

ASSOCIATION DES





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

VISION

Pharmacists providing world-class pharmacy leadership.

Strategic plan

In 2017, the CPhA Board of Directors approved a new Strategic Plan. This new plan is built on a foundation of delivering member value, and outlines how CPhA will:

ADVOCATE FOR PHARMACISTS

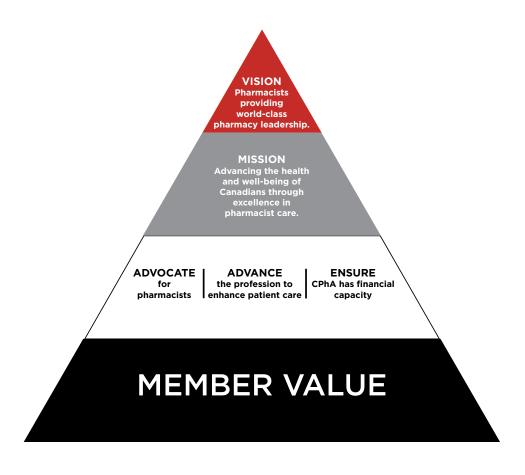
- a. Advance the role and image of the profession
- b. Build health and economic research capacity to understand and report on the metrics critical to the success of pharmacists and their practice

2. ADVANCE THE PROFESSION TO ENHANCE PATIENT CARE

- a. Support the development of education and practice tools
- b. Promote research and knowledge translation

3. ENSURE CPhA HAS THE FINANCIAL CAPACITY TO DELIVER ON ITS MISSION AND VISION

- a. Diversify CPhA's revenue and accelerate growth in CPhA's business portfolio
- b. Maximize and increase margins in our core business



Message from the Chair and CEO

ith a refreshed strategic plan to advance the profession, CPhA continued to build and strengthen our relationships with pharmacists and the pharmacy community throughout 2017. We focused on moving key advocacy files forward, and remained committed to fostering the collaboration and partnership we need to achieve our mission and vision. Health care issues like the opioid crisis, medical cannabis, pharmacare and more were front and centre for governments and the public, and CPhA was proud to represent pharmacists and the important role they can play in addressing these issues and advancing the health and well-being of Canadians through excellence in pharmacist care.



Alistair Bursey, Chair and Glen Doucet, Interim CEO

You'll find details on many of our exciting initiatives in this year's Annual Report, but we wanted to draw your attention to one key initiative launched in late 2017 that will have a lasting impact on the profession. We know that pharmacists want to be practising at a higher level, using their full range of knowledge and skills to provide exemplary patient care. We also know that they need support—legislation, regulation, compensation, education and practice tools—to find and reach that peak level of performance. As a profession, we need a new vision for pharmacy. One that encompasses an appropriate scope of

practice, our patient's needs, a complex health care system, and new, potentially disruptive technology. It needs to be focused on advancing our profession to its fullest potential. And it needs to be a vision that conducts world leading pharmacy practice research, demonstrating the clinical and economic value of our pharmacist interventions. This vision is the most important pillar of our new strategic plan and our Professional Practice Working Group has been tasked with the development of this unified vision. We're looking forward to keeping you informed of their progress in the months ahead.

With challenge comes opportunity. Though our profession and our ever-changing health care system face a multitude of challenges, we know that pharmacists are passionate, compassionate, skilled and dedicated to improving the lives of Canadians. We invite you to take a look through this report to reflect back on 2017, and look forward into 2018 and beyond as we continue to evolve and grow to meet the changing needs of Canadians.

Stronger together

hank you to all of our Organizational Members and Affiliates for a highly successful year. We're looking hank forward to continuing to strengthen our relationship and working together to advance the health and well-being of Canadians through excellence in pharmacist care.

CPhA Organizational Members As of Dec. 31, 2017























Organizational Affiliates As of Dec. 31, 2017

Our Organizational Affiliate Partnership Program gives key pharmacy stakeholders who support our mission and vision the opportunity to be a part of the new CPhA.





































































2017 milestones

JAN

CPhA supports Bell Let's Talk Day highlighting the role pharmacists play in mental health care.

Release of accredited medical abortion training program in collaboration with the College of Family Physicians of Canada and the Society of Obstetricians and Gynaecologists of Canada

FEB

National survey of 4000+ Canadians on the value and perception of pharmacists



MAY

Craig Plain of Vancouver, BC, announced as 2017 Canadian Pharmacist of the Year



JUNE

Canadian Pharmacists Conference 2017 celebrates 400 years of pharmacy in Canada in Quebec City, QC



SEPT

Federal government releases framework for tackling antimicrobial resistance; CPhA champions pharmacists as antimicrobial stewards as part of national, multi-stakeholder antimicrobial stewardship steering committee

CPhA highlights important role of pharmacists in medical cannabis at iPolitics panel



OCT

CPhA hosts federal lobby day to inform parliamentarians of role of pharmacists and provide naloxone training

Release of environmental scan of Mifegymiso availability across Canada; demand for universal access to Mifegymiso at health ministers meeting

Ontario College of Pharmacists selects CPhA and Pharmapod to implement medication incident reporting platform in Ontario

MARCH

Pharmacist Awareness Month — Pharmacists: Doing More. For you.

Release of *Benefits of* pharmacist care in hypertension in Canada report

CPhA supports new mandatory drug shortage reporting and launch of www.drugshortagescanad

www.drugshortagescanada.ca reporting website

APRIL

Release of The Value of Expanded Pharmacy Services in Canada report



JULY

Council of the Federation meets in Edmonton: CPhA urges premiers to put Canada's opioid crisis front and centre on the agenda

Release of new practice resource: Medical cannabis FAQ

Launch of French language CE in partnership with Sodalis Solutions-Pharma

AUG

Pre-budget consultation brief, *Prescriptions* for a healthy and productive Canada, submitted to the Standing Committee on Finance

NOV

Launch of medical cannabis CE program

Release of Choosing Wisely Canada pharmacy list

Health Canada publishes updated Mifegymiso monograph allowing pharmacist dispensing



DEC

Launch of CPhA's PharmAccord proposal





Advocate for pharmacists

hroughout 2017, CPhA's primary focus was to advocate for pharmacists and our role in the health care system. We continued to work hard to build and achieve awareness and support for pharmacists as valued and integral health care providers. We also focused on ways to address the need for more evidence to support initiatives designed to positively influence decisions affecting the role and reimbursement of pharmacists and pharmacy services.

As the national voice for pharmacists in Canada, CPhA plays an important role in promoting the value of pharmacy to the health care system. With a refreshed advocacy plan and the support of our Organizational Members and Affiliates, CPhA spoke out in 2017 on a wide range of issues affecting the profession, including the opioid crisis, pharmacare, medical cannabis and more. We were invited to provide expert testimony to federal government committees on many of these issues, as well as providing a pharmacy voice on issues such as antimicrobial resistance, proposed tax changes, codeine and the federal budget.

Ensuring that Canadians are aware of the value their pharmacist can provide is also a top priority for CPhA. In conjunction with our Organizational Members, we executed another successful Pharmacist Awareness Month (PAM) campaign in 2017, using the theme Pharmacists: Doing more. For you. Our annual polling of more than 4000 Canadians continued to show an increase in the public's awareness of expanded services and trust; and we continued to work with our Organizational Members on a national Image and Reputation Collaborative.

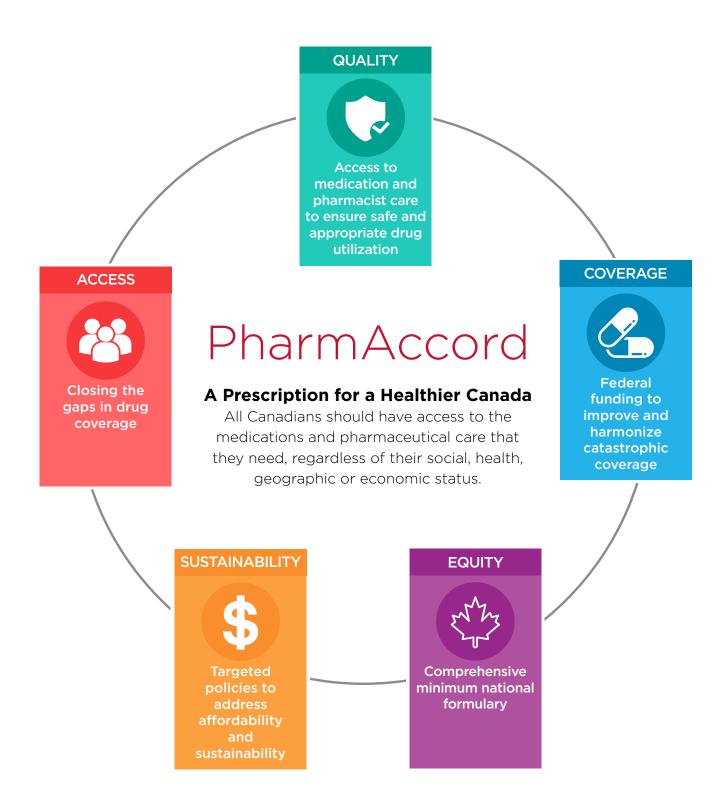
In October CPhA announced a new role on the senior management team: Senior Pharmacist Advisor. This new executive position serves as an advocate for pharmacists, supporting CPhA's strategic plan by building and achieving awareness and support among key stakeholders of pharmacists as valued and essential health care providers. One of the primary objectives of this role, with the support of a new Pharmacy Practice Working Group, will be the development of a vision for a harmonized scope of practice for the profession of pharmacy and identification of the practice, education and economic research needs to support that vision.

OPIOIDS

The opioid crisis was the top Canadian health care issue in 2017. In an effort to leverage the role of pharmacists, CPhA brought together a broad range of pharmacy organizations for the 2017 Pharmacy Opioid Summit in June. Part of CPhA's commitment in the Government of Canada's Joint Action Plan on Opioids, the Summit focused on sharing and discussing pharmacy-specific strategies and actions and identifying further opportunities for pharmacy involvement in resolving the crisis. CPhA released a collection of commitments and offered three priority recommendations to improve how pharmacists can help prevent prescription opioid misuse and abuse before it begins:

- Developing new guidelines to improve the interdisciplinary approach to managing opioid use
- Accelerating the implementation of fully integrated electronic drug monitoring systems across the country
- Enabling pharmacists to adapt opioid prescriptions

CPhA believes that a new Canadian PharmAccord based on these pillars would help improve access and equity, achieve lower drug prices, introduce a comprehensive national formulary, and promote the safe and appropriate use of prescription medicines.



CPhA also called for improved naloxone access across the country this year and were pleased to see more and more provinces commit to providing access to free take-home kits. Ahead of the premiers' summer meeting, we released a naloxone availability scan to help identify gaps and barriers to naloxone access. In addition, CPhA held a naloxone training workshop on Parliament Hill during its Lobby Day in October.

www.pharmacists.ca/naloxone

PHARMACARE

Throughout 2017, CPhA continued to work with government, pharmacy and other health stakeholders to discuss the need for a pan-Canadian pharmacare framework. While this year the federal government agreed to a health accord that provides investments for provinces and territories to improve health outcomes for Canadians in specific areas, CPhA called for the next accord to provide federal investments to support better drug coverage for Canadians. In December CPhA launched the PharmAccord, a pharmacy-focused proposal that would allow governments to provide universal drug coverage to all Canadians, ensure comprehensive access to medications and leverage pharmacist care to better utilize medications and improve patient outcomes. The plan calls on the government to commit to a five-pillar plan that would:

- 1. Provide full drug coverage to Canadians;
- 2. Harmonize catastrophic drug coverage;
- 3. Develop a comprehensive minimum national drug formulary;
- 4. Ensure the drug system is both affordable and sustainable; and
- 5. Make greater use of the experience and knowledge of pharmacists to provide better care to patients, at a lower cost to government.

www.pharmacists.ca/pharmacare

ECONOMIC RESEARCH

In late March CPhA released *Benefits of pharmacist* care in hypertension in Canada, a report on the results of a study showing comprehensive long-term pharmacist care for Canadians with hypertension, including patient education and prescribing,

improves health outcomes and could save Canada's health care system billions of dollars.

According to the research, projected cost savings would be more than \$15.7 billion if full scope pharmacist care were administered to the full eligible population in Canada. The study, published in the May/June issue of the *Canadian Pharmacists Journal*, looked at alternatives to usual hypertension care, including full scope pharmacist care—making full use of pharmacists' scope of skills, including prescribing. www.pharmacists.ca/hypertension

\$

15.7 BILLION

in savings with full pharmacist intervention compared to usual care over 30 years.

In April The Conference Board of Canada released the report *The Value of Expanded Pharmacy Services in Canada*, part of a three-part research series commissioned by CPhA. With the application of a modelling study, the report provides an analysis of the health and economic impact of three services that are currently delivered within a community pharmacy setting and have the potential to be scaled up—smoking cessation, advanced medication review for heart disease and pneumococcal vaccination. Over the 20-year forecast period, the estimated cost-savings of implementing and scaling up the three pharmacy services ranges from \$2.5 billion to \$25.7 billion, depending on the level of uptake.

www.pharmacists.ca/valueofpharmacy

In December CPhA created a new role, Senior Economic Advisor, to establish a health economic research team to develop an overall strategy for our economic work and to provide ongoing support on key CPhA files. This team will continue our work in building the health and economic research capacity to understand and report on the metrics critical to the success of pharmacists and their practices.

Pharmacists: Doing more. For you.



Canada's pharmacists are doing more for their patients than ever before.



Adapting prescriptions



Injections and vaccinations



Medication management



Chronic disease management



Ordering and interpreting lab tests



Assessing/ prescribing for minor ailments





IMAGE AND REPUTATION COLLABORATIVE

The Image and Reputation Collaborative is a CPhA-facilitated initiative whose goal is to develop and provide communications material with a common look, theme and messaging for use by Organizational Members. In 2017 a research plan focusing on "the value of pharmacy," was approved; focus groups were held in the spring and a large sample survey was conducted over the summer. A working group of provincial association members held a workshop based on the findings and developed recommendations for a common theme and message. A Request For Proposals was issued for the development of a creative platform, with the launch of material scheduled for the spring of 2018.

MIFEGYMISO

Since Mifegymiso became available in Canada in January 2017, CPhA and the health care community strongly advocated for Health Canada to approve the use of Mifegymiso up to nine weeks gestation, like in other countries, and reduce barriers to access by allowing pharmacists to dispense Mifegymiso to patients directly. Throughout the year CPhA strongly advocated for pharmacist dispensing and improved access. In May Health Canada eased the regulations around dispensing and mandatory training. By November Health Canada announced an updated product monograph that allows for direct dispensing to patients by all pharmacists across Canada, a move applauded by CPhA. Since January, public coverage of Mifegymiso has slowly been expanding across Canada. New Brunswick was the first province to offer universal coverage of Mifegymiso, followed by Alberta, Ontario, Nova Scotia and Quebec, As of December 31, limited coverage of Mifegymiso was available in British Columbia, Saskatchewan, Manitoba and Prince Edward Island.

ANTIMICROBIAL STEWARDSHIP

CPhA is committed to highlighting the vital role pharmacists play in antimicrobial stewardship (AMS). We are part of the AMS Canada Steering Committee, a national multi-stakeholder, multisector group led by the National Collaborating Centre for Infectious Diseases (NCCID) and HealthCareCAN, where we actively champion the important role that pharmacists play in antimicrobial stewardship and how the role of pharmacists could evolve and expand in community practice, where most antimicrobials are prescribed. In January NCCID and HealthCareCAN released Putting the Pieces Together, A National Plan For Antimicrobial Stewardship, which lays out ten areas in which governments, health care organizations and professionals, civil society groups and the public can collaborate to preserve the effectiveness of antimicrobial drugs such as antibiotics. In June CPhA appeared before the Standing Committee on Health as part of its study on antimicrobial resistance to highlight the key role pharmacists can play as antimicrobial stewards. In September the federal government released Tackling Antimicrobial Resistance and Antimicrobial Use: A Pan-Canadian Framework for Action. The framework, developed jointly with provinces, territories and other partners, identifies opportunities for action and desired outcomes under four pillars: surveillance: stewardship; infection prevention and control; and research and innovation. Learn more about AMR and CPhA's efforts at www.pharmacists.ca/AMR.



Advance the profession to enhance patient care

n order to practice at the highest scope, pharmacists need tools, resources and information. CPhA delivered a range of webinars, continuing professional development (CPD) programs and practice tools this year. CPhA's updated webinar series was enjoyed by over 2000 pharmacists from across the country in 2017, with topics including antibiotic stewardship, mental health services, pharmacogenomics, opioids and travel health. Through our existing library of CPD programs, CPhA issued thousands of CEUs to pharmacists and launched new French CPD modules, a medical cannabis CE program, a new format for the Minor Ailments program and, for the first time, accredited conference recordings, allowing hundreds of pharmacists who were unable to attend the Canadian Pharmacists Conference 2017 to take advantage of the recordings and earn CEUs. Many of these CPD resources are now free and exclusively available to members of CPhA's Organizational Members, allowing us to deliver additional member value for our partners.

CPhA responded to pressing health care issues with a range of pharmacy practice tools in 2017. Following up on our very popular how-to video on administering a naloxone injection, CPhA released a video and infographic on using naloxone nasal spray. In response to confusion surrounding Mifegymiso access, coverage and regulations, CPhA released a range of resources highlighting the different rules across Canada, including an environmental scan. CPhA also released a Q&A document on common questions about medical cannabis.

MEDICAL CANNABIS

With governments moving to pass regulations and prepare for the July 2018 date set for legalization, both recreational and medical cannabis have been top political and health care topics of 2017. Throughout the year, CPhA stressed the need to maintain the medical cannabis stream and improve patient care and safety through pharmacist dispensing. In the fall CPhA submitted a brief on Bill C-45: An Act respecting cannabis and to amend the Controlled Drugs and Substances Act, the Criminal Code and other Acts, and appeared before the Standing Committee on Health, where we emphasized how proposed legislation could impact patients relying on medical cannabis. In late November CPhA expressed disappointment with the federal government's approach to medical cannabis regulations, which displayed an ongoing lack of concern for medical cannabis patients. CPhA spoke to a number of media outlets on this issue throughout 2017, and we continue to actively participate in consultations with governments and decision makers.

CPhA also began development of a range of tools and resources to support pharmacists in their practices. Our first medical cannabis CE course, An Introduction to Medical Cannabis and Cannabinoids, serves as a foundation to provide pharmacists with an overview of the endocannabinoid system and function, the availability of cannabinoids in Canada, including both prescription and medical cannabis, and their therapeutic and adverse effects. This program is part of a suite of resources on medical cannabis, which includes additional CE programming, an FAQ practice tool and an evidence quide.

www.pharmacists.ca/cannabis



- Don't use a medication to treat the side effects of another medication unless absolutely necessary.
- 2 Don't recommend the use of over-the-counter medications containing codeine for the management of acute or chronic pain. Counsel patients against their use and recommend safe alternatives.
- Don't start or renew drug therapy unless there is an appropriate indication and reasonable expectation of benefit in the individual patient.

- Don't renew long-term proton pump inhibitor (PPI) therapy for gastrointestinal symptoms without an attempt to stop or reduce (taper) therapy at least once per year for most patients.
- Question the use of antipsychotics as a first line intervention to treat primary insomnia in any age group.
- 6 Don't prescribe or dispense benzodiazepines without building a discontinuation strategy into the patient's treatment plan (except for patients who have a valid indication for long-term use).

CHOOSING WISELY CANADA

In November CPhA and Choosing Wisely Canada published the list Six Things Pharmacists and Patients Should Question. This list identifies targeted, evidence-based recommendations to support conversations between patients and clinicians about what care is really needed. With the release of its recommendations, CPhA joined more than 60 Canadian medical professional societies that have published more than 280 recommendations or "lists" of unnecessary tests and treatments that patients and clinicians should discuss.



Learn more at www.pharmacists.ca/cwc and check out CPhA's YouTube channel for a range of videos which examine the recommendations.

ADAPT

In February a final 36 pharmacists earned a Certificate in Patient Care Skills through the ADAPT program. More than 1000 pharmacists completed this award-winning continuing education course from 2010-2017.

CANADIAN PHARMACISTS JOURNAL

The Canadian Pharmacists Journal (CPJ) supports pharmacists in optimizing patient care by linking knowledge to practice. Published six times per year, CPJ continued to be offered as a member benefit to over 18,000 pharmacists across Canada in 2017, with an additional 7000 subscriptions being sold to databases and institutions in the developing world, for a circulation of over 25,000.

CPJ continued to publish important guidelines and practice tools in 2017, including:

- Guidelines for outpatient cancer care by community pharmacists
- Managing venous thromboembolism
- Ramadan fasting and medications
- Management of dyslipidemia
- Prevention of cardiovascular disease
- Management of atopic dermatitis (eczema) and the assessment
- Management of urinary tract infections in adults

Our featured article of the May/June issue, "Costeffectiveness of pharmacist care for managing
hypertension in Canada," received excellent coverage
in mainstream and academic media, including CBC
Radio, Science Magazine, International Business
Times, the Pharmaceutical Journal and Canadian
Health Care Network. The CPJ session on this topic
at the Canadian Pharmacists Conference, featuring
Dr. Nadia Khan of Hypertension Canada and Karissa
Johnston of Broadstreet Health Economics &
Outcomes Research, along with Dr. Ross Tsuyuki,
drew a large crowd.



CONGRÈS DES PHARMACIENS DU CANADA

Conference by numbers

700

Delegates from across canada



Research posters & oral abstracts



Continuing education sessions



75+ Relevant trade show exhibitors



1 amazing conference











DELEGATE SATISFACTION SCORE

Professional development

CPhA's suite of continuing professional development programs are designed specifically to help pharmacists take control of their future to offer additional services to patients with confidence and authority.

New in 2017



MANAGING YOUR PHARMACY - THE BUSINESS ESSENTIALS focuses on how to apply business and management theory to day-to-day pharmacy operations, using cases and lessons learned from leaders in the pharmacy industry. Based on the Pharmacy Management in Canada textbook, this online, self-directed program drills down to the key skills and knowledge that are critical to effectively managing your pharmacy as a business. This program was developed through 2017 and launched in early 2018.



Sodalis Solutions-Pharma has partnered with CPhA to offer a series of online French language CPD programs. Available exclusively to CPhA Associates and Affiliates, these modules were built on the proven sacs|leaf^{MC} model to improve patient care. Three modules, caring for patients with HIV, travelling with insulin and managing obesity in adults, were launched in 2017. Development and access to these modules was made possible in part by an unrestricted educational grant from Pharmascience.

MEDICAL CANNABIS

Cannabis is now a legally approved therapeutic option for several conditions. Pharmacists need current information on cannabinoid products, their therapeutic effects and current regulations regarding medical cannabis use, to provide effective medication management for their patients. The first course in our series of accredited programs, An Introduction to Medical Cannabis and Cannabinoids, provides pharmacists with an overview of the different types of cannabinoids available in Canada, their therapeutic effects and their impact on human physiology. It covers Canadian regulations on the use of cannabis for medical purposes and focuses on the pharmacist's important role in advising patients who have been prescribed cannabis as part of their treatment plan.

Core Programs













Ensure CPhA has the financial capacity to deliver on its mission and vision

s the pharmacy and business worlds continue to evolve, CPhA strives to stay ahead of the curve. Like any business, we carefully budget our resources to ensure that we have the financial capacity to deliver on our objectives.

Over the course of 2017, CPhA continued to enhance its online suite of drug and therapeutic information. Based on user feedback, CPhA released a number of RxTx enhancements in March, introducing new features including full screen display, enhanced advanced search, easier content navigation and more condition menu options. In May CPhA announced the release of the redesigned RxTx mobile app, featuring significant improvements to the interface with minimal learning curve. New features included a fresh new look, more powerful search engine and easier navigation. New in 2017, an updated edition of the Compendium of Therapeutic Choices was published as CTC 2017 and will now be published annually, while CPS 2017 was published early in the year containing over 100 new products for the Canadian market.

In addition to our traditional revenue streams, CPhA launched a number of new services in 2017 to both maximize our already trusted content and help diversify our business portfolio. CPS Offline was

launched to provide offline access to CPS content; our new CPS Notification service was launched to help manufacturers ensure their critical messages are being received by pharmacists and are readily available when and where they need it. Initial feedback on these programs has been very positive.

RXTX INTEGRATION SOLUTION

In 2017 CPhA completed the development of our Integration Solution to provide third-party clinical management systems (CMS) with Canadian drug and evidence-based therapeutic information (RxTx) at the point of care for maximum efficiency and usability. This integration solution enhances webbased and client-server applications with seamlessly integrated content, providing access to critical drug and therapeutic information directly from RxTx to help reduce medication errors and improve patient outcomes. Special consideration was taken in the design of this solution to limit the required development for third-party vendors wishing to offer this integration solution. In July CPhA and McKesson piloted the RxTx Integrated Solution with five Ottawa area pharmacies, with roll out to all pharmacies using McKesson's PharmaClik Rx scheduled for early 2018.



RxTx by the numbers

200 K

Canadian health care practitioners use RxTx



5.4 M

Sessions on web in the last 365 days



612 K

Sessions on mobile in the last 365 days



500

Hospitals in Canada use CPS



THERAPEUTIC HIGHLIGHTS CE

CPhA announced the discontinuation of Therapeutic Highlights CE as of December 26, 2017. Developed in partnership with McGill University's Information Technology Primary Care Research Group, this program was designed to evaluate and ensure that CPhA's drug and therapeutic content supports frontline health care practitioners across Canada and provides the content they need and want to deliver exceptional patient care. The feedback CPhA received through this initiative resulted in a number of modifications and enhancements to our content, making it some of the most trusted drug and therapeutic information in Canada, used by more than 200,000 practitioners every day.

SPL CONVERSION SERVICES

In 2017 Health Canada introduced new requirements for manufacturers to submit their monographs in Structured Product Labelling (SPL) format. In response, CPhA began offering conversion services for manufacturers seeking a cost-effective method to support compliance. With more than 10 years' conversion experience and more than 60 years' experience in publishing product monographs, CPhA's in-house team of skilled XML and SPL content specialists have a proven track record with the pharmaceutical industry. Part of our established workflow processes, monographs are converted into SPL, subject to a rigorous QA comparison and reviewed by our editorial team for compliance, template requirements and XML tagging, and can also be submitted directly to Health Canada.



The bottom line

CPhA had a net deficit of \$768,000 in 2017. This is just under \$1,075,000 less than the surplus achieved in 2016. The driving factor in the decreased surplus was lower revenues and an increase in spending and support directed towards our strategic priorities.

Total revenue for 2017 decreased from 2016 by just over \$566,000 as a result of:

- Overall lower sales for two of our core product offerings of print and participation offset somewhat by higher e-sales.
- Lower investment and leasehold income.

We continue to have pressures on our current revenue streams and are investing in resources and capabilities to ensure that we are able to develop new revenue generating opportunities. This will allow us to continue to invest in stronger advocacy for the profession and new products and programs to benefit our Organizational Members, the individual pharmacists who belong to them and our Organizational Affiliates.

Total expenses for 2017 increased from 2016 by just over \$508,000 due mainly to:

- Salaries, benefits and professional development increased by approximately \$332,000 due mainly to higher restructuring costs as we continue to review our skills and capabilities to ensure that we are properly aligned in terms of achieving our strategic priorities.
- Professional fees and administration increased by approximately \$132,000 due mainly to increased costs related to analyzing the Pharmapod investment as well as increased costs due to restructuring.
- Amortization of tangible capital increased by approximately \$121,00 due mainly to increased capital expenditures in 2016 and 2017.
- Technology expenses increased by approximately \$110,000 due mainly to increased external support due to an employee retiring as well as increased solutions for Web conferencing.
- Marketing and business development expenses increased by approximately \$89,000 due mainly to having a market assessment done in relationship to our publishing business.

The above amounts were offset somewhat by the following expenses which were lower than 2016:

- Research and practice innovation expenses decreased by \$172,000 due mainly to completing the Blueprint/ Thought Leadership initiatives in 2016.
- Continuing Professional Development expenses decreased by \$61,000 due mainly to lower ADAPT costs.
- Printing and Distribution costs decreased by just under \$54,000 due mainly to lower printing and distribution costs for CPS.

Overall, at the end of 2017, CPhA remains in a solid financial position with net assets just under \$11,496,000.

Summary Financial Statements

Year ended December 31, 2017

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, 2017, 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, 2017.

We expressed an unmodified audit opinion on those financial statements in our report dated April 24, 2018.

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, 2017 are a fair summary of those financial statements, in accordance with the basis described in note 1.

Chartered Professional Accountants, Licensed Public Accountants

Ottawa, Canada

LPMG LLP

April 24, 2018

Summary Statement of Financial Position

December 31, 2017 with comparative information for 2016

	2017	2016
Assets		
Current assets:		
Cash and cash equivalents	\$ 6,009,181	\$ 9,627,221
Accounts receivable	923,696	574,253
Inventory	46,272	34,698
Prepaid expenses	390,827	418,910
	7,369,976	10,655,082
Investments	5,709,643	3,595,493
Tangible capital and intangible assets	5,839,195	5,712,743
	\$ 18,918,814	\$ 19,963,318
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 1,943,096	\$ 1,375,491
Deferred revenue	5,480,020	6,324,170
	7,423,116	7,699,661
Net assets:		
Unrestricted	1,363,920	2,535,752
Internally restricted	4,292,583	4,015,162
Investment in tangible capital and intangible assets	5,839,195	5,712,743
	11,495,698	12,263,657
	\$ 18,918,814	\$ 19,963,318

See accompanying notes to summary financial statements.

Summary Statement of Operations and Changes in Net Assets

Year ended December 31, 2017 with comparative information for 2016

	2017	2016
Revenue:		
Sales	\$ 7,891,816	\$ 8,151,023
Participation	4,328,072	4,453,246
Membership dues and conference	1,159,084	1,123,719
Sponsorship grants and programs	777,288	928,790
Building and investment	243,069	295,563
Continuing professional development (CPD)	238,797	252,202
	14,638,126	15,204,543
Expenses:		
Salaries, benefits and professional development	8,143,568	7,811,603
Printing and distribution	1,150,615	1,204,547
Technology	1,312,409	1,202,335
Membership services and conference	1,112,331	1,118,018
Professional fees and administration	926,468	794,092
Government relations and liaison activities	841,725	782,732
Amortization of tangible capital and intangible assets	713,666	592,856
Directors, executive and committees	478,922	524,219
Marketing and business development	561,963	473,455
Research and practice innovation	45,320	217,730
Continuing professional development (CPD)	99,228	160,485
Organizational development	19,870	15,622
	15,406,085	14,897,694
Excess of revenue over expenses	(767,959)	306,849
Net assets, beginning of year	12,263,657	11,956,808
Net assets, end of year	\$ 11,495,698	\$ 12,263,657

See accompanying notes to summary financial statements.

Notes to Summary Financial Statements

Year ended December 31, 2017

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)(I) 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, 2017.

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.

2. Subsequent event:

Subsequent to year end, the Association finalized a \$3 million investment in Pharmapod Limited, a private company based in Ireland, via a Convertible Debt. Pharmapod Limited is a provider of a medication error reporting platform that is already playing a vital role in improving patient safety and supporting pharmacists across the globe in tracking and reducing medication errors.

2017 Award Winners

Congratulations to our inspiring 2017 CPhA Award winners.



CRAIG PLAIN

Canadian Pharmacist of the Year

Craig Plain, a pharmacist at the Pier Health Resource Centre, leads a clinically-focused practice in Vancouver's Downtown Eastside, an area with high rates of homelessness, substance abuse, mental illness and overdoses. In the face of a national opioid epidemic, Craig's tireless commitment to some of the most vulnerable patients in the country is demonstrating the power that innovative community pharmacy can have in improving health outcomes for at-risk populations. Pier Health's model is designed to encourage long-term relationships with patients. "By putting the talk with the pharmacist first, we can spend more time upfront with the patient to listen to them, educate them and provide positive reinforcement," explains Craig.

CPhA CENTENNIAL LEADERSHIP AWARD

(sponsored by Scotiabank)



(Top Row Standing, L-R)

Jennifer Butler

University of Manitoba

Taylor Raiche

University of Saskatchewan

Raphaël Gagnon-Paradis

Laval University

Kristina Kozlovsky

University of Waterloo

Laurie Hudon-Germain

University of Montreal

(Front Row Seated, L-R)

Kyia Hynes

Memorial University of Newfoundland

Pierre Thabet

Dalhousie University

Stephanie Song

University of British Columbia

Alexander Mok

University of Toronto

Marline Aizouki

University of Alberta



BETTY HUTTCPhA Honorary Life Award



PAULA MACNEIL
CPhA Meritorious Service Award



PHILIPPE DE GRANDPRÉ
CPhA Patient Care Achievement
Award for Specialty Practice



JUDITH SOON
CPhA Patient Care Achievement
Award for Innovation (sponsored by
Green Shield Canada Foundation in
honour of Vernon Chiles)



MORENIKE OLAOSEBIKAN CPhA Patient Care Achievement Award for Health Promotion



ALLISON TARIOCPhA New Practitioner Award



CHERRY HUIDean George A. Burbidge Award



PAUL A.M. GREGORY &
ZUBIN AUSTIN
Canadian Pharmacists Journal (CPJ)
Best Paper of the Year Award

CPhA board of directors as of December 31, 2017



ALISTAIR BURSEY Chair



CHRISTINE HRUDKA Vice Chair & Pharmacy Association of Saskatchewan



JIM ARMOUR
Individual Director — Advocacy



NEIL CAMERON Alberta Pharmacists' Association



SUSAN MANSOUR Association of Faculties of Pharmacy of Canada



JOSEPH AMIEL Association québécoise des pharmaciens propriétaires



CHRISTINA TULK
Pharmacists' Association of
Newfoundland and Labrador



CAREY LAI Pharmacists Manitoba



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Pharmacy Association of Nova
Scotia



BRIAN WOODS Individual Director — Finance



BLAKE HANNA Individual Director — Health Informatics



MURRAY PERELMAN Individual Director — Legal



MARK DICKSON British Columbia Pharmacy Association



DENNIS ABUD New Brunswick Pharmacists' Association



CARLO BERARDI Ontario Pharmacists Association



JEANNINE MCQUAID Prince Edward Island Pharmacists Association

CPhA senior staff as of December 31, 2017

GLEN DOUCET

Interim Chief Executive Officer and Vice President, Public & Professional Affairs

HELEN LOVERDOS

Manager, Executive & Board Affairs

IRIS KRAWCHENKO

Senior Pharmacist Advisor

JUSTIN SCANLON

Vice President, Digital & Print Offerings

RICK LEACH

Vice President, Corporate Services

STEVE LUGTIGHEID

Vice President, Marketing, Sales and e-Commerce

CPhA staff as of December 31, 2017

Andrea O'Reilly Andrea Winters Andrene President Angela Barrett Angela Ross Anjana Raghuveer Ashley Holmes Barry Power Brigitte Coderre Chantal Landriault Chantal Perron Chantal Roy Chrisann Risser Christine Dalgleish Christine LeBlanc Christine Sanger Christoph Kapp Claudiane Thériault-Picard

Danielle Cousineau Darquise Leblanc Devyani Tupe Diana Chaar

Don Husereau Eboukele Aka Emilie Hebert Farah Danduchi Gaetan Baillargeon Geoff Lewis Gustavo Paguaga Heather Mohr Janet Maslin Jay Peak Joelle Walker Julie Lévesque Karine McKnight Kathleen Regimbald Kathryn Wood Kelsey Skromeda Kristina Belyea Lamya Arman Laura Léger Lindsay Radford Lise Quesnel

Louise Welbanks

Lvndon McPhail Lvnn Robertson Malcolm Nlep Margo Campbell Marie-Christine Baril Marilyn Ewing Marilyn Maynard Mark McCondach Michel Gaudette Monique Holmes Myriam Agudelo-Lebrun Noami Mattli-Lewis Paolo Pison Parveen Mangat Pascale Portelance Patricia Bouchard Paul Esteban Philip Emberley Renée Dykeman Roxanne Bisson Scott McElroy Shelita Dattani

Sonal Acharva Stephanie Venneri Sylvie Scott Tammy Quinn Tara Mason Tony Cheng Tracy Hume Tyler Gogo

Canadian Pharmacists Association

1785 Alta Vista Drive, Ottawa, ON K1G 3Y6

www.pharmacists.ca

