

# Are We Getting There?

Kelly Babcock

Just 3 short years ago, at the 50th Annual General Meeting (AGM) of the CSHP in Ottawa, we agreed to focus our activities on Vision 2000:

*Pharmacists in diverse practices ...  
forging partnerships,  
reaching out to help patients,  
... making a difference!*

We created over 30 detailed action plans to help us achieve Vision 2000, and in this article I will discuss what we have accomplished.

Pharmacy Specialty Networks are up and running and continuing to grow in number and activities. Pharmacists in diverse practices are recognizing the importance of talking to others involved in similar specialties. We have continued efforts to upgrade all pharmacists in their ability to effectively assist their patients by running successful AGMs and Professional Practice Conferences, and, for those who can't attend, making videotapes and considering CD-ROM and Internet processes for the provision of distance education. We also recognize the importance of reviewing our standards and looking at new roles in this ever-changing pharmacy profession. We expect to have announcements at this year's AGM in Winnipeg about our new standards of practice and a statement on prescriptive authority for pharmacists.

Forging partnerships has been of the utmost importance over the past few years, as we have tried to assist our patients through the continuum of care. We worked with the Canadian Pharmacists Association, provincial pharmacy associations and licensing bodies, nurses, and physicians to put on the highly successful Seamless Care Workshop, and the highlights of the proceedings were made available to all of our members. This event sparked even more activity across the country in this important patient-focussed care service. We continue to try to make more consistent the approach taken in providing seamless care and hope that it will be recognized as a standard of practice for pharmacists, one that patients will soon come to demand. We are also leading these groups and a few more, such as government, in developing a national system for reporting medication errors in Canada. In addition, we have started a task force on home health care. These initiatives definitely reach out and help our patients.

Another partnership that is gaining momentum is our

strategic alliance with APES (Association des pharmaciens des établissements de santé du Québec). We have developed an English version of one of their successful publications, concerning palliative care. Now pharmacists across Canada can benefit from the great work of our francophone specialists in this area to make a difference for their patients. Continuous work with our student partners through the Pharmaceutical Care Poster Competition of the Canadian Association of Pharmacy Students and Interns and CSHP, and with the residents through the nationally recognized Pharmacia & Upjohn Award will pay dividends as our future practitioners come aboard. We must also examine how our students will be trained in the future, and we are addressing this with our Entry-Level PharmD Task Force. The task force's job will be to develop a position paper on what our members think of this approach, which is being considered by universities across Canada.

I have highlighted here only some of our activities to demonstrate the focus of our activities on Vision 2000 and the progress we have made. As we work toward the AGM in Winnipeg we need to establish Vision 2003. We will again seek your input to the visioning process. A survey will be sent to about 20% of our members asking first how you feel we have progressed toward Vision 2000 and then what you think needs to be done to address your professional needs in 2003. Vision 2000 built on the progress of Vision '97 and looked to the year 2000 for its development. I can assure members that we will take a similar approach to developing Vision 2003, because we all know that the advancement of the profession is gradual.

In closing, I will highlight one more action plan arising from Vision 2000. CSHP is now voting on whether a name change for the Society is warranted. At this time, I want only to remind you that a vote by the membership will decide the issue. You will receive a "What's in a Name?" fact sheet describing the pros and cons of a name change, based on the discussions we have had with our members over the past few years. In addition, you will receive clear instruction on how to participate in the mail-in balloting. Please consider this issue carefully and cast your vote. As is usual with CSHP, we are letting our members determine our actions, a strategy that I believe has resulted in the Society's success.

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