IN REVIEW

HOSPITAL PHARMACY IN ONTARIO

SUMMER ISSUE 2024

Canadian Society of Hospital Pharmacists



Société canadienne des pharmaciens d'hôpitaux

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NOTE FROM THE EDITOR

ello CSHP OB members! This is Wei Wei. I took over the position of Communications Committee Co-Chair and The HPO Editor from Mira Maximos in September 2023. Mira has been a very active member of CSHP OB, having written for The HPO, hosted webinars, and delivered educational sessions at the Professional Practice Conference in April 2024, to name a few. I am honoured to be entrusted with this position and continue her great work.

A lot of personal and professional growth have happened for me over the past year. Unfortunately, due to unforeseen circumstances, the Winter and Spring issues of The HPO had to be postponed. In this Summer 2024 issue, I aim to capture the many activities and endeavours that have happened at CSHP OB and National Board since the start of 2024, and highlight the efforts by our members in advocacy, outreach, professional development, and more. As an early-career pharmacist just completing residency training, I am amazed by this richness of activities, and am excited to be part of this changing profession. Please find the Summer 2024 issue hereby brought to you by the Communications Committee. We apologize for any inconvenience due to the delays, and we thank you for your patience and your readership.



Sincerely,

Wei Wei Co-Chair, Communications Committee | Ontario Branch

Canadian Society of Hospital Pharmacists | Société canadienne des pharmaciens d'hôpitaux www.cshp-scph.ca/ontario Facebook | X (Twitter) Instagram | LinkedIn



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[CURRENT PRESIDENT'S ADDRESS]

t has been an honour to be in the role of President of the Ontario Branch since November 2023. I would like to thank the entire council and presidential officers for all their contributions to the branch and the profession. Our membership is proud to include pharmacists and pharmacy technicians from hospital and family health team settings.

CSHP-OB has been focusing on professional excellence offering a variety of education opportunities and advocacy in navigating healthcare system challenges. In order to serve our members better, council has approved a new CSHP-OB Advocacy Committee, with its own membership comprised of Pharmacy leaders including pharmacist and pharmacy technician managers and directors, northern hospitals, family health teams, pharmacy residents and students. The Committee has its own email address to capture members' needs, advocacy.ob@cshp.ca.

We are utilizing CSHP-OB's voice to advocate for health human resources, consulting on government policy changes, promoting hospital pharmacy at our universities and colleges, and to collaborate with our healthcare partners, like OHA, OPA, OCP, and the Ontario Hospital Pharmacy Director's Forum (OHPDF).

We value the dedication and resilience of each and every one of you and how you are making a difference in the lives of your patients. The time is now, please join our CSHP community at the Council level to help us make the changes needed. Check out the website for CSHP-OB Volunteer opportunities.

Thank you,

Andrea Wist, RPh, BScPhm, MBA President | Ontario Branch Canadian Society of Hospital

Pharmacists | Société canadienne des pharmaciens d'hôpitaux obpresident@cshp.ca www.cshp-scph.ca/ontario Facebook | X (Twitter) Instagram | LinkedIn

utilizing CSHP-OB's voice

HOSPITAL PHARMACY IN ONTARIO

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30 impasse Concourse Gate, Unit/unité #3, Otlawa, ON, K2E 7V7 Tel/Tél: 613.736.9733 Fax/Télec: 613.736.5660

advocacy orisation ?

Health Workforce Regulatory Oversight Branch Nursing and Professional Practice Division 438 University Avenue, 10th floor Toronto, ON MSG 2K8

Delivered by email: Regulatoryprojects@Ontario.ca

Re: Ontario College of Pharmacists' Proposed Regulation Amendments

obpresident@cshp.ca.

Sincerely, Andrea Wist, President, CSHP-OB

For any further questions or clarifications, please feel free to contact me directly at

Regarding **IPG requirements, page 8, under rationale**, it states that IPG are required to have a university degree. This should be clarified to say 'a university degree in pharmacy'. The language in the proposed new clause is correct.

Re: Quality Assurance Part X, Page 35. We are supportive of pharmacy technicians be included in the quality assurance program and that both pharmacists and pharmacy technicians will shift from an hourly reporting of practice (currently 600 hours during 3 years of practice) to a self-declaration in conjunction with practice-based assessment.

In regards to changes in the **two-part register**, CSHP.OB agree that pharmacy technicians should be eligible for either Part A or Part B registration. CSHP.OB does query whether the 2 part register is still warranted and aligns with other healthcare professional colleges and pharmacy colleges in other provinces.

CURRENT PRESIDENT'S ADDRESS... continued

Société canadienne des

Canadian Society of Hospital Pharmacists Pharmaciens d'hôpitaux

On behalf of the Ontario Branch of the Canadian Society of Hospital Pharmacists (CSHP-OB), we appreciate the opportunity to provide feedback on the proposed regulation amendments in which Ontario College of Pharmacists hopes to streamline standards and qualifications for certificates of registration and minimum requirements for the quality assurance program.

The CSHP-OB represents Ontario pharmacy professionals, both pharmacists and pharmacy technicians practicing in collaborative healthcare settings, such as hospitals, long-term care, and primary care teams.

In regards to the **changes in the classes of certificates of registration**, we support removing the registered pharmacy student class. This registration was only used for pharmacist students as pharmacy technicians only had one member type.

Ø

Legislative Building Queen's Park Toronto, Ontario

Queen's Park Toronto (Ontario) M7A 1A1

Édifice de l'Assemblée législative

M7A 1A1

Premier of Ontario Premier ministre

Canadian Society of Hospital Pharmacists-Ontario Branch

Thank you for your follow-up email about hospital pharmacists and the Public

I've sent your email to the Honourable Sylvia Jones, Minister of Health, for her review

de l'Ontario

February 6, 2024 Ms. Andrea Wist

obpresident@cshp.ca

Thanks again for writing.

all

Sincerely,

Doug Ford

Premier

President

Dear Ms. Wist:

With regards to **adding an intern designation for pharmacy technicians**, we are in agreement as long as the Intern technician terminology can be changed to intern Pharmacy Technician to coincide with their professional designation. This will decrease confusion between other allied health professionals. In the with this change, we would suggest adding the word Pharmacist to the Intern designation. This **Intern Pharmacy Technician class** will allow for hospitals to hire pharmacy technician students directly from colleges immediately post-graduation after they register as an Intern Pharmacy Technician and this supports them to practice at entry-level, but prior to completing all practical assessmentiarilarianing.



PAST PRESIDENT'S ADDRESS

hank you. It truly has been a great honour to serve as the CSHP Ontario Branch president over the past year. Since the pandemic, the positive impact and value of the pharmacy profession brings to our patients and healthcare system were undeniably evident. Through both temporary and permanent regulatory and legislative changes, we are able to do so much more now than just a few years ago. Recognizing the barriers posed by various acts and regulations, the Ontario Branch continues to advocate for scope of practice optimization in the hospital and collaborative care settings through proposing regulatory amendments. We have written letters to government officials and are awaiting follow up. In addition, we have also responded to open consultations on expansion of scope for midwives and OCP

documentation guidelines. Our responses could be found on the CSHP OB advocacy page.

Hospital pharmacy continues to experience ongoing health human resources challenges. Earlier this year, we conducted a survey to look at the current situation and retention and recruitment strategies across the province. We have discussed the findings with our partners, such as the OHA. OCP. and OPA and continue to work collaboratively with these partners on addressing HHR issues. The branch has since created a HHR working group aimed to develop materials as well as further investigating how to highlight and attract talent to hospital pharmacy.

We also have branch representatives attending meetings on provincial digital health initiatives such as axe the fax and comprehensive drug profile strategy.

In terms of education events and membership engagement, our OHPMS Committee developed the first leadership development webinar series which was extremely well received. We continue to administer numerous high-quality conferences. journal clubs, residency research nights and chapter events. Our Education Committee hosted the first ever education conference with Awards ceremony administered by our Awards Committee in Waterloo. which was also a huge success. Finally, our student representatives hosted student symposiums to give pharmacy students an opportunity to learn more about hospital pharmacy practice and pharmacy residency.

All of these were achieved with our amazing members as volunteers on council and on committees. I

cannot say thank you enough. I also wanted to extend my gratitude to our outgoing council members and past presidents for their support and guidance. I truly appreciate the opportunity to work with, advocate for, and learn from all of you.

David Liu

I wish the best of luck to Andrea Wist, our new OB President, as well as Ariane Blanc, our President-Elect. You are amazing leaders, and I am confident that you will do an outstanding job!

David Liu Past President | Ontario Branch

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HOSPITAL PHARMACY IN ONTARIO

Boverned by the FITA to practice to this supple. One key gap in the scope of practice of practices of practicing in hospitals and primary care settings governed by hospitals presently is the inability to prescribe Procurses in nospitals and primary care settings governed by nospitals presently is the maining to pr treatment and adapt prescriptions, which are essential services pharmacists working in community We are seeking an amendment to the PHA to align the language and definition used for 'prescribers' and We are seeking an amenament to the PHA to align the language and deminition used for prescribers and [those authorized under the Act to order treatments] in the PHA to that in the Fixing Long-Term Care Act, 2007 In the Fixing Long-Term Care Act, 2021, a "prescriber means a person who is authorized under the laws of a In the FIAN'S WING-TERM CALE ACL, CUCL, a prescription within the scope of their practice of a health province or territory of Canada to give a prescription within the scope of their practice of a health province or territory of Canada to give a prescription within the scope or their practice of a health discipline." This definition differs from and is more inclusive than what R.R.O. 1990, Reg. 965: Hospital Management under the PHA stipulates: 24. (1) Every order for treatment or for a diagnostic procedure of a patient shall, except as provided in 24. (4) Every order for treatment or for a unaground procedure or a patient strain, except as provided in subsection (2), be in writing and shall be dated and authenticated by the physician, dentist, midwife or restored a strain in the extended date strain the order of the context of the strain of the stra registered nurse in the extended class giving the order. U. Keg, 04/03, S. 10. 24. (2) A physician, dentist, midwife or registered nurse in the extended class may dictate an order for en. (4) A physician, denuise, minuwire or registered nurse in the extended class may octate an order for treatment or for a diagnostic procedure by telephone to a person designated by the administrator to take such as the contract of the contract of the such as the contract of the cont Pharmacists working in hospitals, family health teams, and other collaborative care settings manage the riaimausus working in nuspitals, rainny nearn reams, and other consustance care setungs manage me pharmaceutical care of patients. As experts in medication management, pharmacists assess medications such orders. O. Reg. 64/03, s. 10. Pharmaceurus care or parents. As expension mean and agement, pharmacus assessment prescribed throughout patients' hospital stay, at care transitions, and in the community and make recommendations to tailor the therapies to meet individual patient needs. Over the past decade, regulatory changes to Pharmacy Act, 1991 and applicable regulations, such as been put into entert to enable pharmacous to bridge the gap in the nearthcare system through various ways, including adaptation of prescriptions and renewing prescriptions. The invaluable contribution and expertise of the state of the stat Including adaptation of prescriptions and renewing prescriptions, ine invaluable continuutuon and experise of pharmacists were further demonstrated during the COVID-19 pandemic, such as COVID-19 reatment or pharmaces were nurver demonstrated during the COVID-19 paraeeine, such as COVID-19 treatment management and prescribing, especially for Paxlovid. Many temporary regulatory changes and exemptions were put to also to feature these tasks the second have observed been at a feature the management and prescribing, especially for Pakiovia, wany temporary regulatory changes and exemptic were put in place to facilitate these tasks that would have otherwise been out of scope. Moreover, the 30 Concourse Gate, Unit 2 Ottawa, Ontario K2E 7V7

30 Concourse Gate, Unit 27 ario Branch Ottawa, Ontario K2E 7V7

The temporary authorization for pharmacists to prescribe nirmatrelvir/ritonavir (Paxlovid[™]) widened the access to antiviral treatment for COVID-19 during the pandemic for the public. This was an important step

The technique and skills required for intramuscular administration are applicable to all vaccines administered via this route; pharmacy professionals have also demonstrated their capability to safely administer COVID-19 vaccines to patients 6 months and older. These further support the proposed amendment to remove age restrictions for vaccine administration by pharmacy professionals.

Immunization is a key strategy to protect against vaccine-preventable diseases, leading to decreased associated morbidity, mortality, and healthcare costs. Over the past decade, pharmacists have become an integral part of the Ontario public immunization programs; hospital pharmacists were at the forefront of this during the COVID-19 pandemic, setting up the vaccine process from preparation, administration and documentation within the mass vaccination centres. The contribution of pharmacists and pharmacy technicians in administering COVID-19 vaccines during the pandemic is unequivocal. The proposed regulatory amendments to include more providers (e.g. pharmacy technicians) as well as vaccines (e.g. RSV vaccine and COVID-19 vaccine) as part of the scope of practice of pharmacy professionals promote the sustainability and access of Ontario's immunization programs, especially recognizing the recurring and

The Canadian Society of Hospital Pharmacists – Ontario Branch (CSHP-OB) is pleased to express our support of the proposed regulatory amendments to O. Reg. 202/94 (General) under the Pharmacy Act, 1991 posted on September 11th, 2023 (proposal number 23-HLTC051) to optimize the current scope of practice and support patients through the 2023/2024 respiratory season and beyond. As a national voluntary organization representing hospital pharmacists and pharmacy technicians, our society is steadfast in its commitment to high-quality patient care. These proposed regulatory changes align seamlessly with our

Dear Members of the Health Workforce Regulatory Oversight Branch

Re: Support of Proposed Regulatory Amendments to O. Reg. 202/94 (General) made under the Pharmacy

Strategic Policy, Planning and French Language Services Division Ministry of Long-Term Care 438 University Avenue, 10th Floor Toronto ON M5G 2K8

Health Workforce Regulatory Oversight Branch

September 25, 2023

Canadian Society of Hospital Pharmacists



PRESIDENT'S ADDRESS... continued

Canadian Society of Hospital Pharmacists

September 25, 2023

Hon. Doug Ford Premier Legislative Bldg Rm 281, Queen's Park Toronto, Ontario, M7A 1A1

application to amenu the Public Hospituls ACI, 1990 (PHA) to allow pharmacists working in security governed by the PHA to practice to full scope. One key gap in the scope of practice for pharmacists

The Canadian Society of Hospital Pharmacists – Ontario Branch (CSHP-OB) is seeking your support for our The Canadian Society of Hospital Pharmacists – Unitario Brahuli (CSHP-OD) is Seeking Your Support to application to amend the Public Hospitols Act, 1990 (PHA) to allow pharmacists working in settings

Re: Regulatory Amendment to Public Hospitals Act, 1990

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taken to not only divert system pressure from emergency rooms, but also leverage the skillsets of

HOSPITAL PHARMACY IN ONTARIO

created by the Public Hospitals Act, 7990, that prevent neathcare professionals, including hospital pharmacists, from practicing to full scope. Amendments to the Public Hospitals Act,

Collaborative enons to establish guidelines for judicious use and proper disposal or opiolas, coupled with effective documentation and monitoring practices can positively contribute to coupled with elective accuntentation and monitoring pre-minimizing the risks associated with these medications. In conclusion, CSHP-OB supports the expansion of scope of practice to reflect current and best In concusion, COHF-OD supports me expansion of scope of practice to reflect current and DE practices of midwives. At the same time, it is critical to also recognize the legislative barriers created by the *Dublic Localize* Act 1000 thet request bottlecers references inclusion. practices of micewives. At the same time, it is critical to also recognize the legislative barriers created by the Public Hospitals Act, 1990, that prevent healthcare professionals, including borshid hospitality from providing to full prevent healthcare professionals.

and their involvement along a patient's care continuum. Clear documentation and communication with other healthcare providers are also key elements to ensure continuity of Moreover, with this expansion of scope to administer controlled substances, we welcome a Moreover, with this expansion of scope to administer controlled substances, we welcome strong partnership with midwives on opioid stewardship given the orgoing opioid crisis. Collaboration affects to establish avidationes for indicions use and appendix discrete of onioi strong partnership with midwives on opioid stewardship given the ongoing opioid crists. Collaborative efforts to establish guidelines for judicious use and proper disposal of opioids,

Robust regulations related to prescribing and administration of medications are paramount to NUUSI regulations related to prescribing and administration of medications are paramount to ensure high quality and seamless patient care. It is important to better understand the duration of encounter of theorem for which provide provide to patient on the second of duration of the second of t ensure nigh quality and seamless patient care. It is important to better understand the duration of any course of therapy for which midwives can prescribe in relation to their scope of practice and their instrument close a patient's core certification close destination and or any course of unerapy for which micewises can prescribe in relation to their scope and their involvement along a patient's care continuum. Clear documentation and communication with other bestthere providers are also found presente to ensure an

Untario. Outlined in <u>Appendix 1</u>, our recommendations are rooted in patient sarety, medi safety, product availability both on hospital formularies and the Canadian market, while satety, product availability both on nospital formularies and the Canadian market, while recognizing guidelines from national organizations, such as Choosing Wisely Canada, and the National Association of Dearmony Benulatory Authorities recognizing guidelines from inducrial organizations, such a National Association of Pharmacy Regulatory Authorities.

part of sate, effective medication management system in nospitals as detailed in Accretization Canada Medication Management standards. We are in support of this expansion of scope of methods to be an effective to be expective and effective to be related and effective to be related as a set of the Variada meducation management statuards, we are in support or this expansion of scope of practice to broaden medications that can be prescribed and administered by midwives, while define some considerations for review by the Ministry of Health and the College of Midwives pravice to provident metrications that can be prescribed and administered by miceways, mile offering some considerations for review by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the compared by the Ministry of Health and the College of Midwives of Course of United in According to the course of Course of United in According to the course of Course of United in According to the course of Course of United in According to the course of Course of Course of United in According to the course of Course of United in According to the course of Cour UNEINING SOME CONSIDERATIONS for review by the Ministry of Health and the College of Midwives of Onlario. Outlined in <u>Appendix 1</u>, our recommendations are rooted in patient safety, medication safety, product availability both on bonnitel formularise and the Consider market while

I ne Contr-Cb represents pharmacy professionals practicing in collaborative neatmoare settings, such as hospitals and primary care learns, in Ontario. Hospital pharmacists play a key rule in the assessment selection, and monitoring of motionion thereafter and and the set settings, such as nospitals and primary care teams, in Untario. Hospital pharmacists play a ket role in the assessment, selection, and monitoring of medication therapies and are an integration part of our factories medication recommend on term in beneficial or detailed in According to the role in the assessment, selection, and monitoring or medication merapies and are an integral part of safe, effective medication management system in hospitals as detailed in Accreditation Conside Medication Menocompart elements We are increased of this expension of access of the second second

better reflects their current practice and best practices. The CSHP-OB represents pharmacy professionals practicing in collaborative healthcare estimate such as beenitals and mimory care terms in Ontario. Monoital pharmanists play

Un benall of the Unitario Branch of the Uanacian Society of Hospital Pharmacists (USH we appreciate the opportunity to provide feedback on the draft amendments to Ontario Description 984/02 (Decimated During) under the Mitwifer Act, 1004, or part of the opp we appreciate the opportunity to provide teedback on the draft amendments to Ontario Regulation 884/93 (Designated Drugs) under the Midwifery Act, 1991, as part of the consultation present the consecut resultation among most would enable midwives to provide a score that regulation obtains (Designated Drugs) under the Midwitery Act, 1991, as part of the consultation process. The proposed regulatory amendments would enable midwives to practice a scope that better reflects their extension and best exception.

On behalf of the Ontario Branch of the Canadian Society of Hospital Pharmacists (CSHP-OB),

438 University Avenue, 10th Floor Re: Expansion of Scope for Midwifery (Proposal Number: 23-HLTC057)

Health Workforce Regulatory Oversight Branch Office of the Chief of Nursing and Professional Practice

PRESIDENT'S ADDRESS... continued

Canadian Society of Hospital Pharmacists

November 13, 2023

Ontario College of Pharmacists 483 Huron Street Toronto, ON M5R 2R4

November 13, 2023

After a thorough review, we are pleased to note that the guidelines align well with the principles and ethics upheld by the CSHP, especially in the areas of patient safety, professional accountability, and interprofessional collaboration. The emphasis on clear, patient-centered documentation practices is commendable and reflects a deep understanding of the role pharmacists and pharmacy technicians play in

To further support patient and medication safety, specific recommendations and comments on the draft

electronic documentation, which is increasingly relevant in today's healthcare landscape. As mentioned in

by the guidelines are positive features. It is recognized that the draft documentation guidelines reflect the

performance indicators listed in the practice assessment criteria for pharmacists and pharmacy technicians by OCP. The establishment of a feedback mechanism for continuous improvement to continuously gather

insights from pharmacy professionals would be beneficial. This would help in making both the practice assessment criteria and guidelines more dynamic and responsive to the changing needs of the profession.

To further promote documentation by pharmacy professionals, a stronger emphasis on interprofessional

collaboration could be valuable. Documentation is a key element in facilitating effective communication

among healthcare teams and ensuring seamless transitions of care; highlighting this could strengthen

collaborative practice. Additionally, while the guidelines offer comprehensive advice on documentation practices, incorporating specific recommendations for ongoing professional development and training in

this area could be beneficial, as outlined in <u>CSHP Documentation Guidelines</u>. This would aim in ensuring

ety of Hospital Pharmacists (30 Concourse Gate, Unit 27

that all pharmacy professionals are equipped with the necessary skills to adhere to these guidelines

Moreover, we appreciate the guidelines' focus on the practical aspects of documentation, including

the draft guidelines and governed by PHIPA, we echo the importance of protecting patient health

information from privacy breaches, including those that may arise from cybersecurity attacks. Furthermore, the acknowledgement of the evolving nature of pharmacy practice and the flexibility offered

documentation guidelines can be found in <u>Appendix A</u> for your review and consideration.

On behalf of the Canadian Society of Hospital Pharmacists – Ontario Branch (CSHP-OB), I would like to extend our gratitude for the opportunity to review and provide feedback on the Ontario College of Pharmacists' Draft Documentation Guidelines. As an organization dedicated to excellence in hospital pharmacy practice, we appreciate the efforts of the OCP in enhancing the standards of pharmacy practice in

Re: Seeking Feedback on Updated Documentation Guidelines Dear Ontario College of Pharmacists (OCP),

Canadian Society of

Hospital Pharmacists

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NATIONAL DELEGATES' REPORT: TOP 7 HIGHLIGHTS FROM THE 2023 NATIONAL BOARD MEETING

Andrea Beaman

DECEMBER 2023

s 2023 draws to a close, the CSHP National Board celebrated the success of the 2020-2023 Strategic Plan in Securing a Future for a Sustainable and Engaging CSHP.

Securing a Future for a Sustainable and Engaging CSHP

CSHP Strategic Plan 2020-2023

Despite the unprecedented challenges encountered during 2020-2023, under the leadership of CEO Jody Ciufo and assistance of the Professional Practice Team, the CSHP Board has maintained a focus on strategic priorities, core business and foundational responsibilities identified in the Strategic Plan:



OBJECTIVE	MEASURE OF SUCCESS		
MEMBERSHIP GROWTH	3,500 members in 2023, an increase of approximately 9% over 2019's 3,200		
ENGAGED MEMBERSHIP	Greater member engagement, demonstrated by an increase in social media, website, and PSN interaction		
BALANCED BUDGET	A balanced budget in 2023, after four years of planned deficits.		

The 2020-2023 Strategic Plan has been a success on all of these metrics, as highlighted below:

Membership Growth

2022-23 was a membership success for CSHP! The year-end membership total for 2022-23 was 3,880 members across Canada. This was slightly lower than the target, 3,925 (97% of target), but still an increase from 2021-22 (3,814 members), maintaining the recent membership growth.

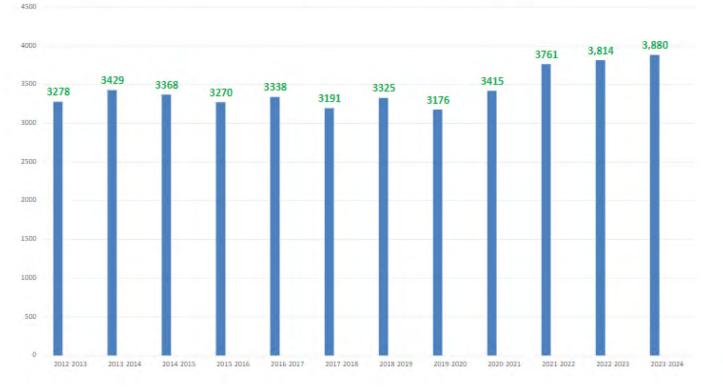


cshp

scph

NATIONAL DELEGATES' REPORT... continued

CSHP 10-year Membership Trend and Target

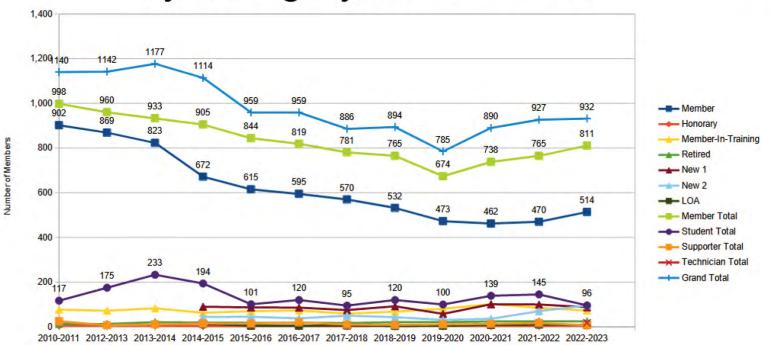


The Ontario Branch ended 2022-23 with 932 members (93% of target 1,000 members).



CSHP OB Membership Breakdown by Category, 2010 - 2023





Membership Year



Financial Sustainability

CSHP is in good financial shape. In 2022-23, membership revenue exceeded \$1 million for the first time! Financial reserves are repleted, back to a level last seen in 2012. This is mostly due to the sale of the Condominium in 2022. and savings due to decreased travel during the pandemic. 2022-23 was the final year of a planned operating deficit as part of the strategic plan to invest in member value through Professional Practice staff and developing core programs. A balanced budget has been approved for 2023-24.

Advocacy

Rita Dhami, CSHP's new Chief Pharmacy Officer and recent OB Past President, provides leadership to the Professional Practice team. The team develops CSHP's suite of professional practice resources, policy positions, continuing education, consultations, research, and knowledge translation. Rita engages with partners and stakeholders on issues with a national pharmacy scope – for example Health Canada, drug shortages, NAPRA, PEBC, Choosing Wisely.

cshp

Advocacy	by	CSHP	National	in	2023
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Multilateral Outreach:	Health Canada Consultations:		
 NAPRA Consultation on Compounding NAPRA Engagement on Principles of Professionalism NAPRA Modernization of Drug Schedules Project PEBC Stakeholder Review on Strategic Plan CCCEP Stakeholder Review on Strategic Plan Choosing Wisely Canada Meeting of Societies Canadian Health Workforce Network 	 Health Canada/Public Health Agency of Canada Pharmaceutical Drugs Program (PDP) Roundtable on improving access to health products in Canada (Drug Shortages Task Force) Meeting of the Health Product Supply Chain Advisory Committee Appropriate Use Advisory Committee Roundtable Drug Establishment License Task Force* National Priority List of Pediatric Drugs (NPLPD)* Advertising for Health Products* 		
Strategic Partnerships:	Increasing CSHP Presence:		
 CASCADES Canadian Medical Association – Net Zero Canadian Nosocomial Infection Surveillance Program (CNISP) Canadian Healthcare Workforce Network European Association Hospital Pharmacists (EAHP) 	 Welcome letter to the new Federal Health Minister Mark Holland CSHP CEO Jody Ciufo moderating a session on Oct 12th, 2023 Canada Healthcare Innovation Summit on "Innovation in Pharmaceutical and Therapeutic Management" CSHP CPO Rita Dhami presenting at Mohawk Medbuy Annual Pharmacy Meeting Oct 25th, 2023 on "50 Shades of Green: Sustainability in Hospital Pharmacy" 		



You can find out about CSHP National Advocacy work through the new "Advocacy in Action" newsletter online, on social media, and emailed in Interactions: News from CSHP. Like, share or comment to increase the visibility and effectiveness of CSHP Advocacy to members and non-members on social media!

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HOSPITAL PHARMACY IN ONTARIO



Education

After two years "Together" during the pandemic, the stand-alone Professional Practice Conference (PPC) returned in April 2024 to Ontario, with an in-person gathering held outside of Toronto for the first time, in Niagara Falls!



Education is one of the core activities of CSHP, and CSHP National continues to provide a variety of education opportunities for Pharmacists and Pharmacy Technicians. Recent webinars:

Date	Title	Presenter
Feb 28, 2023	The ins and outs of a stability student for compounded non- sterile preparations	Daphne Coache, Benjamin Tanguay
June 20, 2023	Grant Writing 101: Tips for the CSHP Foundation 2023 Research Grant Competition	Marisa Battistella, Katelyn Halpape Heather Naylor, David Williamson
June 23, 2023	HPCS-Make sure you don't forget: COVID-19 in Hospital Pharmacy	Dr Régis Vaillancourt
July 13, 2023	HPCS-Pharmacy practice insights from the Hospital Pharmacy in Canada Survey An overview for Pharmacy leaders	Allan Mills
Sep 14, 2023	Pharmaceutical Industry Influence in Primary Care: Is there a role for Collaboration in our current Healthcare System?	Dr. Melanie Hnatiuk, Dr. Trudy Huyghebaert
Sep 20, 2023	HPCS-Hospital Pharmacy in Canada Small Hospital Survey: Results & Discussion	Kyle MacNair
Oct 5, 2023	Pediatric Sepsi: This may come as a shock	Elise De Francesco
Nov 16, 2023	Iov 16, 2023 Anticoagulation: Navigating Management Issues Cynthia Brockleban Tammy Bungard Nicole Nakatsu	
Nov 28, 2023	The A, B, and E's of COPD Management	Karen Dahri

The Hospital Pharmacy 101 program modules continue to be available, providing in-depth training to bridge the gap at entry to practice and boost hospital pharmacy skills.



National Member Survey

The National Member Survey was conducted in Aug-Sept 2023 and the results are used by CSHP National and Branches to identify members' areas of interest. A total of 1,051 responses were received, representing approximately 30% of CSHP members. Two-hundred and sixty-seven (267) responses were received from ON, 25% of total responses.

- Survey demographics:
 - 79% of respondents were Pharmacists, 21% other (Technician, Student, Resident, Retired)
 - 43% of respondents work in a tertiary hospital, 29% community hospital
 - 41% of respondents provide direct patient care, 14% drug distribution, 13% management
- Top responses to "Why are you a member": Education, Professional practice information, and to access member liability insurance were top reasons
- Top topics of interest for educational programming: Clinical topics (i.e., infectious disease, cardiology, critical care), Skills-based topics (i.e., TDM, deprescribing), Leadership.
- Responses to focused questions on the survey around PSN engagement, the Hospital Pharmacy in Canada Survey, drug shortages, climate change and hospital residency are being used by CSHP to provide direction and identify improvements to programs.

CSHP Vision

The Vision for the Hospital Pharmacy Profession Task Force crafted 12 outstanding vision statements unanimously approved by the Board. The task force, led by Co-Chairs Zack Dumont and Mary Gunther, narrowed the statements down over a three-round process through a Delphi panel. On this panel, there were representatives from patient advocacy, IPPC, APES, CAPSI, Technicians, AFPC, 2SLGBTQA+ advocacy, and, for the first time, patients. A new task force will make recommendations regarding the roll-out of the new vision statements.



cshp 🛃 scph

ADVOCACY ACTION

After the successful launch of the Playbook on Climate Resilient, Low Carbon Sustainable Pharmacy with CSHP as a proud collaborator, Professional Practice team met with CASCADES to explore further potential collaborations focusing on sustainability practices in hospital pharmacy.

Environmental Sustainability

CSHP is proud to be a partner with other organizations such as CASCADES to address the climate impact of health care. center635The CSHP Sustainability Task Force produced a set of short-term and long-term recommendations covering various aspects of CSHP work, including Advocacy & partnership Education Policy and procedure development Research and quality improvement Branding.

These recommendations advocate to organizations such as Accreditation Canada, NAPRA, federal and provincial governments for the inclusion of environmental sustainability criteria, standards, and practices. The guidelines also recommend the creation of a planetary health education series, guideline development for sustainable conferences, and establishing a dedicated sustainability section on the CSHP website. A Sustainability Implementation Task Force will make recommendations on implementing the guidelines.

On October 24, Rita Dhami attended the annual pharmacy committee meeting of Mohawk Medbuy (a group purchasing organization) where she shared recommendations from the CSHP Sustainability Task Force and highlighted opportunities for hospital pharmacy to consider sustainability in procurement practices.



Strategic Planning, 2024

In early 2024, the CSHP National Board is focused on strategic planning to develop the next compass for the years ahead. This work will be led by the Ashley Walus, CSHP President, and the Executive Committee:

2024 is going to be an exciting year for CSHP!

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Ashley Walus President

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Sean Spina Past President



Executive Committee

Katie Hollis President Elect



Treasurer



Jody Ciufo Chief Executive Officer

Follow online to keep up to date on all activities: Facebook | X (Twitter) Instagram | LinkedIn Please reach out to andrea.beaman@thp.ca with any questions or feedback about CSHP National.

Andrea Beaman National Delegate (2022–2025) | Ontario Branch Canadian Society of Hospital Pharmacists | Société canadienne des pharmaciens d'hôpitaux www.cshp-scph.ca/ontario

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Dear CSHP Members and Supporters,

As part of the Strategic Planning Process, the CSHP National Board agreed a name change for the Society was necessary to reflect our expanded membership for pharmacy technicians and the great variety of workplaces our members occupy within and beyond the walls of hospitals. The Board voted unanimously to recommend to the members that *Canadian Society of Healthcare-Systems Pharmacy / Société canadienne de pharmacie* dans les réseaux de la santé be adopted at the 2024 Annual General Meeting as the new name for the Society.

A detailed package was emailed to all members to explain the rationale for the recommendation so that the process and decision are completely transparent.

Included in the attached package are three documents:

- A Message from the Board to the Members a piece which lays out the reasoning underlying the need for change and the aspirational essence of the new name;
- A Briefing Note in the form of a Q&A, the document goes into considerable detail on the thinking, the decision process and a full breakdown of the wording in both English and French.
- Special Resolutions for the AGM as required by the By-law, any changes to the By-laws themselves must be circulated 60 days in advance of the AGM. Considered special resolutions, they require a 2/3s majority of the members present for the vote. The two resolutions are 1) the name change itself and 2) the amendments required to articles in the by-laws which contain the Society's full name.

We hope you share our enthusiasm for this new name and more inclusive and comprehensive future for the Society, professions and the patients we care for.



JOURNAL CLUB: THE YEAR TO DATE

Keep yourself updated by visiting the OB Journal Club webpage!

January	Older Adults with 2023 Updates to the AGS Beers and STOPP/START Criteria Beverly-Ann Oliver, GeriMedRisk, North Simcoe Muskoka Specialized Geriatric Services Karen Cameron, Leslie Dan Faculty of Pharmacy, North		Where to Start? Considering Sex and Gender in Research and Practice Mira Maximos, (she/her/hers) RPh, PharmD, MSc, BScPhm, BHSc, ACPR	
			Gut Instincts: Short-Course Antibiotics for Intra-abdominal Infections	
Fohmony	Simcoe Muskoka Specialized Geriatric Services Why Pharmacists Are Designers: A Case		Catherine J. Keum , Heartwood Centre for Women, Vancouver, BC	
February	Application with Bupivacaine Shortages Eric JP Romeril, Periop Clinical Resource Pharmacist, Hamilton Health Sciences	August	Navigating Drug Shortages on a Micro and Macro Level: A Case Study of Injectable Pantoprazole	
March	Understanding and Applying ISMP Canada's		Allison Barre , Drug Use Evaluation Pharmacist, Southlake Regional Health Centre, Newmarket, ON	
	Canadian High-Alert Medication List Michael Hamilton, Medical Director, ISMP Canada		Linda Liu , Pharmacy Inventory Operations Leader, University Health Network, Toronto, ON	
April	Applying Implementation Science for		Olivia Ng, Director of Pharmacy, Supply Ontario, Toronto, ON	
	Antimicrobial Stewardship: Practical Strategies to Address Common Prescribing Challenges		Mina Tadrous , Assistant Professor, Leslie Dan Faculty of Pharmacy, Scientist, Women's College Hospital Institute for Health System Solutions and Virtual Care, Toronto, ON	
	Bradley Langford , Antimicrobial Stewardship Pharmacist, Public Health Ontario		Stephanie Di Trapani , Director, Operations Division, Health Product Shortages Directorate, Health Canada, Ottawa, ON	

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CSHP SYMPOSIUM 2024 BY THE UNIVERSITY OF WATERLOO CSHP STUDENT CHAPTER

he University of Waterloo School of Pharmacy CSHP Student Chapter hosted its annual Symposium event on February 10th, 2024. Pharmacists from practice sites across Ontario were welcomed to the School of Pharmacy for a morning of networking with their colleagues and UW students. Between the eager new Rx2027 cohort at the top of their pharmacy journey and the 3rd year Rx2025 cohort who are starting to make decisions about residency and career paths, there was a lot of learning and some excellent conversations that took place.

The morning began with breakfastand-learn style presentations from keynote speakers including:

- CSHP OB representatives Andrea Wist (Bluewater Health Director of Pharmacy, CSHP OB President), Andrea Beaman (Trillium Health Partners Credit Valley Hospital DUE Pharmacist, CSHP OB National Delegate) Alicia Niven (Niagara Health Pharmacy Practice Manager, CSHP OB West Chapter Co-Chair), and Victoria Wong (LHSC Clinical Pharmacist, CSHP OB West Chapter Co-Chair) provided an overview of hospital pharmacy practice, different pathways to becoming a hospital pharmacist, and how CSHP can assist in career development
- Morgan Hopkins (Joseph Brant Hospital Clinical Pharmacist, LHSC Resident 2023) shared her journey to hospital pharmacy, what a typical day in her life looks like, the things she wish she knew going into hospital practice, and some tips for hospital pharmacy residency
- Robyn McArthur (Grand River Hospital Pediatric Pharmacist, School of Pharmacy Adjunct Clinical Assistant Professor) discussed her pathway to her current practice, the different types of hospital pharmacists and their day-to-day tasks, and important skills for success in hospital pharmacy



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CSHP SYMPOSIUM 2024 BY THE UNIVERSITY OF WATERLOO CSHP STUDENT CHAPTER... continued

At the conclusion of the formal presentations the networking began, and students had the opportunity to network, build connections, ask questions, and gain some unique insights into the different routes and opportunities in institutional pharmacy practice from the 12 pharmacists in attendance.

The UW CSHP Executive Council would like to extend its sincerest thanks and gratitude to each of the pharmacists who joined us at the Symposium, acting as leaders via inspiring the future of hospital and ambulatory care pharmacy! Pharmacists in attendance, along with our keynote speakers, included:

 Adrian Bumstead (Southwest Ontario Aboriginal Health Access Centre)

- Mike Collins (Grand River Hospital)
- Susan Cubelic (Niagara Health)
- Michelle Lee (LHSC Resident)
- Kaitlyn Sellers (St. Joseph's Healthcare)
- Christine Vaccaro (Centre for Family Medicine Resident)

With a plethora of positive comments and feedback from both student and pharmacist attendees, the University of Waterloo CSHP Student Chapter Executive Council is already looking forward to next year's Symposium, and would like to thank each of our attendees once more, as well as CSHP National and OB for their continued support of the next generation of pharmacists! Viktoria Cubelic University of Waterloo Student Liaison | Ontario Branch Canadian Society of Hospital Pharmacists | Société canadienne des pharmaciens d'hôpitaux www.cshp-scph.ca/ontario Facebook | X (Twitter) Instagram | LinkedIn



Thank you!

VE THE DA' 6 POB $\left(\subset \right)$ NNUA CONFERENCE DAMA EM Saturday, November 23, 2024 University of Waterloo School of Pharmacy 10A Victoria St S, Kitchener, ON N2G 1C5 Date:

Location:



Calling for Volunteers! Looking for a way to get involved or build new skills? Check out our volunteer opportunities!

Volunteer Positions Recruiting We're

Chapter Chairs Membership Committee **Co-Chair** Award Committee members

Education Committee members

Communications Committee members

- Role: facilitate educational events as per the needs of members within that Chapter, as well as to disseminate CSHP news and information, as required
- Term: 2 years
- Role: promote the benefits of CSHP membership to hospital pharmacists throughout ON
- Role: promote the interest and submissions for the awards offered by the ON Branch to its members, participate in judging the awards, identify new awards and sponsors
- Role: oversee the Annual Conference in November
- Role: ensure that appropriate information is disseminated in a timely, convenient, concise, appropriate, uniform and coordinated fashion so that it's of maximal use to our members

More details at: cshp-scph.ca/Ontario-volunteer-opportunities



HOSPITAL PHARMACY IN ONTARIO

Aspen announces additional pharmaceutical donations for Ukrainian patients.

March 25, 2024

Johannesburg, South Africa – Aspen Pharmacare, Africa's largest pharmaceutical company, has announced continued humanitarian support to Ukraine, confirming further donations of critical care products to treat hospitalized pa-

tients who have been impacted by

the ongoing conflict in that country.

Stavros Nicolaou, Aspen Group Senior Executive Strategic Trade, said, "Aspen is highly sensitized to the human suffering that war and conflict brings and which has had a devastating impact on innocent civilians. We are pleased to announce that we are further extending our support to Ukrainian victims of the present-day conflict with much needed pharmaceutical products and we are in the process of dispatching additional supplies of Fraxiparine (for emergency surgeries) and Alkeran (for cancer) to treat patients in Ukrainian hospitals. We remain committed to providing ongoing humanitarian relief to victims of both natural and manmade disasters as may be necessary."

Aspen recently hosted His Excellency, former President of the Ukraine, Viktor Yushchenko during an official visit to South Africa. On this occasion he said, "I am deeply grateful to Aspen for the invaluable humanitarian support provided to the people of Ukraine at this very tragic time. Aspen has helped countless Ukrainians with generous donations of life-saving critical care medicines. Aspen's ongoing support reaffirms their understanding of the horrors of war and demonstrates their unwavering care for innocent patients who are in desperate need of pharmaceutical products. I thank Aspen for their contributions to date as well as their commitment to providing more products to treat our patients."

One of the more important initiatives in this humanitarian collaboration with Her Excellency Ambassador and Plenipotentiary of Ukraine to South Africa, Liubov Abravoitova, concerns donations of Alkeran primarily used for the treatment of pediatric cancer patients at the Odessa Filatov Institute of Ophthalmology. She said, "We thank Aspen for its solidarity with Ukrainian people and support to Ukraine with donations of life-saving medicines, as well as for its cooperation with the Embassy of Ukraine in South African in humanitarian projects." Aspen's latest Alkeran donation has been expedited specifically to assist in the treatment of a six-year-old patient who is at risk of losing her only eye.

In March 2022 Aspen donated lifesaving medicines for 62 000 surgeries in Ukraine and also helped to evacuate South African medical students who were stranded in wartorn Ukraine.

#AspenWeCare #ProudlyAspen

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HEALTHCARE. WE CARE.

Rising Tides Lift All Boats: Advancing Oncology Pharmacy

By Alina R Rashid, Clinical Director of Pharmacy, Member Success at HealthPRO Canada

As a Clinical Director of Pharmacy at HealthPRO Canada with a background in oncology, I recently attended the Canadian Association of Pharmacists in Oncology (CAPhO) conference. The conference theme, "Rising Tides Lift All Boats: Partnering to Advance Oncology Pharmacy" highlighted the importance of collaboration across Canada to help propel oncology pharmacy practice forward.

The poster presentations offered a captivating glimpse into the latest research and projects spanning the breadth of oncology practice across our country. Among the many topics covered, here are some notable highlights:

Empowering Future Leaders: The Contribution of Pharmacy Students to Oncology Practice

Christine Peragine and her team at Sunnybrook Odette Cancer Centre have incorporated a co-op pharmacy student into their oral-anticancer therapy (OAT) program [1]. This co-op program allows students to gain specialized knowledge while contributing to the overall satisfaction of their clinic patients. Average patient satisfaction score was reported at a 9.6/10 and having a pharmacy co-op student on the team increased capacity in their clinic allowing pharmacists to perform other clinical duties.

May Nguyen and colleagues evaluated the competence, confidence, and perceived barriers related to providing oncology pharmacy care for pharmacy students in Canada [2]. This was assessed through a timed, 6-item questionnaire. Students completing their clinical rotation at Extend Pharmacy completed this questionnaire at the beginning, midpoint (4 weeks), and end (8 weeks) of their rotation. The results showed that students began their rotation with low levels of confidence when it comes to oncology focused medication dispensing, clinical knowledge, and providing compassionate care. These measures improved over the rotation and served as discussion points at student-preceptor check-ins. The preceptors could tailor training and education based on any gaps identified during these check-ins.

Mentorship was also a hot topic with Thomas Cho and Colleagues

evaluating the first nationwide Canadian oncology mentorship program offered through the University of Toronto's National Community Oncology Dispensing Association (NCODA) chapter [3]. This is a mentorship program that I have personally been participating in as a mentor as well. The authors collected feedback from the mentees at the midpoint, and both mentees and mentors at the endpoint. Mentees expressed the need for a more diverse group of oncology mentors (industry and hospital). Starting the program earlier in the school year with a more structured, guided timeline could enhance the experience. Mentors highlighted the diversity in the level of engagement from the mentees. One suggestion to overcome the low level of engagement from some mentees included hosting more group sessions.

Streamlining Treatment: Dose Banding for Enhanced Efficiency and Cost-Effectiveness

Dose banding or dose rounding is used in clinical practice as a cost avoidance strategy. This is particularly important for novel and patented anti-cancer medications which account for some of the highest medication expenditures in the hospital budget. Loreena Pang and colleagues at BC Cancer presented their strategy on creating a dose rounding policy [4]. The dose rounding strategies they assessed had a maximum down-rounding to -10% and a maximum up-rounding to +5%. They found that dose rounding down to a maximum variance of -10% has the potential to achieve maximal cost avoidance in the context of available vial sizes for IV daratumumab. Looking at retrospective data, the -10% strategy would have saved an estimated \$4.5 million over the past 4 years (n =8420 doses eligible for dose rounding) for BC Cancer.

Dose banding in combination with outsourcing of the sterile compounding of trastuzumab was assessed by Jonathan Shloush and colleagues at Sunnybrook Odette Cancer Centre [5]. Trastuzumab doses were rounded to the nearest 42 mg which resulted in 7 dosebands capturing 90% of all doses. Turnaround times for same-day trastuzumab containing treatments reduced from 44 minutes to 33

Rising Tides Lift All Boats: Advancing Oncology Pharmacy

minutes with the most significant reduction in turnaround times for trastuzumab monotherapy (47 minutes to 28 minutes). Overall satisfaction or improvement was reported post-implementation by front-line staff for impact on workload, subjective perception of improvements in turnaround time, chair turnover, hood traffic, and phone calls to physicians for dose changes. This success with dose banding at Sunnybrook highlights the efficiencies and cost-savings that can be utilized with other highuse anti-cancer agents as well.

Unlocking Access: Pharmacist-Led Clinics as Key Players in Healthcare Delivery

Out of the east coast we saw an example of a pharmacist-led Prostate Cancer Shared Care Clinic [6]. Hayley Underhill and colleagues developed, implemented, and evaluated this clinic which focused on patients taking oral anticancer therapy for prostate cancer, melanoma, or renal cell carcinoma. The pharmacists were physically located in the same vicinity as the oncologists and the nursing teams. Interventions completed by the

... continued

pharmacists included best possible medication histories (BPMH), drug therapy problem (DTP) identification and resolution, patient education, toxicity management, adherence assessment and support, and deprescribing.

Another great example of a pharmacist-led clinic, also from the east coast, was presented by Laura Minard and colleagues - this time for a pharmacist-led gynecology oncology PARP inhibitor clinic [7]. Patients receiving Olaparib or niraparib received education, **Best Possible Medication History** (BPMH) services, a drug interaction review, blood work review, and toxicity management. Patients had set meeting points with the clinical pharmacists. Over the course of one year, the pharmacists completed 223 encounters – 152 of these encounters replaced visits with the oncologist or the nurse. The top three Drug therapy problems (DTPs) identified (n=98) included adverse drug events (n=46), requirement for blood work (n = 11), and need for additional therapy (n = 8). Our colleagues on the east coast have shown us the enhanced patient services oncology clinic pharmacists

are able to perform.

Our final example comes out of Ottawa where a PharmD-student led clinic within a specialized community pharmacy helps patients on potentially hypertension inducing take home anti-cancer therapy [8]. This research was completed by Alicia Davis and colleagues. PharmD students complete a hypertension assessment and provide a care plan for patients newly started on axitinib, cabozantinib, Lenvatinib, pazopanib, sunitinib, abiraterone, apalutamide, darolutamide, or enzalutamide. The student followed up with the patients at week 1, 2, 3, and 7 to assess medication adherence, tolerance, and review blood pressure readings. The student completed 22 interventions for 24 patients. The top three interventions included non-pharmacological interventions (n=14), discontinuation of hypertension inducing medication (n=9), and addressing drug interactions (n=6).

These initiatives across Canada highlight the evolving role of the oncology pharmacist, showcasing enhanced patient care, cost savings, and educational advancements through collaboration. I look forward to seeing what CAPhO 2025 has in store!



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ON BRANCH

HOSPITAL PHARMACY IN ONTARIO

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