

# Information Update

*Bill Leslie*

The Executive Director's report highlights the CSHP's collaborative efforts with government, patient advocacy groups, academia, industry, other associations of health-care professionals, other pharmacy organizations, and — most importantly — members. Although there may not be specific activity to report in every category in each issue, I trust that this format is of benefit to you, our members. The information provided here reflects a selection of activities from December 1999 and January 2000.

### Our Members

#### **Pharmacy Specialty Networks (PSNs):**

I encourage members to visit the Discussion Area of the CSHP Web site. There you will find 13 listserv groupings, of which 5 have established PSNs. It is

only by having a sufficient critical mass of members signed on to the sites that the potential of the service will come to fruition. The other aspect of the listserv is the ability to use it to post questions and share information. Take advantage of this excellent communication vehicle to link with your colleagues across Canada.

**Financial Recovery Plan:** By now you will have received a President's letter and background pamphlet providing important information about plans to ensure the Society's viability in the 21st century. Decreasing



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revenues and increasing expenses have put the organization in a difficult position. Expenses have already been trimmed to the point where the auditors confirm that we are running a very lean organization. Our only alternative was to consider fee increases to maintain the important services that you, the members, have come to expect. If you have not received a copy of the President's letter, please contact the national office. We look forward to your continued support of a national voice for pharmacists practising in organized health-care settings.

**Member Benefits — Intangible:** In spring 1999, Council directed that CSHP take a lead role in facilitating establishment of a medication error reporting system in Canada. A task force, chaired by Dr David Rosenbloom of Hamilton, Ontario, was formed in late summer to take on this work. In late December and early January the core members of the task force circulated material to initiate discussions on this important initiative. During the Professional Practice Conference (PPC), some surprise announcements were made that may have an impact on this initiative. The good news is that regardless of the route, it appears that Canada will see establishment of processes to foster a safe medication system.

Communication is an important issue for organizations such as CSHP. The CSHP Web site is becoming a key link in our efforts to communicate with members. Denise Odgren, administrative coordinator, is using e-mail announcements to members to highlight new additions to the site and to ensure that members are notified early of other important events. The membership database is the source for e-mail addresses. We have accurate e-mail addresses for more than half of CSHP members. If you have not received an e-mail announcement from Denise in the past few months, we do not have an accurate e-mail address for you on file. I encourage you to send your e-mail address to Stacey Cohen, membership coordinator (scohen@cshp.ca), to ensure that you receive the most current information as soon as it becomes available.

To continue on the topic of communication, the *Employment Opportunities Bulletin (EOB)* has traditionally been used to advertise the availability of professional positions. However, since the discontinuation of *Pharmascope* we have been using the *EOB* as a twice-monthly information link with you, the members. As such, a name change seemed appropriate, and early in 2000 the title of this publication was changed to *CSHP News and Employment Opportunities*. This change is an attempt to ensure that members scan the publication for more than just job ads!

**Member Benefits — Tangible:** I noted in my

February report that the Career Event would take place at the PPC if at least 6 hospital departments or other exhibitors signed up for the event. I am pleased to tell you that, with 14 participants (and another on a waiting list), the event was sold out, and reports from participants and registrants attest to its success. Keep in mind that the Career Event was reinstated on the basis of a request from an individual member. CSHP is proud of its ability to respond quickly to appropriate member requests for action!

As noted in my last report, the *Palliative Care Handbook* (currently available only in French) is in the final stages of translation to English. Although we were unable to have a formal launch at the PPC, a sample of sections from the publication were on display. If the production process stays on track, we will take delivery of this excellent reference in early April 2000.

Negotiations continue with an insurance broker with the intent of making professional malpractice insurance available to CSHP members. This is a tough challenge, given that our member base (and thus the "market") is small. In addition, this coverage is already available to hospital pharmacists in some provinces. However, many members have expressed an interest in this type of insurance. We are in a second round of negotiations that we hope will result in the addition of this member benefit. There are no guarantees, but we will keep trying.

Continuing education is one of the tangible benefits that CSHP provides to its members. The PPC registered its highest participation to date during the 2000 edition of the conference, held in early February. In addition, the Career Event was reinstated, and the first annual Research and Education Foundation dinner — a resounding success — was included on the program. Our sincere thanks to the Educational Services Committee for their continued excellence in program planning. In an effort to meet members' needs for distance education, the CSHP Executive met with 3 technology providers to view their options for electronic continuing-education ventures. The intent is to leverage portions of the PPC program and make this material available to members in either CD-ROM or Internet format. Although we are as yet only in the early stages of our investigation, this is another example of your Society's efforts to meet defined member needs.

## Government

### Research and Education Foundation Fundraising

**Dinner:** The Right Honourable Joe Clark, PC, CC, was the guest speaker at the first annual Research and



Education Foundation fundraising dinner, held during the PPC in Toronto in early February. Maureen McTeer also attended the event, for which 24 industry- and association-sponsored tables were sold. Fifty percent of the proceeds will go to support research grants awarded by the Foundation. This event netted the Foundation over \$15 000! During the dinner, Dr Anna Taddio, from The Hospital for Sick Children, received her grant cheque for just over \$10 000.

Significant congratulations are due to the Foundation trustees, Kevin Hall, Bill Wilson, Jim Mann, and Bob Nakagawa, for their excellent efforts in garnering support for this event. Our thanks as well to the industry sponsors who supported this event by purchasing tables. Considerable thanks go to the office staff, who tackled the additional workload associated with this event just before the busiest time of the year — preparation for the PPC.

**Therapeutic Products Programme (TPP):** CSHP continues to participate on the Steering Committee overseeing the TPP Cost Recovery Phase IV review process. I attended meetings of this committee in December and January. These meetings were called to examine the plans of the consultant company that will conduct the review process.

Work on the policy framework for compounding versus manufacturing came to a halt last fall when the TPP staff person handling the file was seconded to another initiative. In early January, work began again and we received what should be the last draft of the policy. The final steps, now in progress, are responses to comments on the framework received from practitioners and organizations. On behalf of the CSHP, I provided comments on the latest draft. It has taken 3 years, but perseverance is paying off!

## Academia

**Entry-Level PharmD:** The task force considering a CSHP position on this important question is very active at this time. An information paper developed by David Hill of the Association of Faculties of Pharmacy of Canada (AFPC) is now available in the Publications section of the AFPC Web site (<http://www.pharmacy.ualberta.ca/afpc/>). Doug Doucette, who chairs the task force, will use this information, as well as data gathered from other literature, from pharmacy organizations in the United States, and from a member survey, to prepare a draft position statement for consideration by CSHP Council.

## Pharmacy Organizations

**Canadian Pharmacists Association (CPhA):** CSHP was an active member of the Canadian Pharmacy Coalition on Pharmacare, spearheaded by CPhA. The final report of this coalition was published in December

1999. A copy of the report is available in the CSHP office or can be purchased through the CPhA office. This excellent document provides the response of the pharmacy community to the question of national pharmacare options in Canada. The document is also an excellent description of the role of the pharmacist in health care, which ultimately is to benefit the patient.

We are now working with CPhA on plans for the 2000 National Pharmacy Forum, which will take place during the CPhA annual general meeting in Saskatoon. Donna Pipa, former CSHP president (1997–1998), will chair the Forum this year. Topics are now being considered for this event, which provides an opportunity for discussion and debate of current issues of interest to the profession.

For those of you who have found the jointly produced *Sterile Product Compounding* video and manual of value, we have good news. The manual is now available separately for practitioners who would like to have multiple copies of the manual for use with the video. You may order the extra copies from either CSHP or CPhA.

## Industry

The CSHP Government and Health Policy Planning Committee and the Executive Committee coordinated a response to the untenable situation that arose when a member of the pharmaceutical industry challenged the professional–medical practice of therapeutic interchange. A letter was sent to the company in question, expressing the Society's concern with what could be considered intimidation tactics.

## A Variety of Partnerships

The CSHP Executive has added its voice of support in principle for a research grant submission by the Canadian Vaccine National Centre for Excellence, also known as the CANVAC NCE. This initiative would see collaborative efforts in centres across Canada in research on acquired immunodeficiency syndrome and cancer. We continue to receive calls and e-mail messages from practitioners around the world for information on licensure in Canada. We can only surmise that this interest is being engendered by CSHP's Web site.

***If you would like more information about these or other issues, please contact the national office or your branch delegate.***

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