

2008 Award Winners

The CPhA Award Winners for 2008 will be presented at the CPhA Annual Conference in Victoria, May 31–June 3

Canadian Pharmacist of the Year

Tom Smiley (Paris, Ontario)

‘I strive to increase awareness and demonstrate the value of pharmacist collaboration on the health care team’



From his earliest days as a community pharmacist with Dell Pharmacy, Tom Smiley believed that pharmacists’ knowledge and skills should be better used in the health care system.

He put that philosophy into practice in his 16 years as pharmacist and pharmacy manager in Brantford, Ontario, through innovative patient programs and advocacy as president of the Brant County Pharmacists’ Association. He also advised employers on how to choose and design prescription drug plans and the importance of strategies that recognized the value of pharmacist interactions with patients.

Ultimately, he decided to change career directions to do even more to help the profession realize its full potential in health care delivery.

In 1996, at the age of 41, Tom Smiley went back to school full-time and earned his PharmD. He says the “unwavering support” of his wife Cindy and his then teenaged children Alyssa and Ryan allowed him to advance his own education so he could better educate others and help facilitate positive change.

Tom Smiley’s name is familiar to many pharmacists, from the scores of continuing education lessons he has

written and the many workshops he has developed and conducted. For the past 10 years, through his firm Pharmavision Health Consulting Inc. as well as involvement in a number of task forces, boards, committees, and research projects, Dr. Smiley has helped Canadian pharmacists learn and apply clinical knowledge, and has worked in Ontario to advance the role of pharmacists in the

delivery of primary health care. He is still active in community practice with Dell Pharmacy in Brantford.

The pharmacist as a full primary care team member

“Our dream as pharmacists is to better utilize the medication management skills taught in school and through ongoing continuing education programs to the benefit of our patients,” says Dr. Smiley. “In addition to helping pharmacists enhance their knowledge level and communication skills, I strive to increase awareness and demonstrate the value of pharmacist collaboration on the health care team.”

Dr. Smiley has helped advance the integration of pharmacists into family health teams (FHTs), a key part of primary health care reform in Ontario. He also fosters partnerships between FHTs and local community pharmacists. He has done this through his work as Primary Health Care Consultant to the Ontario Pharmacists’ Association and as a member of the board of the Association of Family Health Teams of Ontario (AFHTO). Earlier, he was involved with the province’s Family Health Team Action Group.

Dr. Smiley also spent one year as a clinical pharmacist in

the PrimaCare primary care network in Paris, as part of a research project called “A Collaborative Process for Integrating the Pharmacist into a Primary Care Group,” led by Professor Linda MacKeigan of the University of Toronto Faculty of Pharmacy and funded by the province’s Primary Health Care Transition Fund.

Fuelled by the growing evidence that collaborative health care teams improve patient outcomes, primary care is being reformed across Canada. This is providing all pharmacists with a valuable opportunity, says Dr. Smiley.

“We know the team approach is the best approach and that medication management is a vital component of care. To move forward as a profession we need to declare our role in that team.”

The collaboration was a success for several reasons, he says, including the fact that the physicians, registered nurse, nurse practitioner, and pharmacist developed a clear job description for him within the collaborative model before beginning patient care. “Along with trust and credibility, it is extremely important for each member of the team to have role clarity. These ingredients to successful teamwork can only be realized by bringing team members together for healthy discussion.”

Working with the OPA and the Ontario College of Family Physicians, Dr. Smiley helped develop a pharmacist/physician team mentoring project as part of Health Force Ontario. Pharmacists and physicians with successful experience in working together mentor other teams that are just starting out.

This is the kind of approach that will truly strengthen collaborative care, he says. He’s also a strong proponent of interprofessional education, which he believes is starting to improve.

Additional accomplishments

Dr. Smiley’s work to advance the profession also includes:

- Six years on the OPA Board of Directors, including 2 on the executive committee
- Position of clinical lead on the EMR_{xtra} program in Sault Ste. Marie, which uses information technology to allow community pharmacists and physicians to share access to electronic medical records
- Development of training modules and training delivery to pharmacists in the Hamilton FHT for the *Passport to Health* pilot, and materials to help Ontario pharmacists conduct MedsCheck reviews
- Member of the Clinical Tobacco Intervention (CTI) Expert Advisory Group and facilitator of smoking cessation workshops and online programs for pharmacists, physicians, and dentists
- Facilitator of Seniors’ Safe Medication Use Programs, which are organized by the OPA and often hosted by Ontario MPPs

As health care professionals, we have a common goal — the best patient care possible,” he says. “When it comes to medication management, pharmacists, physicians, and nurse practitioners should learn together on a local basis. This learning should not only be around diseases and drugs, but should also have a strong component of team building.”

“I am happy to be counted among the multitude of pharmacists across this country who are striving to increase awareness and demonstrate the value of pharmacist collaboration on the health care team.”

Dean George A. Burbidge Award

Jennifer Ng (Toronto, Ontario)

The student who earned the highest mark on the 2007 Spring Qualifying Exam for the Pharmacy Examining Board of Canada was Jennifer Ng. Ms. Ng was awarded First Class Honours in each of her 4 years with the University of Toronto’s Faculty of Pharmacy. She graduated in 2007 and is currently a clinical pharmacist at the Scarborough Hospital (Grace Campus).



CPHA Patient Care Achievement Award for Health Promotion

Martha Bailkowski
(Thornhill, Ontario)

In the summer of 2006, Martha Bailkowski, a partner in Bishops Cross Remedys Rx Pharmacy in Thornhill, interviewed a number of her patients with diabetes to assess their needs. In 1 week, 2 patients mentioned that they found it difficult to exercise because they had no one to exercise with.

That prompted this pharmacist to start thinking about a health promotion initiative that went beyond the usual pharmaceutical care. If patients needed support to exercise, she thought, maybe she could help provide it.

In 2007, she became a Certified Diabetes Educator. With her pharmacy a member of the Canadian Diabetes Association's Community Pharmacy Partner program, Ms. Bailkowski got advice and support from the CDA's Michelle Westin, did more research into diabetes and exercise, and conducted a patient survey.

Soon, a group of Ms. Bailkowski's patients had plenty of exercise partners, including the pharmacist herself, and her partners Estelle Wolf and Marilyn Bacher. In September 2007, they launched the "Walking to Wellness" program, which continues to this day.



"The interest was very high. We had over 20 people taking part in the first round of weekly walks, most with either type 1 or type 2 diabetes," she says. "Local sponsors supplied us with pedometers and t-shirts, and before each walk, we have an educational session related to healthy living and wellness." Ms. Bailkowski says Jeannette Wang, Chief Pharmacy Officer at Remedy Drug Store Company, also provided support to make the program a success.

Ms. Bailkowski has been a strong proponent of health promotion ever since she acquired the pharmacy in 2000. Before Ontario's Meds-Check program, she was doing medication reviews, and providing advice on prevention and healthy living. And before her store was renovated to include a small counselling area, she held private sessions with patients in a quiet corner of a restaurant in her plaza.

"Our philosophy at the pharmacy is that whatever our patients need, we do it if we can," she says. "It might be delivering the prescription to their home or doing extra research for them. I have always felt that the most important thing is to do what the patient needs and sometimes that's more than medicine."

Award sponsor: Novopharm Ltd.

CPHA Honourary Life Membership

Leslie Dan
(Toronto, Ontario)

Evidence of Leslie Dan's contributions to pharmacy, health, and medicine, not to mention Canada's pharmaceutical industry, is certainly not hard to find.

Of course, there's the Leslie Dan Faculty of Pharmacy and the Leslie L. Dan Pharmacy Building at the University of Toronto, which he and his family helped to finance with a \$14 million donation. Support from Dr. Dan, his family, and his pioneering generic pharmaceutical firm Novopharm established the Novopharm/Stanley Chair in Pharmacy at the University of British Columbia and the Dan Family Chair in Neurosurgery at the U of T Faculty of Medicine.

The former Novopharm Biotech continues to this day



as Viventia, a company developing anti-cancer therapies. Dr. Dan is chairman of the Board and still heavily involved in Viventia's work.

Dr. Dan has earned recognition for his success as an entrepreneur and innovator, as well as his philanthropy and humanitarianism. He's also widely known as a "great Canadian success story." Born in Budapest, Hungary, he came to Canada in 1947 as an 18-year-old war refugee, with little money and limited English. After completing high school and working at several jobs to earn tuition, he studied pharmacy and graduated from the U of T in 1954. He became interested in the manufacturing end of pharmacy and did part-time studies to complete his MBA at the university in 1959.

His first business was sending tuberculosis drugs and

other medicines to Europe, and in 1965, he founded Novopharm. "I thought there was a great need, and opportunity, to provide less expensive, generic medicines," he says. "This was helped by legislation passed in 1969 that made it possible to manufacture products under license and pay a royalty to the patent holder."

In Novopharm's first year, its revenue was \$165,000 and it produced one product, a generic version of tetracycline. Dr. Dan grew the company into one of Canada's largest generic pharmaceutical manufacturers. When he sold it to Israel's Teva Pharmaceuticals in 2000, sales were \$750 million and the company employed 3000 people in 3 countries — Canada, the US, and Hungary.

In 1985, Novopharm started the Canadian Medicine

Aid Program (CAN-MAP), which each year sends medications worth millions of dollars to doctors, pharmacists, nurses, and charities working in developing countries.

The Dean of the Leslie Dan Faculty of Pharmacy, K. Wayne Hindmarsh, calls Dr. Dan "a philanthropist extraordinaire and one who continues to ensure that the pharmacy profession moves forward. I have personally never seen anyone more committed to the education of future practitioners."

"I supported the new faculty because I wanted to leave some sort of legacy behind," Dr. Dan says. "It's certainly a far cry from my first year of pharmacy at U of T. I never believed one day a school would be named after me."

CPhA New Practitioner Award

Kaye Andrews (Calgary, Alberta)

Kaye Andrews graduated from the University of Alberta with her BScPharm just 5 years ago. Now she's leading an innovative project to integrate pharmacists into the Calgary Rural Primary Care Network (CRPCN) — a network of 80 family physicians serving 130,000 people in 10 rural and suburban communities surrounding Calgary.

The "Integrating Pharmacists into Primary Care Networks" project is breaking new ground. The CRPCN is one of the first large primary care networks in the province to bring pharmacists into its collaborative care model. The research goal is to analyze how this integration affects drug therapy outcomes and to provide pharmacy best practice models for application to other PCNs.

Ms. Andrews spends 40% of her time providing clinical care at the Foothills Family Medical Centre in Black Diamond and the other 60% as the clinical and administrative lead, responsible for hiring and managing the activities of 5 other pharmacists and for the overall integration of the pharmacy role.

The pharmacists' tasks include structured medication reviews, collaboration with nurses in chronic disease management, and provision of drug information services to family physicians and other team members. "Our pharmacists are integrating well into the communities," says Ms. Andrews. "We are establishing the referral process and the channels of communication, as well as



the areas that are most appropriate for their involvement. We want the pharmacist to step in where there are care gaps and the needs vary with each community."

Ms. Andrews was well suited to her responsibilities, as she already had experience in primary care. As part of another project called APTCare, she developed her primary care pharmacist role with a team of nurse practitioners and family physicians in Carp, Ontario, near

Ottawa. Her job included providing assessments through home visits and medication reviews for patients, many of whom were elderly with multiple chronic conditions. She is the co-author of a paper being written about the impact of the APTCare project, which found a 10% improvement in the quality of care.

"I find it very rewarding to work as part of a team of professionals who each have a role to play in advancing care for a patient," she says. "I always wanted to be involved in follow-up and monitoring, and to have the opportunity to build relationships with patients. I value that continuity."

This young pharmacist is making her mark in other arenas as well. She represents pharmacists on Alberta's interdisciplinary clinical working group helping to advance the provincial electronic health record, Alberta Netcare, and is a member of the CPhA Membership Advisory Network. And Ms. Andrews was just elected for a 3-year term on the Council of the Alberta College of Pharmacists.

CPhA International Leadership Award

Claude Mailhot
(Montreal, Quebec)

In her 10 years as Associate Dean for Academic Affairs and professor at the Faculté de pharmacie de l'Université de Montréal, Claude Mailhot worked to bring the highest standards of quality to the development and assessment of the faculty's clinical course curriculum.

"I believed it was very important to have a program of good quality to make sure our future pharmacists would be doing the best for their patients," she says. "Clinical pharmacy and the active involvement of pharmacists in patient health have always been very important to me."

Dr. Mailhot's experience at her own faculty helped her build considerable expertise in quality assurance and curriculum evaluation. She is considered a pioneer in the development of clinical pharmacy and pharmaceutical care education in Canada and this includes development of Canada's first PharmD program at her university. Now she is sharing her expertise with francophone pharmacy educators and pharmacists around the world.

Her introduction to the international pharmacy arena was in the late 1980s, when deans from French universities came to the Université de Montréal to learn more about developing clinical pharmacy programs. "In Canada, we were well advanced compared to them. I felt we could use our experience to help them develop a curriculum based on



a more patient-oriented practice."

Dr. Mailhot has helped advance pharmacist education and the pharmacy profession in France, as well as Romania and the African nations of Togo and Senegal. She evaluated pharmacy programs in her work with the Conférence internationale des doyens des facultés de pharmacie d'expression française (CIDPHARMEF) and was appointed president of its program evaluation committee in

2005. In 2004, the Université de Picardie Jules Verne in France granted her a Doctorat Honoris Causa for her contributions.

She has also delivered seminars on teaching methods, evaluation, and professor recruitment to university leaders from Africa through the Agence Universitaire de la Francophonie (AUF). Despite the systemic and cultural challenges of effecting change in developing nations, Dr. Mailhot believes even small steps forward have a big impact. "In Africa, pharmacists are a lot more accessible than physicians. In some of our work, we've been able to show ministries of health that if pharmacists are better trained, they can take care of more of the first-line health care."

Dr. Mailhot is also responsible for international relations at her pharmacy faculty and is working on the development of international teaching and research partnerships, including with Chinese universities. Her future plans include advising pharmacy faculties in Tunisia and Algeria.

CPhA Patient Care Achievement Award for Specialty Practice

Susan Bowles
(Halifax, Nova Scotia)

Through her work as a clinician, educator, researcher, and scholarly author, Susan Bowles has earned recognition as a leader in geriatric therapeutics. She has expanded the body of knowledge about medication use in older populations, while also working to expand the role of the pharmacist in geriatrics and other types of patient care.

Dr. Bowles is a clinical pharmacy specialist in an inter-

disciplinary geriatrics team in the Centre for Health Care of the Elderly at the QEII Health Sciences Centre in Halifax. She is also an associate professor in Dalhousie University's Faculty of Pharmacy and Faculty of Medicine.

Her colleagues on the geriatrics team pay tribute to her extensive knowledge, commitment to patient care, and team building. "In my 18-year career I have not met an individual who has so strongly impacted my thinking or practice about medications and older people," says Dr. Daniel Carver, geriatrician at the QEII Health Sciences Centre. Nurse practitioner Sandra Duke says Dr. Bowles is a "vigorous and efficacious patient advocate," who "clearly respects and enhances the idea of true collaborative practice."

"I believe very strongly that pharmacists have an important contribution to make," says Dr. Bowles. "In my work, I

try to set an example for other pharmacists and to set an expectation among other health professionals that this is the way they can expect pharmacists to perform on the team.”

The need for pharmacist expertise in the care of the elderly is going to further expand, she notes. “The aging of the population is something the health care system views as a potential disaster, but it doesn’t have to be that way,” she says. “If pharmacists and other health care professionals focus on preventing chronic diseases and reducing the burden of illness, we can help keep many older persons out of the acute care system for longer.”

Dr. Bowles is also an advocate of the pharmacist’s role in vaccination. She developed and piloted a model for delivering annual flu vaccines in the community pharmacy setting,

and was recently named vice-chair of the Canadian Coalition for Immunization Awareness and Promotion. She was also a guest editor of *CPJ*’s supplement “Practical Management of Vaccines.”

Dr. Bowles believes the expansion of interdisciplinary teams is going to require all health professionals to acquire a broader set of skills. Rigid definitions of the roles of pharmacists, nurses, and others are going to disappear, she predicts, and the education system will have to make changes as well. “We have made leaps and bounds in terms of how we are training the next generation of pharmacists, but we need to push it further.”

Award sponsor: AstraZeneca Inc.

CPhA Honorary Life Membership

Vernon Chiles (Sarnia, Ontario)

Vernon Chiles began his practice at a time when the pharmacist’s role was narrowly defined. “When I graduated in 1960, current thinking and our education told us that pharmacists should not give any advice to patients. We were told that was the doctor’s role.”

“After I was in practice for about 2 years, I thought; ‘What we were taught was wrong.’”

It was the beginning of a long and distinguished career aimed at expanding the role of the pharmacist into areas that give patients higher quality health care and greater access to quality drug treatments.

Mr. Chiles’ association with Sarnia Pharmacy lasted from 1963 to 1995. He and his colleagues focused on clinical services and patient communications from the early days; they set up their first private consulting room in 1965. In 1966, he started a monthly newsletter on drug therapy, now in its 43rd year. It was sent to local physicians and helped strengthen pharmacist-doctor relationships and consultations on prescribing decisions.

He didn’t confine his efforts to his community practice. “Throughout my career, I tried to play a catalytic role in expanding the responsibilities of pharmacists,” he says. “And I wanted to bring the pharmacist’s perspective to efforts to



improve the quality of drug treatment.” He worked on these goals through a number of initiatives, including Chair of the University of Toronto Drug Information Centre Advisory Committee; member of the Ontario Ministry of Health’s Drug Quality and Therapeutics Committee; and editor of CPhA’s 1980 textbook *Canadian Self-Medication*.

Mr. Chiles was a member of the Ontario government panel that recommended Ontario’s Trillium

Drug Plan for Catastrophic Coverage in the early 1990s. He has also done significant work in the pharmacy benefits area, as a consultant with Green Shield Canada and as Vice Chair of the Board. He also helped create the Green Shield Canada Foundation, which funds health and social research, and other projects.

“I have always been concerned about access to medications,” he says. “When I first started out, with the exception of veterans, almost no one had drug coverage. Today most people do have some coverage but both the public and private sectors can still do more to make sure that all Canadians have affordable access to the best drug therapies and to pharmacists’ services.”

In “retirement” Mr. Chiles continues to provide advice as a consultant to the broad health community.

CPhA Patient Care Achievement Award for Innovation

Murphy's Health Education Centre (Pharmacist Team) — Charlottetown, Prince Edward Island



Murphy's Pharmacies in Prince Edward Island has for many years played a very active role in health promotion and education, both for the clients of its pharmacies and in the broader community. Three years ago, the well-known pharmacy chain (with 7 locations in PEI) took this commitment to a new level with the creation of Murphy's Health Education Centre (MHEC), a pharmacist-led multidisciplinary patient care facility that provides a wide range of services and programs designed to help people take more control over their health.

"We are trying to do our part as members of the health care team to help build healthier communities across Prince Edward Island," says Ryan Murphy, Director, Pharmacy Development & Health Education with Murphy's Pharmacies. "There are limited resources in the health care system and one of the areas where there are gaps is in health education. National statistics show that on a number of measures, PEI has one of the unhealthiest populations in the country."

The MHEC has a team of 8 pharmacists — Ryan Murphy, Ray Murphy (President of Murphy's Pharmacies), Nichole Sweeney, Margie McLane, Shera Hanson, Juanita MacDonald, Melinda Currie, and Andrea Trainor-Tweel (who is a Certified Diabetes Educator). This group provides a host of services, including medication consultations, group health seminars, specialized diabetes and heart health services and programs, 24-hour blood pressure monitoring, coagulation

testing, and various programs and services offered by other health professionals, including nurses and dietitians.

The Centre also provides regular continuing education sessions for the pharmacists and technicians who work at Murphy's Pharmacies, with pharmacists and other health professionals also acting as preceptors for nursing, dietary, and pharmacy students.

The MHEC is "truly an original and novel concept," says Dr. Michael Molyneaux, a Charlottetown physician who supported the Centre's nomination for the innovation award. It "contributes in a measurable way to positive patient outcomes" and "has established the pharmacist as both a primary partner and leader in the delivery of primary health care services."

It's gratifying to see how patients and other health professionals have welcomed the facility, says Ryan Murphy, and the Centre continues to add to its roster of services. "We are very passionate about this. We are continuing to grow and to expand the kind of care that pharmacists are capable of providing."

"If we can provide education, tips for self-management of health, and look at focusing on prevention, we are doing our jobs as pharmacists. Our goal is to have a healthier province as a result."

Award sponsor: Apotex Inc.

CPJ Best Paper of the Year

William Semchuk (Regina, Saskatchewan)

The CPJ Best Paper of the Year award for 2007 has been given to an original paper that compared conventional with intensive training for community pharmacists seeking to help reduce risk in high-risk cardiac patients.

The lead authors were William Semchuk of Regina and Jeffrey Taylor of Saskatoon, and co-authors were M. Deschamps, L. Sulz, Ross Tsuyuki, P. Duffy, and T. Wilson. "Pharmacist Intervention in Risk Reduction study in high-risk cardiac patients: The effect of 2 methods of pharmacist training" was published in the March/April 2007 issue of the CPJ.

The researchers wanted to expand on studies such as SCRIP, which demonstrated the benefits of pharmacist intervention to manage cholesterol risk in patients at high risk of cardiovascular events. "SCRIP and other studies have shown that pharmacists can have a positive impact in cardiovascular risk assessment," says Dr. Semchuk. "We know they can do it, so a logical question is 'how do we best train them to do it?'"

Sixty-one volunteer pharmacists from 40 pharmacies in Saskatchewan took part in the study. There were 2 groups — one group received conventional CE training (a 2-hour evening lecture), while the other group received intensive training — a 6-hour workshop that



included interactive practice sessions with pharmacy students playing patients, as well as online follow-up. Preliminary results show that the recommendations forwarded

by pharmacists in the intensive group received greater acceptance by physicians than those in the conventional group.

"We believe this research shows that more specific training and training that gives pharmacists the tools to translate their knowledge into action is most effective," says Dr. Semchuk. "Based on our results, I believe that we need to incorporate this kind of 'knowledge to action' training on a broader basis, for many different types of care."

"I and my fellow researchers want to acknowledge all those pharmacists who were involved in the front lines of this study," adds Dr. Semchuk. "Their commitment to change really drove the success of this research."

Award sponsor: *Canadian Pharmacists Journal*