

Tablet

SPRING 2018 | ADVOCATING FOR BRITISH COLUMBIA PHARMACY

NEW!

Ask THE EXPERTS

Documenting verbal prescriptions

PAGE 25

Drug Information RESOURCES

A look back at pharmacy in 1968

PAGE 23

5 TIPS

Best practices
for community
pharmacy managers

PAGE 26

Best & Brightest

9 extraordinary people
making a difference in
B.C. pharmacy

PAGE 14



British Columbia
Pharmacy Association
bcpharmacy.ca

50
YEARS
Passion &
Excellence
1968-2018

Affinity Rx

BCPhA prescribed member discounts

BC Lions
Canucks
Car rental
Cineplex
Hotels around the world
PNE and Playland
Show tickets
and much more!

Club 16
Trevor Linden Fitness

YYOGA

STEVE NASH
FITNESS WORLD
& SPORTS CLUB

Save on fitness memberships

Club 16 Trevor Linden Fitness, YYoga and Steve Nash Fitness World

Member rates for monthly membership and five or 10-class passes.
Learn more at www.bcpharmacy.ca/affinityrx

TELUS

Two-year rate plans

Unlimited Canada-wide calling
Unlimited text, picture and video messaging
Cash and credit back offers
3GB for \$60/month
5GB for \$70/month



Save from 10 - 45%

Tickets starting as low as \$43.50
A variety of tickets still available

Save even more on last minute tickets! Sign up on the last-minute contact list to find out about last minute price drops.



Image from: www.canucks.com

Hotels around the world

On average
10 to 15% cheaper
than any other
booking website



Visit our [website](http://www.bcpharmacy.ca/affinityrx) for more offers!

- Car rentals around the world
- Financial services
- Hotels around the world
- Musicals, shows and restaurants
- PNE/Playland
- Retail products and services
- Sporting events (BC Lions, Whitecaps, Vancouver Giants)
- Subscriptions

HOW TO ACCESS THE DEALS

Log into www.bcpharmacy.ca and go to the **Member Benefits - Affinity Rx** section or email andy.shen@bcpharmacy.ca



Contents

Cover Feature

- 14 AWARD WINNERS** Nine individuals are honoured with BCPhA's 2018 Pharmacy Excellence Awards, showcasing pharmacy's extraordinary talent **BY ANGELA POON**

Clinical Feature

- 23 DRUG INFORMATION RESOURCES** A retrospective of the 1968 "drug information pharmacist" and the resources available to them **BY RAYMOND LI**

Pharmacy Practice

- 25 ASK THE EXPERTS** Documenting verbal prescriptions for frequent dispensing

- 26 BEST PRACTICES FOR COMMUNITY PHARMACY MANAGERS**
Five helpful tips for ensuring regulatory compliance **BY ANN JOHNSTON**

- 28 BIOSIMILAR DRUGS** Expanding area of pharmaceuticals creates opportunities for pharmacists **BY ELAINE M. COOKE**

Endnote

- 30 KEY MOMENTS IN BCPHA HISTORY** A timeline of top events over the past 50 years

News Dose

- Member Profile** 7
Member Updates 6
Meet Dr. Bonnie Henry 8
AGM Bylaw Updates 10
Board Elections 12

Messages

- President's Message** 4
CEO Message 5

ON THE COVER

First Nations Health Authority pharmacist Cindy Preston at West Vancouver's Ambleside Park.

PHOTO: VINCENT CHAN



Check out all the latest news at bcpharmacy.ca | Got a story to share? Tell us at editor@bcpharmacy.ca



Alex Dar Santos

Honouring pharmacy’s shining stars

In what has been a turbulent year for community pharmacy, with price cuts, opioid epidemics and general anxiety over the future feasibility of the industry, I think at the end of the day we can all agree on what makes every pharmacist continue to press on: providing exceptional health care for patients in need.

While we may all hold this fact close to our hearts as we go about our daily work, it’s truly inspirational to come together to celebrate those among us who have excelled at driving the profession forward, taking industry-advancing risks and delivering life-changing pharmaceutical care.

This year’s BCPHA Pharmacy Excellence Awards winners (pg. 14) represent our industry’s greatest potential – to find innovative paths to practice to the utmost of our abilities, all while positively impacting patients and our communities at large.

It’s fitting to honour our best and brightest at the same time we kick off the festivities for the BCPhA’s 50th anniversary. What began as a volunteer-based society in May 1968 to unite the province’s pharmacists today has become a vibrant professional association collaborating with its more than 3,200 pharmacist members to bring about expanded scope and effective change for the industry and all patients. Read more on pharmacy’s history in B.C. (pgs. 23, 24 and 30) and snap a selfie to show your support in our Faces of Pharmacy campaign launching this spring (pg. 11).

With this issue of *The Tablet*, we are proud to debut a new look, with content further geared towards you, our reader. We tackle some of your toughest practice questions (‘Ask the Experts,’ pg. 25), offer constructive advice for optimal pharmacy operations (‘5 Tips for Community Pharmacy Managers,’ pg. 26), and provide insight to a growing new product opportunity (‘Biosimilars,’ pg. 28).

Moving forward into the next 50 years, our mission at BCPhA remains steadfast: to support your role as pharmacist, advancing your professional opportunities, securing economic viability and, above all, enhancing patient care. ■



Editor in Chief Angie Gaddy
(604) 269-2863, angie.gaddy@bcpharmacy.ca
Managing Editor Angela Poon
editor@bcpharmacy.ca
Art Director Caroline Toth

BCPHA BOARD OF DIRECTORS
President Alex Dar Santos president@bcpharmacy.ca
Board of Directors Mark Dickson, Julie Ford, John Forster-Coull, Linda Gutenberg, Randy Konrad, Annette Robinson, Shawn Sangha, Keith Shaw, John Tse, Chris Waller, Jamie Wigston
Contact the Board of Directors board@bcpharmacy.ca

OFFICE OF THE CEO
Chief Executive Officer Geraldine Vance
(604) 269-2860, geraldine.vance@bcpharmacy.ca
Executive Assistant to the CEO and Board Devyani Basoodetsing
(604) 269-2884, devyani.basoodetsing@bcpharmacy.ca

COMMUNICATIONS
Director, Communications Angie Gaddy
(604) 269-2863, angie.gaddy@bcpharmacy.ca
Communications Specialist Shirley Wong
(604) 269-2866, shirley.wong@bcpharmacy.ca
Communications Officer Andy Shen
(604) 269-2883, andy.shen@bcpharmacy.ca

PHARMACY PRACTICE SUPPORT
Director, Pharmacy Practice Support Linda Gutenberg, RPh
(604) 269-2862, linda.gutenberg@bcpharmacy.ca
Manager, Pharmacy Practice Support Ann Johnston, RPh
(604) 269-2865, ann.johnston@bcpharmacy.ca
Coordinator, Pharmacy Practice Support Nelson Chen, RPhT
(604) 269-2880, nelson.chen@bcpharmacy.ca

MEMBER SERVICES
Director, Member Services Vince Lee
(604) 269-2867, vince.lee@bcpharmacy.ca
Member Services Linda Tinnion
(604) 269-2864, linda.tinnion@bcpharmacy.ca
Administrative Assistant, Member and Corporate Services Starr Rempel
(604) 261-2092, Ext. 0, starr.rempel@bcpharmacy.ca

CORPORATE SERVICES
Controller Gary Mui, CPA, CA
(604) 269-2869, gary.mui@bcpharmacy.ca
Database Administrator Ray Chow
(604) 269-2882, ray.chow@bcpharmacy.ca

SPECIAL PROJECTS
Director, Special Projects Bryce Wong, RPh
(604) 269-2868, bryce.wong@bcpharmacy.ca

The Tablet is published by the BCPHA. Views expressed herein do not necessarily reflect those of the Association. Contributed material is not guaranteed space and may be edited for brevity, clarity and content.
BCPhA Offices: #1530-1200 West 73rd Avenue Vancouver, BC V6P 6G5 telephone: (604) 261-2092 or toll-free in BC: 1 (800) 663-2840 fax: (604) 261-2097 toll-free fax: 1 (877) 672-2211 e-mail: info@bcpharmacy.ca web: bcpharmacy.ca
Publication agreement #40810576



Geraldine Vance

Finding our way forward

By all measures, 2018 has gotten off to a tough start for community pharmacy. The new generic drug pricing agreement developed jointly by the pan-Canadian Pharmaceutical Alliance and Canadian Generic Pharmaceutical Association cuts deep, and it follows several years of significant cuts to the sector. The five-year initiative has created uncertainty and left most wondering what lies ahead.

As you read this issue of *The Tablet*, you will be sharing in the celebration of both the BC Pharmacy Association’s 50th anniversary and the 2018 winners of the BCPhA Pharmacy Excellence Awards. There is some exceptional patient care being delivered by B.C. pharmacists, and the Association’s 50th anniversary is a time to reflect on the advances that have been made in the profession.

Year after year, community pharmacists have risen to the challenge of managing more and more patients under challenging and changing conditions. In 2017 it is estimated that pharmacists dispensed more than 70 million prescriptions to patients across the province. Each and every one of those patients who picked up their prescription had the opportunity to engage with a health-care practitioner that, in all likelihood, sees them more than any other member of the health-care team. We believe these precious opportunities are where the future of the pharmacy profession lies.

Much time is being spent adding new language to how pharmacists describe themselves – clinical pharmacists, distribution pharmacists and other terms have crept into the pharmacy lexicon. I think what is more important than labels is a reminder about what is, and always has been, at the core of the profession: caring for patients. This is where the value of pharmacy is proven, with many environments in which quality patient care can be delivered. Despite continuous changes to the pharmacy sector, the one constant over the last 50 years is that pharmacists have broad expertise, that when applied against individual patient problems, can make a difference to that patient’s wellbeing.

I certainly don’t want to minimize the very serious financial challenges that exist for community pharmacy across the country. Economic sustainability is directly linked to access. In simple terms, if pharmacies don’t have a sustainable business they won’t be there. And this reality may be most impactful in small communities, where access to pharmacy service is critical.

But what I do want to say is, that despite the dark clouds, community pharmacy has expertise and relationships with patients that can’t be met by any other health-care professional. With this at the centre of our understanding, we can find a way forward.

I congratulate all those who came before us and established our association and have battled for pharmacy to stand in its rightful place in the circle of care for patients. Happy anniversary. ■

The Tablet asks our contributors: “What do you think will be the biggest change to community pharmacy 50 years from now?”



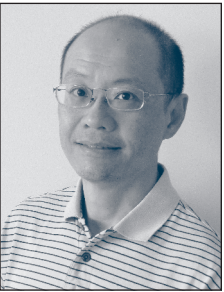
Elaine M. Cooke has been a Certified Diabetes Educator since 2002 and is Editor-in-Chief of *Diabetes Communicator*, a professional publication of Diabetes Canada. “Fifty years from

now I envision the community pharmacy having two distinct areas; one focused just on dispensing and the other on reimbursable patient care by a pharmacist.”



Ann Johnston has been a manager with the BCPhA Pharmacy Practice Support team since 2017. “I see community pharmacies embracing personalized medicine – moving

away from a one-size-fits-all approach and using pharmacogenomics information to achieve best outcomes in treatment and management of diseases.”



Raymond Li has been a pharmacist at the BC Drug and Poison Information Centre for the past 25 years. “I think pharmacist prescribing will have come to fruition, partly due to

pressures on the health-care system caused by population growth and aging.”

Member News

Do you have a professional or personal update you want to share in *The Tablet*? Email editor@bcpharmacy.ca to share your member news.

Prince George pharmacist and pharmacogenomics research participant **Curt Fowkes** welcomed a new baby, Gradie Madeline Fowkes, on March 29, 2018.

Former UBC Dean of Pharmaceutical Sciences **Dr. Robert Sindelar** joins the Board of Directors for VANC Pharmaceuticals Inc.

Member **Nafisa Merali** receives national Charles H. Best Award from Diabetes Canada at the organization's volunteer appreciation celebration on April 18, 2018. The award recognizes a health professional who has made a significant difference across Canada towards improving the quality of life of individuals living with diabetes.

Greg Shepherd, CEO of Pharmasave Drugs (Pacific) Ltd., will represent his company on Team CTV for the Ride to Conquer Cancer benefiting the BC Cancer Foundation. The 200 km cycling ride between Cloverdale and Hope takes place in August. For more information or to make a donation, visit ride.conquercancer.ca/vancouver.



UBC student pharmacist cycling for diabetes awareness

Four years ago, University of British Columbia pharmacy student and BCPHA member **Boris Trinajstic** had a revelation. Following a routine visit to his family doctor, he became aware of how sedentary and car-dependent his lifestyle was.

“I remember making some changes in my life following that revelation,” says Trinajstic, who took up running and recreational ice hockey. “What I’ve come to realize is that as a future pharmacist, I’m better poised to make a difference to my patients, similarly to how I made a difference in my own life.”

It was in this time of transition that Trinajstic found a new passion – cycling. And this spring and summer, he is putting his newfound sport to good use, raising funds and awareness on behalf of diabetes research.

“This fundraiser not only stands for awareness for Diabetes Canada, but also for pharmacists making a difference in the struggle

against diabetes.”

Trinajstic will be competing in a series of running and cycling events over the next several months, culminating in the grand finale of the 2018 RBC GranFondo Whistler on Sept. 8, a 122 km race from Stanley Park to Whistler Village.

Training will involve daily bike rides to and from downtown Vancouver and UBC, swimming laps, biweekly runs around Stanley Park and lengthy weekend rides across the Lower Mainland.

“For BCPHA members, I would hope my story can help demonstrate that we don’t need to be Olympians to make a difference in the lives of our diabetic patients, and that collectively, we can continue to prove our worth to British Columbians,” he says.

So far, Trinajstic has raised more than \$2,000 for Diabetes Canada. To learn more or donate, visit facebook.com/borisagainstdiabetes. **T**



For almost seven years, **Irvin Tang** has been based in northern B.C. as associate at the Shoppers Drug Mart located in downtown Fort St. John. Little did Tang know that his career calling would be in pharmacy, let alone in a small oil and gas town of 22,000 residents. When the sports enthusiast’s application to study physiotherapy at UBC was declined, a friend recommended pharmacy instead. Still keen to pursue health, Tang applied for the pharmacy program, was accepted and never looked back: “Pharmacy became my new challenge.”

During his practicum, Tang headed east to work at Shoppers Drug Mart, in both Brantford and then Toronto. Tang soon felt the pangs of B.C. calling him back but this time, he headed north to conduct relief work for several months in Kitimat. Upon graduation in 2005, Tang continued with Shoppers with a two-year gig in Fort St. John, followed by several years in Victoria.

But in 2011, a strange turn of events changed his life’s direction. Following up on some paperwork for a new position with Rexall on Vancouver Island, he contacted his former employer, Shoppers, and heard the associate owner position was available. Tang promptly applied, packing his bags and heading north to join Shoppers once again. Tang has been in Fort St. John ever since.

Pharmacy life in the little big town of Fort St. John

So you are back in Fort St. John. What makes this community your home?

People assume that a small city means it’s a one-road town, that it’s rural. Quite the contrary. Fort St. John may have a population of 22,000 but there is also an oil and gas industry here. That brings jobs and work opportunities. I also see a younger population. In fact, Fort St. John has one of the highest birth rates per capita in Canada. You get a mix of young families, the farming community and lots of folks from Vancouver and Victoria.

Is there any difference between large and small cities when it comes to minor ailments prescribing?

Minor ailments prescribing is not an issue restricted to Fort St. John. We see the issue of physician shortage all around. What I consider to be a major advantage of a small community is that patients could rely on pharmacists for health-care support and not have to go to a physician for minor ailments, especially if wait times are two to three weeks long.

We are also close to the border of Alberta where pharmacists have the authority to prescribe for minor ailments so when patients come to B.C., they don’t understand why they can’t get the same treatment. It’s not only frustrating for patients, it’s frustrating for pharmacists. We end up using an online app to get medical counsel, which is helpful in the interim but it also leads one to be dependent on online physicians. I

do see value in the app, however, when patients need peace of mind for minor health conditions while waiting for results from their physicians.

Do you enjoy working in a larger pharmacy versus a small, independent one?

There is an advantage in being in a larger pharmacy. For example, there is only one Shoppers Drug Mart in a 75 km radius, so we have an advantage of being able to operate more frequently, such as over the holidays. As a larger store we “never close,” as some patients have told us. We’re open on Christmas Day. If we weren’t open that day, then your sick child wouldn’t get the treatment they need. They should not have to go through another day. Last Christmas, in four hours, about 80 people or scripts came through, and a good number were from emergencies. Hospitals don’t provide medicine but pharmacies do. Patients can come to us. We are here to help.

Is it easy or difficult to find good pharmacy staff in Fort St. John?

Staffing is quite unique here. We see a big age gap in our staff, attracting recent high school grads and college students and then those in their 30s and 40s, seeking part-time work. We don’t get people in their 20s. When it comes to finding good talent in the area, most applicants do not have the required skills to work in a pharmacy. An interesting

continued on page 9



Meet B.C.'s provincial health officer Dr. Bonnie Henry

The Tablet speaks with Henry to gain insight into her new role and its impact on community pharmacy in the province.

First of all, congratulations on your new role. What do you see as your highest priorities and top things to tackle?

Thank you! I am very honoured to serve in this important role and to continue the work of Dr. Perry Kendall. My highest priority is probably no surprise as we continue to struggle with the overdose crisis that is taking so many lives in B.C. – that is number one. But there are a number of other issues that are upon us as well, including the legalization of cannabis and the ongoing concerns about climate change and the impacts on health. My other priorities include continuing our work to reduce the disparities in health for Indigenous peoples in this province and to further the health of children and youth.

With last year's overdose death rate at its highest numbers, what role do you see B.C.'s community pharmacists playing in the overdose epidemic?

This crisis continues and I believe there are several key roles for pharmacists, from educating people about naloxone and having it available to advising people about safe use of prescribed opioids. Pharmacists have relationships with many diverse members of their community and can play an important role in starting conversations about substance use and risks.

Support for patients with mental health issues is also critical. How do you see pharmacists playing a role in this?

There is much work to do to develop an integrated system for supporting mental health in B.C. and that work has started with our new Ministry of Mental Health and Addictions. Pharmacists can play an important role in recognizing people who need support and having those conversations to connect them to supports in the community.

In your previous roles, you've handled infectious disease outbreaks. Pharmacists have provided more than half a million flu immunizations this past year and are increasing the ability to give vaccines for travel. What do you see on the horizon for the role of pharmacists in managing outbreaks in the future?

Pharmacists have played a key role in influenza immunization for many years now, since the influenza pandemic in 2009. Pharmacist immunizers have also been active in supporting adult immunization in our communities, particularly pneumococcal immunization and zoster, etc. Having more competent immunizers in our communities has already been a welcome addition to our response to outbreaks. A great example is the support to the response to the recent meningitis outbreak in the South Okanagan last December where pharmacists were an integral part of the response that saw over 15,000 teenagers protected from meningitis with the quadrivalent vaccine.

While recreational cannabis becomes legal later this year, community pharmacists are also advocating for a review of the medicinal cannabis framework. What do you see as the next steps in managing these dual tracks?

I absolutely agree that we need to have more evidence to support the use of medical cannabis and to understand what conditions it works for and what doses are effective. We have been very active in the provincial committee that is developing the standards for how recreational cannabis will be available in B.C. and foremost for me is ensuring we take an approach that minimizes harms by increasing education and reducing availability to youth in particular. **T**

Pharmacy life

continued from page 7

part of our recruitment efforts is that we see an expansion in applicants from international backgrounds. For example, rather than applying and, at most times, compete for positions in busier locations such as Vancouver, I have colleagues who are transitioning into Canada, getting their residency and learning their way around here. They find being in a smaller community really helps them to practice their English yet still enjoy all the things B.C. has to offer. And it tends to be mostly females that enter the pharmaceutical field here, as males go into the gas and oil industry.

Any last words to share about pharmacy life?

Pharmacies play a crucial role, not just in dispensing medications, but from a budget point of view where health-care costs need to be shared and managed across the board. Pharmacists can assist physicians in providing health-care knowledge, helping to free up the physicians' time. Physicians and pharmacists get along very well in a smaller community. We even have physicians' cell phone numbers so if we don't know them by face, we can certainly speak to them on a regular basis. Pharmacies don't have barriers; we are accessible. **T**

Dr. Bonnie Henry was recently appointed as the new provincial health officer for B.C. on Feb. 1, 2018, following a three-year term as deputy provincial health officer.

Prior to these roles, Henry served as a medical director with the BC Centre for Disease Control, with a wide portfolio including communicable disease prevention and control and public health emergency management.

Before moving to B.C., Henry was an associate medical officer of health with Toronto Public Health and, in 2003, was the operational lead in response to the SARS outbreak in Toronto.

Henry received her medical degree from Dalhousie Medical School and Masters in Public Health from the University of California, San Diego. She has worked internationally with the World Health Organization and UNICEF to eradicate polio in Pakistan and control Ebola in Uganda.

Author of *Soap and Water and Common Sense*, Henry shares her wealth of medical knowledge as an associate professor at the University of British Columbia's School of Population and Public Health.





the **best choice** for
independent Pharmacy in BC

over **35 years** of experience

over **600 stores** nationally
& growing

100% member owned
& governed

JOIN
IN OUR SUCCESS

Business Opportunities:
Greg Shepherd, CEO, Pharmasave (Pacific Region)
1.800.665.3344 ext. 738
gshepherd@pharmasavebc.ca

Career Opportunities:
careers@pharmasavebc.ca
www.pharmasave.com



Proposed bylaw amendments presented at AGM

The BC Pharmacy Association Board of Directors is bringing forward two bylaw amendments at its Annual General Meeting on May 26.

Last fall, the Board approved moving the Association's fiscal year from September 1 to the calendar year starting on January 1, 2019 to ensure the BCPhA meets its obligations under the new Societies Act. As a not-for-profit organization, the Association must hold its Annual General Meeting within six months of the fiscal year end. The BCPhA's AGM takes place annually at its conference in May.

Since the new fiscal year will begin in January 2019, it made sense to move the election of Board of Directors from the spring to the autumn. Traditionally, the newly elected Directors attend the final meeting of the fiscal year before the start of their term. In the new fiscal year, the final meeting is expected to happen at the end of November. To maintain this tradition, the election must take place prior to the end of November.

The bylaw proposed to members is to move election day from April to November 1. This date would give newly elected Directors time to attend the Board meeting scheduled for late November.

Additionally, electronic voting is being brought forward to members for a vote at the AGM.

To allow for electronic voting in Board elections, the bylaws of the Association will require changes. The proposed bylaw to permit electronic voting would see work begin before a staged roll-out starting in 2019. This is to ensure members are engaged,

can easily understand how to exercise their right to vote throughout the transition and that any technical challenges can be managed appropriately.

Discussions on electronic voting began in 2017, when the BCPhA Board of Directors established an e-Voting Working Group, tasked with looking at the impacts of using electronic voting in the Association's elections. This group was also tasked with making recommendations to the Board, which included proposing amendments to the BCPhA bylaws allowing for electronic voting.

The working group determined that electronic voting can facilitate member voter engagement, simplify the voting process, and enable members to exercise their democratic rights if the system ensured four things: the security and integrity of the voting process, voter access and confidentiality, reliability, and voter confidence in the election outcome.

The group recommended that the BCPhA should move to an electronic voting system in stages over a period of several years. This will give the Association and members time to make the transition while ensuring that voter turnout and participation can continue uninterrupted. The group also recommended the Association shouldn't immediately eliminate the use of traditional mail-in ballots. **T**

I am the #FaceofPharmacy



Be the Face of Pharmacy

Go to www.bcpharmacy.ca
and learn how to put your best face forward
for a chance to win one of five \$50 gift certificates

The contest runs May 24 to June 22.
Winners will be announced week of June 25.

BCPhA Board members elected

BC Pharmacy Association members elected three representatives to the Board of Directors on April 16, 2018. Congratulations to two returning Board members, John Forster-Coull and Chris Waller, and new Board member Michael Huitema of Shoppers Drug Mart in Kamloops. Each begins their three-year term on Sept. 1, 2018.



John Forster-Coull
Owner/Manager, Victoria Compounding Pharmacy (Victoria)

John Forster-Coull joined the BCPhA Board of Directors in September 2015. Forster-Coull is a true Vancouver Island local, as he was born and raised on the island and is the owner/manager of the oldest pharmacy in Victoria, Victoria Compounding Pharmacy.

He completed both his undergraduate pharmacy degree (1988) and Doctor of Pharmacy degree (1995) at the University of British Columbia. He also completed a hospital residency at St. Paul's Hospital.

Forster-Coull began his career as a clinical pharmacist at Royal Jubilee Hospital in Victoria, before heading back to UBC to complete his PharmD. After graduat-

ing, he returned to Victoria and worked in the intensive care units at both Royal Jubilee and Victoria General Hospital. In 2001 he joined Victoria Compounding Pharmacy as the pharmacy manager and in 2007 became the owner/manager.

While serving his first term as a BCPhA Board member he has acted as chair of the Medical Assistance in Dying (MAID) and e-Voting committees.

He also serves on the Board of Directors at uniPharm Wholesale Drugs Ltd. Outside of work hours, Forster-Coull can be found on the golf course or travelling somewhere fun with his wife, Jayne, and their two daughters.



Michael Huitema
Pharmacy Manager, Shoppers Drug Mart (Kamloops)

Michael Huitema graduated from the University of Alberta with a BSc in Pharmacy in 2007. As Huitema grew up with both parents owning various small businesses, he has been involved in small community business his whole life. Since graduating, he's been living and practicing in the interior in Kamloops where he has been the associate-owner of Shoppers Drug Mart #277 for the past 10 years.

Huitema has been an active Certified Diabetes Educator for the past four years and has participated regularly in teaching students about diabetes as part of their foot care nurse certification. Huitema is particularly passionate about antibiotics

and preventing antibiotic resistance. He enjoys giving lectures to student nurses at Thompson Rivers University about antibiotic medications and how to use them responsibly in the health-care setting.

For the past 10 years he has also enjoyed being a practice educator in the Office of Experiential Education with the University of British Columbia.

Huitema has been involved in community by helping coordinate pharmacists' response to help those displaced by wildfires and raising money for the local YWCA women's shelter for the past eight years. In his spare time Huitema enjoys spending time with his wife and three children.



Chris Waller
Pharmacist Owner, Lakeside Medicine Centre (Kelowna)

Chris Waller joined the BCPhA Board of Directors in September 2015. He is the pharmacist/owner of Lakeside Medicine Centre Pharmacy in Kelowna.

Waller was born and raised in Kelowna and graduated from the University of British Columbia with a Bachelor of Science in Pharmacy in 1998.

He was brought up in the pharmacy industry and his father Ron Waller opened Lakeside Clinical Pharmacy (now called Lakeside Medicine Centre) in 1973. When he turned 16, Waller started working for his father doing deliveries, filling prescriptions and working in the home health-care department.

He enjoyed this work as it allowed him to interact with people and help solve their problems. Therefore, after

some uncertainty during college, it seemed natural to return to the pharmacy industry. While Waller was a student he worked as an assistant at Lakeside Clinical Pharmacy and then later became a co-owner of the pharmacy with his father.

He is a member of the Professional Compounding Centers of America. Waller is particularly interested in the many aspects of compounding, HIV treatments and the new developments in Hepatitis C treatments.

A self-confessed fitness nut, he spends a lot of his spare time training for triathlons or marathons. As well as running and cycling, Waller also enjoys golf, downhill and cross-country skiing and working in his garden. **T**

A PROGRESSIVE PARTNERSHIP

Insurance that stands with you.

Wynward's Pharmacists Malpractice policy is the result of working side-by-side with The British Columbia Pharmacy Association and Adams Cambie Insurance Services Ltd. to provide the comprehensive and responsive coverage pharmacists expect from their insurance.

wynward.com



Award Winners

The 2018 BC Pharmacy Association Excellence in BC Pharmacy Awards honour nine individuals working diligently to enhance the role of pharmacy within the broad spectrum of community health care. Six pharmacists, two UBC pharmacy students and one pharmacy collaborator were recognized for their extraordinary contribution to pharmacy, as innovators and luminaries in their field, at an Awards Gala on May 25. To learn more about this year's winners, visit bcpharmacy.ca/awards. **BY ANGELA POON**

Cathie Hamm EXCELLENCE IN PATIENT CARE AWARD

TITLE Pharmacy Manager
WORKPLACE Kornak & Hamm's
LOCATION Williams Lake

It's not any exaggeration to say that Cathie Hamm has given her life to serving patients at Kornak & Hamm's Pharmacy in Williams Lake. Originally opened by her mother, the store has been a second home to Hamm for nearly four decades. Starting as a part-time assistant at 15, Hamm soon pursued the family business, graduating from the University of British Columbia in 1993 and taking over as pharmacy manager in 1995.

With a deep-seated love for her patients – many of whom have been customers since the shop opened in 1981 – Hamm works hard to meet the needs of her small town community.

"What I'm most proud of is the focus on the client," says Hamm. "To me, that's what it's all about. You do what you can for your patient everyday. I make sure things are done right for them; it is my nature to care."

This natural instinct was highlighted this past summer, when wildfires blazed throughout B.C.'s interior region. With Williams Lake under alert, and no shipments coming in, Hamm and a friend drove to Prince George and back, making way through roadblocks to bring in required medications for patients trapped nearby. As the devastation continued to worsen, Williams Lake and the surrounding areas were forced into a mandatory evacuation. Despite nearly losing her own home,

rescuing her animals and escaping with her family to safety at a friend's home in Kelowna, Hamm felt a calling to return to town to volunteer during the state of emergency, servicing her patients, community and the surrounding areas.

Encouraged by her long-time life and business partner, Mary-Jo Hilyer, Hamm returned to an empty town to open up shop. First working alone and then later with one other pharmacist, Kornak & Hamm's fulfilled lifesaving prescriptions for those in need within the surrounding area. "I just wanted to be part of what was happening," she says. "We all came together and we all made it through, we were there for each other."

Today, Hamm feels ready for her second act. Handing over the reigns to her cousin, pharmacist David Shand, this spring Hamm will keep part-time hours while pursuing other interests such as gardening and community theatre.

"Any pharmacist will tell you, you make connections with people, you get to know them, they get sick and sometimes you lose them. It's really hard, but you respect the role they played in your life and you move on. You learn to accept the cycle.

"When you think things are over, something else is always going to come along."

"We all came together and we all made it through, we were there for each other."



Opposite page:
Williams Lake
pharmacist Cathie
Hamm won the
Excellence in Patient
Care Award for
helping patients
during the 2017
wildfire season.



Victoria pharmacist Jason Cridge won the Ben Gant Innovative Practice Award for his groundbreaking work with in-home health care.

Jason Cridge BEN GANT INNOVATIVE PRACTICE AWARD

TITLE Owner and Pharmacy Manager
WORKPLACE Cridge Family Pharmacy
LOCATION Victoria

Possessing a self-described ‘entrepreneurial spirit,’ Jason Cridge has accomplished in his six years of practice what many pharmacists might accomplish in an entire career.

Soon after graduating, Cridge took an unconventional next step and opened his own pharmacy in downtown Victoria in the summer of 2013: Cridge Family Pharmacy.

“I definitely thought it was going to be easier than it was,” Cridge says, with a chuckle. “Going into pharmacy ownership is such a huge undertaking, it will always be a huge transition.”

After experimenting with a few different service offerings and programs – some more successful than others – Cridge identified his community’s biggest need: in-home health care for seniors, including assistance with medication administration and adherence.

“There is a huge need in the community for pharmacy-supported home care,” Cridge says. “We often have no idea if people are taking their medications correctly. There can be a gap between patients picking up their medicines at the pharmacy and them actually taking them.”

Cridge set out to address this need, in an effort to both enhance the quality of life for his patients as well as set his pharmacy apart in a competitive market. Over the past year, the young pharmacist and business owner has worked diligently to evolve his in-home service model, hiring both pharmacy professionals as well as nursing staff (both licensed practical nurses as well as registered nurses) to manage a growing medication administra-

tion program.

His biggest boost to business, however, has been through the integration of a cutting edge technology called spencer. An automated dispensing machine fully serviced by the pharmacy, the device serves as an interconnected health hub, digitally linking the patient with his or her caregivers and pharmacist, as well as important loved ones. This provides a seamless continuum of care, which enhances a patient’s quality of life and often extends their ability to live within their own home, says Cridge.

Initially skeptical of the device, Cridge quickly became a believer when meeting with local doctors to gauge their reaction to the service.

“The prospect of managing these patients is an incredible financial burden to the health-care system,” says Cridge, who has since presented the product to more than 200 individuals within the health-care industry. “To be serviced by a pharmacy, providing end-to-end support for patients, the reception we received was astounding.”

One of only five pharmacies in Canada currently offering the unique service model, Cridge anticipates a huge upswing in the near future.

“I wouldn’t be surprised if there were 10,000 spencers in pharmacies across Canada in the next 18 months,” Cridge predicts. “There has been so many people trying to innovate within our scope of practice, and this is an honest benefit that pharmacists can provide their patients that no other group of professionals is positioned to provide.”

Tara Oxford PHARMACY LEADERSHIP AWARD

TITLE Pharmacy Manager
WORKPLACE London Drugs
LOCATION Courtenay

Never one to rest on her laurels, Tara Oxford has always believed in pushing beyond her comfort zone, in life and career.

Born and raised in the UK, Oxford first stepped foot in a pharmacy at 16 when she applied for a weekend assistant position. Finding the work interesting and challenging, Oxford’s career quickly escalated, moving from pharmacy technician to licensed pharmacist to store manager for UK pharmacy giant Boots, all within a few short years.

“I was only nine weeks licensed as a pharmacist when I became a store manager,” she recalls of her budding career. “Suddenly I’m in the throes of running an entire store, with different levels of capabilities and skillsets, as well as being a pharmacist.”

She relished the challenge, acquiring skills in performance management and conflict resolution while simultaneously building her expertise as a pharmacist. While Oxford’s career flourished, her entire perspective changed in 2005 with the arrival of her daughter, Charlotte. Her birth had awakened in her and husband, Ian, a long-forgotten dream of moving to Canada, which now felt essential to their future as a family.

“We just thought, ‘Our future is in Canada, our daughter’s future is in Canada,’” notes Oxford, who first fell in love with B.C. and its natural beauty, wide open spaces, friendly people and overall quality of life on her first visit in 1998.

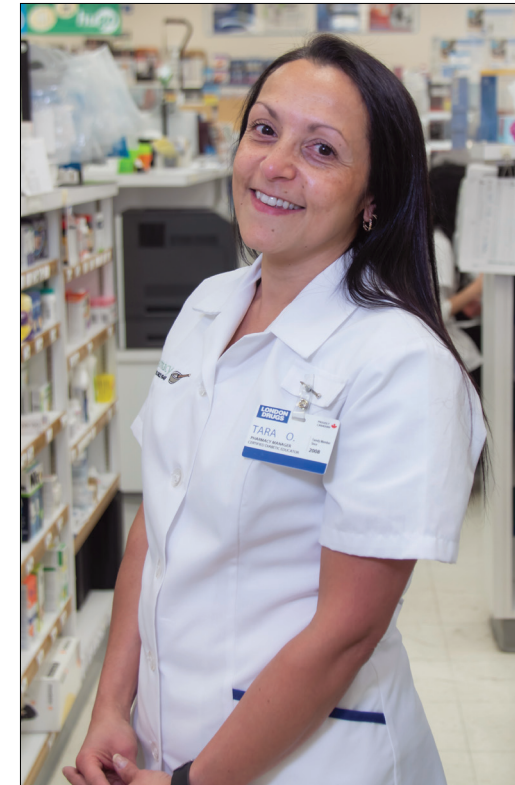
Determined to turn their dream into reality, Oxford used a family connection to correspond with London Drugs, in the hope the company would sponsor her immigration.

“The first time we ever came to Canada, I thought, ‘This is it, this is who I want to work for,’” she says. “I love that it’s still family-owned, I love the way it’s set up with the consultation booths at front. It suited perfectly what I needed as a pharmacist.”

London Drugs agreed to sponsor Oxford, and in winter 2008, the family moved to the small town of Courtenay on Vancouver Island, where the pharmacist has made an indelible impact, within the store as well as within the greater pharmacist community. As a certified anti-coagulation specialist and diabetes educator, Oxford uses her expansive skillset to provide a high level of care to her patients, many of whom have become personal family friends, as well as training and coaching opportunities with her staff.

Oxford is currently serving her third year as a Board member with the College of Pharmacists of BC, helping to enhance the overall scope of practice of pharmacy, through such projects as pharmacist prescribing, medical assistance in dying (MAID) and take home naloxone kits, among others. She has participated in phase one and is currently in phase two of the BCPhA’s pharmacogenomics research study, in partnership with Genome BC. And the busy manager and mom of two also co-leads a pharmacist working group in her own island community, bringing together local pharmacists to discuss different topics monthly.

“It’s all about integrating the practice within our own community,” she says. “It’s about patient care, promoting the profession and elevating our practice as a whole.”



Courtenay pharmacy manager and College of Pharmacists of BC Board member Tara Oxford was honoured with the Pharmacy Leadership Award.

“To be serviced by a pharmacy, providing end-to-end support for patients, the reception we received was astounding.”

“It’s about patient care, promoting the profession and elevating our practice as a whole.”



Cindy Preston, pharmacist with the First Nations Health Authority, was recognized with the Voice of Pharmacy Award for her instrumental role in the FNHA's transition to Plan W in 2017.

“Pharmacists were integral to ensuring a smooth transition as they are on the front line with patients every day.”

Cindy Preston VOICE OF PHARMACY AWARD

TITLE Pharmacist
WORKPLACE First Nations Health Authority
LOCATION Vancouver and throughout B.C.

When Cindy Preston was 14 years old, her life was forever changed. Fascinated by a young pharmacist, who had spoken passionately about his profession during her grade nine career day, she found her calling.

“The whole reason I went into pharmacy was because there was this pharmacist who was involved with the community and was so excited about pharmacy,” Preston recalls.

Curious and inspired from a young age, Preston has built a rewarding career based on a desire to provide exceptional service for all patients.

Her career has seen her take on various unique and challenging roles, including working as a staff pharmacist caring for patients in Vancouver's Downtown Eastside; caring for inmates as a pharmacist with the Correctional Service of Canada; and working as the B.C. Regional pharmacist for the federal First Nations and Inuit Health Branch; and now currently serving as the lead pharmacist for B.C.'s First Nations Health Authority (FNHA).

As lead pharmacist with FNHA, Preston has been instrumental in the enhancement of health-care services for B.C.'s 203 diverse First Nations communities across the province. Supporting “all things pharmacy,” Preston manages the formulary for remotely located nursing sites, collaborates with the health benefits team and provides strategic advice to programs across the organization, ensuring the voice of pharmacy is always heard.

Most recently, Preston spearheaded the FNHA's transition of its former, federally managed drug coverage plan to the new Plan Well-

ness, bringing care closer to home for First Nations people under the umbrella of B.C.'s PharmaCare program. Preston advocated for the essential role that pharmacists would play throughout the transition, asserting their need to be involved and trained to help communicate the changes to patients effectively.

“These public programs are very complex systems,” she notes. “To move one system to another and minimize client impacts was an incredible challenge. Pharmacists were integral to ensuring a smooth transition as they are on the front line with patients every day.”

While she notes there is a long way yet to go in developing cultural safety and humility within all areas of health care, she sees positive change happening across the province. Currently, 70 First Nations communities are participating in FNHA's Healthy Medication Use Initiative, in partnership with the University of British Columbia, which addresses topics such as healthy medication use, polypharmacy and medication management. The aim of the grassroots project is to encourage First Nations communities and pharmacies to collaborate in providing care that is not only tailored to the specific needs of each community, but also delivered in a more culturally safe and effective way.

“In terms of health and wellness, everything and everyone in our lives plays a part,” says Preston. “Pharmacy is one area that will affect so many other things. Being involved in your local community, and creating opportunities to learn from your patients, however small they are, will go a long way.”

Mario Linaksita NEW PRACTITIONER AWARD

TITLE Pharmacy Manager
WORKPLACE University Pharmacy
LOCATION University of British Columbia, Vancouver

Every day that Mario Linaksita goes to work, he's stepping into a little slice of history – of Vancouver and his own family.

As pharmacy manager of University Pharmacy at the University of British Columbia, he manages the daily operations of a community pharmacy that has been operating on campus since 1951, and within his own family since 1986.

“I grew up in the back [of the pharmacy], and now I'm in charge of the dispensary,” Linkasita laughs.

Truly a family business – his father along with a handful of extended family members practiced pharmacy – pharmacy was always the topic of conversation at Christmas gatherings growing up. But Linaksita is not simply relying on his father's legacy to guide his career. Armed with passion, ambition and, what he credits as invaluable mentorship from pharmacist and College of Pharmacists of BC Board member Mona Kwong, Linaksita is paving his own path in pharmacy.

After graduating from UBC in 2012, Linaksita spent several years working at pharmacies in downtown Vancouver to gain experience before taking over the managerial reigns at University Pharmacy in 2015, bringing with him fresh perspective and creative business ideas.

Linaksita struck up a collaboration with UBC Athletics to provide a comprehensive, tailored program for its athletes, supporting the program with electrolytes and amino acid supplements, nutritional counselling, flu vaccinations, topical medication compounding and rehabilitation bracing, among other service offerings. The pharmacy will also collaborate with the new FIFA-ac-

credited Sports Medicine Clinic on campus, which involves athletes with various long-term conditions such as hypertension and diabetes.

In addition, the pharmacy is now the certified yellow fever and travel vaccination clinic on campus, and a regular collaborator with UBC Hospital, providing annual flu vaccinations to students and residents. With a full range of home health supplies, such as long handled reachers, sponges, compression stockings and more, the pharmacy is also an official support to Vancouver's OASIS (OsteoArthritis Service Integration System) program, given UBC Hospital's growing administration of hip and knee surgeries.

“Retail is changing really rapidly,” says Linaksita. “What separates a brick and mortar store from online? [A pharmacist's] interpersonal skills and ability to connect different ideas mean more than a few pills to solve a patient's problem.”

Linaksita's passion for pharmacy's future role in health care continues outside of the workplace, as a founding member of Pharmacy Leaders of Tomorrow, a group that serves as an essential hub for new and recent pharmacy grads. Through monthly events featuring keynote speakers such as Vancouver mayor Gregor Robertson, the CEO of MEC and the head physician of VGH Hospital, members gather to network, share best practices, acquire leadership skills and pursue professional excellence.

“Pharmacy is not an easy profession sometimes,” says Linaksita. “There can be a lot of doom and gloom, but there is still a lot of potential for the profession to survive and thrive.”



New Practitioner Award recipient Mario Linaksita is focused on expanding his pharmacy's clinical services for a wide range of patients at the University of British Columbia.

“As a kid, I grew up in the back [of the pharmacy], and now I'm in charge of the dispensary.”



Joan Baker's high level of commitment to the residents of Powell River has earned her the Pfizer Consumer Healthcare Bowl of Hygeia.

Joan Baker PFIZER CONSUMER HEALTHCARE BOWL OF HYGEIA

TITLE Pharmacy Manager
WORKPLACE Safeway
LOCATION Powell River

After earning her pharmacy degree from the University of British Columbia in 1981, pharmacy manager Joan Baker set out for her first job, in Powell River, figuring she'd gain some experience and move on. Things didn't go exactly according to plan.

"I love Powell River," Baker says. "I came here for a year and never left!"

Apart from its natural splendour, Baker credits Powell River's "organic, artsy community" and emphasis on wellness as some of the main advantages of the intimate, coastal town.

Passionate about both pharmacy and her adopted home community, Baker has taken an active leadership role in promoting health and wellness for all individuals in Powell River, including as a current Board member of the Powell River Community Foundation, where she serves as Director of Communications for the non-profit organization.

Baker was instrumental in bringing the BC Renal Association into Powell River by securing a contract with the organization through Safeway, ensuring patients' needs are being met in their own community. She has been an integral member of Powell River's current innovative PR Wellness Project, in which various community and professional organizations, government agencies and individuals have collaborated to help improve the overall wellness of the town's community since 2016. She was also an original Board member for the Powell River Harm Reduction and Needle Exchange program, which provides harm reduction supplies for safer injections, disposal of hazardous materials, as well as community education.

"Joan has been a leader in pharmacy, inside and outside of her dispensary for over 30 years," says Stephanie Hahn, Sobeys manager and Baker's supervisor. "She leads by example, teaches people and coaches patients to better health."

When it comes to her work in the pharmacy, a professional motto of 'one patient at a time' has built up a loyal patient base. A fixture in her community, Baker is called upon for her knowledge and guidance on a daily basis – from patients who fret over her impending retirement, to mentees who have flourished under her tutelage, to physicians who call to ask for her input on a patient's prescription.

"It's all about building up a level of trust and communication," she says. "One patient at a time, one med review at a time."

From operating Powell River's first pharmacy-owned computer in 1981 to opening one of Safeway's very first pharmacies in B.C. in 1988, Baker has been at the forefront of the town's development of pharmacy care over the past 35 years. She has pushed forward blister packing (which now makes up 40 per cent of her business), mental health care and methadone maintenance. She launched the town's first in-pharmacy immunization program, which has led to a thriving injections program.

"I have always been an early adopter," Baker says. "My motto is to embrace change. At one pharmacy conference, [BCPhA Lifetime Achievement Award winner] Marshall Moleschi said, 'We need to walk into the grey area,' and I took that to heart."

Cyril Lopez FRIEND OF PHARMACY AWARD

TITLE Retired (Formerly, Chief Operating Officer)
WORKPLACE Formerly of BC Pharmacy Association
LOCATION Vancouver

After a demanding career in the international oil and gas industry, which took Cyril Lopez and his family to a new, bustling city in Asia Pacific every few years, the executive craved a dramatic change in lifestyle.

As an international executive, working as a Chief Financial Officer based in Abu Dhabi, United Arab Emirates, Lopez's career was exciting but demanding with constant travel and bottom-line pressures. Lopez, his wife and younger daughter (his older daughter was already in England) made the big decision to opt for a better quality lifestyle and plant permanent roots, immigrating to Burnaby in 2001.

Applying his business acumen to support faculty researchers in mental health, Lopez first worked at the University of British Columbia and Simon Fraser University, while simultaneously completing his Chartered Professional Accountant designation. In 2007, he joined the BC Pharmacy Association team.

"I was looking for something more business-oriented," Lopez recalls of joining the BCPhA. "It was my first time doing a member services job, but I was able to draw a lot of the skills and experience from my previous life to offer a unique perspective on the role."

Here, Lopez utilized his strategic expertise and problem-solving techniques, addressing key industry challenges and reputational risks, improving and expanding membership benefits, and striking interna-

tional partnerships with companies such as myDNA, among many other achievements.

"The highlight of my work was always about connecting with members," says Lopez. "Going out on site, listening to their needs, addressing issues such as regulatory compliance. Every day I would learn something new. Connecting and talking to members about the challenges they faced allowed us to bring forth solutions to them that were meaningful and could work."

As a collaborator and strategist, Lopez's respect for the highly dynamic and unique area of health-care continued to grow as he deepened his knowledge of the pharmacy sector: "Pharmacists are so under-appreciated."

Halfway through Lopez's tenure at BCPhA, he was bestowed the title of Chief Operating Officer, a position that was the first of its kind in Association history and one he kept until his retirement in mid-2017.

"In all of this, what I'd like to come across was that mine was a support position," says Lopez. "Everything that was done was done together as a team, supporting the vision of the Board and the CEO. To be a 'friend of pharmacy,' is more than one specific achievement."

While officially retired, Lopez has provided interim services for the BCPhA and plans to put his expertise to work as a business consultant, while also spending more quality time with his wife, children and grandchildren.



As BC Pharmacy Association COO, Cyril Lopez addressed key industry challenges, improved and expanded membership benefits and struck international partnerships, earning him the honour of the Friend of Pharmacy Award.

“It's all about building up a level of trust and communication. One patient at a time, one med review at a time.”

“The highlight of my work was always about connecting with members. Every day I would learn something new.”

Student Winners



Stephanie Leung

THE APOTEX INC. FUTURE BRITISH COLUMBIA PHARMACY LEADER AWARD

As a natural born leader and social connector, Stephanie Leung has spent her time as a student in the University of British Columbia's Entry-to-Practice PharmD program ensuring her fellow students are supported in their field of study.

"It is so important to have a strong support system as we tackle an intensive curriculum," says Leung, who has served as an active member of several student groups over the past three years, including volunteering for the social and grad committees of UBC's Pharmacy Undergraduate Society, fundraising for the Canadian Association of Pharmacy Students and Interns (CAPSI) and as Social Officer for UBC pharmacy sorority Lambda Kappa Sigma.

An accomplished events planner, Leung has helped plan the Great Pharmacy

Adventure event for incoming first year students over the past two years and festivities for Pharmacist Awareness Month. She also recently managed CAPSI's annual event, UBC's Next Top Pharmacist.

A positive leader within her pharmacy program, the third-year student and part-time pharmacy assistant is eager to apply her collaborative experience to her future community pharmacy practice, hoping to partner with fellow health-care practitioners to offer a well-rounded service for patients.

"This is why we have inter-professional collaboration, so that each person on the team can be an expert on something, and apply their knowledge appropriately," she says. "Pharmacists come equipped with a multitude of skills that make them essential to our health-care system."



Margaret Lu

THE APOTEX INC. FUTURE BRITISH COLUMBIA PHARMACY LEADER AWARD

After pursuing a bachelor's degree in immunology from McGill University, third-year pharmacy student Margaret Lu was keen to return to her West Coast roots to put her science know-how into practice.

"I went into pharmacy because I wanted to merge my interests in science and helping people," says Lu, who was one of the first students accepted into the University of British Columbia's Entry-to-Practice PharmD program, launched in 2015.

Lu has been an active member of the pharmacy student body, applying her technical ability and marketing prowess to raising the profile of two influential student pharmacy clubs on campus – UBC's Pharmacy Undergraduate Society (PhUS) and the Canadian Association of Pharmacy Students and Interns (CAPSI). In these roles, Lu manages social media and website content, marketing

events and initiatives to members. She regularly lends her expertise to student-led events and meetings, and recently implemented a live streaming system to broadcast a seminar across Canada during Pharmacist Awareness Month. She is particularly proud of integrating a job board into the PhUS website, helping students gain further practical experience in the field.

As Lu moves closer to graduation, she has big plans for her future career. She wishes to work collaboratively with pharmacy business and technology experts to integrate practical, innovative processes and technologies into the patient care experience.

"I hope that in the far, far future, I'll be able to contribute to the profession by creating systems to make adopting logical and reasonable technology and innovations easier for those who want to do it." **T**



DRUG INFORMATION RESOURCES

A look back at pharmacy practice in 1968

BC Drug and Poison Information Centre pharmacist – and frequent contributor to *The Tablet* – Raymond Li offers a retrospective of the 1968 "drug information pharmacist" and the resources available to them, in celebration of the 50th anniversary of the BC Pharmacy Association. **BY RAYMOND LI**

Providing drug information was not always within the pharmacist's scope of practice. Pharmacy in North America was at a critical juncture in the late 1960's. For decades, industrial pharmaceutical manufacturing had eliminated much of a pharmacist's traditional role as compounder of medications, while ethical constraints and outdated pharmacy curriculums limited a pharmacist's potential role in the health-care system as a provider of drug information. Public, professional and academic opinion of pharmacists was sliding, and it was feared that pharmacy might devolve into mere product distribution.

However, forward thinking and energetic pharmacists in British Columbia tackled the issues with the formation of the Pharmacy Planning Commission in 1966, which predated similar national commissions in Canada and the U.S.

The Pharmacy Planning Commission's recommendations resulted in the creation of a society in 1968 that would later become the BC Pharmacy Association. They also resulted in changes to the curriculum for the University of British Columbia's Faculty of Pharmaceutical Sciences to focus more on care of the patient, and changes to ethical codes that would eventually allow pharmacists across Canada to expand their scope of practice to include dispensing information and become "drug information pharmacists," drawing from the growing availability of drug information resources becoming available to pharmacists.

Issues of the *Canadian Pharmaceutical Journal* (CPJ) from 1968 provided tips on establishing, organizing, and maintaining a drug information library or centre, as "an essential requirement for [the] important role of providing Drug Infor-

Forward thinking pharmacists in British Columbia formed the Pharmacy Planning Commission in 1966, leading to the future creation of what is now known as the BC Pharmacy Association.



Pharmacists in the late 1960's were urged to improve their potential as drug consultants by building a reference library.

mation Service” to physicians, other health-care providers and patients whether in hospitals or the community. Computers were predicted to influence drug information service in the future, but pharmacists were urged to use every means at their disposal today to improve their potential as drug consultants by building a reference library.

Among the innumerable drug information sources, the most common were company catalogues, package inserts and pamphlets; journals (both manufacturer-sponsored and subscription); newsletters (e.g. Medical Letter, Clin-Alert); and reference books. Recommended texts included familiar ones such as Martindale’s *The Extra Pharmacopoeia*, Remington’s *Pharmaceutical Sciences* (which contains a surprising amount of pharmacology), and Goodman and Gilman’s *Pharmacological Basis of Therapeutics*. Other recommended references such as the *Dispensatory of the United States of America* (obscure today) were complete with physical and chemical characteristics, standards and tests, pharmacology and kinetics, clinical uses including abstracts of clinical literature, toxicology, dosage and storage.

The *Compendium of Pharmaceuticals and Specialties* (CPS) of the day contained mostly brief, edited monographs featuring (sometimes) a description of the product, indications, administration, side actions and precautions, but generally lacking information on actions and pharmacology. The CPS of that era also contained a surprising number of amphetamine and barbiturate products, often in combinations with other agents, indicated for

relief of such conditions as “mental and emotional stress” and “lack of pep.”

Information on drug interactions was generally scarce, with almost no mention in CPS monographs, and only two columns devoted to the subject in Goodman and Gilman’s text. However, research into drug-drug interactions was growing, with over 1,400 articles cited in Index Medicus (MEDLINE) in 1968 – up from just 63 articles in 1964. A review on drug interactions and the pharmacist from CPJ focused on monoamine oxidase inhibitors, oral anticoagulants, and various CNS, cardiovascular and anesthetic drugs. Drug interaction textbooks were available, but it would not be until 1971 that Phillip Hansten’s *Drug Interactions* would be published and go on to become a standard interaction reference in North America.

Lacking further still was information on drug use in pregnancy. The identification of the teratogenic effects of thalidomide and subsequent withdrawal of the drug in Europe, Australia and Canada in 1961 to 1962 highlighted the deficiency in knowledge of the effects of drugs on the developing human fetus (a problem that persists today to some extent). Brigg’s *Drugs in Pregnancy & Lactation* would not be published until 1983.

Pharmacists were also encouraged to keep file cards and reprints on poisoning, cross-indexed for rapid retrieval. *Clinical Toxicology of Commercial Products* (fairly comprehensive for its time) was also an important reference to have on hand, as suggested by the CPJ: “It seems apparent that accidental poisoning, particularly of children, is a matter of concern to all Canadians and of particular significance to pharmacists as the country’s drug custodians. It behooves every pharmacist to impart to [their] customers the very real dangers in the careless handling of drugs and all products not meant for ingestion.”

The information resources available in 1968 may seem simple now. However, pharmacists embraced the opportunity to use them and their training to solidify their place as medication experts. What started 50 years ago with earning the authority to provide drug information was remarkable and remains relevant today, and has paved the way for pharmacists to continue expanding their role within health care.

The BC Drug and Poison Information Centre is proud to support BCPhA members and pharmacists across B.C. with their drug information needs. Congratulations to the BC Pharmacy Association on its 50th anniversary!

References available upon request. **T**

Ask the Experts

Q If a physician has authorized frequent dispensing via a verbal prescription or faxed refill authorization, how do I document it in compliance with PharmaCare requirements?

A Verbal prescriptions must be documented at the time of dispensing. As required by the Health Professions Act bylaws, pharmacies must retain a written record of the prescription, signed or initialled by the pharmacist.

As of March 1, 2013, under PharmaCare’s Frequency of Dispensing Policy (section 8.3), verbal authorization doesn’t count as documentation for claiming fees for frequency of dispensing. Use the following steps to ensure you are correctly documenting the order:

THE DO’S:

- › Complete a Frequent Dispensing Authorization (FDA) form and add “Physician authorized frequency of dispensing” to the “Rationale For Frequent Dispensing” section of the form.
- › Fax the form to the prescriber and retain the form with the fax verification/confirmation report. This must be done before medication is dispensed. Claims associated with forms created after the fact are subject to recovery.
- › As stated in the Feb. 19, 2016 BC PharmaCare Newsletter, it is strongly recommended that the forms be kept in a separate binder/folder each year, filed alphabetically by patient’s last name, then chronologically.
- › FDA forms should be kept at the pharmacy. In the event of an on-site audit PharmaCare will not accept records of verbal prescriptions or FDA forms provided after the visit.
- › Complete one frequency per form. Each form must specify only one frequency of dispensing (weekly, bi-weekly or other). If a patient has medications dispensed on two different frequencies, a separate form is required for each group of medications.
- › Complete one form per prescriber. If a patient has multiple physicians and all the patient’s prescriptions will be frequently dispensed (e.g., in a weekly blister pack), notify all the prescribing physicians.
- › If a prescription with two to 27-day dispensing frequency is transferred from one pharmacy to another, the receiving pharmacy is responsible for completing an FDA form and faxing it to the prescriber(s).
- › The FDA form for each patient must be renewed each year, on or before the date the patient signed the original form.



THE DONT’S:

- › Prescriptions with daily dispense instructions cannot be taken verbally, as PharmaCare will only accept a prescriber’s written instructions with “Dispense Daily/ Daily Dispensing” on the prescription. (The annotation “DD” by a prescriber is not accepted by PharmaCare).
 - › Do not mail or hand FDA forms in-person to the prescriber’s office. A fax transmission report is required for proof of date and time that the form was sent to the prescriber.
 - › Do not use fax reports listing multiple faxes. PharmaCare will only accept fax transmission reports listing a single number.
- If a pharmacy transmits a refill authorization to a practitioner requiring frequent dispensing with no FDA form in place, the pharmacy must either:
- › Request that the practitioner include an authorization/order for frequent dispensing on the prescription returned to the pharmacy (without a completed FDA form this authorization must be included on every subsequent prescription) OR
 - › Obtain verbal authorization for frequent dispensing as described in this article.

Questions? With each issue of The Tablet, the Pharmacy Practice Support team will answer one or more common questions they hear on a regular basis from pharmacists in the field.

Got a question you want answered in print? Let us know at editor@bcpharmacy.ca. **T**



BEST PRACTICES FOR COMMUNITY PHARMACY MANAGERS

5 Helpful Tips

BY ANN JOHNSTON

Todd Dew, Pharmacy Manager with Hogarth's Clinic Pharmacy in Vernon, keeps abreast of legislation and updated information on practice changes.

The BC Pharmacy Association, in partnership with the College of Pharmacists of BC, is currently developing a new training program for community pharmacy managers to ensure regulatory compliance, encourage best practices and offer overall guidance and support for this important pharmacy role.

In addition to providing good pharmaceutical care, pharmacy managers are obligated to perform significant responsibilities, specified mainly in the Pharmacy Operations and Drug Scheduling Act (PODSA) bylaws. Pharmacy managers have the duty to personally manage and be responsible for the effective operation of the pharmacy, including developing and maintaining an efficient workplace, ensuring adequate staffing and ensuring that quality products and services are provided to

meet patient needs.

Under its mandate of public protection, the Board of the College of Pharmacists of BC has approved the development of requirements and training tools for community pharmacy managers. Currently, there are no other Canadian training programs available that focus solely on the duties and responsibilities that pharmacy managers are accountable for. This gap in training has led to a lack of clarity that may sometimes cause pharmacy managers to operate in ways that fail to meet the College legislation and standards.

The accredited online program will be designed to provide managers with the support and resources necessary to reinforce the knowledge and skills required of a pharmacy manager, which ultimately gives them the confidence and assur-

ance to be compliant in their own practice. The program is expected to be available to members on the BCPhA's website by mid-2018.

In anticipation of this upcoming program, the BCPhA will share a series of useful tips and resources for becoming an effective community pharmacy manager. Watch for more helpful information in future issues of *The Tablet*.

1 Know your duties and responsibilities as a pharmacy manager before you undertake the role and during the time you hold a position as a pharmacy manager.

Did you know that pharmacy managers have been held accountable in incidents even if they were not directly involved? The College of Pharmacists of BC's Inquiry committee has identified that, in many cases, individuals in these roles lacked understanding of their responsibilities and obligations as a pharmacy manager, leading to a lack of policies and procedures. This in turn led to multiple errors and public complaints.

2 Know where to find the relevant legislation and resources for information about being a pharmacy manager.

Pharmacy managers can find all relevant legislative requirements, standards and policies governing the responsibilities of a pharmacy manager on the College's website at bcpharmacists.org. Make sure you read and understand these and keep up-to-date with practice changes and guidance from the College, which sends updates through email notices and its ReadLinks. Contact the College at (604) 733-2440 (1-800-663-1940) or email legislation@bcpharmacists.org if you have questions regarding legislation or policies or prp@bcpharmacists.org for general inquiries on pharmacy practice.

3 Know what it means to have your name on the pharmacy license and what you are attesting to.

Is your name on the pharmacy license? The Pharmacy Operations and Drug Schedul-

ing Act (PODSA) section 11 states that a pharmacist's name listed as manager in a pharmacy license indicates that pharmacist must personally manage and be responsible for the operation of the pharmacy. The pharmacy license is conspicuously displayed in the pharmacy to the public. You are attesting to the public that you responsible for the actual management and operation of the pharmacy as per legislation (i.e. PODSA, Health Professions Act (HPA) and their regulations, College bylaws and policies).

4 Be active. Know the day-to-day operations in your pharmacy. .

PODSA bylaw section 18(2)(a) states that the manager must actively participate in the day-to-day management of the pharmacy. This doesn't mean you have to be there 24/7 but you cannot manage a pharmacy if you aren't aware of the ongoing operations of the pharmacy. Be involved. Be responsible for ensuring the policies and procedures are developed, implemented and maintained in the operations of your pharmacy and that all your staff are trained in their duties and are aware of these procedures.

5 Keep your pharmacy's operational information up-to-date and report any changes to the College.

A pharmacy manager must report changes to the pharmacy's operational information to the College, such as hours of operations and lock-and-leave hours, pharmacy staff roster (new hires and terminations) and types of pharmacy services provided (e.g. opioid agonist treatment services, compounding, injection/intranasal drug administration, etc.). Do this through the pharmacy portal after logging into your eServices account – check it out and keep it updated. Problems logging in? Contact the College at eServices@bcpharmacists.org. **T**

Pharmacy Practice Support

At the BCPhA, we recognize the need to support all of our pharmacists throughout their career. Members are encouraged to contact our team for assistance, advice or guidance. Here are just a few ways in which we support our members:

- › Knowledge translation and interpretation on College of Pharmacists of BC regulations
- › Advocating for appropriate regulation with the College
- › Support on billing questions
- › Development of tools and educational programs around practice or practice changes
- › Representation of pharmacy interests on committees related to pharmacist adaptations and injections
- › Bringing forward issues related to PharmaCare and other third-party payers

For questions, contact us at nelson.chen@bcpharmacy.ca.



BIOSIMILAR DRUGS

Expanding area of pharmaceuticals creates opportunity for pharmacists

BY ELAINE M. COOKE, RPH CDE

Biologic drugs are used to treat medical conditions including anemia, diabetes, inflammatory bowel disease, psoriasis, rheumatoid arthritis, hormone deficiency and some forms of cancer. A biosimilar, previously known in Canada as a subsequent entry biologic, is a drug demonstrated to be highly similar to a current biologic drug (known as the reference biologic drug or innovator). Biosimilars are approved based on a thorough comparison to a reference drug. Extrapolation is often used for the biosimilar's indications where clinical studies were not done; the biosimilar may be authorized for all or some of the indications of the reference biologic drug.

At the time of authorization, the safety information in the product monograph for a biosimilar is based on information in the monograph of its reference drug biologic. Due to the size, complexity and natural variability of biologic drugs, and because biologic drugs are made in living cells rather than with chemicals, a biosimilar can be shown to be similar, but not identical, to its innovator.

Biologic drugs are used to treat medical conditions including anemia, diabetes, inflammatory bowel disease, psoriasis, rheumatoid arthritis, hormone deficiency and some forms of cancer.

It's important to note that biosimilars are not the same as generic drugs, which contain small, chemically synthesized molecules and are comprised of identical medicinal ingredients to their brand name counterparts.

Specific manufacturing processes for existing biologics are the proprietary information of the originating pharmaceutical company and therefore cannot be duplicated. Biologics are highly dependent on the process used to create them; even small changes in the manufacturing process can alter their structure and potentially affect their efficacy and safety. Health Canada's guidance document states that biosimilars are new drugs that are not declared to be pharmaceutically or therapeutically equivalent to their reference biologic drug.

In Canada, the interchangeability of two products rests with each province. The College of Pharmacists of BC's drug interchangeability update states: "Information regarding subsequent entry biologics is emerging. Until further evidence is available, the pharmacist

should consult with Health Canada and the Manufacturer." Upon follow-up, College compliance officer Mark Chan states that unless a pharmacist has evidence to back up the College's interchangeability definition for the drug and is prepared to defend their decision amongst a panel of their peers, should it be needed, the most reasonable course of action would be to follow Health Canada's advice.

Health Canada recommends that a decision to switch a patient being treated with a reference biologic drug to a biosimilar should be made by the treating physician in consultation with the patient and taking into account available clinical evidence. In a recent national survey conducted by the Alliance for Safe Biologic Medicines, a majority of Canadian physicians have stated they are open to substituting biosimilars for non-medical reasons, only when they are the ultimate decision maker for their patients. Pharmacists are in an ideal position to contribute to this decision by collaborating with their patients' physicians on appropriate substitution opportunities.

A major benefit of biosimilars is reduced treatment costs, with about 20 to 40 per cent in savings for most products and 15 per cent in savings for biosimilar insulin. However, there are considerations for costs beyond the basic product price, including potential effects on clinician and patient workload. For a treatment naïve patient who hasn't had either the innovator product or biosimilar in the past, there is no reason not to start a patient on the biosimilar. For non-naïve patients, who have had the innovator biologic, switching to a biosimilar can be done safely in many cases.

Certainly, one needs to assess each situation individually and such a switch should only be made when appropriate. The number of biosimilars is expanding and similar, yet not identical, risks could be associated with changing to a biosimilar. Pharmacists should not automatically substitute these products, but rather conduct an appropriate assessment in consultation with the prescriber before making changes. Consent for change should be clearly documented. **T**



Outstanding Ownership Opportunities

The Medicine Shoppe is expanding rapidly in British Columbia

Tired of big box pharmacy?
Tired of creating goodwill for someone else?
Looking to add real value to the pharmacist-patient relationship?
Ever thought of owning?

Now is the time!
Visit medicineshoppe.ca
Call **Rayaaz Ali**
P: (604) 644-9718
e: r.ali@medicineshoppe.ca



Paolo Sales
B.Sc. Pharm
Pharmacist
Owner



Snehlata Patel
B.Sc. Pharm
Pharmacist
Owner

Medicine Shoppe West Bank, BC Medicine Shoppe Langley, BC


PROGROUP Sales and Leasing Inc.

"The Way Professionals Buy Cars"

NEW CAR PURCHASE PLANS

All Makes & Models

Tel: 604-270-4466 Toll Free: 1-888-385-4466
390 Howard Ave. Burnaby, BC, V5B 3P8



British Columbia
Pharmacy Association

member benefit partner
since 1985

visit us online:
PROGROUPBC.CA

BCPhA eTraining

Gain knowledge
Earn credits from anywhere

More than 40 online courses
OFFERED BY THE BC PHARMACY ASSOCIATION



www.bcpharmacy.ca/education

KEY MOMENTS IN BCPHA HISTORY

A Timeline

Fifty years ago, British Columbia pharmacists needed a voice to serve their interests and in how they delivered care to patients, a voice that was appropriate, unified and most of all, advanced the economic and public image of community pharmacists in the province. In May 1968, that voice was established through the voluntary, non-profit organization, the British Columbia Professional Pharmacists' Society (later renamed BC Pharmacy Association). Here are some highlights from the past 50 years of serving B.C.'s pharmacists.

The Society takes over administration of liability, life and group insurance programs from the College of Pharmacists of BC.

The organization changes its name to The British Columbia Pharmacists' Society.

The Society changes its name to the British Columbia Pharmacy Association (BCPhA).

ENVIRx, the predecessor to the Medication Returns Program, launches through partnership with BCPHA. British Columbians can return unused medications to pharmacies across the province.


B.C. pharmacists are authorized
to give injections.

BCPhA partners with Green Shield Canada (GSC) to offer pharmacist paid cardiovascular health coaching for qualifying patients.

BCPhA (through its commercial entity, RxOme Pharmacogenomics Canada Inc.) brings myDNA test kits to Canadian pharmacies, offering consulting fees for pharmacists.

**May 22,
1968**

The British Columbia Professional Pharmacists' Society is established. Murray Dykeman becomes the Society's first elected president.



1974


PharmaCare, B.C.'s drug benefits plan, is launched to provide coverage for seniors and low-income individuals.

1977

B.C. government expands coverage of PharmaCare to all B.C. residents.

1995

PharmaNet launched by B.C. Ministry of Health.

1999  B.C. pharmacists gained the right to prescribe ECP – Emergency Contraception.

2013

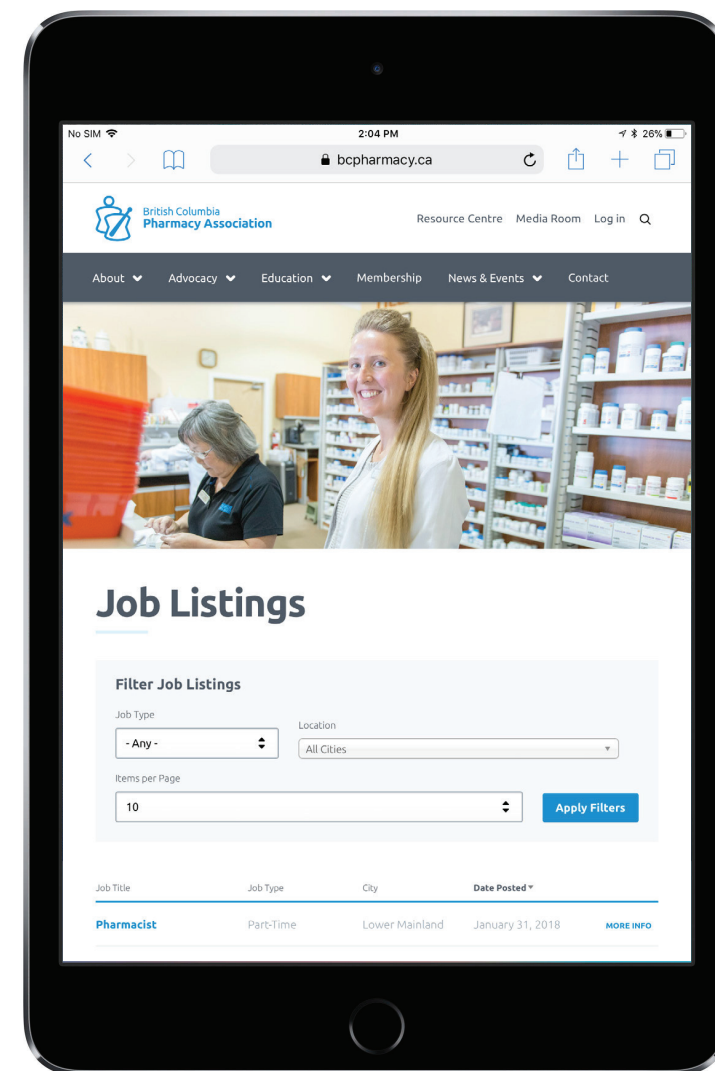
BCPhA funds pharmacogenomics research program in hopes of bringing PGx testing services to community pharmacy.

2016

Twenty-nine B.C. community pharmacists participated in successful PGx project and recruited 200 patients.

2018

BCPhA celebrates its 50th anniversary! **T**



The BC Pharmacy Association Job Board

British Columbia's Premier Job Board for pharmacists

For pharmacists:

- Over 50 jobs posted every month all across British Columbia.
- Opportunities all over British Columbia from Victoria to Vancouver to Creston.
- Opportunities from pharmacists to pharmacy managers.

For pharmacies:

- Postings are published on the website, with over 4000 views each month from pharmacists.
- Postings are advertised in the Practice Update.
- The postings are available to all pharmacist members and pharmacy technician insurance subscribers.

Visit www.bcpharmacy.ca/jobs to view or post jobs!

Not a member yet? Visit www.bcpharmacy.ca/membership to learn more.

THANK YOU TO OUR SPONSORS

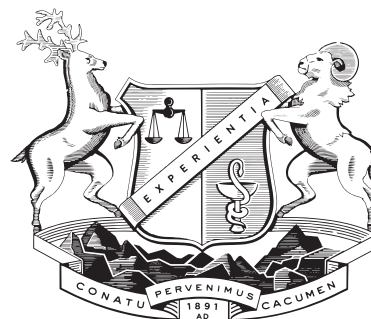


50 YEARS Faces of Pharmacy

BC Pharmacy Association
ANNUAL CONFERENCE

May 24 - 26, 2018

Partner



College of Pharmacists
of British Columbia

Diamond



Platinum



MERCK

SANOFI PASTEUR



Loblaws
pharmacy



Gold

AstraZeneca
life inspiring ideas

AMGEN

Silver



Wynward
Insurance Group
Est. 1920

Bronze

APOTEX

Aralez
Pharmaceuticals



Janssen
Pharmaceuticals
a Johnson & Johnson company

PACIFIC
BLUE CROSS

Boehringer
Ingelheim

GSC
green shield canada



uniPHARM
Wholesale Drugs Ltd.
Independent Pharmacists
for independent pharmacy

valneva™

Vancpharm