HOSPITAL PHARMACY IN ONTARIO

FALL ISSUE 2017

BRIDGING THE GAP

BRIDGING THE GAP BETWEEN THEORY AND PRACTICE FOR PHARMACY LEARNERS

INTRODUCTION

harmacy students must transition from theory-based learning in traditional classrooms to practicebased learning and its application in clinical placements. Practice-based learning is heavily integrated in both pharmacy programs in Ontario, consisting of the University of Toronto (UofT) and the University of Waterloo (UW). Clinical placements are introduced very early in both curriculums, with the Experiential Practice Experiences (EPE) rotations and cooperative placements within the first two years at UofT and UW, respectively, followed by advanced practice rotations during the last year of both programs. However, many students experience challenges translating the knowledge acquired in school into clinical practice.

Theory practice gap refers to the disparity between the theory and knowledge acquired in an educational setting and its subsequent application in practice. This is well described in nursing education literature (Calleja 2016). This principle can similarly be applied to pharmacy learners who must transfer the paper-

based care plans, introduced in the pharmacotherapy courses, that integrate disease states, patient-specific factors, identified drug-therapy problems and recommendations to real-life patients seen in clinical placements. To further complicate matters, learners must also consolidate other areas of the pharmacy curriculum in their placements, such as empathy, communication skills, and interprofessional skills, that are often not required in paper-based cases.

Strategies to promote successful knowledge translation in practice should be highlighted to pharmacy learners as they transition into the practice setting. Such strategies include practicing self-assessment, goal-setting, simulating clinical situations, and asking questions.

INTERPRETING FEEDBACK THROUGH SELF-ASSESSMENT

Verbal and formal written feedback from pharmacy preceptors is an important tool to promote clinical growth for learners during their training. Feedback is often required by accrediting bodies and is incorporated into all pharmacy training programs. Studies have demonstrated that students want and need feedback to improve their pharmacy practice (Cant and Cooper, 2011; Colletti, 2000). Despite the ubiquity of informal and formal feedback in pharmacy training, studies have demonstrated that students often find it difficult to understand or apply feedback to improve their practice (Motycka et al, 2010).

In order to better understand and apply feedback, trainees must actively selfassess their performance. Self-assessment can be defined as "...a process of formative assessment during which students reflect on and evaluate the quality of their work and learning, judge the degree to which they reflect explicitly stated goals or criteria, identify strengths or weaknesses in their work and revise accordingly" (Andrade and Du, 2007). This process allows for students to self-correct behaviour to improve their skills in clinical practice. Honing self-assessment skills will help students not only incorporate feedback during their training, but also facilitate continuous improvement as independent clinical practitioners.

NEXT

HOME

TABLE OF CONTENTS

- I Bridging the Gap
- 4 25-Years of Membership or Supporter Status
- 6 Journal Club Lake Ontario Chapter
- 7 Chapter News CSHP Ontario
 - Ottawa Valley

- 8 From Inpatient Pharmacy to GAIN a New Role
- 10 CSHP Ontario Branch Recognize Awards
- 15 Save the Date
- 16 Ontario Branch, Canadian Society of Hospital Pharmacists 69th Annual Conference
- 18 Ontario Branch 69th Annual Conference Annual General Meeting - Educational Sessions and Awards Ceremony



BRIDGING THE GAP ... continued

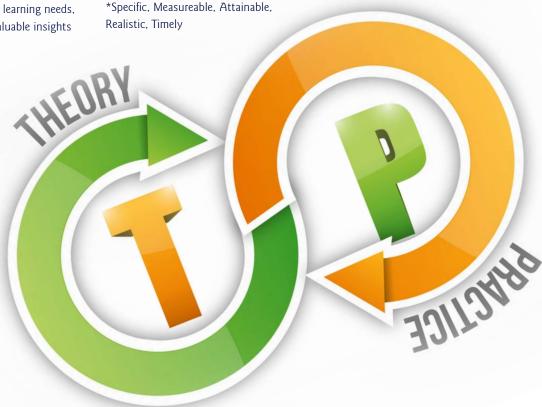
GOAL-SETTING BASED ON SELF-REFLECTION AND PRECEPTOR FFFDBACK

Self-assessment and preceptor feedback provide information to trainees about strengths and weaknesses, but not always how to change behaviour. The final piece in ensuring improvement in clinical practice is developing a plan to address opportunities for improvement. This final step is sometimes missing from formal evaluation processes and is left to trainees to determine how to approach areas for improvement. While trainees should actively reflect on their progress and articulate their own learning needs, preceptors often have valuable insights

about strategies to change behaviour to improve practice. Experienced preceptors will have observed several students with varied learning needs who have applied various strategies to correct behaviour. Trainees should utilize preceptors in setting SMART* goals for future success. Lastly, goals and strategies to achieve goals developed from past rotations should be reviewed upon starting any new placement. This will ensure accountability with both the learner and preceptor to focus on identified opportunities for improvement to advance their clinical practice.

SIMULATING CLINICAL SITUATIONS

One strategy that is being employed more frequently in pharmacy education programs is the use of simulations (Kane-Gill and Smithburger, 2011). In the aviation and space industries, simulations have been a critical part of training for decades. The use of simulations has also been shown to be effective in improving clinical skills in medical residents, physicians and nurses.





BRIDGING THE GAP ... continued

In pharmacy education, simulations can include a variety of types of activities, including counselling simulations, medication dispensing scenarios, role playing ethical dilemmas, and practicing different interviewing techniques.

When pharmacy learners are making the transition into practice through experiential rotations, it can be helpful to role play different situations or interactions with preceptors, in order to practice different approaches in a low-risk situation, as well as improve confidence and oral communication skills. This strategy is already being used in the classroom setting with good effect (Rao 2011). Unlike other formal simulations, role playing requires no physical equipment and is relatively easy to integrate into practice as specific situations arise. Using simulations during experiential rotations has the additional benefit of allowing learners to apply the simulation to a real-world scenario with a patient or healthcare provider.

There are some considerations that can maximize the effectiveness of role-play simulations during experiential rotations. The situation should be timely and directly applicable to the learner's responsibilities. This could be either an interaction which is planned (e.g. counselling a patient on a medication,

providing a drug information answer to a physician) or a recent interaction that the learner or preceptor feels could be improved for future situations.
Following a role-play, the preceptor should ask the learner how they think the interaction went, followed by feedback from the preceptor. The learner should also have the opportunity to try the role-play again, if they desire.

ASKING QUESTIONS

Another strategy that pharmacy learners often overlook is to ask questions when something is unclear. Often, fear of asking a "stupid question" can prevent learners from gaining valuable insight from pharmacists and other healthcare providers, including physicians and nurses.

CONCLUSION

There are multiple strategies that pharmacy learners can use to bridge the theory practice gap in experiential rotations. Preceptors are invaluable resources for directing learners on how to implement these strategies and translate knowledge into effective clinical care.

References

- Andrade H, Du Y. Student responses to criteria-referenced selfassessment. Assess Eval Higher Educ 2007;32:159-81.
- Calleja P et al. Feedback and clinical practice improvement: A tool to assist workplace supervisors and students. Nurse Educ Pract 2016;17:167-173.
- Cant RP, Cooper SJ. The benefits of debriefing as formative feedback in nurse education. Aust J Adv Nurs 2011:29.
- 4. Colletti LM. Difficulty with negative feedback: face-to-face evaluation of junior medical student clinical performance results in grade inflation . J Sug Res 2000;90: 82e87.
- Kane-Gill SL, Smithburger PL.
 Transitioning Knowledge Gained From Simulation to Pharmacy Practice. Am J Pharm Educ 2011;75(10):A210
- 6. Motycka CA et al. Self-Assessment in Pharmacy and Health Science Education and Professional Practice. Am J Pharm Educ 2010;74:5.
- 7. Rao D. Skills Development Using Role-Play in a First-Year Pharmacy Practice Course. Am J Pharm Educ 2011;75(5):A84

Respectfully submitted,

Lauren Ferruccio, PharmD, BSc, RPh; Teegan Ignacy, PharmD, BSc, RPh; Monica Sanh, PharmD, RPh



25-YEARS OF MEMBERSHIP OR SUPPORTER STATUS WITH CSHP - ONTARIO BRANCH

Keith Akada Susan Alderson Bernadette Almeida Marie Atlas

Carolee Awde-Sadler Marilyn Bacher Dana Bagan Toni Bailie Jana Bajcar R A Baker Bill Bartle John Baskette Charles Bayliff * Mario Bédard

Michele Bender

Philip Berkowitz

Catherine Bertho-Gebara Lawrence Bertoldo Vicky Bertrand Brian Beven Bonnie Birken Marybeth Blokker

Anne Marie Bombassaro Barbara Boulet Kathleen Boyle Michelle Bryant Lisa Buchner Christine Burchat Nancy Burge Nancy Caldwell

Andrea Cameron Karen Cameron Helene Carating

Gloria Castelli Brenda Chadwick Albert Chaiet Ernest Chan Jeff Chan Louisa Chan Rita Chan Clarence Chant Lauren Charbonneau Heather Chase Thomas Chin * Jenny Chiu Judy Chong Anna Chow

Ing Collins Margaret Colquhoun Janet Cooper Beth Corbett Céline Corman

Fannie Chu

Wendy Chui

Patricia Cornish William Cornish Marie Craig Marcia Crockett Della Croteau Mary Davies Natalie Dayneka Barbara de Rond

T W Dean Kathy Denesyk Paul Dennison * Dina Dichek

Carolyn Dittmar Lisa Dolovich Shelley Dorazio Leslie Duncan Lee Dupuis Mark Edlund Stephanie Edwards

Deborah Emery Ted Farkas Barbara Farrell Kathryn Fletcher Kim Fleury

Susan Fockler Patricia Fontana Leo Fortin Nathan Fox * David Freeman Esther Fung **Jill Garland** Pamela Garratt Cindy Garrick Michael Gaucher

Christine Gawlik Pauline Giancroce B Jane Gillespie * Nancy Giovinazzo Judy Glennie Frayda Gorenstein Anna Granic Julianne Greenall Paul Greenall Kathryn Griffiths

Bruno Hains

Henry Halapy Beverley Hales Lorna Hall

James Hamilton Yoko Hanabusa

Brian Hardy Charles Hartleib * Michael Hartnett

Lyne Hebert-Maillette Michael Heffer

Sandra Hicks George Ho Patricia Ho Joanne Holmes Harry Hopkins Maryann Hopkins Maryanne Hopkins **Edward Hughes** Sylvia Hyland Dolores Iaboni

Cynthia Jackevicius Valentina Jelincic Nancy Jenkins Neil Johnson Andrea Johnston Elizabeth Johnston Morris Joseph Chris Judd

Catherine Kan Sandra Karakolis Ann Kelterborn Heather Kertland

Patricia Kiernan

^{*} indicates deceased



25-YEARS OF MEMBERSHIP OR SUPPORTER STATUS WITH CSHP - ONTARIO BRANCH ... continued

Sharon King Brenda Kisic David Knoppert Sandra Knowles Chrystyna Kolos Krystyna Kozakowski Judy Krusky

Debbie Kwan
Rita Kwong
James Lam
Anne Marie LangBerkowitz
John Lebold
Annie Lee
Ming Lee
Sharon Lee
William Leslie
May Li

Kamilla Lipiec

Janice Little

Anne Longo Connie Lukinuk Patricia Macgregor Andrew Mah James Mann

Kathy Marley Kathryn McAulay John McBride Karen McCaul

Donald McCuen Kevin McDonald Shelley McKinney William McLean Darcy McLurg Tazmin Merali Michelle Methot Kenneth Michalko Debbie Milliken

Catherine Morrison John Murdoch Emily Musing Jane Nagai Marianne Nagata

Allan Mills

Michael Naylor Doris Nessim Virginia Newman Jane O'Brien Linda Oathwaite Yoko Ode

Debra Ohara Marie Paluzzi Martha Palys Fran Paradiso-Hardy

Thomas Paton Jennie Pichelli Susan Poirier Ken Potvin

Patricia Pracsovics John Pugsley

Anitasha Puodziunas Lalitha Raman-Wilms Pegi Rappaport Al Rasymas

Anita Reilly

Denise Reniers

Carol Repchinsky Vicky Reynolds Carol Risto

David Rosenbloom Ivan Ross

William Rowe Myrella Roy Stella Rupert Sister Grace Sauvé Cristina Scherf

Christyna Schillemore Melinda Schnalzer Sharon Schwendener Joseph Seliske

Janice Semelman Steven Semelman Winnie Tak-Wo Seto Debra Sibbald

Victoria Sills Linda Skinner Karen Smith Anne Snelleman Michael Spino Teresa Stanavech Vida Stankus

Susan Stansfield Ron Swartz William Sylvester Ken Theal

Peter Thornley
Michael Tierney
Sally Tierney
Marita Tonkin

Helena Trabulsi Sharleen Treleaven

Nancy Trimble | John Turnbull *

David U

Régis Vaillancourt

Pauline Vanderpluym Noela Vorsteveld

Sandra Walker Scott Walker

Barbara Watterworth Sharon Weinstein

Grace White

Bertha (Mary) Whyte Kristina Wichman

Albert Wiebe John Wiernikowski

Bill Wilson
Louisa Wilson
David Windross
Andrea Wist

Sharon Yamashita-Liddle

Nancy Young Cristina Zanchetta Rosemary Zvonar





^{*} indicates deceased



JOURNAL CLUB

CHAPTER CORNER - LAKE ONTARIO CHAPTER

ournal club is one of many learning tools that help pharmacists stay informed of some of the latest published literature that have important implications on front line practice, medication safety and hospital formulary systems. It also creates an environment for colleagues to share clinical pearls, discuss complex cases, question existing practices, and in the long run, integrate evidence and clinical experience into practice, to improve drug therapy outcomes. With these goals in mind, Lake Ontario East Chapter launched a journal club that has now been running for just over a year. Every month, pharmacists dial into a teleconference line and participate in a 30-minute facilitated discussion on a chosen article disseminated about 2 weeks in advance. Articles have included randomized controlled trials, meta-analyses, cohort studies, review articles, clinical guidelines, Health Product InfoWatch publications from MedEffect Canada, and invited commentaries on clinical practice. A number of these articles were chosen from CSHP's own publication, Canadian Journal of Hospital Pharmacy (CIHP), which is also a subscription benefit for current CSHP members. Since February 2016, pharmacists from the chapter including those practicing at Markham-Stouffville Hospital, Lakeridge Health, Ross Memorial Hospital and Peterborough Regional

Health Centre have engaged in fruitful discussions on the following topics:

February 2016: Toujeo vs. Lantus in glycemic control and weight gain **March 2016:** Subsequent Entry Biologics or 'biosimilars' and their implications on the hospital formulary

April 2016: CredibleMeds.org and assessing QT-prolonging risk of drugs in context of select clinical scenarios

May 2016: Considerations for intravenous to oral antibiotic stepdown June 2016: Idarucizumab (Praxbind®)

for dabigatran reversal

July 2016: Opioid discussions Part 1:
Preventing opioid overdoses in acute care
August 2016: Opioid discussions Part 2:
Naloxone kits and Ontario Drug Benefit's
delisting of certain long acting opioids
September 2016: Improving inhaler
technique for hospitalized patients with
chronic obstructive pulmonary disease
(COPD)

October 2016: Triple antithrombotic therapy – are we doing it right?

November 2016: Using direct oral anticoagulants (DOACs) in morbid obesity

January 2017: Use of potentially-inappropriate medications and their associated adverse effects in alternate level of care (ALC) patients

February 2017: A review of Health Product InfoWatch from the November and December 2016 issues



March 2017: Incretin-based antihyperglycemics and acute pancreatitis – is there a link?

April 2017: Teachable moments – I) clarifying penicillin allergies, and 2) managing insomnia in the hospital

Speaking from the experience of a facilitator, journal club has been a great and fun way to connect with colleagues both within and outside of our own practice sites, share clinical knowledge and experience, and challenge our current medication use systems and practices in order to facilitate better care for our patients. As Chapter Chair, I look forward to continuing this initiative and making it a worthwhile learning tool for our members.

Regards,

Vivian Lee, CSHP-OB Chapter Chair, Lake Ontario East





CHAPTER NEWS

CSHP - ONTARIO BRANCH - OTTAWA VALLEY

'd like to introduce myself to those who I have not yet had the pleasure of meeting in person. My name is Jessica Robinson and I am the Chapter Chair for the Ottawa Valley Chapter of the CSHP Ontario Branch.

I started as the Co-Chair in November 2015 and as of November 2016, I became the Chapter Chair. I have been a pharmacist at The Ottawa Hospital for the last 5 years and currently work in the Cancer Centre.

My goal is to prepare and disseminate a newsletter quarterly, to inform the membership of recent and upcoming CE events, and any other items of interest happening in our Chapter. Please feel free to submit to me via email any written pieces you would like considered for distribution within our Chapter and I will do my best to include it in a subsequent newsletter.

I am currently recruiting a small committee to assist me in my role as Chapter Chair. Committee members can help with the organization of CE events, Residency Night, publication of this newsletter and facilitate the organization of any other initiatives. Thank you to

Christine Weatherston, Nisha Varughese and Genevieve Goulet who have already volunteered to join the committee. Should you have an interest in participating, please send me an email as many hands make light work!

As part of CSHP Ontario Branch's succession planning, we prefer and endeavour to have two Co-Chairs in place for each chapter. As a Co-Chair, responsibilities include organizing Residency Night and other CE events, representing the Ottawa area at CSHP Ontario Branch meetings, and participating in monthly Chapter Chair Teleconferences, to name a few tasks. If you are curious about the position, please let me know and I can respond to any questions and provide you with the Terms of Reference for the position.

CSHP Ontario Branch publishes the HPO newsletter. In recent years, its publication has not been as consistent as we would like. The Ontario Branch Council is working hard to publish it quarterly this year. If you are interested in writing a piece for the HPO, sharing anything you feel would be intriguing to other CSHP Ontario members, please let me know.



Do you have an unique pharmacist position or are you part of a novel initiative that you think others would be interested to learn about?

Please send me an email with a brief description and you may be our next "Practice Spotlight Pharmacist"!

Jessica Robinson, CSHP-OB Chapter Chair, Ottawa Valley



FROM INPATIENT PHARMACY TO GAIN

A NEW ROLE

have had an opportunity to take on a unique challenge for pharmacists. I now serve as a geriatric assessor in a GAIN clinic. It has been very rewarding; all patients, all day and the intellectual challenge of learning to do cognitive testing.

Things I have learned so far—Tai Chi is of validated benefit to preserve function in Parkinson's disease; the MMSE is easy to administer but does not pick up subtle deficits; delirium is a medical emergency often unrecognized and therefore worsened decreasing the likelihood of returning to baseline; and dementia requires both cognitive and functional impairment.

The CE LHIN advertises: GAIN Geriatric Clinics are designed to care for high risk seniors (generally aged 75+) who are living at home or in a retirement residence; have multiple complex medical, functional and psychosocial problems impacting their level of independence; a recent unexplained loss of functional independence or recent health or functional decline or are at risk for falling or multiple/ frequent falls.

The team works collaboratively with the Geriatric Emergency Management (GEM) Nurses and with other professionals within the Emergency Department (ED) to identify appropriate seniors who will benefit from the services provided at the clinic. Other seniors who may benefit from the clinic services could be identified during hospitalization and would be referred to the clinic on discharge from hospital. Primary Care Providers (Physicians and Nurse Practitioners) also identify seniors who could benefit from the specialized clinic services and potentially avoid a visit to the Emergency Department.

Seniors are assessed and treated as needed by a multidisciplinary team of occupational and physio -therapists, social worker, pharmacist and CCAC case manager. Physical examination and prescription is provided by a nurse practitioner or geriatrician. Recommendations and treatment plans are created and shared with the senior and primary care provider. During an assessment, one allied health professional serves as a primary assessor and completes a quite detailed



Carolee Awde-Sadler

assessment form. When scheduling, we try to match the stated concern with the professional specialty, but patient and caregiver availability and the length of the assessments (2-3 hours with the client and another hour reviewing the information provided by the referring professional, preparing the chart and documenting) means this cannot always be achieved. During an assessment, we will consult each other as needed. A family member or caregiver is expected to attend each visit so that we can have an accurate picture of the client's ability to function, and sometimes the patient is taken out for cognitive testing by another team member so that the family can speak freely.





FROM INPATIENT PHARMACY TO GAIN ... continued

A NEW ROLE

Common recommendations are updating hearing aids, glasses and dentures, regular use of acetaminophen for chronic pain, addition of Vitamin D, other treatment for prevention of osteoporosis, elimination of drugs on the Beers and STOPP criteria, and referral to community agencies and services. We encourage exercise of body and mind,

This feels like a role I have worked 30 years to prepare for—my experience in palliative care, renal disease, diabetes education and working with multidisciplinary inpatient medicine teams has all been of use. It is a joy to go to work each day, knowing that at the end of the day I will have made a positive difference in many lives.

Carolee Awde-Sadler,

Peterborough Regional Health Centre, Palliative Care Consultant/Hospice Peterborough CSHP-OB Co-chair Membership Committee



CSHP - ONTARIO BRANCH

WOULD LIKE TO RECOGNIZE THE FOLLOWING RECIPIENTS OF RESEARCH GRANTS FROM THE CSHP FOUNATION AND / OR NATIONAL AWARDS

2016 RESEARCH GRANT RECIPIENT

\$13,989

Presented to:

Bradley J. Langford

Consultant Pharmacist, Antimicrobial Stewardship, Public Health Ontario

Antimicrobial Stewardship Implementation and Antibiotic Use in Ontario Hospitals



2016 PHARMACY LEADERSHIP ACADEMY (PLA) SCHOLARSHIP RECIPIENT

Presented to:

Mayce Al-Sukhni

Centre for Addiction and Mental Health

Mayce is a pharmacist at the Centre for Addiction and Mental Health (CAMH) in Toronto. In addition to her patient care duties, she is a Pharmacy Education Coordinator at CAMH and has served as a preceptor to many pharmacy students and residents. She is also an Adjunct Lecturer at the University of Toronto, where she has been a facilitator in various courses. Mayce is passionate about the profession of pharmacy and is an active member of both CSHP and ASHP, serving on several committees within these organizations.



THE FIRST EDUCATION SABBATICAL GRANT

Presented to:

Sherilyn Houle

Assistant Professor

Sherilyn's research interests are on the role of the pharmacist as a patient care provider, especially related to expanded scope activities such as prescribing and administering injections, and the resulting clinical and economic outcomes of these activities.



10

Ш

CSHP - ONTARIO BRANCH

WOULD LIKE TO RECOGNIZE THE FOLLOWING RECIPIENTS OF RESEARCH GRANTS FROM THE CSHP FOUNATION AND / OR NATIONAL AWARDS

HOSPITAL PHARMACY STUDENT AWARD

CO-SPONSORED BY THE CANADIAN SOCIETY OF HOSPITAL PHARMACISTS (CSHP) AND THE CANADIAN ASSOCIATION OF PHARMACY STUDENTS AND INTERNS (CAPSI)

Presented to:

Erin Alexandria Cicinelli. BScH

Erin Cicinelli is a fourth-year PharmD student at the University of Toronto. She grew up in Bolton, a small town north of Toronto and completed her Bachelor of Science degree at the University of Toronto in 2013. She chose to pursue a career in pharmacy after witnessing the important role that pharmacists play in patient care while working in an independent pharmacy in her hometown.

Erin feels fortunate to have gained exposure to many areas of the multifaceted profession of pharmacy. She has completed clinical rotations in hemodialysis, general medicine, and intensive care at the University Health Network. In addition, she has worked on pharmacoepidemiology and pharmacy practice research studies and presented her work at the OPA and CSHP Professional Practice Conferences. In the summer of 2016, she completed a rotation at St. Mary's Hospital Lacor in Uganda where she worked with the Pharmacy Department to develop protocols and collect data for quality improvement projects.

As a pharmacy student, Erin became involved in various leadership, advocacy, and charity initiatives. In 2014, she founded a group that organizes volunteer opportunities in the community to enhance students' awareness of the social determinants of health. She has served terms on Governing Council at both the university and faculty levels, representing the student voice on curriculum and student life matters. She is currently President of the fourth-year class and works with her council to plan activities that enhance the social and academic experience of her classmates.

Erin feels honoured to have been selected as this year's recipient of the Hospital Pharmacy Student Award. She is grateful to the research supervisors, preceptors, and staff members at her faculty who have mentored and supported her throughout her pharmacy education. Outside of pharmacy, Erin's interests include playing soccer, hiking, and enjoying the vibrant Toronto arts and culture scene. She hopes to one day practice as hospital pharmacist and incorporate patient care, research, and teaching activities throughout her career.

The Hospital Pharmacy Student Award is given to a pharmacy student who shows promise as a future hospital pharmacy practitioner through student activities or experiential training in direct patient care, research, or education. The selected candidate exhibits eagerness, dedication, and a positive attitude toward academic learning and toward the profession and practice of hospital pharmacy.



CSHP - ONTARIO BRANCH

WOULD LIKE TO RECOGNIZE THE FOLLOWING RECIPIENTS OF RESEARCH GRANTS FROM THE CSHP FOUNATION AND / OR NATIONAL AWARDS

MANAGEMENT AND LEADERSHIP BEST PRACTICE AWARD

ASSESSMENT OF THE IMPACT OF PHARMACY LEARNERS ON ESSENTIAL PATIENT CARE PROCESSES (COMPLETED AT UNIVERSITY HEALTH NETWORK, TORONTO, ON)

Presented to:

Matthew Chow, Philip Lui, Karen Cameron, Sean K Gorman, Laura Murphy, Jennifer Harrison, Andrea Cameron, Kent Toombs, Andrea Meade, Amita Woods, Lalitha Raman-Wilms, Richard S Slavik, Sean Spina, and Olavo Fernandes

Sponsored by Apotex Inc.

PHARMACOTHERAPY BEST PRACTICES AWARD

DEVELOPMENT, EVALUATION AND VALIDATION OF A SCREENING TOOL FOR LATE ONSET BACTEREMIA IN NEONATES (COMPLETED AT SUNNYBROOK HEALTH SCIENCES CENTRE, TORONTO, ON)

Presented to:

Melanie Cormier, Sandra A N Walker, Marion Elligsen, and Dolores Iaboni

Sponsored by Pfizer Canada Inc.

12



CSHP - ONTARIO BRANCH

WOULD LIKE TO RECOGNIZE THE FOLLOWING RECIPIENTS OF RESEARCH GRANTS FROM THE CSHP FOUNATION AND / OR NATIONAL AWARDS

PHARMACOTHERAPY BEST PRACTICES AWARD

A CASE-CONTROL STUDY ANALYZING MANNITOL DOSING FOR PREVENTION OF CISPLATIN-INDUCED ACUTE NEPHROTOXICITY (COMPLETED AT UNIVERSITY HEALTH NETWORK, TORONTO, ON)

Presented to:

Patwant Dhillon and Pamela Ng

Sponsored by Sandoz Canada Inc.

SPECIALTIES IN PHARMACY PRACTICE AWARD

DEVELOPMENT OF A NEW WEB-BASED RESOURCE FOR MANAGING HIV AND HEPATITIS C DRUG THERAPY/DRUG INTERACTIONS (COMPLETED AT UNIVERSITY HEALTH NETWORK, ALBERTA HEALTH SERVICES, AND THE OTTAWA HOSPITAL)

Presented to:

Alice Tseng, Michelle Foisy, and Pierre Giguère

Sponsored by **Pharmascience Inc..**

CSHP NATIONAL AWARDS

CSHP AWARDS COMMITTEE WILL SOON INVITE APPLICATIONS AND NOMINATIONS FOR THE 2017-2018 NATIONAL AWARDS PROGRAM. THE GOAL OF THE AWARDS PROGRAM IS TO IMPROVE PATIENT OUTCOMES BY PROMOTING EXCELLENCE IN THE PRACTICE OF PHARMACY THROUGHOUT HOSPITALS AND OTHER COLLABORATIVE HEALTHCARE SETTINGS. THE AWARDS ARE PRESENTED TO CSHP MEMBERS (PHARMACISTS) IN RECOGNITION OF THEIR PROFESSIONAL DEDICATION. THE HOSPITAL PHARMACY STUDENT AWARD IS PRESENTED TO A STUDENT PHARMACIST. THE PROGRAM INCLUDES GENERAL AND SPECIAL AWARDS.

GENERAL AWARDS

- Management and Leadership Best Practice Award
- New Technology Award
- Patient Care Enhancement Award
- Pharmacotherapy Best Practices Award
- Safe Medication Practices Award
- Specialties in Pharmacy Practice Award
- Teaching, Learning and Education Award

SPECIAL AWARDS

- Distinguished Service Award
- Isabel E. Stauffer Meritorious Service Award
- New Hospital Pharmacy Practitioner Award



Consider applying for the **New Technology Award**. This award is our latest offering, and it recognizes CSHP Members who have contributed significantly to the development, implementation, and/or evaluation of new technology in an organized healthcare setting and meeting one or more of the following criteria: promotes a safe and effective adoption of this new technology at other health facilities in Canada; provides a comprehensive review of the technology within their organization. This review may include a systematic approach to implementation, monitoring resource requirements and/or other outcomes attributable to uptake of the technology among staff and patients; may include a comprehensive review of the potential risks and benefits that the new technology introduces to the practice setting.

For the **GENERAL AWARDS** program, you may submit two projects for consideration (each project is eligible for two awards, for a maximum total of four award submissions) using the online application for general awards. For each **SPECIAL AWARD**, applicants or nominators must complete the specific online nomination for the intended award.

Once the program has opened, a call for awards will be issued by email and in the eBulletin. Criteria, application and nomination forms will be available at the CSHP website: cshp.ca/programs/awards/national e.asp

Application and nomination forms, as well as the relevant signature forms, are due by **September 5, 2017**, except for applications and signature forms for the Hospital Pharmacy Student Award, which are due by **September 30, 2017**.

For award enquiries, please contact: Membership & Awards Administrator Phone: 613-736-9733, ext. 222 Fax: 613-736-5660 E-mail: awards@cshp.ca

atest
intly to the organized notes a safe Canada; ion.

and ole at s., are for the 117.

ator shp.ca

BACK NEXT HOME

14

SAVE THE DATE!

FOR THE 69TH ANNUAL CSHP ONTARIO **BRANCH AGM/ EDUCATION SESSIONS**

Saturday, November 18, 2017

Please note that the 2017 CSHP Ontario Branch AGM/ Education Sessions will take place this fall on Saturday, November 18, followed by our Awards Night.

The Education Session and AGM will be held at the Leslie Dan Faculty of Pharmacy at the University of Toronto. The Awards Ceremony will be a sit down dinner held at The University Club of Toronto at 380 University Avenue.

Once again the Education Committee members are striving to bring you exciting educational sessions and valuable workshops. Please save the date and check out the brochure information about the AGM/Educational Sessions on the pages which follow.

Vivian Law Chair, Education Committee Ontario Branch CSHP

15





Ontario Branch, Canadian Society of Hospital Pharmacists 69th Annual Conference • November 18, 2017 Faculty of Pharmacy, University of Toronto, Toronto, ON

2017 ANNUAL CONFERENCE REGISTRATION FORM

| Please complete the following form and so Registration Information (Nar | end to CSHP by Fric ne badge will indicat | | | note early bird o | | h, 2017. Please print clearly | |
|---|---|------------------------|---|-------------------|-------------------------------|---|--|
| registration information (Nat | ne bauge will indicat | e tilis illioilliatioi | 11.) | | | riease print dearry | |
| CSHP Membership Number: | | | | | | | |
| First Name: | Initi | al:Las | st Name: | | | | |
| Organization: | | Tit | le: | | | | |
| Preferred Mailing Address: Business □ | | | | | | | |
| City: | State/F | Province: | Postal Code: | | | | |
| Telephone (W): | Fax: | | Telephone (H): | | | | |
| Email: | | | | | | | |
| | CSHP Members | | Non-Members | | Student/ Resident/Technicians | | |
| AGM FEES (Please circle appropriate rate) | Early | Late | Early | Late | Early | Late | |
| Education Program Only | \$70 | \$90 | \$105 | \$125 | \$35 | \$50 | |
| Awards Night Dinner Only | \$75 | \$85 | \$75 | \$85 | \$35 | \$50 | |
| Full Registration (includes Education Program and Awards Night Dinner) | \$130 | \$160 | \$160 | \$190 | \$65 | \$90 | |
| Registration Fee (from above) | \$ | Place an (choose of | | eside the work | shop you will be a | ttending | |
| ☐ Please add guest for Award Dinner | \$75.00 | ☐ A: S | A: Study Design, Data Collection, and Analysis: Practical Tips & Tools for Pharmacists | | al Tips & Tools | | |
| Name of Guest: | | □ B: A | diustina Phenvto | in Dosage In Co | omplex Patients: H | ow to Win | |
| 13% HST | \$ | Friends a | Friends and Influence Patient Outcomes | | | | |
| Total Enclosed: | \$ Side effe | | C: The Usual and Unusual Suspects: Management of Interactions and le effects of Psychiatric Medications | | | | |
| | | | Planning and Design of Sterile Compounding Facilities: Case Studies W | | | | |
| ☐ I am enclosing a cheque payable to | Ontario Branch, CS | HP. | | | | | |
| ☐ Please charge my VISA ☐ MASTE | ERCARD 🗖 or AME | EX 🗖 #: | | | | | |
| Expiry Date: | Signature of Car | rdholder: | | | | | |
| If you have a serious food allergy or di | | | | | | | |
| Emergency Contact: | | - | | | | | |

AGM: Registration and Fee Information

- Fees are payable to the Ontario Branch, Canadian Society of Hospital Pharmacists by cheque, VISA or MasterCard and MUST accompany
 this form. All fees are subject to 13% HST.
- CSHP accepts faxed registrations for those wishing to pay by credit card (in this case, please do not mail original form). To qualify for the early bird fees, registrations must be post-marked or faxed (with payment) on or before October 13th, 2017. Cheques post-dated after this date will not be eligible for the early bird fee. Confirmations will be e-mailed within two weeks of receipt of registration.
- Students / Residents are defined as undergraduate students and those registered in residency training programs.

Cancellation Policy

- Registrations may be cancelled, in writing, without penalty up to October 13th, 2017.
- No refunds will be made after October 13th, 2017.

Photo Release

• By registering for the Ontario Branch, CSHP 69th Annual Conference, you have provided your release for the free use by Ontario Branch, CSHP for promotional purposes of any photographs taken of you or in which you may be seen during the meeting.

Fresenius Kabi Travel Grant Reimbursement for CSHP Members

- Ontario Branch CSHP is pleased to offer once again, to all *current Ontario Branch CSHP members*, reimbursement for travel and accommodation expenses incurred to attend the Ontario Branch AGM/Education Sessions!
- There will be up to \$250 provided to members who complete the attached Expense Claim Form and return it to Anne Stacey at the registration desk. Please note this is available on a 'first come-first serve' basis with a total of \$6,500 available from the Fresenius Kabi Travel Grant.

Please return registration to:

Anne Stacey, Ontario Branch Executive Assistant
Canadian Society of Hospital Pharmacists
30 Concourse Gate, Unit #3, Ottawa, ON K2E 7V7
Telephone: (613) 736-9733, Ext. 4 • Fax: (613) 736-5660 • E-mail: astacey@cshp.ca

For more information contact:

AGM & Education Sessions: Vivian Law at <u>Vivian.Law77@gmail.com</u>
Awards Program: Cathy Burger at <u>cathy.burger@utoronto.ca</u>

Interested in becoming a CSHP member? If so, ask about our 'New Member' incentive and discount programs.

Contact Robyn Rockwell

CSHP Membership Administrator

Telephone: (613) 736-9733, Ext. 222 * Fax: (613) 736-5660 * Email: rrockwell@cshp.ca

Or check out the CSHP website for membership information at www.cshp.ca

cshp 🖶 scph

Ontario Branch 69th Annual Conference



Annual General Meeting Educational Sessions and Awards Ceremony

SATURDAY, NOVEMBER 18, 2017 Education Sessions & AGM Leslie Dan Faculty of Pharmacy

| 0800 - 0830 | Registration & Pancake BreakfastATRIUN | V I |
|--|---|------------|
| 0830 - 0835 | Opening RemarksPB B150 |) |
| 0835 – 0920 | What's New in Cardiology – Evidence-based UpdatesPB B15 Kori LeBlancBScPhm, ACPR, PharmD, Cardiovascular Pharmacotherapy Specialist and Research Coordinator, OpenLab and Department of Pharmacy, University Health Network (UHN) | |
| 0920 – 1005 | Portal Hypertension: A Management UpdatePB B150 Sharon Yamashita, BScPhm, ACPR, PharmD, FCSHP, Clinical Coordinator, Critical Care, Sunnybrook Health Sciences Centre | 0 |
| 1005 - 1020 | Coffee BreakATRIUN | 1 |
| 1020 – 1030 | How Can the CSHP Foundation Best Serve CSHP MembersPB B15 Monique Pitre, RPh, BSc Pharm, FCSHP, Chair CSHP Foundation & Pharmacist Trustee | 0 |
| 1030 - 1130 | Panel Discussion: Cannabis - What's Hot, What's New and What All Pharmacists Ought to Know |) |
| 1130 – 1145 | Exciting Update #1: Transition of Care: Lessons Learned from Medication Incident Reporting and Analysis | |
| 1145 - 1230 | Annual General MeetingPB B15 | 0 |
| 1230 – 1330 | LunchATRIUN | Л |
| 1330 – 1445 | Workshops: | |
| Вс | udy Design, Data Collection, and Analysis: Practical Tips & Tools for PharmacistsPB 255 assem Hamandi, RPh, BScPhm, MSc, Drug Information Coordinator, University Health etwork | 5 |
| In Bri De _l Les | djusting Phenytoin Dosage In Complex Patients: How to Win Friends and fluence Patient OutcomesPB 450 fan G. Hardy, PharmD, FCSHP, FCCP, Coordinator - Education and Clinical Programs, partment of Pharmacy, Sunnybrook Health Sciences Centre, Associate Professor (Status), file Dan Faculty of Pharmacy, University of Toronto | 0 |
| • • | ne Usual and Unusual Suspects: Management of Interactions and Side effects of sychiatric MedicationsPB B150 | 0 |

Virginia C. Fernandes, HonBSc, PharmD, Clinical Practice Leader, Psychiatry, Department of Pharmacy, Mount Sinai Hospital, Toronto /Adjunct Faculty, Leslie Dan Faculty of Pharmacy, University of Toronto

| (D) Planning and Design of Sterile Compounding Facilities: Case Studies ReviewPB 120 Stephen M. Black, Project Manager, Infrastructure Planning, University Health Network | | | | |
|--|---|--|--|--|
| 1445 - 1500 | Coffee BreakATRIUM | | | |
| 1500 - 1600 | Updates in Practice for Endocarditis, HAP/VAP and C.Difficile | | | |
| 1600 – 1615 | Exciting Update #2: Drug Coverage Pearls for the Hospital PharmacistPB B150 Souzi Badr, BScPhm, PharmD, ACPR, RPh, Toronto Rehab, University Health Network | | | |
| 1615 - 1700 | Recent Updates in Diabetes Practice | | | |
| 1700 - 1715 | Closing RemarksPB B150 | | | |

CSHP Ontario Branch Awards Dinner

Sponsored by Sterimax

(Separate registration required)

The University Club of Toronto 380 University Avenue

1900 – 2230 **Buffet Dinner and Awards Presentations**

The University Club of Toronto, Main Dining Room

2017 CSHP Ontario Branch Annual Conference Leslie Dan Faculty of Pharmacy Sponsored by:



















2017 CSHP Ontario Branch Awards Dinner Sponsored by:

STERIMAX INC.















The HPO Newsletter is supported by TEVA and published on behalf of the Ontario Branch, Canadian Society of Hospital Pharmacists. All published articles including editorials and letters reflect the opinions of its contributors and not necessarily representative of TEVA, the editor, nor CSHP.



TevaCanada.com

BACK HOME

HOSPITAL PHARMACY IN ONTARIO

EDITOR

Samantha Yau **Baycrest Health Sciences** Toronto, ON Email: syau@baycrest.org

COMMUNICATIONS COMMITTEE

Samantha Yau Chair

Hayley Bennett

CREATIVE DESIGN

Designed by TEVA Creative Services

Design Rework & Layout Brian Graves BriKen Graphic Design