COMMENTARY FROM THE PRESIDENTIAL TEAM

A Time of Renewal

Bruce Millin

Fall on the west coast is my favourite time of year. The long, hot days of summer give way to the cool, crisp days of autumn. Hockey season will soon be upon us and with it, the anticipation of what might be. New players, coaches, and tactical schemes are put in place to give each team the best opportunity to succeed. The situation is no different for the Canadian Society of Hospital Pharmacists (CSHP). A new Board was installed at the Annual General Meeting in St John's, Newfoundland and Labrador, in August. Familiar faces have given way to new ones, with novice Board members eager to make a difference in the Society's success. I would like to thank all outgoing Board members, in particular Doug Sellinger, who has now completed his 3-year Executive term, for their commitment and dedication to the CSHP team.

In terms of "tactical schemes", CSHP has, over the past year, expended considerable time and resources to update its compounding guidelines. The chemotherapy underdosing incident that occurred last year in Ontario and New Brunswick highlighted the complex nature of pharmaceutical compounding and the need to provide guidance for all personnel who prepare, handle, and store compounded preparations in a health care facility. A dedicated group of CSHP members, under the guidance of Cathy Lyder (Coordinator, Professional and Membership Affairs), has crafted a new set of guidelines to address aseptic and nonaseptic compounding of drugs, including radiopharmaceuticals and hazardous drugs. The comprehensive 232-page document covers all aspects of compounding and includes sections on quality management, storage, distribution, outsourcing, documentation, traceability, and recalls.

The safety of both patients and hospital personnel is the guiding principle behind this revision, which builds on the work of the Pharmaceutical Inspection Co-operation Scheme (especially the *PIC/S Guide to Good Practices for the Preparation*

of Medicinal Products in Healthcare Establishments [2014; www.picscheme.org/publication.php?id=8]) and the United States Pharmacopeial Convention (USP). Best practice and current literature are incorporated into all areas of the new CSHP guidelines. It should be noted that this document is not simply a Canadian



version of the USP's General Chapter <795>: Pharmaceutical Compounding—Nonsterile Preparations and General Chapter <797>: Pharmaceutical Compounding—Sterile Preparations (www.usp.org/usp-healthcare-professionals/compounding). Rather, it builds on the knowledge, skill, and efforts of those working in this area, not just in Canada, but also around the world, including Australia, Europe, the United Kingdom, and the United States.

The work to produce these guidelines was considerable. The benefit to members, pharmacy departments, and regulatory bodies will also be considerable. These guidelines highlight what CSHP does best: bringing together a group of skilled professionals to work toward a common cause, identifying best practice to improve patient safety and patient care outcomes in the health care facilities in which we work.

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