

# The Year of the Cat

Myrella Roy

If you've ever wondered why there is no year of the Cat in the Chinese zodiac, it is because, according to one legend, the cat was betrayed by the rat in the race for calendar signs ordered by the Jade Emperor and hence missed this opportunity for all eternity. However, the Vietnamese substituted the cat for the rabbit in their zodiac. Whatever the explanation for this difference in the zodiacs, 2016 was for me personally the year of the Cat: parting with a beloved older one, adopting a younger, unfamiliar one. In the process of bonding with my new pet and contrasting her personality with that of her predecessor, my imagination took a feline leap and related the reputed traits of the sign of the Cat to the recent accomplishments of the Canadian Society of Hospital Pharmacists (CSHP).

## Creative

Proud of the former CSHP 2015 project and spurred by its tremendous success, CSHP laid the foundation for another engaging initiative that will focus members' efforts on fostering excellence and innovation in patient care and, more broadly, on improving patient health outcomes: the Excellence in Hospital Pharmacy program. The program coordinator was recruited; the steering committee was formed and includes, true to the focus of the initiative, a patient advocate; a logo was designed; and ideas were generated for the work plan of years 1 and 2.

The CSHP Board approved a new Official Publication, the "Pharmacy Practice in Hospitals and Other Collaborative Healthcare Settings: Position Statements". This Official Publication replaces the 2003 Professional Standards for Hospital Pharmacy Practice, which were retired in 2015. It expresses the stance of CSHP and describes a desired and achievable level of performance that is applicable to the practice of pharmacy in any healthcare organization, regardless of geographic location or the individual pharmacy practitioner's experience or area of practice.

After many years of relentless work and consultations, the Canadian Pharmacy Residency Board (CPRB) released the *Accreditation Standards for Advanced (Year 2) Pharmacy Residencies*. The CPRB will use these standards to accredit pharmacy residen-

cies that focus on a specific therapeutic area (e.g., cardiology, oncology, infectious diseases), a specific patient population (e.g., pediatrics, geriatrics), or a specific type of practice (e.g., primary/ambulatory care, critical care).

## Faithful

It was with mixed feelings that CSHP accepted the resignation of Dr Mary H H Ensom as Editor of the *Canadian Journal of Hospital Pharmacy (CJHP)*: eternal regret to see her leave, but undying gratitude for her 10 years as Editor, out of 20 continuous years on the Editorial Board. May her successor, Dr Stephen Shalansky, also bless CSHP with 9 lives holding the *CJHP* torch.

## Social

For the second consecutive year, CSHP conducted a social media campaign during Pharmacy Awareness Month, fuelling conversations about "Your Hospital Pharmacy Team: Your Trusted Medication Experts". Its messages about the integral role in medication management played by pharmacists and pharmacy technicians in hospitals and other collaborative healthcare settings attracted almost 50 more followers on Twitter in March and were reposted nearly 125 times. During that month, CSHP also garnered close to 850 new likes on its Facebook page.

While contemplating the sunset of the Summer Educational Sessions in 2015, the CSHP Board dreamed up the future of the Annual General Meeting (AGM): it would be held each fall in conjunction with a Branch AGM or educational event, so that it would still rove around the country. The Board's dream soon became a reality when one of its semiannual meetings and the AGM were tacked on to the Saskatchewan Branch's own AGM and Educational Sessions on Saturday, October 22, 2016. The



experiment proved a formidable success, with attendance of more than 150 people in total at the educational sessions, the awards dinner and the AGMs, the largest in recent memory for an event hosted by the CSHP Saskatchewan Branch.

Closer to home base, CSHP employees shared a virtual feline cuddle, content with welcoming Laurie Mitchell as coordinator for the Excellence in Hospital Pharmacy program, celebrating the 15-year employment anniversaries of Desarae Davidson (Interim Operations Manager) and Anna Dudek (Finance Administrator), and enjoying complete human resources stability.

## Talented

CSHP continued to lend its members' talents to other healthcare organizations: Canadian Council on Continuing Education in Pharmacy, for the Task Group on Specialization in Pharmacy in Canada; Canadian Pharmacists Association (CPhA) and Association of Faculties of Pharmacy of Canada (AFPC), for the joint Pharmacy Workforce Planning Committee; HealthCareCAN, for the Antimicrobial Stewardship Canada Steering Committee; Health Canada, for optimization of the third-party website and mobile applications for the mandatory reporting of drug shortages and discontinuations; and Royal College of Physicians and Surgeons of Canada, for the Prescribing Safely Canada Steering Committee as well as, since 2015, the Steering Committee of the Acute Critical Events Simulation Education Program. CSHP further collaborated with CPhA in planning the Pharmacy Thought Leadership Summit, in serving on the panel that discussed the foundational research report for the initiative, and in inviting hospital pharmacy innovators or champions to the event. Held in conjunction with the 2016 Canadian Pharmacists Conference, the Summit brought together over 100 invited pharmacy leaders and professionals to identify goals, priorities, and actions in order to achieve an optimal future for pharmacy practice in Canada.

AFPC concluded its Canadian Experiential Education (CanExEd) project, which consequently ended CSHP's representation on the project's steering committee. The CanExEd project generated 9 reports, which offer an extensive collection of best practices, practical tools, and approaches for enhancing the quality and capacity of experiential education in Canada ([www.afpc.info/content/canexed-reports](http://www.afpc.info/content/canexed-reports)). In its perpetuation plan for the project, AFPC foresees continued partnership with CSHP to implement some of the recommendations.

## Wise

One week ahead of the original date of February 6, 2016, set by the Supreme Court of Canada for lifting the prohibition against assisted suicide and voluntary euthanasia, CSHP issued its "Physician-Assisted Dying: Position Statement". The statement drew upon advocacy work carried out by CSHP in the fall 2015,

specifically, its response to the questionnaire from the Provincial-Territorial Expert Advisory Group on Physician-Assisted Dying and its formal submission to the federal External Panel on Options for a Legislative Response to *Carter v. Canada*.

CSHP showed good judgment when it wrote an open letter expressing its opinions about a national pharmacare plan to Prime Minister Justin Trudeau and the provincial and territorial Premiers, with copy to the federal, provincial, and territorial Ministers of Health and members of the Parliament of Canada's Standing Committee on Health. CSHP propounded the viewpoint that all Canadians should have equitable access to evidence-based, effective, and medically necessary drugs and to the expertise of pharmacists, regardless of their provincial or territorial residence, their care setting, and their ability to pay. Subsequently, CSHP President Glen Pearson presented his professional perspectives on prescription drug coverage to the Citizens' Reference Panel on Pharmacare in Canada, a group of 35 volunteers randomly selected from across the provinces and territories who came together in October 2016 to learn how prescription medication costs are covered throughout the country and to recommend changes that will benefit all Canadians. The Panel's recommendations were shared with the federal Minister of Health and her provincial counterparts, as well as with other researchers and stakeholders ([www.crppc-gccamp.ca/](http://www.crppc-gccamp.ca/)).

CSHP also answered calls for consultation from the following stakeholders: Canadian Association of Provincial Cancer Agencies, on the draft document *Recommendations for the Safe Handling of Oral Anti-Cancer Drugs in Community Pharmacy: A Pan-Canadian Consensus Guideline*; Canadian Centre on Substance Abuse, on the priorities for addressing the opioid crisis in Canada; Health Canada, on the draft report *Preventing Drug Shortages: Identifying Risks and Strategies to Address Manufacturing-Related Drug Shortages in Canada* and on the proposed revision of the naloxone qualifier in the prescription drug list, to allow its emergency nonprescription use in case of opioid overdose outside hospital settings; HealthCareCAN and the Public Health Agency of Canada, on antimicrobial resistance and stewardship; and the National Association of Pharmacy Regulatory Authorities, on the draft *Model Standards for Pharmacy Compounding of Non-Sterile Preparations*.

## Watchful

Another purrductive year! Unlike the cat who missed joining the Chinese zodiac, CSHP strives to be—to quote Falstaff in Shakespeare's play *Henry IV, Part 1*—"as vigilant as a cat to steal cream" in chasing every great opportunity to support its members.

---

**Myrella Roy**, BScPhm, PharmD, FCCP, is Executive Director of the CSHP.