

alberta college of
pharmacists



safe, effective, responsible
pharmacist practice

acp *news*

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From the President **New Year Greetings!**



Dianne Donnan

In my inaugural address as president, I said, "This is the year to walk the walk.

This is the year to put into action the legislation and our enhanced scope of

practice. This is the year to rise to the expectations that other pharmacists, other healthcare collaborators, all Albertans, and indeed all Canadians have for us." Well, we are on the right track – and we need to frequently and consistently communicate this good news.

The eyes of the world were upon us and Alberta pharmacists truly shone

this past year. I am very proud of the professional attitude and commitment to patient care that you have shown.

It is gratifying to know that amidst all the changes of the last year, our collective focus on effective, responsible, pharmacist care has not wavered. I have no doubt our focus will remain steady in 2008.

Through thoughtful relationship building, collaboration, and actions which repeatedly demonstrated that pharmacists put the health and safety of Albertans first, ACP played a key role in making Alberta pharmacists world leaders in pharmacy practice. I am proud of the relationships we

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acpnews

is published six times per year
by the Alberta College of Pharmacists.
Submissions for publication should be sent to:

Karen Mills, Communications Leader
Alberta College of Pharmacists
1200 - 10303 Jasper Avenue NW
Edmonton AB T5J 3N6
karen.mills@pharmacists.ab.ca

The deadline for submissions is
Feb. 5, 2008 for the Mar./Apr. 2008 issue.
Information about content and length of
articles can be obtained from Karen.

Alberta College of Pharmacists
1200 - 10303 Jasper Avenue NW
Edmonton AB T5J 3N6
(780) 990-0321
Toll Free: 1-877-227-3838
Fax: (780) 990-0328
Website: pharmacists.ab.ca

President: Dianne Donnan
President Elect: Jim Krempien
Vice President: Rick Siemens
Past President: Jeff Whissell

Councillors:

Wilson Gemmill, District 1
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Anjali Acharya, District 5
Donna Galvin, District 5
Merv Bashforth, District 6

Public members:

Joan Pitfield
Pat Matusko

Councillors and our public members can be
reached by email via our website at
pharmacists.ab.ca under *About ACP/ Council*,
or by using the search feature to locate
them by name.

Staff Directory

All staff are available at (780) 990-0321
or 1-877-227-3838
or by fax at (780) 990-0328.

Their email addresses are available on our
website at pharmacists.ab.ca under *Contact Us*.

Registrar: Greg Eberhart
Deputy Registrar: Dale Cooney
Competency Director: Roberta Stasyk
Complaints Director: Merv Blair
Education Director: Lucy Rachynski
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alberta college of
pharmacists



ACP Registrar Greg Eberhart, ACP President Dianne Donnan, CPBC Past President Randy Konrad, CPBC Registrar Marshall Moleschi at the signing of the ACP/CPBC Partnership Resolution.

From the President

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developed and strengthened along our journey. The level of success the college achieved this year would not have been possible without the assistance of our provincial and national colleagues and associates. We have been privileged to interact closely with other professional groups within our province and across the country, including signing a Partnership Resolution with the College of Pharmacists of British Columbia. Two of my highlights this year were seeing the revitalization of the relationship between ACP and RxA (the Alberta Pharmacists' Association) and attending the collaborative tri-partite conference in Banff with nurse and physician colleagues. I am looking forward to meeting many of you at the joint ACP/RxA conference this May.

I am confident that you will continue to lead the way, using your new practice framework to provide optimal patient care. You are in the right profession, in the right place, at the right time. As a pharmacist in Alberta, you are now able to reach your full professional potential as a skilled medication management expert while providing patient-focused, accessible care. What an exciting starting point for 2008!

On behalf of council and the college staff, I wish you a healthy and happy New Year.

Dianne Donnan, President ■

Pharmacy Technician registration has begun

ACP began processing applications for voluntary registration by pharmacy technicians in December. To be eligible to register, technicians must have successfully completed a pharmacy technician program recognized by ACP's council. A list of recognized programs is available on ACP's website at pharmacists.ab.ca. This list is continually updated.

Some pharmacy technician programs meet the *Criteria for Recognition of Pharmacy Technician Programs* but either do not have a hospital practicum or have a hospital practicum that is shorter than the requirements of the criteria. At their Oct. 18, 2007 meeting, ACP Council passed a motion to

recognize work experience of persons employed in hospital pharmacies if the applicant has completed a program such as this. Based on this motion, graduates from these programs **who were employed in a hospital pharmacy on January 1, 2008** may apply to be registered with the Alberta College of Pharmacists.

ACP is aware that not every technician program has been reviewed. If you know a technician wanting to register who has completed a training program that is not listed and the program likely meets the *Criteria for Recognition of Pharmacy Technician Programs*, ask the technician to complete an application for registration. ACP staff will compare the program to the criteria and advise.

What does being a registered technician mean?

Registration means that with the consent of and under the **indirect** supervision of a clinical or courtesy pharmacist working in the same pharmacy, a pharmacy technician may compound a Schedule 1 or a Schedule 2 drug or blood product. These are restricted activities and may only be performed by *registered* pharmacy technicians.

Standard 20 of the *Standards for Pharmacist Practice* also indicates that a registered technician who assists with compounding may:

- apply appropriate prescription labels to a compounded drug;
- check the drug selected for compounding to see that it is consistent with the formula and prescription; or
- confirm a calculation or measure required as part of the act of compounding.

In addition, Standard 21.7 and 21.8 indicate that a *registered* pharmacy technician may assist a pharmacist in performing the final check of repackaged drugs under **indirect** supervision if:

- the pharmacist is on site when the duties are being performed;

- there is a standard packaging and checking process in place;
- the technician is familiar with the packaging and checking processes;
- the checking process is audited from time to time to confirm that the system of checks operates to ensure that no errors are made; and
- the audit results are documented.

What does the future hold?

The regulations currently allow for registration only; pharmacy technicians, even after registering, are not regulated members. When the term pharmacy technician is used in the *Standards for Pharmacist Practice* however, it refers to someone who is registered with the college. The Pharmacy Technician Working Group is currently developing a plan to achieve the regulation of pharmacy technicians in Alberta. A final report will be submitted to the registrar by March 15, 2008.

The Alberta College of Pharmacists welcomes pharmacy technicians as new registrants. We are pleased to be involved in the evolution of the pharmacy technician's role on the health care team. ■

Additional prescribing authorization process approved

At their meeting on Dec. 13, 2007, ACP council approved the process piloted earlier this year, along with recommended refinements, for granting additional prescribing authorization.

Pilot participants have been notified of their results. The college will issue a news release outlining the pilot results, planned refinements, and future plans early in the New Year. Watch for more details on the college website and in the March/April edition of *acpnews*.

Thank you to the expert panel, to those pharmacists who took part in the pilot as candidates and assessors, and to those who offered comments and suggestions for the process. ■

Call for nominations—council elections

Alberta pharmacists are on the leading edge of practice in the world and can benefit from strong peer guidance. Now is the time to step up for your profession. Consider taking your seat at the ACP council table.

ACP will be holding council elections in Districts 3 and 5 this spring. Nomination packages will be delivered to registrants in these districts in January.

Who can be a candidate?

You are an ideal candidate if you:

- are motivated to advance public safety,
- want a hands-on role in advancing pharmacist practice in Alberta,
- model safe, effective, responsible pharmacist practice,
- have demonstrated leadership skills,
- are able to commit 12 to 15 days per year over a three-year term.

When considering the criteria of a good councillor, you may also want to visit ACP's website and review the responsibilities and councillor code of conduct under *About ACP/Council* and the college by-laws under *About ACP*.

Nominations must arrive at the college office by 4:30 p.m. on **Fri., Feb. 29, 2008**.

Call for resolutions

If you want to propose a resolution for consideration at the annual general meeting in May 2008, Greg Eberhart, ACP Registrar, must receive your resolution in writing, accompanied by the signatures of 10 voting members in good standing, by 4:30 p.m. on **March 21, 2008**.

Resolutions should be focused on topics relating to the college's mandated areas of interest: public safety, effective pharmacist and pharmacy practice, and health policy.

Help get the word out!



KEY MESSAGE 1	The need To keep pace with changing patient demographics, health workforce pressures, cost increases and new technology, the healthcare system must mobilize all its resources for the maximum benefit of patients.
KEY MESSAGE 2	ACP's key role Alberta patients benefit from the key role played by pharmacists. Safe, effective and responsible pharmacist practice is upheld by the Alberta College of Pharmacists.
KEY MESSAGE 3	Pharmacists: an excellent resource Pharmacists are patient-focused, accessible, skilled medication management experts. This makes them an excellent resource to deliver innovative health services and programs cost-effectively.
KEY MESSAGE 4	Better outcomes Patients experience better outcomes and the healthcare system is strengthened when pharmacists and other health professionals work together to deliver health services.

In December you received a colourful publication entitled *The Transition Times*, which included a poster and reminder card with four key messages. We hope you have found them useful.

The four key messages will pack the most power if we deliver them consistently to all our different audiences.

To help you put theory into practice, here are three examples that show how to use the key messages when answering questions you may be asked.

Q. Sometimes my pharmacist phones my doctor with some questions. Why do they need to bother the doctor?

Better Outcomes: Patients experience better outcomes when pharmacists and other health care professionals work together to deliver health services. Pharmacists can notify physicians about contraindications and drug interactions and assist with

monitoring drug therapy and medication use to facilitate the achievement of patient-specific goals.

Q. How do I know my pharmacist is trained to prescribe?

Pharmacists: An Excellent Resource: Pharmacists are patient-focused, accessible, skilled medication management experts, with more training about drugs and their effects on the body than any other health care provider. In addition to their training as pharmacists, they are required to complete ACP's orientation to the new standards and legislation before prescribing.

Q. Why are pharmacists such an important member of my health care team?

Pharmacists: An Excellent Resource: Pharmacists are recognized as medication management experts whose role is to

work in collaboration with patients, physicians and other health care professionals to optimize medication use to produce positive health outcomes. Pharmacists facilitate communication to physicians and other members of the patient's healthcare team about patient concerns related to drug therapy.

ACP's goal is to have all Albertans to clearly understand what pharmacists are capable of and what an asset to a health care team you are. By communicating frequently and thoroughly about the new practice framework and changes in your own practice, the public will be better educated about the work you do and adjust their expectations accordingly.

If you have any questions or comments about the key messages, please contact Karen Mills, Communications Leader at karen.mills@pharmacists.ab.ca, 780-990-0321 or toll free at 877-227-3838. ■

Infectious disease controls

Following the incidents of inadequate sterilization of surgical instruments at St. Joseph's Hospital in Vegreville and of improper disinfection and sterilization practices in a physician's office in Lloydminster, the Minister of Health and Wellness requested that Regional Health Authorities, the Alberta Cancer Board, and colleges of health professions inform him about their infection prevention and control policies, programs and systems. In August 2007, AH&W released a report titled *Provincial Review of Infection Prevention and Control* (www.health.gov.ab.ca/public/Infection-Prevention-Review_AHW-Aug-2007.pdf).

What did the report say?

The report addresses health professionals, regulatory bodies and regional health authorities, asserting: *"because infection control prevention is integral to the provision of safe, quality health services, it should be identified as an area of professional competence, including continuing competence, a criterion for regulatory body facility accreditation and a required component of Regional Health Authority health plans, performance agreements and business plans."*

However, the report also notes that "using self-assessment as a primary tool does not lend itself to a system-wide approach to consistent implementation of clinical standards,

particularly when a large number of professionals practice independently or provide services outside of RHA facilities."

Under the title *What will be done*, the report indicates that Alberta Health and Wellness will direct RHAs and regulatory bodies to ensure that healthcare workers develop and maintain competence in infection prevention and control practices. Initial priorities include cleaning, disinfecting and sterilization of critical equipment and devices and semi-critical instruments and equipment; and cleaning and disinfecting non-critical equipment and devices.

What does this mean for you?

While infection prevention and control is not explicitly noted in ACP competencies and standards, you are expected to incorporate this principle into your practice. The table below summarizes sources you need to be aware of.

These items and other general infection prevention and control activities will be added to the checklist for pharmacy assessments by the college. Watch for more information about infection prevention and control as provincial initiatives are developed and rolled out. ■

Table 1 – Summary of infection prevention and control information

Source	Information covered
Competency Profile for Alberta Pharmacist	
Section B-4	<ul style="list-style-type: none"> ■ preparation of sterile products ■ directs that you should demonstrate knowledge of, or be able to locate information in the areas of aseptic technique, contamination factors, sterilization techniques, and process validation.
Standards for Pharmacist Practice	
Standard 10.9	<ul style="list-style-type: none"> ■ preparation of sterile products
Standards for Operating Licensed Pharmacies	
Standard 71	<ul style="list-style-type: none"> ■ preparation of sterile products
Standard 25	<ul style="list-style-type: none"> ■ outlines the duty to maintain orderliness and cleanliness
Standard 34	<ul style="list-style-type: none"> ■ indicates that equipment must be cleaned, inspected and maintained to ensure proper functioning and the safety of the public.

Resources

Infection control

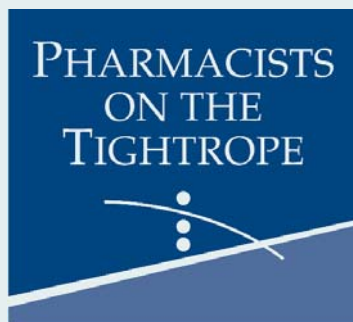
For an up-to-date summary of best practices, see the *Infection Control for Regulated Professionals – Pharmacists' Edition* published by the Ontario College of Pharmacists at [www.ocpinfo.com/client/ocp/OCPHome.nsf/object/Infection+Control/\\$file/Infect_Control.pdf](http://www.ocpinfo.com/client/ocp/OCPHome.nsf/object/Infection+Control/$file/Infect_Control.pdf) or go to the link on ACP's website under *Pharmacist Resources/Posters and Info Sheets*.

Learning portfolio tip...

Remember to claim only those learning activities for which you have the supporting documentation. For accredited programs, that is the certificate of course completion or course participation. For non-accredited learning, that is the non-accredited learning record form (available on the ACP website) you completed when you participated in the learning activity. Be sure to confirm the number of CEUs you are claiming matches that on your

certificate or the non-accredited learning record. The most common problems with audits of the learning portfolio are missing certificates, incorrect number of CEUs claimed, and lack of documentation of non-accredited learning on the requisite form.





ALBERTA COLLEGE OF PHARMACISTS
ALBERTA PHARMACISTS' ASSOCIATION
2008 JOINT CONFERENCE

Westin Edmonton / May 23 and 24

Keynote speakers announced for Pharmacists on the Tightrope

As part of the innovative conference we're planning to help you achieve excellence in the new practice framework, we have booked three outstanding speakers. Ross Holland and Christine Nimmo are creators of a systematic approach to implementing new practices amongst health care practitioners, a procedure that is now employed in many countries. Together they have written extensively about practice change in both community and hospital pharmacy.

Bill Zellmer serves as Deputy Executive Vice President of American Society of Health-System Pharmacists. He was editor of the American Journal of Health-System Pharmacy for many years.

A compilation of his editorials, entitled *The Conscience of a Pharmacist—Essays on Vision and Leadership for a Profession*, was published in 2002. Bill will engage delegates with his passion for the profession and his vision for the future of pharmacy.

We're looking forward to a great conference. Watch for the advance program to arrive early in the New Year.



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Rx
ALBERTA
PHARMACISTS
ASSOCIATION

Addition to new pharmacy licensing process coming

Effective July 1, 2008, new pharmacy licence applications will be required to provide a professional declaration stating that they have privacy policies and procedures in place. Council passed this motion at their Dec. 13, 2007 meeting, agreeing that this measure would assist pharmacies, the public, and the Office of the Privacy Commissioner in ensuring pharmacies comply with the *Health Information Act* and would prepare pharmacies for the Privacy Impact Assessment that will be required by Netcare.

Look to the college website, your email in-box, and future issues of *acpnews* for more details on this process. ■

Guidelines for communicating prescriptions now available

Early in November, the Alberta College of Pharmacists (ACP), the College of Physicians & Surgeons of Alberta (CPSA), and the College & Association of Registered Nurses of Alberta (CARNA) co-authored and released new guidelines entitled *Ensuring Safe & Efficient Communication of Medication Prescriptions in Community and Ambulatory Settings*.

ACP, CPSA and CARNA asked all health practitioners to put these guidelines into practice right away, recognizing that some of you may require a period of transition for implementation. We hope your implementation efforts to date have been successful. We encourage you to work collaboratively with your peers and colleagues as we all work toward the safest practice processes. All three colleges are publishing follow-up articles to keep all health professionals aware of these guidelines.

Ensuring Safe & Efficient Communication of Medication Prescriptions in Community

and Ambulatory Settings is available on ACP's website at http://pharmacists.ab.ca/practice_ref_library/standard_guidelines.aspx

Putting the guidelines into practice

Q. Do pharmacists have to call back every prescriber for every prescription left on our pharmacy answering machine?

A. It is not necessary for pharmacists to begin immediately calling back regarding all new prescriptions delivered via an intermediary. Rather, the guidelines are intended to encourage prescribers to speak directly to pharmacists when conveying new prescriptions.

Pharmacies might consider changing their automated answering systems to direct physicians to a recording system if they are communicating repeat prescriptions and to pharmacists for new prescriptions.

Q. Prescriber Responsibility #2 under Guidelines for fax transmissions states, "The prescriptions must be sent directly from the prescriber using a secure, confidential, reliable and verifiable fax machine...." How can one prove the fax machine is verifiable?

A. The wording in the former guidelines was that the fax must come directly from the physician's office.

Sometimes physicians fax from home after hours. The colleges felt that this may be preferable to verbal prescriptions so wanted to include something that allowed it to happen. Basically, it is up to the prescriber to ensure that the fax machine is secure and verifiable; the pharmacist must be able to call back to confirm and or to fax back with questions. That means, as per HIA, that the machine must be in an area where the privacy of the patient is protected when a fax is being received.

If you have questions about the guidelines or how to put them into practice, please contact Karen Mills, ACP Communications Leader at karen.mills@pharmacists.ab.ca. ■



Notes from the field...

Pharmacists and the professional "look"

When a patient looks behind the counter of a pharmacy, they expect to see a pharmacy professional looking back at them—not an unidentified person dressed in jeans and a t-shirt!

In a number of pharmacy assessments, we have noticed that there are a number of pharmacists who are not dressing in the appropriate manner befitting a health professional. The *Standards for Pharmacist Practice* state that it is a pharmacist's duty to act professionally and that when engaged in the practice of pharmacy, a pharmacist must

- (a) maintain a professional appearance and demeanour, and
- (b) be readily identifiable to the public, other regulated health professionals and other workers in the health care system as a pharmacist.

So, please be sure to wear your clean white coat and nametag that identifies you as a pharmacist to your patients!

Filling Plavix prescriptions for angioplasty patients

ACP has been made aware of a situation where a patient had a significant delay in having her Plavix prescription filled by her pharmacy because of "coverage issues." This is the second incident of this nature brought to our attention in the past year. ACP has brought our concern to the attention of Alberta Health and Wellness, as we are concerned about the procedures for special authorization. However, a patient's well-being must always take precedence over reimbursement issues.

Patients discharged from hospital requiring Plavix must receive it "stat." If there is a delay in

receiving authorization, the pharmacist should provide the patient enough medication for a period of time until the authorization is available. The pharmacist may choose to charge the patient, or they may choose to simply advance the medication. However, under no circumstances should the treatment be interrupted.

Missing doses of Plavix could have devastating results for a patient as the risk of re-occlusion of the coronary artery is very high after angioplasty.

If you are unsure of whether a Blue Cross form has been completed or who the prescriber is, please contact the hospital unit clarify with them.

Trend for longer professional development courses – is this the way of the future?

The UofA Continuing Pharmacy Education department has finished the second offering of the course, *Interpreting Laboratory Values: An Introductory Course for Pharmacists*. Twenty-five pharmacists from all over Alberta enrolled for this 12-week

professional development course. Why 12 weeks? It was a blend of classroom and distance learning, including a two-day workshop in Edmonton. The workshop introduced pharmacists to common laboratory tests seen in practice including complete blood count, urinalysis, liver and renal tests, thyroid tests, and cholesterol monitoring. There were three distance learning sessions that reinforced what was learned in the classroom and the opportunity for further interaction with the instructors and other pharmacists. The course

began and ended with assignments that explored the use of laboratory values in the pharmacists' own practice.

How many times have you left a program full of knowledge, only to find that you were not sure how to use that knowledge? This course aimed to bridge a gap between learning and applying the new knowledge in practice. Pharmacists report that this course has helped them use laboratory values in their practice. One pharmacist said, "I have found this course invaluable...it has helped to solidify so much information collected over the past 20 years in practice. I also have significantly increased my confidence level in interpreting the lab data I can access...I know when to make an issue of some values and when not to panic about others! I'm also finding that the increased confidence translates in better connections with my patients...they appreciate my confidence in interpreting some of their information."

Pharmacists were supported by instructors and facilitators who have experience using laboratory values in their practice. While pharmacists learned from the experience, so do the instructors and course administrators. Dr. Christine Hughes, a co-developer of this course, has been teaching laboratory values in the undergraduate pharmacy program at the University of Alberta, as well as continuing education programs for pharmacists for a number of years. She has found that involvement in this course "provides an opportunity to learn about the amazing things pharmacists are doing in their practice". Dr. Hughes also sees a change in "the level of engagement by pharmacists and their interest in learning" from other continuing education experiences she has had.

The distance learning aspect of the course was a real bonus for pharmacists. Instead of driving long distances for weekend or evening courses, pharmacists attended

Health Canada

Health Canada advisories

After the last edition of the newsletter went to print, Health Canada placed the following advisories on its website. You can obtain a copy by using the links below or by contacting Janet Spence at the college office at (780) 990-0321 or 1-877-227-3838, or by email at Janet.Spence@pharmacists.ab.ca.

The links will take you to the Health Canada website.

- **Abbott Diabetes Care Precision Xtra™**
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/2007/precision_xtra_hpc-cps_e.html
- **Marketing suspension of Trasyolol in Canada**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2007/2007_157_e.html
- **New restrictions on rosiglitazone products**
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/2007/avandia_hpc-cps_5_e.html
- **Three lots of MMR vaccine suspended from use**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/_2007/2007_169_e.html

Receive safety advisories directly from Health Canada

Subscribe to Health Canada's MedEffect e-Notice to receive health product safety advisories "hot off the press." This free service will keep you up to date with the latest health product warnings, advisories, and recalls. Subscribe by going to www.hc-sc.gc.ca/dhp-mps/medeff/subscribe-abonnement/index_e.html

sessions from their homes or workplaces. Another pharmacist said, "I enjoyed being able to access this information and work on the course on my own time schedule... As professionals, we are all clearly self-driven to improve, and I appreciate the manner in which this course was presented."

This program was originally developed to support pharmacists working to integrate laboratory values into their patient care practices. We wish to acknowledge all of the pharmacists who have taken this course – in 2006 and 2007 – for their commitment to learning and to change in their practice. The course will be offered again in 2008.

At the end of a very busy year, after developing another 'longer' course for anticoagulation management, Continuing Pharmacy Education and college staff do see a trend for longer courses and plan to develop more longer courses in 2008. We think longer courses, and investment in learning, is in our future! ■

Resources

Resource directory for International Pharmacy Graduates

ACP has compiled a summary table of current International Pharmacy Graduate (IPG) support services in Alberta and beyond. The table lists educational institutions' offerings for bridging programs, career coaching, cultural orientation, and exam prep.

You can find this new resource on ACP's website under *Registration & Licensure/Pharmacists/Applicants who received their pharmacy degree outside of Canada* or you can go directly to the table using the link: http://pharmacists.ab.ca/Content_Files/Files/IPG_SupportWEB.Nov07.pdf

Medication Safety Self-Assessment® for long term care is coming to a facility near you

The Health Quality Council of Alberta (HQCA) is coordinating a project with Alberta Health and Wellness and ISMP-Canada to bring the Medication Safety Self-Assessment® (MSSA) for long term care to Alberta. This project has the potential to improve the safety of medication management for residents in Alberta's continuing care facilities.

The MSSA tool has been developed by the Institute for Safe Medication Practices Canada (ISMP Canada) to help facilities:

- review the safety of their medication system,
- identify opportunities for quality improvement, and
- compare their results with the experience of similar facilities within the province and/or country.

All continuing care facilities in the province will be asked to participate. HQCA's goal is 100% participation, with data entry complete by the end of March 2008.

In each facility, a multidisciplinary team will work together to complete the survey. This will take approximately three hours. Once the facility enters their survey responses into ISMP-Canada's online database, they will have immediate access to reports showing their overall scores and how they compare to aggregate scores from other facilities in Canada who have completed the survey. Individual facility scores will remain confidential – the HQCA and Alberta Health and Wellness will receive only aggregate data on a province-wide and health region basis.

For more information about the project, please contact Dale Wright, Quality and Safety Initiatives Lead at HQCA (403-355-4439 or dale.wright@hqca.ca).

■

Alberta

Netcare

ELECTRONIC HEALTH RECORD



Netcare News

Alberta Netcare Portal 2006 is now Alberta Netcare Portal

Alberta Netcare has changed the name branding of Alberta Netcare Portal 2006 to "Alberta Netcare Portal". Gradually, all information will be converted over to the new brand.

If you have any questions, contact the Alberta Netcare Deployment Team at 1-866-756-2647 or email health.ehrdeployment@gov.ab.ca.

Seniors' drug dispense data no longer from Alberta Blue Cross

As of Fri., Dec. 14, 2007, the PIN database no longer acquired seniors' drug dispense data from Alberta Blue Cross. Information from all drug dispenses will now enter PIN directly from the dispensing pharmacies.

Alberta Blue Cross seniors' drug information already in PIN will remain on the patients' medication profiles, and is identifiable by the blue cross + symbol.



Capital Health Link Pharmacist Line launched

Capital Health launched a new Pharmacist Line through Capital Health Link in November. Pharmacists are now available to provide medication information and advice to callers after hours.

To access the service, residents in the Capital Health region dial 408-LINK (5465) or toll-free at 1-866-408-LINK (5465). Calls are forwarded by Capital Health Link to pharmacists in the community.

The line operates seven days a week from 5 p.m. to 9 a.m., when access to community pharmacists is limited. Capital Health Link anticipates approximately 10,000 calls annually (25 to 30 calls per night) to the Pharmacist Line.

Pharmacist Network Alberta delivers pharmacist services to Capital Health Link through a distributed network of community pharmacies. Partner pharmacies are Shoppers Drug Mart, Safeway, Save-on Foods, MediDrugs Pharmacy and London Drugs.



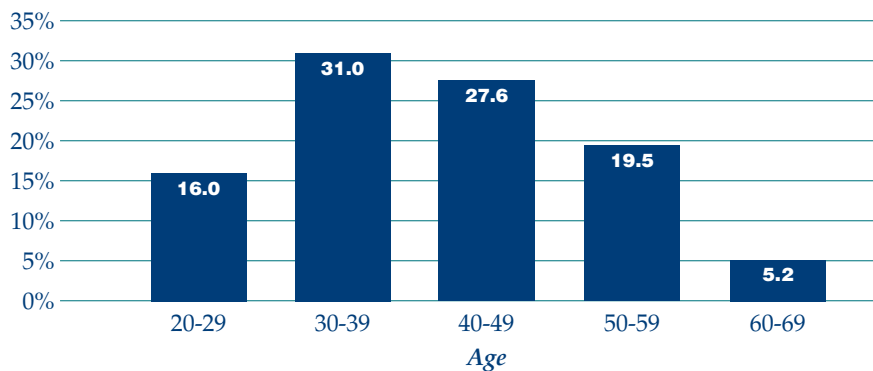
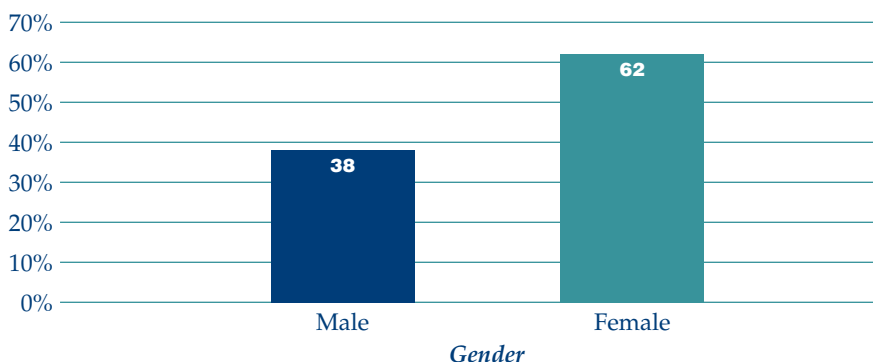
First CIHI pharmacist report released

The Health Human Resources team of the Canadian Institute for Health Information (CIHI) published the Workforce Trends of Pharmacists for Selected Provinces and Territories in Canada, 2006 in November. This is the first CIHI annual publication focused solely on the supply and distribution of the pharmacist workforce in Canada.

The Pharmacist Database is a comprehensive data source on the supply of the pharmacist workforce in Canada, and is intended for the use of all levels of government, researchers, stakeholders and advocacy groups, private and public organizations, media and pharmacists. ACP contributes to the database with the information registrants provide as part of the annual licensing process.

To view the whole report on CIHI's site, go to http://secure.cihi.ca/cihiweb/en/downloads/2006WorkforceTrendsofPharmacists_e.pdf

Summary of Alberta pharmacists workforce information



Get your tobacco cessation programs ready!

On Nov. 14, 2007, Bill 45, the *Tobacco Reduction Act*, passed third and final reading. Once proclaimed, the Act will:

- prohibit smoking in all public places and workplaces (proposed effective Jan. 1, 2008);
- ban tobacco displays, promotions and advertising in retail outlets (proposed effective July 1, 2008); and
- remove tobacco sales from pharmacies, health care facilities and post-secondary campuses (proposed effective Jan. 1, 2009).

Upon implementation, we expect to see a spike in the number of people who want to quit using tobacco. These Albertans will be looking their pharmacist for support.

The Alberta Cancer Board is working with its partners to develop a

comprehensive Cessation System, including a Provincial Cessation Centre and an *Ask, Advise, Refer* (AAR) program. In this program, you simply ask patients if they use tobacco, advise them to quit, and refer them to the Cessation Centre. The Cessation Centre will provide appropriate feedback to you about your patient's progress.



Alberta Cancer Board can provide you with all of the materials needed to take part in the AAR program including a PowerPoint presentation on how to use AAR, online referral forms, fax-back referral forms, and brochures for you and your patients.

To request materials, please contact Tanya Mudry at (403) 698-8197 or tanmudry@cancerboard.ab.ca.

Want to know more about Bill 45?

Go to:

- Bill 45 – www.assembly.ab.ca/bills/2007/pdf/bill-045.pdf
- Campaign for a Smoke-Free Alberta – www.smokefreealberta.com/take_action/bill_45.html
- The Alberta Cancer Board's Snapshot of Tobacco Facts: A Resource to Guide Tobacco Control Planning in Alberta, 1st edition – www.cancerboard.ab.ca/PS/Prevention/Tobacco ■



acp xPress

No faxes were sent since the last newsletter

acp emails

Issued between Oct. 25 and Dec. 14, 2007

External

- NO** ■ Career Opportunity – Complaints Director
- Nov. 22** ■ Contract Position – Pharmacy Assessor
- Nov. 28** ■ Reminder – Complaints Director position open
- Nov. 30** ■ Reminder – Pharmacy Assessor position open

Operations

- Oct. 25** ■ Notice of proposed by-law amendment
- Nov. 1** ■ ACP & RxA launch APEX Awards
- Nov. 5** ■ New guidelines for communication of prescriptions
- Nov. 22** ■ Fee by-law consultation – reminder
- Nov. 27** ■ APEX Award nominations due by Dec. 14
- Dec. 10** ■ Pharmacy technician registration information
- Dec. 11** ■ APEX Award nominations due FRIDAY

Meetings

- Dec. 5** ■ ACP Council meeting on Dec. 13, 2007

Practice Issues

- Oct. 30** ■ Seeking Berotec inhalers
- Nov. 5** ■ Notice of suspension of practice permit
- Nov. 9** ■ Seeking Diodoquin
- Nov. 14** ■ TB medications reminder
- Nov. 15** ■ Ibuprofen 400mg schedule change
- Nov. 22** ■ Request for Blephamide eye ointment
- Dec. 6** ■ Notice of suspension – update
- Dec. 11** ■ Request for Thioridazine
- Dec. 11** ■ Notice of suspension of physician
- Dec. 12** ■ AHW suspends mumps immunizations

See Health Canada advisories on page 8.



From the faculty

Dr. Mark Makowsky recently joined the UofA's Faculty of Pharmacy and Pharmaceutical Sciences as an assistant professor. He graduated from the UofS with a Bachelor of Science in Pharmacy with great distinction in 1998, completed a hospital pharmacy residency at the Health Sciences Centre in Winnipeg, MB in 2000, and received his PharmD from the University of British Columbia. He recently completed a two year postdoctoral research fellowship under the supervision of Dr. Ross Tsuyuki at the Epidemiology Coordinating and Research (EPICORE) Centre/ Centre for Community Pharmacy Research and Interdisciplinary Strategies (COMPRIS), at the University of Alberta.

Dr. Makowsky's practice and research focuses on how collaboration among physicians, nurses, pharmacists, and patients can improve medication management and outcomes in ambulatory individuals with chronic disease. Related research and teaching interests include evidence-based practice change in hospital and community pharmacy, continuity of care across healthcare

settings, pharmacist identification and management of patients with cardiovascular disease, compensation models for pharmacists' clinical care activities, and interdisciplinary approaches to health care professional education.

Research Day Oct. 19, 2007 was an opportunity for all graduate students in the Faculty to exhibit their research with podium presentations and posters. This year's event was dedicated to the memory of **Dr. Ronald G. Micetich** (1931 – 2006), an adjunct professor in the faculty.

Research Day featured two keynote speakers. David Grainger, PhD, College of Pharmacy, University of Utah spoke on "Antibodies as a Most Important Biotech Drug Family". Dale Cooney, BSP, MBA, Deputy Registrar, Alberta College of Pharmacists shared his presentation on "Safe, Effective, Responsible Pharmacist Practice" with attendees.

Over one hundred participants celebrated excellence in undergraduate, graduate and faculty accomplishments at the **'Focus on Pharmacy' Awards Event**, Nov. 25. Donors and supporters of the numerous awards attended and took advantage of the opportunity meet the recipients. ■

In memory



Arthur Koh of Edmonton passed away on July 9, 2007. Born in Hong Kong, Arthur moved to Canada and completed his pharmacy degree at the UofA in 1966. Arthur is survived by his wife Elizabeth, daughter Denise, an older brother and four sisters.

David J. Ritchie of Stony Plain passed away on Oct. 21, 2007 at the age of 60 years. A graduate of the UofA Faculty of Pharmacy in 1967, he brought his warm and contagious smile to pharmacies all over Alberta throughout his pharmacy career. David is lovingly remembered by his wife Teresia, his family, and many friends.

Dean Way died suddenly on Nov. 7, 2007, at the age of 36. An Alberta-licensed pharmacist who graduated from the UofA in 1994, Dean had recently moved to Penticton, BC with his wife Lori and their two children. Dean displayed a great passion and thirst for pharmacy knowledge and always ensured that he provided the most thorough answers to his patients' questions. Dean worked at Safeway Pharmacy, Shoppers Drug Mart Pharmacy, Rexall Drugs, and Ponoka Professional Pharmacy during his career and will be missed dearly by his family, friends, patients, and colleagues.



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