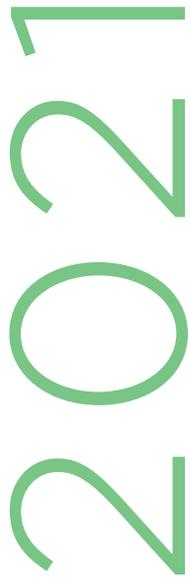




california **pharmacists** association



Policy

Committee

Report

Policy Committee Members:

- Chair: Shirley Fender, PharmD
- Kathy Besinque, PharmD, FASHP, FCSHP, FCPHA
- Jennifer Courtney, PharmD
- Jessi Crowley, PharmD
- Marina Dykhne, PharmD, BCACP, APh, CDCES
- Carey Mah Gore, PharmD
- Steve Gray, PharmD, JD
- Simranjit Grewal, PharmD
- Scott Harada, PharmD
- Melissa Kimura, PharmD
- Sarah McBane, PharmD, BCPS, FCPHA, APh
- Nicole Nielsen, PharmD BCACP, APh, ME HP
- Amy Reese, PharmD, MBe
- Larry Selkow, RPh, BPharm

Adrian Wong, RPh: Speaker
Melissa Kimura, PharmD : Speaker-Elect



• CPhA House of Delegates • parliamentary procedure at a glance

TO DO THIS:	YOU SAY THIS:	May I interrupt the speaker?	Do I need a second?	Is it debatable?	Can it be amended?	What vote is needed?	Can it be reconsidered?
Adjourn Meeting	"I move that we adjourn."	No	Yes	No	No	Majority	No
Call an Intermission	"I move that we recess for..."	No	Yes	No	Yes	Majority	No
Complain About Heat, Noise, etc.	"I rise to a question of privilege."	Yes	No	No	No	No Vote	No (USUALLY)
Temporarily Suspend Consideration of an Issue	"I move to table the motion."	No	Yes	No	No	Majority	No
End Debate and Amendments	"I move the previous question."	No	Yes	No	No	2/3	No ¹
Postpone Discussion for a Certain Time	"I move to postpone the discussion until..."	No	Yes	Yes	Yes	Majority	Yes
Give Something Closer Study	"I move to refer the matter to committee."	No	Yes	Yes	Yes	Majority	Yes ²
Amend a Motion	"I move to amend the motion by..."	No	Yes	Yes ³	Yes	2/3**	Yes
Introduce Business	"I move that..."	No	Yes	Yes	Yes	Majority	Yes
• THE MOTIONS ABOVE ARE IN ORDER OF PRECEDENCE. THE MOTIONS BELOW ARE IN NO PARTICULAR ORDER. •							
Protest Breach of Rules or Conduct	"I rise to a point of order."	Yes	No	No	No	No Vote ⁴	No
Vote on a Ruling of the Chair	"I appeal from the chair's decision."	Yes	Yes	Yes	No	Majority ⁵	Yes
Avoid Considering an Improper Matter	"I object to consideration of this motion..."	Yes	No	No	No	2/3 ⁶	_ ⁷
Verify a Voice Vote by Having Member Stand	"I call for a division." or "Division!"	Yes	No	No	No	No Vote	No
Request Information	"Point of Information."	Yes	No	No	No	No Vote	No
Reconsider a Hasty Action	"I move to reconsider the vote on..."	Yes	Yes	_ ⁸	No	Majority	No
Take Up a Matter Previously Tabled	"I move to take from the table..."	No	Yes	No	No	Majority	No
Suspend Rules Temporarily	"I move to suspend rules so that..."	No	Yes	No	No	2/3	No

**2/3 required per CPhA House of Delegates ByLaws

NOTES:

- 1. Unless vote on question is not yet taken
- 2. Unless the committee has already taken up the subject
- 3. Only if the motion to be amended is debatable
- 4. Except in doubtful cases
- 5. A majority vote in negative needed to reverse ruling of chair
- 6. A 2/3 vote in negative needed to prevent main motion consideration
- 7. Only if the main question or motion was not considered
- 8. Only if motion to be reconsidered is debatable



policy recommendations

Policies represent what CPhA members would like to see in an ideal world. As such, they may not always align with existing laws and regulations. Policies help to guide CPhA staff in responding to legislative proposals and in advocating for the pharmacy profession.

Recommend to Amend

1. PSILOCYBIN

Recommendation: The committee recommends that the House of Delegates **amend** policy, Medical Cannabis, as follows:

The California Pharmacists Association supports the reclassification of cannabis and psilocybin within the state and federal Controlled Substance Acts to allow for medicinal use.

Background: Psilocybin is a naturally occurring psychedelic drug compound found in species of fungi informally known as "magic mushrooms" or "shrooms". Under the Controlled Substances Act, psilocybin is classified as a Schedule I substance. Thus under federal law, psilocybin has a high potential for abuse and there is no accepted medical use in treatment. However, clinical research studies show the potential for clinical applications in mental disorders such as depression, anxiety, and obsessive-compulsive disorder. A study from Johns Hopkins made the conclusion that psilocybin had a low potential for abuse and would be appropriate for placement on Schedule IV, if approved for medicinal use.

In addition, the committee discussed the current legislative bill seeking to decriminalize the drug in the state of California; however the committee agreed that the use of psilocybin should be tied to the clinical applications given research has shown psilocybin to be safe and a possibly effective drug for the treatment of certain mental disorders. The medical use of psilocybin is backed by science and is beneficial for public health.

2. 2D BARCODES

Recommendation: The committee recommends that the House of Delegates **amend** policy, Standardized Labeling, as follows:

The California Pharmacists Association supports the standardization of drug product labeling by manufacturers such that the lot number, National Drug Code (NDC) number, Universal Product Code (UPC) or NDC barcode, and expiration date are clearly visible; the expiration date and lot number should not be cut or embossed into the surface of the label.

The California Pharmacists Association supports the requirement that manufacturers adopt global standardization of 2D barcodes. This should include at minimum the product NDC, serial number, manufacturer origin, lot number, and expiration date on all prescription drugs, biologics, nonprescription, and over-the-counter (OTC) drugs. Software developers should incorporate such standardization to capture this information for medical records, compounding, and drug inventory.

The California Pharmacists Association encourages the manufacturer to include product image and imprint information on the container.

The California Pharmacists Association supports manufacturers and distributors of over-the-counter (OTC) and prescription products including on the label the company and location (City, State, or Country) where the product is manufactured and packaged.

The California Pharmacists Association supports the standardization of labeling of dietary supplements with specific pharmacologic effects to ensure safe and proper use by consumers.

The California Pharmacists Association supports good drug manufacturing procedures or equivalent practices to ensure quality, purity and potency of drug products and dietary supplements.

The California Pharmacists Association supports efforts by United States Pharmacopeia (USP) to explore the advisability and feasibility of developing and promoting standardized imprint coding for all solid oral dosage forms.

Background: 2D barcode technology has the ability to store much more information with a smaller footprint than typical UPC barcodes. This would allow systems to streamline the production of compounded sterile preparations, documentation of vaccines and biologics, and ease implementation of track-and-trace. The FDA's Drug supply chain security act DSCSA guidance requires all medications and biologics to have a compatible 2D matrix barcode, however not every manufacturer has made strides in this category. The purpose of this motion is to encourage standardization and use of 2D matrix barcodes on all products. This would help fulfil DSCSA requirements, improve medication administration accuracy and speed, trace medications, assist with recalls, and of course improve patient safety.

New Policy Proposals

1. LGBTQ+ PATIENT CARE

Recommendation: The committee recommends that the House of Delegates **adopt** policy, LGBTQ+ Patient Care, as follows:

The California Pharmacists Association supports ongoing education, training, and resources that promotes pharmacy personnel competence in LGBTQ+ patient care.

Background: According to The Williams Institute, an estimate of 13 million people of the United States (U.S.) population age 13 and older identify as lesbian, gay, bisexual, transgender, or queer (LGBTQ). Despite the significant increase in social representation of LGBTQ individuals over recent decades, LGBTQ individuals continue to show a disproportionate prevalence of health disparities. According to The Trevor Project, 50% of trans patients report having to teach their providers about their own care. LGBTQ+ individuals still experience discrimination in healthcare facilities merely by their gender expression or sexual orientation. These acts of discrimination can be manifested through verbal or physical assault, denial of care/insurance, or microaggressions. In order to address the growing demand for providing LGBTQ+ inclusive care, pharmacy health professionals require education, training, and additional resources. GLMA Health Professionals Advancing LGBTQ Equality, the world's oldest and largest network of LGBTQ+ providers has few pharmacists listed in their directory as trusted healthcare professionals to provide equitable care for LGBTQ+ patients.

Patients who identify as LGBTQ+ should also receive additional resources for their pharmacy needs, such as knowing which pharmacies can provide culturally appropriate and inclusive care. As the most accessible healthcare providers, pharmacists have the opportunity to protect and engage in the healthcare needs of the LGBTQ+ community.



parliamentary overview

Michael Pastrick, CPhA House of Delegates Parliamentarian

Governing Documents For Establishing Association Policy

The HOD is established by Article V of the CPhA Constitution. Chapter IV, Article II of the Association Bylaws, establishes the duties of the HOD. It states that the HOD; a) interprets the objectives of the Association and serves as the legislative and policy making body, b) shall consider all appropriate proposals coming from the Board of Trustees, constituent bodies, delegates and Standing and Special Committees, and c) shall adopt Bylaws for the conduct of its business.

Chapter VII, Article I of the Association Bylaws, establishes the Committees of the Association. Committees proposing Policy/Standards of Practice (SOP) shall submit recommendations to the HOD for consideration and adoption as Association Policy/SOP.

Chapter IV, Article VI of the Association Bylaws establishes that the presence of one-third (1/3) of qualified Delegates shall constitute a quorum of the HOD.

The HOD Bylaws, Chapter IV, establishes the Reference Committee process for receiving and acting upon the reports of the Policy Committees and such items of New Business that may be referred by the Speaker of the House of Delegates. As required by House Bylaws, Chapter IV, Section 2, the Reference Committees will function in accordance with the Standing Rules of the House.

A procedure for establishing Standing Rules of HOD is set out in Chapter V of the HOD Bylaws. Standing Rules of the House may be suspended upon a two-thirds (2/3) majority vote of the delegates present and voting.

The HOD Rules of Order are established in Chapter VI of the HOD Bylaws. The HOD is governed by the Constitution and Bylaws of the Association. The Rules of Order (parliamentary authority) not otherwise provided for by Association Constitution and Bylaws, HOD Bylaws, or HOD Standing Rules is Robert's Rules of Order (Revised).

HOD Standing Rule I governs the procedure for Policy/SOP adoption. It establishes the form of proposed Policy Statements/SOP, requires that Policy Committee Reports be

submitted at the first session of the HOD and calls for the referral of Policy Committee Reports to a Reference Committee. It further governs the conduct of Reference Committee Hearings and the treatment of New Business Items submitted prior to the opening session of the HOD. Standing Rule I also governs the recommendations that may be made by the Reference Committees and the actions which may be taken by the HOD in considering Reference Committee reports.

HOD Standing Rule IV governs the review of Association policies over 5 years in age. It requires review by Policy Committee and sets forth the actions available to the committee; a) policies which are determined to still be valid shall be retained without further HOD action, b) policies which are determined to still be valid and of such significance as to preclude the need for regular review on a five (5) year basis shall be retained and archived without further HOD action, c) policies in need of update are recommended for amendment (or for repeal and substitution of new language - a "strike and substitute" form of amendment), d) may recommend to amend and archive policies and e) may recommend repeal of policy. These proposals are then forwarded to a Reference Committee, which then acts on the recommendations in accordance with HOD Standing Rule I.

HOD Standing Rule IV also governs the review of Association Standards of Practice (SOP) over 5 years in age. It requires review by Policy Committee and sets forth the actions available to the committee; a) SOPs which are determined to still be valid shall be retained without further HOD action, b) SOPs in need of update are recommended for amendment (or for repeal and substitution of new language - a "strike and substitute" form of amendment), or c) may recommend repeal of SOPs. As with policy recommendations, these proposals are then forwarded to a Reference Committee, which then acts on the recommendations in accordance with HOD Standing Rule I.

In the absence of any specific rule offered by the Association Constitution and Bylaws, HOD Bylaws, or HOD Standing Rules, Robert's Rules of Order (Revised) is the controlling parliamentary authority for HOD action.

Important Considerations

Reference Committee Hearings - Anyone in attendance may address a Reference Committee.

HOD Sessions - Any CPhA member may have the privilege of the floor (HOD Bylaws - cannot be waived for non-members). Only delegates may offer motions or vote.

The Chief Executive Officer of the California Pharmacists Association is a voting member of the HOD by virtue of his/her position as Secretary of the HOD.

Motions made by a committee (e.g., the Reference Committee) do not require a "second".

Prior to voting, the Speaker should restate the motion as follows: "All those in favor of the motion to _____ signify by saying AYE - all those opposed signify by saying NAY."

The Speaker does not ask for abstentions.

The Speaker should announce the result of the vote (the motion passes, the motion is defeated, etc).

Motions generally require a simple majority (50% + 1) for adoption. However, Standing Rule I and HOD Bylaws require 2/3 majority vote for adoption of amendments. Other specific motions (end debate, suspension of rules) require a 2/3 majority vote.

Standing Rule I allows for amendments to proposed policy only when such amendments are proposed by a Reference Committee. Standing Rule I require a 2/3 majority vote for adoption.

In order to amend proposed policy "from the floor" it is necessary to "suspend the rules" (Standing Rule I). It requires a motion to suspend the rules (for a specific purpose, e.g., to offer amendment language). The motion requires a "second", is not debatable and requires a 2/3 majority vote.

Upon a suspension of the rules, the main motion (proposed policy language) may be amended ("I move to amend Section ___ to read"). The amendment requires a "second" and is debatable. The amendment itself can be further amended (amendment of an amendment) and requires a "second" and it debatable. When debate comes to an end,



the order of voting is - last amendment, first amendment and then the main motion. HOD Bylaws require a 2/3 majority vote for adoption.

Motions to end debate ("call for the question") should be handled with care and should not be called out from the body but rather be made by a delegate at the microphone when recognized by the Speaker. If there are members still at the microphone the Speaker can indicate that he/she will end debate after the last speaker. Motions to end debate require a "second", are not debatable and require a 2/3 majority vote.

Motions to refer the matter to committee take precedence over motions to adopt (amend, reject, repeal) association policy. Motions to refer require a "second", are debatable and require a simple majority (50% + 1).

Calls for a division of the House (verification of a voice vote) must be recognized by the Speaker. A standing vote is asked for by the Speaker. Association staff will proceed with the standing vote.

Standing Rule IV calls for the review of policies over 5 years in age. Policy Committees determine which policies are to be retained or retained and archived without the need for further HOD action because of the parliamentary principle that a "motion to reaffirm an item previously approved" serves no useful purpose - the item remains in effect (Roberts Rules of Order). Standing Rule IV incorporates this principle for items retained or retained and archived.

Roberts Rules of Order – see attached chart that discuss various aspects of parliamentary procedure including "types of motions" and "precedence". "Precedence" means some motions outrank other motions and can be taken up while another motion is pending. If a motion "takes precedence" it will be acted upon first. Note that while Roberts Rules of Order typically requires only a "simple majority" for adoption of an amendment, CPhA HOD Bylaws and Standing Rules require a 2/3 majority vote for adoption of an amendment.

Most important rule: The Speaker of the House of Delegates rules on issues before the House. The Parliamentarian does not rule – only advises the Speaker.

a delegate's textbook

How CPhA Policy Becomes Reality

According to CPhA bylaws, adopted in 1970 and amended periodically, the Association is governed by two separate and distinct bodies – a Board of Trustees and a House of Delegates. The bylaws divide authority between these two bodies, assigning responsibility for establishing association policy to the House of Delegates and giving the Board of Trustees responsibility for implementing policy and governing CPhA's operations.

In both areas, final authority really rests with the association's membership, since members elect the Board of Trustees and appoint or elect delegates to represent them in the House of Delegates.

The Board of Trustees: The Governing Body

The Association's governing body consists of fourteen (14) members, twelve (12) of which are elected by the general membership; The Officers and Board of Trustees consist of the President, President-Elect, Immediate Past President, Speaker and Speaker-Elect of the House of Delegates, Chief Executive Officer/ Secretary, six (6) Trustees elected from among the active membership of the Association and

one (1) Student Pharmacist Trustee elected from among the membership of the Academy of Student Pharmacists.

Elected every year are the President-Elect and Speaker-Elect of the House of Delegates. The Treasurer is elected every other year to a two-year term of office. Trustees are elected to three (3) year terms of office, with staggered terms such that two Trustees are elected every year. The Chief Executive Officer/ Secretary is appointed by and serves at the pleasure of the Board of Trustees.

In accordance with the bylaws, the Board is charged with the overall responsibility of governing the association. The Board's activities include:

- Establishing priorities in implementing CPhA's policies;
- Approving the annual budget
- Employing the Association's CEO;
- Approving policy and other committee appointments; and
- Creating academies or other specialty sections.

The Board is granted broad and unlimited powers in governing the Association's activities and programs. It reports annually to the House of Delegates and is accountable to the membership.

The Board meets multiple times each year in person and as needed by conference calls; the Board's Executive Committee and Finance Committee may meet more frequently.

Policy Committees: A Vital Role in the Association

The Association has one or more policy committees – appointed annually by CPhA's incoming president. Committee membership is solicited through announcements in the California Pharmacist and the weekly CEO Message.

Members of the policy committee(s) meet annually at CPhA headquarters in Sacramento and may also meet by conference call. All CPhA members are invited to recommend topics for consideration by the policy committees – both in the area of policy and Standards of Practice. Proposals are submitted and committee members receive background material on all subjects.

After the committee meeting, a report containing the recommendations and accompanying background information is presented and sent to committee members for approval. Any member of the committee disagreeing with the report has an opportunity to prepare a minority report.

Committee reports are placed on the CPhA website and are emailed to members of the House of Delegates in order to have time to discuss policy issues with their respective association members prior to the Annual Meeting.



House of Delegates: Establishes CPhA policies

The House of Delegates serves as the Association's legislative body. Most of the delegates are appointed or elected from CPhA's local affiliates, special interest groups (SIG) and student chapters. Delegate representation is based on the number of members in each affiliate organization: Each affiliated local association is entitled to two delegates for the first 50 active members and one delegate for each additional 25 active members or major fraction thereof. Each affiliated student chapter shall be entitled to two delegates for up to the first 100 student members and one additional delegate for each additional 50 student members or major fraction thereof. Each recognized special interest group shall be entitled to one delegate.

Recognized non-affiliated associations such as The California Society of Health-Systems Pharmacists (CSHP) are entitled to two (2) delegates in the House of Delegates.

Other voting delegates include members of the Board of Trustees; past presidents and past speakers of the House of Delegates.

Local associations, special interest groups and student chapters are urged to appoint or elect delegate representatives early each year so that each delegate will have a full opportunity to review and discuss policy committee reports with their respective bodies.

The House of Delegates meets at the Annual Meeting at the direction of the Speaker of the House. The delegates act officially in several areas:

- Acting upon the reports submitted by policy committee(s);
- Adopting any new business items introduced by delegates in accordance with House rules;
- Reaffirming CPhA's Code of Ethics; and
- Electing the Speaker-elect of the House of Delegates.

Reference Committees Encourage Open Discussion

The Speaker appoints one or more reference committees consisting of at least seven (7) members to review the policy committee reports and items of new business referred by the Speaker. One representative of each policy committee serves on the reference committee that hears the report of that policy committee. The reference committee(s) serve as a hearing body to obtain input and, if necessary, further refine policy proposals.

The reference committee hearing – similar to a legislative committee – allows everyone an opportunity to speak on the issues and to allow for consensus building. This use of the reference committee(s) expedites final action at the House's closing session; where there is insufficient time to rehear debate. Because of this, it is important for delegates to attend these hearings. Delegates who fail to attend or participate in reference committee hearings are denying themselves the opportunity to be heard on important issues.

Following the hearings, the reference committee(s) convenes to make recommendations on policy committee reports or any new business items submitted prior to the Opening Session of the House of Delegates. They may recommend adoption or rejection of policy committee proposals, or they may recommend referral of the matter to committee for further consideration. They may also recommend to: 1) amend policy recommendations, 2) archive newly adopted policy and 3) repeal existing policies. Reference committee recommendations are only recommendations and delegates are not bound by reference committee actions.

The reference committee reports, containing their recommendations on policy committee reports and new business items, are available no later than the day immediately following the reference committee hearings. This allows time for delegates to caucus and discuss final language to be presented for House action at the closing session. It is important that delegates educate themselves on the issues at the reference committee hearings and come prepared to vote at the final session.

The Closing Session is for Voting, Not Debating

The closing session of the House is not intended to be an open forum to discuss issues that are not relevant to the policy committee reports. Any items that obviously need further study should be referred committee for further consideration. The floor of the House is not the appropriate place to extensively rewrite policy or to attempt implementing a poorly written policy proposal. Delegates should come to the closing session with a formed opinion and ready to vote.

Board of Trustees – Implementation of Association Policy

After the House of Delegates has adopted a policy statement, it is up to the Board of Trustees to determine the best way to implement the policy. In some cases, implementation may require extensive staff time and considerable expenditure of Association funds. The Board considers these factors and assigns priorities based on the availability of resources. For example, if an item requires legislative enactment, the Board must make decisions about finding an appropriate bill sponsor, developing background information, identifying witnesses to testify at legislative hearings and timing the introduction of the bill.

This legislative process has served CPhA well since its adoption in 1970. This carefully constructed process – and the policies it has produced – is one reason CPhA has become the strongest state pharmacy association in the nation.



delegate information

Selection of Delegates

Most delegates are selected by their respective local pharmacy association, school of pharmacy or special interest group (SIG). All current active memberships are counted each year, and these numbers are used to determine the number of delegates per local association, school and special interest group according to the formulas stipulated in Chapter IV, Article I of the CPhA Bylaws. Notifications are sent to local association presidents, ASP presidents and SIG Chairpersons advising them on the number of delegates they are entitled for representation at the upcoming Annual Meeting. These Presidents/Chairpersons are responsible for completing and submitting a delegate appointment form in a timely manner. Members of the Board of Trustees, past presidents, past speakers of the House of Delegates also serve as delegates. Recognized non-affiliated associations, such as the California Society of Health Systems Pharmacists are also represented in the House according to the CPhA Constitution and Bylaws.

Delegate Mailings

Delegates receive at least one mailing (may be by email/posting) prior to the Annual Meeting. This mailing contains the policy committee reports, this general delegate information sheet, a copy of the House of Delegates By-Laws, a copy of the Standing Rules, a copy of Board of Trustees Election Policy as well as New Business and Policy Amendment forms. Delegate mailings are sent only to active delegates. Alternates do not receive the mailings unless specifically requested.

Miscellaneous

If a local association submits the name of a delegate who is already seated as a delegate by virtue of being a Board of Trustees member, a past president, past speaker, or a special interest group delegate, the local association president may be asked to submit an alternate. If a Board of Trustee member, past president, past speaker or SIG delegate sits as a local association delegate they are only entitled to a single vote.

If delegates' names are not received prior to the Annual Meeting, they must be submitted prior to the Opening Session of the House of Delegates.

If a delegate is unable to attend a session of the House of Delegates and someone is assigned to replace him/her, a Delegate Replacement form must be completed and signed by an officer of the organization which he/she represents. This must be done prior to the session which the delegate plans to attend.



overview

A Brief Overview of Parliamentary Procedures derived from the CPhA House of Delegates Bylaws, Standing Rules and Robert's Rules of Order

Motions are Allowed from Delegates Only

1. MOTIONS TO ADOPT REFERENCE COMMITTEE REPORT

- Made by Chair of Reference Committee.
- Motions from a Committee do not require a second
- **If motion to adopt is approved:** Policy Committee report, section thereof, or referred New Business item is considered adopted.
- **If motion to adopt is defeated:** Policy Committee report, section thereof, or referred New Business item is considered defeated unless a motion to refer is presented and approved by the House. Previous policy (if applicable) stays in effect.
- Takes a simple majority vote to adopt.

2. MOTIONS TO REJECT REFERENCE COMMITTEE REPORT

- Made by Chair of Reference Committee.
- Motions from a Committee do not require a second
- **If motion to reject is approved:** Policy Committee Report, section thereof, or New Business item is defeated. Previous policy (if applicable) stays in effect.
- **If motion to reject is defeated:** Policy Committee Report, section thereof, or New Business item is considered adopted unless a motion to refer is presented and approved by the House.
- Takes a simple majority vote to reject.

3. MOTIONS TO REFER REFERENCE COMMITTEE REPORT

- Generally made by Chair of Reference Committee, however may be made by a Delegate at any time during debate on a motion to adopt, reject or repeal.
- Motions from a Committee do not require a second, however, motions to refer originating from the floor do require a second.
- **If motion to refer is approved:** Policy Committee Report, section thereof, or New Business item is referred to next year's Committee for review.
- **If Reference Committee motion to refer is defeated:** Policy Committee Report, section thereof, or New Business item requires a motion for adoption as originally submitted.

- **If motion is approved,** Policy Committee Report, section thereof, or referred New Business item is adopted as submitted.
- **If motion is defeated,** Policy Committee Report, section thereof, or referred New Business item is considered rejected.
- **If a motion from the floor to refer is defeated,** debate returns to the motion pending at the time the referral motion was made.

- Takes a simple majority vote to refer.

4. MOTIONS TO AMEND

- House Rules only allow amendments to Policy Committee reports be made by the Reference Committee. Amendments to Reference Committee reports from the floor require suspension of House Rules (see No 6 below).
- Under House Bylaws and Standing Rules, motions to amend require 2/3 majority for adoption.

5. MOTIONS TO ARCHIVE A NEWLY ADOPTED POLICY

- Made by Chair of Reference Committee.
- Motions from a Committee do not require a second
- **If motion to archive is approved,** the policy is archived and will not be subject to the housekeeping provisions of the Standing Rules.
- **If the motion to archive is defeated,** the policy remains in place and continues to be subject to the housekeeping provisions of the Standing Rules.

6. MOTIONS TO SUSPEND THE RULES OF THE HOUSE OF DELEGATES

- Must be made by a Delegate
- Must be seconded
- Motion should include specific reason for which Delegate wishes rules suspended.
- Motion not debatable.
- Takes a 2/3 majority vote to suspend the rules.

7. MOTIONS TO RECONSIDER A PREVIOUSLY CONSIDERED ISSUE

- Must be made by a Delegate who voted on the prevailing side.
- Must be seconded.
- Takes precedence over any other motion.
- Motion is debatable.
- Takes a simple majority vote to succeed.

8. CALLS

A call for the question, if recognized by the Speaker, limits debate to that which has already been given or otherwise recognized in advance by the Chair.

- Must be seconded
- Not debatable
- Takes a two-thirds majority vote to succeed

A call for the division of the question, if recognized by the Speaker, requires that each whole numbered section of a report, as submitted by a Policy or Reference Committee, be considered separately and be put to a separate vote.

- Must be seconded
- Not debatable
- Takes a simple majority vote to succeed

A call for a division of the House requires that a show of hands or a standing of delegates occur for each side of the question and be counted accordingly.

- Call maker need not have the floor
- Does not require a second
- Not debatable
- Call does not require a vote

9. ACTIONS ON NEW BUSINESS ITEMS NOT REVIEWED BY A REFERENCE COMMITTEE

are governed by House Bylaws and Robert's Rules of Order. The House of Delegates may adopt, reject, amend or refer the item of new business.



code of ethics

PREAMBLE

It shall be the obligation of a pharmacist always to maintain the highest standards of professional conduct and to practice the profession in the best interest of the public health. In order to preserve the dignity and the integrity of the profession of pharmacy and define its obligations to the public, the members of the California Pharmacists Association have adopted the following rules of conduct.

SECTION 1

A pharmacist should hold the health and safety of patients to be of first consideration; a pharmacist should render to each patient the full measure of his or her ability as an essential health practitioner.

SECTION 2

A pharmacist should never knowingly condone the dispensing, promoting or distributing of drugs or medical devices or assist therein, which are not of good quality, which do not meet standards required by law or which lack therapeutic value for the patient.

SECTION 3

A pharmacist should always strive to perfect and enlarge his or her professional knowledge. A pharmacist should utilize and make available this knowledge as may be required in accordance with his or her best professional judgment.

SECTION 4

A pharmacist has the duty to observe the law, to uphold the dignity and honor of the profession, and to accept its ethical principles. A pharmacist should not engage in any activity that will bring discredit to the profession and should expose, without fear or favor, illegal or unethical conduct in the profession.

SECTION 5

A pharmacist should seek at all times only fair and reasonable remuneration for his or her services. A pharmacist should never agree to or participate in transactions with practitioners of other health professions or any person under which fees are divided or which may cause financial or other exploitation in connection with the rendering of professional services.

SECTION 6

A pharmacist should respect the confidential and personal nature of professional records; except where the best interest of the patient requires or the law demands, the pharmacist should not disclose such information to anyone without proper patient authorization.

SECTION 7

A pharmacist should not agree to practice under terms or conditions which tend to interfere with or impair the proper exercise of professional judgment and skill, which tend to cause a deterioration of the quality of service or which require consent to unethical conduct.

SECTION 8

A pharmacist should strive to provide information to patients regarding professional services truthfully, accurately and fully and should avoid misleading patients regarding the nature, cost or value of the pharmacist's professional services.

SECTION 9

A pharmacist should associate with organizations having for their objective the betterment of the profession of pharmacy; a pharmacist should contribute of his or her time and funds to carry on the work of these organizations.

Revised 01/17/01





amendment form

Please submit all amendments in writing, print clearly, and submit to CPhA staff.

Reference Committee Hearing: September 11, 2021

Closing Session: September 12, 2020

Amendments

To be submitted and introduced by delegates only.

Introduced by: _____

On behalf of: _____

Delegate Affiliation: _____

Subject: _____

Title of Item: _____

Item should be amended as follows: _____





new business form

In order for New Business to be considered by the House of Delegates Reference Committee, items must be submitted in writing by **the Opening Session of the House of Delegates**. For items to be considered at the final Closing Session of the House, they must be submitted in writing by **4:00pm on September 11, 2021**.

Further, Standing Rule 1 requires that any New Business submitted must include background information and that authors should be prepared to present the material. Items submitted without background information will be considered incomplete and will not be forwarded to the Policy Committee, the Reference Committee or the House of Delegates for consideration.

2021 House of Delegates Meeting

To be submitted and introduced by delegates only

PLEASE PRINT LEGIBLY

Introduced by: _____

Date: _____

On behalf of: _____

Delegate Affiliation: _____

Subject: _____

Motion:

The California Pharmacists Association _____

Please use additional paper if space is needed.





2021 house of delegates elections

I would like to be slated as a candidate for: Speaker-Elect NCPA Delegate APhA Delegate

Name: _____

Employer/Position: _____

Education: _____

CPhA Special Interest Group Affiliation(s):

Local Pharmacy Association Activities:

State Pharmacy Association Activities:

National Pharmacy Association Activities:

Other Pharmacy Organization Activities:

Please submit form to Rajan Vaidya at rvaidya@cpha.com.



house of delegates schedule

Pre-HOD Session (Optional)

Wednesday, August 4, 2021

6:00pm - 7:30pm HOD Policy Forum

Thursday, August 5, 2021

6:00pm - 7:30pm HOD Policy Forum

Saturday, September 11, 2021

11:30am-2:00pm

CPhA Annual Business Meeting/House of Delegates Opening Session

2:15pm-3:45pm

Reference Committee Hearing

3:45pm-4:15pm

Candidate Forum

4:30pm-6:00pm

Reference Committee Report Writing

6:30pm

Reference Committee Report Available

Sunday, September 12, 2021

8:30am-10:30am

Caucus Meetings

8:30am-9:30am

Student Caucus

11:30am-1:00pm

Closing Session/Open Forum

1:15pm-2:00pm

Installation of Officers