

**HOUSE OF COMMONS
STANDING COMMITTEE ON HEALTH**

**Review of the 10-Year Plan to
Strengthen Health Care**

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**CANADIAN
PHARMACISTS
ASSOCIATION**

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PHARMACIENS
DU CANADA**

I) INTRODUCTION – WHO WE ARE

The Canadian Pharmacists Association (CPhA) welcomes this opportunity to present to the Standing Committee on Health during your review of the First Ministers' 10-Year Plan to Strengthen Health Care.

CPhA is the national voluntary organization of pharmacists, committed to providing leadership for the profession of pharmacy and improving the health of Canadians. Established in 1907, our members include pharmacists in all areas of practice: community pharmacies, hospitals, universities, governments and industry. We do not represent pharmacies or the pharmaceutical industry.

The pharmacist is the most accessible and knowledgeable health care professional when it comes to medications. Pharmacists are integral members of the health care team who work collaboratively with patients, prescribers and other health care providers to improve the safety and effectiveness of medication therapy. Pharmacists also play a prominent role in health promotion, disease prevention, and chronic disease management.

However, the role of the pharmacist continues to be underutilized. Pharmacists will make their greatest contribution to the health of Canadians and to the overall accessibility and safety of health services when the full extent of their education and training is utilized.

CPhA has a long history of publishing drug information references, including the *Compendium of Pharmaceuticals and Specialties (CPS)*, *Therapeutic Choices*, and *Patient Self-Care*. In our commitment to promote patient safety, we recently published *Safe and Effective: The Eight Essential Elements of an Optimal Medication-Use System*. Between 2004-2006, with funding from Health Canada, we developed *e-Therapeutics*, an evidence-based, web portal for therapeutic decision making.

II) MEDICATION USE CHALLENGES

The number and sophistication of medications are increasing. Drug therapy has been proven to prolong and increase quality of life, and is often more cost effective and less invasive than surgery and many medical procedures. However, it has also contributed to the rising costs of health care and adverse events. As such, there is an increased need for professionals with special skills in drug therapy, that is, pharmacists.

While medication use is an integral component of Canadian health care, adverse drug events and medication misuse remains a serious issue. Examples abound of the high direct and indirect costs of medications in Canada:

- Pharmaceuticals represent the second-largest, and fastest-growing, health care expenditure, with spending on both prescription and nonprescription drugs forecasted to reach \$26.9 billion in 2007 or 16.8% of the total.ⁱ
- Studies have estimated that 5% to 10% of all hospitalizations are drug-related, as are a large proportion (4% to 28%) of all emergency department visits.ⁱⁱ
- In a recent Canadian study, 24% of patients were admitted to a hospital's internal medicine service for drug-related causes, and over 70% of these admissions were deemed

preventable.ⁱⁱⁱ Similarly, another study found that one of every nine emergency department visits was due to a drug-related cause, and over two-thirds were preventable.^{iv}

III) CPhA's KEY COMMENTS ON THE 10-YEAR PLAN

Since the announcement of the First Ministers' 10-Year Plan to Strengthen Health Care in 2004, some progress has been made. However, there are many challenges that remain unmet. This brief focuses on four key areas of the 10-Year Plan that are of particular interest to pharmacists – the National Pharmaceuticals Strategy, Health Human Resources, Primary Care Reform, and Electronic Health Records.

▪ National Pharmaceuticals Strategy

As part of the 10-Year Plan, First Ministers agreed to the National Pharmaceuticals Strategy (NPS). First Ministers agreed that no Canadian should suffer undue financial hardship in accessing needed drug therapies, and that affordable access to drugs is fundamental to equitable health outcomes for all Canadians.

Progress on the NPS has been slow to date and there has been lack of progress on an overall strategy. The process has not been very transparent and we do not know what is happening in many of the key areas (e.g., what progress, if any, has been made on expensive drugs for rare diseases and development of a common national formulary?). CPhA is concerned that many of the issues identified as priorities in the NPS are being addressed in isolation and that more focus needs to be on a comprehensive strategy that addresses the issues – a truly National strategy. The safety and effectiveness of pharmaceuticals needs to be a key focus of the NPS.

There are only a few initiatives that have resulted in meaningful benefits for Canadians. Some provinces have announced catastrophic drug coverage for residents; the recently announced Bill C-51 should modernize the drug approval process and strengthen evaluation of real-world safety and effectiveness; PMPRB has been analyzing non-patented drug prices; and some provinces have announced new legislation and policies concerning pharmaceuticals. Most of these actions are initial steps towards a comprehensive plan to address issues of the growing costs, safety and optimal use of pharmaceuticals in Canada.

Canada needs a strong, nationwide pharmaceutical strategy to ensure that Canadians have access to safe, effective pharmaceuticals as an important and integral part of their health care.

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There needs to be a much greater focus on appropriate use of pharmaceuticals to improve outcomes and decrease the incidence of preventable adverse drug events.

There needs to be sustained effort by FPT governments to develop and implement a national strategy. This requires ongoing and meaningful consultation with stakeholders, including health care providers and consumers. Clearly, as medication specialists, pharmacists have an important role to play in any strategy to manage medications and promote appropriate medication use.

▪ Health Human Resources

The 10-Year Plan recognized the need to increase supply of health care professionals in Canada, including doctors, nurses and pharmacists. There was a commitment to continue and accelerate work on Health Human Resources (HHR) action plans and initiatives to ensure an adequate supply and appropriate mix of health care professionals.

CPhA would like to recognize that perhaps the most success has been in the area of health human resources planning. Health Canada has invested in interprofessional education and collaboration, support for integration of internationally educated health professionals (IEHPs), and generation of HHR data for the seven priority health care providers identified in the 10-year plan. The approval of an FPT framework for pan-Canadian HHR planning, and progress in provincial plans to manage health human resources, are examples of successes in HHR over the past four years. Stakeholders engaged with governments at the first HHR conference held in Ottawa last December.

Specific to pharmacy, we are pleased to see federal investment to support pharmacy HR planning. In particular, the new Canadian Institute of Health Information (CIHI) database to track the number of pharmacists in Canada, and a national pharmacy human resources study (*Moving Forward – Pharmacy Human Resources for the Future*; www.pharmacyhr.ca).

CPhA recognizes that perhaps the most success has been in the area of health human resources planning. However, there is much more that remains to be done to ensure that “the right people are in the right place with the right skills doing the right thing”. Further investment is needed to address the significant HR challenges facing Canada’s health care providers.

CPhA is encouraged by the progress made in health human resources, but there is much more that remains to be done. Areas of focus include: planning based on population needs; addressing shortages and healthy workplace issues; links to education; increased collaboration with stakeholders; support for IEHPs; and better data collection. Sustained funding of Health Canada’s HHR Strategy is needed to support pan-Canadian HHR planning. Further investment is needed to address the significant HR challenges faced by professions not specifically identified in the 10-year plan. The opportunity exists to further involve the pharmacy community in HHR planning and initiatives.

▪ Primary Care Reform

Timely access to family and community care through primary health care reform remains a high priority for all jurisdictions. The \$800 million Primary Health Care Transition Fund (PHCTF) supported a number of collaborative projects that were highly successful. Results from this investment continue.

For example, an Ontario PHCTF project was IMPACT, it integrated pharmacists into primary health

Much more work is needed to address issues of timely access to care, patient safety and health outcomes, interprofessional collaboration and optimizing scopes of practice of health professionals.

As medication experts and the most accessible health care providers, pharmacists need to be further integrated into primary care teams.

care teams. Now there are about 85 Family Health Teams across Ontario hiring pharmacists to work alongside family doctors, nurses, dietitians and other practitioners. Other provinces are now doing the same.

e-Therapeutics was a PHCTF-funded project, delivered by CPhA, to provide clinical treatment and drug information to health care professionals, in particular those practicing in primary care. This project was highly successful, but for the benefits to be fully realized this information needs to be easily accessible for all health care providers at the point of care. Adoption and acceptance of e-Therapeutics in clinical practice remains an issue.

CPhA recognizes that changes are required to strengthen the pharmacy profession's alignment with the health care needs of Canadians and to respond to stresses on the health care system. Pharmacists must shift more attention to patient-centred, outcomes-focused care to optimize the safe and effective use of medications. Thus, CPhA is leading a collaborative initiative to coordinate and implement these changes – the Blueprint for Pharmacy – a strategic action plan for the pharmacy profession in Canada.

▪ **Electronic Health Records**

Electronic health records (EHR) and telehealth are key technologies to enable health system renewal, particularly for Canadians who live in rural and remote areas. Adoption of computer technology and the EHR by clinicians remains a challenge. Progress has been slow.

CPhA would like to recognize the significant e-health investment that has been made and the achievements to date, but progress has been slow and further investment is required.

Most provinces are developing Drug Information Systems (DIS), which will include a complete drug profile and e-prescribing applications. Pharmacy is working with the jurisdictions, through the National e-Pharmacy Task Force (co-chaired by CPhA) to address policy, privacy, business and patient care issues as they relate to information technology.

CPhA believes that the EHR will enable primary care reform and allow health care practitioners to better care for their patients. More complete and better information will facilitate informed health care decisions. Implementation of electronic prescribing and DIS applications will lead to enhanced drug safety. To this end, funding for Canada Health Infoway needs to be increased in order to realize the vision of the electronic health record.

IV) CONCLUSION

In conclusion, while progress has been made on some elements of the 10-Year Plan, significant challenges and opportunities remain. More funding and work will be required to address the issues that were identified by the First Ministers four years ago. This brief only highlights the four areas of most importance for pharmacists – NPS, HHR, primary care reform, and EHRs – but there are many others.

The Canadian Pharmacists Association appreciates the opportunity to participate in your review of the First Minister's 10-Year Plan to Strengthen Health Care. Please contact us should you have any further questions.

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