Membership, Benefits & Involvement

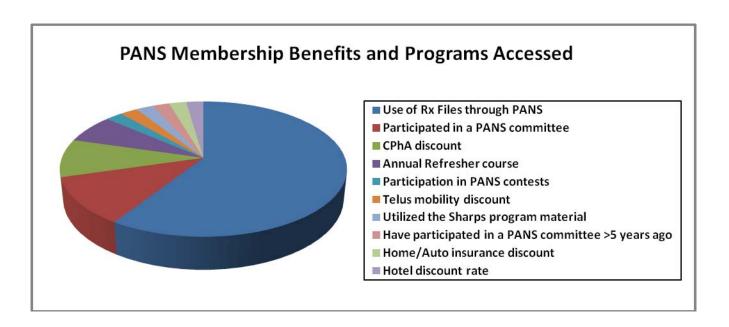
Student Active in Training		3.9%
Active in Training	2 3.	
		.0%
Other	1 1.	.5%
	1 1.	.5%
TOTAL 6	56 100	0.0%
2. Personal motivators for membership		
Access to relevant CE content	21 42	2.0%
Networking	19 38	3.0%
Advocacy for profession	5 10	0.0%
Access to Awards or Grants	2 4.	.0%
Access to publications	2 4.	.0%
Reduced PANS fees	1 2.	.0%
TOTAL 5	50 100	0.0%
3. Benefits important to members		
Provision of CE events 1	50 42	.1%
Advocacy activities 5	54 15	5.2%
Local/national resource material	37 10).4%
		.8%
	23 6.	.5%
Awards night - Travel voucher draws	21 5.	.9%
	15 4.	.2%
	12 3.	.4%
Insurance discounts	8 2.	.2%
Networking	1 0.	.3%
	56 100	0.0%
4. Willingness to Volunteer		
Branch level (52 responses)	37 71	2%
National level (48 responses)	23 47	'.9%
Reasons for not volunteering		
	21 80	.8%
Disagree with CSHP mandate	1	
Lack interest/desire	1	
Lack confident/knowledge	1	
	1	
Unable to travel	1	
TOTAL 2	26	
5. Sufficient sharing of Branch activities at AGM		
	46 97	.9%
6. Participation in Pharmacist Specialist Networks (PSNs)		
% belonging to at least one PSN (49 responses)	43 79	.3%
7. Access CSHP websites		
	78 74.	.30%
		40%

Membership, Benefits & Involvement cont.

8. Applied to a NS Branch Award (52 responses)	#	% of answers
% Yes	32	61.50%
Reasons for not applying		
Feel unqualified	4	50.0%
Not interested/supportive	3	37.5%
Lack of time	1	12.5%
TOTAL	8	100.0%
9. Recipient of a NS Branch Award (33 responses)		
% Yes	24	72.70%

PANS Activities and Questions

1. CSHP Members Holding Hospital practice ONLY PANS membership (53 responses)		
% Yes	41	77.3%
2. Plan to continue PANS membership (when no longer required for licensure) (49 responses)		
% Yes	10	20.4%
3. Participate on PANS committees (49 responses)		
% Yes	6	12.2%
4. PANS membership benefits/programs accessed (44 responses)		
Use of Rx Files through PANS	26	59.1%
Participated in a PANS committee	5	11.4%
CPhA discount	4	9.1%
Annual Refresher course		6.8%
Participation in PANS contests		2.3%
Telus mobility discount		2.3%
Utilized the Sharps program material		2.3%
Have participated in a PANS committee >5 years ago	1	2.3%
Home/Auto insurance discount		2.3%
Hotel discount rate	1	2.3%



Continuing Education

1. Sources for Continuing Education (138 responses)		
CSHP NS Branch CE events	42	30.4%
Internal hospital based CE offerings	31	22.5%
Preceptorship credits		16.7%
Dal CPE offerings	21	15.2%
Dal CPE: Building Blocks for Medication Management (2)		
Dal CPE: Drug Diversion (3)		
Dal CPE: Fall Refresher course (7)		
Dal CPE: Immunization and Injection Administration Training Program (5)		
Dal CPE: Minor Ailments (4)		
CSHP National CE events	18	13.0%
Atlantic Cardiovascular Conference	1	0.7%
IWK CE day	1	0.7%
Non CSHP organization offerings	1	0.7%
TOTAL	138	
2. Open to lunch time CE events (% Yes) - (48 responses) Reasons against lunch time CE events (6 responses)	81.2%	
Time factors/Insufficient time	83.3%	
3. Preferred delivery style	03.370	
Case-based (% Most preferred) - (47 responses)	63.8%	
Didactic (% Most preferred) - (48 responses)	35.4%	
Workshop (% Most preferred) - (47 responses)	34.0%	
	34.070	
4. Prefered method to access CE events		
In Person Live Event (% Preferred/strongly preferred) - (49 responses)		
Recorded Online Event (% Preferred/strongly preferred)- (50 responses)		
Self Study (48 responses)		
Virtually; Live event online (47 responses)	59.6%	
5. Current NS Branch CE Offerings (identified as membership benefits)		
CE with high profile speaker	37	23.3%
CE held in HRM	35	22.0%
CE plus food at same location	27 26	17.0%
CE with local speaker		16.4% 13.2%
CE plus dinner at restaurant CE held outside HRM		8.2%
TOTAL	13 159	100.0%
6. Preferred options to decrease costs associated with CE offerings		
CE events without food	42	33.6%
Hold AGM at non-hotel locations with less food		24.8%
Minimal fee for AGM		16.8%
Minimal fee for CE events		16.8%
Fewer CE events- maintain food		8.0%

TOTAL 125 100.0%

How to Attract and Retain Membership

Personal visit to various hospitals personally meeting hospital pharmacists, providing lunch and learn in person and asking the nonmembers personally what would draw them in.-Having less fees that go to the National CSHP Head office(A lot of money goes to

Be more education focused and not so much social. Food isn't always necessary.

Continue to have a promotional CE early in the year (note membership starts in June so maybe a promotional CE in the summer might be an idea...if not early fall will work too). Have speakers from other hospital sites do presentations (i.e. Yarmouth, Cape Breton)...I know this is sometimes hard to get them to do presentations:) Maybe have a special guest speaker every 2 to 3 years (i.e. high profile) and promote the CE to non-members. Promote the CE to community based pharmacists.

Continue to offer hospital specific high quality CEs and membership benefits such as decreased professional liability insurance

definitely could get more student members especially with community job market tightening more students will be interested in what hospital has to offer and membership in CSHP should be showcased as a chance to network. Also may want to consider a monthly payment plan?

Have a social event (i.e., wine tasting, food fair, harbour tour, bowling?)

Have discount on PANS applicable for members who work PRIMARILY in hospital but who do shifts in community as well. Offer some financial incentive for members to travel to HRM for meetings/CE. (not 'mileage' but a flat rate.)

Having promotions in hospitals where there is low membership. I believe we should concentrate on non-members currently employed in hospitals to promote the benefits and get feedback on why they are not members. I know there are events for students but since there are few hospital positions available when they graduate, we should reconsider where the highest likelihood is to get new members.

I still think we should host a wine tasting social...

I think the most important is the voice of members to attract new members. As well, any incentives to lessen the cost burden b/c of Society/ CSHP/ PANS dues

I think they do a good job already. Nothing to add at this time

I think we are doing a great job at advocacy/membership. Getting students interested in hospital practice earlier on has been our focus, and I do think there are a greater number of students pursuing residencies/Pharm D's than before. If we had a Pharm D program here, it may help increase numbers in future.

I think we need to promote our benefits to ALL NS hospital pharmacists. Maybe a one-pager, visually appealing showcasing some of the CE events of the last year and other benefits (access to National Guidelines, member discounts, available conferences, etc). Opening up CEs to non-members has never seemed to serve us well in the past; I think we are going to try that again this year. If it yields no results, I think we should abandon it as a promotional activity.

I think what they are doing is fine. I think people currently are watching what they spend. If hospital pharmacists could choose CSHP over PANS i think most would.

I thought the CE that was put on last year that was free for even non-CSHP members was a good way to show non-members what kinds of things are available/benefits for CSHP members.

I'm not sure, i think you're trying as hard as you can now

Include some just for fun social events?

Information about some key benefits and recent work done on pharmacists' behalf to promote or enhance their profession (via email, posters display in workplace, social media?)

Keep membership costs down

Look outside of HRM, CSHP is very QEII/HRM focused and there are a lot of other hospitals (more rural) who could use the support and education as well.

more advocacy for people who do not want to belong to pans

Not really sure - i think the PSNs and CEs are great and worth membership cost.

Offer open CE events (e.g., lunch time, no food)- more public relations to nonmembers

Provide malpractice insurance, more opportunities for CE

Unsure

CSHP NS Branch Membership Survey April 2013				