



CANADIAN
PHARMACISTS
ASSOCIATION

ASSOCIATION DES
PHARMACIENS
DU CANADA



STRONGER
TOGETHER

2014

ANNUAL REPORT

STRONGER TOGETHER

CPhA is working with our members, affiliates and stakeholders to achieve our mission and vision.

MISSION

Advancing the health and well-being of Canadians through excellence in pharmacist care.

VISION

Pharmacists providing world-class pharmacy leadership.

We will achieve this vision by collaborating with our member organizations, pharmacists and key stakeholders through:

- Speaking as the national voice for the profession
- Leading practice advancement to enable pharmacists to utilize the full extent of their knowledge and skills in providing health care
- Collaborating with other health care providers and key stakeholders to optimize health outcomes for Canadians
- Protecting the safety, security and integrity of the medication system through the development of and participation in medication safety and quality improvement initiatives
- Supporting pharmacists in providing medication management, health promotion and disease prevention services
- Being the trusted source of education, information, tools and resources to support safe and effective medication use and optimal drug therapy outcomes

MESSAGE FROM THE CHAIR



“We’re working collaboratively to achieve our mission of advancing the health and well-being of Canadians through excellence in pharmacist care.”

One of my key goals as CPhA began its year of transition was to build a climate of mutual trust and collaboration. I am pleased to report that we ended 2014 as a renewed and revitalized association; organized in a way that better reflects and leverages our collective interests, resources and expertise.

Together with our partners and stakeholders, our renewed commitment to collaboration, coordination and a unified national voice gives us the reach and influence to effect positive change in our health care system and to advance the interests of our profession and the patients we serve.

CPhA’s focus is to provide Canadian pharmacists with the support they require to provide the highest quality health care to Canadians and outstanding value to the health care system.

It was a ground-breaking year for CPhA as we worked closely with our Organizational Members and key stakeholders to ensure that our services, products and

programs continue to meet the evolving needs of Canadian pharmacists. Over the past year, we successfully implemented a new membership model and governance structure, redefined our mission and vision, articulated our new strategic priorities and developed an enhanced advocacy function; all while continuing to publish trusted, evidence-based, world-class drug and therapeutic information.

While we have much to celebrate, we know we need to chart a new and even more ambitious course moving forward. We will build on the successes of the past as we develop new and innovative ways to deliver value to our members. Thanks to each of you who reached out over the course of the year to provide wisdom, guidance, insights and encouragement. I hope that we can count on your continued support to ensure that CPhA remains a relevant and dynamic force in reshaping our health care system.

Canadian pharmacists expect excellence from their national

association and they deserve no less. The CPhA Board of Directors and staff are all committed to meeting and exceeding those expectations.

I’m very proud of all that we collectively accomplished last year. I hope you’ll read through our 2014 Highlights to find out how we’re working collaboratively to achieve our mission of advancing the health and well-being of Canadians through excellence in pharmacist care. ■

A handwritten signature in blue ink that reads "Jane Farnham". The signature is stylized with a large, circular flourish on the left side.

Jane Farnham, Chair

MESSAGE FROM THE CEO



“Our flight plan is clear with a new mission, vision and strategic priorities leading us to exciting destinations in the years ahead.”

Since earning my pilot’s license a few years ago, I’ve taken a special interest in aviation. Therefore it should come as no surprise that as I reflect on the past year at CPhA I immediately think of parallels to piloting an aircraft. 2014 was an unusual year for our organization and I think the experience is comparable to a rarely used technique in aviation called aerial refuelling—the process of transferring aviation fuel from one aircraft to another during flight. The concept was pioneered in the 1920s and permits a takeoff with a greater payload and shorter takeoff roll, reduces fuel consumption and, of course, extends flight range.

Sound familiar? In 2014 the CPhA Board and staff was focused predominantly on getting our exciting new organization off

the ground and soaring high above the clouds. We needed to work out new agreements with our member associations, elect new board members, set a new direction for the organization and revamp most of our support systems like policies and procedures to mention just a few priorities. But at the same time, we had to keep a keen eye on the fundamental things that fuel this new aircraft—the content and services we provide to our members, organizational affiliates and end users.

So how did we do in our inaugural 2014 journey? You can gauge this for yourself as this annual report is filled with some of the many highlights. As captain, I am happy to report that our passenger list is large as all of our provincial pharmacy associations and

the Association of Faculties of Pharmacy of Canada have signed on. Our flight plan is clear with a new mission, vision and strategic priorities leading us to exciting destinations in the years ahead. We have an expert and energized crew of Board members and staff. And we even have extra fuel in reserve due to the all-time record balance in our net assets at the end of 2014.

Thanks for your continued support and I look forward to flying with you again in 2015. ■

A handwritten signature in blue ink, appearing to read 'Perry Eisenschmid'. The signature is fluid and cursive.

Perry Eisenschmid, CEO

GOVERNANCE AND MEMBERSHIP

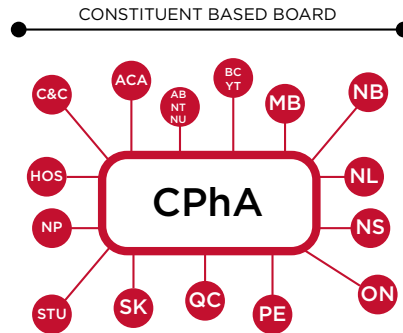
“We recognized the need to strengthen the voice of pharmacy in Canada.”

CPhA has been the national voice of pharmacy for over 100 years. In that time, our profession has experienced tremendous change and, as scopes of practice and funding models evolve across the country, pharmacists are doing more for patients every day. In order to stay relevant, to help pharmacists make a difference for patients and to ensure that we represent the interests of our provincial pharmacy advocacy partners in national discussions, CPhA also needs to continually evolve.

Following two years of consultation, exciting changes to the CPhA membership and governance model were approved at our Annual General Meeting in June 2014. This new model positions CPhA to best support Canadian pharmacists as collaborative partners in the continuum of care, and to best represent pharmacy in discussions with stakeholders and governments.

In the new membership model, all ten provincial pharmacist advocacy associations and the Association of Faculties of Pharmacy of Canada (AFPC) are Organizational Members of CPhA. The Canadian Association of Pharmacy Students and Interns has joined as an Organizational Affiliate. Through our Organizational Members and Affiliates, CPhA now represents

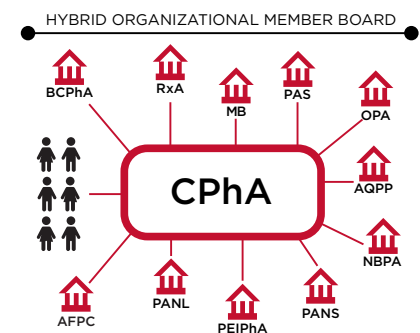
Old model



Board of Directors

Directors elected from each constituency (province or practice setting).

New model



Board of Directors

Directors appointed/elected by each Organizational Member plus six Individual (skill-based) Directors.

over 20,000 pharmacists and pharmacy students as CPhA Associates, giving them access to a range of benefits and resources.

Under the new governance structure, the CPhA Board of Directors is made up of representatives from each CPhA Organizational Member, as well as six skills-based individuals. Only these members will vote at CPhA's AGM. We have also created a new Board Advocacy Committee to guide the vision for CPhA's enhanced focus on advocacy and invested in staff resources for our new Advocacy and Public Affairs department to implement that vision.

The new governance and membership model promotes

a strong, unified profession and recognizes that the challenges and opportunities confronting pharmacists transcend traditional boundaries. CPhA will focus advocacy efforts on enabling pharmacy to proactively lead change. We are dedicated to helping pharmacists realize their place in the full spectrum of collaborative care services alongside physicians and nurses.

We are confident that this new model will allow us to take a truly pan-Canadian approach to our engagement with governments and stakeholders. Our united voice will result in a stronger profession and, ultimately, better care for Canadians. ■

ORGANIZATIONAL MEMBERS



ORGANIZATIONAL AFFILIATES

In late 2014 we launched a new Organizational Affiliate partnership program to give key pharmacy stakeholders who support our mission and vision the opportunity to be a part of the new CPhA. Together we advocate for optimal health outcomes for Canadians through excellence in pharmacist care and safe, effective drug therapy. This new program replaces our old Corporate Membership program.

abbvie



APOTEX
ADVANCING GENERICS



AstraZeneca

Loblaws
pharmacy



COSTCO
PHARMACY



gsc
green shield canada

P&G Professional



gsk
GlaxoSmithKline



PHARMASAVE

Johnson & Johnson
FAMILY OF COMPANIES IN CANADA



To add your voice to ours as a CPhA Organizational Affiliate, contact members@pharmacists.ca.



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ADVOCACY

CPhA is speaking as the national voice for the profession

CPhA is the uniting national voice of pharmacy and the pharmacist profession in Canada. We engage with national decision-makers and health stakeholders on a regular basis to demonstrate the value of pharmacy services to the health care system and to the health of Canadians.

Pharmacist Awareness Month

In collaboration with provincial pharmacist associations, CAPSI and the Blueprint for Pharmacy, CPhA once again led a successful Pharmacist Awareness Month in March 2014. The theme, *The Pharmacist Is In*, was used by pharmacists across the country to highlight the accessibility of pharmacists and the services they can provide to patients. We worked with Rogers Media to develop downloadable posters and patient handouts, as well as media kits and other supporting materials. We also produced a promotional video that spoke to the changing and expanding role of pharmacists throughout Canada.

Successful Health Canada Regulatory Change to Retention of Prescriptions

Starting in late 2013 CPhA began lobbying Health Canada to change regulations requiring pharmacies to maintain at least two years worth of prescriptions in a hard copy format. CPhA requested that, given new technologies, the regulation be revised to allow for electronic retention. Health Canada approved this change in July 2014 and, for the purposes of federal regulation, pharmacies can now retain prescriptions electronically.

Presentations to the Federal Government and Political Parties

CPhA made six presentations to House of Commons and Senate Committees in 2014 on topics ranging from scope of practice to unintended consequences of pharmaceuticals to e-cigarettes. CPhA was also asked to participate in a number of regulatory briefings and Working Groups by Health

Canada to discuss issues such as acetaminophen and plain language labelling. CPhA's input on many of these issues was reflected in the Senate's comprehensive report on prescription pharmaceuticals in Canada.

News Releases

CPhA issued news releases on a variety of topics in 2014, including:

- Canada Revenue Agency's audits of incentive payments
- Research results showing pharmacists are more effective and efficient after completing the ADAPT program
- New advisory panel on health care innovation
- Research on community pharmacists' access to and usage of digital health tools
- Health Canada's changes to regulations relating to electronic storage of prescriptions ■



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LEADING PRACTICE ADVANCEMENT

CPhA is leading practice advancement to enable pharmacists to utilize the full extent of their knowledge and skills in providing health care

In 2014 CPhA continued to advocate for expanded scopes of practice and educate the public to lead practice advancement and contribute to excellence in pharmacist care.

Scope of Practice Presentation to the House of Commons

In April 2014 CPhA formally presented feedback and recommendations on the federal government's *Study of the Best Practices and Federal Barriers Related to the Scope of Practice and Skills Training of Healthcare Professionals* to the House of Commons Standing Committee on Health. This study focused on the federal role in scope of practice, best practices in Canada and internationally and the federal role and support for skills training and curriculum development. In our presentation we submitted three recommendations for consideration: 1) extending coverage of new pharmacist-provided services to federal populations; 2) investing in education and training that supports practice change and expanded scope of practice; and 3) increasing the role and capacity of the federal government in pan-Canadian health human resources planning, including pharmacy labour market studies and forecasting models.

Blueprint for Pharmacy

The Blueprint is a collaborative initiative working towards the Vision for Pharmacy: Optimal drug therapy outcomes for Canadians through patient-centred care. CPhA is the Secretariat for the Blueprint National Coordinating Office (NCO). The Blueprint Steering Committee (BPSC) supported a Pharmacy Technician Working Group meeting in June 2014 to identify actions and priorities to advance the profession through education, advocacy, leadership and human resources. The Blueprint NCO managed an enhanced scope of practice photos project in the fall of 2014 to develop a bank of photos showing pharmacists in patient-care roles. Other projects funded by the Blueprint in 2014 included specialization in pharmacy, a practice-based research network in Quebec, the cost-effectiveness of medication reviews in Ontario, experiential education and a value of pharmacist services toolkit. Dennis Gorecki resigned as Chair of the BPSC in August 2014. The position has since been assumed by David Hill, former AFPC representative to the Blueprint and Chair of the original Blueprint Task Force that developed the Vision for Pharmacy and Blueprint Implementation Plan.

Atlantic Summit on Healthcare and Drug Cost Sustainability

In October CPhA CEO Perry Eisenschmid delivered a presentation on the need for an increased role for pharmacists at the Atlantic Summit on Healthcare and Drug Cost Sustainability, held in Charlottetown, PEI. The Summit, convened by the Public Policy Forum and hosted by PEI Health Minister Doug Currie, brought together patient groups, representatives from the drug industry, health providers, the private sector and other health stakeholders to explore opportunities for collaboration in sustainably managing drug costs and enhancing health access in the Atlantic region. All four Atlantic provincial health ministers were in attendance and more than 100 participants attended the event. CPhA's presentation outlined the need to position pharmacists as primary health care providers, expanding their use for minor ailments, medication reviews, immunization and chronic disease management to enhance the sustainability of health delivery and meet the key health care challenges of lowering cost and improving access. Outcomes and recommendations from the Summit were published in a Public Policy Forum report in January 2015. ■



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COLLABORATION

CPhA is collaborating with other health care providers and key stakeholders to optimize health outcomes for Canadians

CPhA is a trusted source of knowledge and information for governments and stakeholders. We're frequently called upon to offer expert advice as we all work together to develop a sustainable health care system for Canadians. We participate on various national committees and panels, continually working to ensure that the voice of pharmacy is heard and understood in critical discussions.

Pharmacy and Health Insurance Steering Coalition (PHISC)

PHISC, a coalition of pharmacy and third party payer stakeholders established by CPhA and other partners, was launched in 2014. Its top priority is to encourage third party payers to extend private health insurance plans to cover expanded pharmacy services that are not covered by public health plans, either through Health Spending Accounts or other means. By the end of 2014 production of a range of materials was nearing completion in response to questions that third party payers had regarding coverage of expanded pharmacy services in private plans; a communications plan is under development.

Successful Court Ruling on Interim Federal Health Program

CPhA led national health associations to oppose the federal government's unilateral cuts to the Interim Federal Health Program, including pharmaceutical coverage. In October 2014 we were very pleased when a Federal Court made a final ruling that the cuts were inhumane and ordered the government to reinstate coverage for refugee claimants.

Council of the Federation and the Health Care Innovation Working Group (HCIWG)

In response to a directive from the Council of the Federation, CPhA was a key part of a new working group established by the HCIWG to examine ways that pharmacists could be more fully utilized in a team-based environment. Throughout 2014 CPhA worked with individual pharmacists and the working group to identify leading-edge examples of pharmacist involvement in team-based care. These examples were assembled into a report for Health Ministers in December 2014 and were presented at a special summit in February 2015.

Non-Insured Health Benefits Program (NIHB)

In 2014 CPhA took the lead in bringing together a group of national health associations and provincial pharmacist associations to liaise with the Assembly of First Nations (AFN) on a joint objective of reforming the NIHB. These efforts were bolstered when the federal Health Minister announced an official review of the entire program. This review will begin in earnest in 2015. We continue to engage with the AFN in order to ensure that concerns of health providers with the administration and operation of NIHB, including pharmacists, are heard. ■



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SAFETY, SECURITY AND INTEGRITY

CPhA is protecting the safety, security and integrity of the medication system through the development of and participation in medication safety and quality improvement initiatives

Medication safety is a critical component of a sustainable health care system. CPhA works closely with governments and stakeholders to offer expert advice, helping ensure that Canadians are protected.

Pharmacy Claims Standard (PCS)

CPhA's Pharmacy Claims Standard is used to adjudicate more than 500 million claims annually for both prescriptions and government-funded professional services. The pharmacy landscape has grown exponentially since the PCS was introduced over 20 years ago, and increasing drug costs and new pharmacist services have resulted in challenges with the standard. In 2014, CPhA began to assess the use of the PCS and the needs of pharmacists. We continue to work with our stakeholders to develop a renewed Claims Standard to meet the needs of pharmacy and the industry for years to come.

Medicinal Marijuana (MM) Regulations

In June 2014 the federal government introduced new regulations regarding the prescription, distribution and procurement of medicinal marijuana. CPhA had opposed

earlier suggestions that pharmacists be allowed to dispense MM, citing the lack of clinical evidence on health outcomes and safety considerations associated with its presence in pharmacies. CPhA's concerns were heard and the final regulations did not allow for pharmacists to dispense MM.

Drug Shortages

CPhA continued to make the case for government and other stakeholders to address drug shortages. In 2014 the federal government launched a consultation on the drugshortages.ca website. As a result of this consultation, the Minister of Health announced in February 2015 that reporting into the site would be mandatory for Canadian pharmaceutical companies and that an independent third party operator for the site would be established. CPhA is a member of the Multi-Stakeholder Steering Committee on Drug Shortages, which continues to work with governments and stakeholders to address these issues.

Vanessa's Law is Passed

The *Protecting Canadians from Unsafe Drugs Act*, or Vanessa's

Law, was passed in December 2014. This bill provides the Minister of Health with powers to recall pharmaceutical products deemed unsafe, mandates that health care institutions report adverse drug reactions and increases collection of post-market safety information. CPhA spoke before Parliamentary Committees twice in favour of the legislation. Other CPhA activities regarding medication safety issues included participation in the Senate Social Affairs, Science, and Technology Committee's roundtable on prescription pharmaceuticals in Canada and presentations to the Committee on the nature of unintended consequences in the use of prescription pharmaceuticals.

National Patient Safety Consortium

CPhA is a member of the Canadian Patient Safety Institute. In 2014 CPhA represented pharmacy at several summits on patient safety, including one focused on medication safety. As part of the National Patient Safety Consortium, CPhA is working with over 40 health care organizations to advance the Integrated Patient Safety Action Plan, which will guide collective efforts to reduce harm in Canadian health care. ■



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EDUCATION

CPhA is supporting pharmacists in providing medication management, health promotion and disease prevention services

To offer expanded services to their patients, pharmacists need to be knowledgeable and confident with the skills required to offer those services. In 2014 CPhA became the first Canadian provider of pharmacy education to earn the status of Accredited with Commendation in Leadership in Continuing Pharmacy Education from the Canadian Council on Continuing Education in Pharmacy. Through our award-winning CE programs, CPhA granted 42,334 CEUs to pharmacists in 2014.

Lab Tests

Lab Tests—Ordering, Monitoring and Interpreting Laboratory Tests to Optimize Medication Management is the first national CE program to help pharmacists develop the skills and confidence to incorporate lab values into practice. The 12.75-CEU online certificate-level program was successfully launched in March, with 1000 pharmacist registrants from across Canada by the end of 2014. As provinces implement electronic health records,

including access to lab data, and scope of practice expands to include ordering lab tests, this course is helping pharmacists make better decisions for patient care.

Medication Review Services

Originally developed for Shoppers Drug Mart to train its pharmacists to provide high quality medication review services in their community pharmacies, Medication Review Services was reviewed, updated and launched to all community pharmacists in September. The 8-CEU online program is applicable in all provinces and covers all aspects of a medication review service, including identifying and gathering information, approaches to identifying drug therapy problems, developing and implementing care plans, collaborating with physicians, documentation and follow-up. More than 470 pharmacists took this course in 2014 and 98% of participants said that they feel that the quality of their services will improve as a result.

ADAPT Patient Care Skills Development Program

ADAPT helps pharmacists transform their ability to manage their patients' medication therapy. This 100-CEU certificate-level program increases pharmacists' confidence and experience integrating new patient care skills, processes and tools into everyday practice. In 2014, 130 pharmacists registered for the 20-week long course, bringing the total number of pharmacists who have ADAPTEd to 600. According to the latest research conducted by the Bruyère Research Institute and CT Lamont Primary Health Care Research Centre, more than 86% of ADAPT graduates surveyed agreed that their confidence in patient care and collaborative skills improved and that they were more efficient and effective at providing outcomes-focused patient care. Further, 40% of respondents reported billing more for services.



Guest speaker Michael "Pinball" Clemons

ADAPT and the College of Pharmacists of British Columbia (CPBC)

The CPBC renewed their commitment to the ADAPT program by extending their \$1000 rebate to all BC pharmacists who completed the ADAPT program in 2014. A total of 59 pharmacists took advantage of this rebate.

ADAPT in the US

CPhA partnered with the American Pharmacists Association (APhA) to offer ADAPT to pharmacists in the United States. The program is being revised for a US audience to align with advanced scope of practice and new payment models. The new program was launched at the APhA conference in San Diego in March 2015.

Diabetes Strategy for Pharmacists: CANRISK

Pharmacists play a key role in chronic disease prevention and are ideally positioned to identify Canadians at risk of diabetes. Reviewed and relaunched in September, the Using the CANRISK: Diabetes Risk Questionnaire in Your Community Pharmacy program is a 3-CEU online course that helps pharmacists implement a diabetes screening program in the community pharmacy. A variety of supplemental resources, including the CANRISK questionnaire in 13 languages, webinar recording, user guide

for pharmacists and patient information, are available to help pharmacists provide chronic disease prevention and management services.

Quit Using and Inhaling Tobacco (QUIT)

Many pharmacists across Canada can now offer enhanced smoking cessation services to their patients, including prescribing medications and providing counselling services. CPhA's QUIT program helps enhance pharmacists' confidence and ability to provide these services. QUIT was completely revised and updated in 2014 to include information on e-cigarettes, new pharmacotherapy data, provincial updates and more. The College of Pharmacists of Manitoba has recognized QUIT as an approved program required for obtaining the authority to prescribe smoking cessation therapies. Over 120 Manitoba pharmacists took the QUIT program in 2014.

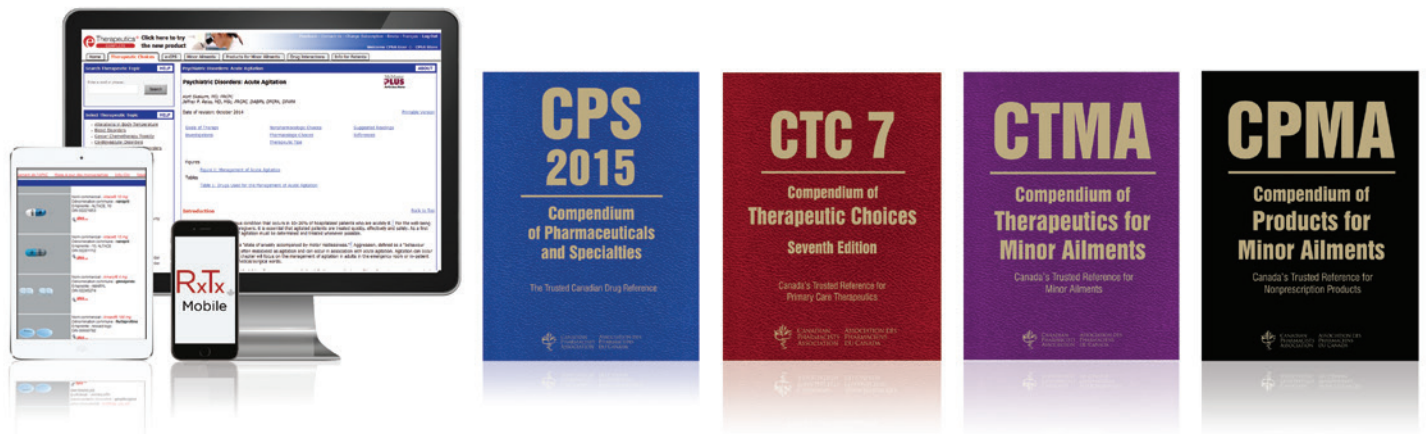
Canadian Pharmacists Conference 2014

The Canadian Pharmacists Conference 2014 was held in Saskatoon, SK, May 31-June 3. For the first time, CPhA partnered to host the conference with the Pharmacists' Association of Saskatchewan (PAS) and the Association of Faculties of Pharmacy of Canada (AFPC). The conference was a huge, collaborative success as we welcomed 715 delegates, a 31%

increase over 2013, for three days of building networks, learning new skills and sharing information. Opening keynote speaker Michael "Pinball" Clemons kicked off the conference with inspiring messages about everyday heroes and the conference came to a close with an emotional address by former Chief Public Health Officer of Canada, Dr. David Butler-Jones, who shared his personal story of life after stroke. We continued to showcase exciting pharmacy practice research from Canada and around the world with 91 pharmacy practice research posters and 20 oral presentations rounding out the research portion of the conference.

Pharmacy Practice Research

In 2014 the Canadian Pharmacy Practice Research Group (CPPRG) hosted webinars on minor ailments, conducting and translating OPEN research and prescribing across practice areas in Alberta. CPhA remained committed to highlighting the latest global pharmacy practice research throughout the year with the monthly e-newsletter Live Links; while The Translator, a newsletter summarizing key Canadian research articles with health policy implications, covered topics including pain management and hypertension management by pharmacists. The Translator was supported by an unrestricted educational grant by Pfizer Canada. ■



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DRUG & THERAPEUTIC INFORMATION

CPhA is the trusted source of education, information, tools and resources to support therapeutic decision making and optimal drug therapy outcomes

We're constantly updating and improving our products to ensure pharmacists and other health care providers have point-of-care access to the answers they need to help make the best decisions for patients. We also help pharmacists turn knowledge into practice through the *Canadian Pharmacists Journal*, our annual conference and pharmacy practice research activities.

Trusted library of drug and therapeutic information

CPhA's library of therapeutic and drug information underwent significant changes in 2014, as we renewed efforts to ensure Canadian health care professionals have consistent access to the information they need, when and where they need it.

Current and convenient

New purchase options were introduced for all CPhA content in 2014, allowing customers to purchase the information they need in the format that best suits their practices. CPhA publications can be purchased in print-only, e-suite or all-access options.

Compendium of Pharmaceuticals and Specialties (CPS)

CPS is the Canadian standard for drug monographs. The 2014 edition contained more than 2000 product monographs for drugs, vaccines and natural health products, including over 110 new products for the Canadian market and 151 monographs written by CPhA's expert editorial staff. The French edition was printed as a two-volume set and a total of 6000 English and 1400 French copies came off the presses in February and March.

Compendium of Therapeutic Choices (CTC)

Featuring practical, bottom-line clinical information on more than 200 common medical conditions, the seventh edition of the *Compendium of Therapeutic Choices* (formerly *Therapeutic Choices*) was published in August. Completely revised and updated, CTC7 includes three new chapters: Obsessive-compulsive Disorder, Post-traumatic Stress Disorder and Menorrhagia.

Minor Ailments Publications

In 2014, CPhA rebranded and published the *Compendium of Therapeutics for Minor Ailments* (CTMA) (formerly *Therapeutic Choices for Minor Ailments*) and the *Compendium of Products for Minor Ailments* (CPMA) (formerly *Products for Minor Ailments*) to introduce a common look and feel across all our drug and therapeutic publications.

RxTx Mobile

Mobile access to CPS and CTC content was revamped and rebranded RxTx Mobile. Including the monographs from CPS and the drug tables from CTC, RxTx Mobile focuses on providing health care professionals with on-the-spot access to concise and essential drug therapy information for over 2200 drug products.

Partnership with the Canadian Medical Association (CMA)

CPhA worked with the Canadian Medical Association to put drug and therapeutic information directly into the hands of Canadian physicians with subscriptions to the new RxTx Mobile. Initial uptake and feedback was very positive and we'll continue to enhance this partnership moving forward.

***Canadian Pharmacists Journal* (CPJ)**

Top papers of 2014 included a systematic review of remunerated pharmacy clinical care services, a practice tool for the new oral anticoagulants and managing chronic diseases in the frail elderly. Dr. Derek Jorgenson and colleagues won the CPJ Best Paper Award for their 2013 article, "Guidelines for pharmacists integrating into primary care teams." CPJ exhibited at the CPhA conference with Editor-in-Chief Dr. Ross Tsuyuki and Cameron Shannon from SAGE. Dr. Norm Campbell was the CPJ speaker at the conference, and gave a well-attended talk on the role pharmacists can play in hypertension. CPJ collaborated with several organizations throughout the year, including

CMAJ and Canadian Family Physician (co-publishing a series of case reports), the Canadian Rheumatology Association (published pharmacist-specific rheumatoid arthritis guidelines), the Parkinson's Society (published pharmacist-specific Parkinson's disease guidelines) and Hypertension Canada.

e-Therapeutics Highlights CE

With content from e-Therapeutics+ Complete, e-Therapeutics Highlights CE keeps pharmacists up to date with the latest evidence-based information. This year we worked with CPBC to provide their members with subscriptions to both the e-product and the weekly highlights emails, giving them the opportunity to earn up to 13 CEUs per year. ■

THE BOTTOM LINE

CPhA finished 2014 with a surplus of \$1,615,000. This result was driven by a \$2,124,000 decrease in expenses in 2014 vs. 2013.

Printing and distribution costs were lower by \$2,049,000 as we accelerated the transition of print CPS to electronic formats. Directors, executive and committees costs were lower by \$245,000 as costs related to our new governance were much higher in 2013. Technology costs were lower as we had significant savings related to the tendering of some large outsourcing contracts. Offsetting some of these savings was an increase in Professional Fees and Administration charges, which were higher by \$172,000 due to a write-off in accounts receivable. Salaries, benefits and professional development were higher by \$144,000 due to new positions that started in 2014 and the full year impact of new positions hired in 2013.

Total revenue for 2014 decreased from 2013 by \$686,000 as a result of the following:

- Advertising revenue was lower by \$378,000 due to a deliberate decision to no longer offer advertising in our CPS.
- Participation revenue was lower by \$367,000 as we had fewer monographs submitted.
- Sponsorship grants and programs were lower by \$118,000; however, these are predominantly funded by external programs and are mostly offset with lower expenses.
- Building and investment incomes were lower than 2013 by \$165,000 as the overall markets had lower returns in 2014 versus 2013.

The above amounts were offset somewhat by sales of our print and electronic products being higher than 2013 by \$255,000 and our membership and conference revenues being higher than 2013 by \$72,000.

Overall, at the end of 2014, CPhA remains in a solid financial position with a record net asset balance of \$10,949,000. ■

SUMMARY FINANCIAL STATEMENTS OF Canadian Pharmacists Association

Year ended December 31, 2014

REPORT OF THE INDEPENDENT AUDITORS ON THE SUMMARY FINANCIAL STATEMENTS

To the Members of the Canadian Pharmacists Association

The accompanying summary financial statements of the Canadian Pharmacists Association, which comprise the summary statement of financial position as at December 31, 2014, the summary statement of operations and changes in net assets for the year then ended, and related notes, are derived from the audited financial statements prepared in accordance with Canadian accounting standards for not-for-profit organizations, of the Canadian Pharmacists Association as at and for the year ended December 31, 2014.

We expressed an unmodified audit opinion on those financial statements in our report dated April 15, 2015. The summary financial statements do not contain all the disclosures required by the Canadian accounting standards for not-for-profit organizations applied in the preparation of the audited financial statements of the Canadian Pharmacists Association. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of the Canadian Pharmacists Association.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in note 1.

Auditors' Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of the Canadian Pharmacists Association as at and for the year ended December 31, 2014 are a fair summary of those financial statements, in accordance with the basis described in note 1.

The logo for KPMG LLP, featuring the letters 'KPMG' in a bold, sans-serif font, followed by 'LLP' in a smaller, similar font. A horizontal line is drawn underneath the text.

Chartered Professional Accountants, Licensed Public Accountants
April 15, 2015
Ottawa, Canada

SUMMARY STATEMENT OF FINANCIAL POSITION

Canadian Pharmacists Association

December 31, 2014, with comparative information for 2013

	2014	2013
Assets		
Current assets:		
Cash and cash equivalents	\$ 7,537,631	\$ 5,570,109
Accounts receivable	1,394,026	822,657
Inventory	60,974	49,975
Prepaid expenses	294,457	274,003
	9,287,088	6,716,744
Investments	3,807,057	5,253,809
Tangible capital and intangible assets	5,660,145	5,772,324
	\$ 18,754,290	\$ 17,742,877
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 1,101,044	\$ 1,309,685
Deferred revenue	6,703,906	7,095,851
Current portion of obligation under capital leases	—	2,953
	7,804,950	8,408,489
Net assets:		
Unrestricted	1,372,195	1,161,725
Internally restricted	3,917,000	2,403,292
Investment in tangible capital and intangible assets	5,660,145	5,769,371
	10,949,340	9,334,388
	\$ 18,754,290	\$ 17,742,877

See accompanying notes to summary financial statements.

SUMMARY STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS

Canadian Pharmacists Association

Year ended December 31, 2014, with comparative information for 2013

	2014	2013
Revenue:		
Sales	\$ 7,881,797	\$ 7,627,086
Participation and advertising	4,668,973	5,413,917
Membership dues and conference	1,062,270	990,212
Building and investment	621,125	785,811
Sponsorship grants and programs	513,939	631,611
Continuing professional development (CPD)	522,958	507,927
	15,271,062	15,956,564
Expenses:		
Salaries, benefits and professional development	6,892,865	6,749,016
Printing and distribution	1,474,239	3,523,456
Technology	1,216,704	1,420,843
Professional fees and administration	976,915	804,728
Directors, executive and committees	436,566	682,038
Marketing and business development	590,633	622,248
Membership services and conference	721,797	617,482
Research and practice innovation	331,280	496,353
Amortization of tangible capital and intangible assets	508,039	410,559
Continuing professional development (CPD)	330,776	300,414
Government relations and liaison activities	158,028	134,227
Organizational development	18,268	18,734
	13,656,110	15,780,098
Excess of revenue over expenses	1,614,952	176,466
Net assets, beginning of year	9,334,388	9,157,922
Net assets, end of year	\$ 10,949,340	\$ 9,334,388

See accompanying notes to summary financial statements.

NOTES TO SUMMARY FINANCIAL STATEMENTS

Canadian Pharmacists Association

Year ended December 31, 2014

The Canadian Pharmacists Association (the “Association”) was incorporated under the Canada Corporations Act on September 16, 1924. Effective July 1, 2014, the Association continued their articles of incorporation from the *Canada Corporations Act* to the *Canada Not-for-Profit Act*.

The Association serves its members by establishing the pharmacist as the health professional whose practice, based on unique knowledge and skills, ensures optimal drug use to improve patient outcome through pharmaceutical care. The Association is a non-profit organization, under subsection 149(1)(l) of the *Income Tax Act (Canada)* and, as such, is not subject to income taxes.

1. Summary financial statements:

The summary financial statements are derived from the complete audited financial statements, prepared in accordance with Canadian accounting standards for not-for-profit organizations, as at and for the year ended December 31, 2014.

The preparation of these summary financial statements requires management to determine the information that needs to be reflected in the summary financial statements so that they are consistent, in all material respects, with or represent a fair summary of the audited financial statements.

These summary financial statements have been prepared by management using the following criteria:

- (a) whether information in the summary financial statements is in agreement with the related information in the complete audited financial statements; and
- (b) whether, in all material respects, the summary financial statements contain the information necessary to avoid distorting or obscuring matters disclosed in the related complete audited financial statements, including the notes thereto.

Management determined that the statement of changes in net assets and the statement of cash flows do not provide additional useful information and as such has not included them as part of the summary financial statements.

The complete audited financial statements of the Canadian Pharmacists Association are available upon request by contacting the Association.

2014 AWARD WINNERS



John Papastergiou
Canadian Pharmacist of the Year



Jeff Poston
CPhA Honorary Life
Membership Award



Nafisa Merali
CPhA Patient Care
Achievement Award
for Health Promotion
(sponsored by Teva Canada
Limited)



Cecilia Reyes
CPhA International
Leadership Award
(sponsored by GenMed, A
Division of Pfizer Canada)



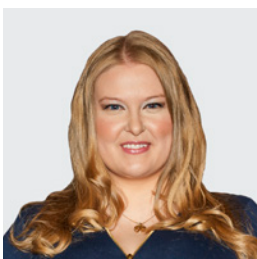
Bryan Gray
CPhA New Practitioner
Award



Jennifer Gibson
CPhA Patient Care
Achievement Award for
Specialty Practice



Derek Jorgenson
Canadian Pharmacists
Journal (CPJ) Best Paper
of the Year Award



Tara Maltman-Just
CPhA Patient Care
Achievement Award for
Innovation
(sponsored by Green Shield
Canada Foundation in honour
of Vernon Chiles)



Scott Wallace Campbell
Dean George A. Burbidge
Award

2014 AWARD WINNERS

CPhA Centennial Leadership Award

(sponsored by Scotiabank)



Front row, l-r:

- Gabrielle Ouellet, Université Laval
- François-Xavier Houde, Université de Montréal
- Jaclyn Deonarine, University of Manitoba
- Seann Seto, University of Toronto
- Hannah Moore, University of Alberta

Back row, l-r:

- Janice Coleman, Memorial University
- Sumaira Hasan, University of Waterloo
- Ellen Boyd, Dalhousie University
- Laura Almas, University of Saskatchewan
- Renée Dagenais, University of British Columbia

CPhA BOARD OF DIRECTORS

(As of January 1, 2014)

CPhA's Board of Directors transitioned throughout 2014 as our old Board retired and new representatives from our Organizational Members were elected. Sincere thanks to all the dedicated individuals who served as members of the CPhA Board of Directors in 2014. Your vision and leadership have been crucial to the early success of the new CPhA.



Sherry Peister
President



Jane Farnham
President-Elect



Paula MacNeil
Past President



Miguel Lopez-Dee
Vice President & British
Columbia and Yukon



Betty Hutt
Vice President & Prince
Edward Island



Janet Bradshaw
Vice President &
Saskatchewan



Kerry Mansell
Academia



Richard Jones
Hospital Pharmacists



Taj Dhinsa
New Practitioners



Michael Kani
Pharmacy Students



Aryn Kanjee
Alberta, Northwest
Territories & Nunavut



Kristine Petrasko
Manitoba



Anne Marie Picone Ford
New Brunswick



Brenda Bursey
Newfoundland and
Labrador



Susan Beresford
Nova Scotia



Iris Krawchenko
Ontario



Peter Zawadzki
Ontario



Denis Villeneuve
Québec

CPhA BOARD OF DIRECTORS

(As of December 31, 2014)



Jane Farnham
Chair



Sherry Peister
Past Chair



Paula MacNeil
Individual Director



Jim Armour
Individual Director



Brian Woods
Individual Director



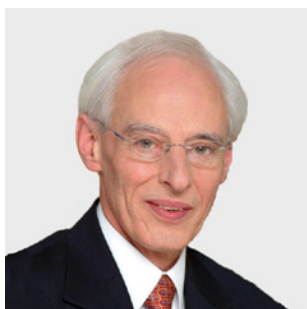
Blake Hanna
Individual Director



Neil Cameron
Alberta Pharmacists'
Association



David Edwards
Association of Faculties of
Pharmacy of Canada



Normand Cadieux
Association québécoise
des pharmaciens
propriétaires



Shakeel Bhatti
British Columbia Pharmacy
Association



Alistair Bursey
New Brunswick
Pharmacists' Association



Carlo Berardi
Ontario Pharmacists
Association



Keith Bailey
Pharmacists' Association
of Newfoundland and
Labrador



Paul Melnyk
Pharmacists' Association
of Saskatchewan



Barret Procyshyn
Pharmacists Manitoba



Rose Dipchand
Pharmacy Association of
Nova Scotia



Shawn Callaghan
Prince Edward Island
Pharmacists Association

CPhA SENIOR STAFF

Chief Executive Officer
Perry Eisenschmid

Vice President, Advocacy & Public Affairs
Glen Doucet

Vice President, Corporate Services
Rick Leach

Vice President, Information Technology
Ajit Ghai

Vice President, Marketing, Sales and e-Commerce
Steven Lugtigheid

Vice President, Professional & Membership Affairs
Janet Cooper

Manager, Executive and Board Affairs
Helen Loverdos



From left to right: Steven Lugtigheid, Glen Doucet, Janet Cooper, Perry Eisenschmid, Helen Loverdos, Rick Leach and Ajit Ghai.

Canadian Pharmacists Association

1785 Alta Vista Drive, Ottawa, ON K1G 3Y6

 1-800-917-9489  613-523-0445  service@pharmacists.ca

www.pharmacists.ca



CANADIAN
PHARMACISTS
ASSOCIATION

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DU CANADA