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The Weekly: CPhA's Pharmacy News Update for February 16

From: Canadian Pharmacists Association <advocacy@pharmacists.ca>

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Canadian
Pharmacists
Association
Association des
pharmaciens
du Canada

The Weekly

Bringing the world of pharmacy together

February 16, 2022

CPhA

CPS Full Access: New demo videos available

CPhA's CPS team has developed a series of short videos to demo some of the CPS Full Access features and tools that participants from a survey conducted last year said were the most important to them. The survey results will continue to be used to improve efforts to help the pharmacy community provide better care to their patients. Watch the videos [here](#).

Webinar recording available: SOS Code Orange! Ensuring business continuity during COVID-19

Every phase of the COVID-19 pandemic has brought new challenges for pharmacy professionals and operators. Amidst the latest Omicron wave, it has become even more difficult to juggle personal and family needs with work demands, staffing shortages and business interruptions due to COVID-19. In this COVID Conversations webinar from January 27, our panel of speakers explore creative approaches to maintaining pharmacy operations. The webinar recording can be viewed [here](#).

Pharmacy Appreciation Month: Call for photos

March is just around the corner! You've stepped up to support your patients through thick and thin, and we want to take some time to celebrate you and the incredible work you're doing every day. We'd love to feature you and your pharmacy team in some of our PAM 2022 materials so we can show Canadians even a small piece of your world. Snap a picture of yourself or your pharmacy team in action and email us at socialmedia@pharmacists.ca to participate. Please include the name and location (city and province/territory) of your pharmacy and the full names of any team members in the photo.

Meet Danielle Paes: Canada's inaugural Chief Pharmacist Officer at CPhA

CPhA's first Chief Pharmacist Officer, Dr. Danielle Paes, discusses her vision for the profession of pharmacy, her favourite part about being a pharmacist, and hobbies outside of work [in a Q&A with Canadian Healthcare Network](#).

Pharmacists on the front line

Kristin's Pharmacy focuses on pharmacist-led, patient-centred care

Southampton, Ontario, pharmacist and pharmacy-owner Kristen Watt is leading a model of community practice that prioritizes clinical care and patient experience, [according to U of T News](#). From how the physical pharmacy space is organized to the scope of services provided, Watt is looking ahead to a future in community pharmacy where clinical responsibilities of the pharmacist are further expanded. "We are an office-based community pharmacy," Watt said, explaining how she has re-imagined her pharmacy's space and workflow so that she and her staff pharmacists and students work from clinical office spaces rather than from the dispensary. Pharmacy technicians are primarily responsible for the bulk of medication dispensing processes, allowing pharmacists to focus on their patients' clinical needs and experience. "I became a pharmacist to be a clinical expert in pharmaceutical care. The model we have built here allows us to have all the necessary patient information at our fingertips," she said. "It can be hard to counsel patients from across a counter or at a cash register. This approach is much more efficient and, from my experience, provides a higher level of care."

Grand Falls, NL, pharmacy staff bring clinics to rural towns

Residents of Leading Tickles and Point Leamington were beneficiaries of a decision by the new owner of Grand Falls Drug Store to take her trade outside the walls of her High Street shop with a COVID-19 vaccine clinic for patients, [SaltWire reports](#). "One of our pharmacy assistants, Loudell Rowsell, is from Leading Tickles and she had a list of people from there who wanted an appointment to come up to the pharmacy to get the [COVID-19] vaccine," explained pharmacist-owner Vanessa Power. "She had a pretty big list and we kind of looked at each other and [said], 'too bad we can't go to them.' It was just like a light bulb [moment], and I said, 'we can go to them,'" she continued. A call to the Leading Tickles Mayor determined there was sufficient interest. "The mayor and deputy mayor organized everything and we had at least 150 people," Power said. The activity fits her plans for operating a non-traditional pharmacy. "It's pretty much the reason I wanted to be a pharmacist. I know what my traditional role is in the dispensary, but it

made me appreciate both my roles—a pharmacist and business owner,” she added. “Pharmacists can do so much more and we’re not necessarily utilized in that way all the time. But it’s only a matter of time before some of us prove we can and maybe the government will catch on.”

Provincial/Territorial

Less than half of immunized British Columbians plan to get a COVID-19 booster right away: poll

Less than half of British Columbians who have received 2 doses of a COVID-19 vaccine plan on receiving a booster shot at the first opportunity, according to a new online poll, [Global News reports](#). Of the fully immunized survey respondents, 44% told Ipsos they would get a booster as soon as it’s available. Another 25% said they would get a booster, but not right away, while 18% said they have no plans to get a booster shot at all. The survey of 801 adult residents across the province was conducted on behalf of the BC Pharmacy Association (BCPhA) between January 28 and February 3. “It’s concerning that some people are choosing to wait or not get it at all,” said Jamie Wigston, BCPhA president. “After 6 months, their existing immunization doesn’t provide as much protection as before, as their immunity from the second dose wanes.” The poll found the top reasons for hesitancy were “feeling two shots is enough,” concerns about potential long-term effects and “just wanting to get on with normal life.”

Yukon: Pharmacists’ practice options expand

Given the Yukon’s current state of emergency, the government has issued a ministerial order to expand practice options for pharmacists, [according to the Whitehorse Daily Star](#). These temporary changes mirror provisions that were in place last year, the government said. The provisions help ensure that Yukoners can continue to safely access needed prescriptions during the pandemic and ultimately help to decrease pressures on the health-care system, doctors’ offices and emergency rooms. Under the order, pharmacists can now, at their discretion, do the following: extend prescriptions originally made by physicians more than once when a patient is unable to see their physician; transfer physician prescriptions for controlled drugs to other pharmacists within Canada; and be the original prescriber for minor ailments such as dermatitis, conjunctivitis and cold sores. The temporary regulatory changes also allow pharmacists to extend and deliver physician prescriptions for controlled substances. This change aligns with Health Canada’s temporary exemption for prescriptions of controlled substances during the pandemic.

National

Shortage of blood-test materials leaves hospitals scrambling to treat patients

Canadian hospitals and laboratories say the country is facing an unprecedented shortage of tubes necessary to conduct blood tests—and if the supply chain disruption worsens or continues for an extended period, it could result in treatment delays and challenges to providing patient

care, [the Globe and Mail reports](#). Blood specimen collection tubes, which look like small plastic vials, are used for virtually all blood tests, from management of people with diabetes to a patient's pre-operation bloodwork. It's unclear why blood collection tubes are in short supply, but experts say it's likely a combination of factors, including an increased demand for tests and global supply chain disruptions. Health Canada said that manufacturers and importers must tell the department if blood specimen collection tubes are facing a shortage. This action will help the department understand the details of a potential shortage and work with stakeholders to find solutions as needed.

Green Shield Canada providing \$250,000 donation for University of Toronto's Discovery Pharmacy

Green Shield Canada (GSC) is donating \$250,000 to the University of Toronto's Discovery Pharmacy digital innovation and research hub in an effort to enhance its commitment to the pharmacy community, [according to a news release](#). Based at the Leslie Dan Faculty of Pharmacy, the Discovery Pharmacy is poised to model research, education, and innovation excellence for the pharmacy profession, while giving students hands-on experience as professional pharmacists. "We continue to advocate for the important role that pharmacists play within our health care system, and this will become even more important in an increasingly digital health-oriented environment," said Mark Rolnick, GSC executive vice-president of pharmacy innovation and patient experience. As the Discovery Pharmacy gathers momentum, GSC's initial support is another step towards creating an innovative centre tailor-made for a new era of digitally based pharmaceutical care. "We are so pleased to have GSC give their initial support to the Discovery Pharmacy as a Founding Donor," said Lisa Dolovich, dean of the Leslie Dan Faculty of Pharmacy. "This early support is crucial to helping us move forward as Discovery Pharmacy grows in scope and impact."

International

US: Angry customers, more work and longer hours strain pharmacists

Nearly 2 years into the pandemic, pharmacists and technicians across the nation are under intense strain as their jobs shift from filling prescriptions and counselling patients to administering COVID-19 vaccines and tests, handing out masks and dealing with increasingly angry customers, [the New York Times reports](#). The situation has been exacerbated by a labour shortage that has squeezed most industries and that has resulted in droves of nurses and caretakers leaving their posts in a pandemic that has pushed them to the brink. Large retail pharmacy chains have tried to respond, with some reducing store hours, increasing starting wages, offering more breaks and giving out bonuses to retain employees. But customers have felt the impact, with some experiencing disruptions in vaccine appointments, longer lines to pick up prescriptions, and frustration over securing masks and at-home virus tests. The situation is worrying the pharmacy industry. Scott Knoer, executive vice president and chief executive of the American Pharmacists Association (APhA), said inadequate staffing posed serious health risks by increasing the chances that workers may make mistakes while filling prescriptions or

inoculating patients. A survey released last month from the association found that 74% of respondents said they did not think they had sufficient time to safely perform patient care and clinical duties.

Ireland: New pharmacy school urgently required to stave off impending crisis

Ireland is not training enough pharmacists, which will result in significant health-care problems if not urgently addressed. This [warning was issued](#) by the Irish Pharmacy Union (IPU), which is calling for the establishment of a new school of pharmacy in Ireland. Qualifying as a pharmacist in Ireland requires studying for 5 years to obtain a master's level qualification. Pharmacy courses are offered in just 3 higher education institutes in Ireland. Last year, Ireland trained just 165 pharmacists, which the IPU argues is insufficient to address the increasing demands on the sector. "Ireland has just over 6700 registered pharmacists. Annually we are training just 2.4% of that number. This is simply not enough and is leading to major problems for community pharmacies across the country. This needs to be addressed urgently," IPU President Dermot Twomey said. "At this rate, the sector will soon be unable to cope with retirements, let alone the pressures caused by our growing population that is increasingly older, as well as greater demands on the sector as a whole."

Australia: National Council speaks out against 'pharmacists playing doctors'

A [recently leaked confidential draft report](#) revealed a proposed pilot would see pharmacists in Queensland tasked with diagnosing, independently prescribing, and then managing patients across 23 clinical conditions, including type 2 diabetes, acne, COPD, and asthma. A spokesperson for Queensland Health [told the Australian Journal of Pharmacy](#) it's "working with the Pharmacy Guild of Australia, the Pharmaceutical Society of Australia and other stakeholders to design and implement a pilot of pharmacists working to full scope in North Queensland" and that "the scope of the pilot is exploring an expanded role for community pharmacists across multiple areas, including medication supply and dispensing, prescribing and medication administration." Now the National Council of Primary Care Doctors (NCPCD) has written to the Queensland and federal health ministers "recommending that this pilot be ceased immediately." The council comprises leaders from the Australian Medical Association, Royal Australian College of General Practitioners, Rural Doctors Association of Australia, Australian College of Rural and Remote Medicine, General Practice Supervisors Australia, General Practice Registrars Australia, and Australian Indigenous Doctors' Association. NCPCD Chair Dr. Karen Price said the pilot would result in higher health-care costs and poorer health outcomes for North Queensland patients, putting them "at risk."

In Depth

What is safe supply?

BC's chief coroner renewed a call for access to safe, regulated pharmaceutical alternatives as she reported a record number of overdose deaths from toxic, illicit drugs. "In order to save lives in this public-health emergency, we need to provide people with access to the substances they

need, where and when they need them,” said Lisa Lapointe. Lapointe said the province recorded 2,224 deaths in the past year that were suspected of being the result of poisoned drugs. [The Vancouver Sun spoke with experts](#) to talk about safe supply and what could be on the horizon.

Pfizer’s oral COVID-19 treatment has arrived. So how does it work?

Paxlovid was approved by Health Canada in January for use in people most at risk of severe symptoms of COVID-19. Kelly Grindrod, pharmacist and associate professor at the University of Waterloo’s School of Pharmacy, [explains to CBC](#) how the drug works and who should take it.

Why is Canada’s COVID-19 death rate so much lower than the US?

What started as a trucker-led movement to demand the end of a vaccine mandate has escalated to include all kinds of public health restrictions. But since the pandemic began, Canada has fared far better than the US, despite similar income disparities, territorial divides, and comorbidities, such as obesity and hypertension, as its southern neighbour. There is a staggering difference, for example, in how many more Americans have died because of COVID-19 compared to Canadians, both in absolute numbers and as the ratio of deaths per million inhabitants. [BBC looks at the reasons why](#) Canada’s experience has been different from that of the US.

Worth Repeating

“During my co-op work terms I’ve had patients make comments or question my capabilities, not only because I am a woman, but because of my skin colour. I’ve had a patient continuously question if I was a pharmacy student and discredit my credentials.”—Jocelyn Bonti-Ankomah, University of Waterloo pharmacy student, [shares her experiences](#) and hopes for diversity in health care

This weekly update is compiled by the Canadian Pharmacists Association. Please note that this publication is meant to inform and is not a comprehensive list of information available. Be sure to check with your provincial regulatory authority or advocacy association for province-specific information. While we aim to ensure all information contained in this update is accurate, the situation is evolving rapidly and CPhA does not take responsibility for the content provided by other organizations and sources.

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