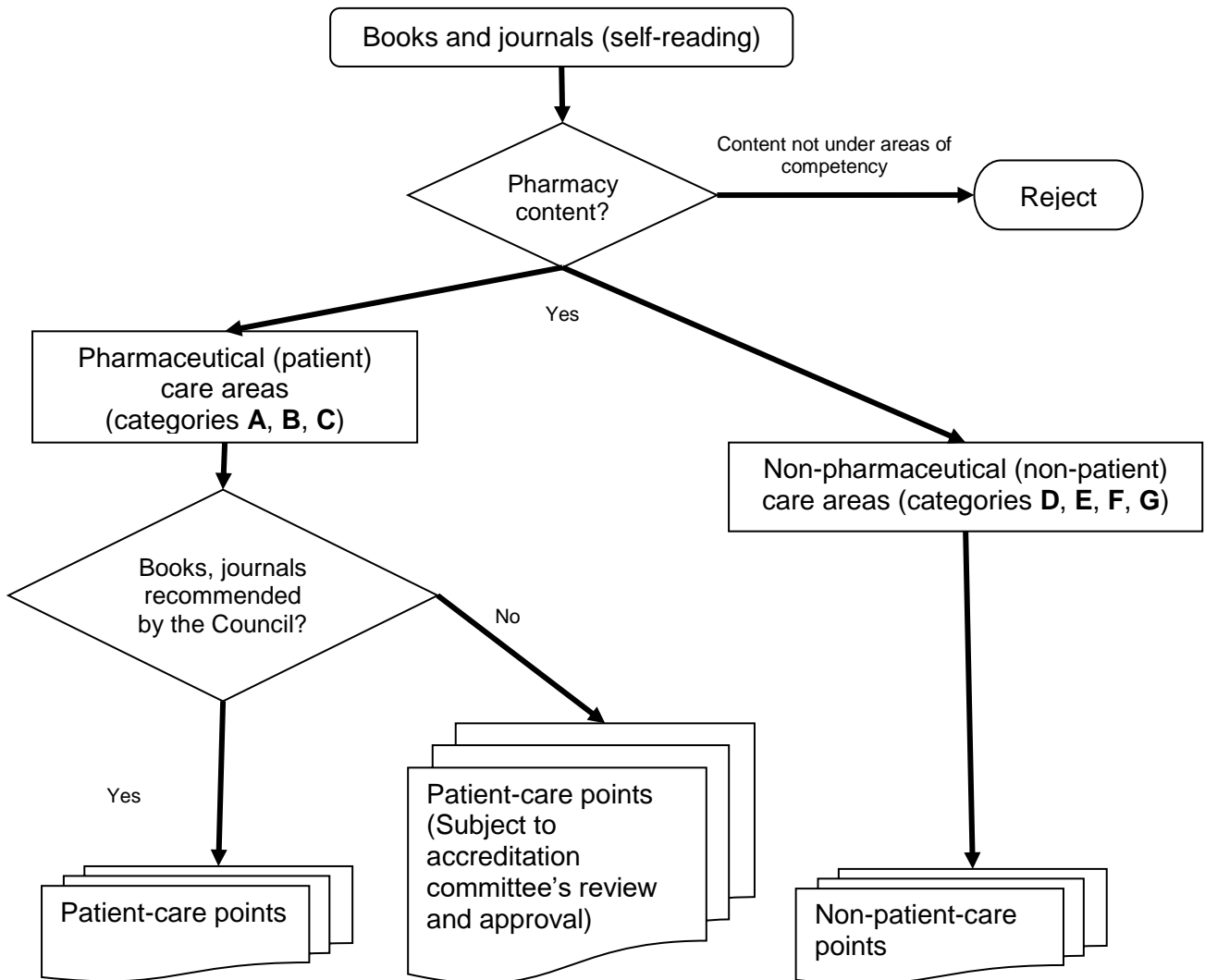


Fig 3. Two examples showing how CPE points are awarded

TABLE 4 ASSIGNMENT OF CPE POINTS UNDER DIFFERENT CATEGORIES OF CPE ACTIVITIES

ACTIVITY CATEGORY	CRITERIA	#CREDIT POINTS AWARDED	SUBMITTED BY / SUPPORTING DOCUMENT
<p>1A <u>Grand ward round or In-house CPE activities e.g. journal club, seminar, workshop, etc.</u></p> <p><u>Ad hoc events</u> -lecture -seminar -workshop -short course -conference</p> <p>Max claim: 20 points per 2 yr for cat. 1A</p>	<p>Open to internal staff of organisations only</p> <p>Organised by non-accredited local CPE provider</p>	<p>1 point per ward round 1 point per in-house activity</p> <p>1 point ($1 \leq X < 2$ hrs) 2 points ($2 \leq X < 4$ hrs) 3 points ($4 \leq X < 6$ hrs) 4 points ($X \geq 6$ hrs) X = no. of contact hrs</p>	<p>Pharmacist: <i>Certificate of attendance, attendance sheet or other form of records</i></p> <p><i>Same as above</i></p>
<p>1B <u>Local events</u> -lecture -seminar -workshop -short course -conference</p> <p>Max claim: 40 points per 2 yr for cat. 1B</p>	<p>Organised by accredited local CPE provider</p>	<p>1 point ($1 \leq X < 2$ hrs) 2 points ($2 \leq X < 4$ hrs) 3 points ($4 \leq X < 6$ hrs) 4 points ($X \geq 6$ hrs) X = no. of contact hrs</p>	<p>CPE provider: <i>Attendance sheet</i></p>
<p>1C <u>Overseas and regional events</u> -lecture -seminar -workshop -short course -conference</p> <p>Max claim: 35 points per 2 yr for cat 1C</p>	<p>Organised by international or regional CPE provider, approved on case by case basis</p>	<p>1 point ($1 \leq X < 2$ hrs) 2 points ($2 \leq X < 4$ hrs) 3 points ($4 \leq X < 6$ hrs) 4 points ($X \geq 6$ hrs) X = no. of contact hrs</p>	<p>Pharmacist: <i>Certificate of attendance / proof of attendance & event programme / brochure</i></p>
<p>2A <u>Publications of original work</u> -International refereed journals -Regional/local refereed journals -Non-refereed journals</p> <p>Max claim: 30 points for 2 yr for cat. 2A</p>	<p>Main author(s) Co-author(s)</p> <p>Main author(s) Co-author(s)</p> <p>Main author(s) Co-author(s)</p>	<p>5 points per paper 3 points per paper</p> <p>3 points per paper 2 points per paper</p> <p>2 points per paper 1 points per paper</p>	<p>Pharmacist: <i>Copy or abstract of publication</i></p>

ACTIVITY CATEGORY	CRITERIA	#CREDIT POINTS AWARDED	SUBMITTED BY / SUPPORTING DOCUMENT
<p>2B <u>Presentation</u> - Oral presentation of original work</p> <p>- Poster presentation of original work</p> <p>Max claim: 30 points for 2 yr for cat. 2B</p>	<p>Speaker</p> <p>Co-author</p> <p>All authors</p>	<p>2 points per oral presentation</p> <p>1 point per oral presentation</p> <p>1 point per poster presentation</p>	<p>Pharmacist: <i>Copy or Abstract of presentation & event programme</i></p>
<p>3A <u>Self- study</u></p> <p><u>Online /off-line education programme</u></p> <p>Max claim: 35 points per 2 yr for cat. 3A</p>	<p>Reading of pharmacy papers / articles from recommended list of journals and books</p> <p>Reading of pharmacy papers / articles not from recommended list</p> <p>Produced by accredited programme provider or approved provider on a case-by-case basis</p>	<p>1 point per article or chapter read</p> <p>1 point per article or chapter read (approved on case-by-case basis)</p> <p>1 point per module or use same points as awarded by the accredited provider</p>	<p>Pharmacist: <i>Copy of reading, written review or self-assessment exercise</i> <i>For reading of books, copy of the cover and contents page</i></p> <p>Pharmacist: <i>Copy of reading, written review or self-assessment exercise</i> <i>For reading of books, copy of the cover and contents page</i></p> <p>Pharmacist: <i>Statement of credit or certificate of completion issued by the accredited provider, showing the points awarded</i></p>
<p>3B <u>Postgraduate study</u></p>	<p>Full-time</p> <p>Part-time</p>	<p>12 points per 12 months</p> <p>6 points per 12 months</p>	<p>Pharmacist: <i>Receipt of fees paid or certificate of completion / Transcript / Result Slip</i></p>

Patient-care points are awarded to programmes with topics classified under category **A, B** or **C**. Non-patient-care points are awarded to programmes with topics under category **D, E, F** or **G**. For self-reading, pharmaceutical (patient) care points are awarded if the reading material came from the approved list of books and journals. No points are awarded for events less than one-hour duration. The maximum number of points awarded to any event lasting more than 6 hours is 4 points per day.

The CPE Points Award System

Q22 What are the categories of CPE activities from which one may claim CPE points?

A The Council has approved a comprehensive list of activities from which pharmacists may obtain CPE points (see Table 4). To each category of activity the Council has specified the manner in which the CPE points are to be computed and the Council would verify the participation in these events. The CPE points earned for each activity shall be distinguished as pharmaceutical (patient) care points or non-pharmaceutical (non-patient) care points strictly according to the definitions given in Q14. (Also see footnote # of Table 4). The Council also imposes maximum claim limit for each category of activity to discourage over-concentration in one area.

Category **1A** includes all private closed-door CPE activities organised by organisations for their own staff, e.g. grand ward rounds, journal club, seminars, workshops etc. The organizers need not be accredited CPE providers, and they are not required to seek Council's approval for these events. In view of these concessions, only 1 CPE point is allowed per event, and the maximum accumulated CPE points are capped at **20 points for 2 years**. The organizers are required to keep an attendance sheet for each event, and the pharmacists must note down the key points of each event, such as date and time, the topics presented, the name of the presenters, and the lesson learned.

In the case that the organizers of the category **1A** events are also accredited CPE providers, they are encouraged to hold some of their events under category **1B**; in which case the participation must be open to all pharmacists.

Activities under **1B** are local "live" events produced and/or organised by accredited local CPE providers. These events are open to all pharmacists, subject to limitation of seats. The providers will notify the Council at least one month before the event so that the Council, for the information of all pharmacists, can post details of the events online. Pharmacists need not compute the CPE points earned from these events. The CPE programme provider determines these points according to the Council's guideline. Pharmacists only need to sign the attendance sheet at each event and furnish their registration number against their name, or otherwise indicate their participation electronically, e.g. *via* an electronic reader. Their CPE record will be updated automatically when the programme provider furnishes the Council with the attendance list. Maximum claim under category **1B** is **40 points over 2 years**.

Category **1C** covers overseas live events, and special *ad hoc* events. All claims on participation in overseas events organised by accepted overseas accreditation agencies listed in Table 3 will be accepted and approved. Please keep the certificate of attendance, event programme schedules or other evidence after participating in these activities. These should be submitted to the Council during online submission. Please note that internal regional meetings and study trips do not qualify as category **1C** overseas events.

As there are also a number of excellent local and overseas pharmacy-related CPE events that are not presented by accredited programme providers, the Council will consider each event on a case-by-case basis. Generally, the events must have

national or international standing, with multi-national speakers and participants. When approved, these events are classified as *ad hoc* events under category **1C**. Maximum claim allowed for category **1C** activities is **35 points over 2 years**

Category **2A** covers the publication of original research work, or point of view, in specialised journals. Research work includes both theoretical and bench research work, and includes review of literature for which the reviewer has input his own analysis and conclusions from the data and information collected. Points are given according to the journal type and whether the pharmacist is the main author or the co-author of the article. Main author(s) of a paper are the supervisor and investigator who are *mainly* responsible for the research findings published in the paper. The main author(s) may be one person, but should not be more than two. In cases of dispute, the authors shall decide amongst themselves as to who are the main authors, failing which all authors will be taken as co-authors. Corresponding authors will be recognised as the supervisor and main author. If pharmacists are an author of a paper, they need to keep a reprint of their paper/article in the dossier for verification purpose. Maximum claim allowed under this category is **30 points over 2 years**.

If there are multiple publications of the same research work, as long as the contents of the papers are essentially the same, **only the first paper would be accepted**.

Category **2B** pertains to oral and poster presentation of original work, or point of view, in professional or scientific conferences organised by accredited CPE providers. The speaker at the oral presentation is given higher points than his/her co-author(s). Authors of poster presentation on the other hand are given equal status. If pharmacists were an author of oral or poster presentation, they must keep the event programme/flyer in their dossier for verification purpose. Maximum claim allowed under this category is **30 points over 2 years**.

Similar to Category **2A**, if there are multiple presentations of the same research work, as long as the contents of the presentation are essentially the same, **only the first presentation would be accepted for claim**.

In addition, if a paper based on original work is published and subsequently presented in a conference, only Category **2A** can be claimed and not Category **2B**. On the other hand, if a presentation of part of an original work in a conference, and subsequently publishes the whole work in a paper, both Category **2A** and **2B** can be claimed. Note that only publications and presentations within the current qualifying period will be accepted as valid.

Category **3A** on self-study is possibly the type of activity that will earn pharmacists the most CPE points. Self-study involves either self-reading, or taking part in online or offline distant learning programmes.

For reading materials, the Council has provided a list of approved journals and recommended books in its website:

http://www.healthprofessionals.gov.sg/content/hprof/spc/en/leftnav/continuing_professional_education_CPE/for_pharmacists.html

Some of the key journals and textbooks are listed in Annex A. Pharmacists may claim pharmaceutical (patient) care points by reading any paper/article from this list that falls within the pharmaceutical (patient) care areas (i.e. categories **A, B, and C** of Table 1). On the other hand, the reading of pharmaceutical (patient) care materials outside the list will entitle pharmacists to pharmaceutical (patient) care points after accreditation committee's review and approval. (Please read Example 2 of Figure 1 for a better understanding of this rule). It is therefore to their advantage if pharmacists could assist the Council in updating its list of pharmaceutical (patient) care journals and books. As a rule, the Council will accept the title of any journal or book that has been listed in the catalogue of the Medical Library of the National University of Singapore, or was captured by MEDLINE.

The universe of non-pharmaceutical (non-patient) care books related to pharmacy is enormous. The Council would like to confine them to journals and books found in the libraries of institutes of higher learning, or in the reference books section of the National Library. Reading of papers and chapters of these journals and books will earn pharmacists non-pharmaceutical (non-patient) care points.

For verification purpose, pharmacists are required to write a short review of each paper or article they read stating how much they have benefited professionally from such reading. Where self-assessment exercises are provided with their reading materials, it is sufficient to use the completed assessment exercises for verification purpose.

As no point is awarded for any CPE event that is less than one hour in duration, the Council considers an hour of effort as involving the reading of a paper or chapter that is **at least four A4 size pages** in length, inclusive of the writing of a short review, or completing the self-assessment exercise.

In selecting reading materials for CPE accrual, pharmacists are reminded to select material that is educational, and not merely informative. For example, books of standards (e.g. BP, Singapore Standards) that provide specifications for a number of pharmacy-related items are informative, but not educational. Articles that explain the rationale of those specifications are educational.

Readers of journals and books are reminded that they can only claim one CPE point for each paper or chapter read. To make their claim, pharmacists need to enter details of their reading activities into the Council's online CPE system.

The majority of online or offline distance learning programmes are produced overseas. Annex B gives a list of local and foreign online CPE providers that provide distance learning programmes with an assessment component, and charge no fees. Pharmacists are reminded again to check if these programmes were accredited by the accreditation agencies listed in Table 3. Upon completion of each course, Certificate, Statement of Credit or other evidence must be saved and submitted for SPC to verify the points claimed. Maximum claim for category **3A** activities allowed is **35 points over two years**.

Category **3B** covers postgraduate studies. Different points are given for full-time and part-time studies. When a course straddles over two qualifying periods, claims have

to be made for each period, one in the first qualifying period (from commencement date till closing date of qualifying period) and second in the next qualifying period (from opening date of qualifying period till the end date of the year of study). Points will be credited according to the time spent on a pro-rata basis (0.5 point per month for Part-time studies and 1 point per month for Full-time studies). Receipts of fees paid, transcripts, official result slips or other evidence must be submitted for verification purposes.

Except for events under category **1B**, pharmacists are required in all cases to make their own claims for CPE points through the SPC Online system by following the procedures described in Part 2 of this Guide.

Advice to Pharmacists

Q23 How would a pharmacist ensure that a claim is submitted correctly and processed promptly?

- A** Submit claims under category 1A (in-house) for attending CE courses and events organised for healthcare professionals under their organisation. For other local non-accredited pharmaceutical events, please submit under category 1A (Ad-hoc). The cap limit is 20 points.

When pharmacists attend category 1B events organised by SPC accredited CPE providers, they will furnish the Council with the attendance list. Please ensure that attendance is marked correctly with them and indicate their PRN (Pharmacist Registration Number).

Submit claims under category 1C for attending overseas pharmaceutical and scientific events & events held in Singapore by Regional or International organizations (Lecture, Seminar, Workshop, Short Course, and Conference). Please send in the programme schedules and proof of attendance (certificate, fee receipt or confirmation letter) to substantiate their claim. The cap limit is 35 points.

Submit claims under category 2A for Publications of Original research work (Full length articles in recognised publications). Only claims made based on publication of original research materials in accepted peer-reviewed journals within the current qualifying period will be accepted. Please send in the abstract of the published article and the publication details to substantiate their claim. The cap limit is 30 points.

Submit claims under category 2B for Oral / Poster Presentations of Original research work in accredited events. Only claims made based on presentation of original research materials at accredited events within the current qualifying period will be accepted. Please send in the presented materials / abstract and event details to substantiate their claim. The cap limit is 30 points.

Submit claims under category 3A after completing on-line courses or reading pharmaceutical related journals and books. For category 3A (Reading), please submit a copy of reading material or a 1-page self-written review etc. For category 3A

(Online Education) please submit the website's URL, certificate of completion etc. The cap limit is 35 points.

Submit claims under category 3B for participation in pharmacy-related post-graduate studies. Please send in documentary proof of their candidature (certificate, acceptance of enrolment or fee receipt, etc.) and details of the post-graduate course undertaken to substantiate their claim. There is no cap limit.

Q24 How would a pharmacist approach CPE to ensure that he is able to fulfil the CPE requirements?

A The following are the **5Ps** for successes in the CPE journey:

Positive attitude – Consider CPE as an avenue to keep up with pharmaceutical advances, opportunity to upgrade knowledge and provide the best pharmaceutical service to patients and members of the public.

Plan early – Nothing is worse than last minute rush. Plan early and plan for 24 months. Look up the Council's online CPE calendar of events and pick the relevant events that do not clash with own schedules. Also look up the websites of the key CPE providers such as PSS and the pharmacy department of NUS (see Annex C) for events that fail to appear in time on the Council's calendar.

Plan wisely – Draw a broad outline of action according to the type of PC that is desired. Project the points pharmacists may earn from different categories of activity and add up the points. This will be the two-year plan. Try to select events that have been awarded pharmaceutical (patient) care points. Try to aim for as much "live events" as possible since they are comparatively less demanding on time and effort. They are useful for networking too.

Participate actively – Participate actively throughout the year. Do not wait until the last quarter of the qualifying period to chalk up CPE points. Pharmacists will find themselves hard-pressed for time. Most topical events are only repeated once in two years. Do not let good events slip away.

Prompt recording – The Council depends on random check of CPE records to verify the truthfulness of CPE claims. To facilitate audits, pharmacists are required to record all events in the format as given in Annex D. Try to record immediately after each activity before pharmacists forget and miss their claim. Any delay would simply double the effort in the future. Keep all evidence of participation, e.g. flyers, receipts, certificates of participations etc. in dossier (see Annex D). The flyers are particularly useful for recording purpose since they contain most of the information required.

Q and A from Feedback

Practising Certificates

Q25 I am a registered pharmacist involved in the manufacturing of pharmaceuticals at a manufacturing site. If I did not obtain sufficient CPE points to hold a PC under the Act, would this have any effect on my work? Can I do what I have been doing but not in the capacity of a pharmacist?

A In any licensing system, it accords the license holder with privileges as well as its due responsibilities. If pharmacists hold a PC, they stand a good chance of being chosen by their organisation to hold the licence or permit. This is good for their career development.

If pharmacists failed to renew their PC, their registration as a pharmacist will be taken as registered but without a valid practising certificate; and legally they are classified as an unauthorized person to practise pharmacy. As such, they are no longer qualified to hold any licence or permit that requires the holder to be a practising pharmacist. Pharmacists may however carry on working within their organisation as a non-pharmacist without fear of being prosecuted, provided they do not in any way represent themselves as a duly qualified pharmacist.

Legally, their employer should not entrust them with any responsible role that falls within the definition of pharmacy practice (e.g. manufacturing, distribution, and quality assurance of medicinal products/therapeutic products). See **Q8**, **Q9**. Thus, it is difficult for pharmacists to carry on doing what they have done in the past unless they move into areas unconnected to pharmacy practice such as human resource management, financial control etc.

Areas of Competency

Q26 My main responsibility is research in pharmaceutical chemistry. I note that pharmaceutical chemistry and other pharmaceutical sciences are not listed in Table 1 of the Guide. Are pharmaceutical sciences not core competencies of a pharmacist?

A Pharmaceutical chemistry and other pharmaceutical sciences are covered in Table 1 under competency **D**, "Nature of medicinal products/therapeutic products/raw materials". Thus, pharmaceuticals, pharmaceutical chemistry and pharmacology are the study of the physical, chemical and biological nature of medicinal products/therapeutic products/raw materials respectively. In addition, matters relating to laboratory and clinical research are further covered under competency **G**.

Points Award System

Q27 To earn pharmaceutical (patient) care points, one has to read from the list of books and journals set out in the Council's website. May I know the criteria for the inclusion of such books and journals?

A The most important criterion is for these books and journals to cover areas related to competencies A, B, and C of Table 1. As a general guide, the Council will accept any

recommended book or journal in these areas if its title also appears in the medical library catalogue of NUS, or captured by MEDLINE. The medical library catalogue is accessible through the website of NUS (i.e. <http://www.nus.edu.sg>).

Books written for laypersons are not accepted. This is in line with the principle that CPE is post-graduation education of a professional person and must be pitched to the tertiary education level. The same principle is also applicable to live events where the majority of the participants must be healthcare professionals, scientists etc. and not laypersons. Pharmacists are advised to send feedback to the Council should they find a “live event” degenerating into a sale-talk that is pitched at a level meant for laypersons.

Q28 I often follow my husband, who is a medical doctor, to CME (Continuing Medical Education) talks. I find these talks useful in improving my knowledge and skills in pharmaceutical (patient) care. Can I claim CPE points from attending these talks?

A The Council recognises the Singapore Medical Council (SMC) as one of the accepted accreditation agencies (see Table 3). Thus, the Council automatically accepts any event accredited by SMC as qualifying for CPE points when its subject matter is relevant to pharmacy (see Table 1). Pharmacists may submit their claim under category 1B activities if the CME organiser provides an attendance sheet for pharmacists to sign and thereafter submits the attendance to the Council within the stipulated time. If such facility is not available, pharmacists may submit their claim under category 1C (ad hoc) activities and keep in their dossier, a written review of the event and other proof of attendance (flyers, receipts, etc.), if any.

The Council is well aware that not all CME programmes are relevant to pharmacy and that some programmes are in fact strictly out of bounds to non-medical people. Pharmacists are advised to study Table 1 carefully and choose only those CME programmes that are relevant to pharmacy. In ambiguous cases, the notes taken by pharmacists during these events may help to convince the Council’s auditor in their favour.

Q29 Do the following activities count towards earning CPE points?

- (a) Conducting training for pharmacy technicians/pharmacy assistants,
- (b) Precepting pre-registration pharmacists,
- (c) Designing clinical trial protocols,
- (d) Sitting on committees of professional and governmental bodies,
- (e) Part-time lecturing at the university or polytechnic(s) and
- (f) Contributing articles regularly to a newspaper’s healthcare column.

A The Council does not award CPE points to any activity that is deemed part of one’s work. It does not matter if the work is voluntary or forms part of one’s employment.

Q30 My job often requires me to attend meetings, in Singapore and ASEAN that are technical in nature and have improved my competency in a given area. I do not understand why meetings are not considered CPE events.

A Under the definition of CPE (see Q1 of the Guide) the list of recognised activities does not include meetings. The key point in the definition is that CPE programmes are planned and structured learning events. Meetings, by their very nature, are for discussion and reaching consensus on various issues, and not for learning. If meetings were CPE events, most pharmacists would have little difficulty in meeting their CPE target.

Q31 Will pharmacists be awarded CPE points if they give talks to other pharmacists or the general public?

A No CPE points will be awarded for giving talks. However, the pharmacist can earn points from self-reading of pharmacy related topics in journals, or chapters of books, in his preparation for the talk (see category 3A activity). If the talk is given at a CPE event organised by an accredited provider (i.e. category 1B activity) the pharmacist may sign in and claim points as a participant of the event. For talks given at in-house or valid non-accredited events, points may be claimed under category 1A.

Q32 Is there a difference between giving CPE talks and presenting a research paper in a pharmacy congress?

A Unlike a speaker who delivers a CPE lecture, a pharmacist who presents a research paper in the pharmacy congress may claim CPE points under category 2B. Category 2B points are specifically given to someone who gives an oral presentation of a piece of original work, or presents an opinion in an accredited event. As the pharmacy congress is also a category 1B event, the pharmacist may also claim points by signing in as a participant as well.

Q33 Can we claim CPE points from certain local events that are not accredited but are found to be useful to our own practice? One good example is the nutrition talks organised by the Singapore Sports Council.

A CPE points may be awarded to events presented by non-accredited CPE providers under category 1C (ad hoc events) if they are relevant to pharmacy practice (See Table 1). These events must be approved by Council on a case-by-case basis. Pharmacists will need to keep in their dossier, a written review of the event and other proof of attendances (flyers and receipts, etc.), if any. However, if these talks are also open to the public (public forums) and are not specifically targeted at the healthcare professionals and scientists, no CPE points can be awarded even though the provider may be accredited.

Q34 Can I claim any pharmaceutical (patient) care points by attending a 6-year full time course in Traditional Chinese Medicine (TCM)?

A This, and other courses falling into the grey areas, requires careful consideration by the Council. The Council has set up the CPE Accreditation Committee and a Panel of Experts to advise it on matters such as this. Pharmacists may write to the Council for its opinion. Generally, the course curriculum must be submitted to the Council, which will consider each application on a case-by-case basis.

Q35 Does attendance at management courses qualify for pharmaceutical (patient) care or non-pharmaceutical (non-patient) care points?

A Only management courses related to subjects listed in competency area E of Table 1 will be awarded non-pharmaceutical (non-patient) care points. Pharmacists are advised to study Table 1 very carefully to understand what are considered to be pharmacy subjects. CPE points are awarded only for the study of subjects listed in Table 1.

The Council recognises that it is sometimes difficult to decide if a particular management course, meant to equip participants with the technique and general principles of management, is relevant to pharmacy. Pharmacists may convince the Council's CPE auditor in their favour if they included a review in their dossier stating how much the course has helped them improve the management of their pharmaceutical organization.

Q36 Do I get any CPE points if (a) I failed my postgraduate study, or (b) I failed the assessment tests of the online course I am pursuing?

A At the beginning of the CPE scheme, the Council is not concerned if a pharmacist failed in any postgraduate course, or any CPE programme that has an assessment component. The Council's priority now is to open all doors for every pharmacist to get on board the CPE train. On the other hand, the Council does not condone any abuse of this concession. Thus, a pharmacist who fails a postgraduate course must furnish a statement from the course provider certifying that he or she had satisfactorily participated in the course. Similarly, pharmacists pursuing online courses must keep the answers to all assessment tests in their CPE dossier for random audit by the Council.

Q37 Which postgraduate courses will be awarded pharmaceutical (patient) care points?

A Postgraduate courses that merit the award of pharmaceutical (patient) care points are those whose subject matter falls under competency areas A, B or C given in Table 1. Subjects in these areas are related to pharmaceutical (patient) care. Thus, a course that is related to, or leading to, pharmaceutical (patient) care, will be awarded pharmaceutical (patient) care points. For example, a course in pharmacoeconomics is related to pharmaceutical (patient) care, while the study of clinical pharmacy will lead to pharmaceutical (patient) care.

Q38 How about a course that is not related to pharmacy?

A Courses or activities not pertaining to the areas of competencies listed in Table 1 will not be awarded CPE points. If the subject matter falls under areas D to G given in Table 1, non-pharmaceutical (non-patient) care points will be awarded. The Council also recognises that there are subjects that fall within grey areas outside Table 1, the inclusion of which may require expert opinions from members of the Council's Panel of Experts.

Q39 What happens if a postgraduate course straddles between two qualifying periods (QPs)?

A When a course straddles over two qualifying periods, claims have to be made for each period, one in the first qualifying period (from commencement date till closing date of qualifying period) and second in the next qualifying period (from opening date of qualifying period till the end date of the year of study). Points will be credited according to the time spent on a pro-rata basis (0.5point/month for Part-time studies and 1 point/month for Full-time studies). Receipts of fees paid, transcripts, official result slips or other evidence must be submitted for verification purposes.

Q40 Are non-pharmaceutical (non-patient) care points awarded to articles published in non-refereed journals?

A A paper published in a non-refereed journal is awarded fewer CPE points than that in a refereed journal. If the subject matter falls within the pharmaceutical (patient) care areas, i.e. competency area A, B or C of Table 1, it will be awarded pharmaceutical (patient) care points. Non-patient-care points are awarded if the subject matter falls under areas D to G.

Q41 I am very disappointed at the CPE points awarded to postgraduate study as compared to that given for attending a 2-day pharmacy congress. Considering the examinations taken, amount of reading, memorising, ward rounds/clinical rotations etc., I think the very intensive postgraduate course deserves far more CPE points than attending a pharmacy congress.

A As a postgraduate student, the pharmacist is in the same position as non-student pharmacists, to claim the maximum points of 35 from the reading of journals and books in the course of his study (category 3A activity), not to mention the publication of papers and presentation of original research findings at conferences (categories 2A and 2B activities). The award of additional points for postgraduate study per se is double counting of the same effort put in by the pharmacist. The Council's decision to award points for postgraduate study was to encourage more pharmacists to further their pharmacy education at a higher level, and also to recognise that these pharmacists are helping to raise the professional standard of pharmacy in Singapore. By combining the points earned under categories 2A, 2B, 3A and 3B activities, a postgraduate student will have no difficulty in satisfying the compulsory CPE point requirement.

Q42 For pharmaceutical scientists reading articles in pharmaceutical sciences, the length of the articles, some short and some long, does not seem to have any relationship with the 1 CPE point awarded for each article read. This guideline is quite meaningless in terms of the actual effort put in.

A The general rule of the point award system is that no point will be awarded for an event that is less than one-hour in duration. A short event is lacking in depth and breadth. Thus, short articles that take less than one hour to read and digest will get no points. As a general rule, a short article is one that is less than four A4- size pages in length.

The amount of time needed to read & understand any article will vary among pharmacists. There is no satisfactory rubric for awarding points based on the length of an article as length may not correlate with depth of content due to circumstances that are not within the author's or readers control. The Council trusts that pharmacists will understand and recognize that the benefits of reading articles are in their value to their learning, and not in the points accredited

Q43 I have read a 22-page CPE article in the 'US Pharmacist and Drug Store News' that came with 20 assessment questions. I was only awarded CE units of 0.2 for my effort. The credit appears to be inequitable to the time I spent. Can you explain?

A When the Council decided to accept the same CPE points assigned to programmes accredited by the agencies listed in Table 2 of the Guide, it did so on the premise that the CPE points so awarded have been based on the common practice of awarding 1 CPE point for each contact hour of CPE activity. This has been found to be true in most cases with a few exceptions, e.g. the credit points awarded by the Accreditation Council for Pharmacy Education (ACPE) of the USA. The ACPE uses the continuing education unit (CEU) as the quantitative measurement of CPE activity. Each CEU is defined as 10 contact hours of CPE activity. To avoid any confusion, most CPE providers do give the contact hours for each of their programmes. This will allow easy conversion to our point award system.

Q44 The caps imposed on CPE points earned from the different categories of activity are too restrictive, as most pharmacists will try to get the required CPE points through either self-study or attending lectures, but not both.

A Self-study may be convenient to some, but few realise that it takes 5 hours of reading to gain the same level of understanding of a subject delivered by a good lecturer in one hour. Self-study also denies a person of the chance to interact with his peers. Attending lectures on the other hand may be cost effective but the knowledge learnt is only temporary if one does not read more on the subject after the events. The Council would like to encourage pharmacists to attend as many live events as possible and this should be followed up by further reading and reflection of the knowledge gained. The cap set for each category of activity is not there to restrict the freedom of action. It is an attempt to balance CPE activities so that pharmacists may gain the best benefits from the time and effort spent.

Q45 What should I do when I have not met my CPE requirement for this Qualifying Period (QP)?

A Look out for 1B events to attend

- Use the CPE events calendar in the SPC website to search for 1B events to attend. 1B events are organised by accredited local CPE providers, and the points will be submitted by the event provider for the pharmacists based on their attendance record and the duration of the events. The cap limit is 40 points.
- If pharmacists are unable to obtain the required CPE points by 31st August, they will be given a grace period that extends to 31st November to make up for the short fall. Pharmacists may wish to consider attending the Singapore Pharmacy Congress, held usually in September or October which can earn them a number of Category 1B CPE points. Do note however that the cap limit is 40 points for Category 1B.

Attempt Category 3A activities

- Take advantage of 3A activities which pharmacists can do at home. The list of recognised books and journals may be downloaded from the SPC website. The list of on-line courses is also available in the SPC website. Do note that articles in journals must at least be 4 pages long to be valid. For claims on online education programmes that have been given points by SPC accepted accreditation agencies (e.g. ACPE, PSA, etc.) please submit under Category 3A (Online Education).
- A popular reading material among pharmacists is the HSA Adverse Drugs Bulletin, which earns pharmacists 1 pharmaceutical (patient) care point if they read the entire issue. Do not read issues of the Bulletin that are more than 2- year old as some of the published information may be dated.

Q46 How do I ensure that my claim is submitted correctly and processed promptly?

A Make sure claims are submitted under the correct categories

- 1A (in-house) is for attending CE courses and events that are organised for healthcare professionals in their organisation. For other local non-accredited pharmaceutical events, please submit under 1A (Ad-hoc). The cap limit is 20 points.
- 1C is for attending overseas pharmaceutical and scientific events or events held in Singapore by regional or international organizations (Lecture, Seminar, Workshop, Short Course, and Conference). The cap limit is 35 points.

CLAIM DETAIL									
Category	1C								
Type of Activity	Overseas Events								
*Role	Participant <input type="button" value="v"/>								
*Patient Care Subject	<input type="radio"/> No <input checked="" type="radio"/> Yes								
*Subject	Disease Management <input type="button" value="v"/>								
*Type of Overseas Event	Conference <input type="button" value="v"/>								
*Event Specialty	Others (Non-specialty) <input type="button" value="v"/>								
*Event Title	Others <input type="button" value="v"/>								
*Event Title (Others)	8th Congress of the Pan-As								
*Organiser	Pactrims								
*Country	Korea, South <input type="button" value="v"/>								
*Venue	Conrad Seoul Hotel								
*Event Start Date	19/11/2015 <input type="button" value="calendar"/>								
*Event End Date	21/11/2015 <input type="button" value="calendar"/> Refresh Duration								
	<table border="1"> <thead> <tr> <th>Date</th> <th>*Duration</th> </tr> </thead> <tbody> <tr> <td>19/11/2015</td> <td>4<= X <6 Hrs <input type="button" value="v"/></td> </tr> <tr> <td>20/11/2015</td> <td>X >=6 Hrs <input type="button" value="v"/></td> </tr> <tr> <td>21/11/2015</td> <td>2<= X <4 Hrs <input type="button" value="v"/></td> </tr> </tbody> </table>	Date	*Duration	19/11/2015	4<= X <6 Hrs <input type="button" value="v"/>	20/11/2015	X >=6 Hrs <input type="button" value="v"/>	21/11/2015	2<= X <4 Hrs <input type="button" value="v"/>
Date	*Duration								
19/11/2015	4<= X <6 Hrs <input type="button" value="v"/>								
20/11/2015	X >=6 Hrs <input type="button" value="v"/>								
21/11/2015	2<= X <4 Hrs <input type="button" value="v"/>								
Speaker's Topic 1	<input type="text"/> Add Speaker Topic								
Additional Remarks	<input type="text"/> (0/500)								

Fig 4. Category 1C screenshot example

- 2A is for Publications of original research work (Full length articles in academic/professional publications). Original work means work that has not been published before. Papers published in peer-reviewed journals are given more points than papers published in non-refereed journals. The cap limit is 30 points.
- 2B is for Oral / Poster Presentations of original research work in accredited events. Only presentation of original research work at accredited events within the current qualifying period will be accepted. The cap limit is 30 points.
- 3A is for completion of on-line courses, or reading of pharmaceutical related journals and books. For 3A (Reading), please ensure that the reading is at least 4 pages long and indicate correctly the title and page numbers (E.g. "Page 10 to 18"). For 3A (Online Education) please ensure that the program is accredited by valid accreditation agency listed in Table 1. The cap limit is 35 points.

*Topic / Title	Canadian Rheumatology
Publisher	The Journal of Rheumatology
*Publication Year	2012
Volume / Issue No	39
Page number	1559-1582

Fig 5. Category 3A (Reading) screenshot example

- 3B is for participation in pharmacy-related post-graduate studies leading to an academic or professional qualification. There is no cap limit.

Provide supporting documents for the claims

- 1A requirement for supporting documents online submission is optional. However, it is strongly recommended for documents to be submitted for prompt processing. **Proof of attendance (Certificate of Attendance, entry pass or letter/email confirmation) and details of events (programme schedule or event brochure)** is acceptable.
- 1C requirement for supporting documents online submission is mandatory. Please provide both proof of attendance (**Certificate of Attendance, entry pass or letter/email confirmation**) and details of events (**programme schedule or event brochure**) to substantiate the claim. Air ticket and hotel accommodation receipt are not accepted.

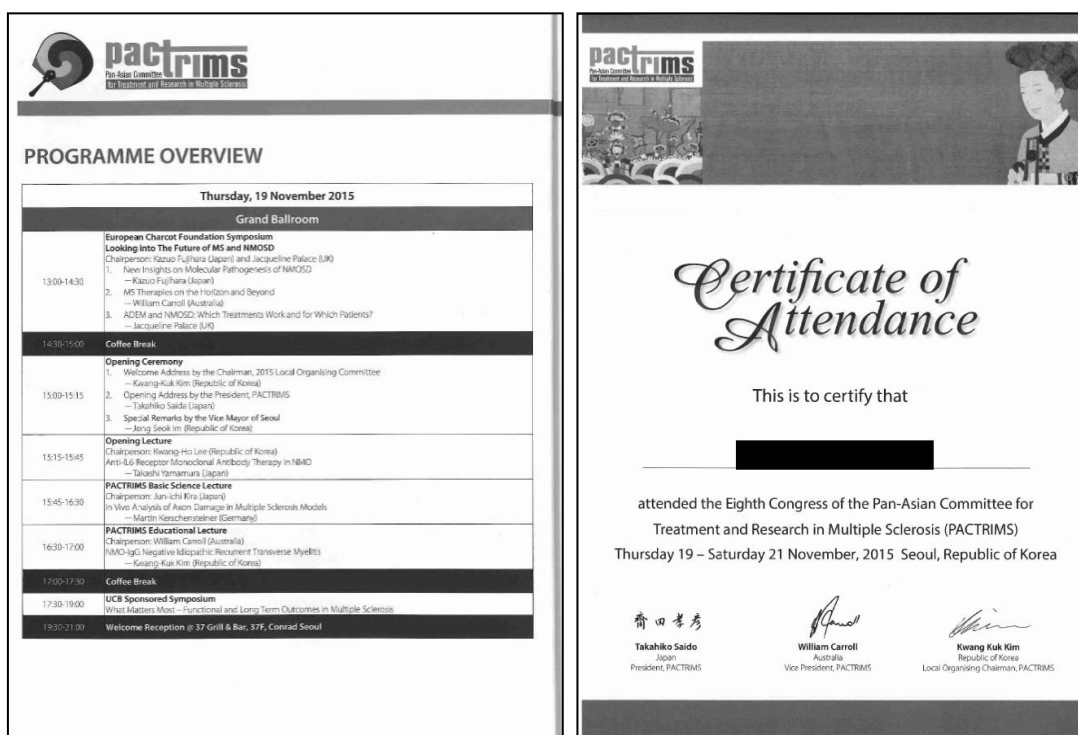



Fig 6. Samples of Category 1C supporting documents

- 2A requirement for supporting documents online submission is mandatory. Please provide either the **abstract** or a **copy of the publication** to substantiate the claim.
- 2B requirement for supporting documents online submission is mandatory. Please provide either the **abstract** or a **copy of the presentation** to substantiate the claim. A copy of the **event's programme schedule or brochure** is also needed to verify that the topic is presented and if pharmacists are the speakers.
- 3A requirement for supporting documents online submission is optional. However, it is strongly recommended for documents to be submitted for prompt processing. For 3A (Reading), an **abstract** or a **copy of the reading material** is acceptable or pharmacists may submit a **1-page self-written review**. For reading of books, **the table of content** is also acceptable. For 3A (Online Education), either the **certificate or statement of credit** issued by the content provider that states the amount of points awarded for completing the program is acceptable. Please state the website's URL too.


Statement of Credit for Continuing Pharmacy Education
American College of Clinical Pharmacy
13000 W. 87th St. Parkway, Lenexa, Kansas 66215-4530
(913) 492-3311 fax (913) 492-0088

This statement reflects CPE Credit earned between January 1, 2014 and September 15, 2015.
The CPE credit listed below has not been reported to CPE Monitor.

ACPE Universal Activity Number	Credit Type	Contact Hours	Date	Title
0217-0000-15-030-L01-P An Application-Based Activity	ACPE	3.50	04/10/2015	Critical Care Pharmacy Preparatory Review Course—Critical Care Pharmacy: Past and Present, Practice Standards, Training, and Professional Development, and Fluids, Electrolytes, Acid Based Disorders and Nutrition Support
0217-0000-15-031-L01-P An Application-Based Activity	ACPE	4.50	04/11/2015	Critical Care Pharmacy Preparatory Review Course—Supportive and Preventive Medicine, Shock Syndromes, Cardiovascular Critical Care, and Acute Cardiac Care
0217-0000-15-032-L01-P An Application-Based Activity	ACPE	3.50	04/11/2015	Critical Care Pharmacy Preparatory Review Course—Infectious Diseases


Statement of Credit
Medscape
verifies that

[Redacted] has participated in the educational activity entitled [Redacted]

Date completed: [Redacted]
Universal Activity Number: 0461-0000-15-116-H01-P


This activity completion will be submitted to CPE Monitor for 0.25 hour(s) (0.015 CEU(s)) of knowledge-based continuing education credit.

To ensure accurate reporting of your credit to CPE Monitor, make sure that you have updated your Medscape Registration with your NABP e-Profile ID number and the Month and Day of your birthdate.


 Medscape, LLC is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

Accreditation:
This activity has been accredited for 1 hour of Group 2 CPD (or 2 CPD credits) suitable for inclusion in a pharmacist's CPD plan

Accreditation number: S2014/75




Name: [Redacted]
PSA Membership Number: [Redacted]
Date Printed: [Redacted]



CPD Summary Record between 1 Aug 2012 and 31 Aug 2014


Date	Description	Topics	Provider	Accred	Accred Code	Group	Credits	Type	Notes/Relevance
13/05/2013	AP: May 2013: Counselling in Practice	Opiates in palliation	PSA	Yes	CAP130505A	Group 2	1.00	Online	
13/05/2013	AP: May 2013: Health Promotion	Living with dementia	PSA	Yes	CAP130505B	Group 2	1.00	Online	
13/05/2013	AP: May 2013: Supporting Pharmacy Practice	Dementia and communication	PSA	Yes	CAP130505C	Group 2	1.00	Online	
14/05/2013	AP: May 2013: Medication Mystery	Cruising into trouble	PSA	Yes	CAP130505D	Group 2	1.00	Online	
29/05/2013	AP: Apr 2013: Counselling in Practice	Salt controversy	PSA	Yes	CAP130404A	Group 2	1.00	Online	




The Society for Translational Oncology certifies that [Redacted] on November 22, 2015, has participated in the journal activity titled: **Management of Elderly Patients with Gliomas1912**

The Society for Translational Oncology designates this journal activity as offering a maximum of 1.0 AMA PRA Category 1 Credit™.

Secure Certificate ID: 3033718-doQJA,3033719


Frank M Balis, M.D.
Activity Program Director


 SOCIETY FOR TRANSLATIONAL ONCOLOGY®


UpToDate certifies that

[Redacted] has participated in the Internet point-of-care activity titled

UpToDate®
Aug 01, 2014 - Aug 11, 2014
and is awarded
9.5 AMA PRA Category 1 Credit(s)™


Denise S. Basow, MD Vice President and General Manager



CERTIFICATE OF PARTICIPATION
The Pharmaceutical Society of Singapore
Certifies that

[Redacted]

Has participated in the education activity titled:

PSS Continuing Education: Pediatrics

An internet-based activity on December 1, 2015
This activity was designated for 1.0 Category 3A CPE Point

Fig 7. Samples of Category 3A (Online Education) supporting documents

- 3B requirement for supporting documents online submission is mandatory. Please provide either **receipts of fees paid, transcripts, official result slips** or other valid evidence to substantiate the claim.

Pharmacists may submit materials to SPC online during their claim submission.

Submission will be treated with strict confidence, and will be forwarded to appointed personnel for review purposes only.

Q47 How can I find out more about my claims that have not been approved?

- A**
1. Pharmacists may view their pending claims in the Pending/Rejected Claims section in their current CPE records.
 2. Check emails for any notifications or instructions pertaining to the pending claims.
 3. Send in the required documents, if demanded by SPC, to substantiate the claim.
 4. Inform SPC if pharmacists wish to withdraw their claims.
 5. Contact SPC at Tel: 64785066 for more clarification.

Q48 What are the common mistakes made by pharmacists in their submission?

- A**
1. Some pharmacists are confused about the differences between Category 1A, 1B and 1C.

In summary, below are the differences:

- Category 1A (In-house)
 - CE courses and events organised for healthcare professionals within their organisation only.
 - Category 1A (Ad-hoc)
 - local non-accredited pharmaceutical events that are open to all healthcare professionals
 - Category 1B
 - local pharmaceutical events organised by accredited provider that is open to all healthcare professionals
 - Events that are found in the CPE events calendar.
 - Category 1C
 - Overseas pharmaceutical and scientific events, or regional / international events held in Singapore.
2. Claims under 2B for Oral / Poster Presentations must be original research work presented in accredited events. In-house Presentations and training presentations are not valid for claims.
 3. When making claims under Cat 3A (Readings), the field “Page Number” should be entered with the page range of the article and not the number of pages. For example, for an article that starts from page 123 to page 130, “123 – 130” should be entered in the field instead of “8”. In addition, the year, issue and volume number of the article should be indicated accurately.
 4. Reading on-line articles specially written for CPE in journals such as Medscape and Pharmacy Times should be submitted as Category 3A (Online Education) and not Category 3A (Readings). In short, as long as the accredited online programme provider issues a certificate, or statement of credits, it should be submitted as Category 3A (Online Education).
 5. Category 3B is only for pharmacy-related post-graduate studies that lead to academic or professional qualifications. Certificate courses or short courses are not valid and should not be claimed under this Category. These courses may be claimable under other category such as 1A, 1C or 3A, depending on their nature.

The explanation given earlier for these categories of activity may be helpful. If pharmacists require further clarification please contact SPC.

Operational Problems

Q49 If I forgot to sign the attendance sheet for a CPE event, will the CPE provider automatically submit my name to the Council for the claiming of CPE points since a fee has been paid for the event?

A No CPE points will be credited to a pharmacist's CPE account if he had not signed his name and provided his pharmacist registration number on the attendance sheet of the event. Pharmacists may approach the CPE provider for help to clarify and confirm their presence at the event. This has to be done before the provider has furnished the participants' list to the Council.

Q50 What must I do if I made an error in keying in my CPE claims online?

A Pharmacists may phone at 64785066 or email the Council at SPC@spb.gov.sg to amend the errors, quoting the application number and error made.

Q51 Will there be anyone to whom I may look for help if I do not know how to submit a claim online?

A Pharmacists may approach the Council's administrative staff for help when they have difficulty submitting a claim online.

Q52 How long does the Council take to clear a claim that is pending approval?

A The Council takes about 1 - 4 weeks to clear a claim that is pending approval, depending on the overall total number of pending claims and on whether relevant documents are attached.

Annex A Approved journals and textbooks on pharmaceutical (patient) care

The following are key journals and textbooks in the pharmaceutical (patient) care area. The complete and updated list is available at the Council website:

http://www.healthprofessionals.gov.sg/content/hprof/spc/en/leftnav/continuing_professional_education_CPE/for_pharmacists.html

I. Journal Titles

1. American Journal of Health-System Pharmacy
2. Annals of Internal Medicine
3. Annals of Pharmacotherapy
4. Annals, Academy of Medicine Singapore
5. Archives of Internal Medicine
6. Asia Pacific Journal of Pharmacology
7. Australian Journal of Hospital Pharmacists
8. Australian Prescriber
9. British Journal of Clinical Pharmacology
10. British Medical Bulletin
11. British Medical Journal
12. Clinical Pharmacology and Therapeutics
13. Drug Safety
14. Drugs
15. European Journal of Immunology
16. Health Economics
17. Hospital Pharmacy
18. Journal of American Pharmacists Association
19. Journal of Clinical Pharmacy and Therapeutics
20. Journal of Pharmacological and Toxicological Methods
21. Journal of Pharmacology and Experimental Therapeutics
22. Journal of Pharmacy and Pharmacology
23. Lancet
24. New England Journal of Medicine
25. Pharmaceutical Journal
26. Pharmacoeconomics
27. Pharmacotherapy
28. Singapore Medical Journal
29. Therapeutic Drug Monitoring
30. US Pharmacist

II. Book Titles

1. Non-prescription Product Therapeutics, WS Pray
2. Handbook of Non-Prescription Drugs, Rosemary R. Berardi et al
3. Pharmacotherapy: A Pathophysiologic Approach, Joseph T. Dipiro
4. Applied Therapeutics: The Clinical Use of Drugs, MA Koda-Kimble
5. Clinical Pharmacokinetics: Concepts and Applications, Malcolm Rowland
6. Minor Illness or Major Disease? Responding to symptoms in the pharmacy, Clive Edwards
7. Drug-Induced Diseases, Prevention, Detection, and Management, James E. Tisdale
8. Pain Management for Primary Care Clinicians, Arthur G. Lipman
9. Basic Skills in Interpreting Laboratory Data 4th Edition, Mary Lee
10. A Manual of Laboratory and Diagnostic Tests, Frances Fishbach
11. Managing the Patient-Centered Pharmacy, Harry P. Hagel
12. Harrison's Principles of Internal Medicine, Fauci, Braunwald et al
13. Pharmaceutical Care, Calvin H
14. Clinical Pharmacokinetics, John E Murphy
15. Merck Manual of Geriatrics, Merck
16. The Merck Manual of Diagnosis and Therapy, Mark H Beers & Robert Berkow
17. Principles of Geriatric Medicine & Gerontology, Gordon Guyatt
18. MOH Clinical Practice Guidelines, MOH Singapore
19. Basic Skills in Interpreting Laboratory Data, Scott L Traub
20. Basic & Clinical Pharmacology, Katzung

One (1) point is awarded per article or chapter but no points will be awarded for reading drug monographs and dictionaries. Pharmacists can obtain a maximum of 35 points over the two-year qualifying period.

Annex B Online CPE resources

Introduction

The following is a list of selected online CPE providers that provide CPE programmes in pharmaceutical (patient) care, clinical pharmacy, pharmacotherapy and pharmacy (including pharmaceuticals).

The criteria for their selection are:

- accessibility
- affordability
- availability of an assessment component

The online CPE providers are listed according to their country of origin. The website address and a brief description of each CPE provider are given.

UNITED STATES OF AMERICA

1. **Medscape**

<http://www.medscape.com/cmecenterdirectory/pharmacists>

Medscape offers free, continuously updated **continuing education activities** for physicians, registered nurses, pharmacists, and other healthcare professionals. All activities have been planned and implemented in accordance with the Quality Criteria of the American Council on Pharmaceutical Education (ACPE), and have been produced in collaboration with ACPE-accredited CE providers.

Remarks:

- Printable assessment component provided
- Free compulsory registration

2. **RX School**

<https://secure.rxschool.com/index.cfm>

RxSchool is an e-learning web portal and software solutions company that provides a comprehensive suite of educational courses and training tools for the healthcare industry. The RxSchool web site offers ACPE and CME accredited continuing education and review courses for pharmacists, pharmacy technicians, physicians, nurses and other health care professionals.

Remarks:

- Printable assessment component provided
- Free compulsory registration

3. US Pharmacist

<http://www.uspharmacist.com/index.asp>

U.S. Pharmacist is a monthly journal dedicated to providing pharmacists with up-to-date, authoritative, peer-reviewed clinical articles relevant to contemporary pharmacy practice in a variety of settings. Pharmacists licensed in the U.S. can earn Continuing Education credits through U.S. Pharmacist. It has been accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmaceutical education.

Remarks:

- Free
- Printable assessment component provided

4. Power-Pak Communications

<http://www.powerpak.com/>

Power-Pak C.E.™ is a product of **/alert** Marketing, a full-service healthcare communications company providing information and education programmes to healthcare professionals and consumers. Their ACPE accredited programmes help pharmacists to meet the licensure requirement in U.S. This site features a searchable database of accredited courses on the latest therapeutics for today's healthcare professions.

Remarks:

- Free compulsory registration
- Printable assessment component provided

5. Pharmacy Times

<http://www.pharmacytimes.com/>

Pharmacy Times has been accredited by the American Council on Pharmaceutical Education (ACPE) as a provider of continuing pharmaceutical education.

Remarks:

- Free compulsory registration
- Printable assessment component provided

6. Meniscus Educational Institute

<https://www.meniscusce.com/Education.aspx>

The Meniscus Educational Institute has been accredited by the American Council on Pharmaceutical Education (ACPE) as a provider of continuing pharmaceutical education.

Remarks:

- Free compulsory registration
- Printable assessment component provided

7. **Pharmacist.com**

<http://www.pharmacist.com>

Pharmacist.com is a joint project of the American Pharmacists Association and the National Association of Councils of Pharmacy. This is an ACPE accredited provider.

Remarks:

- Printable assessment component provided
- Free compulsory registration

8. **The American Society of Health-System Pharmacists**

<http://www.ashp.org/menu/Education/Continuing-Education>

This is an ACPE accredited provider.

Remarks:

- Some CPE programmes are provided Free
- Printable assessment component provided
- Must register – registration is free

9. **Drug Store News**

<https://drugstorenewsce.com/Drug Store News> has been accredited by the American Council on Pharmaceutical Education as a provider of continuing pharmaceutical education.

Remarks:

- Site registration required
- Printable assessment component provided

10. **National Community Pharmacists Association**

<http://www.cecily.com/ncpa/catalogue.htm>

The National Community Pharmacists Association has been approved by the American Council on Pharmaceutical Education as a provider of continuing pharmaceutical education.

Remarks:

- Printable assessment component provided
- Free compulsory registration

UNITED KINGDOM

11. **The Chemist and Druggist** (A weekly newspaper for pharmacists in the U.K.)

<http://www.dotpharmacy.com/upmain.html>

Pharmacy Update training modules and MCQs
(College of Pharmacy Practice approved continuing education modules)

Three accredited articles appear each month in *Chemist & Druggist* magazine. Recent modules are reproduced online together with appropriate questionnaires, all in PDF files.

Remarks:

- Articles are available free – able to download easily
- Locating the questionnaires may take time - articles and questionnaires are not located together in some cases

AUSTRALIA

*Please note that most Australia accredited (by **Pharmaceutical Society of Australia(PSA)**, **Pharmacy Guild of Australia (PGA)**, etc.) online programmes required Australian Pharmacist registration number at registration, so these may be more suited for Australian registered pharmacists.*

12. **mdBriefcase**

<http://mdbriefcase.com.au/>

mdBriefCase Australia is an independent provider of free accredited online medical education programs to over Australian and New Zealand healthcare professionals (HCPs), including GPs, Pharmacists and Specialists. Programs are module-based and reviewed by Key Opinion Leaders (KOLs) in their respective fields. Modules are:

1. interactive
2. case study-based
3. inclusive of videos of the KOLs answering questions throughout the modules.

Remarks:

- Printable assessment component provided
- Free compulsory registration
- 'Country' is required field: only 2 countries allowed during registration- Australia and NZ
- Profession Details like Professional Registration number/ ACP Membership Number required

13. **National Prescribing Service**

www.nps.org.au

NPS MedicineWise is an independent, not-for-profit and evidence-based organisation. NPS MedicineWise Learning provides health professionals and students across Australia and throughout the Asia-Pacific region with a range of learning activities and resources

Remarks:

- Free online case studies, pharmacy practice reviews, clinical audits, online courses and medicine reviews.
- Free compulsory registration - Profession Details like Professional Registration Number required

Annex C: List of recommended local websites

The following are a list of recommended local websites that pharmacists may access to find events and reading materials:

1. Singapore Pharmacy Council
<http://www.spc.gov.sg>
2. Department of Pharmacy, National University of Singapore
<http://www.pharmacy.nus.edu.sg>
3. Pharmaceutical Society of Singapore
<http://www.pss.org.sg>
4. Singapore Association of Pharmaceutical Industries
<http://www.sapi.org.sg>
5. Health Sciences Authority
<http://www.hsa.gov.sg>
6. Health Professionals Portal
<http://www.hpp.moh.gov.sg>
7. Health Promotion Board
<http://www.hpb.gov.sg>
8. Ministry of Health
<http://www.moh.gov.sg>
9. Singapore Medical Association
<http://www.sma.org.sg>
10. Singapore Medical Council
<http://www.smc.gov.sg>

Annex D: Format for CPE dossier

Please keep the CPE dossier in such a manner as to facilitate audits by the Singapore Pharmacy Council. The format given below is simple and easy to follow.

The CPE dossier shall consist of a collection of printouts from CPE claims made on the SPC Online System (Print at the "Confirmation page"). Each printout gives details of the particular CPE activity undertaken. Please assign a serial number to each printout and file them chronologically in the dossier. Attach the requisite supporting evidence (e.g. receipt, flyer, reprint, review, assessment exercise etc.) to each printout (Refer to page 41 and 42).

Dossier Sample

NAME Nicholas Lim

PHARMACIST REGISTRATION NO. P09051D

CPE QUALIFYING PERIOD From: 1 Sept 2018 to 31 Aug 2020

S/N	Date	Name of CPE Activity	Patient-care points	Non-Patient-care points
1	11/01/2013	1C Overseas Event	0	1
2				
3				
4				
5				
Total			0	1

Printout from PRS

[Category](#) [Claim](#) [Documents](#) **Confirmation** [Acknowledgement](#)

S/N: 01

Submission of CPE Claims

Registration Details

Registration No. P09051D
 Name Nicholas Lim
 Registered Specialty -
 Appointment Associate Clinical Research Manager (11/11/1993)
 CPE Specialty -

Category of Overseas Events Credit Claim

Category 1C
 Type of Activity Overseas Events
 Role Participant
 Patient Care Subject No
 Subject Good Distribution Practices
 Type of Overseas Event Lecture
 Event Specialty Oncology Pharmacy
 Event Title Others
 Event Title (Others) 1C Overseas Events
 Organiser A
 Country Singapore
 Venue A
 Event Start Date 11/01/2013
 Event End Date 11/01/2013

Date	Duration
11/01/2013	1<= X <2 Hrs

Speaker's Topic -
 Additional Remarks -
 CPE Points 1

Documents Attached

[Proof of Attendance](#)

[Conference Event Details](#)

[Proof of Attendance](#)