

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 over the period mid-January to mid-March 2000.

Our Members

Representation: CSHP is often approached to provide, on behalf of hospital pharmacists, input to

work under development by external groups and government. We are also asked to provide hospital pharmacist representation at invitational workshops. There has been much activity in this area of late, including the following:

- A request to review a draft text on end-of-life care for seniors. Ruby Grymonpre from Winnipeg, Manitoba, took on this task for CSHP.
- A request to provide a representative for the Project Steering Committee for MotherNet, a project of Health Canada in partnership with MotherRisk



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Clinics. This initiative will address data gaps in health surveillance — health information that is either not collected or inaccessible. Lisa Grandy-Allen from Halifax, Nova Scotia, agreed to represent CSHP on this committee.

- A request from the Frosst Health Care Foundation seeking a representative to attend a summit titled "Speaking for Ourselves". The underlying theme is fostering partnerships in patient-centred health care. Doris Nessim has agreed to represent CSHP at this meeting.
- A request from the Canadian Institute for Health Information to participate in a drug utilization survey. The chair of our pharmacy specialty network on drug utilization evaluation, Heather Lummis, agreed to complete this survey.

Such representation falls under the category of intangible member benefits. You may not see something concrete as a result of such activities; however, the views of hospital pharmacists and the important role we play in direct patient care are now considered in these discussions. The fact that CSHP is approached to provide such representation is indicative of the profile that hospital pharmacists, and your professional organization, have attained.

Medication Error Reporting: During the Professional Practice Conference, the formation of the Institute for Safe Medication Practices Canada (ISMP Canada) was announced. To ensure a link between ISMP Canada (an independent body) and the CSHP task force addressing medication error reporting systems, CSHP appointed a member to the ISMP Canada Board. Dr Tom Paton is now a member of both groups.

In late March we received notification of restructuring in the Therapeutic Products Programme (TPP) at Health Canada. The Bureau of Drug Surveillance is now called the Bureau of Licensed Product Assessment. One subsection will be the Division of Adverse Drug Reaction and Medication Error Reporting. As CSHP Executive Director, I scheduled a meeting with TPP staff in April to discuss collaboration in medication error reporting.

At the same time, the United States Pharmacopeia (USP) has renewed efforts to promote its MedMARx hospital-focussed medication error reporting system in Canada. Since CSHP began its efforts to facilitate enhanced reporting, the USP has been considered a key potential resource. Members in one province have

expressed interest in actively participating in the MedMARx program and have inquired about potential links between USP and CSHP. In conjunction with a scheduled visit of executive officers to the American Society of Health-System Pharmacists in late April, a meeting was also arranged with USP MedMARx staff to investigate how Canada might benefit from collaboration with USP.

We speak often about liaising with government and our partnerships with other organizations. CSHP's Vision 2000 promotes forging partnerships and making a difference with and for patients. I am sure you would agree that CSHP efforts with regard to safe medication systems meet these important mandates set by Vision 2000.

Member Benefits — Intangible: The shortage of pharmacists is an issue in all parts of Canada and indeed in many other countries, including the United States and Britain. I have had discussions with Manon Lambert, Executive Director of the APES (Association des pharmaciens des établissements de santé du Québec) regarding the number of vacant hospital positions (currently 100). I have received inquiries from reporters in Moncton, New Brunswick, and Chatham and London, Ontario, about human resources shortages and their impact on patient care. In these cases, I promoted the direct role of the pharmacist in patient care and the need for better utilization of pharmacy technicians. Additional calls have come from Newfoundland, Nova Scotia, and Ontario. CSHP is working with other organizations (see the section on the Canadian Pharmacists Association later in this report) to develop potential solutions to the shortage.

Member Benefits — Tangible: We continue to investigate opportunities to enhance your journal, *CJHP*, and thus to facilitate your access to the current practical information you need to fulfill your direct role in patient care. Negotiations have been finalized for inclusion of a sponsored continuing education insert in *CJHP*. This undertaking is consistent with CSHP's member-driven philosophy, in that it was a member who brought this opportunity to the attention of the *CJHP* editor. At the same time, we have increased the content of *CJHP* material appearing on the CSHP Web site and continue to investigate other options to increase Web site content.

We are making good progress in negotiations with an insurance company to make professional malpractice insurance available to CSHP members. The initial



estimate of premium levels suggests that this coverage will be very competitive, especially given that members would no longer be required to join another organization to obtain coverage. We of course encourage members to support (through membership) applicable voluntary pharmacy organizations. Our intent is to provide an option to those members who are paying additional fees solely for the purpose of obtaining such coverage.

Government

Bill C-6 — Privacy Legislation: I attended a meeting sponsored by Industry Canada to discuss the impact of the new legislation, which was originally intended to protect consumer privacy in e-commerce. Health care has now been pulled into the legislation. This has caused concerns, because the legislation could seriously affect initiatives such as seamless care and research. A health-care lobby has managed to have the health-care application postponed for 1 year. During this time amendments will be drafted that would ensure privacy without negatively affecting the provision of patient care.

Therapeutic Products Programme: At the time this report was written, the Policy Framework for Manufacturing and Compounding of Drug Products in Canada had been completed and was in the hands of the TPP Management Committee for approval. By the time you read this report, the policy framework should be a “working document” and should be available at the TPP Web site (<http://www.hc-sc.gc.ca/hpb-dgps/therapeut/htmleng/index.html>). We will establish a link to this policy framework from the CSHP site to ensure that members have easy access to this important information.

Academia

Association of Faculties of Pharmacy of Canada (AFPC): Donna Wheeler-Usher, Kelly Babcock, and I met with officers of the AFPC in February. We discussed a number of issues, including the *Journal of Informed Pharmacotherapy* and the CSHP name change. We also discussed the potential for use of the direct patient care curriculum in the universities.

Pharmacy Organizations

Canadian Association of Pharmacy Students and Interns (CAPSI): CSHP officers attended the annual CAPSI Professional Development Week in

Toronto, Ontario, in late January. Each year, CSHP—National and the applicable CSHP branch host a booth at the Health Fair that is held as part of this event. We had great discussions with a large number of students regarding CSHP services. Interest in residency programs is high, with questions coming from students as early in their programs as first and second year.

We also had the opportunity to participate in the CAPSI annual general meeting and awards luncheon. This was the first year of the CAPSI–CSHP Pharmaceutical Care Poster Competition. The national competition took place during Professional Development Week, and the winner was announced during the awards presentations. We also took the opportunity to meet with CAPSI officers to discuss options to improve the competition for 2000. At the time this report was written, the 2000 provincial poster competitions, the first stage in the competition process, had just been completed. Each CSHP branch participates by judging the local competition and providing local prize funding. The case problem for this competition is prepared by the CSHP branch in the province where Professional Development Week is to be held. In 2001, the final competition will take place during Professional Development Week in Saskatoon, Saskatchewan.

During Professional Development Week, I also met with the CAPSI representative to the International Pharmacy Students Federation. We discussed how CSHP might assist in promoting the international exchange program for pharmacy students. CSHP agreed to run an information item in the *CSHP News and Employment Opportunities*. The program provides an excellent opportunity for students and practitioners, as it exposes both to practice in a different country.

Canadian Pharmacists Association (CPhA): During the Professional Practice Conference in February, CSHP executive officers held joint meetings with a number of organizations, including CPhA. A major item under discussion was how the 2 organizations will work together on joint initiatives and make appointments to each other’s committees and task forces. We agreed that the Seamless Care Task Force would become a joint task force. Another major item of discussion was the CSHP name change.

CSHP also participated in a meeting convened by CPhA to discuss the current dilemma in pharmacy human resources. Other organizations present included the Pharmacy Examining Board of Canada, the Association of Faculties of Pharmacy of Canada, the Association of Deans of Pharmacy of Canada, the Canadian Association of Chain Drug Stores, and the



Ordre des pharmaciens du Québec. A representative from Human Resources Development Canada (HRDC) presented the mandate of that federal government department. A proposal has been forwarded to HRDC seeking major funding for a study to develop a forecasting model, to help in planning long-term requirements for pharmacists.

A Variety of Partnerships

The Professional Practice Conference, an important educational event for members, also offers the opportunity for networking at the organizational level. Your national officers held meetings with Rx&D (Canada's Research-Based Pharmaceutical Companies); APES, to discuss progress with our strategic alliance; and the Ontario Branch of CSHP. As Executive Director, I also met with the editorial board for the *Annual Report: Hospital Pharmacy in Canada Survey* to discuss human resource issues. This annual report is made possible through the ongoing support of Eli Lilly Canada Inc., which provides support to the editorial board, as well as for the production and distribution of the report.

I met with 2 representatives from the Canadian Institute for Health Information in late February to discuss the major review of pharmacy workload

measurement indicators. It was a good meeting, and I spent considerable time explaining that much of the data currently collected represents technical functions. The missing data are of course those related to direct patient care. CSHP and CPhA have jointly appointed Bill Wilson to represent both organizations in the review process.

I represented CSHP at the launch of Pharmacy Awareness Week, which took place at the National Press Club in Ottawa, Ontario. CPhA arranged for a representative from the Heart and Stroke Foundation to speak on the importance of the pharmacist's role. Jeff Poston of CPhA and I also commented on this important role.

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

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Call for awards

The CSHP National Awards Committee is pleased to announce that the criteria and application forms for the 2000–2001 Awards Program are now available from the CSHP Office. All sponsored awards have a minimum cash value of \$1000. The deadline for submissions is September 1, 2000. To receive a complete package, please send this form to the CSHP Awards Program by fax (613.736.5660) or email (dodgren@cshp.ca).

Name: _____

Address: _____

