

2025 CSHP NATIONAL AWARDS PROGRAM WINNERS / PROGRAMME NATIONAL DES PRIX 2025 DE LA SCPRS : LAURÉATS ET LAURÉATES

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The winner of the **Distinguished Service Award** (sponsored by Pfizer Canada) is **William M Semchuk** (Regina, SK).

The winner of the **Hospital Pharmacy Student Award** (co-sponsored by the Canadian Society of Healthcare-Systems Pharmacy [CSHP] and the Canadian Association of Pharmacy Students and Interns [CAPSI]) is **Melanie King** (Bay Roberts, NL).

Excellence in Pharmacy Practice — Interprofessional Collaboration Award

Sponsored by **JAMP Pharma Group**

Nitrous Oxide Waste Reduction – An Environmental and Interprofessional Success
(completed at Sunnybrook Health Sciences Centre, Toronto, ON)

Danette Beechinor

Excellence in Pharmacy Practice — Leadership Award

Sponsored by **HealthPRO Canada**

The Impact of a Learning Health System Approach on Employee Engagement and Satisfaction. A Case Study of Quality Improvement Huddles in Acute Mental Health and Substance Use Services in Island Health
(completed at Island Health, Victoria, BC)

Alisha S Bains and Sean P Spina

Excellence in Pharmacy Practice — Patient Care Award

Developing a Reference Document on Therapeutic Management of Migraine to Guide Clinicians Caring for Children and Adolescents with Migraine; An Interdisciplinary Collaborative Project
(completed at Children's Hospital of Eastern Ontario, Ottawa, ON)

Ariane Blanc

Year 2 Advanced Pharmacy Practice Residency Award

Sponsored by **Pfizer Canada**

Characterizing Stigmatizing and Biased Language in Clinical Pharmacist Documentation (RESPECT)
(completed at Lower Mainland Pharmacy Services, Vancouver, BC)

Caitlin M Gordon

The award-winning abstracts are published exactly as submitted by the authors and have not undergone any copyediting by the Canadian Journal of Hospital Pharmacy.

Le Journal canadien de la pharmacie hospitalière n'a pas soumis les résumés primés à une révision linguistique et les publie ici tels que remis par les auteurs.

Nitrous Oxide Waste Reduction – An Environmental and Interprofessional Success

*Excellence in Pharmacy Practice — Interprofessional Collaboration Award
Sponsored by JAMP Pharma Group*

Beechinor D¹, Van Der Vyver M^{1,2}, Nunes D¹, Lau P¹, Cohen E¹, Deering S^{1,2},
McArthur B¹, Chakera A^{3,4}

¹Sunnybrook Health Sciences Centre, Toronto, ON

²University of Toronto, Toronto, ON

³Pharmaceutical Sustainability, Scottish Government

⁴The Nitrous Oxide Project

Background: Nitrous oxide (N₂O) is known to be harmful to the environment, with a global warming potential approximately 270 times greater than carbon dioxide and is responsible for 10% of net global warming to date. Hospital systems which use centrally piped N₂O are known to have a high rate of waste due to system leakage. A pharmacist led multidisciplinary team included physicians, communications, nursing, patient advisor, dentistry, administrative staff, plant operations and maintenance leadership and mechanics, anesthesiologists, residents, operating room managers, anesthesia assistants, respiratory therapy assistants, and environmental services to make the project a success.

Objectives: to measure N₂O waste, reduce waste and preserve access to N₂O where needed.

Methods: We isolated the central system, weighed the N₂O tanks before and after a 6-week trial and compared consumption from tanks to clinical usage from patient records to calculate waste. We repeated the comparison with small tanks at the point of use and compared the waste to the central N₂O system. We measured exposure to nitrous oxide in our operating rooms to ensure no increase in staff exposure with small tanks.

Results: Centrally supplied nitrous oxide resulted in a waste of 6,169 Kg of nitrous oxide annually, compared to 351 Kg when small tanks were used (6 weeks of data, annualized to calculate overall waste). There was no increase in staff exposure.

Conclusions: We decommissioned the central system and all N₂O is supplied via small tanks, reducing annual N₂O waste by 94% and an annual equivalent of 25,480 tree seedlings planted and growing for 10 years. Every step of this project required collaboration of a very varied interprofessional team including clinicians and non-clinicians, all committed to the final outcome.

Key words or terms: nitrous oxide waste reduction

The Impact of a Learning Health System Approach on Employee Engagement and Satisfaction. A Case Study of Quality Improvement Huddles in Acute Mental Health and Substance Use Services in Island Health

*Excellence in Pharmacy Practice — Leadership Award
Sponsored by HealthPRO Canada*

Bains AS^{1,4}, Zehm BA², Rubincam C³, Spina SP^{1,4,5}, McMillan T⁴, McKelvey T⁴

¹Island Health, Victoria, BC

²Adult & Geriatric Psychiatry Services, Island Health, Victoria, BC

³Acute Mental Health and Substance Use Department, Island Health, Victoria, BC

⁴University of British Columbia, Vancouver, BC

⁵University of Victoria, Victoria, BC

Background: Enhancing employee satisfaction and engagement in healthcare settings is crucial for building a more efficient and collaborative workplace, enhancing employee retention, improving patient care, and increasing organizational performance. Among existing tools, quality improvement huddles may be one additional approach to encourage staff to find satisfaction and engagement in their work. These huddles represent an innovative shift by integrating feedback from staff directly involved in daily operations, making the huddles a valuable focus for research and practice.

Objectives: To evaluate the impacts of implementing quality improvement huddles to improve employee engagement and satisfaction within acute mental health and substance use services. To understand and describe positive features of the huddles, as well as areas of improvement to allow for progressive advancement of the initiative.

Methods: Mixed-methods design utilizing a cross-sectional survey to capture both quantitative and qualitative data.

Results: Within the survey, strongly agree and agree responses represented 50.1% to 81.3% of responses for each individual prompt. Findings indicated that quality improvement huddles can significantly impact staff engagement and satisfaction, communication, and efficacy for change. It remains inconclusive whether quality improvement huddles strongly impact organizational connection.

Conclusions: This project elucidates how directly engaging those who interact with the systems and processes daily can drive meaningful change that enhances work engagement, and job satisfaction. The project offers a framework for future practices that highlights the significance in evolving improvement efforts that are rooted in the insights and feedback of all employees, recognizing their perspectives as vital to healthcare sustainability.

Key words or terms: quality improvement, job satisfaction, engagement, huddles, mental health

Developing a Reference Document on Therapeutic Management of Migraine to Guide Clinicians Caring for Children and Adolescents with Migraine; An Interdisciplinary Collaborative Project

Excellence in Pharmacy Practice — Patient Care Award

Blanc A^{1,2}, Orr SL^{3,4,5}, Faber AJ⁶, Gerhart W⁷, Leroux E^{7,8}

¹Children's Hospital of Eastern Ontario – Ottawa Children's Treatment Centre (CHEO), Ottawa, ON

²Children's Hospital of Eastern Ontario Research Institute (CHEO RI), Ottawa, ON

³Departments of Pediatrics, Community Health Sciences, and Clinical Neurosciences, Cumming School of Medicine, University of Calgary, Calgary, AB

⁴Alberta Children's Hospital Research Institute, Calgary, AB

⁵Hotchkiss Brain Institute, Calgary, AB

⁶City Pediatric Specialty Group, Vancouver, BC

⁷Migraine Canada, Montréal, QC

⁸Montreal Neurological Clinic, Montréal, QC

Background: Migraine Canada, a national non-profit organization, identified that primary care providers and patients were having challenges finding evidence-based treatment recommendations for children and adolescents with migraine. Moreover, access to specialized pediatric care for migraine is inequitable. White children are more likely to be admitted to hospital for acute migraine management than racialized children, and rural communities are underserved with respect to access to providers. To address the gap and inequity in access to evidence-based information for providers caring for children and adolescents with migraine, a group of leading Canadian pediatric neurologists, pediatric hospital pharmacy director, and Migraine Canada directors collaborated in 2022 to develop a referenced document on the management of migraine.

Objectives: To develop and share a tool on migraine management to support primary care providers in optimizing acute and preventive treatments for children and adolescents with migraine.

Methods: In a quality improvement initiative, a Canadian interdisciplinary team worked collaboratively to develop the “Therapeutic Management of Acute Migraine Attacks” reference document, under the leadership of Migraine Canada, between January and November 2022. The document was reviewed by an expert panel, the Pediatric Canadian Headache Network (PeCaHN) and by Migraine Canada's patient advisory group. Once approved by PeCaHN and the working group, the document was published on Migraine Canada's website.

Results: The team was composed of two pediatric neurologists, a pediatric academic hospital director of pharmacy, a Migraine Canada director, and three pharmacy students under the guidance of a pharmacy project coordinator. The document in development was reviewed by the expert panel (n=13), and by the patient advisory group (n=4). Graphic design was provided by the Migraine Canada team. The final document was published on the Migraine Canada website with universal free access. It was also distributed to pediatricians (n= ~100) at the 2023 Canadian Pediatric Society annual conference and since then, to thousands of healthcare providers at various specialized conferences.

Conclusion: A Canadian interdisciplinary healthcare team and a charity organization collaborated to address a critical gap in access to evidence-based treatment information for providers treating youth with migraine. A reference document was developed and is freely available on Migraine Canada website. This quality improvement collaborative project is contributing to Children's Healthcare Canada mission of right-size children's healthcare systems, improved access to healthcare, experiences of care and outcome. Next steps will be to update the reference document on a regular basis and continue to broadly share its content, to sustainably provide the support healthcare providers need to provide the best evidence-based care to children and adolescents with migraine.

Keywords or terms: Pediatric, migraine, therapeutic management, reference, best-practice, enhanced patient-centered care

Characterizing Stigmatizing and Biased Language in Clinical Pharmacist Documentation (RESPECT)

Year 2 Advanced Pharmacy Practice Residency Award

Sponsored by Pfizer Canada

Gordon CM^{1,2}, Yu B², Leung F³, Legal M^{2,3}, Simons J^{3,4}, Wang E^{2,3}, Gnyra M^{2,3}

¹Pharmacy Department, Vancouver General Hospital, Vancouver, BC

²Faculty of Pharmaceutical Sciences, University of British Columbia, Vancouver, BC

³Pharmacy Department, St. Paul's Hospital, Vancouver, BC

⁴Faculty of Medicine, University of British Columbia, Vancouver, BC

Background: Biased language in documentation can perpetuate stigma, influence treatment decisions, and impact provider-patient relationships. As any person seeking care at acute care hospitals may face stigma, particularly those with substance use or mental health disorders, unbiased documentation is crucial.

Objective: To determine the prevalence of stigmatizing and biased language in electronic health records written by clinical pharmacists.

Methods: A list of stigmatizing terms was compiled through literature review and expert consensus. A retrospective, cross-sectional study analyzed clinical pharmacist notes using a data-mining algorithm. Content analysis explored usage patterns and uncovered new themes. Conducted at St. Paul's and Mount Saint Joseph Hospitals in Vancouver, BC, the study included documentation from patients aged 19 and older with encounters between November 16, 2019, and September 30, 2023. Notes authored by clinical pharmacists in the “documentation” section were analyzed for stigmatizing language.

Results: Of 135,671 notes reviewed, 42,192 (31.1%) contained stigmatizing terms. Common terms included compliance, noncompliance, refuses, denies, and smoker. Previously documented themes (e.g., leading with race/socioeconomic status, incorrect pronouns, use of quotations to suggest doubt) were observed. New themes emerged, including punctuation/formatting to amplify stigma and the role of electronic records in perpetuating bias.

Conclusions: Stigmatizing language appeared in 31.1% of clinical pharmacist documentation. Findings are informing the development of an educational intervention to reduce stigmatizing language in clinical records.

Keywords: stigma, bias, clinical documentation