



THE VISION FOR PHARMACY

*Optimal drug therapy outcomes for
Canadians through patient-centred care*

June 2008

BLUEPRINT FOR PHARMACY — DEVELOPED IN PARTNERSHIP

Task Force on a Blueprint for Pharmacy

The Blueprint Task Force was established in January 2007 to define a vision and clear action plan for the future of pharmacy. The Task Force includes broad representation from pharmacy stakeholders across Canada. The Canadian Pharmacists Association is the Secretariat and provides project management support. The Task Force has established five expert working groups to further develop the implementation plans to realize the Vision for Pharmacy.

Blueprint for Pharmacy Consultation

In June 2007, the Task Force launched its consultation process on the draft Blueprint. Feedback was provided by over 30 national/provincial pharmacy organizations and corporate pharmacy head offices. Over 700 individual pharmacists, pharmacy technicians and students in all practice settings — community, hospital, academia, industry — provided comments. In March 2008, six interprofessional focus groups, funded by Health Canada, were held across Canada. A total of 158 pharmacists, physicians, nurses, dentists, other health care providers and government representatives engaged in discussions on the Vision of Pharmacy. (Consultation reports available at: www.pharmacists.ca/blueprint).

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OUR VISION

Convenient and timely access to care, patient safety and health outcomes, financial sustainability, and scopes of practice of health professionals are the major issues challenging governments and health care leaders. Pharmacists, as medication experts, have an important role to play in the debate and resolution of these issues. Changes are required to strengthen the profession's alignment with the health care needs of Canadians and to respond to stresses on the health care system. Thus, a plan of action — the Blueprint for Pharmacy — is necessary to coordinate and implement these changes.

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Optimal drug therapy outcomes for Canadians through patient-centred care

In our Vision for Pharmacy

Pharmacists and pharmacy technicians

- practice to the full extent of their knowledge and skills, and are integral to emerging health care models.
- protect the safety, security and integrity of the drug distribution system through the enhanced role of regulated pharmacy technicians and greater automation of dispensing.
- lead the development of and participate in medication safety and quality improvement initiatives.

Pharmacists

- manage drug therapy in collaboration with patients, caregivers and other health care providers.
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- access and document relevant patient care information in health records, including test results and treatment indications (e.g., in electronic health records).
- empower patients in decision-making about their health, and play a prominent role in health promotion, disease prevention and chronic disease management.
- conduct practice research and contribute to evidence-based health care policy and best practices in patient care.

Pharmacists' services

- are compensated in a manner that relates to expertise and complexity of care.

To realize the Vision, strategic action is needed in five key areas:

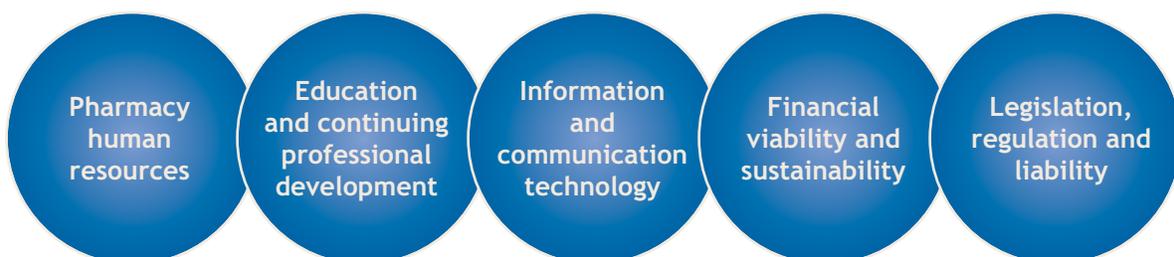


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BACKGROUND

INTRODUCTION

The Blueprint for Pharmacy is a collaborative initiative to develop a strategic action plan for the pharmacy profession in Canada. Its intent is to strengthen pharmacy's alignment with the health care needs of Canadians and to respond to the stresses on the health care system. Convenient and timely access to care, patient safety and health outcomes, financial sustainability and optimal scopes of practice of health professionals are the major issues challenging governments and health care leaders.

Patient needs and expectations are changing, as is the delivery of health care. These changes have a number of drivers, including the rising costs of health care and the emphasis on self-care. The evolution of technology is helping patients to become better informed and is leading to shared electronic health records, an increase in the number of pharmaceuticals available, and the development of biomonitoring and genomic forecasting. Population demographics are also shifting: the population as a whole is aging, and the socioeconomic diversity is increasing. Societal changes, such as the advent of the "24/7 society," are also coming into play.

In recognition of these changes, Canada's health care system is moving towards a preferred future where health promotion, disease prevention, and chronic disease management will be the cornerstones of health care, which will be delivered collaboratively by interprofessional teams. Patients will take on increased responsibility for their own care. Primary care providers will have ongoing relationships

with patients and will make extensive use of information and communications technologies to deliver timelier and higher quality care. Health care professionals and patients will have access to unbiased, evidence-based information about treatment choices and the appropriateness of those options for the individual patient. Electronic health records will be standardized, secure, and widely used. The role of pharmacists, physicians, nurses, and other providers will

evolve to employ their skills and knowledge most effectively. Pharmacy technicians will be a regulated profession, and technicians' scope of practice will be expanded and more standardized across the country.

The pharmacy profession must respond to this future with a strong vision for pharmacy — a greater emphasis on patient-centred, outcomes-focused care. The challenge

is to move forward with a strategic action plan for the future — the Blueprint for Pharmacy.

This document, developed by the Task Force on a Blueprint for Pharmacy through consultation, reviews medication use challenges and the current and future role of pharmacists and pharmacy technicians in the health care system. It also outlines the key elements and proposed actions required to achieve the Vision and meet the future health care needs of the population. The actions are grouped under five areas: pharmacy human resources; education and continuing professional development; information and communication technology; financial viability and sustainability; and legislation, regulation and liability.

The demands on the health care system and the changes in the delivery of health care require pharmacists to focus more attention on patient-centred, outcomes-focused care to optimize the safe and effective use of medications.

MEDICATION USE CHALLENGES

The number and complexity of medications are increasing. Drug therapy has been proven to prolong life and increase its quality, and is often more cost effective and less invasive than surgery and other 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 the unique skills in drug therapy that pharmacists offer.

Adverse events (AEs) are not uncommon. Examples abound of the high direct and indirect costs of pharmaceuticals 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 total expenditures.¹
- Community pharmacies dispense over 414 million prescriptions each year, which represents 84% of total drug costs.²
- A major Canadian study showed an adverse event rate of 7.5% for acute care hospital admissions, and estimated that of the almost 2.5 million annual hospital admissions in Canada, about 185,000 were associated with AEs; close to 70,000 of these were potentially preventable.³ The second most common type of AEs were medication-related.
- Studies have estimated that 5% to 10% of all hospitalizations are medication-related, as are a large

proportion (4% to 28%) of all emergency department visits.⁴ In a recent Canadian study, 24% of patients were admitted to a hospital's internal medicine service for medication-related causes, and over 70% of these admissions were deemed preventable.⁵ Similarly, another study found that one of every nine emergency department visits was due to a medication-related cause, and over two-thirds were preventable.⁶

- Adverse events after hospital discharge are also of concern, with 23% of patients experiencing an AE within 30 days; 50% of these AEs were deemed preventable and 72% were due to medications.⁷
- The estimated cost of misuse, underuse, and overuse of medications ranges from \$2 billion to \$9 billion per year.⁸

The evidence underscores the fact that medications must be used more safely and rationally. As stated by the World Health Organization (WHO), "This requires that patients receive medications appropriate to their clinical needs, in doses that meet their own individual requirements for an adequate period of time, and at the lowest cost to them and their community."⁹ If drugs are not used more appropriately the Canadian health care system will continue to expose patients and taxpayers to concerns related to quality of care, safety, and value for money.

THE ROLE OF PHARMACISTS

Pharmacists, as medication experts, have an important role to play. As visible and vital members of the health care team, pharmacists can enhance the public's access to many aspects of primary care, improve the safety of the medication-use system, and increase the rational use of medicines. The report from the Romanow Commission on the future of health care in Canada recognized the need to review scopes of practice and develop the roles of pharmacists and other health care providers: "... pharmacists can play an increasingly important role as part of the primary health care team, working with patients to ensure they are using medications appropriately and providing information to both physicians and patients about the effectiveness and appropriateness of certain drugs for certain conditions."¹⁰

International and Canadian studies provide evidence that demonstrate the contributions pharmacists make to patient care and the benefits to the health care system. Some

Canadian examples include:

- screening, educating and physician referral of patients at risk for cardiovascular events¹¹
- providing pharmacist-led anticoagulation services^{12,13}
- improving symptoms and clinical, holistic and economic outcomes in patients with asthma^{14,15}
- providing individual patient assessments, monitoring, follow-up, and education of patients and providers, as members of interprofessional primary health care teams^{16,17,18}
- improving safety through medication reconciliation and seamless care¹⁹
- assisting patients with selection of over-the-counter medications.²⁰

Canada's pharmacists practice in many patient-care settings: community pharmacies, hospitals and related health care institutions, family health clinics, home care, etc. Pharmacists collaborate with patients, their families and health care providers to benefit the health of Canadians by:

- Ensuring convenient access to medications and drug therapy expertise.
- Verifying a prescriber's order, checking for drug interactions and confirming dosages.
- Managing drug distribution systems to ensure safety, accuracy, quality and integrity of pharmaceuticals.
- Providing information about the optimal use of medications and promoting the cost-effectiveness of medications through evidence-based decision-making.
- Reducing harm by decreasing unnecessary, unsafe or inappropriate use of medications.
- Optimizing health outcomes by identifying, resolving, and preventing actual and potential medication-related problems; initiating or modifying drug therapy; and monitoring and evaluating response to drug therapy, in a collaborative framework with physicians and other health care providers.
- Supporting patient self-care by assessing symptoms, providing advice on the management of minor symptoms and the use of medications, and referring patients to other health care providers, where appropriate.
- Promoting immunization and other public health services.
- Providing education and interventions to prevent disease and disability, thereby promoting healthy lifestyles.

PHARMACY RESPONDS — A CALL TO ACTION

Efficiencies are being sought throughout the health care system to take full advantage of the contributions of all health care professionals. Canadian pharmacists have a responsibility to align professional services to better meet the population's health care needs. In addition to responding to the shifting health care context, they must respond to the stereotype of pharmacists as compounders and dispensers of medications. While pharmacies will always provide dispensing and compounding services, the pharmacists in these practice settings are medication experts committed to preventing adverse drug events and optimizing drug therapy outcomes. Pharmacists are increasingly accountable and responsible for the safe and effective use of medications.

The status quo is not an option. Pharmacy must shift from a product-centred to a patient-centred culture of care. Achieving a greater emphasis on patient-centred, outcomes-focused care will require true commitment by all pharmacists and stakeholders. The profession will need to institute a series of integrated strategies to ensure that it can respond and adapt to both internal and external demands. Pharmacists need to be the agents of change. They need an action plan to align their efforts to a common vision. The Blueprint for Pharmacy is such a plan for Canadian pharmacy.

Public health interventions, pharmaceutical care, rational medicine use and effective medicines supply management are key components of an accessible, sustainable, affordable and equitable health care system which ensures the efficacy, safety and quality of medicines. It is clear that pharmacy has an important role to play in the health sector reform process. To do so, however, the role of pharmacists needs to be redefined and reoriented.

— *World Health Organization*⁹

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REALIZING OUR VISION

To improve the health of Canadians and to address the challenges facing the health care system, all available resources, including pharmacists and pharmacy technicians, must be utilized more effectively. Pharmacy must recognize the need for change and embrace the vision of future pharmacy practice embodied in the Blueprint for Pharmacy. A shift toward a truly patient-centred, outcomes-focused approach requires the agreement, commitment and engagement of all pharmacy stakeholders — national and provincial associations, regulatory bodies, pharmacy schools and pharmacy owners.

Such change will not come easily — it requires resources, organization, agreement on process and collaboration with other stakeholders. The process of implementing the

Blueprint will be inclusive, involving the broadest range of pharmacy stakeholders, and the engagement of patients, governments, other health care providers, policy makers and private payers.

More specifically, to achieve the Vision for Pharmacy in Canada, strategic action in five key areas is needed: pharmacy human resources; education and continuing professional development; information and communication technology; financial viability and sustainability; and legislation, regulation and liability. There is considerable activity across Canada in each of these areas.

The proposed actions described below are intended to achieve a coordinated, pan-Canadian approach to accelerate the process. It is recognized that delivery of health care

services is a provincial mandate, and as such, the priorities of pharmacy, governments, and other stakeholders in each jurisdiction will influence their approach to particular Blueprint key actions.

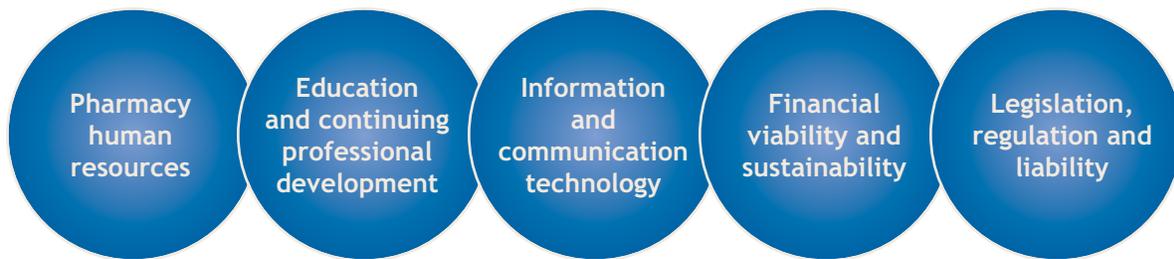
An implementation plan for the key actions in all five areas will be developed by expert working groups (established by the Task Force on a Blueprint for Pharmacy). The plan will provide more detail regarding the implementation process related to each action, including objectives, deliverables, milestones, costs, lead organization(s) and partners. Successful implementation requires an effective communication strategy to engage the

public, pharmacy, leaders in health care and governments. Moreover, it will need significant investment by these stakeholders.

The pharmacy organizations listed in Appendix I support this Vision for Pharmacy and are committed to work collaboratively with the Blueprint Task Force and working groups as they develop the implementation plan. To move the profession forward, pharmacy organizations need to refer to the Blueprint when developing their own strategic plans. As well, they are encouraged to lead or partner in implementing relevant actions that align with their organizational or jurisdictional mandates and priorities.

KEY STRATEGIC ACTIONS

To realize the Vision, strategic action is needed in five key areas:



The following actions were developed by the Blueprint Task Force and were revised by each of the working groups (see Appendix II). The Task Force and working groups consider these proposed actions to be key to the implementation plan that will realize the Vision for Pharmacy.

Pharmacy Human Resources

Strategic Direction: Guide pharmacy human resource initiatives to ensure that Canadians have access to high quality pharmacy services.

Canada's 31,000 licensed pharmacists make up the third-largest segment of health care professionals in Canada. Pharmacists are the only health care providers whose education focuses on medications and their use. Approximately 70% of licensed pharmacists work in community pharmacies, 15% work in health care institutions, and 15% work in academia, industry, government and other areas. Current reports estimate that there are between 1.0 and 1.3 pharmacy technician full time equivalents (FTEs) for every pharmacist FTE, depending on the setting.²¹

A coordinated approach is required to ensure that the pharmacy workforce meets the future needs of Canadians

and the health care system. A number of pharmacy human resource initiatives are undertaking many of these key actions. For example, two of these initiatives are funded by the federal government: the Moving Forward — Pharmacy Human Resources for the Future project and a pharmacist database, developed by the Canadian Institute for Health Information (CIHI), which will be updated annually.

Proposed key actions

- Describe evolving roles and innovative practice models, and identify enabling characteristics and their impact on pharmacy human resources.

- Achieve consensus on enhanced skills and knowledge for pharmacists within the key sectors of pharmacy practice.
- Lead and collaborate in research initiatives to evaluate the effect of pharmacy practice on patient health, population health, and health care services and the effect of changes in the utilization of pharmacy human resources.
- Promote a greater understanding of the factors determining pharmacist and pharmacy technician/assistant satisfaction in the workplace.
- Address recruitment and retention issues associated with traditional and emerging practices.
- Promote and evaluate best practices and innovative approaches in drug distribution and workflow to optimize pharmacy human resources and enhance safety.
- Define and achieve consensus on the roles, responsibilities and competency requirements of regulated pharmacy technicians.
- Promote the availability of an appropriate number of regulated pharmacy technicians with higher qualifications, expanded responsibilities and accountability as the role of pharmacists evolves.
- Address the challenges faced by international pharmacy graduates to support them in attaining licensure and integrating into pharmacy practice in Canada
- Encourage pharmacists to pursue and secure significant positions of leadership in government, educational institutions and stakeholder organizations.
- Apply the CIHI national database of pharmacists for population needs-based health human resources planning.
- Ensure that pan-Canadian health human resource planning is an ongoing process that includes pharmacists and recognizes the complexity of the profession.

Education and Continuing Professional Development

Strategic Direction: Ensure high quality education and continuing professional development programs to support patient-centred, outcomes-focused care.

In 1997, the WHO developed the concept of the “seven-star pharmacist,” detailing the skills and attitudes required of pharmacists to be effective members of the health care team.²² In 2000, the International Pharmaceutical Federation (FIP), of which Canada is a member, adopted this concept in its policy on pharmacy education.²³ The roles of the pharmacist are caregiver, decision-maker, communicator, manager, life-long learner, teacher and leader. The WHO and FIP added the function of researcher in their 2006 handbook entitled *Developing Pharmacy Practice: A Focus on Patient Care*.⁹ Future education needs to emphasize foundational skills (such as communications, clinical decision-making, physical assessment, informatics, confidence building and research) and incorporate management, leadership, advocacy and change management skills.

Proposed key actions

- Ensure that core pharmacy curricula address the knowledge, skills and values required for future pharmacy practice
- Promote and increase interprofessional and intraprofessional approaches to education and training
- Address challenges that affect the education, recruitment and retention of pharmacy educators and learning facilitators.
- Ensure all pharmacy professionals, including students, value and develop life-long learning and personal performance assessment skills.
- Increase the accessibility, quality, quantity and variety of experiential learning opportunities.
- Deliver programs to identify and meet the needs of internationally educated pharmacy professionals.
- Implement accessible programs to upgrade knowledge, skills and values to support current practice, the implementation of new services, specialty practices or new practice models.
- Support the availability of appropriate work environments, information and the application of decision-making and practice tools to ensure the efficient and effective innovation in pharmacy care.
- Create partnerships to develop learning programs.
- Ensure that all pharmacy technician programs meet the nationally defined competencies and are accredited.
- Develop bridging programs to assist non-regulated pharmacy personnel to achieve the competencies required for pharmacy technician regulation.
- Conduct and utilize research to develop, evaluate and improve education and continuing professional development programs.
- Define core competencies required by other pharmacy support personnel.
- Change culture to support new practice models.

Information and Communication Technology

Strategic Direction: Advance the development and implementation of information and communication technology to ensure the safe and effective use of medication.

Pharmacists need appropriate information to effectively manage drug therapy and to function as team members responsible for health outcomes related to medication therapies. Furthermore, all care providers require access to relevant patient information to make the best therapeutic decisions. e-Health applications and automation represent key vehicles for communicating information and enhancing the safety of the drug distribution system. Across the country, in partnership with Canada Health Infoway, provincial governments are developing electronic health care applications. This includes Pharmacy Information Networks/Drug Information Systems (PINs/DIS), which will include a complete drug profile and e-prescribing applications. The National e-Pharmacy Task Force is addressing policy, privacy, business and patient care issues as they relate to information technology.

Proposed key actions

- Ensure that pharmacy is engaged in the development and implementation of information and communication technology (ICT) and automation initiatives.
- Research and utilize a Canadian pharmacy business case(s) to inform and promote adequate funding for implementation and maintenance of ICT.
- Ensure that pan-Canadian e-health standards are implemented by jurisdictions in a coordinated, phased approach and that pan-Canadian messages are sustained on a national level, to support integration and data access across health care domains.
- Ensure that pharmacists and pharmacy technicians, within their scope of practice, will have the ability to read, write to and modify relevant sections of a patient's electronic health record.
- Identify the needs and define the functionality of pharmacy management software to support the evolving roles of pharmacists and pharmacy technicians to maximize the usefulness of ICT.
- Address policy issues identified through the work of Canada Health Infoway, provincial governments, and other organizations on electronic health records.
- Develop, influence, implement policies and practices relevant to electronic transfer of prescriptions and electronic prescribing.
- Ensure that the development and implementation of secure ICT in hospital, community, primary care, and long-term care settings facilitates continuity of care and improves safety with respect to patients' drug therapy.
- Advocate for consistent ICT communication strategies amongst stakeholders.
- Evaluate how the use of ICT by pharmacy affects health care services and outcomes.

Financial Viability and Sustainability

Strategic Direction: Provide pharmacy services that are financially viable and sustainable to optimize medication use, promote wellness and disease prevention.

The health care system needs pharmacists to provide patient-centred care and accept responsibilities as drug therapy experts. Additional practice, reimbursement and business models are needed to support the Vision.

Proposed key actions

- Identify, define, pilot, and evaluate new professional services and expanded pharmacy practice models to determine their feasibility and cost-effectiveness and impact on quality of care.
- Develop a framework for pharmacy services.
- Describe and gain acceptance, from stakeholders, to implement reimbursement models that are consistent with the framework for pharmacy services and recognize the complexity, skill, demonstrated value and time required for pharmacists with the goal of financial sustainability.
- Engage with governments, third party insurers and other payors to determine services to be reimbursed that meet the health care needs of their populations.
- Support the adoption of national standardized electronic billing procedures for professional services.

- Develop transition strategies that address the resources and requirements to operationalize new pharmacy practice models.
- Conduct research to evaluate the impact of health care policies on pharmacy practice and to contribute to the development of future pharmacy-related policy. This research will examine policy impacts on financial viability and sustainability of pharmacies, patient outcomes and system outcomes.
- Develop a national marketing strategy for pharmacy services.

Legislation, Regulation and Liability

Strategic Direction: Address legislation, regulation and liability issues such that pharmacists and pharmacy technicians practice to the full extent of their knowledge and skills to provide quality health care.

Change cannot occur without support from the federal, provincial and territorial pharmacy regulatory authorities and governments, and their commitment to review and amend policies, regulation or legislation to address and encourage necessary initiatives, such as interdisciplinary team-based care. As with other health care professionals in Canada, regulation is important for protecting the public.

Proposed key actions

- Enact an enabling regulatory framework, authorizing pharmacists to deliver expanded services in new practice models, including but not limited to: initiating, modifying, continuing and monitoring drug therapy; ordering and accessing laboratory results; and administering drugs and vaccines by injection, in both collaborative and independent practice models.
- Enact a regulatory framework that grants more authority, responsibility and accountability to pharmacy technicians.
- Establish definitions that are accepted nationally for prescribing, compounding, dispensing and administering drugs.
- Protect the public through ongoing reconciliation of professional practice, professional competencies and competency performance assessment, which is done in parallel to broadening scopes of practice.
- Establish an understanding about how responsibility and accountability is shared and transferred between practitioners working in collaborative practice relationships.
- Develop a national Code of Ethics for pharmacists and pharmacy technicians.
- Monitor and effect legislation and its impact on patient care, pharmacy practice and the integrity of the drug distribution system (e.g., drug product licensing, roles and scopes of practice of health professionals).
- Develop national consensus on what constitutes a pharmacist:patient relationship.
- Develop a regulatory framework that accommodates the interprovincial movement of pharmacists, drugs and pharmacist services.
- Monitor and effect privacy legislation to ensure access to, use of and disclosure of personal health information for clinical and quality assurance purposes, while protecting the confidentiality and security of patient's information.

CONCLUSION

The demands on the health care system require pharmacists to focus more attention on patient-centred, outcomes-focused care to optimize the safe and effective use of medications. The Blueprint for Pharmacy is a collaborative initiative to strategically align pharmacy with the health care needs of Canadians. To achieve the Vision for Pharmacy, pharmacists, pharmacy technicians, pharmacy owners and organizations are working together to implement a pan-Canadian action plan for the future.

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APPENDIX I

COMMITMENT TO ACT

We, the undersigned organizations, support the Vision for Pharmacy described in the Blueprint for Pharmacy: The Vision for Pharmacy, and are committed to work collaboratively with the Blueprint Task Force and working groups as they develop the implementation plan. To move the profession forward, we will refer to the Blueprint when developing our own strategic plans. We will take the lead or partner by implementing relevant actions that align with our organizational or jurisdictional mandates and priorities.

National Pharmacy Organizations

Association of Deans of Pharmacy of Canada
Association of Faculties of Pharmacy of Canada
Canadian Academy of the History of Pharmacy
Canadian Association of Chain Drug Stores
Canadian Association of Pharmacy Students and Interns
Canadian Association of Pharmacy Technicians
Canadian College of Clinical Pharmacy
Canadian Council for Accreditation of Pharmacy Programs
Canadian Council on Continuing Education in Pharmacy
Canadian Foundation for Pharmacy
Canadian Pharmacists Association
Canadian Pharmacy Practice Research Group
Canadian Pharmacy Technician Educators Association
Canadian Society of Consultant Pharmacists
Canadian Society of Hospital Pharmacists
National Association of Pharmacy Regulatory Authorities
Pharmacy Examining Board of Canada

Provincial Pharmacy Associations

Alberta Pharmacists' Association
Association des pharmaciens des établissements de santé du Québec
Association québécoise des pharmaciens propriétaires
British Columbia Pharmacy Association
Manitoba Society of Pharmacists
New Brunswick Pharmacists' Association
Ontario Pharmacists' Association

Pharmacists' Association of Saskatchewan
Pharmacists' Association of Newfoundland and Labrador
Pharmacy Association of Nova Scotia
Pharmacy Technician Society of Alberta
Prince Edward Island Pharmacists Association

Provincial Pharmacy Regulatory Authorities

Alberta College of Pharmacists
College of Pharmacists of British Columbia
Manitoba Pharmaceutical Association
New Brunswick Pharmaceutical Society
Newfoundland and Labrador Pharmacy Board
Nova Scotia College of Pharmacists
Ontario College of Pharmacists
Ordre des pharmaciens du Québec
Prince Edward Island Pharmacy Board
Saskatchewan College of Pharmacists
Yukon Consumer Services (Pharmacy Regulatory Authority)

Chain Pharmacy

Costco Pharmacy
Dell Pharmacy
Famiprix Inc.
Hbc Pharmacies
Katz Group Canada Ltd / Rexall
Lawton Drugs
Lovell Drugs Limited
Metro Ontario Inc.
PharmaChoice (Atlantic)
Pharmasave Drugs (National) Ltd.
Remedy Drug Store Company Inc.
Shoppers Drug Mart Inc.
Sobeys Pharmacy
The Group Jean Coutu (PJC) Inc.
UniPHARM Wholesale Drugs Ltd.
Uniprix Inc,
Value Drug Mart Associates Ltd.
Wal-Mart Canada Corp. (Wal-Mart Pharmacy)

Faculties of Pharmacy

Dalhousie University College of Pharmacy
Faculté de pharmacie, Université de Montréal
Faculté de pharmacie, Université Laval
Memorial University School of Pharmacy
University of Alberta Faculty of Pharmacy and Pharmaceutical Sciences
University of British Columbia Faculty of Pharmaceutical Sciences
University of Manitoba Faculty of Pharmacy
University of Saskatchewan College of Pharmacy and Nutrition
University of Toronto Leslie Dan Faculty of Pharmacy
University of Waterloo School of Pharmacy

Pharmacy Student Associations

Alberta Pharmacy Students' Association
Association des étudiants en pharmacie de l'Université de Montréal
Association générale des étudiants en pharmacie de l'Université Laval
Dalhousie Student Pharmacy Society
Memorial University Pharmacy Society
Saskatchewan Pharmacy and Nutrition Students' Society
University of British Columbia Pharmacy Undergraduate Society
University of Manitoba Pharmacy Students Association
University of Waterloo Society of Pharmacy Students
University of Toronto Undergraduate Pharmacy Society

Updated: March 30, 2009

APPENDIX II

BLUEPRINT FOR PHARMACY WORKING GROUP MEMBERS

Pharmacy Human Resources

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For more information



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