ROLE OF PHARMACISTS

Blueprint for Pharmacy
The Blueprint for Pharmacy Steering Committee (BPSC) met and agreed to continue in its current form for another three years. The BPSC approved 10 top priorities for action, comprising existing and new work.

One priority is the national public relations campaign to communicate the value of the pharmacist to Canadians. CPhA is leading this project, supported by a working group with representatives from the Canadian Association of Chain Drug Stores (CACDS), Canadian Association of Pharmacy Student and Interns (CAPSI), British Columbia Pharmacy Association (BCPhA), Ontario Pharmacists’ Association (OPA), Pharmacy Association of Nova Scotia (PANS) and the University of Saskatchewan. Phase 1 is complete and included pharmacy stakeholder interviews with national and provincial organizations, a survey of approximately 1500 Canadians and an online environmental scan. This work enabled the working group to better understand existing communication efforts, Canadians’ perception of pharmacists, and public and professional attitudes towards pharmacists and the profession. Phase 2, developing the campaign strategy and messaging, is underway.

BPSC established two new sub-committees to explore a separate dedicated communications campaign to promote Blueprint and to guide a project using Shoppers Drug Mart’s $250,000 contribution. The Blueprint for Pharmacy National Coordinating Office is also developing a guide to pharmacist-patient interaction, and updating its policy framework knowledge translation resources. Both will be available on www.blueprintforpharmacy.ca. For detailed updates on Blueprint activities, please see the monthly stakeholder report Blueprint in Motion available here.

Continuing Professional Development
CPhA continues to expand its continuing professional development (CPD) in areas that reflect needs resulting from expanding scope of practice and new payment models for medication management services. CPhA’s current focus is developing a national, competency-based, online, multilevel program on ordering and interpreting laboratory values. A needs assessment survey is closing June 30.

Beginning in July, the Canadian Council on Continuing Education in Pharmacy (CCCEP) will begin enforcing its new standards regarding continuing education (CE) certificate programs. Only programs that involve applied, work-based learning activities and assess the learner’s performance, proficiency or mastery of the learning objectives will now be able to award a certificate. CPhA’s ADAPT program already meets and exceeds these standards. ADAPT participants can earn a Certificate in Patient Care Skills in addition to all the CEUs they have earned.
ADAPT
Registration for the August-December 2012 ADAPT program closes July 15. Online registration for the October 2012-March 2013 program will remain open until September 15. Visit the main ADAPT portal for more information. Please contact hmohr@pharmacists.ca to arrange a virtual tour of the program, or discuss group discount registrations.

Another successful ADAPT session wrapped up in May with more than 50 pharmacists from across the country completing all requirements and moving on to the voluntary certificate assessment phase. CPhA congratulates all graduates, and extends its thanks to the online moderating team.

ADAPT was honoured with a 2012 Canadian Association of University Continuing Education (CAUCE) Award for Program Excellence! CAUCE hosts an annual competition to foster innovation and recognize outstanding achievement in university continuing education. ADAPT received top prize in the category of non-credit programming over 48 hours. For more information, read the News Release.

Sixteen pharmacists from across Canada participated in the latest ADAPT online moderator training program. Adding to the pool of trained individuals that possess these specific skills significantly increases CPhA’s capacity to deliver the ADAPT program. Please visit our moderator development page for more information.

More than 30 pharmacists participated in an ADAPT Medication Assessment workshop at the CPhA conference in Whistler, BC. Drawing content from ADAPT Module 2, facilitator and author Natalie Kennie presented key components of carrying out step-wise medication assessments. In another session, Natalie was joined by ADAPT participants Tara Maltman-Just (MB), Mary Nelson (ON) and Terri Lynn Erikson (AB) who shared their stories of how ADAPT has transformed their practice. Our thanks to all our speakers at these sessions.

Diabetes Strategy for Pharmacists
The latest round of funding from the Public Health Agency of Canada (PHAC), focusing on prevention, screening, early detection and related diseases, supports continued Diabetes Strategy for Pharmacists (DSP) activities into 2013. The main objectives for this new funding include greater partnerships with stakeholders, creating the Diabetes Strategy for Pharmacists-Network (DSP-N), and developing more tools for cardiovascular disease and other chronic conditions related to diabetes care.

Environics Communications undertook research to gage a better understanding of how relevant health care professionals and the general public view pharmacists when it comes to diabetes and cardiovascular disease management. The final analysis of this data was completed and will help shape the direction of the DSP moving forward. After an extensive review process, the DSP online continuing education course, The How-to of Diabetes Management… A Prescription for Pharmacists, was updated and CCCEP-reaccredited for an additional three years (12 CEUs).

At PHAC’s request, CPhA submitted a project amendment proposal to include an evaluation and marketing of their CANRISK diabetes risk questionnaire to pharmacists, and to partner with PHAC to develop an online case-based continuing education module built around the CANRISK tool. In addition to English and French, CPhA will work with PHAC to make CANRISK available in 11 additional languages.

Knowledge is the Best Medicine
For many years, CPhA has partnered with Rx&D and the Canadian Medical Association (CMA) on the popular Knowledge is the Best Medicine program (KiBM). This program has been expanded with additional partners (Canadian Nurses Association, Victoria Order of Nurses, Institute for Safe Medication Practices – Canada and Best Medicines Coalition). The new website, www.knowledgeisthebestmedicine.org, and MyMedRec, a unique
mobile app for iPhone/iPad, include extensive information and medication tracking forms. These tools will be particularly useful for pharmacists performing medication reviews.

**PharmaCheck**
New Brunswick first used CPhA’s [PharmaCheck program](#) in a pilot test and has now launched [NB PharmaCheck](#) as part of a funded medication review service. PharmaCheck is also the basis for Nova Scotia’s [Basic Med Review](#) program launched in 2011 (reimbursement for both services is $52.50). PEI has also adapted the program; although funding is not yet in place, the tools are being used as part of advocacy with government to fund expanded services. We would be pleased to partner with other provinces to adapt PharmaCheck for a medication review service.

**Canadian Pharmacist Journal (CPJ)**
CPJ passed the last stage of the evaluation process for acceptance into PubMed Central, a free digital database of scientific literature in the biomedical and life sciences developed by the US National Library of Medicine. Our content will appear in the PubMed Central database over the next few weeks.

**ADVOCACY**

**e-Pharmacy/e-Health**
CPhA and CACDS co-chair the new Pharmacy e-Health Action Committee (PeHAC). As part of the 2012-2013 workplan three working groups were established to define e-prescribing and revise the 2009 e-prescribing paper; identify the critical path for successfully implementing e-prescribing, and harmonize drug information systems.

CPhA also co-chairs with CMA a joint e-prescribing working group of six practising physicians and pharmacists. Canada Health Infoway and the e-health lead from Saskatchewan participate as guests. An action plan was developed on creating a vision for e-prescribing that has five complementary parts: advocacy and engagement; policy and regulatory; research; operational and technical. A position statement from both organizations will be developed to include our joint position, principles and benefits.

**Drug Shortages**
In the wake of the unprecedented level of political and media scrutiny following the shutdown of the Sandoz plant in Boucherville, QC, CPhA appeared before the House of Commons Standing Committee on Health (HESA) to discuss drug shortages. HESA has now released its report on [Drug Supply in Canada](#), responding to the unanimous motion passed in the House of Commons in March. In June, CPhA was invited by a group of NDP Members of Parliament to discuss the HESA report and recommendations on how to move forward.

The Drug Shortages Working Group, which CPhA chairs, partnered with GS1 Canada to convene a Stakeholders Workshop to bring stakeholders together to discuss how to implement a permanent national drug shortages reporting system. The workshop looked at the existing monitoring system that the Working Group launched in December ([www.drugshortages.ca](http://www.drugshortages.ca)), and identified improvements, governance and additional desirable functionalities in a permanent system (such as therapeutic alternative information).

**Council of the Federation and Health Care Reform**
There has been a great deal of activity with the Council of the Federation’s Innovation Task Force. CPhA has worked closely with CNA, CMA, Health Action Lobby (HEAL), and through its contacts with provincial pharmacy associations to learn about the process and to intervene now, and beyond the first phase July deadline. The Task Force on Innovation established three separate Working Groups: scope of practice, Clinical Practice Guidelines (CPGs) and health human resources. Under both scope of practice and CPGs, specific models are being examined. The Council will consider specific recommendations in each area for a pan-Canadian, consistent
deployment. If successful, this process may be replicated in the future to tackle more complex areas of health reform. CPhA’s efforts have focused on ensuring the voice of pharmacists is recognized and at the table when issues relevant to pharmacists are discussed. CPhA provided a submission to the Innovation Task Force recommending areas in which pharmacists could play a role with CPGs and particular models of care.

**Generic Pricing Reform**
As part of the minority Liberal Ontario’s government deal with the NDP to pass its 2012 budget, the government agreed to lower the price of the top 10 generic drugs in Ontario from 25% of the brand name equivalent to 20%. This raised additional fears of further price cuts in other provinces. In response, CPhA wrote a letter to Ontario Premier Dalton McGuinty suggesting the government follow the advice of its own Drummond Report, and extend scope of services to reduce overall health care costs. With other provinces deliberating generic drug policies, CPhA has communicated to other provincial pharmacy organizations our willingness to help in similar situations.

**INFORMATION PROVIDER**

**e-Therapeutics**
The minor ailments content from CPhA’s publications *Patient Self-Care (PSC)* and the *Compendium of Self-Care Products (CSCP)* is now online, available as e-Therapeutics for Minor Ailments or integrated with the *CPS, Therapeutic Choices* and Lexi-Interact™ content in e-Therapeutics’ Complete. Our *Therapeutic Choices* content is now available online in French as part of e-Thérapeutique™. Users of e-Therapeutics™ can now toggle between English and French in the drug and therapeutic information sections of the product.

**Mobile Products**
The new CPS Monographs mobile app was launched at our national conference, as part of CPS Essentials, available for iPad, iPhone and Android devices. A French version will be available in the fall. CPhA members can purchase this at a 50% discount – only $89.99. Over 9000 users who downloaded the Drugs & Conditions app have been invited to try CPS Monographs. Visit the CPhA Store for more information on these electronic drug and therapeutic information resources.

**PAYMENT FOR SERVICES**

**Third-Party Payers Task Force**
The two co-chairs of the Third Party Payers Task Force (Peter Zawadzki, CPhA; Sanjiv Maindiratta, CACDS), as well as CACDS and CPhA staff discussed next steps. It was agreed that the Task Force needs to hear directly from third-party payers to better understand their needs and challenges regarding pharmacy. As a result, interview and survey questions will be devised in order to gain a better understanding of these needs, particularly regarding gaining administrative efficiencies and extending coverage for pharmacist-related services.

**Federal Budget 2012**
The 2012 federal budget released in March contained a significant win for CPhA. After two years of working with CACDS, provincial pharmacy associations and Finance Canada, CPhA was able to convince the federal government to amend the *Excise Tax Act* to include pharmacists as a recognized “health care practitioner,” thereby exempting all non-dispensing professional pharmacy fees from GST/HST (dispensing fees are already zero-rated). This change became effective March 30. This announcement was also noteworthy in that the budget contained very few good news announcements for any sector — pharmacists were one of the few stakeholders who were able to claim a win.
MEMBERSHIP

New Membership Pricing
In response to pharmacists’ needs and preferences, CPhA is now offering membership at the affordable rate of $199 that includes a number of new benefits to support daily practice. Member pharmacists can now earn up to 13 CEUs by email each year with our new e-Therapeutics Highlights CE program. Members receive a weekly highlight from e-Therapeutics+ in their inbox, review the content, answer a learning assessment questionnaire, submit and earn 0.25 CEUs with each short lesson. Also, members may purchase any of CPhA’s print, electronic or mobile publications at a significant 50% discount when they renew or join.

Congratulations to 2012 Pharmacy Grads
Once again, CPhA is welcoming the pharmacy graduating class of 2012 to the profession with a complimentary one-year New Practitioner membership, including a one-year subscription to e-CPS and a one-year subscription to Drugs and Conditions in the CPS Essentials mobile app. Approximately 1100 students will graduate this year.

Conference 2012
More than 500 attendees travelled to Whistler, BC, to attend CPhA’s 100th conference and tradeshow June 1-4. Amid the stunning backdrop of Whistler village, delegates engaged in continuing professional development on a broad range of clinical and therapeutic topics, learned more about the issues and events shaping pharmacy today, networked with new contacts and old friends from across the country, and shared in the experiences of others.

John Furlong, Chief Executive Officer of the Vancouver 2010 Winter Games, opened the conference with an inspiring keynote address recounting the months leading up to the highly successful Olympic and Paralympic Winter Games. His description of the challenges and solutions were highly relevant to the changing pharmacy environment today.

New this year was the Pharmacy Practice Innovation Showcase, sponsored by Pfizer Canada Inc., featuring ordinary pharmacists who provide extraordinary services to their patients. A presentation from Karen Crisp, Executive Chair of the Pharmacy Guild of New Zealand, offered a glimpse into pharmacy issues in that country and was a another first. Building on feedback from the 2011 conference, two new hands-on workshops were added to the program; Hypertension 2012 and the ADAPT Medication Assessment Workshop received high marks for their relevance to pharmacy practice today.

A session for New Practitioners offered tips and tricks for new pharmacists to become leaders in their pharmacies. The closing debate treated delegates to an informative and entertaining discussion between two Canadian pharmacy opinion leaders, David Blackburn and Ross Tsuyuki, who offered their positions on Barriers to Practice Change – Nature vs. Nurture.

David Gardner received the 2012 Canadian Pharmacist of the Year Award during the CPhA Awards presentation. Third-year student recipients of the Centennial Award enjoyed a two-day program of team-building adventure activities only available in Whistler. Congratulations to David and all other award winners. Following the ceremony, delegates joined 58 exhibitors at the tradeshow which was well attended and received by delegates and exhibitors alike.

Networking is a large part of the CPhA conference experience and this year’s event was no exception, especially Fun Night when about 400 delegates took a 30-minute gondola ride up Whistler mountain for breathtaking views, a delicious meal and entertainment at the peak. At the closing gala the following evening, delegates said farewell to CPhA President Jody Shkrobot and welcomed incoming President, Paula McNeil. Planning is well underway for June 1-4, 2013 in Charlottetown, PEI.