



# College of Pharmacists of Manitoba

200 Tache Avenue, Winnipeg, Manitoba R2H 1A7  
 Phone (204) 233-1411 | Fax: (204) 237-3468  
 E-mail: info@cphm.ca | Website: www.cphm.ca

## Sterile Hazardous Implementation Schedule

Year	Month	General Consideration	Sterile (Hazardous)	
			Operational	Facilities
2017	February	Council approval of the NAPRA Model Standards for Hazardous and Non-Hazardous Sterile Compounding implementation dates.		
	Spring	Member education to introduce NAPRA Model Standards and implementation timelines: <ul style="list-style-type: none"> <li>Website Educational Tools</li> <li>CPhM site visits</li> </ul>		
<b>PHASE ONE</b>				
2018	June		5.1 Develop and implement a training and assessment program for staff involved in hazardous compounding. <b>(June 1, 2018 - Required)</b>	
	June		5.2 Develop and implement documented policies and procedures for hazardous compounding. <b>(June 1, 2018 - Required)</b>	
	June		6.2, 6.3, and 6.4 Develop and implement protocols and preparation logs for compounded sterile preparations. <b>(June 1, 2018 - Required)</b>	

*College of Pharmacists of Manitoba Mission:  
 To protect the health and well-being of the public by ensuring and promoting safe, patient-centred,  
 and progressive pharmacy practice in collaboration with other health-care providers.*

Member of the National Association of Pharmacy Regulatory Authorities

CPHM Sterile Hazardous Timeline

Year	Month	General Consideration	Sterile (Hazardous)	
			Operational	Facilities
	June		6.7, 6.8, 6.9, 6.12 Develop and implement protocols for hazardous medication packaging, storage, transport, waste management, and delivery procedures. <b>(June 1, 2018 - Required)</b>	
	June		6.10, 6.11 Develop recall procedures (traceability), and incident/accident management procedures. <b>(June 1, 2018 - Required)</b>	
	June		7. Develop and implement a quality assurance program for hazardous sterile compounding. <b>(June 1, 2018 - Required)</b>	
<b>2018</b>	<b>June - December</b>	<b>CPHM Site Audits to assess compliance with operational requirements (5.1, 5.2, 6.1, 6.2, 6.3, 6.4, 6.7, 6.8, 6.9, 6.12, 6.10, 6.11, 7)</b>		
<b>PHASE TWO</b>				
<b>2019</b>	June		6.5, 6.6 Educate and validate all staff involved in hazardous compounding (includes conduct of personnel in areas reserved for compounding, handwashing, garbing, aseptic compounding techniques, cleaning and disinfecting, verification, and labelling). <b>(June 1, 2019 - Required)</b>	
<b>2019</b>	<b>June – December</b>	<b>CPHM Site audits to assess compliance with staff education and validation, and ALL other operational requirements.</b>		



CPhM Sterile Hazardous Timeline

Year	Month	General Consideration	Sterile (Hazardous)	
			Operational	Facilities
<b>PHASE THREE</b>				
<b>2021</b>	January 1		6.1 Establish documented beyond-use dates and dating methods. <b>(January 1, 2021 - Required)</b>	
<b>2021</b>	January 1			5.3 Facilities and Equipment Compliance with the NAPRA Model Standards for Hazardous Sterile Compounding Standards <b>(January 1, 2021 - Required)</b>
<b>2021</b>	January – December	<p><b>CPhM Site Audits to assess compliance with facilities and equipment requirements.</b></p> <p><b>Ongoing audits to assess compliance with operational and facility requirements to be combined with CPhM Routine Hospital and Community Pharmacy Inspections.</b></p>		