



**AFPC**

Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada

# **PROCEEDINGS**

**OF THE**

**ASSOCIATION OF  
FACULTIES OF  
PHARMACY OF  
CANADA**

**ASSOCIATION DES  
FACULTÉS DE  
PHARMACIE DU  
CANADA**

**DURING 2005**

**INCLUDING THE**

**SIXTY-SECOND ANNUAL MEETING**

**JUNE 24 - 26, 2005**

**SASKATOON, SASK.**

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# ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA MISSION STATEMENT

*AFPC is an association of faculties of pharmacy whose members are committed to the promotion and recognition of excellence in pharmacy education and scholarly activities.*

## GOALS

1. **To foster excellence in pharmaceutical education.**
  - (a) To stimulate and provide an opportunity for exchange of information, ideas and discussion among pharmaceutical educators.
  - (b) To encourage quality education in pharmacy by assuming an advisory role for development of policies and standards.
  - (c) To recognize innovations in pharmaceutical education.
  
2. **To foster excellence in scholarly activities**
  - (a) To provide members with opportunities for the exchange of information, ideas and discussion on scholarly activities.
  - (b) To recognize excellence in graduate studies.
  - (c) To recognize innovation in scholarship
  - (d) To recognize achievements in undergraduate research.
  
3. **To establish and maintain liaison with external organizations for the development, support and improvement of pharmaceutical education and research**
  - (a) To recognize significant contributions and achievements of other organizations or individuals towards the mission of AFPC.
  - (b) To promote the achievements of our members to the wider pharmacy and health care community.
  - (c) To represent the broad interest of our members to external organizations.
  - (d) To gather and report statistical and descriptive data in order to provide information about the state of academic pharmacy in Canada.

## *Glossary For Mission Statement*

For the purpose of this Mission Statement:

**Education** - is interpreted to include: curricular design, teaching methods, student assessment, program evaluation and continuing education

**Scholarly Activities** - includes: graduate education; publication/dissemination, discovery/new information; discovery/creation of new knowledge and innovations; acquisition of resources for research; develop interdisciplinary collaboration; adherence to ethical standards of scholarship

## **AFPC CONSTITUENT FACULTIES 2004 - 2005**

Memorial University of Newfoundland, School of Pharmacy, St. John's NF  
Linda Hensman, Director (709) 777-6571

Dalhousie University, College of Pharmacy, Halifax, NS  
Rita Caldwell, Director (902) 494-2457

Université Laval, Faculté de Pharmacie, Québec, QC  
Monique Richer, Doyenne (418) 656-5639

Université de Montréal, Faculté de Pharmacie, Montréal, QC  
Jacques Turgeon, Doyen (514) 343-6440

University of Toronto, Leslie Dan Faculty of Pharmacy, Toronto, ON  
Wayne Hindmarsh, Dean (416) 978-2880

University of Manitoba, Faculty of Pharmacy, Winnipeg, MB  
David Collins, Dean (204) 474-8794

University of Saskatchewan, College of Pharmacy & Nutrition, Saskatoon, SK  
Dennis Gorecki, Dean (306) 966-6328

University of Alberta, Faculty of Pharmacy & Pharmaceutical Sciences, Edmonton, AB  
Franco Pasutto, Dean (780) 492-2125

University of British Columbia, Faculty of Pharmaceutical Sciences, Vancouver, BC  
Robert Sindelar, Dean (604) 822-2343

## **AFPC OFFICERS 2004 - 2005**

### **Executive**

President	Sylvie Marleau (Université de Montréal)
President Elect	Zubin Austin (Toronto)
Past President	Susan Mansour (Dalhousie)
Deans' Rep.	Franco Pasutto (Alberta)
Executive Director	Frank Abbott

### **Council**

Ingrid Price (British Columbia)	Lalitha Raman-Wilms (Toronto)
Sharon Mitchell (Alberta)	Daniel Thirion (Montréal)
Roy Dobson (Saskatchewan)	Jean Lefebvre (Laval)
Mike Namaka (Manitoba)	Anne Marie Whelan (Dalhousie)
Lili Wang (Memorial)	

# **AFPC REPRESENTATIVES TO AFFILIATE ORGANIZATIONS**

Association of Deans of Pharmacy of Canada – Franco Pasutto (Alberta)  
Academic Board Member, Canadian Pharmacists Assoc. – Linda Suveges (Saskatchewan)  
Canadian Council for the Accreditation of Pharmacy Programs  
– Sylvie Marleau (Montréal), Jake Thiessen (Toronto)  
Canadian Council for Continuing Education in Pharmacy – Yvonne Shevchuk (Saskatchewan)  
Pharmacy Examining Board of Canada - Louise Mallet (Montréal) & Linda Suveges (Sask.)  
Representative to United States Pharmacopoeial Convention – Colin Briggs (Manitoba) outgoing  
and Raimar Löbenberg (Alberta) incoming.

## **Committee Chairs and Other Positions**

Awards Committee - Lili Wang (Memorial)  
Bylaws Committee – Susan Mansour, (Dalhousie)  
Education Committee – Ingrid Price (British Columbia)  
Nominations Committee - Susan Mansour, (Dalhousie)  
Research Committee - Mike Namaka (Manitoba)  
Conference Planning Committee – Roy Dobson (Saskatchewan)  
Communications Committee – Jean Lefebvre (Laval)  
Editor, AFPC Communications – Rebecca Law, (Memorial)  
Representative to CPhA Human Resources Task Force – Lavern Vercaigne (Manitoba)  
Task Force on Experiential Education – Ingrid Price (British Columbia)  
Task Force on Educational Outcomes for Entry-Level Pharm D degree – Susan Mansour  
Strategic and Business Planning – Sylvie Marleau (Montréal) and Roy Dobson

# **RECIPIENTS OF MAJOR AFPC AWARDS**

## **RECIPIENTS OF THE AFPC AWARD FOR EXCELLENCE IN RESEARCH**

### **McNEIL AWARD**

1982	Ron Coutts, University of Alberta
1983	John McNeill, University of British Columbia
1984	Kam Midha, University of Saskatchewan
1985	Basil Roufogalis, University of British Columbia
1986	Ed Knaus, University of Alberta
1987	Tony Noujaim, University of Alberta
1988	Len Wiebe, University of Alberta
1989	Mike Mezei*, Dalhousie University
1990	Mike Wolowyk*, University of Alberta
1991	James Axelson, University of British Columbia
1992	Ted Hawes, University of Saskatchewan
1993	Frank Abbott, University of British Columbia
1994	Fakhreddin Jamali, University of Alberta
1995	Sandy Pang, University of Toronto
1996	Peter O' Brien, University of Toronto

### **JANSSEN-ORTHO AWARD**

1997	Gail Bellward, University of British Columbia
1998	Len Wiebe, University of Alberta
1999	Jack Diamond, University of British Columbia
2000	Sid Katz, University of British Columbia
2001	Jack Utrecht, University of Toronto
2002	Thérèse Di Paolo-Chenevert, Université Laval
2003	Ed Knaus, University of Alberta
2004	John McNeill, University of British Columbia

### **PFIZER RESEARCH CAREER AWARD**

2005	Raymond Reilly, University of Toronto
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## **RECIPIENTS OF THE AFPC BRISTOL-MYERS SQUIBB NATIONAL AWARD FOR EXCELLENCE IN EDUCATION**

1995	Cheryl Cox, University of Alberta
1996	David Fielding, University of British Columbia
1997	Kristin Janke, Dalhousie University
1998	not awarded
1999	not awarded
2000	Pat Farmer, Susan Mansour, Anne Marie Whelan, Dalhousie
2001	Zubin Austin, University of Toronto
2002	Claude Mailhot, Université de Montréal
2003	Simon Albon, University of British Columbia
2004	Jean-Louis Brazier, Université de Montréal
2005	Andrea Cameron and Lesley Lavack, University of Toronto

## **RECIPIENTS OF THE AFPC NEW INVESTIGATOR AWARD**

### **UPJOHN-AFPC New Investigator Award**

1993	Jacques Turgeon, Université Laval
1994	Robert Foster, University of Alberta
1995	Wendy Duncan-Hewitt, University of Toronto
1996	D. Hampson, University of Toronto

### **ASTRA PHARMA - AFPC New Investigator Award**

1997	Frank Burczynski, University of Manitoba
1998	R. Macgregor, University of Toronto
1999	S. Wu, University of Toronto

### **ASTRAZENECA – AFPC New Investigator Award**

2000	Hu Liu, Memorial University of Newfoundland
2001	David Wishart, University of Alberta
2002	Kishor Wasan, University of British Columbia
2003	Jean-Christophe Leroux, Université de Montréal
2004	Pierre Moreau, Université de Montréal
2005	Heather Boon, University of Toronto



## **ROCHE GRADUATE STUDENT RESEARCH AWARD**

1997	Diane Jette, University of Alberta
1998	Rajesh Krishna, University of British Columbia
1999	Jean François Bouchard, Université de Montréal
2000	Mark Lomaga, University of Toronto
2001	Amgad Habeeb, University of Alberta

## **GLAXOSMITHKLINE GRADUATE STUDENT RESEARCH AWARD**

2002	Erica Rosemond, University of Toronto
2003	Huy H. Dao, Université de Montréal
2004	Thomas Chacko Pulinilkunnil, University of British Columbia
2005	Shirley Teng, University of Toronto

## **RECIPIENTS OF THE AFPC AWARD OF RECOGNITION FOR OUTSTANDING SUPPORT OF AFPC**

1991	Fares Attalla
1992	Canadian Foundation for Pharmacy
1993	Jean-Guy Cyr
1994	Carl Trinca
1995	Yves Chicoine
1996	Pierre Bois
1997	Jeff Poston
1998	Gerald Duncan
1999	not awarded
2000	Ginette Bernier
2001	Richard Penna
2002	not awarded
2003	not awarded
2004	not awarded
2005	Walter Masanic

## **RECIPIENTS OF THE AFPC SPECIAL SERVICE AWARD**

1992	Keith McErlane
1993	Helen Burt
1994	UBC Host Committee, 1993 AFPC Biotechnology Conference
1995	Ernst Stieb
1996	Pauline Beaulac
1997	not awarded
1998	not awarded
1999	not awarded
2000	not awarded
2001	Bernard Riedel, Ernst Stieb
2002	Wayne Hindmarsh, Jim Blackburn
2003	David Hill
2004	not awarded
2005	not awarded

## AFPC HONORED LIFE MEMBERS

*A.W. Matthews, Toronto, Ont., 1946-52, 1967	* G. Myers	Edmonton, AB 1989
*G.T. Cunningham Vancouver, B.C. 1947	J. Ryan	Halifax, NS 1989
J.G. Richard Montréal, Quebec 1957	*F. Teare	Toronto, Ontario 1990
*J.R. Kennedy Toronto, Ontario 1959	K. James	Halifax, NS 1990
*A.F. Larose Montréal, Quebec 1960	G. Duff	Halifax, NS 1991
*J.I. MacKnight Halifax, NS 1964	A. Noujaim	Edmonton, AB 1993
*J.E. Cooke Halifax, NS 1965	*M. Mezei	Halifax, NS 1994
R. Larose Montréal, Quebec 1965	B. Schnell	Saskatoon, Sask. 1995
*R.C. Cary Toronto, Ontario 1966	G. Nairn	Toronto, Ontario 1995
*G.L. Webster Chicago, Illinois 1969	E. Stieb	Toronto, Ontario 1995
*J. Antonin Marquis Quebec, Quebec 1969	R. Coutts	Edmonton, AB 1996
*F.N. Hughes Toronto, Ontario 1973	A. Shysh	Edmonton, AB 1996
*Mrs. I. Stauffer Toronto, Ontario 1974	J. Steele	Winnipeg. MB 1996
*H.J. Fuller Toronto, Ontario 1974	I. Abraham	Halifax, NS 1998
*L.G. Elliott Montréal, Quebec 1974	P. Beaulac	Montréal, Quebec 1998
A. Archambault Montréal, Quebec 1975	F. Chandler	Halifax, NS 1998
*J.E. Halliday Vancouver, B.C. 1978	P. Farmer	Halifax, NS 1998
*G.C. Walker Toronto, Ontario 1979	R. Tawashi	Montréal, Quebec 1998
*M.J. Huston Edmonton, AB 1979	Gilles Barbeau	Québec City, QC, 2000
*A.J. Anderson Edmonton, AB 1980	Robert Goyer	Montréal, QC, 2000
G.R. Paterson Toronto, Ontario 1980	Ted Hawes	Saskatoon, SK, 2000
*J.R. Murray Winnipeg, MB 1981	Gaston Labrecque	Québec City, QC, 2000
*J.J. O'Mara St. John's, NF 1981	Pierre-Paul LeBlanc	Québec City, QC, 2000
J.A. Wood Saskatoon, SK 1982	Dick Moskalyk	Edmonton, AB, 2000
L.G. Chatten Edmonton, AB 1983	James Orr	Vancouver, BC, 2000
F. Morrison Vancouver, B.C. 1983	Jacques Dumas	Québec QC 2001
*S.K. Sim Toronto, Ontario 1984	John Bachynsky,	Edmonton, AB, 2002
*J.G. Jeffrey Saskatoon, SK 1984	Don Lyster,	Vancouver, BC 2002
*D.J. Stewart Toronto, Ontario 1984	John Sinclair,	Vancouver, BC 2002
*R.M. Baxter Toronto, Ontario 1985	John Templeton,	Winnipeg MB 2002
B.E. Riedel Vancouver, B.C. 1985	Frank Abbott,	Vancouver, BC 2003
P. Claveau Laval, Quebec, QC 1986	Jacques Gagne	Montréal, QC 2004
D. Zuck Saskatoon, SK 1986	John McNeill	Vancouver, BC 2004
G.E. Hartnett Saskatoon, SK 1986	Gail Bellward	Vancouver, BC 2004
*J.L. Summers Saskatoon, SK 1986	Peter O'Brien	Toronto, ON 2004
R. Bilous Winnipeg, MB 1987	Leonard Wiebe	Edmonton, AB 2005
L. Stephens-Newsham Edmonton, AB 1987	Colin Briggs	Winnipeg, MB 2005
T.H. Brown Vancouver, B.C. 1987	Joan Marshman	Toronto, ON 2005
A.M. Goodeve Vancouver, B.C. 1987		
*J.O. Runikis Vancouver, B.C. 1987		
R. Plourde Montréal, Quebec 1987		
*J.G. Moir Vancouver, B.C. 1988		

\* Deceased

## ANNUAL MEETINGS AND OFFICERS

### C.C.P.F (1944-1969)

### A.F.P.C. (1970- 2005)

<b>YEAR</b>	<b>PLACE</b>	<b>PAST CHAIRMAN</b>	<b>CHAIRMAN</b>	<b>VICE CHAIRMAN</b>	<b>SEC/TRES*</b>	<b>Assist.SEC</b>
1944(1)	Toronto		E.L. Woods		F.N. Hughes	
1945(2)	Bigwin Inn		E.L. Woods	R.O. Hurst	F.N. Hughes	
1946(3)	Toronto		E.L. Woods	R.O. Hurst	F.N. Hughes	
1947(4)	Vancouver	E.L. Woods	R.O. Hurst	D. McDougall	F.N. Hughes	
1948(5)	Windsor	E.L. Woods	R.O. Hurst	D. McDougall	F.N. Hughes	J.G. Jeffrey
1949(6)	Saskatoon	R.O. Hurst	M.J. Huston	J.A. Marquis	F.N. Hughes	J.G. Jeffrey
1950((7)	Montreal	M.J. Huston	J.A. Marquis	W.C. MacAulay	F.N. Hughes	J.G. Jeffrey
1951(8)	Calgary	J.A. Marquis	W.C. MacAulay	F.N. Hughes	D.H. Murray	
1952(9)	Toronto	W.C. MacAulay	F.N. Hughes	D. McDougall	D.H. Murray	
1953(10)	Winnipeg	F.N. Hughes	D. McDougall	A.F. Larose	D.H. Murray	
1954(11)	Halifax	D. McDougall	A.F. Larose	A.W. Matthews	G.C. Walker	
1955(12)	Vancouver	A.F. Larose	A.W. Matthews	J.E. Cooke	G.C. Walker	
1956(13)	Ottawa	A.W. Matthews	J.E. Cooke	R. Larose	G.C. Walker	
1957(14)	Montreal	J.E. Cooke	R. Larose	G.C. Walker	R.M. Baxter	
1958(15)	Edmonton	R. Larose	G.C. Walker	B.E. Riedel	R.M. Baxter	
1959(16)	Saint John	G.C. Walker	B.E. Riedel	J.G. Jeffrey	R.M. Baxter	
1960(17)	Saskatoon	B.E. Riedel	J.G. Jeffrey	F.A. Morrison	G.R. Paterson	
1961(18)	Hamilton	J.G. Jeffrey	F.A. Morrison	J.R. Murray	G.R. Paterson	
1962(19)	Vancouver	F.A. Morrison	J.R. Murray	R.M. Baxter	G.R. Paterson	
1963(20)	Winnipeg	J.R. Murray	R.M. Baxter	A. Archambault	A.J. Anderson	
1964(21)	Halifax	R.M. Baxter	A. Archambault	J.G. Duff	A.J. Anderson	
1965 (22)	Calgary	A. Archambault	J.G. Duff	G.R. Paterson	A.J. Anderson	
1966(23)	Saint John	J.G. Duff	G.R. Paterson	J.E. Halliday	W.R. Wensley	
1967(24)	Toronto	G.R. Paterson	J.E. Halliday	J.A. Wood	James/Goodeve**	Goodeve/Wood
1968(25)	Regina	J.E. Halliday	J.A. Wood	B.E. Riedel	J.G. Nairn	A.M. Goodeve
1969(26)	St. John's	J.A. Wood	B.E. Riedel	J.A. Mockle	J.G. Nairn	A.M. Goodeve
1970(27)**	Vancouver	B.E. Riedel	F.N. Hughes	J. Tremblay	J.G. Nairn	A.M. Goodeve
1971(28)	Winnipeg	F.N. Hughes	J.G. Nairn	P. Claveau	R.E. Moskalyk	A.M. Goodeve
1972(29)	Edmonton	J.G. Nairn	P. Claveau	A.M. Goodeve	R.A. Locock	O'Reilly/H.J. Segal
1973(30)	Halifax	P. Claveau	A.M. Goodeve	E.W. Stieb	R.F. Chandler	H.J. Segal

<b>YEAR</b>	<b>PLACE</b>	<b>PAST CHAIRMAN</b>	<b>CHAIRMAN</b>	<b>VICE CHAIRMAN</b>	<b>SEC/TRES*</b>	<b>RECORDING SEC.</b>
1974(31)	Ottawa	A.M. Goodeve	E.W. Stieb	G.E. Hartnett	R.F. Chandler	H.J. Segal/IL.I. Wiebe
1975(32)	Montréal	E.W. Stieb	G.E. Hartnett	J.W. Steele	K.W. Hindmarsh	R.M. Gentles/L. Goodeve
			<b>PRESIDENT</b>	<b>VICE PRESIDENT</b>		
1976(33)	Saskatoon	G.E. Hartnett	J.W. Steele	W.E. Alexander	K.W. Hindmarsh	C.J.8riggs
		<b>PAST PRESIDENT</b>				
1977(34)	Charlottetown	J.W. Steele	W.F. Alexander	K.W. Hindmarsh	F.W. Teare	C.J.8riggs
1978(35)	Victoria	W.E. Alexander	K.W. Hindmarsh	F.W. Teare	W.A. Parker	C.J.8riggs
					<b>EXEC. DIRECTOR</b>	
1979(36)	Sarnia	K.W. Hindmarsh	F.W. Teare	R.E. Moskalyk	J.A. Wood****	E.M. Hawes
1980(37)	Calgary	F.W. Teare	R.E. Moskalyk	C.J.8riggs	J.A. Wood	E.M. Hawes
1981(38)	Winnipeg	R.E. Moskalyk	C.J.8riggs	M. Mezei	J.A. Wood	E.M. Hawes
1982(39)	Ottawa	C.J. 8riggs	M. Mezei	J.L. Summers	J.A. Wood	K.M. McErlane
1983(40)	Montréal	M. Mezei	J.L. Summers	R. Tawashi	A.M. Goodeve	K.M. McErlane
1984(41)	Vancouver	J.L. Summers	R. Tawashi	J. Gagné	A.M. Goodeve	K.M. McErlane
1985(42)	Halifax	R. Tawashi	J. Gagné	J.Bachynsky	A.M. Goodeve	K.M. McErlane
1986(43)	Québec	J. Gagné	J.Bachynsky	K. Simons	K.M. McErlane	H.M.Burt
1987(44)	Jasper	J.Bachynsky	K. Simons	F. Chandler	K.M. McErlane	H.M.Burt
1988(45)	Saint John	K. Simons	F. Chandler	S.M. Wallace	K.M. McErlane	H.M.Burt
1989(46)	Portland	F. Chandler	S.M. Wallace	P.Beaulac	K.M. McErlane	H.M.Burt
1990(47)	Regina	S.M. Wallace	P.Beaulac	H.M.Burt	K.M. McErlane	M. Greer
1991(48)	St. John's	P.Beaulac	H.M.Burt	M. Spino	K.M. McErlane	M. Greer
1992(49)	Winnipeg	P. Beaulac	H.M. Burt	M. Greer	K. Moody	J. Louvelle
1993(50)	Vancouver	H.M. Burt	M. Greer	R. Coutts	K. Moody	J. Louvelle
1994(51)	Charlottetown	H.M. Burt	M. Greer	R. Coutts	K. Moody	J.I. Glennie
1995(52)	Montréal	M. Greer	R. Coutts	J.L Blackburn	K. Moody	J.L. Glennie
1996(53)	Calgary	M. Greer	R. Coutts	J.L Blackburn	K.A. Ready	C.J. Turner
1997(54)	Vancouver	R. Coutts	J.L Blackburn	D. Perrier	K.A. Ready	C.J. Turner/K.A. Ready
1998( 55)	St. John's	J. L. Blackburn	D. Perrier	C.J. Turner/I. Sketris	K.A. Ready	K.A. Ready
1999 (56)	Québec City	D. Perrier	I. Sketris	D. Hill	K. Ready/J. Blackburn	
2000 (57)	Saskatoon	I. Sketris	D. Hill	D. Fielding	J.L. Blackburn	
2001 (58)	Ottawa	D. Hill	D. Fielding	A.J. Rémillard	J.L. Blackburn	
2002 (59)	Winnipeg	D. Fielding	A.J. Rémillard	L. Vercaigne	J.L. Blackburn	
2003 (60)	Montréal	A. J. Rémillard	L. Vercaigne	S. Mansour	J.L. Blackburn	
2004 (61)	Vancouver	L. Vercaigne	S. Mansour	S. Marleau	F. Abbott	
2005 (62)	Saskatoon	S. Mansour	S. Marleau	Z. Austin	F. Abbott	

\* This office ceased to exist after the 1978 meeting.

-This office was assumed by A.M. Goodeve in the Spring of 1967 due to the sudden illness of K.M. James. -Officers of the new organization, AFPC, assumed their offices on January 1, 1970, after a mail ballot.

The officers of 1968-69 served in the interim after the 1969 meeting. \*\*\*\* J.A. Wood was Executive Director from 1977-1982.

**The following pages contain an overview of**

**The Activities of the**

**Association of Faculties of Pharmacy of Canada**

**During the Period**

**July 1, 2004 to June 30, 2005**

# **PART 1.0**

**AFPC ANNUAL CONFERENCE 2005**

**Saskatoon, Saskatchewan**

**June 24 – June 26, 2005**

## **Program Sections**

<b>Section 1: Introduction.....</b>	<b>18</b>
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<b>Section 8: Conference Exhibitors &amp; Sponsors .....</b>	<b>65</b>



**Section 1:**  
**Introduction**

# Welcome from Dr. Sylvie Marleau

## AFPC President



**AFPC** ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA  
ASSOCIATION DES FACULTÉS DE PHARMACIE DU CANADA

June 24, 2005

Dear Colleagues and delegates,

On behalf of the AFPC council and executive, I wish to welcome you all to the 2005 AFPC Conference, held conjointly this year with the 6<sup>th</sup> International Long Life Learning in Pharmacy Conference at the Delta Bessborough Hotel in Saskatoon.

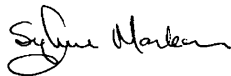
The local organizing committee, chaired by Roy Dobson, has proposed a very challenging theme: "Interdisciplinary Collaboration in Teaching and Research". This theme arrives in a timely manner with a growing recognition of the importance of interdisciplinary collaboration in both research and teaching, to provide our curriculum with the most integrated vision of health care.

The opening session and dinner offers an ideal opportunity for us to meet and celebrate together the excellence of our award winners in academic research, teaching and studies. On the following Saturday and Sunday, you are invited to join us to visit the exhibits and posters, and to our teaching conferences and pharmacy practice research symposium. Do not miss our General Annual meeting on Saturday to learn all about the AFPC Council activities over the last year.

In closing, I wish to thank all the people who have been involved in making this conference a reality. The generous sponsorship that we have received is also so vital in making this event possible. Thank you for your work and support!

I look forward to meeting all of you over the next few days.

Sincerely,



Sylvie Marleau, B.Pharm, Ph.D  
AFPC President (2004-2005)

# Welcome from Dr. Peter MacKinnon President, University of Saskatchewan



June 2005

Dear Conference Delegate:

On behalf of the University of Saskatchewan, I would like to welcome you to the 2005 Association of Faculties of Pharmacy of Canada (AFPC) Conference. We are delighted to be hosting this conference. Its dedication to excellence in pharmaceutical education, scholarly activity, and research exemplifies the University of Saskatchewan's own pursuit of excellence, and it invites us to reflect on what we are doing and how well we are doing it. By hosting the AFPC Conference, the University of Saskatchewan supports new initiatives in the pharmaceutical sciences, and I wish all of you great success at this conference.

I hope you enjoy your visit to Saskatoon, that you have an opportunity to visit our campus, and that you are able to take full advantage of all that the 2005 AFPC Conference has to offer.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Peter MacKinnon".

Peter MacKinnon  
President

**The President, University of Saskatchewan**  
105 Administration Place, Saskatoon SK S7N 5A2  
Telephone: (306) 966-6612 Facsimile: (306) 975-1026

# Welcome from Dr. Linda Suveges

## Acting Dean, College of Pharmacy and Nutrition



June 23, 2005

Colleagues:

On behalf of the College of Pharmacy and Nutrition, University of Saskatchewan, I am please to welcome you to Saskatoon the 2005 Annual Conference of the Association of Faculties of Pharmacy of Canada. In the face of ongoing health care reform and the complexity of the challenges we face both as educators and as scholars, the theme of this year's conference, *Interprofessional Teaching and Research*, is a timely and appropriate subject. The conference speakers have been carefully selected to improve our understanding of interprofessional education and our ability to apply IPE methods within our training programs. As well, attendees will gain in their appreciation of the role of research in advancing the use of collaborative practices, both in health care and academia.

Along with the conference's educational program, we have planned a number of events designed to give everyone the opportunity to interact socially, to renew old friendships, to build new relationships, and to exchange ideas. In addition to the Opening Reception on Friday night and the Awards Banquet on Saturday, the Planning Committee has arranged a truly authentic Prairie event, the Bush Party. I also encourage you to look beyond the planned conference events and to seek out and enjoy the many fine qualities of our wonderful city and province.

Finally, I wish to thank the Conference Planning Committee and the many others who have contributed to the success of this conference. They have worked diligently to provide you with a quality conference experience. Should you require assistance during your stay in Saskatoon, please do not hesitate to contact any of the members of the Committee.

Again, welcome to Saskatoon, and best wishes for a very informative and enjoyable conference.

A handwritten signature in cursive script that reads "Linda Suveges".

Linda Suveges, PhD  
Professor and Acting Dean

College of Pharmacy and Nutrition, University of Saskatchewan  
110 Science Place, Saskatoon SK S7N 5C9 Telephone: (306) 966-6327; Facsimile: (306) 966-6377  
Web Site: <http://www.usask.ca/pharmacy-nutrition/>

# AFPC Conference 2005 Planning Committee

<b>Roy Dobson, Chair</b> University of Saskatchewan	Registration Logistics, Conference Budget, Exhibitors
<b>Frank Abbott</b> University of British Columbia	Registration Logistics, Conference Budget, Exhibitors
<b>Bev Allen</b> University of Saskatchewan	Member-at-large
<b>Jane Alcorn</b> University of Saskatchewan	Synchrotron Tour, Registration Packages
<b>David Blackburn</b> University of Saskatchewan	Transportation, Registration Packages
<b>Dawna Hawrysh</b> University of Saskatchewan	Awards Banquet
<b>Rosemin Kassam</b> University of British Columbia	Pharmacy Practice Research Symposium
<b>Adil Nazarali</b> University of Saskatchewan	Conference Program, Posters
<b>Shannon Neubauer</b> University of Saskatchewan	Member-at-large
<b>Fred Remillard</b> University of Saskatchewan	Bush Party, Teachers' Conference 1
<b>Yvonne Shevchuk</b> University of Saskatchewan	Registration Logistics, Name Tags, Bush Party, Teachers' Conference II
<b>Jeff Taylor</b> University of Saskatchewan	Transportation, Registration Packages, Bush Party

# AFPC Executive and Councillors

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*Effective June 12, 2004. Updated February 18, 2005.*

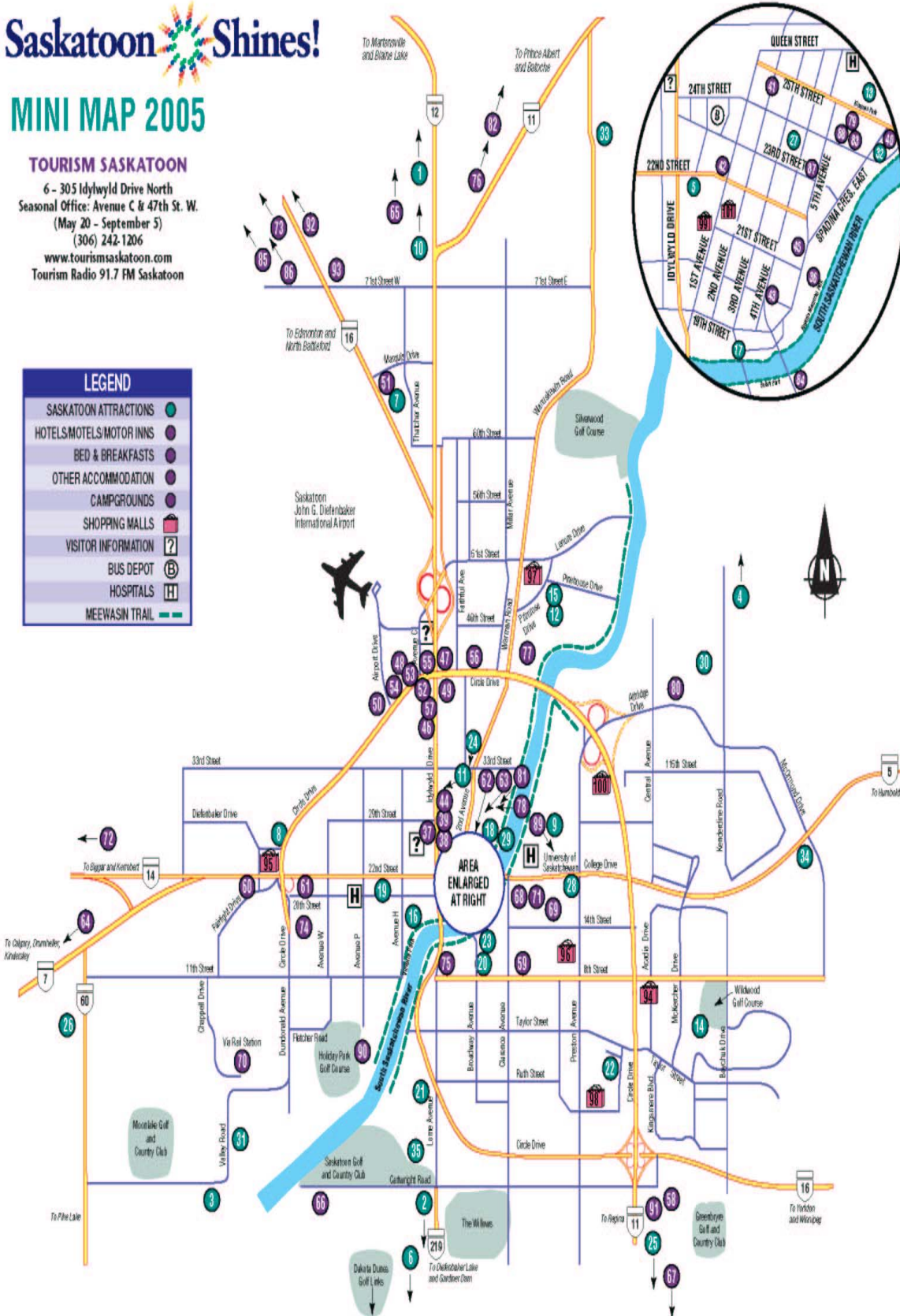


## MINI MAP 2005

### TOURISM SASKATOON

6 - 305 Idylwyld Drive North  
 Seasonal Office: Avenue C & 47th St. W.  
 (May 20 - September 5)  
 (306) 242-1206  
 www.tourismsaskatoon.com  
 Tourism Radio 91.7 FM Saskatoon

LEGEND	
SASKATOON ATTRACTIONS	
HOTELS/MOTELS/MOTOR INNS	
BED & BREAKFASTS	
OTHER ACCOMMODATION	
CAMPGROUNDS	
SHOPPING MALLS	
VISITOR INFORMATION	
BUS DEPOT	
HOSPITALS	
MEEWASIN TRAIL	



### SASKATOON ATTRACTIONS

- 1 THE BARN PLAYHOUSE 25 km North on Highway 12
- 2 BEAVER CREEK CONSERVATION AREA 13 km South on Highway 219
- 3 THE BERRY BARN 11 km South on Valley Road
- 4 BRIDGE CITY SPEEDWAY 2.2 km North on Kenderdine Road
- 5 CENTENNIAL AUDITORIUM 35 - 22nd Street East
- 6 CRANBERRY FLATS CONSERVATION AREA 8 km South on Highway 219
- 7 CREDIT UNION CENTRE 3515 Thatcher Avenue
- 8 COSMO CIVIC CENTRE 3130 Laurier Drive
- 9 DIFENBAKER CANADA CENTRE - UNIVERSITY OF SASKATCHEWAN College Drive
- 10 GLADYS' DOLL HOUSE 7 km North on Highway 12
- 11 HARRY BAILEY AQUATIC CENTRE 1110 Idylwyld Drive
- 12 KINSMEN/HENK RUY'S SOCCER CENTRE 219 Primrose Drive
- 13 KINSMEN PARK Spadina Crescent and 25th Street
- 14 LAKEWOOD CIVIC CENTRE 1635 McArthur Drive
- 15 LAWSON CIVIC CENTRE 225 Primrose Drive
- 16 LION'S SKATEPARK Victoria Park
- 17 MEEWASIN VALLEY CENTRE 402 - 3rd Avenue South
- 18 MENDEL ART GALLERY AND CONSERVATORY 950 Spadina Crescent East
- 19 MUSÉE UKRAINE MUSEUM 202 Avenue M South
- 20 OFF BROADWAY DINNER THEATRE 639 Main Street
- 21 PRAIRIELAND PARK, MARQUIS DOWNS AND EMERALD CASINO 503 Ruth Street West
- 22 ROYAL CANADIAN LEGION WAR ARTIFACT ROOM 3021 Louise Street
- 23 SASKATCHEWAN CRAFT GALLERY 813 Broadway Avenue
- 24 SASKATCHEWAN INDIAN CULTURAL CENTRE 120 - 33rd Street East
- 25 SASKATCHEWAN INTERNATIONAL RACEWAY 13 km South on Highway 11
- 26 SASKATCHEWAN RAILWAY MUSEUM Hawker Siding and Highway 60
- 27 SASKATOON CITY HALL 222 - 3rd Avenue North
- 28 SASKATOON FIELD HOUSE 2020 College Drive
- 29 SASKATOON PRINCESS RIVER CRUISE Boat dock behind Mendel Art Gallery
- 30 SASKATOON ZOO FORESTRY FARM PARK, ROBIN SMITH MEDITATION GARDEN AND HERITAGE ROSE GARDEN 1903 Forest Drive
- 31 STRAWBERRY RANCH THE MAZE 6 km South on Valley Road
- 32 UKRAINIAN MUSEUM OF CANADA 910 Spadina Crescent East
- 33 WANUSKEWIN HERITAGE PARK North on Wanuskewin Road
- 34 WILSON'S GREENHOUSE AND GARDEN CENTRE Highway 5 and McOrmond Road
- 35 WESTERN DEVELOPMENT MUSEUM 2610 Lorne Avenue South

**Tourism Saskatoon:** 6-305 Idylwyld Drive N  
 Saskatoon, SK S7L 0Z1  
 Ph: (306) 242-1206  
 Fx: (306) 242-1955  
 Toll Free: 1-800-567-2444

## Select Saskatoon Attractions

**The Meewasin Valley Trail:** Follows the South Saskatchewan River through the heart of Saskatoon, offering year-round recreation and sightseeing opportunities for everyone. Cycle, jog or enjoy a casual stroll through beautifully landscaped parks and natural areas. Access points are found throughout the city with maps, interpretive signage and washrooms located along the route.

<p><b>Wanuskewin Heritage Park:</b></p> <p>5 kms north of Saskatoon on Highway #11, follow the Bison signs or take Warman Rd North of Saskatoon and follow the Bison signs          Phone: (306) 931-6767          Fax: (306) 931-4522</p>	<p><b>Western Development Museum:</b></p> <p>2610 Lorne Avenue South          Saskatoon, Saskatchewan          Canada S7J 0S6          Tel: (306) 931-1910          Fax: (306)934-0525</p>
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## Select events in Saskatoon for June/July, 2005:

Date	Event	Venue
June 17 – June 19	<p><b><u>5<sup>th</sup> Annual Cameco Victoria Park Summer Festival</u></b>            A fun-filled weekend of entertainment – events for the whole family to enjoy including children’s activities, cultural entertainment, music, an ethnic food village, hospitality area and dragon boat races.</p>	Victoria Park
June 24 – July 3	<p><b><u>Sasktel Saskatchewan Jazz Festival</u></b>            A province-wide celebration of jazz music and music influenced by jazz.</p>	Saskatoon, Regina, Moose Jaw, Prince Albert and North Battleford are all performance locations.
July 1	<p><b><u>Optimist Centennial Canada Day 2005</u></b>            Celebrate Canada’s birthday and the 2005 Saskatchewan Centennial.</p>	Diefenbaker Park
July 6 – August 7	<p><b><u>Shakespeare on the Saskatchewan Festival</u></b>            Shakespeare on the Saskatchewan will present its 21<sup>st</sup> season in the form of Shakespeare’s “A Comedy of Errors” and “Romeo and Juliet”.</p>	Banks of the South Saskatchewan River

**Section 2:**  
**Program at a Glance**

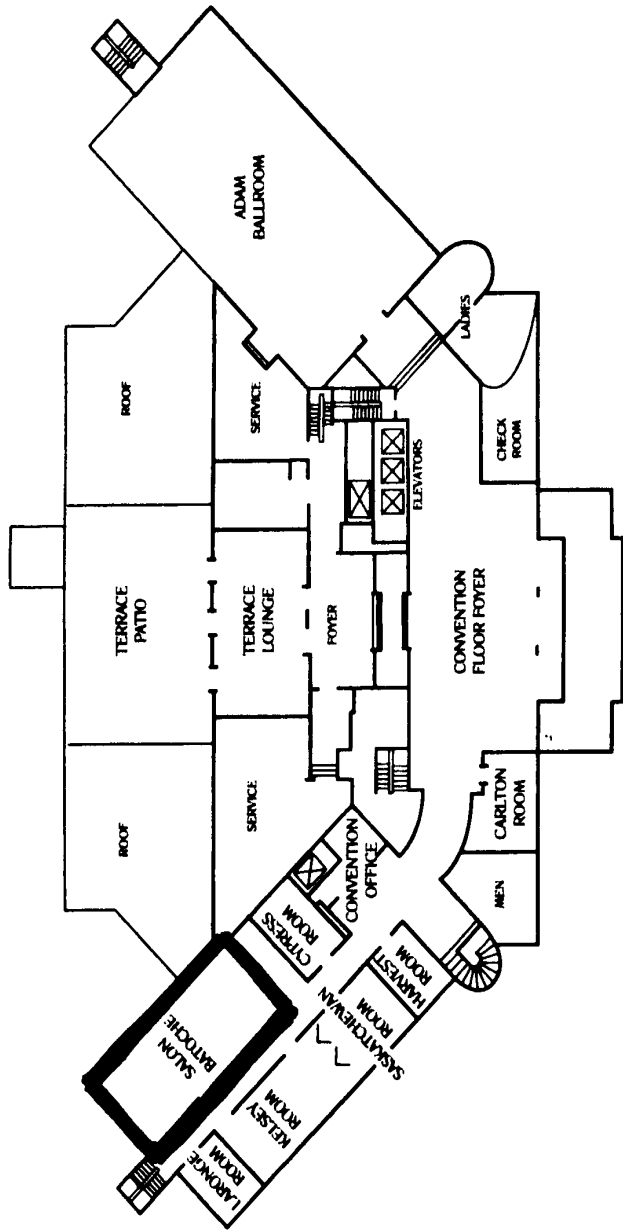
**AFPC Conference 2005 Program**  
 “Interprofessional Collaboration in Teaching and Research”

AFPC Annual Conference  
 June 24-26, 2005  
 Delta Bessborough Hotel  
 Saskatoon, SK

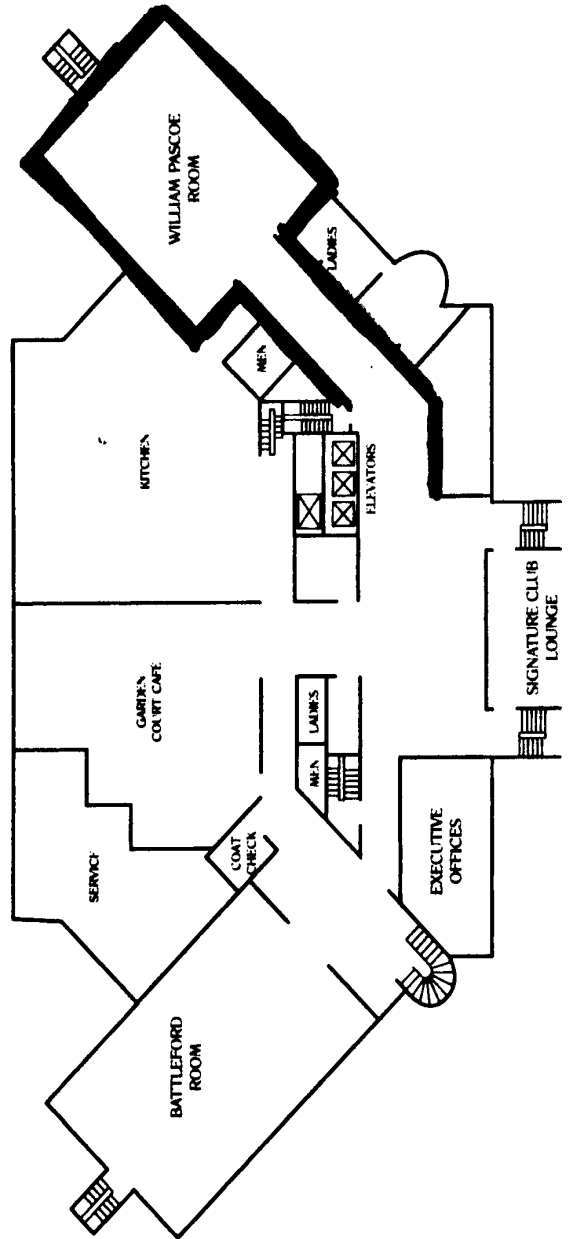
<b>Friday, June 24, 2005</b>		
5:00 pm – 7:00 pm	Conference Registration	William Pascoe Room
6:00 pm – 6:30 pm	Opening Reception School Posters	
6:30 pm – 9:30 pm	Call to Dinner Welcome from Dean of Host Faculty, Conference Chair, and President of AFPC. AFPC Awards Committee Chair - Presentations by AFPC Award Winners in Teaching and Research	
<b>Saturday, June 25, 2005</b>		
7:30 am – 3:00 pm	Conference Registration	William Pascoe Room
7:30 am – 5:00 pm	Exhibits and AFPC Posters	
7:30 am – 8:00 am	Continental Breakfast	
8:00 am – 10:30 pm	<b>TEACHERS’ CONFERENCE I: Interprofessional Education (IPE) and Challenges for Academia</b>  <b>Models of IPE.</b> Dr. Stephanie Gardner, Professor and Dean, University of Arkansas for Medical Services College of Pharmacy  <b>Embracing Change:</b> Dr. Ken Zakariasen, Associate Dean and Chair of Dentistry, University of Alberta.	
10:30 am – 12:00 pm	Authors present their posters	
12:00 pm – 1:30 pm	Annual General Meeting of AFPC (Includes Lunch)	Salon Batoche
<b>AFPC Pharmacy Practice Research Symposium 2005</b> Sponsored by Merck Frosst Canada Ltd. <i>“Interprofessional Collaboration in Pharmacy Practice and Research”</i>		
2:00 pm	<b>Introduction to the Session by the Chair</b> <i>Rosemin Kassam</i>	William Pascoe Room
2:10 pm	<b>Interprofessionalism: Lessons learned from pharmacists who have become physicians</b> <i>Zubin Austin</i>	

2:40 pm	<b>Pharmacists on primary Health Care Teams: Who, What, Where, When, How?</b> <i>Derek Jorgenson</i>	
3:10 pm	<b>Characteristics of Patient-Pharmacist Interactions Involving OTC Products in Community Pharmacies</b> <i>Jeff Taylor</i>	
4:00 pm	<b>Collaborative medication management in a team-based practice primary care practice: an explanatory conceptual framework</b> <i>Jana Bajcar</i>	
4:30 pm	<b>Interprofessional Rural Program in British Columbia</b> <i>Rosemin Kassam</i>	
5:00 pm	<b>Adjourn</b>	
6:00 pm – 9:30 pm	<b>AFPC Awards Banquet</b> Ukrainian Fowl Supper	Ukrainian Museum of Canada 910 Spadina Crescent
10:30 pm – ? ? ? ?	<b>BUSH PARTY</b>	????
<b>Sunday, June 26, 2005</b>		
7:30 am – 8:30 am	Breakfast Buffet	
7:30 am – 9:00 am	Conference Registration	
8:30 pm – 12:30 pm	<b>TEACHERS' CONFERENCE II: Preparing Our Students and Ourselves</b> <b>Workshop:</b> Marcel D'eon, Educational and Support Development, College of Medicine, University of Saskatchewan.  <b>Workshop will focus on the three essential elements of effective interprofessional education: real-life cases, cooperative learning and experiential learning.</b>	William Pascoe Room
12:30 pm	Closing Remarks and Adjournment	
1:30 p.m.	Depart from Hotel for tour of the Canadian Light Source (Synchrotron) on the	University of Saskatchewan

# AFPC Conference 2005 Floor Plan



MEZZANINE FLOOR



## **Section 3:**

### **Opening Dinner & Awards Presentations**

**Friday, June 24, 2005**

**6:00 pm – 9:30 pm**

**William Pascoe Room**

# AFPC/GlaxoSmithKline Graduate Student Research Award

**Shirley Teng**, B.Sc. (Hon), MSc, PhD Candidate  
Leslie Dan Faculty of Pharmacy, University of Toronto



Shirley Teng received her Hon.BSc from the University of Toronto in 1999, specializing in environmental toxicology. She pursued her MSc in the Department of Pharmaceutical Sciences, Leslie Dan Faculty of Pharmacy, University of Toronto where she studied the biochemical mechanisms of formaldehyde-induced hepatotoxicity and how toxicity can be modulated through the manipulation of metabolic pathways. She is currently in the fourth year of her PhD program under the supervision of Dr. Micheline Piquette-Miller, also at the Leslie Dan Faculty of Pharmacy, University of Toronto. Her thesis research focuses on how nuclear receptors, in particular the pregnane X receptor, are involved in the regulation of drug transporters in the liver. Shirley is the recipient of an Rx&D Graduate Research Scholarship in Pharmacy and was awarded two Ontario Graduate Scholarships. She also received a Presidential Trainee Award from the American Society for Clinical Pharmacology and Therapeutics in 2004 and the AstraZeneca Trainee Presentation Award from the Canadian Society for Clinical Pharmacology in 2003. She has published 7 papers including 3 for which she is first author. Shirley also served as an executive of the Pharmaceutical Sciences Graduate Students Association from 1999 to 2002.

The Involvement of the Pregnane X Receptor in Hepatic Gene Regulation During Inflammation in Mice,  
**Shirley Teng and Micheline Piquette-Miller**

Inflammatory conditions such as sepsis and viral infections can lead to the development of intrahepatic cholestasis. Disease onset is mainly the result of a cytokine-mediated decrease in the levels of hepatocyte bile acid transporters and metabolizing enzymes, leading to the cellular accumulation of bile acids and subsequent hepatotoxicity. However, the mechanism of this down-regulation has not been fully elucidated. Recently, nuclear hormone receptors have been found to play a key role in the regulation of many genes responsible for the transport and metabolism of bile acids. In particular, studies have found that activation of the pregnane X receptor (PXR) can induce the expression of bile acid transporters such as the bile salt export pump (BSEP) and multidrug resistance associated protein (MRP2) as well as the bile acid detoxifying enzyme CYP3A. Furthermore, PXR expression was found to be altered during inflammation. Thus, we hypothesized that PXR plays a role in transporter suppression during inflammation. To test this hypothesis, we investigated transporter regulation by PXR and compared the effect of inflammation on hepatic gene regulation in wild-type (PXR<sup>+/+</sup>) versus PXR knockout (PXR<sup>-/-</sup>) mice. Treatment of PXR<sup>+/+</sup> but not PXR<sup>-/-</sup> mice with the PXR activators PCN or RU486 resulted in increased mRNA levels of BSEP, MDR1a, MRP2, MRP3, OATP2, and CYP3A11, indicating involvement of PXR in their regulation. In the inflammation studies, significantly lower mRNA levels of BSEP, MDR2, MRP2, MRP3, NTCP, OATP2, and CYP3A11 were found in endotoxin-treated PXR<sup>+/+</sup> and PXR<sup>-/-</sup> mice. However, the extent of MRP2 suppression was significantly diminished in endotoxin-treated PXR<sup>-/-</sup> mice. Interleukin-6 imposed significant decreases in the expression of BSEP, MRP2, and CYP3A11 in PXR<sup>+/+</sup> mice, but this was not observed in PXR<sup>-/-</sup> mice. In addition, endotoxin and IL-6 were also able to suppress PCN-mediated induction of BSEP, MRP2, CYP3A11, and PXR. Taken together, our results suggest that PXR plays a role in the down-regulation of several hepatic proteins during inflammation. Thus therapeutics targeting PXR could represent a novel avenue for the treatment of cholestasis.



## **AFPC/Bristol-Myers Squibb, National Award for Excellence in Education**

The Structured Practical Experience Program (SPEP) of the Leslie Dan Faculty of Pharmacy has exerted an innovative and broad influence on Pharmacy education, beginning with a pilot in 1996, and then annually, since 1998. Within the context of the pharmaceutical care (PC) model, the SPEP rotations are designed to enable students to meet specific, terminal curricular outcomes under the tutelage of patient-focused pharmacists who are good teachers. SPEP sites are required to be conducive physically, philosophically and managerially to the provision of PC.

At SPEP's inception the Faculty, working with stakeholders, articulated PC-based educational outcomes; determined learning objectives within patient, practice, professional and societal contexts; designed activities to enable students to develop skills and demonstrate attainment of objectives; developed feedback, assessment, and evaluation methods; and created mechanisms to measure program effectiveness.

SPEP required pharmacist-supervisors that were committed to moving their practices toward PC and were fully knowledgeable and effective teachers; therefore, a large cadre of pharmacists would need to be educated in preparation for assuming 'Teaching Associate' roles. Thus the Teaching Associate Educational Program (TAEP) was developed in broad consultation with practitioners. The Faculty presently has more than 300 SPEP-affiliated practice sites and more than 700 pharmacists who have been trained to conduct SPEP rotations. A large proportion of students choose to work in SPEP sites upon graduation and an educational feedback loop has been created as many graduates return as TAs

SPEP's strategic approach of educating both practitioners and students and creating a synergistic experience continues to provide exemplary educational experiences for students, meaningful professional development for pharmacists as well as a positive, continuing impact on practice in Ontario.



**Andrea Cameron** received her B.Sc.Pharm. from the University of Toronto in 1981, and began a career in hospital pharmacy, with a residency from the Toronto General Hospital, followed by clinical pharmacist and management positions at The Wellesley Hospital in Toronto, from 1982 until 1997. Throughout this time, Andrea fulfilled various positions with the Canadian Society of Hospital Pharmacists, at the local and national level. In 1992 she completed an MBA from U of T. In 1997, she joined the Faculty of Pharmacy, as the SPEP Coordinator, Appraisal and Quality Assurance. At the University of Toronto, Andrea is very involved in Interprofessional Education. Off campus, Andrea spends time running marathons, and running after her three young children.

**Lesley Lavack** graduated from the Faculty of Pharmacy, University of Toronto in 1968 and embarked on a career which included both community and hospital practice. Between 1985 and 1990, in addition to clinical pharmacist responsibilities at The Wellesley Hospital, she assumed teaching roles at the Faculty of Pharmacy. Lesley joined the Faculty full time in 1990 and taught Professional Practice courses. In 1994 she became Assistant Dean and assumed major responsibility for creation and development of the Structured Practical Experience Program (SPEP). In 2002 Lesley's portfolio expanded and, as Assistant Dean for Undergraduate Affairs, she has major administrative and program overview responsibilities. Lesley loves to travel and has in recent years studied in Siena, Italy and Oxford, UK. She enjoys music, art, dancing, cooking, entertaining, keeping fit and spending time with family and friends.



## AFPC/AstraZeneca New Investigator Research Award

**Heather Boon**, PhD, Assistant Professor  
Leslie Dan Faculty of Pharmacy, University of Toronto



Heather Boon, BScPhm, PhD is an Assistant Professor in the Leslie Dan Faculty of Pharmacy and a CIHR New Investigator. In addition, Dr. Boon is cross-appointed to the Department of Family and Community Medicine and the Department of Health Policy, Management and Evaluation, both in the Faculty of Medicine, University of Toronto. She was originally trained as a pharmacist, completed a PhD in medical sociology (U of T) and a Post-doctoral Fellowship in Centre for Studies in Family Medicine (UWO). Dr. Boon is one of the Founding Chairs and Principal Investigators of the Canadian Interdisciplinary Network for CAM Research which recently received five years of funding from the Canadian Institutes of Health and the Natural Health Products Directorate (Health Canada). She is also a member of Health Canada's Expert Advisory Committee for Natural Health Products. She has published numerous peer-reviewed articles and book chapters on complementary/alternative medicine and is co-author of the text: [A Complete Natural Medicine Guide to the 50 Most Common Herbs: A Botanical Pharmacy](#). Her primary research interests are patients' use of complementary/alternative medicine, the safety and efficacy of natural health products and complementary/alternative medicine regulation and policy issues. Her current research focuses on exploring how complementary/alternative medicine is (or is not) being integrated with the Canadian health care system and the implementation and impact of the federal natural health product regulations.

### Complementary and Alternative Medicine: A Program of Research

After exploring the scope of complementary and alternative medicine (CAM), this presentation will provide a description of my CAM health services and policy research program which is built around three key objectives:

- To establish a CAM research network
- To explore the professionalization of CAM practitioner groups
- To explore the perceptions and impact of the new natural health product (NHP) regulations

The Canadian Interdisciplinary Network for CAM Research (IN-CAM; [www.incamresearch.ca](http://www.incamresearch.ca)) is introduced and an overview of the new Canadian NHP regulations will be provided. This will be followed by a brief summary of the key finding from two recent projects that investigated how CAM practitioners and NHP industry members are responding to these new regulations. The presentation will conclude with future research plans.

## AFPC/Pfizer Research Career Award

**Raymond Reilly, PhD**, Assistant Professor  
Leslie Dan Faculty of Pharmacy, University of Toronto



Dr. Raymond Reilly is an Associate Professor at the Leslie Dan Faculty of Pharmacy and in the Department of Medical Imaging at the University of Toronto. He obtained his BSc in Pharmacy and MSc in Nuclear Pharmacy from the Faculty of Pharmacy at the University of Toronto in 1979 and 1983, respectively, and obtained his PhD in Medical Biophysics from the University of Toronto in 1999. Following licensure as a pharmacist in Ontario, Dr. Reilly trained in the specialty of nuclear pharmacy. He held the positions of nuclear pharmacist at Princess Margaret Hospital (1984-1987) and as coordinator of the nuclear pharmacy at the University Health Network (1987-2002). While at the University Health Network, he established the Laboratory of Molecular Imaging and Targeted Radiotherapeutics to promote research into the discovery and development of new radiopharmaceuticals for imaging and treatment of cancer. Dr. Reilly invented indium-111 labeled epidermal growth factor, a novel targeted radiotherapeutic agent for metastatic breast cancer, which is now in Phase I clinical trial at Princess Margaret Hospital. He is also designing radiopharmaceuticals for imaging and radioguided surgery of breast cancer. Dr. Reilly has been actively involved in training MSc and PhD students, summer research students and post-doctoral fellows in the radiopharmaceutical sciences and several of his trainees have won local, national or international awards/scholarships for their research. He teaches undergraduate courses in pharmaceutical analysis and pharmaceutics and two graduate courses in radiopharmaceuticals. He has published 65 papers, 35 abstracts and 6 books/book chapters. Dr. Reilly's research is supported by grants from the U.S. Army Breast Cancer Research Program, Susan G. Komen Breast Cancer Foundation, Canadian Breast Cancer Research Alliance, Canadian Breast Cancer Foundation, Ontario Cancer Research Network and Canadian Institutes of Health Research.

Development of Radiopharmaceuticals for Imaging and Targeted Radiotherapy of Breast Cancer and Other Malignancies.

The mission of the research program of my group is to discover, develop and translate to the clinic, novel radiopharmaceuticals for imaging and targeted radiotherapy of breast cancer and other malignancies. We are especially interested in designing new radiopharmaceuticals that can non-invasively characterize the phenotype of breast cancer by imaging, predict its response to treatment, or assist the surgeon in tumour resection. In the area of targeted radiotherapeutics, our group discovered that epidermal growth factor, an endogenous peptide that stimulates the growth of breast cancer cells, can be exploited as a specific vehicle to insert the subcellular range Auger electron-emitter, indium-111 ( $^{111}\text{In}$ ) into the nucleus of the cells. Once delivered to the nucleus, the nanometer-micrometer range electrons emitted by  $^{111}\text{In}$  are severely damaging to DNA, killing the cells ("Trojan Horse" strategy). We successfully translated this new radiopharmaceutical treatment from preclinical testing against breast cancer cells and in mouse tumour xenograft models, through kit formulation and regulatory approval by Health Canada, to a Phase I clinical trial at Princess Margaret Hospital. To date, we have enrolled 11 patients at three different dose levels. Tumour localization was observed in some patients by imaging and importantly, there have been no serious normal tissue toxicities. No tumour responses have been observed at the doses studied, but the doses are being increased and patient outcome continues to be monitored. We are now extending this new radiotherapeutic strategy to a multitargeted approach aimed at HER-2/neu receptors on breast cancer cells and vascular endothelial growth factor receptors (VEGFR) on the supporting vasculature. Recent work by our group further suggests that it can be extended to the treatment of leukemia and neuroblastoma. Our imaging research is focused on radiopharmaceuticals that image mRNA or protein targets in breast cancer cells that are implicated in metastasis or are informative of response to treatment.

## **Section 4:**

### **Teachers' Conference I: Interprofessional Education (IPE) and Challenges for Academia**

**Saturday, June 25, 2005**

**8:00am – 10:30 am**

**William Pascoe Room**

# Teachers' Conference I: Interprofessional Education (IPE)

## Stephanie Gardner, PhD

Professor and Dean of the University of Arkansas for Medical Sciences College of Pharmacy



Dr. Stephanie Gardner currently serves as Professor and Dean of the University of Arkansas for Medical Sciences College of Pharmacy. She received her Bachelor of Science and Doctor of Pharmacy degrees from the University of North Carolina at Chapel Hill. Following that, she completed a two-year fellowship in cardiovascular pharmacology at Case Western Reserve University. She has been on the faculty of the UAMS College of Pharmacy for the last 14 years and served as Chair of the Department of Pharmacy Practice for 6 years. In 2001, she completed her Doctor of Education degree in Higher Education Administration at the University of Arkansas at Little Rock. In addition to her research in hypertension and cardiovascular effects of herbal medications, Dr. Gardner's research interests include interdisciplinary learning and educational assessment. Dr. Gardner's dissertation focused on attitudes toward and barriers to interdisciplinary education at academic health centers in the United States. She has published numerous papers focused on the use of the objective structured clinical examination (OSCE) for teaching and assessment in pharmacy education. Her current research focuses on the assessment of metacognitive skills among first-year professional students in an effort to identify students at risk for poor performance and to assess the impact of interventions on future performance.

## Models of Interprofessional Education

There is a wealth of information showing that providing patient care through a team approach can improve patient outcomes and decrease overall costs to the healthcare system. However, there are few well-defined models for training students during their didactic years to become members of an interprofessional healthcare team. This speaker will discuss how administrators at professional schools in the disciplines of medicine, pharmacy, and nursing differ in their attitudes toward interprofessional coursework. The barriers to providing interprofessional education at academic health centers will also be discussed. The speaker will highlight some successful models of interprofessional education and will discuss the obstacles that were necessary to overcome in their implementation phase. More discussions among faculty members and administrators of various disciplines may allow barriers to be overcome and allow development of interprofessional didactic courses that could test the hypothesis that these courses are more cost effective and more likely to foster teamwork in the clinical setting. An understanding of the perceived and actual barriers to interprofessional coursework may assist educators in moving toward curricular reform that promotes collegiality and a relationship-centered practice model.



## Challenges for Academia

**Kenneth L. Zakariasen, DDS, MS, MS(ODA), PhD**  
Associate Dean and Chair of Dentistry  
University of Alberta



Dr. Ken Zakariasen is Associate Dean and Chair, Department of Dentistry, University of Alberta Faculty of Medicine and Dentistry. He is also an Adjunct Professor in the Department of Public Health Sciences focusing on graduate studies in health policy and management. Prior to returning to Alberta, Dr. Zakariasen was, over a span of three decades, an educator, researcher and academic administrator at the University of Minnesota, University of Iowa, University of Alberta, Dalhousie University and Marquette University, including Dean of three colleges over a 10-year period at Marquette University and Dalhousie University. He was also Executive Director of two professional organizations, and is the Editor-in-Chief of the Year Book of Dentistry for Mosby publishing.

Dr. Zakariasen, active in clinical endodontic practice for many years, now practices organization development extensively as a consultant, particularly with healthcare organizations and universities. He specializes in strategy development, organizational transformation through innovative whole systems approaches, executive leadership team development and enhancement of organizational effectiveness. He has published numerous articles, research abstracts and book chapters, and has presented widely on research, professional, policy and organizational topics.

### **Embracing Change: The Challenge of Interprofessional Education**

Some of our most exciting times as health science academics come when we brainstorm with health professionals from other disciplines, and generate ideas and new perspectives that none of us would have developed individually.... truly synergy at work. Given that most of us have probably had this experience, why is it that so many of us shy away from this fertile ground for creativity in education, and our students so often deem our interprofessional education efforts as mandatory, but largely useless, exercises? Could it be that change is just as disruptive for us university-types, who pride ourselves as innovative thinkers, and that we have been less than stellar in making the case for interprofessionalism to our students who remain largely underwhelmed? Could we turn this situation around so that we actually embrace change in interprofessional education not only because it adds real value, but because it adds some real excitement to our professional lives and our students' educational experiences? I truly believe the answer to these questions is a resounding "yes"! But, this will take a dramatic shift in the way we generate ideas, in the way we visualize our ideal world relative to interprofessionalism, in the way we involve people in the generative process and in the way we approach each step in the process of change. We can make it work! This presentation will look at the thinking and development processes that allow us to arrive at the point of truly embracing change!

## **Section 5:**

### **AFPC Poster Session**

**Saturday, June 25, 2005**

**7:30 am – 5:00 pm**

**William Pascoe Room**

Please note that the poster abstracts were published in the Journal of Pharmacy and Pharmaceutical Sciences-September to December issue, 2005. To access the Journal Article see

[http://www.ualberta.ca/~csps/JPPS8\(3\)/AFPC/SummaryPosterAbstractsSaskatoon05.htm](http://www.ualberta.ca/~csps/JPPS8(3)/AFPC/SummaryPosterAbstractsSaskatoon05.htm) .

The citation address for the abstracts is J Pharm Pharmaceut Sci (www.cspscanada.org) 8(3):483-493, 2005.

The address for CSPA is <http://www.cspscanada.org/>

# List of Abstracts

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**BasicRes No. 2:** The anti-atherosclerotic effects of the Growth Hormone-Releasing Peptides are CD36 dependent, **Diala Harb**<sup>1</sup>, Kim Bujold<sup>1</sup>, Maria Febbraio<sup>2</sup>, Martin G Sirois<sup>3</sup>, Andre Tremblay<sup>4</sup>, Huy Ong<sup>1,3</sup> and Sylvie Marleau<sup>1</sup>, <sup>1</sup>Faculty of Pharmacy, Departments of <sup>3</sup>Pharmacology, <sup>4</sup>Obstetrics & Gynecology, Faculty of Medicine, Université de Montréal, Montréal, Québec, <sup>2</sup>Department of Cell Biology, Lerner Research Institute, Cleveland, OH, USA

**BasicRes No. 3:** Hexarelin modulates left ventricular apoptotic signaling pathways in cardiomyopathic hamsters, **Mukandila Mulumba**, Huy Ong and Sylvie Marleau, Faculty of Pharmacy, Université de Montréal, POB 6128, Station Downtown, Montréal, QC, H3C 3J7

**BasicRes No. 4:** Determining the role of *Hoxa2* gene in palate development using a retroviral gene delivery system, **Xia Wang** and Adil J. Nazarali, College of Pharmacy and Nutrition, University of Saskatchewan, Saskatoon, S7N 5C9

**BasicRes No. 5:** Heavy metals modulate Aryl hydrocarbon receptor (AhR)-regulated genes at transcriptional and posttranscriptional levels by oxidative mechanisms, **Reem H. Elbekai** and Ayman O.S El-Kadi, Faculty of Pharmacy, University of Alberta, Edmonton, AB

**BasicRes No. 6:** Novel implantable delivery system increases maximum tolerable doses of paclitaxel in mice, **Vessela Vassileva**, Christine Allen, Micheline Piquette-Miller, Department of Pharmaceutical Sciences, Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto, Ontario, M5S 2S2

**BasicRes No. 7:** The effect of heat-treatment on Fungizone-induced renal toxicity in human kidney proximal tubule cells and fungal toxicity in *Aspergillus fumigatus*; the role of phospholipases, **Ross Taylor**<sup>1</sup>, Carlos Leon<sup>1</sup>, Karen Bartlett<sup>2</sup>, and Kishor M. Wasan<sup>1</sup>, <sup>1</sup> Faculty of Pharmaceutical Sciences, University of British Columbia and <sup>2</sup> School of Occupational and Environmental Hygiene, University of British Columbia

**BasicRes No. 8:** Estrogenic drugs modulation of the striatal rat dopamine transporter. **Maryvonne Le Saux**, and Thérèse Di Paolo, Molecular Endocrinology & Oncology Research Center and Faculty of Pharmacy, Laval University, Quebec, QC

**BasicRes No. 9:** Nrf2 deficiency does not alter susceptibility to hypoxic ischemic brain injury in the neonatal mouse, **Derek J. Roberts**<sup>1,2,3</sup>, Gregory J. Anger<sup>3</sup>, Robert W. Gilbert<sup>3</sup>, George S. Robertson<sup>2,3</sup>, <sup>1</sup>College of Pharmacy, <sup>2</sup>Department of Psychiatry, and <sup>3</sup>Department of Pharmacology, Dalhousie University, Halifax, NS.



## CLINICAL RESEARCH:

**ClinicalRes No. 1:** Long-term survival and late effects of central nervous system tumors in children of Saskatchewan: 1970-1999, Kaiser Ali, **Betty C. Riddell**, Edward Leung, Christopher Mpofu, Saskatoon Cancer Centre, Saskatchewan Cancer Agency, and Colleges of Medicine, and Pharmacy & Nutrition, University of Saskatchewan, Canada.

## EDUCATIONAL AND TEACHING RESEARCH:

**Edu/Teach-Res No. 1:** Development of a multiple choice instrument to assess characteristics of candidates for admission to the B.Sc.Pharm. program at the Leslie Dan Faculty of Pharmacy, Richard Braha Assessment Consultants Incorporated, Halifax, Nova Scotia and **Lesley Lavack**, Leslie Dan Faculty of Pharmacy, University of Toronto

**Edu/Teach-Res No. 2:** Number of direct observation forms requested of preceptors during final year pharmacy experiential rotations, **Andrea J. Cameron**, Lesley A. Lavack, Annie WM Lee, Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto

**Edu/Teach-Res No. 3:** Interprofessional Rural Program in British Columbia – Program Overview. **Rosemin Kassam**, Faculty of Pharmaceutical Sciences, The University of British Columbia and the Interprofessional Rural Program of BC Working group.

**Edu/Teach-Res No. 4:** Pharmacy Students' Experiences with the Interprofessional Rural Program in British Columbia, **Rosemin Kassam**, Faculty of Pharmaceutical Sciences, The University of British Columbia

**Edu/Teach-Res No. 5:** Development of an on-line, foundations course for students in a part-time Doctor of Pharmacy Program, **Lalitha Raman-Wilms**, BSc.Pharm., Pharm.D. University of Toronto.

## PHARMACY PRACTICE RESEARCH:

**PPR No. 1:** Natural health products in the management of osteoporosis, **Anne M Whelan**<sup>1,2</sup>, Tannis M Jurgens<sup>1</sup>, Susan K Bowles<sup>1,3</sup>, <sup>1</sup> College of Pharmacy, Dalhousie University, <sup>2</sup> Department of Family Medicine, Dalhousie University, <sup>3</sup> Division of Geriatric Medicine and Department of Pharmacy, Capital District Health Authority. Halifax, Nova Scotia.

**PPR No. 2:** Impact of a pharmacist telephone follow-up intervention on patients receiving antibiotic treatment in community: MICROBE study, **Thanh-Thao Ngo**, H el ene Lachance-Demers, Cynthia Vachon, Krystel Beaucage, Faculty of Pharmacy, University of Montreal, Montreal, Quebec.

## SOCIAL AND ADMINISTRATIVE RESEARCH:

**SocAdminRes. No. 1:** The health care team: what role do community pharmacists see for themselves?, **Roy Dobson**<sup>1</sup>, Carol Henry<sup>1</sup>, Jeff Taylor<sup>1</sup>, Gord Zello<sup>1</sup>, Jean Lachaine,<sup>2</sup> <sup>1</sup> University of Saskatchewan; <sup>2</sup> Universit  de Montr al

## BASIC RESEARCH:

### **BasicRes No. 1: Combination therapy preventing the emergence of antibiotic-resistant *Enterobacter cloacae***

Harris Iacovides<sup>1</sup>, Robert Ariano<sup>1,2</sup>, Godfrey Harding<sup>1,2</sup>, Sheryl Zelenitsky<sup>1,2</sup>  
University of Manitoba<sup>1</sup> and St. Boniface General Hospital<sup>2</sup>, Winnipeg, MB

**Background:** Clear indications for combination antibiotic therapy in the treatment of nosocomial infections remain to be defined. *Enterobacter* continues to rate among the most common Gram-negative pathogens in hospitalized patients, with resistance to broad-spectrum cephalosporins approaching 35%. The objectives of this study were to (1) simulate the emergence of cephalosporin-resistant *E. cloacae* during ceftazidime therapy in an in vitro pharmacodynamic model (IPDM), and (2) characterize the ability of combination therapy with ciprofloxacin or gentamicin to prevent resistance. **Methods:** A one-compartment IPDM of *E. cloacae* bacteremia was established using three clinical blood isolates. Each isolate was initially susceptible to all antibiotics tested, with minimum inhibitory concentrations (MICs) for ceftazidime of 0.5 mcg/ml. Ceftazidime alone and in combination with ciprofloxacin or gentamicin were tested using concentration profiles simulating those observed with standard clinical doses (q12h x 72h) in humans. Resistance was detected through MIC determinations after 24, 48 and 72h of therapy. Resistant isolates were further classified as stably derepressed or reversibly induced by re-plating on antibiotic-free media five times and re-determining MICs. **Results:** Despite optimal dosing, monotherapy with ceftazidime selected high-level resistance in 90% of exposures for all isolates. Ceftazidime MICs increased to values  $\geq 256$  mcg/ml during therapy. Of the resistant isolates, 100% of isolate #1, 78% of isolate #2 and 33% of isolate #3 were stably derepressed mutants. Alternatively, combination therapy with either ciprofloxacin or gentamicin was 100% effective at suppressing the emergence of ceftazidime-resistant isolates. **Conclusions:** This pre-clinical data strengthen the argument for combination antibiotic therapy in the prevention of antibiotic-resistant *E. cloacae* infection, and support further investigation in animal models and humans.

### **BasicRes No. 2: The anti-atherosclerotic effects of the Growth Hormone-Releasing Peptides are CD36 dependent**

Diala Harb<sup>1</sup>, Kim Bujold<sup>1</sup>, Maria Febbraio<sup>2</sup>, Martin G Sirois<sup>3</sup>, Andre Tremblay<sup>4</sup>, Huy Ong<sup>1,3</sup> and Sylvie Marleau<sup>1</sup>

<sup>1</sup>Faculty of Pharmacy, Departments of <sup>3</sup>Pharmacology, <sup>4</sup>Obstetrics & Gynecology, Faculty of Medicine, Université de Montréal, Montréal, Québec, <sup>2</sup>Department of Cell Biology, Lerner Research Institute, Cleveland, OH, USA

Our recent studies have shown that long-term (12 weeks) treatment with growth hormone-releasing peptides (GHRPs), as ligands of the CD36 type B scavenger receptor, show striking anti-atherosclerotic and hypocholesterolemic effects in apoE-deficient mice (apoE<sup>-/-</sup>) fed a high fat, high cholesterol (HFHC) diet. Synthetic GHRP analogs such as hexarelin (HEX), in addition to binding CD36 on macrophages, also bind to the ghrelin receptor (GHS-R1a). In order to assess the relative contribution of these receptors to

macrophage accumulation and fatty streak formation at lesion-prone sites, apoE<sup>-/-</sup> mice have been treated with either ghrelin (320 µg/kg), the endogenous GHS-R1a ligand, HEX (100 µg/kg) a ligand of both CD36 and GHS-R1a, and EP 80317 (300 µg/kg) a selective CD36 ligand, for a period of 12 weeks. At 18 weeks of age, treated mice received <sup>111</sup>In-labelled peritoneal macrophages from donors apoE<sup>-/-</sup> mice. Aortic accumulation of labeled macrophages was assessed by densitometric analysis 48 hours later. Chronic treatment with EP 80317 was associated with a reduction of <sup>111</sup>In-labelled peritoneal macrophages accumulation by 40% compared to 0.9% NaCl-treated mice, suggesting a potential role of EP 80317 in modulating the inflammatory component of atherosclerosis. In agreement, long-term treatment with EP 80317 was associated with a 51% reduction of oil red-O-stained lesion after 12 (from 6-18) weeks of treatment. In contrast, chronic treatment with ghrelin failed to modulate the development of aortic lesions whereas HEX modestly reduced aortic lesions by 28%. Our results support a role for CD36 in mediating the anti-atherosclerotic effects of GHRPs.

**BasicRes No. 3: Hexarelin modulates left ventricular apoptotic signaling pathways in cardiomyopathic hamsters.**

*Mukandila Mulumba, Huy Ong and Sylvie Marleau*

Faculty of Pharmacy, Université de Montréal, POB 6128, Station Downtown, Montréal, QC, H3C 3J7

Recent studies have shown that programmed cell death (apoptosis) greatly contributes to the development of heart failure in patients with dilated cardiomyopathy. Novel therapeutic strategies to reduce cardiac apoptosis include administration of growth hormone-releasing peptides (GHRPs), initially designed as growth hormone sécrétagogues acting through the GHS-R1a receptor. Hexarelin (Hex), a synthetic hexapeptide GHRP analog, has been shown to inhibit cardiomyocyte apoptosis in vitro. The aim of this study was to assess the effects of Hex on the development of apoptosis in cardiomyopathic hamsters (CMH). CMH were treated with Hex (100 µg/kg/day, s.c) or 0.9% NaCl for 30 days starting either at the age of 30 days (early phase of the disease) or 160 days (late phase). Golden Syrian hamsters (GSH) were used as controls. Apoptotic nuclei of early-treated CMH were assessed by immunohistochemistry and the expression of apoptotic mediators by RT-PCR. Vehicle-treated show an elevated percentage of apoptotic nuclei (8.50 ± 0.50%) compared to GSH (3.33 ± 0.60%). Hexarelin significantly reduced the number of nuclei by 30% (p<0.05). In agreement, the mRNA levels of the anti-apoptotic markers Bcl-2 and Bcl-XI were increased by 53 and 72%, respectively in left ventricle. Similar results were observed following late treatment with Hex, with Bcl-2 and Bcl-XI mRNA levels increased by 46% and 88%, respectively. In contrast, Hex reduced the expression of Bax, a pro-apoptotic protein, by 60% and 69%, respectively, when the treatment was initiated in the early or late phase of the disease. These results suggest that Hex may exert its cardioprotective effects by modulating the apoptotic pathways in both the early and late phase of cardiomyopathy development in CMH.

**BasicRes No. 4: Determining the role of *Hoxa2* gene in palate development using a retroviral gene delivery system**

Xia Wang and Adil J. Nazarali

College of Pharmacy and Nutrition, University of Saskatchewan, Saskatoon, S7N 5C9

*Hoxa2*<sup>-/-</sup> mice exhibit craniofacial abnormalities including a cleft palate. Valproic acid (VPA) can induce a cleft plate in humans exposed *in utero*. The effect of VPA on palatal fusion rates was measured in treated mouse palate cultures. The fusion rates were 91.7%, 68.2%, 55.0%, 21.1% and 0% with 0, 12.5, 25.0, 50.0 and 100 µg/ml of VPA, respectively (N=19-24 palates/dose, p≤ 0.05). RT-PCR results revealed wild-type palatal cultures exposed to VPA resulted in a dose dependent decrease in *Hoxa2* expression and a delay in palatal growth. It has not been determined what role *Hoxa2* gene plays in palate development. A retroviral expression system has been developed to study the function of *Hoxa2* in the developing palate. Transduction of palatal shelves with *Hoxa2* antisense retrovirus resulted in a pronounced inhibition of palatal fusion. The fusion rates were 45%, 33% and 28% with titers at 0.08 ×10<sup>6</sup>, 1.80 ×10<sup>6</sup> and 3.60 ×10<sup>6</sup> cfu/ml, respectively (N=18-25 palates/titer). These are comparable to palatal cultures from *Hoxa2*<sup>-/-</sup> mouse (44.4%) (p≤0.05). Interestingly, retroviral particles expressing *Hoxa2* sense transcripts did not impact palatal development to the same extent as their antisense counterparts. The palatal fusion rates were relatively high (73%) with lower viral titers (N=19-22 palates/titer), while higher viral titers induced palatal fusion to a lesser extent (50-61%) (N=16-20 palates/titer). The expression of *Hoxa2* in the wild-type palates at different embryonic stages was quantified with real-time RT-PCR. Confocal microscopy has revealed *Hoxa2* retroviral expression in the palate. Our results have demonstrated for the first time that direct inhibition of *Hoxa2* transcripts in the developing palate induces a delay in palatal growth. (Supported by NSERC)

**BasicRes No. 5: Heavy metals modulate Aryl hydrocarbon receptor (AhR)-regulated genes at transcriptional and posttranscriptional levels by oxidative mechanisms.**

Reem H. Elbekai and Ayman O.S El-Kadi,

Faculty of Pharmacy, University of Alberta, Edmonton, AB

Recently, we demonstrated the ability of heavy metals (As<sup>3+</sup>, Cd<sup>2+</sup>, and Cr<sup>6+</sup>) to alter the capacity of AhR ligands to induce the bioactivating Cyp1a1 and the detoxifying NQO1 and GST Ya xenobiotic metabolizing enzymes. Since heavy metals have been shown to exert their toxicity, at least in part, by the generation of reactive oxygen species (ROS), we evaluated the role of metal-induced ROS on the expression of these enzymes. Hepa 1c1c7 cells were treated with 5 µM of As<sup>3+</sup>, Cd<sup>2+</sup>, or Cr<sup>6+</sup> in the presence or absence of TCDD (1 nM), an AhR ligand. Cd<sup>2+</sup> and Cr<sup>6+</sup> increased the production of ROS, while As<sup>3+</sup> caused perturbations in glutathione redox status. Although all three metals inhibited the induction of Cyp1a1 activity by TCDD, Cyp1a1 mRNA levels were potentiated. Pre-treatment with the antioxidant N-acetylcysteine (NAC) did not alter Cyp1a1 mRNA expression but completely abrogated the inhibition of Cyp1a1 activity induction by the metals. In parallel, when cellular GSH was depleted with the pro-oxidant, L-buthionine-[S,R]-sulfoximine (BSO), Cyp1a1 mRNA expression was further potentiated whereas

Cyp1a1 activity was further inhibited, compared to treatment with metals and TCDD alone. Metals alone induced Cyp1a1 mRNA expression, which was superinduced in the presence of the protein synthesis inhibitor, cycloheximide. On the other hand, all three metals, alone or in the presence of TCDD, enhanced NQO1 and GST Ya activities and mRNA levels, an effect that was completely abrogated with NAC and markedly potentiated by BSO. Pretreatment with the DNA transcription suppressor, actinomycin-D, abolished the induction of NQO1 and GST Ya mRNA levels by the metals. Our data clearly show that heavy metal-induced ROS modulate Cyp1a1 activity posttranscriptionally but induce NQO1 and GST Ya activities at the transcriptional level.

**BasicRes No. 6: Novel implantable delivery system increases maximum tolerable doses of paclitaxel in mice**

*Vessela Vassileva*, Christine Allen, Micheline Piquette-Miller,

Department of Pharmaceutical Sciences, Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto, Ontario, M5S 2S2

**Purpose:** To compare the safety, toxicity and biocompatibility of a novel chitosan-egg phosphatidylcholine (chitosan-ePC) implantable delivery system that provides controlled and sustained release of paclitaxel (PTX) versus the conventional Taxol® formulation in healthy CD-1 mice. **Methods:** Animals were surgically implanted intraperitoneally (IP) with drug-free or PTX-chitosan-ePC formulation. In parallel, to compare tolerable doses, bolus IP Taxol® injections were administered to mice in various amounts every other day or weekly, with Cremophor EL (CrEL) and anhydrous ethanol as control. Following sacrifice, animals were visually inspected for signs of infection, inflammation and capsid formation (around implants). Tissues were collected, fixed, paraffinized, sectioned and stained with hematoxylin and eosin (H&E). Toxicity was assessed as number of deaths, weight loss, general appearance and histopathological changes. **Results:** Mice implanted with the drug-free or PTX-chitosan-ePC formulations appeared healthy, without any weight loss. There were no observable signs of infection, inflammation, local irritation or fibrous encapsulation. In contrast, mice receiving bolus IP PTX injections every other day, displayed significant weight loss and deaths with signs of inflammation and irritation within the peritoneal cavity. The maximum tolerable PTX dose was 20 mg/kg/week as bolus IP administration, whereas PTX doses of more than 154 mg/kg/week were well tolerated when administered with the implants. Interestingly, the majority of deaths occurred in the CrEL treated controls. **Conclusions:** The novel chitosan-ePC delivery system is non-toxic, biocompatible and a safer method of PTX administration, providing higher dosages without adverse effects with possible clinical significance in the treatment of solid tumors.

**BasicRes No. 7: The effect of heat-treatment on Fungizone-induced renal toxicity in human kidney proximal tubule cells and fungal toxicity in *Aspergillus fumigatus*; the role of phospholipases.**

Ross Taylor<sup>1</sup>, Carlos Leon<sup>1</sup>, Karen Bartlett<sup>2</sup>, and Kishor M. Wasan<sup>1</sup>,

<sup>1</sup> Faculty of Pharmaceutical Sciences, University of British Columbia and <sup>2</sup> School of Occupational and Environmental Hygiene, University of British Columbia

**Purpose:** To determine the effects of heat-treatment (70 °C for 20 minutes) on Fungizone (FZ)-induced nephrotoxicity in human kidney (HK-2) cells, on fungal toxicity in *Aspergillus fumigatus*, and to determine the role of phospholipase A<sub>2</sub> (PLA<sub>2</sub>). **Methods:** HK-2 cells grown in T75 flasks were seeded in 96 well plates (20,000 cells/well). FZ/heat-treated Fungizone (HFZ) concentrations of 10, 25, and 50 µg/ml of Amphotericin B (AmpB) were prepared. Snake venom PLA<sub>2</sub> (2.15 U/ml) was pre-incubated with HFZ one hour prior to addition to the cells. After 18-hour incubations, 3-(4,5-dimethylthiazol-2-yl)-5-(3-carboxymethoxyphenyl)-2-(4-sulfophenyl)-2H-tetrazolium (MTS) assays were performed, assessing cell viability through mitochondrial respiration. *Aspergillus fumigatus* spore suspensions were prepared and seeded in 96-well plates at 500,000 spores/well. HFZ/FZ were prepared as above and incubated with the fungi. Minimum inhibitory concentrations (MIC) were determined after 72 hours. **Results:** FZ-induced cytotoxicity was significantly greater than HFZ in HK-2 cells (40.4 ± 2.8% vs. 11.0 ± 1.1%) for 25 µg AmpB/ml (n=4, p<0.05). HFZ/FZ were found to have similar MIC ranges for *Aspergillus fumigatus* (0.225 – 0.25) µg AmpB/ml (n=4). Independently, PLA<sub>2</sub> had no apparent effect on HK-2 cells; however, the addition of 2.15 U/ml of PLA<sub>2</sub> to 50 µg heated-AmpB/ml significantly enhanced cytotoxicity (42.71 ± 2.85% vs. 25.22 ± 1.48%); (n=4, p< 0.05). **Conclusions:** Results suggest HFZ is significantly less toxic than FZ towards HK-2 cells. The efficacy of HFZ against *A. fumigatus* was equivalent to FZ. PLA<sub>2</sub> is not independently cytotoxic, but increases HFZ-associated cytotoxicity. **Acknowledgements:** This project was funded by CIHR.

**BasicRes No. 8: Estrogenic drugs modulation of the striatal rat dopamine transporter.**

Maryvonne Le Saux, and Thérèse Di Paolo,

Molecular Endocrinology & Oncology Research Center and Faculty of Pharmacy, Laval University, Quebec, QC

The membrane dopamine transporter (DAT) is the main mediator of dopamine uptake from synapses. Estrogens were reported to increase rat and human striatal DAT. The first study investigated if the selective estrogen receptor modulators (SERMs) tamoxifen and raloxifene could reproduce the estradiol effect on DAT in long term ovariectomized rats, a model of hormonal withdrawal as occurs in menopause. Tamoxifen is currently used for breast cancer treatment while raloxifene is given to women to treat osteoporosis. In the middle striatum, ovariectomy decreased DAT specific binding, which was corrected by estradiol, tamoxifen and raloxifene. The effect was specific to this subregion since neither the anterior nor the posterior parts responded to hormonal withdrawal and treatments. The second study sought the possible involvement of the estrogen receptors ER $\alpha$  and ER $\beta$  in the estradiol modulation of striatal DAT. Ovariectomized rats were treated for 2

weeks with estradiol, a specific ligand for the estrogen receptor  $\alpha$  (ER $\alpha$  4,4',4''-(4-Propyl-[1H]-pyrazole-1,3,5-triyl)trisphenol (PPT) or estrogen receptor  $\beta$  (ER $\beta$  2,3-bis(4-hydroxyphenyl)-propionitrile (DPN). Ovariectomy decreased DAT specific binding in the middle striatum compared to intact rat values and estradiol corrected this decrease. DPN, but not PPT, mimicked the estradiol increase. Neither ovariectomy nor treatments modulated DAT specific binding in the anterior and posterior striatum. These results show a new effect of tamoxifen and raloxifene in the brain and suggest for the first time that ER $\beta$  mediates the estradiol increase of DAT in striatum. *Supported by a CIHR grant to TDP. MLS was supported by a studentship from La Fondation de l'Université Laval.*

**BasicRes No. 9: Nrf2 deficiency does not alter susceptibility to hypoxic ischemic brain injury in the neonatal mouse**

Derek J. Roberts<sup>1,2,3</sup>, Gregory J. Anger<sup>3</sup>, Robert W. Gilbert<sup>3</sup>, George S. Robertson<sup>2,3</sup>,

<sup>1</sup>College of Pharmacy, <sup>2</sup>Department of Psychiatry, and <sup>3</sup>Department of Pharmacology, Dalhousie University, Halifax, NS.

Cerebral ischemia results in the excessive generation of reactive oxygen species (ROS) in the brain that leads to oxidative stress and possible neuronal cell death. To combat this induced oxidative stress, protective cellular mechanisms are activated that promote neuronal survival. Activation of the nuclear transcription factor NF-E2-Related-Factor-2 (*Nrf2*) is one such endogenous protective mechanism that forms a coordinated defense against ROS. Treatments that induce the activation of *Nrf2* may represent a novel therapeutic strategy for stroke. The objective of this study was to determine whether *Nrf2* deficiency alters brain damage (infarct volume) in a neonatal mouse model of hypoxic-ischemic brain injury. In wild type (WT), *Nrf2* heterozygous (*Nrf2* +/-), and *Nrf2* homozygous (*Nrf2* -/-) knockout mice (PO7) the left common carotid artery was isolated and cauterized. Following a 2 hour recovery period, all mice were placed in a low oxygen atmosphere environment (8% oxygen) for 60 minutes. Seven days later, animals were sacrificed; brains fixed and sectioned at a thickness of 50  $\mu$ m. Sections were stained with cresyl violet and for the neuron specific marker NeuN. Infarct volume of all stained brain sections was determined using the Scion Image software package. WT, *Nrf2* +/-, and *Nrf2* -/- animals composed of 8-14 animals each displayed comparable infarct volumes in the ipsilateral hemisphere, neocortex, hippocampus, and striatum. Loss of NeuN-positive cells also appeared similar in all groups. The results of the present study indicate that *Nrf2* deficiency does not influence the susceptibility of the neonatal brain to the injurious effects of hypoxia-ischemia. Given that adult *Nrf2* null mice have been reported to be more susceptible to brain injury caused by transient focal ischemia, we will determine whether susceptibility to hypoxic-ischemic brain injury is increased in older animals. Our findings also suggest that in this model, oxidative stress is not a major contributing factor to injury in the neonatal brain; however, measurement of ROS generated in the neonatal brain of *Nrf2* null and WT mice following hypoxia ischemia is required to test this hypothesis.

## CLINICAL RESEARCH:

### **ClinicalRes No. 1: Long-term survival and late effects of central nervous system tumors in children of Saskatchewan: 1970-1999.**

Kaiser Ali, *Betty C. Riddell*, Edward Leung, Christopher Mpofu.

Saskatoon Cancer Centre, Saskatchewan Cancer Agency, and Colleges of Medicine, and Pharmacy & Nutrition, University of Saskatchewan, Canada.

**Background & Objectives:** Central nervous system (CNS) tumors comprise the largest group of pediatric tumors in developed countries. A 30 year review of children with primary CNS tumors was conducted to determine their outcome with regard to long-term survival and late effects. **Materials & Methods:** Diagnostic categories were identified from a computerised Pediatric Oncology Data Base derived from the Saskatchewan Cancer Registry. Data items from individual patients were captured on standardized forms, and then transferred to a software program for statistical analyses. **Results:** Of a total of 1606 cancers diagnosed  $\leq 19$  years of age, 316 [20%] had CNS tumors; 297/316 [94%] brain tumors (BT) and 19/316 (16%) tumors of the spinal cord. The three commonest modalities of treatments were surgery (Sx) + radiation therapy (XRT) [35%], Sx alone [29%], and Sx+XRT+ chemotherapy [20%]. Percentage ten-year disease-free survival off therapy for the first three cohorts in 5-year blocks commencing with patients diagnosed in 1970 were 36%, 30%, and 33% respectively. For those patients surviving disease free 5 years post therapy, systemic late effects were noted in 69%. **Conclusions:** Prospective, longitudinal long-term cohort studies will allow for earlier detection and intervention with strategies designed to mitigate the high rate of multiple CNS and other systemic morbidities recorded in these survivors. **Note:** This Abstract has been accepted as a poster presentation at the North American Association of Central Cancer Registries (NAACCR), June 7 – 9, 2005, in Cambridge, Massachusetts.

## EDUCATIONAL AND TEACHING RESEARCH:

### **Edu/Teach-Res No. 1: Development of a multiple choice instrument to assess characteristics of candidates for admission to the B.Sc.Pharm. program at the Leslie Dan Faculty of Pharmacy**

Richard Braha Assessment Consultants Incorporated, Halifax, Nova Scotia and *Lesley Lavack*, Leslie Dan Faculty of Pharmacy, University of Toronto

**What to assess.** The content domain was determined through compilation of data drawn from key pharmacy professional and academic documents. An extensive list of characteristics was collapsed into nine positive and nine negative broad non-academic characteristics domains. A validation survey of key stakeholders was undertaken. Results re-affirmed the relevance of the characteristics and assisted in determining relative importance. **Development.** A pool of items was generated for each of the identified positive and negative non-academic characteristics. Validity scales were developed for use in a multiple-choice format questionnaire. Sequential field tests investigated the psychometric performance and qualities of the items and this instrument. Refinements were made until acceptable psychometric performance standards were met. The



instrument achieved or exceeded all relevant psychometric standards in field tests and was used in the Spring 2003 admissions cycle. **Validity and standard setting.** Extensive analyses were completed to ensure the instrument and cut-scores were reliable and valid for the purpose of selecting applicants for consideration. After confirming internal validity of the instrument, a combination cut-score was determined and a subset with the most positive and least negative characteristics was identified. **Conclusions.** The instrument displayed strong psychometric properties: excellent item characteristics, reliability, difficulty and discrimination. It displayed ease of administration, scoring, and the ability to select applicants who displayed desirable non-academic characteristics in the absence of undesirable characteristics. The new instrument is improving the reliability with which the Faculty assesses applicants' non-academic characteristics. **Endnote:** The instrument was/is being used in the 2004 and 2005 admissions cycles at U of T and one other Canadian Faculty of Pharmacy.

**Edu/Teach-Res No. 2: Number of direct observation forms requested of preceptors during final year pharmacy experiential rotations**

*Andrea J. Cameron, Lesley A. Lavack, Annie WM Lee*

Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto

**Objective:** To determine perceptions, and related factors, of both preceptors and students, related to a reduction in number of required direct observation forms (OBS) used for student feedback. **Methods:** An online survey was designed to elicit feedback from preceptors and students, related to a reduction in OBS required during 8-week rotations. Prior to 2005 one OBS per day, (40 per rotation), was required. In 2005, preceptors were asked to complete one form daily in the first 4 weeks, followed by one every other day for remaining weeks. Variables measured in the survey include: number of rotations supervised, practice type, shared preceptoring, and impact on verbal feedback. Routine program evaluation feedback and unsolicited comments were also collected. **Results:** The survey will be emailed during the final 2 weeks of the second rotation, ending April 29. From preliminary feedback students and preceptors have commented: 'OBS forms are an excellent tool for developing counseling skills and gauging improvement'; 'OBS are irrelevant in the second half of rotation'; 'prefer to keep one OBS daily to provide critical evidence for summative evaluations'; 'student perceived the reduced OBS number meant a reduced effort was appropriate'. **Conclusions:** Results of the survey and other feedback will guide further modifications to the documentation process. The simplicity and consistency of one OBS throughout a rotation may be supported, with a view to converting other documentation to on-line. Reinforcement of the purpose and importance of OBS can be provided to students and preceptors in pre-rotation communications. Frequent direct observations of student performance in a clinical setting are a key component of effective experiential learning.

### **Edu/Teach-Res No. 3: Interprofessional Rural Program in British Columbia – Program Overview**

**Author:** Interprofessional Rural Program of BC Working group.

**Presenter:** *Rosemin Kassam*, Faculty of Pharmaceutical Sciences, The University of British Columbia

**Objective** An Interprofessional Rural Program of British Columbia (IRPbc) was established to expose students in the health professions to rural communities and to provide them with the opportunity to learn how to work effectively within an interprofessional setting. **Methods:** A program development approach was used to implement the IRPbc. The IRPbc is a provincial program, developed through funding from the British Columbia Ministry of Health and coordinated through the British Columbia Academic Health Council. The program was initiated as a broad-based collaborative initiative bringing together partners from government, the academic context and health services in rural communities; this was an important first step for British Columbia in establishing a collaborative interprofessional initiative that engages numerous stakeholders in working toward a common goal. **Results:** A team consisting of practitioners, managers, educators, and policy makers was established to plan the implementation process. In addition, two working groups were established, one is responsible for the operational aspect of the program and the other to conduct on-going evaluation of IRPbc. Geographically diverse rural communities were selected for the program. Preceptors from participating health and human services programs who were interested in interprofessional work were recruited and offered a one-day orientation session. Senior year students interested in rural exposure and interprofessional collaboration were also recruited and offered a two-day orientation session. Each student had to complete the requirements of their own professional education, as well as meet expectations set by the IRPbc. **Conclusion:** IRPbc has provided a model for implementation of interprofessional education.

### **Edu/Teach-Res No. 4: Pharmacy Students' Experiences with the Interprofessional Rural Program in British Columbia**

*Rosemin Kassam*

Faculty of Pharmaceutical Sciences, The University of British Columbia

**Background:** In January 2003, the British Columbia Ministry of Health funded the development of an Interprofessional Rural Program of British Columbia (IRPbc) to prepare students for interprofessional collaborative practice and to promote rural recruitment of health professionals. To-date, 60 students representing 11 health professionals have participated. **Objective:** To present pharmacy students' experiences with the IRPbc. **Methods:** Recruitment of rural communities as clerkship sites for pharmacy students was influenced by the availability of local preceptors to supervise students. Senior year students with an interest in rural practice and interprofessional education were recruited through an interview process and offered a two-day orientation session. Students were provided with shared accommodation and funding for travel. In addition to completing the requirements of their own professional education, each student had to meet expectations set by the IRPbc. Individual interviews with students, along

with review of their learning log were used to evaluate their experiences. **Results:** To-date four pharmacy students have had the opportunity to partake in the IRPbc. For the first three placement cycles, these experiences took place primarily in two communities, Bella Coola and Trail, and occurred in teams ranging from three to seven interprofessional students. Students identified a number of benefits they received through this experience. Some of the benefits included the opportunity to interact with an interprofessional team, gain a stronger sense of their own identity, develop an increased appreciation of other professions they worked with and, last but not least, experience life in a small community. **Conclusion:** IRPbc has provided a model for implementation of interprofessional education.

### **Edu/Teach-Res No. 5: Development of an on-line, foundations course for students in a part-time Doctor of Pharmacy Program.**

*Lalitha Raman-Wilms*

Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto

**Background:** A part-time on-line program was developed for a post-baccalaureate Doctor of Pharmacy Program. One of the earlier courses students take is Foundations for Advanced Practice Pharmacy, which enables students to develop the required knowledge and skills for the Advanced Therapeutics courses. **Objectives:** The development, implementation and evaluation of the on-line foundations course taught in a problem-based format for a post-baccalaureate Doctor of Pharmacy Program is presented. **Methods:** A literature search was done to identify existing on-line programs that emphasize problem-based learning. Based on the literature review, consultations with individuals working with on-line courses and from reviewing the existing face-to-face foundations course, an on-line course was developed and implemented for nine part-time Doctor of Pharmacy Students. At the completion of the course, students were surveyed on the benefits and challenges with the on-line learning. This survey was compared to a similar survey given to learners in the face-to-face program for the same course. **Results:** Overall, the on-line course was successful in helping students meet the required course objectives. Compared to the face-to-face program, students taking the on-line course expressed additional challenges to their learning. **Conclusions:** An on-line course was successful in helping part-time students meet the objectives of a foundations, problem-based, Doctor of Pharmacy course. Based on students' feedback, this on-line course will be further revised and modified to improve the student's learning experience.

## **PHARMACY PRACTICE RESEARCH:**

### **PPR No. 1: Natural health products in the management of osteoporosis**

*Anne M Whelan*<sup>1,2</sup>, Tannis M Jurgens<sup>1</sup>, Susan K Bowles<sup>1,3</sup>

<sup>1</sup> College of Pharmacy, Dalhousie University, <sup>2</sup> Department of Family Medicine, Dalhousie University, <sup>3</sup> Division of Geriatric Medicine and Department of Pharmacy, Capital District Health Authority. Halifax, Nova Scotia.

**Objective:** To identify natural health products (NHPs) recommended for the management of osteoporosis and to review the evidence for their effect on bone mineral density (BMD)/fracture rate in women. **Methods:** Medline, Natural Medicines Comprehensive Database, and the Internet were initially searched to identify any NHPs advocated for use in osteoporosis. These sources, along with IPA, The Cochrane Library, IBIDS, CINAHL, and HerbMed, were searched again to locate randomized controlled trials (RCTs) in English, published between 1966 and October 2004. Additional references were obtained from the bibliographies of those articles. RCTs were selected if the NHP was evaluated in osteoporosis in women using BMD/fracture rate as the outcome measure. RCTs were excluded if the NHP was examined in secondary osteoporosis. NHPs examined in well-conducted systematic reviews were excluded. Data was extracted using predetermined criteria and studies appraised using the Jadad scale. **Results:** Forty-six NHPs were identified that claimed to be of benefit in osteoporosis. Of these 46, 15 had some clinical trial evidence to support their claim. Calcium, Vitamin D, and fluoride were excluded from the list of 15 as they were reviewed elsewhere. Strontium was also excluded as strontium ranelate, a drug under development, was used in the published studies. For the remaining 11 NHPs, RCTs that fit the inclusion criteria of the study were found for only DHEA, phytoestrogens and Vitamin K. **Conclusion:** Identified data is insufficient to support the use of phytoestrogens, DHEA or Vitamin K for the management of osteoporosis in women. **Acknowledgment:** Funding provided by Merck Frosst Canada & Co.

**PPR No. 2: Impact of a pharmacist telephone follow-up intervention on patients receiving antibiotic treatment in community: MICROBE study**

*Thanh-Thao Ngo, H el ene Lachance-Demers, Cynthia Vachon, Krystel Beaucage*

Faculty of Pharmacy, University of Montreal, Montreal, Quebec.

**Purpose:** To evaluate the impact of a community-pharmacist telephone follow-up intervention (PTFI) on clinical outcomes, pharmaceutical care, and cost for patients undergoing antibiotic treatment. **Method:** In a multicenter, randomized, controlled trial, patients in the usual pharmacist intervention (UPI) were compared to PTFI patients. **Results:** Compared to the UPI (n=129), in the PTFI (n=126), drug-related problems (DRPs) were identified in more patients (PTFI: 53%, UPI: 8%; p<0.001). Verbal recommendations (PTFI: 52%, UPI: 6%; p<0.001) as well as recognized (PTFI: 10%, UPI: 2%; p=0.015) and study-specific pharmaceutical advices (PTFI: 5%, UPI: 1%; p=0.064) were issued for more patients. The mean difference in the change in the number of infectious symptoms across the two groups (-0.24 symptom; 95% confidence interval (95% CI): -1.22 to 0.74) and the change in the infection-severity score (mean difference: -0.05 unit, 95% CI: -0.35 to 0.25) were small and not statistically significant. The adherence to treatment and patient satisfaction did not differ across the two intervention groups. The incremental direct costs of the PTFI vary from \$2.65 CAD and \$5.11 CAD per patient depending on whether cognitive services are reimbursed. **Conclusion:** A PTFI provides an excellent opportunity to detect and manage DRPs. No improvement in clinical outcomes was detected. This may be attributable to the difficulty of measuring clinical outcomes without laboratory culture, to the high level of pharmaceutical care offered to all study patients, and to the relatively small number of patients.

Financial support for this study was provided by Pro Doc Ltée. The results of this study were presented at the Canadian Association for Population Therapeutics annual conference, April 16-19, 2005, Vancouver, Canada.

## **SOCIAL AND ADMINISTRATIVE RESEARCH:**

### **SocAdminRes. No. 1: The health care team: what role do community pharmacists see for themselves?**

Roy Dobson<sup>1</sup>, Carol Henry<sup>1</sup>, Jeff Taylor<sup>1</sup>, Gord Zello<sup>1</sup>, Jean Lachaine<sup>2</sup>

<sup>1</sup> University of Saskatchewan; <sup>2</sup> Université de Montréal

**Background:** This study reports on support among community pharmacists for multidisciplinary health care teams and greater clinical responsibility, as well as the extent they perceive a leadership role for themselves within the health care team. **Methods:** A mail-in questionnaire (English or French) was sent to community pharmacists across Canada between February and April 2004. Selection was based on a random sample stratified by region (Atlantic Canada, Quebec, Ontario, the Prairie Provinces, and British Columbia). **Results:** The response rate was 35.2% (470/1337) with the highest rate in the Prairie Provinces (40.6%) and the lowest in Quebec (24.4%). Most community pharmacists agreed or strongly agreed that pharmacists should be part of health care teams (81.7%) although fewer agreed or strongly agreed that pharmacists possessed the necessary skills (61.0%). Most community pharmacists agreed or strongly agree they should be more involved in selecting (69.9%) and monitoring (81.0%) drug therapy. Most pharmacists also indicated they should be more responsible for treating minor illnesses (72.0% agreed or strongly agreed) while one-half (50%) agreed or strongly agreed they should have greater responsibility for treating chronic illnesses. Within the health care team, community pharmacists perceived a clear leadership role for medication-related activities, but also saw the necessity for leadership by pharmacists in a number of other team-centred activities. **Conclusions:** Community pharmacists across Canada indicate a general willingness to be members of health care teams, want a larger role in patient care, and perceive a significant leadership role for themselves within the health care team. Community pharmacists represent a substantial resource for community-based multidisciplinary health care teams and are prepared to participate significantly in a number of team activities.

## **Section 6:**

### **Pharmacy Practice Research Symposium**

**Saturday, June 25, 2005**

**2:00 pm – 5:00 pm**

**William Pascoe Room**

# AFPC Pharmacy Practice Research Symposium 2005 “Interprofessional Collaboration in Pharmacy Practice and Research”

Sponsored by:



**2:00 pm Introduction to the Session by the Chair**

***Rosemin Kassam*, Faculty of Pharmaceutical Sciences, University of  
British Columbia**

**2:15 pm Interprofessionalism: Lessons learned from pharmacists who have  
become physicians**

***Zubin Austin*, Leslie Dan Faculty of Pharmacy at the University of  
Toronto**

Professions are characterized by distinct cultures, and professional education may be described as a process of socialization into that culture. Interprofessionalism may be viewed as a process of cultural negotiation in which individuals must learn to communicate effectively with others who have different norms, mores and conventions. In an attempt to describe the distinct cultures of pharmacy and medicine, a qualitative study was undertaken to examine the experience of pharmacists who had become physicians. A total of 35 pharmacist/physicians were interviewed; inductive data analysis was undertaken utilizing Social Identity Theory, Social Identification Theory and Culture Shock Theory as sensitizing concepts. Four broad themes emerged to differentiate pharmacy and medical cultures. Given the experience of the study participants these were framed as culture shock/geographical metaphors: the Canada-US effect, the Alberta-Saskatchewan Effect, the Manhattan-Brooklyn Effect, and the Toronto-Guelph effect. These metaphors serve as a useful vehicle for conceptualizing essential cultural and communicative differences between professions, and may be useful in explaining interprofessional interactions between pharmacists and physicians. Limitations of this study include the use of stereotyped descriptions and the assumption that within-group differences were less significant than between-group differences. Overall, this study provided a unique way of describing how pharmacists and physicians interact, from the perspective of individuals who had assumed both roles and were comfortable in both professional cultures.

**2:45 pm      Pharmacists on Primary Health Care Teams: Who, What, Where, When, How?**

*Derek Jorgenson*, Saskatoon Health Region and Saskatchewan Health Quality Council

The benefits of including pharmacists as key members of primary health care teams are well supported in the literature. In addition, many traditional members of these teams are now requesting expanded access to the expertise of a pharmacist. Unfortunately, it is not known exactly how pharmacists can optimally utilize their skills within this new setting. Which patients should they be seeing? What should they be doing with these patients? Where should they be located? How should they be paid?

This session will include a very brief summary of some of the issues related to identifying the optimal role of pharmacists within primary health care teams. However, it will focus on presenting the results of a research project that attempts to address the issue of which patients need to be seen by a clinical pharmacist in this setting. The project is a randomized controlled trial that evaluated the ability of a patient self administered risk questionnaire to appropriately identify which patients should be seen by a clinical pharmacist in a family practice setting.

**3:15 pm      Characteristics of Patient-Pharmacist Interactions involving OTC Products in Community Pharmacies**

*Jeff Taylor*, College of Pharmacy and Nutrition University of Saskatchewan

While not a high profile area of interest for the profession, over-the-counter medicines represent a vital area of practice, both in economic and professional terms. For this session, the speaker will cover the basic elements of what takes place when consumers interact with pharmacists during the purchase of OTC products. Aspects will include the initiator of the event (and whether this matters), how often interaction takes place, the quality of interventions when they do occur, and implications for practice.

3:30 pm      Coffee Break



**4:00 pm Collaborative medication management in a team-based practice primary care practice: An explanatory conceptual framework**  
*Jana Bajcar, Leslie Dan Faculty of Pharmacy and Faculty of Medicine (Department of Family and Community Medicine), University of Toronto*

The presentation will describe a conceptual framework that was developed to create a platform that can be used by different health care providers to identify, define, and discuss roles and responsibilities in collaborative medication management. The framework was developed based on a qualitative review and group reflection of an existing pharmaceutical-care-based consulting practice within a family medicine practice setting. Key roles and responsibilities relative to collaborative management of medications were identified and described. The conceptual framework that was developed, called the Team Approach to Medication Management (TeAMM), consists of three primary components referred to as medication-related practices (medication-prescribing, medication-taking, and medication-dispensing). Each of these primary practices is supported by a team of health-care professionals that have supportive roles and responsibilities. In the TeAMM framework the patient's medication-taking practice holds a central and key position within a collaborative approach to medication management. The proposed TeAMM framework can be used to guide discussions and decisions among the different health-care providers working in primary care to define both direct and indirect medication management roles that health care practitioners and patients play in collaborative practices.

**4:30 pm Interprofessional Rural Program in British Columbia**  
*Rosemin Kassam, Faculty of Pharmaceutical Sciences, University of British Columbia*

**Background:** Difficulties with recruitment and retention of qualified health care practitioners in rural communities has been a big concern in Canada. In response, an Interprofessional Rural Program of British Columbia (IRPbc) was established to expose students in the health professions to rural communities, while at the same time train future practitioners to work effectively together among professions. **Objective:** To provide an overview of the IRPbc and discuss the lessons learned. **Methods:** Preceptors from participating health and human services programs who were interested in participating in the IRPbc were recruited and offered a one-day orientation session. Senior year students interested in rural exposure and interprofessional collaboration were also recruited and offered a two-day orientation session. Each student had to complete the requirements of their own professional education, as well as meet expectations set by the IRPbc. Individual and group interviews with preceptors and students, along with students' log of their experiences were used to evaluate the program. **Results:** IRPbc has phased through three placement cycles: summer 2003, winter 2004 and summer 2004. To-date 62 students have participated. Some of the benefits of IRPbc have included expansion of clerkship opportunities in rural communities, increased understanding of the needs of rural communities by students, and an increase in recruitment of qualified professionals in participating rural settings. The major challenges experienced have revolved around

the implementation process, and have been associated with the short implementation time frame, different program priorities, different timing and duration of student placements, and conflicts between the demands placed on students by their disciplines and the IRPbc. **Conclusion:** IRPbc has provided an excellent model for implementation of interprofessional education.

**5:00 pm    Adjourn**

## Speaker Biographies

**Zubin Austin**, MSc, MBA, Med, PhD

Assistant Professor, Leslie Dan Faculty of Pharmacy at the University of Toronto



Zubin Austin is Assistant Professor at the Leslie Dan Faculty of Pharmacy, University of Toronto, and the inaugural chair-holder of the OCP Professorship in Pharmacy. A graduate of the University of Toronto, Zubin has completed masters degrees in business administration, information science and education, as well as a PhD in Cognitive Science. Currently, he co-ordinates undergraduate courses in pharmacy practice and applied pharmaceutical sciences, and teaches in graduate courses in health professions education. He has an active research program and supervises several MSc, MEd, and PhD students. He has published extensively in the area of health professions and pharmacy education, and has been an invited speaker at numerous national and international conferences. As Principal Investigator, he was instrumental in development of the International Pharmacy Graduate program at the University of Toronto, a bridging education program designed to assist foreign-trained pharmacists in acquiring the knowledge and skills necessary to meet Canadian standards of practice. This program has been recognized as a "best-practices" model for immigrant-integration in Ontario. Zubin is also an award-winning educator, having received teaching recognition from both the Association of Faculties of Pharmacy of Canada and the American Association of Colleges of Pharmacy.

**Derek Jorgenson**, BSP, PharmD

Coordinator, Clinical Pharmacy Services, Saskatoon Health Region

Knowledge Exchange Consultant, Saskatchewan Health Quality Council



Derek Jorgenson is a coordinator of clinical pharmacy services for the Saskatoon Health Region. His clinical practice site is located within an interdisciplinary primary health centre. He also works as a Knowledge Exchange Consultant for the Saskatchewan Health Quality Council. Derek received his Bachelor of Pharmacy degree from the University of Saskatchewan in 1995. He went on to practice in community pharmacy for 5 years before moving to Toronto and earning his Doctor of Pharmacy degree from the University of Toronto. Derek spent the next two years at the Toronto Western Hospital as primary care pharmacy consultant in an interdisciplinary clinic setting. Derek's research interests focus around identifying optimal models of care for integrating pharmacists into primary health care teams; however, he is waiting for construction to be completed on his new clinical practice site before moving ahead with some of his research ideas. Current projects that he is involved with at the Health Quality Council include Medication Management in Seniors and Quality of Care in Asthma.

## **Jeff Taylor, PhD**

Associate Professor, College of Pharmacy and Nutrition  
University of Saskatchewan

Dr. Taylor teaches on topics mainly involving OTC therapeutics and patient education. Taylor has been involved with several chapters for the Canadian textbook on minor illness and is a reviewer for the American reference. Research interests include consumer behaviour during the purchase and use of OTC products. A clinical practice site at a community pharmacy is devoted totally to the management of minor and chronic illnesses amenable to OTC agents.



Appointments include Chair of the National Drug Scheduling Advisory Committee, a body responsible for advising provincial pharmacy regulatory authorities on placement of OTC drugs within the Canadian drug scheduling system. He is also director of the College's *EduLab* program for patient counselling skills

## **Jana Bajcar, BScPhm, MScPhm, EdD, FCSHP**

Associate Professor in the Leslie Dan Faculty of Pharmacy and  
Faculty of Medicine (Department of Family and Community  
Medicine) at the University of Toronto

Jana Bajcar is an Associate Professor in the Leslie Dan Faculty of Pharmacy and Faculty of Medicine (Department of Family and Community Medicine) at the University of Toronto and also is a Primary Care Pharmacist in the Department of Family and Community Medicine, St. Michael's Hospital, Toronto. She received her undergraduate and graduate pharmacy degrees from the University of Toronto and her Doctor of Education degree (Health Care Specialization) from Nova Southeastern University, USA. She has held clinical and administrative positions in teaching and non-teaching hospitals and has been involved in developing and studying the implementation of pharmaceutical care models of practice in the critical care and in the family physician office practices. She has been involved in pharmacy education for the last 14 years in the Undergraduate and PharmD programs and for eight years she was the Director of the Doctor of Pharmacy Program at the University of Toronto.



Dr Bajcar's current research focus is on the reduction of preventable medication-related problems from multiple perspectives (different health care professionals and patients) and in diverse patient populations (across illnesses, practice settings, ages, socioeconomic and mental status). One research focus is on the development of targeted pharmacist practice models and practice tools. A current research project is focusing on defining potential pharmacist practice models within a team-based primary care setting. Within pharmacy practice, education has been isolated as an evolving focal point for inquiry, specifically the study of strategic education models for medication-related instruction for various audiences. Within this area she is currently involved in several studies that focus on educating and supporting patients and their families to develop and maintain an effective medication-taking practice (e.g. psychiatric adolescent patients and their parents, socially disadvantaged diabetic patients, elderly patients on chronic medications) and through these studies she is investigating patient-centered approaches to patient medication-taking education. The second research focus is on pedagogical methods and is correlative to the pharmacy practice research and how each one informs the other.

**Rosemin Kassam**, Assistant Professor and Director of Structured Practice Education Programs (SPEP), Faculty of Pharmaceutical Sciences, The University of British Columbia



Dr. Rosemin Kassam obtained her Bachelor of Science in Pharmacy from the University of Alberta. She completed a hospital residency at the Royal Alexandra Hospital in Alberta and obtained her Doctor of Pharmacy degree from the University of Toronto.

Rosemin is currently an Assistant Professor and Director of the Structured Practice Education Program at the University of British Columbia, and a Pharmacotherapeutic Specialist with the Vancouver Coastal Health Authority Geriatric Diabetes Program. She brings extensive practice experience to her current position. She has worked in both community and hospital pharmacy, and was the project manager and clinical coordinator of the Pharmaceutical Care Research and Education Project in Alberta prior moving to BC. Rosemin is currently involved in educational and pharmacy practice research, and as Director of SPEP, her primary interest is to assess how experiential education helps meet educational outcomes and address societal needs.

## **Section 7:**

### **Teachers' Conference II: Preparing Our Students and Ourselves**

**Sunday, June 26, 2005**

**8:30 am – 12:30 pm**

**William Pascoe Room**

**Marcel D'Eon, PhD**  
College of Medicine, University of Saskatchewan

Marcel D'Eon is an educator currently working in the College of Medicine in Educational Support and Development. He served for 16 years as a classroom teacher before beginning work on a PhD which he completed in 1997. Marcel is interested in faculty development research (specifically how to easily and accurately evaluate workshops), pedagogy (active and cooperative learning), and curriculum (inter-professional education). He also teaches a class on professional issues to first year medical students.



## **Interprofessional Education Workshop**

The focus of the workshop will be on three essential elements of effective inter-professional education: challenging real-life cases, cooperative learning, and experiential learning. Most time will be spent giving people an experience of cooperative learning, exploring the theory, and preparing them to conduct cooperative learning groups.

In Part One participants will briefly review the material in the pre-reading article related to the organization of cases and the stages of experiential learning. To do this I will establish cooperative learning groups and assign tasks to be completed at table groups. This will take about an hour including at the end a large group discussion.

The bulk of the time will be spent exploring cooperative learning in more detail. In Part Two I will again establish cooperative groups with tasks to explore the five characteristics/elements of successful groups. Following a large group discussion time will be devote to issues of implementation with inter-professional students.

**Please note: Pre-Reading must be read in advance of the workshop.**

**“A Blueprint for Interprofessional Learning”**

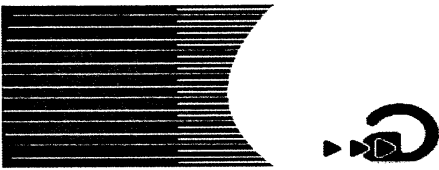
**Medical Teacher 26(7), Nov 2004.**

**Also to be published in Journal of Interprofessional Care**

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**Conference Exhibitors  
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**Quote of the day**

*To know is nothing at all; to imagine is everything.* -- Anatole France

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# AFPC Conference 2005



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# **PART 2.0**

## **MINUTES OF AFPC MEETINGS**

**2004-2005**



**AFPC**

Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada

**InterContinental Hotel  
220 Bloor Street West  
Toronto, Ontario**

## **Sunday, February 13, 2005 – Strategic Review and Planning Session**

Roy Dobson as facilitator:

8:30 AM **Breakfast** in the Board Room – West Foyer

This session was intended to be a review of AFPC mission and strategies with a view to reaffirm the prime objectives and time frames for achieving those objectives and to eventually update the strategic plan. There was a need to take stock of what has changed in the organization and how this progress has affected AFPC priorities. A new set of priorities would then determine actions of the Association over the next year or more. President Sylvie had expressed a desire to see the tasks of the various committees aligned with the goals and specific objectives of the strategic plan.

Reference material:

Notes taken from the strategic planning session in 2004 were provided (Roy Dobson). Reference was made to the SWOT analysis part of the notes.

Copies of the Strategic and Business plans were sent out prior to the meeting.

### **Agenda:**

President Sylvie had suggested the following timetable for the day:

8:30-10:30 AM: Review of our mission and objectives

10:30-12:00: Strategic plan: what has been accomplished/what do we need to do

12:00-3:00 PM: Review of the tasks and priorities of each committee

12:00 Noon Working lunch buffet – West Foyer

### **Notes** (Frank Abbott, recorder)

9:00 AM:

In attendance: Lili Wang, Susan Mansour, Anne Marie Whelan, Jean Lefebvre, Sylvie Marleau, Daniel Thirion, Lalitha Raman-Wilms, Zubin Austin, Mike Namaka, Roy Dobson, Sharon Mitchell, Franco Pasutto, Ingrid Price and Frank Abbott.

Sylvie again outlined the agenda for the day. Roy would be responsible for a review of the mission statement and objectives. The Executive and Council would review progress since

the plan's inception and then deal with issues arising from the business meeting of February 12/05. She noted that three of the individuals at the table were not present at the initial planning session of 2004 and gave credit to Susan for providing the leadership and to giving form to our first strategic plan.

### **Mission Statement.**

AFPC advocates (advances) for academic pharmacy by supporting, promoting, and recognizing innovation, excellence and leadership in pharmacy education, research, and scholarly activity.

Considerable discussion around advocates or advances.

Sylvie: AFPC fosters excellence in academic pharmacy by advocating, promoting, and recognizing innovation and leadership in pharmacy education, research and scholarly activity.

Need to distil goals that speak to the collaboration, communication, representation and advisory roles.

Roy is to provide a revised mission statement and goals to everyone for final approval.

### **What has been accomplished/what do we need to do?**

Advertising now available on the web page

Conference in Vancouver was a success

Try to develop a recruitment strategy-membership expansion was a goal:

Associate member category-how to extend to SPEP coordinators? Franco suggested that we need a conference topic that would attract attendance at the conference and perhaps membership would follow. Experiential could become a main stay of our annual meeting.

How about the chair of the SPEP SIG?

Lalitha: In June get coordinators together to deal with the task force report.

Zubin: How about Ontario College of Pharmacists and other regulators as members?

Frank to discuss this with registrar Deanna Williams.

Sylvie: At the midyear meeting we were to have a portfolio of AFPC success.

Value for members

3 year plan for annual meetings

New sources of funding e.g. PEOLC

Sylvie's list of AFPC successes.

Annual Conference is a success.

Awards program.

AFPC web site with French translation

Educational outcomes for entry-level Pharm D

SPEP report and current project.

Work and interactions are improving with CPhA, CCAPP, ADPC, NAPRA

How can each committee contribute to this?

Value of AFPC for members:

Councilors action at faculty meetings-who we are and what we do. Franco said we should develop the web site to make it universally useful i.e. provide scholar info on the web site.

Three year plan for conferences: Spoke about plans to meet jointly with CSPS again and the offer from AACCP to meet with them in 2008 – need to find out the details of how such a meeting will pan out.

AFPC portfolio of success:

Need to invite CAPSI representative to the Annual General Meeting.

By the AGM we need to do the following:

### **ELPharmD educational outcomes – approval for final edits.**

Quite a bit of discussion occurred on this topic.

Levels and ranges difficult to prepare so if we could have a definition of entry-level Pharm D that describes what is different from the existing B.Sc., this may suffice to gain approval of the holdout Faculties. Is the creation of a definition the role of the task force or could someone else write the definition?

CCAPP should be given a document to work with so we should pass on the revised form to them in the interim while we try to make the changes to make a final document more acceptable to the Faculties.

Frank to ask David Hill to craft a description.

### **SPEP Report**

Ingrid is to organize a meeting of SPEP directors in Saskatoon in June.

CACDS and NAPRA to be invited.

Form a special interest group (SIG) to set direction on the training of preceptors.

Anne Marie is to take feedback from groups and incorporate into the report.

Lalitha asked about needs of the individual directors and preceptor training

Franco suggested a joint meeting of the Development Officers to raise money for SPEP.

**Research Committee:**

Data gathering in question and how are we going to use it.

Mike wants to further refine the document to provide general information on faculty research profiles with the type of funding and the number of students that could be presented on the web.

Talked about creating a people portfolio for the AFPC website.

Frank suggested obtaining a price for the creation of the faculty profiles on the web site and trying to find funding from industry to complete the project.

**AFPC portfolio of Successes:**

Discussion took place on how to place this on the web site.

Frank to talk to Felicia about how to place the AFPC portfolio and to create the ADPC site.

**Commonalities:**

Sharon brought this topic up at AACP and received a very positive response - volunteers for case studies to be used in teaching.

Educational commonalities:

Evaluation tools. Ingrid

Lili asked that she would like information about who is teaching what? Frank said we would do that as part of the faculty profile project.

Communications:

We need to create new initiatives to improve communication.

Lalitha suggested an AFPC poster at CSHP and CCCEP conferences.

**Adjournment:** 3:00 PM

**MINUTES OF THE  
MID-YEAR COUNCIL MEETING****February 12-13, 2005  
Board Room  
InterContinental Hotel  
220 Bloor Street West  
Toronto, Ontario****Saturday, February 12, 2005:**

12:40 PM

**1. Welcome and opening remarks:**

President Sylvie Marleau welcomed the Executive and Council to the meeting and explained the work plan for the afternoon and the following day. The Saturday afternoon would deal with the business of Council. Issues needing further discussion and resolution would be dealt with during the strategy session on Sunday.

**2. Roll Call and Approval of the Agenda***President Sylvie*

Present and accounted for: Lili Wang, Susan Mansour, Anne Marie Whelan, Jean Lefebvre, Sylvie Marleau, Daniel Thirion, Lalitha Raman-Wilms, Zubin Austin, Mike Namaka, Roy Dobson, Sharon Mitchell, Franco Pasutto, Ingrid Price and Frank Abbott.

This was the first meeting for Council member Daniel Thirion from the Université de Montréal who replaced Chantal Pharand. Daniel received a special welcome.

The agenda was approved with the addition under other business:

Communication from John Bachynski  
Sharon Mitchell-report on a conference

**3. Approval of Council Meeting Minutes**

Annual Council Meeting, Thursday, June 10, 2004: Moved/seconded, Zubin/Susan: Approved.

New Council Meeting, Sunday, June 13, 2004: Moved/seconded, Zubin/Jean: Approved.

Proceedings 2004: Moved/seconded, Zubin/Roy: Approved. It was noted by Frank that the AGM attendance sheet should have been included in the document.

Teleconference, December 6, 2004: Moved/seconded, Sharon/Zubin: Approved.

**4. Business Arising from the Minutes:**

4.1 Standards for Clinical Faculty Tenure Track within Faculties of Pharmacy of Canada:

*Zubin Austin*

Zubin introduced draft v1 of the document titled "Tenure and Promotion Guidelines for



Creative Professional Activity”. He stated that Faculties at UBC, Toronto and Montreal are actively working towards the development and acceptance of such standards. Zubin stated that there was a need to focus on the five C’s: Creativity, Continuity, Contribution, Collaboration, and Commitment to excellence. Needed were case studies to illustrate real life examples in each of the five C categories. Mike spoke to the need for standardization across the Country but Zubin felt that the Faculties were just too diverse to be able to achieve this in the short term. Franco endorsed this thought and said they had recently overhauled their document at Alberta to take into account the diversity of the faculty. Franco gave strong endorsement to the document and stated with the changes now occurring at Universities, the document would provide a valuable sense of direction for the Faculties. Zubin reiterated the need for case studies to complete the document.

4.2 Educational Outcomes for Entry Level Pharm D. *Susan Mansour*

Susan indicated that there were four groups of paper with the report: A set of slides, a 2-page set of slides that summarized the types of Pharm D’s, a 3-page report, and the revised outcomes document.

Sylvie summarized and spoke to the slides presented at the entry-level Pharm D symposium held in Toronto on November 12, 2004. She also spoke to curriculum and degree developments that are occurring now within Quebec Faculties that necessitated the development of these outcomes.

Susan spoke to the report providing background to recent decisions for action. At the Deans annual meeting in October it was agreed that the Deans would work with their respective AFPC councillors to provide feedback on the report. Five of the Faculties responded. From the feedback two broad themes emerged plus issues specific to individual Faculties. The task force met by teleconference to consider this information and made further revisions to the document. A major issue yet to be resolved was based on the fact that two of the Faculties requested that levels and ranges of expected competencies be made available so that the entry-level Pharm D program could be distinguished from existing degree programs. Approval of the outcomes by these two Faculties was dependent on resolving this issue. On the other hand, the task force has recognized the difficulties of complying with the development of levels and ranges for the entry-level Pharm D and questioned whether this was a useful exercise.

Considerable discussion took place on the levels and ranges issue without reaching a consensus and President Sylvie finally asked Council to delay further discussion until the strategic planning session on Sunday.

4.3 Membership Committee *Franco Pasutto*

Discussion of leadership of the membership committee was also delayed until the strategic planning session on Sunday.

5. **Committee Reports:**

5.1 Awards Committee *Lili Wang*

Lili, spoke to the changes that were made to the awards book for 2005. Faculties can now elect more than one candidate for the Apotex Award. Wording for the Merck Frosst Postgraduate Fellowship Award has clarified that there is but one national award of \$

15,000. Holders of the award may have a second award as long as the total does not exceed \$30,000. Recipients of the award may re-apply for one additional year only.

Sylvie was acknowledged for translating these changes in the French version of the Awards Book.

Lili noted that in two of the major awards there was only one candidate. In both cases these individuals had applied and been reviewed in their award category in the previous year. Both were very acceptable candidates at that time. Sylvie felt that the applications should be sent out to reviewers this year as well, just to be certain that these individuals were credible candidates for their respective awards. Council agreed.

5.2 By-laws Committee

*Susan Mansour*

Susan presented an extensive report that recommended changes to the by-laws consistent with new rules from Corporations Canada for Not-For-Profit Organizations. There was a particular need to revise the goals and mission of AFPC in the By-laws consistent with action recommended in the strategic plan. Constituent Faculty needed to be defined. The recommendation to reword 8.1, Administrative Structure, was thought to be unnecessary. Under 11.3, Term of Office, it was recommended that the term of office for executive officers be changed to 2 years. This was based on a suggestion from the Deans that longer terms for officers in AFPC would provide more continuity to the activities of the AFPC Executive and Council. From the discussion that ensued the point was made that we would have difficulty in recruiting individuals to serve 6 years on the Executive. There was general consensus that we should not make this change.

5.3 Communications Committee

*Jean Lefebvre*

Jean reported that significant progress had been made in having a good portion of the web site material translated into French by a student at Laval University. Felicia Lo of PlanetFish Design is now working on the format and function of the bilingual web site. Items yet to be resolved are how do we obtain fairly swift translation of additions to the home page and of newsletters. Jean also spoke to the fine work of Rebecca Law as editor of the newsletter and reviewed the format of submissions to the newsletter. Montreal is due for the Faculty highlight in the March 2005 issue and Memorial for the September 2005 edition.

5.4 Conference Planning Committee (2005)

*Roy Dobson*

Roy provided a 4-page handout describing details of the program. Discussion occurred on the issue of interdisciplinary vs. interprofessional in the title. Registration is managed on line jointly with the Life Long Learning in Pharmacy Conference. There is a cost associated with this but sponsorship appears to be strong. School posters will be asked for again. Sylvie requested that at least 4 hours be reserved for the New Council Meeting. Sharon suggested that we invite new council members to sit in on the Annual Council Meeting prior to taking over in the New Council Meeting. Roy was to work on getting a chairperson for the Pharmacy Practice Research Symposium.

- 5.5 Conference Planning Committee (2006) *Sharon Mitchell*  
Sharon reported that the AFPC Conference and Annual Meetings would be held June 1-3, 2006 in Edmonton just prior to the start of the CPhA Conference. Some overlap with CPhA, perhaps the Pharmacy Practice Research Symposium is anticipated. Technology and teaching and advancing the profession have been suggested as topics. Sharon and Frank will work with CPhA on some of the details. A place for the banquet and the choice of a hotel are still to be decided.
- 5.6 Education Committee *Ingrid Price*  
Ingrid presented the report from the Education Committee that dealt with two topics, progress related to the report of the Task Force on Structured Practice Experiential Programs (SPEP) and developments related to the Program Evaluation document. With respect to the SPEP report, Ingrid provided copies of the letter of recommendations for action presented to the Deans from the Education Committee and a document summarizing the comments on the SPEP report received from faculty coordinators, NAPRA and CACDS. Ingrid provided some history with respect to action taken on the SPEP report but indicated that dealing effectively with the feedback received on the report was an issue for the committee. Susan suggested that AFPC might form a special interest group (SIG) to deal with the recommendations from the report. If that were to happen, Lalitha felt that we might have the first meeting of the SIG at the meeting in Saskatoon in June. Sylvie indicated that the SPEP project offered AFPC an opportunity to provide one of its successes. Further discussion was to take place during the strategic planning session.
- 5.7 Nominating Committee *Susan Mansour*  
Susan stated that a committee had been struck that consists of Susan as chair, Lavern Vercaigne, Linda Hensman, and Simon Albon. The call for nominations for President Elect has been made. Frank is to inform the respective Deans (Toronto, Laval and Memorial) of Council members whose terms are coming to an end in June 2005 and ask for newly elected representatives.
- 5.8 Planning and Finance Committee *Roy Dobson/Frank*  
Frank and Roy presented the draft of the AFPC Financial Statement for 2004 and a draft of the AFPC budget for 2005. The recommendations contained in the business plan of the Strategic Planning exercise were used in drafting the 2005 budget. Discussion led to changing the Associate Memberships back to the current value of \$75 per member. New grants at \$20,000 might potentially come from Federal projects such as the Palliative and End-of-life Care proposal or possibly from one of the Pharmaceutical Companies. The number was felt to be unrealistically high for the first year. A 3% increase in the Executive Director's stipend was also discussed. Moved/seconded, Roy/Susan, draft budget approved for 2005 with recommended changes.
- 5.9 Research Committee *Mike Namaka*  
Mike spoke to the report indicating that the major project of the committee to collect data on graduate students is not going smoothly with only Manitoba and Dalhousie providing data as of this date. Discussion of the report provided suggestions to streamline the reporting process for the Faculties. The last two columns of the document should be removed. Acronyms for the granting agencies should be listed and defined. The analysis

of poster presentations had been requested for posting on the web site and Frank said that this had been requested.

## **6. Reports of Representatives to External Groups**

- 6.1 ADPC Representative *Franco Pasutto*  
Franco indicated that the Executive Directors Report had sufficiently covered the details of recent ADPC activities.
- 6.2 CPhA Human Resources Project *Lavern Vercaigne*  
Frank presented Lavern's report. The report described further revisions to the Memorandum of Understanding which Lavern feels is reasonable and if the project proceeds, AFPC will be asked to formally sign the document. As of the date of the report, approval by the HRSDC of a sector study of pharmacists and pharmacy technicians had still not occurred.
- 6.3 CCAPP *Sylvie Marleau*  
Sylvie spoke to the report and highlighted the new website, the completion of revisions to standards for the Baccalaureate degree program, and a draft of the standards for the Entry-level Pharm D degree to be considered by the CCAPP Board at the Annual Meeting in Quebec City in May 2005.
- 6.4 CPhA Academic Board Member *Linda Suveges*  
Academic board member Linda Suveges presented an extensive report of CPhA activities that highlighted issues of the Entry-level Pharm D and the PEBC examination policy, lobbying activities on Parliament Hill, digital publications from CPhA and the launch of e-therapeutics. We are most grateful to Linda for her regular reporting on CPhA in the Communications Newsletter.
- 6.5 PEBC *Linda Suveges*  
A report will be available for the June meeting in Saskatoon.
- 6.6 CCCEP *Sylvie Marleau*  
Sylvie confirmed that Yvonne Shevchuk, former councilor from the University of Saskatchewan would be serving as the new representative of AFPC to the Canadian Council for Continuing Education in Pharmacy. Frank distributed a document prepared by Marie Rocchi Dean of the University of Toronto, who graciously acted as our temporary representative for the CCCEP Council Meeting that occurred November 27-28, 2004 in Toronto.
- 6.7 USP *Frank Abbott*  
Frank reported that he had recruited Raimar Löbenberg from the University of Alberta to serve as the next representative of AFPC to serve on USP. Raimar will replace Colin Briggs of the University of Manitoba who is stepping down at the conclusion of the USP Convention in 2005.

- 6.8 Pharmacy Technician Stakeholder Group *Frank Abbott*  
Frank is to ask Dean Wayne Hindmarsh of the University of Toronto for an update to be available for the June Meeting in Saskatoon.

7. Executive Director's Report *Frank Abbott*  
Frank presented the highlights of his report and spoke to the new initiative of preparing a proposal for Educating Pharmacists in Palliative and End of Life Care. Key to the project was the ability to recruit representatives from the Faculties to assist the core working group in the preparation of the proposal. Activities of the Association of Deans of Pharmacy of Canada (ADPC) were also highlighted. ADPC has been an invited participant to the planning of the Canadian Academy of Health Sciences.

8. Other business

- 8.1 John Bachynsky, Dean Emeritus of the University of Alberta raised the issue of more uniform prerequisites for pharmacy admission. He also stated that Japanese colleagues would be interested in coming to the Saskatoon Conference if the program included information on experiential training and/or pharmacy practice content.
- 8.2 Sharon Mitchell reported on a recent conference that she had attended in Alberta. Topics included research into clinical practice and academic detailing.

Adjournment 5:40 PM

**Minutes of the Teleconference held April 15, 2005 at 1:00 PM Pacific Daylight Time.**

1. **Welcome and Roll Call:** President Sylvie Marleau welcomed the participants and took an official roll call. In attendance were: Frank Abbott (Ex Dir), Ingrid Price (UBC), Roy Dobson (Sask), Sylvie Marleau (Pres), Anne Marie Whelan (Dalhousie), Susan Mansour (Past Pres).
2. **Confirming time and place for the SPEP Coordinators meeting.** Ingrid reported that of the Faculty practice coordinators who had replied to her invitation to attend, June 23/2005 in Saskatoon was the preferred choice for the meeting. One or two individuals found it difficult to be available for this date and it was decided that if the practice experience coordinator could not attend that they should send a delegate in their place. Sylvie was to look into who might be the representative from Université de Montréal.

Ingrid was to prepare an agenda for the meeting and circulate it to the Executive for review. The format of the meeting would be to address the recommendations in the Task Force Report and to develop a strategic plan for further action including objectives and timelines.

Discussion continued around the prospect of having the SPEP coordinators group serve as an ongoing Special Interest Group (SIG) much like the structure of SIG's at AACP. The SPEP SIG would need a chairperson and would provide an annual report on the group's activities to AFPC.

The issue of continued funding for the SIG group was raised and it was suggested that the New Council deal with this on Sunday, June 26, 2005 in Saskatoon.

Additional items discussed in preparation of the SPEP Coordinators meeting: Anne Marie Whelan would assist Ingrid with the strategic planning session on June 23. Roy indicated that the Boardroom had been booked in the Delta Bessborough Hotel for that day and arrangements would be made for flip charts and other resource materials plus lunch for the delegates. In addition to airfare, each delegate to the SPEP Coordinators meeting would be offered two nights accommodation in the Delta Bessborough Hotel. It was hoped that some of the coordinators would stay on to attend the AFPC Conference.

Ingrid and Anne Marie would be prepared to present a report of the SPEP Coordinators meeting at the Council meetings in Saskatoon.

3. **Conference planning:** Roy reported that sponsorship of the meeting was good. There was some disappointment in registration but it was still early. Frank, Rosemin and Roy were to work on finalizing the speakers for the Pharmacy Practice Research Symposium.

**Adjournment 46 minutes into the Conference Call.**



**MINUTES  
AFPC ANNUAL COUNCIL MEETING  
DELTA BESSBOROUGH HOTEL SASKATOON  
KELSEY BOARDROOM  
FRIDAY, JUNE 24, 2005**

**8:00 AM Continental Breakfast**

**8:30 AM**

- 1. Opening Remarks:** President Sylvie Marleau welcomed everyone to Saskatoon, thanked the planners of the 2005 Conference and stated that we were looking forward to an excellent sixty-second Conference and Annual General Meeting. One of the priorities at this meeting will be to identify our prime projects and the people leading them and to be sure to advertise these to our membership.
  
- 2. Roll Call and Approval of Agenda:** Present and accounted for were Sylvie Marleau (President), Zubin Austin (President Elect), Susan Mansour (Past President), Ingrid Price (UBC), Sharon Mitchell (Alberta), Roy Dobson (Saskatchewan), Mike Namaka (Manitoba), Lalitha Raman-Wilms (Toronto), Daniel Thirion (Montréal), Anne Marie Whelan (Dalhousie), Lili Wang (MUN) and Frank Abbott (Executive Director). Regrets: Jean Lefebvre (Laval) and Dean Franco Pasutto (ADPC).  
Agenda approved as circulated. New reports received were noted.
  
- 3. Council Meeting Minutes:**
  - 3.1 Midyear Council Meeting, Toronto, February 12, 2005. Moved/seconded by Susan Mansour/Zubin Austin that the minutes be approved – carried.
  - 3.2 Notes from Strategic Planning Session Midyear Council Meeting, Toronto February 13, 2005. Moved/seconded by Zubin/Susan that the notes be accepted for information – carried.
  - 3.3 Teleconference, April 15, 2005. Moved/seconded by Sharon/Lalitha that the minutes be approved – carried.
  
- 4. Business Arising from the Minutes:**
  - 4.1 Position Paper on Standards for Clinical Faculty Tenure Track – “Tenure and Promotion Guidelines for Scholarly and Clinical Activity” – Draft version 3 was offered for acceptance by principal author Zubin Austin. Zubin stated that the latest version was the result of circulating earlier documents for comment and input. Good feedback had been received from Mike Namaka and Anne Marie Whelan. Zubin had also circulated an Appendix of the data collection from seven of the nine Faculties. Next steps include the manuscript being submitted to the Canadian Journal of Higher Education for publication. Anne Marie suggested that the Appendix in spreadsheet form be posted on the AFPC web site along with the document. She noted that changes were occurring at a number of the Faculties, so

it will be important to keep the spreadsheet of data up to date. Attention then turned to who should champion the goals of the clinical faculty with respect to implementing procedures within Faculties to recognize and acknowledge in a fair manner the contributions that clinical faculty make. It was agreed that Council needed to consider the nature of a committee that would take on this task and it was likely that a permanent rather than a temporary committee would be required. Moved/seconded by Zubin/Roy that the report and spreadsheet be approved for acceptance – carried.

- 4.2 Educational Outcomes for Entry-level Pharm D: Susan Mansour summarized the report and briefly reviewed the history of committee activities that led to the document that was sent to the Faculties for approval. Five of the Faculties provided feedback on the outcomes and after review, changes were made to the document. Further feedback occurred at the midyear meeting of Council and it appeared that in order to receive Faculty approval the document should include levels and ranges in order for this document to distinguish the entry-level Pharm D from existing degrees. The request for levels and ranges created a dilemma for the committee because this was considered to be too large a task for the committee to undertake. In terms of going forward, chairperson Susan was now at an impasse and looking for direction from Council. Sylvie reaffirmed that CCAPP needs the educational outcomes for the entry-level Pharm D degree approved and soon. Sylvie noted that the accreditation standards for the baccalaureate degree have been revised for implementation in 2007 and they are very much in line with the entry-level Pharm D except for the experiential component. An approved educational outcomes document was required by November, 2005. Frank suggested that if the levels and ranges were absolutely essential to obtain Faculty endorsements that council consider hiring a writer to provide such a document. Zubin suggested that the submission by the Faculté de pharmacie Université de Montréal to government might substitute for the levels and ranges. After further discussion it was suggested and eventually moved by Zubin that we send the revised document back to the Faculties for one more review and ask for further feedback by no later than September 30, 2005. Endorsement of the document would be conditional on levels and ranges for the entry-level degree being provided at a later date. Last minute comments from the Faculties would be considered by the committee in order to write a final revision of the document. The task force committee would then present the revised document to Council for approval. Moved by Zubin and seconded by Susan. Carried. Susan agreed to continue as chairperson of the task force committee.
- 4.3 Report (written/verbal) on AACP Summit on Experiential Learning, Chicago, June 17-18, 2005 and Meeting of SPEP Coordinators, Saskatoon, June 23, 2005: Ingrid Price/Anne Marie Whelan. Because of time constraints, Education Committee chairperson Ingrid Price provided an oral report with a promise to follow up with a written summary of the two meetings – for information only. The timing of the AACP summit meeting in Chicago was very timely with respect to AFPC's initiative with regards to SPEP (Structured Practice Experiential Programs). AACP Executive Director Lucinda Maine was most helpful in having Ingrid Price invited to the summit. Ingrid reported that ninety delegates attended the two-day meeting. Many of the issues discussed were of mutual concern such as the number



and quality of preceptors, the ability to evaluate experiential learning and the professionalism of students during their clerkships. Ingrid confirmed that she had been warmly welcomed to the summit meeting and stated that she had made many valuable connections with experiential educators in the USA. At the AACCP Summit meeting in Chicago, priorities were agreed upon to deal with the issues at hand and action plans were set to deal with identified strategies. Based on her experience at the AACCP summit meeting, Ingrid, together with Anne Marie Whelan, made revisions to limit the agenda for the meeting of SPEP coordinators held on June 23, 2005 in Saskatoon to focus only on programs, preceptors and training sites.

The intent of the June 23 meeting was to provide an opportunity for SPEP coordinators in Canadian Pharmacy Faculties to work as a group towards developing an action plan to deal with the recommendations outlined in the SPEP Task Force Report of 2004. From the feedback of the participants, the meeting in Saskatoon was regarded to be an outstanding success. Ingrid did note however, that this meeting was only a beginning and a second meeting was likely before a detailed action plan is complete. The second meeting would deal with standardized curriculum, preceptor recruitment, promotion and networking.

Council asked Ingrid and Anne Marie to summarize the meeting and outline general goals reached for the 3 group areas. Council also approved Ingrid's request that Rosemin Kassam at UBC be asked to co-chair with Ingrid the special interest group on SPEP, an outcome of dealing with the SPEP Task Force Committee report. Ingrid also suggested that a student be recruited to help with the project. Council agreed that Ingrid should submit a proposal for funding to Frank. AFPC will seek funding for the second meeting of the coordinators that is most likely to occur in the Fall. Frank is to inform stakeholders, in particular CACDS, on the progress of the SPEP task force committee. Sylvie thanked Ingrid and Anne Marie for their exceptional work of organizing and facilitating the Saskatoon meeting of the SPEP coordinators and for presenting a verbal report to Council.

- 4.4 Strategic Plan Initiatives: Roy Dobson/Sylvie Marleau. Roy presented a draft version of the AFPC Mission Statement. Following discussion of the document it was decided to deal with word changes at the New Council meeting on June 26. Sylvie presented the strategic planning committee report that outlined approaches taken by Council to elevate the profile of AFPC with academics and pharmacy stakeholder organizations. The report made reference to several initiatives that could be regarded as AFPC successes – Annual Conference, Awards Program, French version of the web site, educational outcomes for the entry-level Pharm D degree, and the SPEP Task Force Report were listed. Moved/seconded by Sylvie/Zubin that the report be approved for acceptance – carried.

**12:00 Noon to 1:30 PM: Working Lunch:** A meeting was held with Adam Somers (Dalhousie), President of CAPSI (Canadian Association of Pharmacy Students and Interns): President Sylvie welcomed Adam to the Council Meeting and opened the session by providing some background of recent AFPC activities such as the SPEP study and the development of educational outcomes for the entry-level Pharm D. She stated that the visibility of these AFPC

projects was lacking and there was a need to better communicate our work to other pharmacy organizations. Several agenda items for this meeting had been proposed and Adam was invited to speak on CAPSI and issues that would be of interest to AFPC. Adam stated that the CAPSI organization had grown to approximately 3500 in membership.

The board of CAPSI had proposed the scheduling of the Professional Development Weekend and the conflict this had for students in SPEP assignments. Adam reaffirmed that the January time frame is still the best option and alternatives to the timing of PDW were more costly. Montreal is the location of PDW for this year, but each Faculty will get an opportunity to host the event. Sharon spoke about the module approach to curriculum delivery and the problem this brings with students attending PDW. Adam replied that only a Wednesday, Thursday, and Friday were required for the PDW Conference so that should not be too significant a problem. Students benefit immensely from the experience of PDW and some loss of curriculum was not considered to be an overwhelming concern. Mike spoke of the issue of professionalism and the apparent failure to uphold professionalism by some of the attendees of PDW. Adam replied that there was a perception of PDW as being a party time but the conference programs being offered were very strong.

Adam raised the issue of admission requirements of the Faculties. Letters of intent, PCAT, and interviews, etc. differ across the Faculties. Students are concerned about having to meet different activities and requirements depending on the university. From the student's point of view, interviews appear to be the main issue and should be a part of all entrance requirements. Zubin suggested that AFPC could look into the possibility of harmonizing entrance requirements and this could be an item for the New Council meeting. On the issue of professionalism: Could this be a topic of joint interest to the two organizations. How might we counter some of the evidence that appears to imply less professionalism in pharmacy students today. Adam thought that there was an unpublished paper on this from CAPSI and he would look into this. Lalitha recommended that faculty work in partnership with CAPSI on the issue of professionalism.

Adam stated that the recently introduced "White Coat Ceremony" at some of the Faculties is very well perceived and hopes that all the Faculties will soon have this event. On the issue of tuition, Adam felt that this was becoming more and more important. There is an awareness that diversity of the professional program is causing some of the tuition increases to occur, but groups in the minority need help. On SPEP issues, Ingrid spoke briefly to this and gave some background of recent developments undertaken by AFPC such as forming the special interest group in SPEP. What was missing was the student perspective and she extended the invitation for CAPSI to be a participant – probably to attend meetings twice per year.

Adam spoke to CAPSI thoughts of having an exchange program among their members within Canada, however the different rotations within the Faculties do not lend themselves to be part of the exchange experience. On interprofessional education, Adam said that CAPSI endorses this fully and referred to the HSSA being a national participant in the New Health Initiatives Association. Increased class sizes have, so far, had no significant impact on students. The entry-level Pharm D is a major issue for students, at least CAPSI members. CAPSI had earlier presented a position paper on the entry-level Pharm D degree that was highly negative and according to Adam this still appears to be the case. Communication between the two organizations was discussed. CAPSI will send position papers to AFPC for comment.

1:30 PM – Session resumed:

## 5. Committee Reports

- 5.1 Awards Committee: Lili Wang presented the report and noted that except for the Merck Frosst Fellowship Award, the University of Toronto had won all of the major awards. Lili congratulated the award recipients and thanked all the reviewers who had been so vital in declaring the winners. The Committee had worked on revisions to the handbook in the following areas: For the Apotex Undergraduate Pharmacy Practice Research Awards, Faculties were permitted to submit up to two eligible candidates in a prioritized fashion. The description of the Merck Frosst Canada Inc. Graduate Pharmacy Fellowship Award was significantly revised to clarify that there would be only one National award for 2005 and in subsequent years. New guidelines regarding eligibility of candidates were also described. Faculties can now nominate two candidates for the Merck Frosst Fellowship. Lili also made reference to the new Pfizer Award that would need Council approval prior to presenting the award for the first time. The proposed rxBriefcase award needed further work before approval could be considered. The loss of the Apotex Undergraduate Pharmacy Practice Research Awards was confirmed and this award should be removed from the awards book. Lili moved acceptance of the report.

In the discussion that followed Mike brought up the ‘marks only’ issue of the Merck Frosst Graduate Pharmacy Fellowship Award. He felt that the number of publications should be given consideration in addition to marks and the Awards Committee should take this into consideration for the future.

Discussion of the proposal from rxBriefCase for a student award raised the following points: This appeared to be an odd award for a student and perhaps too big a task for an undergraduate pharmacy student to meet. Some felt that the award was aimed at a graduate student or faculty level. English only was a problem. Was this award a one time or a recurring award? Many felt that candidates for this award should work to generate an online course in collaboration with a faculty member who could provide quality assurance. Frank was to take these points up with rxBriefCase.

Moved/seconded by Roy that the Pfizer Award be approved – carried.

Council approved the report for acceptance. Because this was Lili’s last meeting as a councilor, Sylvie warmly thanked Lili for her time on Council and for the excellent work as chair of the Awards Committee.

- 5.2 Bylaws Committee: Susan Mansour presented a brief report to explain that because of new policies and guidelines from Industry Canada, additional information was required to accept last year’s bylaw changes. Advice is currently being sought and Sylvie, who now inherits this task may need help from Susan to complete the bylaws revisions.

Moved/seconded by Susan/Zubin for acceptance - carried.

- 5.3 Communications Committee: Sylvie Marleau reported on behalf of Committee Chair Jean Lefebvre. Sylvie announced that the new French version of the WEB SITE was up and active. This was exciting news to all. While there are still documents to be translated into French, the work completed to date is an excellent start to this project, one that the

Communications Committee could be proud of. Costs for the translation were reasonable for the amount of work done. Sylvie stated that chairperson, Jean Lefebvre, put many hours into the project in addition to the writer. Frank presented some AFPC Web Site Statistics from Felicia Lo of Planetfish design. For the months of March – June of 2005, there were 11, 347 unique visitors up from 6,964 for the same period of last year. The average was 114 visitors per day almost double that of last year. Most users are accessing the AFPC web site for conference information with many users downloading the PDFs of the full conference proceedings of past year's conferences. Frank presented a request from the University of Manitoba to publish in our newsletter the winner of the Bristol-Myers Squibb Award for Excellence in Teaching in the Faculty of Pharmacy. Rebecca Law, editor of the newsletter, said that BMS had paid for this publicity when the Newsletter was in hard copy but she is comfortable about including the teaching award information into the section reserved for Faculty information.

- 5.4 Conference Planning Committee 2005. Saskatoon Conference Chair, Roy Dobson, said that attendance had picked up as we got closer to the conference date and sponsorship had been very good. A reasonable conference surplus is anticipated. The bush party was intended to be a surprise. Posters can be put up as soon as the banquet hall is available. A request was made for council members to act as judges for the Canadian Foundation of Pharmacy poster presenters. Mike, Ingrid, Daniel and Lili agreed to perform the judging.
- 5.5 Conference Planning Committee 2006. Edmonton Conference Chair, Sharon Mitchell, spoke to her report. The theme of the Conference will be advancing the profession. The AFPC Conference Hotel is the Fairmont MacDonald where the opening dinner and teacher's conference will be held on June 2 and 3, 2006. On Sunday, June 4, AFPC will meet jointly with CPhA for sessions that will focus on pharmacy practice research. The Sunday sessions will be in the Conference Centre. Poster presentations will also occur on the Sunday and will be combined with CPhA posters. School posters are included. The scheduling of the Awards Banquet and the New Council Meeting are yet to be decided. Sharon is going to make available a description of pre- and post conference activities in the mountains and the area around Edmonton that may attract registrants. Frank is to post the details along with the Conference information. Anne Marie suggested that we post a link to Alberta Tourism that would provide more information.
- 5.6 Education Committee: Ingrid Price spoke to her report and asked if she and her committee could focus on SPEP activities over the next year. This request was to be dealt with by the New Council. In a follow up to the Task Force report on Experiential Education, feedback on the report was obtained from pharmacy faculties and stakeholder organizations. Anne Marie took on the large task of collating this information and this has been appended to the Education Committee report.

Moved/seconded by Ingrid/Anne Marie that the report be approved for acceptance – carried.

- 5.7 Nominating Committee: Susan Mansour thanked her committee for their help and input. She was pleased to report that Anne Marie Whelan had agreed to stand for president elect. The announcement was greeted with applause all around. The slate of candidates for the following positions was presented.  
President: Zubin Austin (University of Toronto)

President elect: Anne Marie Whelan (Dalhousie University)

New Council Members 2005-2008:

Memorial – John Hawboldt

Laval – Jean Lefebvre – second term

Toronto – Lalitha Raman-Wilms

Daniel Thirion from the Université de Montréal was recognized for completing the term of Chantal Pharand. Mary MacCara (Dalhousie University) would join the Council as a replacement for Anne Marie Whelan.

Moved/seconded by Susan/Sharon that acceptance of the report be approved – carried.

#### 5.8 Planning and Finance Committee

Frank presented the Audited Financial Statements for 2004 as prepared by Wolrige Mahon in Vancouver, the new auditor for AFPC. The excess of revenue over expenses was largely due to our meeting income projections from the annual conference. Travel expenses for the Executive were up a bit, although each of the meetings attended were important to making AFPC known and raising the profile of the organization. President's travel to the ADPC annual meeting is now entrenched in the budget. Long term investments are about \$ 133,500. Combined with a cash balance we now have a reserve suitable for a Not-for-Profit Organization.

Moved/seconded by Roy/Sharon that the audited statement be approved for acceptance – carried.

2005 Budget: Roy Dobson presented. The 2005 budget was based largely on the business plan included in the AFPC strategic plan with revisions incorporated after the midyear meeting in February of 2005. Frank confirmed that the response for affiliate membership from the pharmaceutical companies is down. The major chain drug stores were canvassed for affiliate membership but disappointingly, none have responded as requested. Lalitha suggested that we sell the benefits of SPEP to the chains as a way of encouraging affiliate membership. Mike suggested that we encourage setting up chain-sponsored awards. Zubin and Frank are to look into ways of increasing sponsorship of AFPC. Income will increase next year because of the addition of the new School of Pharmacy at the University of Waterloo. Web site costs will increase because of the French language version that will need to be upgraded. We have a projected deficit of close to \$ 5,000 that was anticipated by the business plan.

Moved/seconded by Roy/Lalitha that the budget be approved for acceptance – carried.

- 5.9 Research Committee: Mike Namaka presented his report. The goal of acquiring up to date information on grant funding for research activities and the numbers of graduate students at each of the Faculties continues. Manitoba has recently produced a reference template that Frank is to distribute to each of the Faculties for response. This information will be an integral part of the database information to be included on the AFPC WEB SITE. The research committee also keeps track of the numbers and categories of the abstracts presented each year. The information for 2003-2005 is to be posted on the web site as a resource to future abstract presenters. In the discussion that followed, concern was expressed for the drop in poster numbers but an applicable solution was not apparent.

Moved/seconded by Mike/Anne Marie that the research report be accepted – carried.

## 6. Report of Representatives to External Groups

- 6.1 Pharmacy Human Resource Project: Lavern Vercaigne (University of Manitoba and recent past president of AFPC) had forwarded his report to Council to be presented by Frank. The report summarized the recent activities of the management committee with respect to a sector study of pharmacy resources by Human Resources and Skills Development Canada. The sector study is now unlikely to be funded as planned. Two briefing notes are appended to the report to provide some history to the project. In recent developments, CPhA has taken the lead to draft a proposal for a study of pharmacy human resources in Canada to the Foreign Credential Recognition (FCR) program. Lavern has participated in the review of the draft proposal. Because of this change in approach, the budget previously committed to the sector study by AFPC may no longer be required. With the change in the focus of the human resources study, Lavern suggested that a new representative be considered from a Faculty that is directly involved in the training of foreign pharmacists.

Zubin Austin agreed to replace Lavern on the revised project that proposes to obtain funding from the FCR program. Frank is to write to Lavern to thank him for his outstanding service on the human resources project.

Moved/seconded by Zubin/Susan that the human resources report be accepted – carried.

- 6.2 Canadian Pharmacists Association (CPhA) Academic Board Member: Linda Suveges (University of Saskatchewan and CPhA Board member representing academia) provides her reports of Board and CPhA activities that are then published in the AFPC Newsletter. These reports can be accessed at <http://afpc.info/>
- 6.3 Canadian Council for the Accreditation of Pharmacy Programs (CCAPP): Sylvie Marleau presented her report. Sylvie was recently reappointed by AFPC (2005-2008) and is the new president elect of CCAPP. Sylvie is also the current chair of the CCAPP standards and guidelines committee. A workshop of this committee is to be held in the fall to pursue the development of the entry-level Pharm D degree standards. Revisions to the baccalaureate degree standards are now complete and have been ratified at the Annual General Meeting of CCAPP.

Moved/seconded by Sylvie/Zubin that the CCAPP report be accepted – carried.

- 6.4 Pharmacy Examining Board of Canada (PEBC): Linda Suveges (University of Saskatchewan) is the AFPC representative to PEBC and has indicated that a report will be forthcoming.
- 6.5 Canadian Council on Continuing Education in Pharmacy (CCCEP): Yvonne Shevchuk had forwarded her report to the Council and would be presenting the report at the Annual General Meeting. The report described a strategic planning session and thoughts of adopting a specific governance model.

6.6 United States Pharmacopoeia (USP): Colin Briggs (University of Manitoba) served as USP representative from 2000-2005 and was kind enough to submit a final report. Colin recently attended the USP Convention held in Washington DC and gave a summary of the activities. Patient care and safety was a major issue with product quality, reduced medication errors, enhanced compounding standards and a more comprehensive drug information program for improvement under good pharmaceutical care. Colin was to be thanked for his contribution to AFPC by serving so ably on the USP Convention.

6.7 Pharmacy Technician Stakeholder Group: Frank reported that Dean Hindmarsh had requested a report from the Ontario College of Pharmacists.

**7. Executive Director's Report:** Frank Abbott presented the report and congratulated President Sylvie and the Council for the significant progress achieved over the past year, in particular the Clinical Tenure Track document, SPEP activities and the French translation of the web site. Roy Dobson was praised for the exceptional leadership and help with respect to the planning and execution of the Conference in Saskatoon as well as his contribution to the Life Long Learning in Pharmacy Conference. The proposal on palliative and end-of-life care was a new initiative for AFPC to undertake and we should be actively looking for similar projects. There is some concern over the impending loss of awards and a need to strategize on reversing that trend. The Association of Deans of Pharmacy has been active this past year under the capable leadership of Rita Caldwell. The Deans met to strike a strategic plan in the early spring and followed this by hosting a workshop and forum on the Future of Pharmacy Practice and Education in Toronto in April. The session was well attended from a broad cross section of the profession. ADPC was invited to participate in the formation of a Canadian Academy of Health Sciences.

## **8. In Camera Session**

## **9. New Business**

9.1 Future Conferences: Frank reported that he has been in discussions with the Canadian Society for Pharmaceutical Sciences (CSPS) on holding a joint meeting with them in **Montreal in 2007**. The Faculté de Pharmacie Université de Montréal has agreed to be the host Faculty. The time and place of the Conference has yet to be determined. Zubin is to begin talks with the American Association of Colleges of Pharmacy (AACP) on a joint meeting of AFPC/AACP when he attends the AACP meetings in July. Frank is to attend the midyear meeting of AACP to follow up on the discussions. The meeting is scheduled for 2008 in Chicago and will typically be in July. Maintaining the program of AFPC and financial considerations will be on the table for discussion.

## **10. Adjournment at 4:10 PM**

Frank Abbott, recorder.



**AFPC**

Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada

**MINUTES**  
**Annual General Meeting**  
**Delta Bessborough Hotel**  
**Salon Batoche**  
**Saskatoon, SK**  
**Saturday, June 25, 2005**  
**12:00 PM - 1:30 PM**

1. Opening Remarks and Introduction of Council:  
President Sylvie Marleau welcomed attendees to the 62<sup>nd</sup> Annual General Meeting of the Association of Faculties of Pharmacy of Canada. Sylvie introduced the Executive and Council for 2004-2005: President Sylvie Marleau (Montréal), Past President Susan Mansour (Dalhousie), President Elect Zubin Austin (Toronto), Ingrid Price (UBC), Sharon Mitchell (Alberta), Roy Dobson (Saskatchewan), Mike Namaka (Manitoba), Lalitha Raman-Wilms (Toronto), Daniel Thirion (Montréal), Anne Marie Whelan (Dalhousie), Lili Wang (MUN) and Frank Abbott (Executive Director). Regrets: Jean Lefebvre (Laval) and Dean Franco Pasutto (ADPC).
2. Approval of Agenda: Copies of the agenda and reports were available for those in attendance. One addition to the agenda (9.7) was the Pharmacy Technician Report from Dean Wayne Hindmarsh. Moved/seconded by Sylvie Marleau/Roy Dobson that the agenda be approved with the addition of 9.7 – carried.
3. Acceptance of 2004 Annual General Meeting Minutes:  
The minutes of the 2004 Annual General Meeting held Saturday, June 12, 2004 in Vancouver were approved on a motion from Sylvie Marleau and seconded by Yvonne Shevchuk.
4. Conference Committee Announcements:  
Conference chair, Roy Dobson informed the New Council that the meeting on Sunday, June 26 would take place in the Carleton Room of the Bessborough Hotel. Roy also advised attendees that the banquet in the evening was in the Ukrainian Museum of Canada which was a short 15 minute walk from the Hotel.
5. Greetings from the American Association of Colleges of Pharmacy (AACP):  
Diane Beck, President Elect of AACP was attending both the AFPC and Life Long Learning in Pharmacy Conferences in Saskatoon. Diane brought sincere greetings from the Board and Members of AACP for a very successful AFPC Conference and Meetings. She stated that she was excited to be at the AFPC Conference and was learning much from the experience. Many of the problems and issues for our two organizations are similar and she referred to assessment and continuous professional development as examples. The development of the educational outcomes for the entry-level Pharm D degree and the implementation of that degree within schools and faculties of pharmacy is an area that AACP has a great deal of experience and is in a position to help. Diane spoke



highly of the opportunity for Ingrid Price of AFPC to attend the recent AACP Summit on Experiential Learning in Chicago as a prime example of working together on common problems. She stated that learning communities and the early practice experience were issues for emphasis by AACP in the coming year and she would discuss these further with our Council.

6. Memorial to Deceased Members:  
Sylvie called for a moment of silence in memory of Ken Ready (Saskatchewan) a former Executive Director of AFPC.

7. President's Address:  
President elect, Zubin Austin assumed the chair and asked Sylvie Marleau to present the president's report. Sylvie spoke to the team strength of the AFPC Council and Executive and how their successes have been a true reflection of hard work and commitment. Sylvie recognized past president Susan Mansour and Roy Dobson for initiating the strategic planning sessions and how she felt these had been successful and should now be incorporated as an integral part of future meetings. Sylvie stated that part of the strategic plan was to increase exchanges with external groups. AFPC had invited CAPSI (Canadian Association of Pharmacy Students and Interns) to attend this year's annual council meeting and this was a first step towards creating the links that would reinforce the commitment of AFPC to excellence in pharmacy education. Sylvie spoke to the many activities of AFPC committees during the past year and had particular praise for the Communications Committee under chairperson, Jean Lefebvre. The translation into French of the main information on the website will play a key role in raising the profile of AFPC. Challenges to the awards program have arisen with the loss of two of our sponsors. Sylvie urged the recruitment of new sponsors in order for AFPC to continue to recognize excellence in education and research of our faculty and students. She thanked the planning committee for their dedicated efforts towards the Conference and to the sponsors who help make this event a unique opportunity for academics to gather and share their thoughts and experiences. Sylvie pledged support to incoming president, Zubin Austin for the year ahead.

The report of the President was approved on a motion by Sylvie Marleau and seconded by Susan Mansour.

8. AFPC Committee Reports

8.1 Awards Committee Report:

Lili Wang, chair of the awards committee presented her report and summarized the changes in the awards book for 2004-2005. Reviewers for the awards were acknowledged and thanked as were all the candidates that chose to enter the awards competition. Lili referred to the loss of Janssen-Ortho as a sponsor for the Research Career Award in 2005 and that AFPC was delighted that Pfizer Canada Inc. had stepped in to support the award for this year and the future. She also stated that Apotex would no longer sponsor the undergraduate pharmacy practice research awards after 2005. She referred to the list of award winners contained in the report and gave her congratulations. The report of the Awards Committee was approved on a motion by Lili and seconded by Lesley Lavack.

8.2 Bylaws Committee Report:

Past president, Susan Mansour, gave the report stating that no changes are recommended at

the present time because of the need to meet requirements recently set out for Not-for-Profit Organizations by Corporations Canada.

The report of the Bylaws Committee was approved on a motion by Susan and seconded by Mike Namaka.

#### 8.3 Communications Committee Report:

In lieu of a report from the Communications Committee, Sylvie Marleau spoke on behalf of chairperson, Jean Lefebvre, highlighting the introduction of the French version of the main portion of the AFPC web site. This was a significant accomplishment for AFPC and Sylvie thanked Jean for the great deal of work that went into achieving this goal. Rebecca Law (MUN) was confirmed as continuing editor of the Communications Newsletter and Sylvie gave a special thanks to Rebecca for her outstanding service as editor.

#### 8.4 Education Committee Report:

Ingrid Price, chair of the education committee presented her report. Because the report dealt exclusively with activities around SPEP (Structured Practice Experiential Programs) Ingrid stated that she would simultaneously deal with agenda item 8.7 (Task Force on Experiential Education). Ingrid noted the progress made by Anne Marie Whelan to summarize the feed back from Faculties and Stakeholder groups on the Task Force Report. The document will appear in the Proceedings as an appended document to the education report. Ingrid spoke to the organization of pharmacy practice experiential program coordinators that occurred in Saskatoon on June 23 and the AACP Summit meeting on experiential education that she attended in Chicago on June 17-18, 2005. Ingrid spoke highly of the Chicago meeting and stated that she had used some of the material from that meeting to provide the agenda for the meeting in Saskatoon of the SPEP coordinators. Ingrid indicated that she would be preparing a supplementary report that would summarize the activities and outcomes of these two meetings and that this would be provided for information-only.

The report of the education committee was approved on a motion by Ingrid and seconded by Mike Namaka.

#### 8.5 Nominations Committee Report:

Past president, Susan Mansour thanked the members of the Nominating Committee and summarized her report with an excellent slate of candidates for the following positions:

President: Zubin Austin (University of Toronto)

President elect: Anne Marie Whelan (Dalhousie University)

New Council Members 2005-2008:

John Hawboldt, Memorial University of Newfoundland

Jean Lefebvre, Université Laval – second term

Lalitha Raman-Wilms, University of Toronto

The report of the nominations committee was approved on a motion by Susan and seconded by Roy Dobson.

#### 8.6 Research Committee Report:

Mike Namaka presented the research committee report. Work continues on collecting research data from all of the Faculties of Pharmacy that will guide future efforts and goals for

the research committee. A revised template was provided by the University of Manitoba and has been sent out to the other Faculties to complete. Mike thanked council members for their help in the activities of the research committee.

The report of the research committee was approved on a motion by Mike and seconded by Ingrid Price.

8.7 Task Force on Experiential Education:

This topic was covered under point 8.4 – education committee report by Ingrid Price.

8.8 Task Force on Entry-level Pharm.D. Outcomes:

Past President, Susan Mansour, chair of the Task Force Committee on Educational Outcomes for an Entry-Level Doctorate of Pharmacy Graduate in Canada summarized the report. The draft set of outcomes was provided to Council in June of 2004 and was followed by a review in all the Faculties that was sanctioned by the Deans. Feedback was obtained from five of the nine Faculties and a revised document was presented to Council in February of 2005 at the midyear meeting. The major issue preventing endorsement of the document was the lack of levels and ranges that would distinguish the entry-level Pharm D program from that of existing degree programs. The task force had considered the production of levels and ranges too big a task for the committee to undertake. An impasse in approving the outcomes resulted. At the Annual Council Meeting on June 24 in Saskatoon, it was decided that the document be returned to the Faculties for one more review with the understanding that the levels and ranges for the outcomes would be made available at a later date. Final changes made by the task force committee will incorporate valuable feedback and the final document will then be presented to Council for approval. September 30 is the preferred deadline for feedback from the Faculties. Susan thanked and acknowledged the work of the task force members.

The report of the Task Force Committee on Educational Outcomes for an Entry-Level Doctorate of Pharmacy was approved on a motion by Susan and seconded by Roy Dobson.

8.9 Strategic Plan:

President elect Zubin Austin assumed the chair. Sylvie spoke to the report that outlined many of the ongoing projects and new initiatives that the strategic plan intends to increase the awareness of AFPC activities and that of academic pharmacy in Canada. Andrea Cameron asked if the key information will be made available on the web site and Sylvie confirmed that this was a primary goal.

The report of the strategic planning committee was approved on a motion by Sylvie and seconded by Roy Dobson.

9. Reports from Special Committees and Delegates:

9.1 Academic Board Member of the Canadian Pharmacists Association (CPhA):

Linda Suveges (Saskatchewan) is the CPhA board member representing academia. Her board reports appear regularly in the Communications Newsletter throughout the year.

9.2 Appointees to the Canadian Council for Accreditation of Pharmacy Programs (CCAPP):

Sylvie Marleau and Jake Thiessen represent AFPC on the CCAPP board. Sylvie is currently the chair of the CCAPP standards and guidelines committee and is also president elect of CCAPP. Zubin took the chair and asked Sylvie to present the report. Sylvie introduced Dean

Dennis Gorecki, president of CCAPP and Dr. Jim Blackburn, CCAPP Executive Director who were present in the audience. The baccalaureate degree program standards have now been revised, standards will be developed for the entry-level Pharm D degree in the fall, and CCAPP continues to be interested in developing standards for the accreditation of colleges offering formal training programs for pharmacy technicians.

The CCAPP report was approved on a motion by Sylvie and seconded by Bev Allen.

- 9.3 Appointee to the Canadian Council on Continuing Education in Pharmacy (CCCEP): Yvonne Shevchuk (Saskatchewan) was recently appointed to this position by AFPC. In her report Yvonne touched on the planning session that took place on May 27, 2005 and indicated that the finances of the organization are much improved thanks to the volume of programs being accredited. Fred Rémillard noted that AFPC should be having their conference program accredited.

The CCCEP report was approved on a motion by Yvonne and seconded by Sharon Mitchell.

- 9.4 Report of representative to CPhA Pharmacy Human Resources in Canada-Pharmacy Sector Study:  
Zubin Austin presented the report on behalf of Lavern Vercaigne (Manitoba). Lavern provided two briefing notes appended to the report in order to provide some history to the overall project. The sector study is now unlikely to be funded as planned. More recently CPhA has taken the lead to draft a proposal for a study of pharmacy human resources in Canada to the Foreign Credential Recognition (FCR) program. Because of this change, the budget previously committed to the sector study by AFPC may no longer be required. Lavern had also suggested to Council that a new representative be considered from a Faculty that is directly involved in the training of foreign pharmacists. Zubin has agreed to replace Lavern as the representative to this new project once it receives funding. Frank will write to Lavern to thank him for his outstanding service on the human resources project.

The report of the Human Resources in Pharmacy Project was approved on a motion by Zubin and seconded by Lesley Lavack.

- 9.5 Pharmacy Examining Board of Canada (PEBC) Representative:  
Linda Suveges has been asked to provide a report to appear in the Proceedings.
- 9.6 United States Pharmacopeia (USP) Representative:  
Colin Briggs (Manitoba) is completing his 5 year term as representative to USP and provided a report covering the United States Pharmacopeial Convention held in Washington DC in March. For the next five years the USP will focus on good pharmaceutical care by addressing national and international product quality, healthcare delivery and safety and drug information to improve patient therapy and safety.

The report of the USP representative was approved on a motion by Frank and seconded by Roy Dobson. Colin is to be thanked for his outstanding service as the AFPC representative to USP.

- 9.7 Regulation of Pharmacy Technicians:  
Dean Wayne Hindmarsh (Toronto) presented a report that summarized recent activities of the

Ontario College of Pharmacists (OCP) towards the regulation of Pharmacy Technicians. The staff of OCP has initiated discussions with PEBC and CCAPP related to entry to practice examinations and accreditation of pharmacy technician programs. Yvonne Shevchuk asked if the initiatives in the report were specific to Ontario and Wayne replied that they were but could be readily adapted to other provinces.

The Pharmacy Technician report was approved on a motion by Wayne and seconded by Yvonne.

10. Report of the Executive Director:  
Frank Abbott thanked President Sylvie Marleau for her proactive leadership throughout the year and to Roy for his superb direction and assistance with the Conference. The strategic plan appears to be working with AFPC Council having many accomplishments in 2005, the clinical tenure track document, the progress with SPEP and the French version of the web site, to name a few. Challenges remain with our award sponsors and we will need to look for new opportunities. Frank stated that his report was an attempt to describe many of the more significant activities in 2005 and was most thankful to council for their enthusiasm and support in dealing with the issues at hand. ADPC also had a productive year under the leadership of President Rita Caldwell of Dalhousie. A strategic planning session at the midyear meeting led to a Forum and workshop on the future of pharmacy practice and education that received excellent response from stakeholders. ADPC had also participated in setting up the Canadian Academy of Health Sciences.

The executive director's report was approved on a motion by Frank and seconded by Zubin Austin.

11. Audited 2004 Financial Statements and Budget for 2005:  
Roy Dobson summarized the report of the auditor and the AFPC budget for 2005. The 2005 budget is the first to be based on the business plan created and approved in 2004. Some adjustment was made to the anticipated revenues to be consistent with the current situation regarding affiliate and associate memberships. Roy called for questions on either the auditor's report or the 2005 budget.

The motion to approve the AFPC audited financial statement for 2004 was passed on a motion by Roy and seconded by Bev Allen.

The motion to approve the AFPC budget for 2005 was passed on a motion by Roy and seconded by Bev Allen.

12. Appointment of Auditor:  
Roy Dobson moved to appoint chartered accountants Wolrige Mahon of Vancouver as the AFPC auditor for 2005. Seconded by Ingrid Price. The motion carried.
13. New Business:  
Sharon Mitchell indicated that she would make a presentation regarding the 2006 AFPC Conference in Edmonton at the morning session on Sunday June 26, 2005.
14. Transfer of Presidency:

Outgoing president Sylvie Marleau welcomed Zubin Austin to the chair with the traditional passing of the gavel. Zubin thanked Sylvie for her outstanding leadership during the year and pledged to maintain the progress that AFPC has achieved from its strategic planning process. Zubin stated that he was looking forward to working as President with such an enthusiastic council and executive director.

15. Confirmation of Signing Authority:  
The motion to approve Zubin Austin and Frank Abbott as signing authorities for the 2005-2006 year was made by Sylvie Marleau and seconded by Susan Mansour.

16. Adjournment 1:45

## AFPC Annual General Meeting, Saskatoon, Saskatchewan, June 25, 2005

### List of Attendees (Original with signatures on file)

<u>Name:</u>	<u>Affiliation (Faculty/University)</u>
Frank Abbott	AFPC
Lili Wang	Memorial University
Ingrid Price	University of British Columbia
Sylvie Marleau	Université de Montréal
Zubin Austin	University of Toronto
Mike Namaka	University of Manitoba
Susan Mansour	Dalhousie University
Fred Remillard	University of Saskatchewan
Anne Marie Whelan	Dalhousie University
Harriet Davies	Dalhousie University
Roy Dobson	University of Saskatchewan
Sharon Mitchell	University of Alberta
Mary MacCara	Dalhousie University
Rosemin Kassam	University of British Columbia
Diane Beck	AACP/University of Florida
Cheryl Cox	University of Alberta
Cheryl Wiens	University of Alberta
Ken Zakariasen	University of Alberta
Lesley Lavack	University of Toronto
Marguerite Yee	University of British Columbia
Reem Elbekai	University of Alberta
Maryvonne le Saux	Laval Université
Vessela Vassileva	University of Toronto
Shirley Teng	University of Toronto
Sheryl Zelenitsky	University of Manitoba
Xia Wang	University of Saskatchewan
Andrea Cameron	University of Toronto
Dawna Hawrysh	University of Saskatchewan
B.E. (Bev) Allen	University of Saskatchewan
Jeff Taylor	University of Saskatchewan
Lalitha Raman-Wilms	University of Toronto
Yvonne Shevchuk	University of Saskatchewan
Daniel Thirion	Université de Montréal



**MINUTES**  
**AFPC NEW COUNCIL MEETING**  
**DELTA BESSBOROUGH HOTEL, SASKATOON**  
**CARLTON BOARDROOM**  
**SUNDAY, JUNE 26, 2005**

1:00 PM      Working lunch

1.      Opening Remarks:  
President Zubin Austin welcomed everyone to the meeting and stated that there was plenty of work ahead with many jobs carried over from the previous year and new tasks to initiate.
  
2.      Roll Call and Approval of the Agenda:  
The following executive and council members were present and accounted for: Zubin Austin (President), Sylvie Marleau (Past President), Anne Marie Whelan (President Elect), Ingrid Price (UBC), Sharon Mitchell (AB), Roy Dobson (Sask), Mike Namaka (Man), Lalitha Raman-Wilms (Toronto), Daniel Thirion (Montréal), Mary MacCara (Dalhousie), John Hawboldt (MUN), and Frank Abbott (Executive Director). Absent: Jean Lefebvre (Laval) and Dean Franco Pasutto (ADPC).  
Diane Beck (AACP) was welcomed to the council meeting and Mary MacCara and John Hawboldt were acknowledged for their first meeting of AFPC Council.
  
3.      Appointments and Charges to Committees:
  - 3.1      Awards Committee:  
Having chaired this committee in the past, Sylvie Marleau spoke to the tasks that were required of the chairperson. Sylvie committed to handle the French version of any award changes or new awards. Frank Abbott said that we needed councilors to be active in recruiting good candidates for the awards. This year we had two awards with only a single candidate. Roy Dobson committed to chair this committee during 2005-2006. Mike Namaka and Sylvie Marleau will also serve on this committee. Frank brought up the proposal from Sylvie that AFPC create a new poster award and approval was obtained to craft the content of this award for circulation to Council. Anne Marie Whelan said that the review process would benefit from a numeric value assigned to the criteria used in the review. The Merck Frosst Fellowship Award was to be revised to include publications as part of the selection criteria for the award.
  
  - 3.2      Bylaws Committee:  
Past president Sylvie Marleau is to serve as the chairperson in 2005-06 with Susan Mansour and Frank Abbott retained on the committee for continuity. The use of electronic meetings must meet the approval and standards of Corporations Canada.
  
  - 3.3      Communications Committee:  
Sylvie reported that Jean Lefebvre asked to be relieved of the chairperson task for the coming



year but that he will continue to work on the French translation of the web site material. John Hawboldt and Lalitha Raman-Wilms will serve on this committee to assist Sylvie. Sylvie offered to work on creating a data base of information and access to faculty skills and expertise that would appear on the AFPC web site. Frank is to consult with the web master to determine a mechanism to facilitate this task. Sylvie was given approval to hire and supervise a summer student to work on the data base project. John was given the task of reviewing the Web Site material for purposes of updating. Rebecca Law (Memorial University of Newfoundland) has agreed to continue as the editor of the Communications Newsletter.

#### 3.4 Conference Planning Committee:

Sharon Mitchell was thanked for the progress already made on hosting the 2006 conference in Edmonton. The Montréal site for the 2007 conference was discussed for the end of May or early June. This timing for the Montréal conference raised potential conflicts with individuals participating in the PEBC OSCEs. The 2<sup>nd</sup> week in June of 2007 was therefore considered to be the best choice. Daniel Thirion agreed to chair the Montréal Conference Planning Committee. Zubin Austin is to meet with Diane Beck and Lucinda Maine at the AACP meeting in Cincinnati in July to begin discussions on a joint meeting for 2008.

#### 3.5 Education Committee:

Ingrid Price agreed to continue as chair of the education committee with the assistance of Anne Marie, Lalitha, Sharon and Dan. While the immediate focus of the education committee will be the SPEP project, other members were welcome to contribute to important educational issues such as linking people in academia and raising funds for a scholarship in education. Sharon spoke about the case-posting project and the general sharing of educational resources across Faculties. Zubin suggested that we discuss this at the midyear. Diane Beck offered Sue Myer at AACP as a potential good resource person to help with some of the educational projects. Ingrid was to organize a fall meeting of SPEP coordinators to finalize the action on the report of the Task Force on Experiential Education. Terms of reference for the SPEP special interest group and an action plan for the group was anticipated for the midyear meeting of AFPC in 2006.

#### 3.6 Executive Committee:

Zubin Austin (President), Sylvie Marleau (Past President), Anne Marie Whelan (President Elect), Dean Franco Pasutto, and executive director Frank Abbott will make up the executive committee. The executive committee was to develop a strategy for approaching the members of CACDS to take out affiliate membership in AFPC. The new School of Pharmacy at the University of Waterloo needs to be recruited into the ranks of AFPC. A meeting with AACP to develop a plan for a joint meeting in 2008 is a priority. The portfolio of AFPC successes was assigned to the communications committee.

#### 3.7 Nominating Committee:

Past President Sylvie is to head up this committee in order to identify a new president-elect and to facilitate the renewal or replacement of council members whose terms are expiring in 2006. Sylvie is to select other faculty to serve on the nominating committee.

#### 3.8 Planning and Finance Committee:

Roy Dobson is to continue as chair and John Hawboldt and Mary MacCara will assist. President Zubin and past president Sylvie are also members of this committee. Tasks for 2005-2006 include following up on strategies contained in the business plan. It was proposed

that the international pharmacy graduate programs within Faculties of Pharmacy be considered for affiliate membership.

3.9 Research Committee:

Sylvie offered to work with chair Mike Namaka in order to collate the information collected by the research committee into a useful format that can be accessed on the Web Site. A potential new mandate for this committee was proposed and needs to be discussed with the chair of the committee. The task is to identify grant funding opportunities for AFPC to take on projects of value to academia and to find writers who would be involved in the writing of the proposals.

3.10 Strategic Planning Committee: The committee will consist of Roy and Sylvie as continuing members with the addition of new councilors John and Mary. Roy spoke of the potential to create an orientation manual for new council members and for new AFPC members. The AFPC mission statement and the goals and objectives of the organization need to be finalized for approval at the midyear meeting in 2006. Ingrid and Roy are to facilitate a strategic planning afternoon at the midyear meeting.

3.11 Task Force on Experiential Education:

The Task Force Committee on Experiential Education can now be dissolved given that the report of the committee has become an integral matter for the education committee. Ingrid Price, chair of the education committee said that the report of the task force should now be published on the Web Site after being tidied up, adding feedback on the report as an appendix, and accompanying the report with an explanation of the current status.

4. Confirmation of AFPC Representatives, Delegates and Council Member Assignments:

4.1 Association of Deans of Pharmacy of Canada (ADPC) Representative:

Frank is to write to ADPC President Rita Caldwell to confirm the Dean's representative to AFPC. A decision will likely be made at the annual Deans Meeting in October.

4.2 Canadian Council for Accreditation of Pharmacy Programs (CCAPP):

Sylvie will continue as the representative to CCAPP to provide valuable input with respect to the development of standards for the Entry-level Pharm D program.

4.3 Task Force on Educational outcomes for the Entry-level Pharm. D.:

Susan Mansour has graciously accepted to continue as chair of this task force. There is an immediate need to have approval of the educational outcomes by all of the Faculties on the condition that levels and ranges for the Entry-level Pharm D will be provided at a later date.

4.4 CPhA Human Resources Project Planning Committee:

Zubin confirmed that he would be the AFPC representative to the Pharmacy Human Resources Study that is being spearheaded by CPhA. Former representative Lavern Vercaigne is to be officially thanked for his valuable service to this project. Janet Cooper of CPhA is to be informed of our new representative, Zubin Austin.

4.5 Canadian Council for Continuing Education in Pharmacy (CCCEP):

Yvonne Shevchuk (Saskatchewan) will continue as our representative to CCCEP.

- 4.6 Communications Editor:  
Rebecca Law has agreed to continue as the editor of the newsletter. It was felt that we should use the newsletter more effectively to portray AFPC Award winners.
- 4.7 Pharmacy Examining Board of Canada (PEBC):  
Linda Suveges (Saskatchewan) and Louise Mallet (Montréal) will be our representatives.
- 4.8 Representative to United States Pharmacopoeia (USP):  
Raimar Löbenberg (Alberta) will commence a five year term as AFPC representative to the USP.
- 4.9 Other Appointments:  
President Zubin proposed that each year AFPC should focus on a position paper with a view to publishing said paper. Having made significant progress on the Clinical Tenure and Promotion project, Zubin suggested that a paper on how to develop interprofessional education (IPE) might be an appropriate subject for a paper. IPE has plenty of relevance to promotion and tenure for all faculty members and is certainly a hot topic. After further discussion it was agreed that Zubin and Lalitha would head up the project and that Council members make IPE a priority objective. Two posters on IPE that were presented at the Saskatoon Conference were to be sent to Frank for posting on the web site. Anne Marie is to work on the next topic for a position paper to be discussed at the midyear meeting in February 2006.

Mike Namaka raised the possibility of letters of acknowledgement for AFPC Council activities be sent to council members so that they might include this letter in promotion and tenure documentation. President Zubin agreed to write the letters and work with Frank to see that they were made available this year.

5. Business arising from June 24, 2005 Annual Council Meeting:  
It was concluded that items falling under new business had already been dealt with.
6. New Business:
- 6.1 Date and Time for Mid-year Meeting:  
Frank suggested that the likely time for the meeting will occur just prior to the CACDS and ADPC meetings in Toronto. The dates are Saturday and Sunday, February 4 and 5, 2006. The format for that meeting is still to be decided.
- 6.2 Confirmation of Date and Time for 2006 Annual Conference and Meetings:  
Edmonton, June 2-4, 2006. CPhA is to meet in Edmonton at the same time. AFPC and CPhA will meet jointly on Sunday, June 4 for posters and a pharmacy practice research symposium.  
Council responsibilities:        June 2, Annual Council Meeting  
   June 3, Annual General Meeting  
   June 4, New Council Meeting
- 6.3 Confirmation of Date and Time for 2007 Annual Conference and Meetings:  
Montréal has been chosen as the site to correspond with the annual CSPA meeting. Hotel and exact dates in June 2007 have yet to be determined.

7. Strategic Planning Session – charges to committees:  
The pertinent material corresponding to committee activities, has been incorporated in the appropriate sections in the minutes above.
8. Adjournment:

Frank Abbott, PhD  
Recorder

# **PART 3.0**

## **REPORTS OF AFPC STANDING COMMITTEES, REPRESENTATIVES AND DELEGATES**

**2005**

## **AFPC President's Report 2005 Annual General Meeting**

*"What we do today, right now, will have an accumulated effect on all our tomorrows."* -  
Alexandra Stoddard

I agree with this contemporary philosopher and writer that the present is the gauge for future success. I believe that AFPC has a strong team and exceptional leadership provided by its Executive Director, Dr. Frank Abbott and that the future will reflect the hard work and commitment of the councilors.

AFPC is devoted to Pharmacy Education, and undertakes projects to facilitate, support and recognize the work of the Deans and Faculties, Colleges and Schools of Pharmacy in Canada.

To accomplish its mission, AFPC has adopted a strategic plan proposed by the former President Susan Mansour. Roy Dobson, Chair of the Strategic and Planning Committee, volunteered to facilitate reflection sessions on strategic planning and revision of our vision, mission and goals to better define our activities. These sessions have been very successful and will hopefully become an integral part of our future meetings.

In order to achieve a key objective of our strategic plan to raise the visibility of AFPC, we have proposed to increase our exchanges with different academic groups. For instance, we have invited CAPSI to our annual meeting and we hope to create links that will reinforce our commitment towards excellence in Pharmacy Education.

Our aim to support and foster excellence in Pharmacy Education, scholarly activities and research will also be supported by a number of projects that have been undertaken by AFPC committees and task forces. Among these is the development of a template to identify commonalities among Faculties in research (Mike Namaka and the Research Committee) and education (Sharon Mitchell). Susan Mansour also chaired a task force for the development of Educational Outcomes for an Entry-level Pharm D. Zubin Austin also worked with Faculties to write a paper on the promotion and tenure of clinical faculty across Canadian Faculties of Pharmacy. Ingrid Price and the Education Committee have worked on the SPEP report and have organized a meeting where practice experience coordinators will study the possibility of implementing some of the report's recommendations.

The Communication Committee with Jean Lefebvre has also been active and worked towards translating into French the main information on the website, which we believe will play a key role in raising the profile of AFPC.

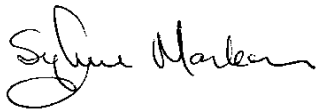
The Awards Committee, chaired by Lili Wang, has been challenged by the loss of two sponsors over the past year and has been active in recruiting new sponsors to maintain the

recognition of excellence in education and research, as well as the training of highly meritorious students in quality academic settings.

Many AFPC efforts are dedicated to organizing the annual AFPC conference. I am indebted to Roy Dobson, Frank Abbott, the local team and the sponsors for providing this unique event where academic professors, lecturers, and practice experience coordinators are invited to meet with pharmacists of all horizons to share and learn about pharmacy education and pharmacy practice research.

It has been a pleasure and an honor for me to serve AFPC. I thank all the councilors for their assistance, efforts, and friendship. I wish every success to the new President Zubin Austin. I will continue to support Zubin and the Executive Director the best way that I can.

Respectfully submitted,

A handwritten signature in cursive script that reads "Sylvie Marleau".

Sylvie Marleau, Ph.D  
President AFPC (2004-2005)

# AFPC Awards Committee Report

## Saskatoon, June 2005

I wish to take this opportunity to express my sincere appreciation to Dr. Frank Abbott, Executive Director, Dr. Sylvie Marleau, President, and everyone on the council for their help with respect to the work of Awards Committee. Below is a summary of the activities of the Awards Committee in the year of 2004-2005.

- Revision of awards booklet
  - The Awards Book has been updated according to comments received at last year's council meeting with approval of the award sponsors. Major changes are as follows:
    - Apotex Undergraduate Pharmacy Practice Research Awards.  
Faculties were urged to submit the names and projects of up to two eligible candidates in a prioritized fashion. Rationale: Apotex Inc. sponsors AFPC with \$45,000 each year to provide each of the nine Faculties with one \$5,000 Pharmacy Practice Research Award. In recent years, one or more of the Faculties have had difficulty in finding a suitable candidate and/or preceptor for the award.
    - Merck Frosst Canada Inc. Graduate Pharmacy Fellowship Award.  
Only one national award of \$ 15,000 was available for 2005 and the James E Frosst and Julien Braun designations were therefore removed from the award description. Recipients of the Merck Frosst award may also hold another graduate award as long as the total of the awards does not exceed \$30,000 annually. Recipients of the Merck Frosst award may reapply in the competition but are eligible for one additional year only. To increase the applicant pool, each Faculty can now nominate two candidates for the postgraduate fellowship award instead of just one.
- Selection of award recipients
  - Congratulations to the following individuals for being recognized for their excellent work.
    - AFPC/GlaxoSmithKline Graduate Student Research Award  
**Ms. Shirley Teng** (Supervised by Dr. Micheline Piquette-Miller), University of Toronto
    - AFPC-Merck-Frosst Postgraduate Fellowship Award  
**Ms. Charity Evans**, University of Saskatchewan
    - AFPC/Bristol-Myers Squibb National Award for Excellence in Education:  
**Ms. Andrea Cameron, Ms. Lesley Lavack and the SPEP program**, University of Toronto
    - AFPC/AstraZeneca New Investigator Research Award:  
**Dr. Heather Boon**, University of Toronto
    - AFPC/Pfizer Research Career Award  
**Dr. Raymond Reilly**, University of Toronto
    - AFPC/APOTEX undergraduate pharmacy practice research awards for 2005 selected by individual faculties are attached in Appendix I for information.
    - Canadian foundation for pharmacy research poster awards for 2005 chosen by respective faculties are attached in Appendix II for information.

The Committee would like to express its sincere appreciation to the many reviewers (see Appendix III) for their time and input.



- Changes to the awards program
  - AFPC-Pfizer Award

An agreement has been reached with Pfizer Canada Inc. to sponsor the new AFPC-Pfizer Award. The description of the new AFPC-Pfizer Award is provided in Appendix IV, thanks to Sylvie Marleau for the translations to French. Dr. Raymond Reilly chosen for the former Janssen-Ortho Award for 2005 award is to receive the award at the June meeting in Saskatoon on June 25, 2005. It is recommended that this change be incorporated in the Awards Book.
  - AFPC-RxBriefCase

Cynthia Hastings-James, Vice-President, Business Development, of mdBriefCase, proposed/offered a new award (see Appendix V for information) that requires council to discuss and approve.
  - AFPC-Apotex Undergraduate Pharmacy Research Awards

Earlier this year, we were notified by Apotex Inc. that these awards are to cut off in 2006 because of budget restraints. Despite the effort of Dr. Frank Abbott, unfortunately there will be no further Apotex Award of any kind for the foreseeable future. There are no funds for even a scaled down version of this award. Therefore it is recommended that the Apotex award be removed from the Awards Booklet.

Respectfully submitted,

Lili Wang, Chair  
Awards Committee

## Appendix I

### AFPC/APOTEX UNDERGRADUATE PHARMACY PRACTICE RESEARCH AWARDS FOR 2005

#### **Memorial University of Newfoundland**

Student Recipient: Mr. Justin Peddle ([jpeddle@pharm.mun.ca](mailto:jpeddle@pharm.mun.ca))  
Faculty supervisor: Director Linda Hensman  
Preceptor: Dr. Leslie Phillips, Early Psychosis Program at Waterford Hospital.  
Project title: Evaluate literature on medication adherence/attitudes in individuals with psychotic disorders.

#### **Dalhousie University**

Student Recipient: Rebecca Hiltz ([rlhiltz@dal.ca](mailto:rlhiltz@dal.ca))  
Faculty Supervisor: Dr. Danette Beechinor  
Preceptor: Penny Degarno  
Project Title: A retrospective review of stroke prophylaxis strategies and adherence to guidelines in patients with atrial fibrillation.

#### **Université Laval**

Student Recipient: Michelle Bernard-Genest ([michelle.bernard-genest.1@ulaval.ca](mailto:michelle.bernard-genest.1@ulaval.ca))  
Faculty Supervisor: Jean Lefebvre, Professor  
Preceptor: Sébastien Perreault, Clinical Professor, CHUQ  
**Project Title: Évaluation des déterminants de la réponse à la warfarine prescrite dans le cadre d'un programme clinique d'anticoagulothérapie.**

#### **Université de Montréal**

Student Recipient: Jérémie Lupien ([jeremie.lupien@umontreal.ca](mailto:jeremie.lupien@umontreal.ca))  
Faculty Supervisor: Daniel J.G. Thirion, Pharm.D. professeur adjoint de clinique  
Preceptor: Isabelle Boulanger, pharmacist at Hopital du Sacré-Coeur de Montréal  
Project Title: Projet-pilote de développement d'un outil de pharmacovigilance des antibiotiques dans un centre hospitalier universitaire de trauma.

#### **Leslie Dan Faculty of Pharmacy, University of Toronto**

Student Recipient: Michael Ibrahim ([michael.ibrahim@utoronto.ca](mailto:michael.ibrahim@utoronto.ca))  
Faculty Advisor: Micheline Piquette-Miller, Co-supervisor; Dr. Gideon Koren, Director Motherrisk Program  
Preceptor: Anna Taddio, BScPhM, MSc, PhD,  
Department of Pharmacy  
The Hospital for Sick Children  
Project Title: Incidence of bacterial infection and drug therapies in HIV-infected pregnant women and the potential impact of infection on transplacental drug transport.

#### **University of Saskatchewan**

Student Recipient: Sherilyn Chorney ([sherilyn@canada.com](mailto:sherilyn@canada.com))  
Faculty Supervisor: Jeff Taylor  
Preceptor: Ms. Michelle Deschamps  
Project Title: Pharmacist confidence in meeting standards of practice for patient counseling.

**University of British Columbia**

Student Recipient: Zhongyu (Anna) Liu ([zhliu@interchange.ubc.ca](mailto:zhliu@interchange.ubc.ca)) .

Faculty Advisor: Kerry Wilbur

Preceptor: Roger Wong, Clinical Assistant Professor, Division of Geriatric Medicine,  
UBC

Project Title: Medication Assessment of Geriatric Inpatients by Clinical Pharmacists  
(MAGIC)

**University of Alberta**

Student Recipient: Ms. Rashida Yamani ([rashida@ualberta.ca](mailto:rashida@ualberta.ca)) **Withdrew May/05**

**University of Manitoba**

No candidate for 2005.

## Appendix II

### CANADIAN FOUNDATION FOR PHARMACY RESEARCH POSTER AWARDS 2005 / PRIX DE LA FONDATION CANADIENNE POUR LA PHARMACIE

#### Dalhousie University

**Derek Roberts** ([derek.roberts@dal.ca](mailto:derek.roberts@dal.ca))

Supervisor: Dr. George Robertson

“Nrf2 deficiency increases susceptibility to hypoxic ischemic brain injury in the neonatal mouse”.

#### University of Alberta

**Ms. Reem Elbekai** ([RELBEKAI@pharmacy.ualberta.ca](mailto:RELBEKAI@pharmacy.ualberta.ca))

Supervisor Ayman O.S. El-Kadi, [aelkadi@pharmacy.ualberta.ca](mailto:aelkadi@pharmacy.ualberta.ca)

“Heavy metals modulate Aryl hydrocarbon receptor (AhR)-regulated genes at transcriptional and posttranscriptional levels by oxidative mechanisms”.

#### University of Saskatchewan

**Xia Wang** ([xiw541@mail.usask.ca](mailto:xiw541@mail.usask.ca))

Supervisor Adil Nazarali

“Determining the role of *Hoxa2* gene in palate development using a retroviral gene delivery system”.

#### Université de Montréal

**Thi Thanh Thao Ngo** ([thanh.thao.ngo@muhc.mcgill.ca](mailto:thanh.thao.ngo@muhc.mcgill.ca))

Supervisor:

“Impact of a pharmacist telephone follow-up intervention on patients receiving antibiotic treatment in community: MICROBE study”

#### University of Toronto

**Vessela Vassileva**, ([vessie.vassileva@utoronto.ca](mailto:vessie.vassileva@utoronto.ca))

Supervisor Micheline Piquette-Miller.

“Novel Implantable Delivery System Increases Maximum Tolerable Doses of Paclitaxel in Mice”

#### University of British Columbia

**Ross Taylor** ([rossta@interchange.ubc.ca](mailto:rossta@interchange.ubc.ca))

Supervisor: Kishor Wasan

“The Effect of Heat-Treatment on Fungizone-Induced Renal Toxicity in Human Kidney Proximal Tubule Cells and Fungal Toxicity in *Aspergillus fumigatus*; the Role of Phospholipases”

#### University of Manitoba

**Harris Iacovides** ([h\\_iacovides@hotmail.com](mailto:h_iacovides@hotmail.com))

Supervisor: Sheryl Zelenitsky

"Combination Therapy in Preventing the Emergence of Antibiotic-Resistant *Enterobacter cloacae*"

#### Laval University

**Maryvonne le Saux** ([maryvonne.le-saux.1@ulaval.ca](mailto:maryvonne.le-saux.1@ulaval.ca))

Supervisor: Thérèse Di Paolo

“Estrogenic drugs modulation of the striatal rat dopamine transporter”.

#### Memorial University of Newfoundland

No candidate in 2005.

## **Appendix III**

### **Reviewers for 2005 awards selection**

Dr. Yuewen Gong, University of Manitoba

Dr. Xiaochen Gu, University of Manitoba

Dr. Brazier Jean-Louis, University of Montreal

Dr. David Jakeman, Dalhousie University

Dr. Mo Jamali, University of Alberta

Dr. Sid Katz, University of British Columbia

Dr. Jean Lefebvre, Laval University

Dr. Rebecca Law, Memorial University of Newfoundland

Dr. Hu Liu, Memorial University of Newfoundland

Dr. Pierre Moreau, University of Montreal

Dr. Jacques Turgeon, University of Montreal

Dr. Anne Marie Whelan, Dalhousie University

Dr. Pollen Yeung, Dalhousie University

## Appendix IV

### THE AFPC-PFIZER RESEARCH CAREER AWARD

**I. Name of the Award:**

"Pfizer Pharmaceutical Research Award – Association of Faculties of Pharmacy of Canada".

**II. Donor:** Pfizer Canada Inc.

**III. Purpose:** To stimulate and foster the development of research programs in all areas of Pharmacy by recognizing research excellence of members of the academic staff of Faculties, Colleges, or Schools of Pharmacy in Canada.

**IV. Award:**

1. A suitable framed certificate will be presented to the recipient at the annual meeting of the Association of Faculties of Pharmacy of Canada (AFPC).
2. Pfizer Canada Inc. will reimburse the recipient for travel expenses including return economy-class airfare, from his/her residence to the site of the AFPC research conference. A stipend of \$250 *per diem* shall be provided for each day's attendance at this conference.
3. As further recognition of the recipient's contribution to pharmacy and the significance of the Award, Pfizer Canada Inc. will present the recipient with a cheque in the amount of One Thousand Dollars (\$1,000.00).
4. AFPC will provide the recipient with full registration and cost of social activities to attend the conference.

**V. Selection Criteria:**

1. Each candidate must be an active member of the academic staff of the Faculties, Colleges, or Schools of Pharmacy in Canada.
2. The candidates for the Award shall be:
  - a) Pursuing an active research career in pharmacy, including the supervision of graduate students and/or postdoctoral fellows; and
  - b) Exerting a broad influence on pharmaceutical research as recognized by peers at the national and international levels.
3. The Award may also be given for a distinguished career or for a particular special achievement in pharmaceutical research.

**VI. Procedures for Nominating Eligible Candidates:**

1. Candidates shall be nominated by at least two AFPC members.
2. The nominees shall sign the nomination forms indicating their willingness to let their names stand.
3. The nominators shall submit a covering letter, not exceeding two (2) typed pages, outlining the qualifications of the nominees that make them worthy of the Award, according to the "Criteria for Selection" for the Award. The candidates research supervisor or research collaborators are not eligible to serve as nominators.

4. The application shall include a complete current *curriculum vitae*, provided by the nominee. The *c.v.* shall include information concerning the nominee's academic training and career, including positions held; honors and awards; peer reviewed grants; peer reviewed publications; invitational presentations; offices held in scientific or learned societies; editorial or advisory positions held with scientific or learned publications; visiting professorships; postgraduate fellows and graduate students directed, along with titles of projects; graduate or research courses or seminars conceived, taught, or coordinated; relevant collaborations with other researchers; and such other information, including unpublished manuscripts, which may be relevant.
5. The nominators shall also solicit the opinions of three (3) reviewers who are recognized experts in the nominee's field; at least one of the referees must be from outside Canada.

**VII. Method of Selection:**

1. Prior to September 30 of each year, the Executive Director of AFPC shall inform all members of the terms of reference, criteria, and application procedures for the AFPC-Pfizer Award.
2. Applications, including all relevant materials and documentation as outlined in "Procedures for Nominating Eligible Candidates", must be received by the Executive Director of AFPC no later than December 15 for the competition.
3. The Awards Committee of AFPC shall review all nominations and select the candidate who, in their judgment best meets the criteria for the Award.
4. The Awards Committee may also choose to solicit opinions from recognized experts regarding the eligibility of the candidate for the award.
5. The Awards Committee shall make their selection no later than April 1st and forward the name of the winning candidate to the Executive Director of AFPC, who shall in turn inform Pfizer Canada Inc., after appropriate ratification of the Committee's decision by the AFPC Executive.
6. Presentation of the Award shall be made at the annual meeting of the AFPC.
7. The successful candidate must agree to attend the appropriate AFPC annual conference to receive the Award and to make a suitable research presentation on that occasion.
8. No individual may receive the Award more than once in any ten (10)-year period.
9. If there is no suitable candidate, the Award shall not be given in a particular year.
10. Nothing shall preclude the presentation of the AFPC-Pfizer Award posthumously, provided the candidate was not deceased prior to twelve (12) months before the presentation of the Award.

## **PRIX AFPC-PFIZER POUR L'EXCELLENCE EN RECHERCHE**

### **I. Nom du prix:**

Prix Pfizer en recherche pharmaceutique – Association des facultés de pharmacie du Canada  
, destiné

### **II. Donateur:**

La compagnie pharmaceutique Pfizer Canada Inc.

### **III. Objet:**

Promouvoir le développement de programmes de recherche dans tous les domaines en pharmacie par la reconnaissance de l'excellence en recherche des membres des corps professoraux des Facultés, Collèges et Écoles de pharmacie canadiennes.

### **IV. Prix:**

1. Un certificat encadré sera remis au récipiendaire à la conférence annuelle de l'AFPC.
2. Pfizer Canada Inc. remboursera les frais de déplacement du récipiendaire incluant un aller-retour en classe économique de sa résidence au lieu de la conférence annuelle de l'AFPC. De plus un montant forfaitaire de 250\$ par jour sera alloué au candidat afin d'assister à cette conférence.
3. Afin de souligner la contribution du candidat dans le domaine des sciences pharmaceutiques et l'importance du prix, la compagnie Pfizer Canada Inc. remettra au récipiendaire un chèque de mille dollars (1,000\$).
4. Le récipiendaire sera inscrit à la conférence annuelle de l'AFPC et aux activités sociales par l'AFPC, à titre de gracieuseté.

### **V. Critères de sélection:**

1. Chaque candidat doit être un membre régulier à plein temps d'une Faculté, Collège ou École de pharmacie canadienne.
2. Tout candidat doit:
  - a) Poursuivre une carrière dans un champ de recherche reconnu en pharmacie et assurer la direction d'étudiants gradués et de stagiaires post-doctoraux;
  - b) Être reconnu par ses pairs, au niveau national et international, pour exercer une grande influence dans son domaine de recherche pharmaceutique.
3. Le prix peut aussi être décerné pour l'excellence d'une carrière en recherche pharmaceutique ou pour tout accomplissement particulièrement méritoire en recherche.

### **VI. Mise en nomination et information pertinente:**

1. Le (la) candidat(e) doit être mis(e) en nomination par au moins deux membres de l'AFPC.
2. Le (la) candidat(e) proposé(e) doit apposer sa signature sur le formulaire de mise en nomination, en guise de consentement à sa mise en candidature.
3. Les présentateurs doivent soumettre une lettre de deux pages, décrivant les qualifications du (de la) candidat(e) choisi(e) selon les "critères de sélection" ci-haut mentionnés. Le superviseur ou les proches collaborateurs du candidat ne peuvent agir à titre de présentateurs.



4. La demande doit également inclure un curriculum vitae complet décrivant la formation académique, et la carrière du (de la) candidat(e); les postes détenus ainsi que les honneurs ou prix reçus; les octrois obtenus par les organismes subventionnaires; les publications (révisées par des comités de pairs); toute visite professionnelle et présentation scientifique à titre d'invité; les tâches accomplies au sein de différents organismes scientifiques ainsi que tout poste occupé à titre d'éditeur ou de conseiller; la liste des étudiants gradués et stagiaires postdoctoraux dirigés avec le titre de leur projet; les cours ou séminaires préparés et/ou coordonnés ainsi que tout programme d'enseignement; tout projet de recherche effectué en collaboration avec d'autres chercheurs dans des domaines connexes. Enfin toute autre information pertinente ainsi que tout manuscrit non publié.
5. Les présentateurs doivent également demander l'évaluation de trois répondants reconnus comme experts dans le domaine de recherche du (de la) candidat(e); au moins l'un des répondants doit résider à l'extérieur du Canada.

## **VII. Méthode de sélection du récipiendaire:**

1. Avant le 30 septembre de chaque année, le Directeur exécutif de l'AFPC informe tous les membres des règlements et des critères du prix AFPC-Pfizer.
2. La demande, incluant tous les détails ainsi que toute documentation telle que mentionnée à la section "Mise en nomination et information pertinente", doit être soumise au Directeur exécutif de l'AFPC avant le 15 décembre.
3. Le comité de sélection révisera toutes les demandes et choisira le/la candidat(e) qui selon leur jugement rencontre le mieux les critères du prix.
4. Au besoin, le comité de sélection peut demander l'avis d'un expert concernant l'éligibilité du (de la) candidat(e) choisi(e).
5. La sélection du candidat par le comité sera faite au plus tard le 1<sup>er</sup> avril. Le président du comité de sélection avisera le directeur exécutif de l'AFPC du choix du récipiendaire. L'AFPC informera alors la Compagnie Pfizer Canada Inc. après que le Conseil exécutif de l'AFPC ait entériné la décision du comité.
6. Le prix Pfizer Canada sera décerné à l'Assemblée annuelle de l'AFPC.
7. Le récipiendaire doit accepter d'assister à la conférence annuelle de l'AFPC afin d'y recevoir son prix et à cette occasion, de présenter un résumé de ses travaux de recherche d'une durée d'environ 30 minutes.
8. Le prix ne peut-être décerné au même individu plus d'une fois tous les dix ans.
9. S'il n'y a pas de candidat(e) pertinent(e), le prix ne sera pas décerné.
10. Advenant le décès du récipiendaire, le prix AFPC-Pfizer sera présenté de façon posthume, et ce jusqu'à douze (12) mois après son décès.

**DUE DATE: December 15, 2005**

**AFPC-PFIZER AWARD**

**- CALL FOR NOMINATIONS -**

We hereby nominate \_\_\_\_\_

Name

For the AFPC-Pfizer Faculty Member Research Award

Nominators (2)

\_\_\_\_\_

Signature

\_\_\_\_\_

Signature

I, \_\_\_\_\_, accept the nomination. Date \_\_\_\_\_

Signature

Please provide:

1. Curriculum vitae of the candidate.
2. Covering letter.
3. Three letters of recommendation.

Forward to Dr. Frank Abbott, Executive Director  
Association of Faculties of Pharmacy of Canada  
3919 West 13<sup>th</sup> Ave  
Vancouver, BC  
V6R 2T1

**DATE DE CLÔTURE: Le 15 décembre 2005**

**PRIX AFPC-PFIZER**

Nous désignons: \_\_\_\_\_  
pour le prix AFPC-Pfizer pour un membre académique

Présentateurs (2)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Je, \_\_\_\_\_ accepte la mise en nomination. Date: \_\_\_\_\_  
Signature

- Prière de joindre:
1. un curriculum vitae du (de la) candidat(e).
  2. la lettre de nomination de deux pages.
  3. Les lettres de trois (3) répondants.

Faire parvenir à:

Dr. Frank Abbott, Directeur exécutif  
Association des Facultés de pharmacie du Canada  
3919 West 13<sup>th</sup> Ave  
Vancouver, BC  
V6R 2T1

**Appendix V**  
**AFPC/RxBriefCase Student Award**

The rxBriefCase/AFPC award will be given for the most innovative interactive online learning program, highlighting best practices in online health education for pharmacists.

The Web-based course must be submitted to the AFPC by a Canadian pharmacy student on or before October 31, 2005. Students may choose any topic relevant to pharmacy practice for their interactive program submission. Two students, with the top two program entries (as judged by the AFPC evaluation committee), will be notified by April 15, 2006 and must agree to attend the AFPC Conference in the summer of 2006. Each student will present his/her online course in the form of a 20-minute oral presentation. Conference attendees and rxBriefCase.com registered pharmacist users will vote for the top submission of the two selected programs.

A grant of up to \$1,500 is provided to cover travel costs for each recipient to present findings. The student with the most innovative program (as judged by AFPC conference attendees and rxBriefCase.com users) will receive an honorarium (\$2,000) for the achievement.

**Criteria for submission of INTERACTIVE COURSES**

1. Eligible programs (provided in English) are those that have been submitted in a Web-ready format on or before October 31<sup>st</sup>, 2005.
2. The student must have conducted research and developed the interactive educational program for submission while still a student.
3. The candidate's complete application must be submitted to the AFPC Executive Director by October 31<sup>st</sup>, 2005. Each candidate's application must be accompanied by five copies of the following:
  1. A two-page document containing an analysis of the best practices in current online health education
  2. A CD-Rom of the interactive pharmacy course to be judged;
  3. An indication by the candidate of willingness to attend the AFPC meeting to present and accept the award.
  4. A signed release form allowing rxBriefCase to post submissions on rxBriefCase.com for online participation and voting.

4. The award will be given to the runner-up if the winner(s) cannot attend the AFPC Meeting.

**Criteria for Selection:**

1. The online courses submitted shall be judged on the basis of criteria which include; quality of content, innovative approach, ease of use, level of interactivity and overall clarity of program.

**AFPC Evaluation Committee:**

1. The Committee usually is composed of four Faculty members selected from the Faculties, Colleges, or Schools of Pharmacy in Canada.
2. The members of the evaluation committee shall assess the courses submitted on CD-Rom and shall send their final assessment to the AFPC Awards Committee.
3. The final decision on the submission shall be made by the AFPC Awards Committee.

**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**

**Annual General Meeting  
Saskatoon – June 2005**

**By-Laws Committee Report**

Following the approval of bylaw changes by the AFPC membership at the 2004 annual general meeting, Industry Canada provided a new document consisting of policies, guidelines and procedures for Not-for-profit organizations. In addition, in February we received notification that the changes submitted last year require the provision of additional information. This additional information may encompass additional changes to the bylaws. Advice regarding this is currently being sought. Hence, the Bylaws Committee has no further bylaw revisions to recommend for the 2005 annual general meeting.

Respectfully submitted,  
Susan Mansour  
Chair, Bylaws Committee

**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**

**AGM Education Committee Report  
June 25, 2005 Saskatoon, SK**

**Committee Members: Ingrid Price, Chair (University of British Columbia), Zubin Austin (University of Toronto), Sheila Kelcher (University of Alberta), Chantal Pharand (Université de Montréal), Anne Marie Whelan (Dalhousie University)**

**Information Update for AGM in Saskatoon June 25, 2005.**

**Committee Activities:**

**1) Follow-up on Task Force in Experiential Education (SPEP Report)**

At the request of council at the mid-year meeting in February 2005, Anne-Marie Whelan summarized the feedback received from the Pharmacy Schools in Canada on the Task Force Report on Experiential Education (see attached document).

**2) Organization of SPEP Directors Summit at AFPC Conference in Saskatoon (June 2005)**

At the request of council at the mid-year meeting in February 2005, Ingrid Price (with the assistance of Sylvie Marleau, Anne-Marie Whelan and Frank Abbott) organized a meeting of the SPEP Directors (or a representative) from each of the 9 schools of Pharmacy in Canada. This meeting will be held on Thursday, June 23<sup>rd</sup>, 2005 in Saskatoon from 9:00 am – 3:00 pm.

The goals of this meeting are to develop a strategic plan to deal with the recommendations of the task force document and to identify a SIG to move this strategic plan forward.

This meeting will wrap-up by identifying next steps, individuals responsible for next steps and establishing follow-up meetings (either face-to-face or distance).

Education Committee Chair, Ingrid Price, will present a report to council on this event.

**3) AACP Summit to Advance Experiential Education in Pharmacy, Chicago (June 17-18, 2005)**

Education Committee Chair, Ingrid Price, will attend this event in Chicago and will present a report to council in Saskatoon in June 2005.

Content and activities from this event will inform the activities of the SPEP Directors Summit at the AFPC Conference in Saskatoon in June 2005.

*Respectfully submitted:*

*Ingrid Price (Chair of AFPC Education Committee).*

**AFPC Annual Council Meeting and Annual General Meeting, Saskatoon,  
Saskatchewan, June 24-26, 2005**

**Report for Information from the Education Committee on Structured Practice  
Experiential Programs (SPEP) Activities in June 2005: AACP in Chicago and  
AFPC in Saskatoon**

Reported by:

**Chair:** Ingrid Price, University of British Columbia

**Committee Member:** Anne-Marie Whelan, Dalhousie

**AACP Academic – Practice Partnership Initiative Summit to Advance Experiential Education  
in Pharmacy. June 17-18, 2005. Chicago, Illinois.**

**On June 17 & 18, 2005, AFPC Education Committee Chair, Ingrid Price, had the pleasure of participating in the AACP APPI Summit to Advance Experiential Education in Pharmacy.**

**General perspective on the event:**

The Summit is part of the AACP Academic - Practice Partnership Initiative (APPI), sponsored in part through a grant from Merck & Company. The Summit built upon the significant work that has been done through committees, task forces and other efforts by AACP members and colleague organizations. During the Summit, participants developed strategies that each stakeholder in practice and education must advance to improve experiential education and the quality of pharmacy practice in the United States.

The Summit was the first step in a multi-year initiative to:

1. Increase the quantity of exemplary experiential learning sites across the United States.
2. Recruit and train qualified experiential faculty and preceptors.
3. Elevate the quality of care delivered at experiential learning sites.
4. Streamline processes for preceptor recruitment, training, assessment, communication, and feedback.
5. Ensure that experiential learning in pharmacy inculcates skills, values, and attributes related to the five core competencies that all health professionals should possess (i.e., provide patient centered care, work in interdisciplinary teams, employ evidence-based practice, apply quality improvement and utilize informatics).

As the only Canadian (indeed, the only non-American) attending this event, I felt extremely welcomed by our American colleagues. I was able to form many connections with experiential educators in the United States that will be of considerable value as Canada moves forward with its own initiatives to enhance SPEP.

Many of the issues present in Canada are also of concern in the States (e.g., preceptor & site quality and quantity, evaluation of learning, professionalism of students on SPEP clerkships).



### **Overview of event agenda and process:**

The summit was structured as a series of plenary sessions, panel discussions, and breakout working groups to engage in planning and innovation activities. Participants' work focused on the relationships between patients, schools, preceptors, students, sites, and the environment in which they function.

Breakout groups at the Summit are strategically designed to deliberate on the following groups of relationships:

- Group One: The Relationships among Preceptors, Students, and Sites
- Group Two: The Relationships among Preceptors, Students, and School
- Group Three: The Relationships among School, Students, and Sites
- Group Four: The Environment (and its interface with Schools, Sites, Preceptors, and Students)

Based on the outcomes of day one, new groups were formed to develop action plans for the strategies identified. These groups were defined by the prioritized strategies that cut across the relationship working groups and were announced Saturday morning. Participants were then asked to self-select the action plan working group where they felt they could contribute the most.

#### Post-event:

Each of the ideas, headers, strategies, and tactics are being documented for future action by task forces, committees and individuals at schools/colleges and organizations across the country. Full proceedings are being prepared for publication, and a summary will be presented to the AACP Board of Directors and during the Opening General Session at the upcoming AACP Annual Meeting in Cincinnati.

The Summit Implementation Team and other AACP leadership committees will be in touch regarding next steps over the coming weeks and months.

### **SPEP Directors Summit. 9:00 am – 3:30 pm, June 23, 2005. Saskatoon, Saskatchewan.**

Facilitators: Ingrid Price, AFPC Education Committee Chair, and Anne-Marie Whelan, AFPC Education Committee Member

Participants: Michael Namaka (University of Manitoba), Leslie Lavack (University of Toronto), Bev Allen (University of Saskatchewan), Rosemin Kassam (University of British Columbia), Louise Mallet (University of Montreal), Carmen Vézina (Laval University), Wanda Spurrell (Memorial University), Harriet Davies (Dalhousie University)

Prelude to summit meeting: This event was meant to provide an opportunity for SPEP coordinators from across Canada to work together to begin to develop an action plan based on the recommendations identified in the SPEP Task Force Report. While this report revealed many valuable recommendations, the AFPC Counsel felt that it would be useful to prioritize these and identify timelines and develop working groups to achieve certain activities identified as a priority among the SPEP Coordinators.

The group of participants worked through many of the same activities that were introduced to Ingrid Price during the AACCP summit on experiential education in pharmacy in Chicago earlier in June. In groups of 3, participants worked on one of the following areas of SPEP: Programs, Preceptors or Sites.

At the end of the day, each of these groups reported on the priorities, goals and objectives they had identified for their area and gained feedback from the group on these.

The development of a detailed action plan will continue through on-line discussion this summer and will culminate in a second face-to-face meeting of the group in the Fall of 2005. At that point, we expect to have a detailed action plan that will allow the group to move forward to enhance SPEP across Canada in a strategic and effective fashion.

**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**

**Annual General Meeting  
Saskatoon – June 2005**

**Nominating Committee Report**

The Nominating Committee members included Simon Albon (University of British Columbia), Linda Hensman (Memorial University of Newfoundland), Lavern Vercaigne (University of Manitoba) and Susan Mansour (Dalhousie University).

Calls for nominations for the position of President Elect were announced to all eligible AFPC members by e-mail.

The following nominations have been received:

1. President – Dr. Zubin Austin
2. President Elect – Dr. Anne Marie Whelan
3. Councilors: The following members have been elected to the AFPC Council for the 2005-2008 term.

Laval University:	Jean Lefebvre (second term)
Memorial University of Newfoundland:	John Hawboldt
University of Toronto:	Lalitha Raman-Wilms

Additionally, Daniel Thirion has joined Council as the University of Montreal, to complete the term of Chantal Pharand.

Respectfully submitted,  
Susan Mansour,  
Chair, Nominations Committee

**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**

**AFPC AGM Research Committee Report  
June 25, 2005 Saskatoon, SK**

**Committee Members:** Chair (Mike Namaka), Lisa Dolovich (liaison member and Chair of Pharmacy Practice Research Committee), Lili Wang (liaison member from the AFPC awards Committee), Jean Lefebvre, Emma Ferreira

**Information Update for AGM in Saskatoon June 25, 2005.**

**Research Data Collection Across Canada:** The information requested by the research committee will be compiled on an annual basis for the purposes of governing the future efforts and directions of the research committee.

Following the last midyear meeting in Toronto, the research committee had formulated a **revised data** collection template for each respective institution across Canada to complete. This data collection template is currently being completed at the University of Manitoba. It is the committee's goal to circulate the completed template for Manitoba as a guide for completing the required information from other academic institutions. I have attached the revisions to the template based on the discussions that had arisen during the Midyear meeting in Toronto.

**Analysis of Submitted Research for Poster Presentations:**

Frank has assisted the research committee once again in providing the necessary data for the 2005 AGM. We now have comparative data for the 2003 and 2004 academic years. *During last years AGM, the research committee had made a request to post this information on the website. The committee has received feedback from Dr Abbott that this information has been posted. I have forwarded the graphs to Dr Abbott on May 26<sup>th</sup>, 2005 for posting on the website.*

*Respectfully submitted by*

*Mike Namaka (Chair of AFPC Research Committee).*

*The information presented above was conducted on behalf of the entire Research Committee Members outlined above.*

**Data Collection Template:**

**Manitoba 2003/2004**

<b>Specialty</b>	<b>Supervisors</b>	<b>Research Category for Academy</b>	<b>Total Number of Graduate Students</b>	<b>Project Funding 2003/2004</b>	<b>Key Terms</b>	<b>Website Link</b>
<b>Health Policy</b>	Dr. Metge PhD	Social Administrative	2 Ph.D. - 1 M.Sc.	CIHR		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Collins Ph D " <b>Dean</b> "	Social Administrative				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Kozyrskyj Ph D	Social Administrative		CIHR		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Hepatology</b>	Dr. Burczynski Ph D	Pharmaceutical Sciences	3 Ph.D.	Investigators' grants, Rx&D, CIHR, Buggiey & self funded		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Gong Ph D	Pharmaceutical Sciences	2 Ph.D.	CIHR		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Multiple Sclerosis</b>	Dr. Namaka Ph D	Pharmaceutical Sciences	2 Ph.D. - 2 M.Sc.	Investigators' grants, URGP, MMSF, Industry	Immunology, DRG, Neuropathic Pain, Neurogenesis, EAE	<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Antibiotic</b>	Dr. Zelenitsky Pharm D	Clinical Research	1 M.Sc.	Investigators' grants, MHRC, UMGF		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Nephrology</b>	Dr. Vercaigne Pharm D	Clinical Research	2 M.Sc.			<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Oncology</b>	Dr. Hassinoff Ph D	Pharmaceutical Sciences	1 Ph.D.	CIHR		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Nutraceuticals</b>	Dr. Anderson Ph D	Pharmaceutical Sciences	1 Ph.D.	Investigators' grants		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Pierce Ph D	Pharmaceutical Sciences	1 M.Sc.			<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Briggs Ph D	Pharmaceutical Sciences	1 Ph.D.			<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Pharmaceutics</b>	Dr. Benson Ph D	Pharmaceutical Sciences	1 Ph.D.	Investigators' grants, UMGF, MICH & MHRC		<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Simons Ph D	Pharmaceutical Sciences	2 Ph.D.			<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Dr. Gu Ph D	Pharmaceutical Sciences	1 Ph.D. - 3 M.Sc.			<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>

<b>Faculty Lecturers</b>	Thadani BSc Pharm	Education Research				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Kremers B Sc Pharm	Education Research				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Brink BSc Pharm	Education Research				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
	Durocher B Sc Pharm	Education Research				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Geriatrics</b>	Dr. Grymonpre Pharm D	Clinical Research				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Toxicology</b>	Dr. Alessi- Severini Ph D	Social Administrative				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>
<b>Medicinal Chemistry</b>	Dr. McIntosh Ph D	Pharmaceutical Sciences				<a href="http://www.umanitoba.ca">www.umanitoba.ca</a>

**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**

**Task Force on Educational Outcomes for an Entry-level Doctorate of Pharmacy  
Graduate in Canada**

**Report to AFPC Annual General Meeting  
June 2005**

**Background**

CCAPP has requested that AFPC develop Educational Outcomes for an Entry-level Doctorate of Pharmacy Graduate in Canada. This document will be used as part of the CCAPP Standards and Guidelines currently being developed for an Entry-Level Doctorate of Pharmacy. In the near future, CCAPP may be called upon to apply the accreditation process to a Canadian faculty for an Entry-Level Doctorate of Pharmacy degree program.

Development of Educational Outcomes for an Entry-level Doctorate of Pharmacy Graduate in Canada by AFPC does not imply endorsement or a lack of endorsement for this degree. Rather, the development of these Outcomes is consistent with the role of academic pharmacy in identifying appropriate educational outcomes for a variety of degrees: Baccalaureate, Post-Baccalaureate Doctorate of Pharmacy and Entry-Level Doctorate of Pharmacy.

**Process**

In February 2004, the Council of AFPC struck a Task Force to develop these Outcomes. The Task Force met in person in May followed by several conference calls. This resulted in a draft set of Outcomes being provided to Council in June 2004. This was to be followed by review of these Outcomes by all Canadian faculty. At a meeting of ADPC in October 2004 it was determined that the deans would work with the AFPC councilor and their faculties to provide feedback to the task force on the draft Educational Outcomes for an Entry-level Doctorate of Pharmacy Graduate in Canada by the end of December 2004. The Task Force would then review the feedback and make changes to the Outcomes if necessary. The revised document would then be presented to the Council of AFPC at the 2005 midyear meeting.

Through the AFPC executive director, the Task Force received feedback from five faculties (Alberta, Dalhousie, Toronto, Manitoba and Montreal). This feedback was reviewed and changes were made to the Outcomes. Additional comments were received following the midyear Council meeting and require review.

## **Recommendations**

1. That Council consider a mechanism to ensure the opportunity for endorsement of the Outcomes.
2. That Council discuss the need for the development of levels and ranges to accompany the Outcomes.

Respectfully submitted,

Susan Mansour,

Chair, Task Force on Educational Outcomes for an Entry-Level Doctorate of Pharmacy Graduate in Canada

On behalf of members:

Tom Brown (University of Toronto)

Sylvie Marleau (AFPC President)

Claude Mailhot (University of Montreal)

Sharon Mitchell (University of Alberta)

Anne Marie Whelan (Dalhousie University)



**Pharmacy Human Resources in Canada**  
**A sector Study of Pharmacists and Pharmacy Technicians**  
**Report to the AFPC Annual General Meeting**  
**June 25, 2005 Update**

Since the last report to the AFPC Council in 2004, the steering committee for this study has not met. However, the management committee held several teleconferences to discuss concerns with ongoing delays in the funding of the project. **A summary of recent events is included below, as well as two briefing notes that outline the history of this project to present date.**

- 1.) Despite months of effort on the parts of several organizations and representatives participating in this proposal, and participation of HRSDC representatives throughout the process, there now seems to be concern that the HRSDC does not have committed funds to support this sector study. In general, there appears to be a reluctance on the part of HRSDC to fund sector studies in general. The management committee overseeing this proposal has discussed these concerns and has agreed that the Pharmacy Human Resources Sector Study is unlikely to proceed as planned.
- 2.) As part of participating in the overall study, the AFPC was asked to review and sign a Memorandum of Understanding (MOU). The MOU was reviewed and comments provided. However, the MOU was never signed, because of the ongoing funding delays.
- 3.) Following discussions with the HRSDC, another potential source of funding was identified, the "Foreign Credential Recognition" (FCR) program. This organization is interested in gaining more information about pharmacy human resources in Canada as it relates to the need for foreign credentialing of pharmacists wanting to come to Canada. Because of a very tight turn-around time, CPhA has taken the lead to draft a proposal to the FCR. Although it has some similarities to the larger sectoral study, there will be a new governance structure, a revised research plan, new time lines, etc. At this point in time, it appears that AFPC's role will be in support of the study, as opposed to signing a memorandum of understanding to participate. Although exact funding is not clear at this point, it appears that the previously budgeted money to participate in the sectoral study will not be required. There may be some funds required to send a liaison to meetings to provide input and feedback during the study. Currently, the new proposal to FCR is still in draft form and has not been funded by FCR. I have reviewed the proposed draft and have provided comments to CPhA. A draft of the proposal has also been provided to council for review.

Respectfully submitted

Lavern Vercaigne



## Briefing Note: Pharmacy Human Resources Sector Study

### Issue:

In the late 1990's, a nationwide shortage of pharmacists was recognized as causing serious pharmacy human resources challenges for hospitals and community pharmacies. In spite of the fact that the role of pharmacists is expanding, as is the need for better medication management, the federal government has not invested in the human resource needs of this sector. We need a commitment now, for funding of the Pharmacy Human Resources Sector Study that has been under discussion with Human Resources [and Skills] Development Canada since 1999.

Pharmacy sector stakeholders have invested significant time, money and resources in working together and with HRSDC analysts on this proposal. After six years, it is not surprising that these stakeholders have become frustrated with the repeated delays and lack of progress – as the impacts of the pharmacist shortage on the profession and the public worsen. We remain committed to working with F/P/T governments and other stakeholders to ensure that the research and strategic action plans complement other initiatives.

### Background:

There are 28,537 licensed pharmacists working in Canada today. Of these, 75% work in community pharmacies, 15% in hospitals and the remainder are employed in other practice settings (e.g., research, government, universities, pharmaceutical companies).

In the late 1990's, it was recognized that pharmacist shortages were a serious challenge to the sector and to our health care system. Evidence of the pharmacist shortage was documented in a study by Ipsos-Reid commissioned by the Canadian Association of Chain Drug Stores (CACDS) in 2001, which confirmed a shortage of 2,000 community pharmacists. The 2003-04 *Hospital Pharmacy in Canada Survey* reported a shortage of 331 hospital pharmacists, a vacancy rate of 12.9%.

In 2002, two key reports were released (Kirby report: *The Health of Canadians – the Federal Role*; and the Romanow report on *The Future of Health Care in Canada*) which had many implications for pharmacy in terms of role and scopes of practice, as well as prescription drug issues.

At the same time, calls have increased for pharmacists to play an expanded role in Canada's health care system because of their drug expertise and accessibility to the public. Rather than a short-lived problem, research indicates that these shortages are likely to be a long-term issue, requiring the development of strategies that address underlying supply and demand issues.

In September 2003, First Ministers signed the Accord on Health Care Renewal which recognized the importance of health human resource planning and stated: "Collaborative strategies are to be undertaken to ... ensure the supply of needed health providers (including nurse practitioners, **pharmacists** and diagnostic technologists)."

To address these issues and ensure an integrated pan-Canadian HR approach, pharmacy needs to coordinate its efforts with the health human resources planning of governments (including the F/P/T Advisory Committee on Health Delivery and Human Resources – ACHDHR) and with other disciplines (particularly medicine and nursing).

## Project History

In **1999**, the Canadian Pharmacists Association (CPhA) approached HRDC about pharmacy's HR concerns. Funding was provided to carry out a situational analysis of the profession. After completion, CPhA and HRDC worked together to move forward on a pharmacy sector study.

The Steering Committee first met in **March 2002** and has a wide range of representatives, including federal/provincial members (with CPhA as the secretariat). With the participation and direction of two HRDC analysts, terms of reference, a work plan and a budget were developed. The study has two purposes: 1) to carry out a comprehensive analysis of short and long-term human resource challenges facing the pharmacy sector and 2) to develop strategies for a coordinated action plan to minimize or prevent negative impacts from the pharmacist shortage within the health care system.

In **2003**, anticipating the Sector Study to start later that year, the Steering Committee initiated incorporation of the Pharmacy Sector Study Corporation to provide a legal foundation for the study and financial management. Signatories include CPhA, CACDS and the National Association of Pharmacy Regulatory Authorities (NAPRA). Working with HRDC analysts, terms of reference were approved in principle and governance of the Steering Committee was addressed in a Memorandum of Understanding. In **October 2003**, the first funding application was submitted to HRDC (for \$2,722,902: \$1,859,502 HRDC contribution; \$863,400 pharmacy sector contribution). HRDC then told the Steering Committee that the application required more detail on the research work plan.

At the September 2004 First Ministers' meeting, a 10-year plan to strengthen health care addressed HHR: "First Ministers also recognize that improving access to care and reducing wait times will require ... strategic investments in areas such as: increasing the supply of health professionals (e.g., doctors, nurses and **pharmacists**)..."

**Early in 2004**, HRSDC provided CPhA with funding for the development of the research work plan and to update the 2001 situational analysis. The research work plan was submitted to HRSDC in April and a revised funding application and terms of reference were submitted in **August**. No major issues with the application were identified by HRSDC. In **December 2004**, a revised application package was resubmitted to HRSDC (budget \$2,507,375: \$1,773,775 HRSDC contribution; \$733,600 pharmacy sector contribution). At this time, CACDS met with senior staff of HRSDC, and were advised that the proposal would be sent

to the Review Committee, with a recommendation that the request for approval be forwarded to the Minister's office shortly thereafter, with a likely wait time of 6–8 weeks for signoff.

In the **Fall of 2004**, Health Canada's Health Human Resources Strategy Division (HHRSD) moved forward on several HHR initiatives (following consultation with F/P/T ministries of health), identifying five professions as a priority – one being pharmacists. HHRSD is funding the Canadian Institute for Health Information's HHR Databases Development Project to develop national, supply-based databases and reporting systems, including the pharmacist database. There are also initiatives around international pharmacy graduates.

In **January 2005**, HRSDC indicated to CPhA that the Pharmacy Sector Study application had F/P/T support and should be approved by the end of March. The importance of coordinating the pharmacy sector study with ACHDHR and HHRSD initiatives was recognized by both. In **March 2005**, CPhA met with HRSDC to further discuss the application and provide monthly cash flow projections. CPhA representatives were told that the new Minister had not yet signed off on the project. Provincial concerns with sector studies were raised. HRSDC indicated that they will still move forward with the application, although further details and revisions to the research workplan and terms of reference were once again requested.

CPhA and CACDS have recently expressed our frustrations about these ongoing delays to senior officials in Health Canada and HRSDC. The government officials' response has been that the F/P/T Advisory Committee on Health Delivery and Human Resources will address the sector studies at an April 4<sup>th</sup> meeting and that moving forward on the pharmacy study will be advocated.

## **What We Need**

The pharmacy sector needs the commitment of the federal government to invest in pharmacy human resources planning. We ask that HRSDC move forward now by funding the Pharmacy HR Sector Study, as part of a pan-Canadian HHR strategy. The pharmacy profession is committed to working with governments and other stakeholders to ensure that the research and strategic action plans are supportive of health care renewal initiatives across Canada.

March 31, 2005

# ONTARIO COLLEGE OF PHARMACISTS

483 HURON STREET, TORONTO, ONTARIO .M5R 2R4

Tel. (416) 962-4861 Fax (416)-847-8265

## MEMORANDUM

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**To:** Dean Wayne Hindmarsh

**From:** Chris Schillemore

**Date:** Wednesday 22 June 2005

**Re:** Regulation of Pharmacy Technicians Update

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This is a summary of the recent history of the actions taken by OCP towards the regulation of Pharmacy Technicians.

September/October 2003: Approved Pharmacy Technician Competency Profile published in Pharmacy Connection.

December 2004: Council approved the release of the Proposed Standards of Practice for Registered Pharmacy Technicians for consultation with stakeholders.

January/February 2005: Proposed Standards of Practice for Registered Pharmacy Technicians published in Pharmacy Connection with the request to stakeholders to provide feedback to OCP by June 1, 2005.

March 1, 2005: Request from HPRAC (Health Professions Regulatory Advisory Council) to complete a submission for regulation of technicians by April 15.

April 21, 2005: Registrar and Deputy Registrar with Tim Fleming (President, CAPT) made a presentation in support of the proposal for the regulation of pharmacy technicians.

June 1, 2005: Consultants from HPRAC met with separate groups of technicians, pharmacists and attended the PTWG meeting.

HPRAC has also requested feedback on regulation of technicians from various stakeholders e.g. pharmacists, technicians, educators, regulatory bodies, employers etc and is posting the submissions on its website. The HPRAC consultation should be complete by September 2005.

In the meantime, OCP staff has initiated discussions with PEBC and CCAPP concerning possible initiatives related to entry to practice examinations and accreditation of pharmacy technician programs. Discussion with other stakeholders such as pharmacy technician educators nationally and provincially is also ongoing.

**2005 AFPC ANNUAL COUNCIL AND AGM MEETING  
CCAPP report to AFPC**

**June 24-26,2005**

**DELTA BESSBOROUGH HOTEL SASKATOON; Kelsey Boardroom (Annual Council); Salon Batoche (AGM)**

**Executive of CCAPP:**

President - Dr. Dennis Gorecki, University of Saskatchewan; President Elect - Dr. Sylvie Marleau, Universite de Montreal; Past President - Dr. Monique Richer, Universite Laval; Executive Director - Dr. Jim Blackburn.

**New appointments to the Board of Directors.**

Erin Farell-MacKenzie (CPhA, 2005-2008); Sylvie Marleau (AFPC, 2005-2008); Monique Richer (PEBC, 2005-2008); Barbara Downe-Wamboldt (Non-Pharmacy Academic Board Member, 2005-2007).

**Realizations and activities of the Boards**

- Accreditation. The University of Saskatchewan was granted full accreditation by the board for 6 years.

**CCAPP standards and guideline committee** (Sylvie Marleau, Chair; Jim Blackburn, David Hill, Ray Joubert, Blair Seifert, Jake Thiessen).

**Baccalaureate Degree program standards revision:** The revision process has been completed and the revised standards have been ratified at the AGM. The revised standards and guidelines are effective immediately. However, Faculties that will be evaluated in 2006 will have the choice to be evaluated against the «old» standards or the revised standards and guidelines.

**Entry-level Pharm.D program standards:** The standards and guidelines committee will continue his work on the development of standards for an Entry-level Pharm.D program. Although CCAPP will develop his own standards, the Committee will also consider the recent revision of the ACPE standards and guidelines in his work.

**Pharmacy Technician Programs:** CCAPP continues to maintain interest for the development of standards for the accreditation of colleges offering formal training programs for pharmacy technicians.

**CCAPP Site Visits in 2005:** There will be an on-site visit to Universite Laval (Oct. 23 - 26) and an on-site visit to the University of British Columbia (Nov. 20 - 23).

A Standards and Guidelines Committee workshop will be held next fall to pursue the work of the Committee on Entry-level Pharm.D standards development.

Respectfully submitted,

Sylvie Marleau, AFPC delegate to CCAPP

**2005 AFPC ANNUAL GENERAL MEETING  
Strategic and Planning Committee Report to AFPC**

**June 25, 2005  
Salon Batoche  
DELTA BESSBOROUGH HOTEL, SASKATOON**

Following the 2004 strategic planning session in Toronto and the adoption of the strategic plan by the AFPC Council in Vancouver, each committee had the mandate to propose novel ways to meet the strategic plan.

In a teleconference held on December 6 2004, we have discussed ways through which AFPC could raise its profile and have its work better known by the academic community and other pharmaceutical/educational organizations. We have proposed to communicate with CAPSI to discuss common points of interest in Pharmacy Education. We also discussed how we could involve more faculty members in the work of our committees. The creation of a SIG group for SPEP coordinators is a good example. We also discussed that the recognition of our award recipients might be better publicized. These reflections led to the preparation of our strategic planning session in February 2005.

At our midyear meeting in February 2005 in Toronto, Roy Dobson facilitated a strategic planning session including a revision of our vision, mission and goals to better define our activities. In addition, we built a portfolio of AFPC successes, including the Annual Conference, the Awards program, the AFPC web site French translation, the Educational outcomes for entry-level Pharm D, the SPEP report and our current projects and collaborative work with CPhA, CCAPP, ADPC, and NAPRA, asking how each committee may contribute to increase these successes? We also seek to identify what actions could be taken by Councilors at faculty meetings to inform faculty members of who we are and what we do. It has been proposed that our web site could be made universally useful through providing scholar information of the different Faculty members.

AFPC successes mirror the quality and motivation of people working in the different committees and of the leadership of its executive director. Let these successes grow and be better known.

Respectfully submitted,

Sylvie Marleau and Roy Dobson  
Strategic and Planning committee

**2004-05 Annual Report from the AFPC Delegate to the Canadian Council on  
Continuing Education in Pharmacy (CCCEP)  
June 14, 2005**

I attended my first meeting as the AFPC Delegate to CCCEP on May 27 and 28<sup>th</sup>, 2005 in Quebec City.

Current Board members include:

Susan Lessard-Friesen (MB)- President  
Roberta Stasyk (AB)- Treasurer  
Barbara Thomas (NL)  
Gary Meek (NB)  
Bev Zwicker (NS)  
Anick Minville (QC)  
Nora MacLeod-Glover(ON)  
Aleta Allen (SK)  
Carol O'Byrne (BC)  
Marsha Watts (PEI)  
Ginette Bernier (CFP)  
Barry Power (CPhA)  
Dale Wright (CSHP)  
Yvonne Shevchuk (AFPC)

Nancy McBean - Executive Director

***Planning Day***

May 27<sup>th</sup> consisted of a planning day facilitated by Karen Graham (Panacea Canada Inc.). Both CCCEP Board members and stakeholders were asked to respond to a survey to collect background information on strengths of CCCEP, key strategic area and critical issues. Based on this background document as well as board discussion, the one-day planning session addressed the following objectives:

- to affirm the Mission
- to develop strategic goals - 1-3 years
- to develop preliminary action plans
- looking forward not back

This was a very productive day which has resulted in draft proceedings. Once the draft has been read and approved by the Board, the document will be available more widely for review.

***Finances***

A draft budget was reviewed, however changes were required before approval could occur. The budget will be approved in the near future.

***6<sup>th</sup> International Conference in Life Long Learning in Pharmacy***

CCCEP is a co-host of this conference which immediately follows the AFPC Conference in Saskatoon (June 26-29).



***Other Business***

There were numerous items on the agenda for the second meeting day including further discussion of strategic planning, including a recommendation to adopt a specific governance model and the Treasurer's report.

***Next meeting***

The next meeting will be held immediately following the National Continuing Competence Conference in Edmonton (November 4 and 5<sup>th</sup>).

As this is my first meeting, I still need some orientation before I fully comprehend all the activities and events which occur within CCCEP. Subsequent reports should be much more informative.

Respectfully submitted,

Yvonne Shevchuk  
College of Pharmacy and Nutrition  
University of Saskatchewan

**AFPC Report: USP Representative, 2000-2005.**  
**Annual General Meeting**  
**Delta Bessborough Hotel**  
**Saskatoon, Saskatchewan, June 25, 2005**  
**Colin J. Briggs, Faculty of Pharmacy, University of Manitoba**  
**Winnipeg, MB. R3T 2N2**

It has been a privilege to be representative of the AFPC to the United States Pharmacopeial Convention for the past five years. This organization meets once every five years at the end of the term for delegates. All business in the interim is conducted by numerous committees and with extensive electronic communication. The AFPC is entitled to one voting delegate at the convention, the most recent meeting of which was held in Washington in March 2005.

A major mandate of the USP Convention is to promote the health of the public through development of standards for quality assurance of pharmaceutical products. The USP-NF is continuously updated and all monographs are subject to rigorous review of content and quality. The USP has developed standards, and in many cases, reference materials for all legally marketed therapeutic substances in the United States. Both standards and reference compounds are used in many other countries.

The USP places great emphasis on integrity and safety of therapeutic products during manufacture, distribution, storage and use. It consults extensively with all stakeholder groups. The organization is expanding its educational role at all levels from the manufacturer to the patient, and is monitoring scientific developments to enhance these processes. Labeling and nomenclature are important in the enhancement of patient safety. The USP is resolved to collaborate with appropriate partners to improve patient care and safety through improvements in product quality, reduction of medication errors, enhancement of compounding standards and development of more comprehensive drug information programs.

The USP Convention has major international presence which is expanding. Its standards are used currently in 130 countries. International harmonization of compendial standards and training of technical personnel are promoted. There is considerable interaction with regulatory authorities in other countries, particularly with Health Canada. A major international development is the establishment of a USP-India site to support development and application of standards for therapeutic agents in India and the surrounding countries.

A USP Pharmacists Pharmacopeia has been developed and will be available in the summer of 2005. It will be produced in print and on-line formats and is designed to provide comprehensive, critical information directed towards pharmacy practice. It has monographs and general chapters on pharmaceutical compounding, including calculations.

In recent years the USP has increased its activities related to dietary supplements, particularly with herbal products. Numerous monographs have been produced or are in preparation. The organization has established a collaborative program with industry to promote high quality products under the "USP-Verified" dietary supplement program.

The Pharmacopeial Forum ([www.usp.org/USPNF/pf/whatsInside.HTML](http://www.usp.org/USPNF/pf/whatsInside.HTML)) contains a wide range of product and process-related information which is under consideration or will be recommended by USP.

For the next 5 year period, 2005-2010, the USP will focus on good pharmaceutical care by addressing four primary areas:

- national product quality including standards, their implementation and verification
- international product quality, emphasizing worldwide use of reliable, safe products
- healthcare delivery and patient safety
- drug information, with approaches to enhancement of the current situation, to improve patient therapy and safety.

Should you require additional information on these or other USP initiatives, please contact me.

Colin Briggs  
Winnipeg.  
14/06/05

**ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA**  
**Annual Council and General Meeting**  
**Delta Bessborough Hotel, Saskatoon, Saskatchewan**  
**June 24-26, 2005**

**EXECUTIVE DIRECTOR'S REPORT:**

In this my second year as Executive Director of AFPC/ADPC, may I express my sincere appreciation to Council and Executive for their generous support and help during a very busy year. In particular it has been my pleasure to serve in 2004-2005 with President Sylvie Marleau of AFPC and with President Rita Caldwell of ADPC. Both individuals have demonstrated their leadership skills by effectively moving our organizations forward with many projects currently underway and with challenging assignments ahead. For me, it has been a stimulating and eventful year and I hope that some of this will come through in my report as I list the highlights of the past year's activities.

Following a very successful annual meeting in June 2004 in Vancouver it was important to feature this event by posting the entire program plus abstracts and pictures on the AFPC web site. Pictures of the award winners and captions for the Award Presentations were submitted to Pharmacy Practice magazine for potential publication. Rather than prepare a synopsis of the meetings for councilors as was done last year, a somewhat detailed summary of the Conference and the Annual Meeting were prepared for an AFPC update that was sent out in July. This will be the normal practice from now on if this meets with the approval of Council.

For the first time, the abstracts of the poster presentations were published in the online Journal of Pharmacy and Pharmaceutical Sciences that is hosted by the Canadian Society for Pharmaceutical Sciences (CSPS). This was facilitated by the fact that AFPC met jointly with CSPS in Vancouver, but it is my intention to approach the Journal for publication of this year's abstracts as well. Abstract format is consistent with that required by CSPS and we hope that our request for publication will be granted for 2005 and perhaps even on a continuing annual basis. The Journal of Pharmacy and Pharmaceutical Sciences is abstracted by Chemical Abstracts, and therefore warrants the interest of AFPC as a quality journal in which to publish. Presenters of the 2004 poster abstracts, when informed that their abstracts had been published, were uniformly pleased with the result.

At the New Council Meeting of AFPC in June 2004 it was clear that President Sylvie Marleau was fully intent on making a good start to the initiatives laid out in our recent strategic plan. With the report of the Task Force on Structured Practice Experiential Programs (SPEP) and the report on Educational Outcomes for the entry-level Pharm D that were received in draft form during the Annual Council Meeting, attention was given to making both of these reports working documents of AFPC. Education committee chair, Ingrid Price and myself met with Rosemin Kassam, the SPEP coordinator at the University of British Columbia to distil the many recommendations in the SPEP report to key recommendations that could be presented to the Deans of Pharmacy at their annual meeting in October. With input from the members of the Education Committee, this task was accomplished.

On October 6, 2004, Past President Susan Mansour and myself represented AFPC at the business meeting of ADPC to present the Deans with the latest developments. The strategic plan, the Educational Outcomes document for the entry-level Pharm D and the SPEP document were discussed along with a number of new initiatives undertaken by AFPC. Support from the Deans to distribute

the main documents to stakeholders for comment and to poll the Faculties for input was obtained and acted upon. The pharmacy committee of CACDS and the registrars from NAPRA also provided valuable comments and feedback to the SPEP report.

During the strategic planning session at the midyear meeting in February of 2005, a decision was made to proceed forthwith on the recommendations of the SPEP report. AFPC would sponsor a meeting of the experiential practice coordinators from each of the Faculties to strategically craft realistic goals and objectives in order for AFPC and the Faculties to deal with the recommendations in the report. Education chair, Ingrid Price and Council representative Anne Marie Whelan were to facilitate the session that would occur in Saskatoon on June 23, 2005 just prior to the start of the Annual Conference. The concept of forming an AFPC Special Interest Group (SIG) made up of the SPEP coordinators that would meet and report on an annual basis was to be debated.

In order to better serve our membership, AFPC launched a project to have the major sections of the web site (<http://afpc.info/>) translated into French. Communications chair, Jean Lefebvre led the project and our web master is currently working on formatting the bilingual version to be available by the time of the Annual Conference in June 2005.

A committee chaired by Zubin Austin to research and to formulate a proposal for Tenure Track for Clinical Faculty began its work by surveying the Faculties for information on procedures and policy at their respective institutions. At least three of the Faculties were being proactive in developing standards for tenure and promotion based on creative professional activity. The information that was collected was forwarded to Zubin and a draft document was made available for discussion at the midyear meeting. Still needed for the document were case studies to illustrate real life examples of successful tenure and promotion by clinical faculty and the criteria on which the decision was based. A more recent draft of the document was to be circulated for consideration at the Annual Council meeting in Saskatoon.

The awards book was updated based on recommendations received from the Awards Committee in June of 2004. Chairperson Lili Wang and President Sylvie Marleau worked with me to make changes in the wording to reduce any problems of interpreting the criteria and eligibility for some of the awards. In 2005, award applications in a few categories were considerably down from last year, and for future years Council may need to be more active in recruiting strong candidates from their respective Faculties. Most disappointing is the discontinuation of the Apotex sponsored Undergraduate Pharmacy Practice Research Award with 2005 being the final year for funding summer research projects for students in each of the Canadian Faculties.

The faculty visitation award to Rx & D Companies was active again in 2004 with Pollen Yeung of Dalhousie University as the sole award recipient. The AFPC office assists in making arrangements with the Companies visited. This award has not, traditionally, been very competitive and there were no applicants in either 2003 or 2005. Perhaps the nature of the Rx & D award requires review.

Dean Wayne Hindmarsh brought greetings to the AACP annual meeting in Salt Lake City in July. Neither President Sylvie Marleau nor myself were able to attend. Communication between the AFPC office and that of AACP continues to grow and we are investigating the potential of a joint meeting in Chicago in 2008.

Conference 2005 chair Roy Dobson (Saskatchewan) and myself represent AFPC on the organizing committee for the International Life Long Learning in Pharmacy Conference (LLLP) that is to be held in Saskatoon immediately following the AFPC annual conference and meetings. This is an added commitment to the organization of the AFPC meetings and Roy should be recognized for the

extra time that he has contributed to facilitating and organizing the sequential presentation of the two conferences.

It has been a pleasure for me to work with Roy Dobson on the program for the Annual Conference in Saskatoon June 24-26. Sponsorship for the Conference has gratifyingly been good. Merck Frosst Canada Ltd. has generously supported the Pharmacy Practice Research Symposium for a second straight year. AFPC is working towards offering the PPR Symposium on an annual basis as an integral part of the conference program. This goal of the Association simply recognizes the growth of this important discipline within our Faculties and the need for AFPC to provide a suitable forum for the exchange of timely information and novel research ideas.

At the end of May and early June of 2005, I attended the CPhA Conference in Quebec followed by the CSPS Conference in Toronto. At CPhA there was an opportunity to discuss the joint meeting of AFPC and CPhA in June 2006 in Edmonton. A coinciding day for clinical and pharmacy practice research presentations is now high on the agenda. At the CSPS conference, our proposal for AFPC to meet in Montreal with CSPS in 2007 was warmly received. Again a coinciding day of basic and practice research presentations appears to be an opportunity for each organization to attract additional attendees.

At the start of the 2004-2005 year there were two vacant positions requiring AFPC representatives to external organizations. I am pleased to report that both of these have now been filled. Yvonne Shevchuk of the University of Saskatchewan has agreed to be the AFPC representative to the Canadian Council on Continuing Education in Pharmacy (CCCEP). In the interim, Marie Rocchi Dean of the University of Toronto served as a temporary AFPC representative at the midyear meeting of CCCEP and a detailed report of that meeting was presented. Raimar Löebenbergh of the University of Alberta has agreed to represent AFPC over the next five years on the United States Pharmacopeial Convention. Raimar replaces Colin Briggs (Manitoba) who steps down as our representative at the end of June 2005.

In July of 2004, AFPC was contacted by the Secretariat of Palliative and End-of-Life Care (PEOLC) of Health Canada and invited to apply along with the Canadian Hospice Palliative Care Association for a seed grant to prepare a proposal for Educating Pharmacists in PEOLC. A grant of \$ 10,000 to AFPC was obtained on condition of submitting an acceptable proposal to the Interprofessional Education and Collaborative Patient Centered Practice Fund of Health Canada. The education of health professionals in PEOLC is seen as an excellent approach to changing the way we educate health providers so they will have the knowledge, skills and attitudes to work effectively in inter-professional teams in an evolving health care environment.

Agro Health Associates of Flamborough ON was retained as the writer and a core working-group consisting of Pat Trozzo of Manitoba, Larry Broadfield of Nova Scotia, Barry Power of CPhA, and myself met on a weekly basis with the writer. Other Faculty representatives identified to help prepare and to review the proposal were Rosemin Kassam (UBC), Terri Schindel (AB), Fred Rémillard (SK), Lalitha Raman-Wilms (Toronto), Sylvie Marleau (Montréal), Marjolaine Tremblay (Laval) and Rebecca Law (Memorial). I am most appreciative of the timely responses and the quality of information that I have received from these individuals. The proposal has now been tentatively accepted with the caveat that letters of support are still to be included. Deadline for the complete proposal is September 2005.

The Annual Meeting of the **Association of Deans of Pharmacy of Canada (ADPC)** was held in Quebec QC on October 4-7, 2004. The Aventis sponsored symposium dealt with strategies to lobby government. Stakeholder meetings were held with Susan Mansour, Past President of AFPC, Myrella

Roy, Executive Director of CSHP and John Pugsley, Registrar-Treasurer of PEBC. In discussions with Susan Mansour about the strategic plan, the terms of office for AFPC Executive members was raised with the question of whether longer terms might better serve the organization. The need for financial success of the Conference was highlighted, as was the suggestion to hold a joint meeting with AACP. Overall, the Deans were pleased with the level of communication offered by AFPC. Issues for CSHP included the shortage of hospital pharmacists, the difficulty in meeting preceptor commitments, the entry-level Pharm D, working towards the accreditation of pharmacy technician educational programs, and the need to incorporate safety concepts and principles into the curricula. PEBC concerns were largely related to the number of attempts allowed to write the qualifying exam and the opportunities for remediation.

Rita Caldwell (Dalhousie) was confirmed as President of ADPC for one more year and Franco Pasutto (Alberta) was confirmed as the AFPC representative for 2005. A decision was made to hold a strategic planning session for ADPC and this occurred in Cambridge ON, February 16, 2005 immediately following the Canadian Foundation for Pharmacy workshop. As a result of the planning session the Deans hosted a Forum and Workshop on the Future of Pharmacy Practice and Education on April 27, 2005 in Toronto. Approximately 70 stakeholders from a broad cross section of the profession were in attendance. The outcome of the forum was that in order for academia to respond to future trends and evolving responsibilities of the pharmacist, education will change to elevate the role of the pharmacist by enhancing their patient care expertise. Solutions for educational change included more interdisciplinary exposure, the integration of more experiential learning within the curriculum and working with preceptors to improve their qualifications and skills in order to develop best practice environments for pharmacy students to learn. The forum proved to be an excellent venue for the profession to provide realistic feedback to educators on how pharmacy education and training should respond to the perceived new roles of pharmacists. We look forward to the next workshop.

ADPC was invited in 2004 to join in the planning of a Canadian Academy of Health Sciences (CAHS). Dean Bob Sindelar of the University of British Columbia is serving as the pharmacy representative to the planning group. On September 13 and again on December 13, the planning group met in Toronto to discuss functions of the academy, membership criteria, and how to create the CAHS. Plans are to have an inaugural meeting of CAHS in Vancouver in September 2005.

President Rita Caldwell and myself attended the CACDS Exchange Conference in Ottawa on October 22, 2004 to present the SPEP report to the Pharmacy Committee of CACDS. This organization has been a major contributor towards funding the task force that prepared the SPEP report. While in Ottawa, acting Dean Linda Suveges and I met with CPhA over dinner to discuss academic issues of interest to CPhA.

The HRDSC sector study on the future needs for pharmacists and pharmacy technicians appears to be at a stalemate. CPhA has recently drafted a new proposal to be submitted to the Foreign Credential Recognition program on behalf of the pharmacy sector. AFPC/ADPC did participate in a teleconference on February 9, 2005 with the Centre for Education Statistics of Statistics Canada. The objective of the meeting was to determine and to prioritize what information was required to monitor the infrastructure of health programs and the flow of individuals through these programs to the health occupations. It was a very useful exercise and we will be reporting more on this as the project develops.

ADPC maintains data on enrollments and the numbers of entering students each year. There has been an increase of almost 25% in total enrollments at Canadian Pharmacy Faculties since the year 2000 and further expansion of enrollment is planned. A new Faculty of Pharmacy is to open at Waterloo

University by 2007. CPhA and NAPRA were recently provided with this data for publication and for a presentation to the Federal Standing Committee on Citizenship and Immigration.

Respectfully submitted,  
Frank S. Abbott, PhD  
June 25, 2005



# **PART 4.0**

## **AFPC FINANCIAL STATEMENTS**

**2005**

**ASSOCIATION OF FACULTIES OF  
PHARMACY OF CANADA**

Vancouver, B.C.

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FINANCIAL STATEMENTS

December 31, 2004

WOLRIGE MAHON *LLP*



**WOLRIGE MAHON**LLP  
Chartered Accountants

## AUDITORS' REPORT

To the Members of Association of Faculties of Pharmacy of Canada:

We have audited the balance sheet of the Association of Faculties of Pharmacy of Canada as at December 31, 2004 and the statements of revenue, expenditures and net assets for the year then ended. These financial statements are the responsibility of the Association's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Association as at December 31, 2004 and the results of its operations for the year then ended in accordance with Canadian generally accepted accounting principles.

The comparative figures as at December 31, 2003 and for the year then ended are based upon financial statements which were reported on by another auditor.

*"Wolrige Mahon LLP"*

CHARTERED ACCOUNTANTS

Vancouver, B.C.  
June 12, 2005

**ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA**

STATEMENT OF REVENUE, EXPENDITURES AND NET ASSETS

For the year ended December 31, 2004

	2004	2003
	\$	\$
<b>Revenue, Schedule 1</b>	<b>186,375</b>	173,895
<b>Expenditures, Schedule 2</b>	<b>178,819</b>	165,807
<b>Excess of revenue over expenditures</b>	<b>7,556</b>	8,088
Net assets, beginning	179,716	171,628
<b>Net assets, ending</b>	<b>187,272</b>	179,716

**ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA**

BALANCE SHEET

December 31, 2004

	2004	2003
	\$	\$
<b>Assets</b>		
Current		
Cash	47,714	46,013
Receivables	6,194	1,823
Prepays	490	-
	<u>54,398</u>	<u>47,836</u>
Investments (Note 4)	133,511	131,880
	<u>187,909</u>	<u>179,716</u>
<b>Liabilities</b>		
Current		
Payables and accruals	637	-
<b>Net Assets</b>	<b>187,272</b>	<b>179,716</b>
	<u>187,909</u>	<u>179,716</u>

Approved by Directors:

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## ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA

### NOTES

For the year ended December 31, 2004

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#### **Note 1 General**

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The Association of Faculties of Pharmacy of Canada is an association of faculties of pharmacy whose members are committed to the promotion and recognition of excellence in pharmacy education and scholarly activities.

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#### **Note 2 Significant Accounting Policies**

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##### **Use of Estimates**

The preparation of financial statements in conformity with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

##### **Investments**

The Association's investments are recorded at cost.

##### **Revenue Recognition**

The Association follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

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#### **Note 3 Financial Instruments**

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The fair value of all items that meet the definition of a financial instrument approximate their carrying values. These items include cash, investments, receivables, and payables and accruals. Unless otherwise stated, it is management's opinion that the Association is not exposed to significant credit, currency or interest rate risk arising from these financial instruments.

## ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA

### NOTES

For the year ended December 31, 2004

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#### Note 4 Investments

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	2004	2003
	\$	\$
CIBC GIC - Jan 2/08 4.3%	14,224	14,224
CIBC GIC - Jun 27/06 4.25%	20,229	20,229
CIBC GIC - Jun 27/07 3.75%	20,229	20,229
CIBC GIC - Oct 28/05 3.0%	20,000	20,000
CIBC GIC - Oct 28/04 2.6%	-	20,000
CIBC GIC - Oct 28/04 2.0%	-	37,198
CIBC GIC - Oct 30/06 2.15%	21,054	-
CIBC GIC - Oct 28/05 1.5%	37,775	-
	<hr/>	<hr/>
	133,511	131,880
	<hr/>	<hr/>

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#### Note 5 Statement of Cash Flows

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A statement of cash flows has not been prepared as it would not provide any additional information.

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#### Note 6 Comparative Figures

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Certain 2003 comparative figures have been reclassified to conform to the financial statement presentation adopted for 2004.

**ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA** Schedule 1

SCHEDULE OF REVENUE

For the year ended December 31, 2004

	2004	2003
	\$	\$
<b>Memberships</b>		
Faculty	75,025	73,291
Affiliate	19,000	18,000
Associate	600	525
<b>Awards</b>		
Apotex	30,000	40,000
AstraZeneca	3,000	3,000
Bristol-Meyers Squibb	-	944
C.F.P. student travel	10,000	10,000
C.F.P. best poster	1,000	1,000
GlaxoSmithKline	2,500	2,500
Janssen-Ortho	1,196	1,304
<b>Other</b>		
Special levy	13,500	-
Annual conference	12,831	968
Interest income	4,023	3,672
Rx & D grant	3,330	-
Merck Frosst Grant	3,000	-
Gain on sale of computer	-	1,500
History book sales	-	35
Miscellaneous income	7,370	17,156
	<b>186,375</b>	<b>173,895</b>



**ASSOCIATION OF FACULTIES OF PHARMACY OF CANADA** Schedule 2

SCHEDULE OF EXPENDITURES

For the year ended December 31, 2004

	2004	2003
	\$	\$
<b>Meetings</b>		
AGM council	25,506	23,591
Mid-Year council	13,858	13,089
AACP AGM	-	1,593
CCCEP	1,070	1,201
CFP/CACDS	629	-
ADPC & Rx & D	-	1,442
CPhA	185	-
President Travel to ADPC	588	-
Campus meeting, Ottawa	412	-
El Pharm D Symposium, Toronto	413	-
ADPC travel, Executive director	6,503	-
<b>Operating</b>		
Audit services	1,897	1,495
Bank charges	147	329
Computer expenses	-	392
Executive director-honorarium	40,467	40,833
Executive director-travel grant	2,586	2,142
Office supplies	419	541
Photocopies	-	42
Printing	841	429
Postage	309	284
Courier	62	39
Telephone and fax	967	2,078
Internet services	1,146	-
Website maintenance	3,483	5,069
Canada Revenue Agency	30	30
Miscellaneous	372	-
<b>Other</b>		
CCAPP	6,955	6,420
Rx & D	3,330	-
Task force SPEP	10,121	-
Human resources project	702	1,011
Compendium project	-	10,000
Office move	-	1,195
Pharm D educational committee	3,386	-
<b>Awards</b>		
Apotex scholarships	35,000	35,000
AstraZeneca	3,366	1,725
Bristol-Meyer Squibb	650	1,890
CFP travel grants	9,790	9,960
CFP poster awards	1,000	1,000
Janssen-Ortho	1,489	2,087
Grad student	1,140	900
	<b>178,819</b>	<b>165,807</b>

**AFPC STATEMENT OF INCOME  
AND EXPENSES**

**2004**

**AND**

**BUDGET**

**2005**

**AFPC**Association of Faculties of Pharmacy of Canada  
Association des Facultés de Pharmacie du Canada**AFPC BUDGET FOR 2005 WITH ACTUAL 2004**

<b>INCOME</b>	<b>2004 BUDGET</b>	<b>2004 ACTUAL</b>	<b>2005 BUDGET</b>
<b>Memberships</b>			
<b>FACULTY</b>	\$ 75,025.00	\$75,025.00	\$77,000.00
<b>AFFILIATE</b>	\$ 18,000.00	\$19,000.00	\$25,200.00
<b>ASSOCIATE</b>	\$ 600.00	\$600.00	\$600.00
<b>TOTAL</b>	<b>\$ 93,625.00</b>	<b>\$94,625.00</b>	<b>\$102,800.00</b>
<b>OTHER INCOME</b>			
Special Levy for 2004 midyear mtg	\$ 13,500.00	\$13,500.00	
ANNUAL CONF	\$ 12,000.00	\$12,831.19	\$12,000.00
Hist. Book grant			
Sales			
INTEREST	\$ 3,500.00	\$4,023.05	\$4,000.00
Rx & D GRANT	\$ 4,000.00	\$3,330.13	\$4,000.00
Merck Frosst Grant for Educational Outcomes, Entry-level Pharm D		\$3,000.00	
Web Site Advertising			\$300.00
	<b>\$ 33,000.00</b>	<b>\$36,684.37</b>	<b>\$20,300.00</b>
<b>Awards</b>			
Apotex	\$ 40,000.00	\$30,000.00	\$45,000.00
AstraZeneca	\$ 3,000.00	\$3,000.00	\$3,000.00
Bristol-Myers Sq.	\$ 1,000.00		\$1,000.00
CFP Student travel	\$ 10,000.00	\$ 10,000.00	\$10,000.00
CFP Best Poster	\$ 1,000.00	\$ 1,000.00	\$1,000.00
GlaxoSmithKline	\$ 2,500.00	\$ 2,500.00	\$2,500.00
Pfizer	\$ 1,500.00	\$ 1,196.16	\$1,500.00
New Grants			\$10,000.00
	<b>\$ 59,000.00</b>	<b>\$ 47,696.16</b>	<b>\$74,000.00</b>
<b>Miscellaneous</b>			
Task Force SPEP	\$ 18,000.00		\$18,000.00
Hotel-conference-rtn of deposit	\$ 5,000.00	\$ 5,000.00	
	<b>\$ 23,000.00</b>	<b>\$ 5,000.00</b>	<b>\$18,000.00</b>
<b>TOTAL INCOME</b>	<b>\$ 208,625.00</b>	<b>\$184,005.53</b>	<b>\$215,100.00</b>

<b>EXPENSES</b>	<b>2004 BUDGET</b>	<b>2004 ACTUAL</b>	<b>2005 BUDGET</b>
<b>Meeting Expenses</b>			
AGM Council	\$ 24,000.00	\$25,504.68	\$26,000.00
Mid-year Coun.	\$ 13,500.00	\$ 13,858.18	\$14,000.00
AACP AGM	\$ 1,700.00	\$0.00	\$1,700.00
CCCEP	\$ 1,200.00	\$1,070.00	\$1,200.00
CFP/CACDS Global Innov		\$628.84	
CPhA National Forum		\$184.68	\$500.00
President travel to ADPC		\$587.79	\$1,500.00
COMPUS mtg, Ottawa		\$411.60	
EIPharmDSymposToronto		\$413.30	
ADPC Travel, Ex Dir	\$ 3,000.00	\$ 6,503.41	\$4,500.00
<b>Total</b>	<b>\$ 43,400.00</b>	<b>\$49,162.48</b>	<b>\$49,400.00</b>
<b>Operating Expenses</b>			
Audit services	\$ 1,500.00	\$1,897.21	\$2,000.00
Bank charges	\$ 300.00	\$ 146.79	\$150.00
Computer expenses	\$ 500.00	\$ -	\$500.00
Exec. Dir. Honor.	\$ 40,000.00	\$ 40,466.67	42,800.00
E.D. travel grant	\$ 3,000.00	\$ 2,585.67	\$3,000.00
Office Supplies	\$ 600.00	\$418.77	\$500.00
Photocopies	\$ 50.00	\$ -	\$50.00
Printing	\$ 500.00	\$ 460.67	\$500.00
Postage	\$ 300.00	\$309.20	\$350.00
Courier	\$ 100.00	\$62.48	\$100.00
Telephone/fax	\$ 2,500.00	\$967.10	\$2,000.00
Internet Services	\$ 1,200.00	\$ 1,146.16	\$1,200.00
Web site maint.	\$ 5,000.00	\$3,482.68	\$7,000.00
French Website Development			\$5,000.00
Revenue Canada	\$ 30.00	\$ 30.00	\$30.00
Miscellaneous		\$ 372.04	\$500.00
<b>Total - operating</b>	<b>\$ 55,580.00</b>	<b>\$ 52,345.44</b>	<b>\$65,680.00</b>
<b>Other Expenses</b>			
CCAPP	\$ 6,955.00	\$6,955.00	\$6,955.00
Rx&D grant	\$ 4,000.00	\$3,330.13	\$4,000.00
Human Res. Proj.(HRDC)**	\$ 5,000.00	\$ 702.16	\$5,000.00
Task Force SPEP	\$ 25,000.00	\$ 10,121.41	\$10,000.00
Entry Level Pharm D Educational Outcomes Committee		\$3,385.82	
Conference Hotel Deposit	\$ 5,000.00	\$ -	\$5,000.00
<b>Total Other Expenses</b>	<b>\$ 45,955.00</b>	<b>\$ 24,494.52</b>	<b>\$30,955.00</b>

#### **Awards**

Apotex	\$ 45,000.00	\$ 30,000.00	\$45,000.00
Apotex Award brought forward to 2004		\$ 5,000.00	
AstraZeneca	\$ 3,000.00	\$3,365.87	\$3,000.00
Bristol-Myers Sq.	\$ 1,800.00	\$650.00	\$2,000.00
CFP travel grants	\$ 10,000.00	\$9,790.00	\$10,000.00
CFP best poster	\$ 1,000.00	\$1,000.00	\$1,000.00
Janssen-Ortho	\$ 2,000.00	\$ 1,488.75	\$2,000.00
GSK grad student	\$ 2,500.00	\$ 1,140.00	\$2,500.00
New Grants			\$9,000.00
<b>Total Awards Expenses</b>	<b>\$ 65,300.00</b>	<b>\$ 52,434.62</b>	<b>\$74,500.00</b>
<b>TOTAL EXPENSES</b>	<b>\$ 210,735.00</b>	<b>\$178,437.06</b>	<b>\$220,535.00</b>
Surplus/Deficit	\$ 2,890.00	\$ 5,568.47	(\$5,435.00)

Notes: \*\* Total commitment to HRDC is \$15,000 (2003-2005)

# **PART 5.0**

## **AFPC POSITION PAPER ON STANDARDS FOR CLINICAL FACULTY TENURE TRACK**

**2005**

**Promotion and Tenure:**  
**Clinical Faculty at Schools of Pharmacy in Canada**

**Zubin Austin PhD and Paul A.M. Gregory MLS**

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**DRAFT ONLY: This paper is currently under review for publication and should not be quoted without the expressed consent of the authors.**

## **Abstract**

As a result of an evolution in roles and responsibilities of pharmacists, pharmacy education in North America has become more clinical in nature. In order to meet teaching and research requirements, Canadian pharmacy schools are hiring non-traditional faculty members who possess advanced clinical degrees and training rather than traditional academic qualifications. Policies with respect to tenure and promotion have not kept pace with these changes in hiring practices. Research was undertaken to examine the application of tenure and promotion policies and guidelines to clinical pharmacy faculty members across Canada. Document review was complemented by key informant interviews. A series of themes emerged indicating areas of concern regarding application of traditional “arts and science” tenuring/promotion policies for clinical pharmacy faculty members. Based on these themes, a model for development of guidelines to acknowledge the value and importance of creative scholarly activity within pharmacy (“the 5 C’s”) is proposed and discussed.

*Keywords:* Pharmacy education, Clinical Pharmacy, Clinical Faculty, Tenure and Promotion



## **Background**

Schools of pharmacy in Canada are uniquely diverse environments, encompassing a broad range of activities relevant to the mission of pharmacy education and research. As a clinical profession situated within a variety of scientific disciplines, pharmacy education and research is of necessity broad, embracing fields such as behavioural sciences, medicinal chemistry, physiology, and jurisprudence. This breadth provides a uniquely enriching academic experience for both undergraduate and graduate students, who take courses in subjects ranging from physical chemistry to psychology. It also provides an environment in which interdisciplinarity may flourish amongst researchers and scholars.

As a clinical profession, pharmacy education has evolved considerably over the past decade, in response to expanding roles for pharmacists in the health care system, and on-going evolution in scopes of practice (Popovich and Abel, 2002). Pharmacists practicing in hospital and community settings participate in a variety of interprofessional health care teams, and are more directly involved in patient care and clinical decision making than in the past. In order to prepare future practitioners for this clinical, patient-centred role, educational standards and expectations have evolved. Across North America, there is now a greater emphasis on clinical teaching, experiential learning, and involvement of practitioner-educators at both the undergraduate and graduate levels (Barnett and Matthews, 1998).

As a result, faculty members with non-traditional academic qualifications and backgrounds are required in order to meet teaching requirements of these evolving curricula. While, in the past, the majority of faculty members recruited and hired in schools of pharmacy across Canada were PhD graduates with post-doctoral fellowships, many schools of pharmacy today must recruit practitioners with advanced clinical degrees (Pharm D.) with clinical residencies or fellowships (Holstad et al,

2000). Similar to schools of medicine, the role of clinician-educator-scholars is increasing as the amount of clinical education in the curriculum increases.

Over the past decade, the clinical component of a typical undergraduate pharmacy program has increased significantly, now accounting for approximately 30-35% of coursework in programs reviewed by the Canadian Council for Accreditation of Pharmacy Programs. At the graduate level, increasing numbers of students are now studying in the areas of pharmacy education, pharmacy practice, social/administrative pharmacy, and clinical sciences.

As university-based institutions, schools of pharmacy operate within relatively traditional paradigms of teaching, research, service, and scholarly activity. Tenure and promotion guidelines established in this “Arts-and-Science” paradigm may not be entirely applicable to clinical faculty involved in pharmacy education and research, due to the nature of their academic appointments, the type of scholarly activity in which they are engaged, and the output of their work (Ritchie et al, 1999). As a result, these individuals may not be adequately recognized for their contributions to the profession and to the University. Importantly, the definitions of “excellence” that underlie tenure and promotion guidelines and that were established within the traditional PhD + post-doctoral fellowship paradigm may not be broad enough to encompass the vital role played by individuals with a Pharm D + residency/clinical fellowship (Holstad et al, 2000).

As the focus of pharmacy education and research continues to evolve towards patient-focused practice, there will be an increasing number of faculty members who will be hired without the traditional PhD + post-doctoral fellowship qualification. Issues of recruitment, retention, and acknowledgement will need to be addressed in order to ensure the teaching and research agenda of pharmacy programs across country can continue to thrive (Wolfgang, Gupchup and Plake, 1995). In order to address these important questions, it is necessary to first understand how tenure and

promotion policies and procedures are currently applied to clinical faculty with non-traditional academic qualifications at schools of pharmacy across Canada.

**Research Objective:**

The objective of this research was to describe how schools of pharmacy across Canada apply existing guidelines, criteria, policies, and procedures related to tenure and promotion decisions in the context of clinical faculty members. For the purpose of this research, clinical faculty members were defined as those individuals whose primary teaching and scholarly activity is situated with the domain of pharmacy practice at an accredited school of pharmacy, and who have full-time appointments at a university-based school of pharmacy in Canada.

**Research Method:**

Four major sources of information were identified as relevant for this research:

- a) Publicly available, web-based documents outlining criteria for tenure and promotion at the University level, (frequently contained within memoranda of understanding between a university and a faculty association or union);
- b) Internal guidelines, policies, procedures and practices that are documented at the school or faculty of pharmacy, and while publicly accessible may not be readily retrievable;
- c) Key informant interviews with academic administrators involved in tenure and promotion decisions; and
- d) Key informant interviews with clinical faculty members (tenured, tenure-track, and non-tenure track)

## Results

There are a total of nine pharmacy schools in Canada, all of which are associated with major medical-doctoral universities across the country (Memorial University in St. John's, Dalhousie University in Halifax, Universite Laval in Quebec, Universite de Montreal, University of Toronto, University of Manitoba in Winnipeg, University of Saskatchewan in Saskatoon, University of Alberta in Edmonton, and University of British Columbia in Vancouver). All universities have established tenure and promotion guidelines, which are freely available on the Internet.

Key informants (particularly academic administrators) indicated that some schools of pharmacy in Canada have developed alternative criteria, or faculty-specific policies and procedures regarding tenure and promotion decisions to account for the differing scholarship of clinical faculty members. Each school of pharmacy was contacted and asked to provide copies of any faculty-specific documentation. In addition, key informants (both administrators and clinical faculty) were interviewed to provide context for interpretation of written documents, and to provide perspective on the way in which these procedures and policies are applied in the case of clinical faculty members.

Analysis of written documents (at the University- and Faculty-level) was guided by key informant interviews, and key informants were asked to provide their interpretation of ambiguous documents. From this analysis, a series of common themes emerged related to the way promotion and tenure decisions are currently made at schools of pharmacy across Canada in the context of clinical and non-clinical tenure-track faculty:

### *Tenure and promotion are awarded, not given*

Tenure is not a right, nor is it given simply on the basis of attendance or longevity. In all cases, tenure is seen as an award based on the judgment of peers. As such, tenure is neither automatic, nor certain. In all cases, structured criteria exist to evaluate a candidate's suitability for this award.

Similarly, promotion in all cases is based upon demonstrated attainment of specific goals, and is not a function of seniority alone.

*a) Tenure and promotion are based on “excellence”*

All published documents reviewed used similar language to describe the basis of tenure and promotion awards. Simple engagement in research, teaching, service or scholarly work confers neither tenure nor promotion. A qualitative, comparative assessment of output is required in all cases, one that establishes the individual’s work as meaningful, unique, and important within the context of that individual’s discipline. Awards are not made simply on the basis of quantity of work (be it number of grants received, dollar amounts of grants, number of papers published, or other objective measurements of output). Rather, decisions are made on the basis of a specific contribution to the field, and the judgment by others that this contribution has real meaning.

*b) Determination of “excellence” is made by one’s peers in the field*

The notion of excellence is at the heart of both tenure and promotion decisions in all schools of pharmacy in Canada. The determination of excellence involves a subjective component. Published guidelines are generally silent on this issue; thus excellence is neither strictly qualitative nor quantitative in nature. In most cases, there is an acknowledgement that those who are intimately involved in the field, not those who are simply familiar with it, ought to make the determination of quality, impact, and excellence.

Interviews with key informants (particularly those involved in tenure and promotion decisions) indicate that the diverse interests and experiences of faculty members in schools of pharmacy may, on occasion make it difficult to define excellence. For example, in some fields (such as medicinal chemistry), dissemination of scholarship through peer reviewed journals is a well-accepted measure of productivity, and in these cases, “excellence” has been quantified in a way that includes number of

papers published, page-counts, and impact-factors calculated based on journals. However, such quantitative techniques are increasingly questioned in many fields (especially clinical areas), particularly the use of impact factors which (in an environment of freely-available information through the internet, and the widespread use of web-based journals) are becoming increasingly difficult to defend.

Defining one's peers becomes a critical activity in determining the excellence of one's work, particularly in clinical sciences, and in areas where interdisciplinarity or interprofessionalism is becoming more common place. Tenure and promotion guidelines generally do not address these issues explicitly and do not necessarily provide a framework for including non-tenured or clinical individuals in the final determination of excellence, although in all cases non-tenured or clinical colleagues may be encouraged to provide supportive letters or documentation on behalf of the candidate.

*c) Tenure and promotion decisions should not affect academic freedom.*

In all universities in Canada, all faculty members (regardless of their formal status within the institution) are free to pursue inquiry pursuant to general institutional guidelines. All universities with schools of pharmacy have explicit statements encouraging faculty members to be innovative and expansive in their scholarship, teaching, and research. However, key informant interviews suggest that most individuals without tenure feel much more constrained in their ability to pursue research that is not deemed "safe" or "productive". Consequently, non-tenured individuals may be more likely than tenured individuals to compromise personal research interests in order to demonstrate productivity and contribution, although this was not quantified during any interviews.

d) *Tenure does not mean a “job for life”*

Tenure neither permanently guarantees nor secures an individual’s position. Tenured faculty at all schools must still demonstrate productivity and contribution in a meaningful manner over the course of their career. However, tenure does free an individual from the burden of regular performance reviews by those unfamiliar with their field, and does provide a measure of security especially during times of significant financial uncertainty or instability for an institution.

e) *Tenure and promotion are an important and valued acknowledgement of accomplishment*

Ultimately, as described by key informants, the value of both tenure and promotion within a school of pharmacy is the public acknowledgement of the quality of one’s work within the institution and the broader professional community. Tenure and promotion confer prestige and honour, and provides a level of respectability and acceptance within the academic community.

Importantly, there are several schools of pharmacy that (consistent with their university policies) offer separate “streams” for clinical and teaching faculty. For example, the University of Toronto has developed a lecturer stream, the Universite de Montreal has developed a “clinical professor” stream, while at the University of British Columbia, there exists an “instructor stream”. In these cases, an individual may be “promoted”, for example, from lecturer/instructor to senior lecturer/instructor, and there is language in these documents that describe this process as comparable to tenure. In other institutions (such as Memorial University, or the University of Manitoba), such separate and distinct streams are generally not utilized for full-time academic appointments.

Key informants, particularly clinical faculty members in such streams, point to the potential issue with such institutional policies. As one informant noted, “As the sad history of the world shows us, separate but equal seldom really is...(we) are second class citizens within the (faculty), despite what

the policies say.” The existence of two separate streams for clinical and non-clinical faculty was identified by many key informants as problematic and potentially divisive.

*f) Tenure enables stability and longevity within the Faculty*

As with many health care professions, there currently exists a strong demand for pharmacists in community, hospital, and industrial settings. Individuals who are eligible for clinical faculty positions are frequently highly trained and accomplished, and would therefore be considered prime recruits for non-academic settings (Orlando et al, 2000). Amongst health care professions in Canada, pharmacy may be viewed as somewhat unique insofar as the majority of pharmacists work in the private, not public, sector where salaries and benefits are highly responsive to market forces. Key informant academic administrators noted that many capable clinical faculty members may enjoy greater financial opportunities outside academia, and have identified tenure in particular as an attractive non-financial incentive to encourage long-term commitment to the University. From this perspective, tenure of clinical faculty is an important component of academic human resources planning, and confers important advantages for the institution despite the significant long-term costs in salary and benefits.

Most clinical faculty members select academic careers due to the opportunity to teach, and engage in scholarly activity and community service, and recognize that in making this decision, there may be some personal financial disadvantage. The need for tenure recognition amongst clinical faculty key informants was not universal, with some expressing the opinion that tenure is not relevant, so long as the opportunity to freely engage in activities of interest continue to exist. For others, tenure provides a measure of certainty and stability that is highly desired. Importantly, the North American market for academic pharmacists is expanding quickly; ten new schools of pharmacy have opened in the United States in the last decade alone. In many cases, these schools are not located in publicly funded universities; in many cases, they may provide both first-rate academic work environments as



well as attractive benefits, including salary, and clear and equal tenure/promotion guidelines for clinical faculty. Anecdotally, key informants report the unfortunate loss of potentially gifted academic pharmacists to these American schools.

*g) Frequently, tenure decisions are made at the University level, based upon recommendations made at the Faculty level.*

In general, tenure is awarded by the University, upon receiving a positive recommendation from the Faculty. As such, ultimate decisions regarding clinical faculty members may be made by individuals who are not necessarily aware of the role of clinical faculty within pharmacy education, research, and scholarship. While there were no specific examples of university administration over-riding a Faculty's tenure recommendation, key informants did cite circumstances under which University administrators unfamiliar with the unique nature of clinical faculty appointments have questioned promotion decisions. Academic administrator key informants indicated the importance of establishing clear lines of communication with University administration to ensure clarity and consistency in interpretation and application of rules governing both tenure and promotion, and for advocating on behalf of clinical faculty members.

## DISCUSSION

Clinical faculty members in schools of pharmacy are involved in a variety of scholarly activities, including curriculum development, program planning and evaluation, pharmacoeconomic evaluation, practice research, and establishing policies and regulations related to licensure and professional practice. These activities have fundamentally shaped the profession of pharmacy at the local, national, and international levels, and have helped direct the evolution of pharmacy towards a more patient-centred practice. They also contribute significantly to delivery of curriculum using novel educational methods such as simulated patient interactions, case-study seminars, and problem-based learning tutorials. As pharmacy schools increase recruitment of full-time clinical faculty members with non-traditional qualifications, tenure and promotion guidelines for more traditional research-intensive faculty may not be applicable (Anderson et al, 1998). As such tenure and promotion may appear difficult and vexatious, and clinical faculty recruitment may be compromised, particularly given attractive opportunities in practice or in the private sector.

In balancing the need for rigorous, fair, and consistent guidelines for tenure that reward excellence, with the need to acknowledge differences in scholarship, many key informants echoed a common theme related to “separate but equal” tracks for clinical and non-clinical tenure. In general, most believed that the system currently utilized in many universities of distinguishing between “clinical” professors and other professors was pejorative and unfortunately set-up a two-tier system within the academy. While this system may have initially been crafted as a compromise, and does afford many important rights, responsibilities and protections to those in the clinical stream, the aspirations of many clinical faculty members to be fully acknowledged and recognized within the University governance structure appears to be stifled.

Increasingly, schools of pharmacy are interested in acknowledging creative scholarly activity, both in traditional bench-based research and in clinical sciences and practice. While most schools have formal or informal practices to define such activities, the determination of excellence in creative scholarly activity may often appear arbitrary. In particular, since this determination is generally made by tenured faculty members who received tenure through traditional criteria, there may be difficulties in truly recognizing the contribution and importance of certain kinds of scholarly work.

We propose a model for determination of excellence related to promotion and tenure decisions based on the “5 Cs” (see Table 1). While none of these criteria in and of themselves is unique or contentious, framing them within the context of promotion and tenure decisions for all faculty members (not just clinical faculty) provides an opportunity to address currently expressed concerns regarding the two-tier nature of academic pharmacy in Canada.

While the principles articulate in Table 1 may be broadly acceptable within academic pharmacy, it is important to recognize that significant structural impediments currently exist to fully accepting creative scholarly activity within the tenuring and promotion processes for clinical and non-clinical faculty alike:

a) *Frequently, tenure decisions are made at the University level, based upon recommendation made at the Faculty level*

University-level administrators unfamiliar with the unique nature of academic pharmacy and the need for additional guidelines for creative scholarly activity may question faculty-based tenure and promotion recommendations. Senior academic officers within the Faculty need to communicate clearly and consistently, and emphasize the following points:

- Faculties of pharmacy across North America continue to take the leadership role in advancing pharmacy towards patient-centred practice. In large part, this is due to the contribution of

clinical faculty members at teaching sites who demonstrate innovative patient care through implementation of new programs and interprofessional, multi-disciplinary collaboration

- The evolving nature of patient care practice (particularly in primary care) requires significant scholarship in articulation of practice models, standards of practice, educational and health-related outcomes that may not necessarily follow traditional research paradigms such as randomized, double-blinded, placebo controlled trials. This scholarship must be multidisciplinary, including (for example), critical sociological theories and perspectives.
- Development of new practices and evolution in the profession will require “best practice exemplars”, role models, and pharmacy practice research that may utilize n-of-1 or case-study methodologies involving mixed quantitative and qualitative research methods
- Traditional methods for evaluating excellence may unfairly disadvantage certain individuals, insofar as most tenure and promotion committees are composed of individuals who themselves have achieved tenure through traditional means. While, in most cases, the structure of tenure review and promotion committees is negotiated by memorandum of understanding with Faculty Associations (and therefore not under the control of either the Faculty or the University directly, these committees may give latitude to the candidate by, for example, soliciting letters from non-tenured, high-ranking individuals in government, regulatory bodies, and professional associations at the national/international level
- Careful constitution of the review committee is necessary to ensure each member is objective and open to evaluation of excellence within the context of creative scholarly activity.
- Education of external members of the committee (who may not be pharmacists or affiliated with a school of pharmacy) is necessary. These individuals may not necessarily appreciate the importance of the individual’s work within the context of pharmacy practice and education

- Development of a ‘critical mass’ of tenured individuals who have succeeded through creative scholarly activity is essential so that, in the future, it will be truly possible to have peer-based evaluation.

*b) Faculty development to support candidates for tenure/promotion*

Deans and associate deans must ensure that each faculty member is provided with the tools necessary to be successful for tenure and promotion (Ritchie et al, 1999). Currently, there appears to be wide variability across Canada in terms of central administrative support for candidates. For example, in some universities, generous ‘start-up’ financial packages may be awarded, while in others, senior mentors are appointed. No school of pharmacy has currently developed a “model portfolio” for candidates to utilize in developing their own case for tenure and promotion.

*c) Development of a pan-Canadian network to support tenure/promotion through creative scholarly activity*

Existing organizations (such as the Association of Faculties of Pharmacy of Canada) should facilitate development of a pan-Canadian network of faculty mentors to assist candidates in developing portfolios, and to assist universities in identifying appropriate individuals who may be able to provide informed expert review letters to tenure/promotion committees. Additionally, there is a need to advocate at the national level with other national organizations (such as the Society for Teaching and Learning in Higher Education), to connect candidates to others outside pharmacy who may provide collegial support, or letters of reference to tenure and promotion committees.

## CONCLUSIONS

The importance of clinical faculty (including educational and practice researchers, practitioners, and other non-traditional academics) within schools of pharmacy in Canada is clear: these individuals have helped push pharmacy practice in new directions that have had broad influence on practice and health policy and outcomes (Harms, 1983). Formal recognition of the significance of this work, through the awarding of tenure, is highly desired to ensure stability within the Faculty, and to encourage creativity, contribution and collaboration. Formal acknowledgement of such contributions through promotion is essential to ensure on-going commitment to the institution and the profession (Orlando et al, 2000).

We have described a model (the 5 Cs) to assist schools of pharmacy and universities in interpreting the work of non-traditional scholars (whether they are clinical faculty or not), in the context of promotion and tenure decisions. Such decisions are amongst the most important made within an academic setting; the “arts and science” model, while effective for some, may not be applicable to all pharmacy academics. This model is in no way presented as “the final word”; rather it is presented in the hopes that interest in acknowledging the contribution of clinical faculty in schools of pharmacy will increase, and commensurate institutional changes will occur to support fuller inclusion of all faculty within the academic pharmacy community. As such, this paper is a springboard for broader discussion and debate.

As the role of the pharmacist in health care continues to evolve and expand, Canadians will become more reliant upon their contribution to optimizing utilization of scarce resources, as well as positive health outcomes. Education for pharmacy students has evolved considerably over the past decade, as has the need for innovation in scholarship to support practice advancement. In recognizing the past, present and future contributions of clinical faculty, schools of pharmacy in Canada can distinguish

themselves internationally, and continue to provide leadership in the areas of pharmacy education, practice, research, and scholarship.

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Table 1: The 5 Cs: Proposed Criteria for Tenure and Promotion within Schools of Pharmacy in Canada

**General Principles:**

- 1) Guidelines should be applied and available to all faculty members, not simply clinical faculty members.
- 2) The notion of “separate but equal” tracks for faculty members should be challenged.
- 3) Three major categories of creative scholarly activities may be identified, in descending order of importance and weighting:
  - a) Innovations brought to the field of study or practice
  - b) Contributions to the development of the field of study or practice
  - c) Exemplary work within the field of study or practice

**Application of General Principles:**

- 1) Innovative classroom teaching, while important, requires evidence of its impact in other educational settings beyond the individual’s own institution.
- 2) Administrative activity (including university or community responsibilities), while important, requires evidence of its impact on the profession or society, beyond the individual’s own institution
- 3) Evidence for creative scholarly activity must be solicited from a wide variety of credible sources, and should not be limited to, for example, number and dollar amount of grants received, number of papers published in peer reviewed journals, or ‘impact factor’ of journals publishing the candidate’s work. While these may be included and offered as evidence, other credible sources of evidence must be accepted.

**Criteria for Evaluating Excellence in Creative Scholarly Activity:**

1. *Creativity:* Originality of thought is valued more highly than originality of application or implementation. Development of a conceptual innovation is more important than successfully introducing another person’s innovation.
2. *Continuity:* Long-term potential contribution of the candidate and his/her work, and the ability of the candidate to demonstrate productive innovation over the course of a career must be considered. The longevity of the innovation itself, while important, is less important than the anticipated further contributions of the individual.
3. *Contribution:* Evaluation of impact of creative scholarly activity must be undertaken by those who are familiar with the work and its affects within the appropriate settings. As a result, basic scientists should not judge clinical faculty members’ work or vice-versa, unless there is a contextually specific reason for doing so. Traditional evaluative tools such as journal impact ratings must be contextualized, particularly in the clinical sciences where most journals are freely available on the internet and therefore calculations of “impact” may be problematic.
4. *Collaboration:* Creative scholarly activity should not occur in isolation; rather, an integral feature of such activity is the extent to which it involves others in a collaborative (frequently multi-disciplinary or interprofessional) manner. Evidenc of collaboration and collegiality broadens the impact of the activity, and provides an opportunity for further development and refinement of ideas and innovations. Importantly, collaborative (particularly interprofessional) work may involve significant contributions from many individuals, not all of whom may be recognized as principal investigators. Traditional evaluation of grants in terms of principal investigator status need to be reconsidered, with a specific view to the nature of the collaboration and the real value of the candidate’s contribution to the overall success of the initiative.

5. *Commitment:* Emphasis on scholarly activity should in no way dilute or diminish the notion of excellence. Commitment to the field of study or practice may be demonstrated through active engagement within that community of scholars, and the broader community. Evidence for commitment to advancement, excellence, and innovation may be solicited from non-traditional sources familiar with the importance of the candidate's work.

**[Appendix I: Review of current tenuring/promotion policies and procedures in pharmacy schools in Canada](http://afpc.info/downloads/1/AppendixICurrentPoliciesTenuringCanada1.doc)**

<http://afpc.info/downloads/1/AppendixICurrentPoliciesTenuringCanada1.doc>

**[APPENDIX II: Tenure Assessment Matrix for Creative Professional Activities/Clinical Faculty](http://afpc.info/downloads/1/AppendixIIAssessmentMatrixTenure1.doc)**

<http://afpc.info/downloads/1/AppendixIIAssessmentMatrixTenure1.doc>