

Using Evidence to Inform Advocacy and Training Priorities

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After more than two years of virtual meetings of the Board, Executive Committee, and general membership of the Canadian Society of Hospital Pharmacists (CSHP), the Board got to meet in person in June 2022 in Vancouver. That gathering wasn't just my first in-person meeting as a CSHP Presidential Officer—it was my first in-person Board meeting ever! The synergy, creativity, and productivity were tangible as Board members from coast to coast weighed in on the substantial issues before us, bringing their regional perspectives to bear. During the pandemic we made incredible progress on our strategic plan using various communication technologies, but the experience of meeting in person after so many virtual meetings told me we need that in-person connection to craft new possibilities for our Society in the next strategic plan.

The COVID-19 crisis highlighted some of the things we need to consider in our strategic planning process. As wave after wave of the global pandemic rolled across Canada, pharmacists and regulated pharmacy technicians were performing essential duties: caring for critically ill patients in the face of workplace uncertainties, ensuring that medication shortages were managed appropriately, and persevering through ongoing staff shortages, all while dealing with their own personal and family responsibilities.

In healthcare delivery, we know that data support both the identification and the resolution of issues. In particular, the CSHP Board recognizes that to effect the changes in policy and funding needed to enable pharmacists to fulfil the essential duties brought to the forefront by COVID-19, we must collect meaningful data on the impact that pharmacy professionals have on patient care. In other words, to be successful, our advocacy efforts must be underpinned by evidence of pharmacy's contribution to Canadian healthcare systems. The 2020/21 *CSHP Hospital Pharmacy in Canada*

Report, to be released this Fall, offers a wealth of information that can be used to make the case for pharmacy priorities in hospitals across the country.

One area flagged by the report is the ongoing shortage of highly skilled hospital pharmacists and regulated pharmacy technicians in Canada. We know this issue will form part of our next strategic plan. As such, we've taken early steps to develop the Hospital Pharmacy 101 program. It's designed to allow pharmacists to undertake enhanced, focused training earlier in their hospital-based clinical pharmacy journey as one way to alleviate the staffing crisis as the pandemic rages on. Launched in early Fall 2022, this program is designed for pharmacists seeking knowledge of fundamental hospital pharmacy topics and will be suitable for those just entering hospital practice as well as those with more experience who are looking for a refresher. It's also intended for pharmacy departments seeking training for their staff.

I am very proud of the work that hospital pharmacy teams have played in caring for patients in Canadian healthcare delivery systems. As we navigate year three of the pandemic, CSHP will continue to use data to advocate for our members and to support additional training to alleviate the staffing crisis facing our professions. I am excited about the future of our professions and feel privileged to represent CSHP members.



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