



**Notes for Remarks by Donnie Edwards, Chair**

**Ontario Pharmacists' Association**

**Topic: Team building for Collaborative Care: Are We There Yet?**

**Wednesday, May 16, 2007**

Thank you for the introduction and thank you for the opportunity to speak to what I see is as a very enlightened audience.

I say enlightened, because the recent trend in health care is toward more collaboration and integration among health providers. No better enlightened venue exists at this moment than here among Family Health Teams.

My role here today, notwithstanding that I am the Chair of an Association representing the views and interests of 10,000 pharmacists in this province and, that we have an opinion that seemingly matters, is to give you a perspective of what pharmacists are doing in the realm of collaboration and integration.

At the outset, let me state that OPA was one of the first health stakeholder organizations that embraced the initiative of Family Health Teams. We have made formal policy statements that reflect our support for this kind of collaboration and I am pleased that several FHTs have agreed and are using pharmacists to that end.

But, as pharmacists, we believe there is more we can do.

I want to further enlighten you as to what we, at OPA, are doing on behalf of our membership.

Before I do that, though, permit me a stream of consciousness to exorcise a demon.

Queen Elizabeth the second spoke of her annus horribulus a few years back. I think I can safely say that the past year for pharmacists can be summed up pretty much in the same way.

The implementation of the government's Transparent Drug System for Patients Act is now underway and it's been a tough road for us.

There are aspects of this Legislation that have really challenged the viability of pharmacy in this province. However, we're working closely with the Ministry to resolve many of the niggling issues of any implementation. And I can honestly say that I am encouraged by the attitude of the Ministry to deal with these issues.

I also have to admit, though, that there are aspects of this Legislation that we, as a professional Association, openly endorse.

For those who have no idea what I'm talking about at all, I want to provide a brief glimpse.

The government introduced Legislation in April of 2006 that radically changed the drug benefit system in this province. The premise was clear – they said, "let's us, as government, leverage the 3.5 billion dollar drug program to get better access to drugs and better pricing for lifestyle drugs for patients".

This Legislation, the most ambitious in Canada, has paved the way for substantial change in the Ontario Drug Benefit Program and, in fact, the private sector.

In a word, it's a change for our profession and a tough challenge for our business.

Over the last two years, all of us in health care in Ontario have been involved in a massive process of change within the context of what the government calls its health transformation agenda.

We were challenged as health care providers – pharmacists, doctors, nurses, hospitals and others – to put the patient at the centre of what we do.

The issues in health care may be easily construed to be mainly economic in nature; they are of great concern to governments, the financial industry, investors, manufacturers, and to health care stakeholders, including hospitals, physicians, and nurses. But at the end of the day, those issues really are about the health and quality of life of people. Your family, your aging parent, your child.

As a major stakeholder, we cannot and will not dwell on should of, could of, would of.

The government has a mandate to clearly ensure the sustainability of the health system including its drug budget and we, as pharmacists, as health care stakeholders, have an obligation to help in this kind of change.

This is by no means a change limited to Ontario; it's truly a made-in-Canada issue as we search for ways to refine and improve our unique national health care system and ensure its continued sustainability and accessibility.

As pharmacists, we at OPA are encouraged and delighted to see significant progress in Ontario over the past two years toward integration and collaboration. But there is much left to do.

It's clear that we and our fellow health care providers simply have to step up with a real sense of commitment and priority, put our collective thinking on the table and fix what continues to be broken in this system.

Today, there is a parallel shift occurring in the relationship between OPA and our physician colleagues at the Ontario Medical Association and the College of Family Physicians.

Our interactions around medication management are poised to be hugely productive, driving common policies and approaches that place the patient appropriately at the centre.

When CEO, Jonathan Guss, came to the OMA, he started a fiscal realities committee where we have quickly and cohesively come to appreciate that the recurring central

issue in integration and collaboration is – exactly as we’re finding with Primary Care Teams – managing patients’ medications.

That puts pharmacists squarely at the centre of what patients need.

It is in this context that we were pleased that the Government, through the Transparent Drug System for Patients Act, established Professional Services for Pharmacists.

As an initiative in health care, professional services have unparalleled potential to improve patient health outcomes, reduce stresses on other parts of the health system, provide high return on investment for government, and offer new practice and business opportunities for pharmacists.

The government made an initial funding commitment of \$50 million –for fiscal 2007-08 – we view this as a good start.

At the same time, the government created a Pharmacy Council. The Co-Chairs are the Ministry of Health and OPA’s CEO, Marc Kealey. On it also sit Ministry officials, community pharmacists, specialist pharmacists, hospital pharmacists, a patient group and a physician.

This is an exciting initiative for OPA, because similar to the work we are undertaking with the physicians, hospitals and nurses in this province, we, as pharmacists, have fought for almost 2 decades to have a formal policy voice for the input into the drug program and its impact on patient care and the health system.

The work of the Pharmacy Council has been very innovative. Its mandate is to develop plans for the use of the Professional Services dollars I spoke of earlier.

One of the products recently endorsed by it is the Meds Check program which, in effect is the first program in Canada to coordinate the work of physicians and pharmacists on the one thing that their patients ask about most – their prescription medications.

And it is this kind of initiative that is impacting on patient care right now – today. In fact, at my pharmacy in Port Colborne, I have dedicated a pharmacist every day to help our patients with their meds. And, in turn, this is of major benefit to physicians and hospitals who strive to provide the best care they can with as much stress as they have.

We're fortunate in the Niagara region to have good innovative health care providers. The FHT in St. Catharines is widely viewed as one of the more innovative in its delivery of collaborative health care.

From a more macro perspective, FHTs are opportunities for pharmacists to showcase our expertise as medication specialists. Pharmacists will work in a supportive interdisciplinary environment that fosters the delivery of seamless comprehensive patient-centred primary health care.

Let me describe a bit about the work of the Pharmacy Council in the context of professional services and how it might impact the work of FHTs.

Pharmacists' professional services might include medication management, medication reviews, medication adherence, public health services, such as smoking cessation programs and flu vaccinations, as well as, chronic disease management programs delivered at the community pharmacy where patients' typically access pharmacy services.

Many FHTs have wondered how best to integrate pharmacy into a FHT setting. To this end, we have created the Ontario Pharmacists' Association Family Health Team Resource Kit which is available on our website at or on the Association for Family Health Teams of Ontario website.

In the resource kit you will find valuable information about integration of pharmacist professional services through the Family Health Team pharmacist and through collaboration with services provided by local community pharmacists.

There are several community pharmacy based studies that have been successfully conducted in Ontario to highlight the importance of integration and collaboration.

For example, a program currently funded right here in Ontario by the Hamilton Family Health Team is called the "Passport to Health." In this program patients with diabetes and hypertension are referred by their family physician to their community pharmacist.

The pharmacist begins with a medication consultation to identify drug related problems and also monitors weight and waist measurements, and blood pressure on a monthly basis. Blood lipids and blood glucose are also monitored in collaboration with the patient and their doctor. Action plans are developed with the input of the patient, physician and pharmacist.

The Passport to Health is a binder which contains all of the patient's up-to-date medications, readings, and current medical notes. The binder is shown to each health professional the patient sees. In addition, the patient agrees to tell their pharmacist of any medication changes within 48 hours so that the medication profile is an accurate and up-to-date source of information. This strategy serves to empower the patient by enabling them to be responsible for their own health care.

Another exciting initiative called EMRxtra is currently underway in Sault Ste. Marie. Canada Health Infoway has partnered with the Group Health Centre and the Ontario Pharmacists' Association to electronically link all community pharmacies in the Soo with the electronic medical record system of the Group Health Centre. Pharmacists, in the Soo area, will have access to the EMRs of consenting patients and will reconcile medications as well as conduct medication consultations with patients currently in the vascular intervention program and the congestive heart failure program. It is hoped that this model will be one for the rest of Ontario and indeed Canada in years to come. I'm also pleased to recognize the support of Apotex in this program. Their support for technology services for pharmacists in the guise of their iPharmacist program is very much appreciated and necessary.

Perhaps the most exciting initiative began April 1st of this year, Ontario pharmacists have begun to provide an expanded range of professional services to our patients as the core of our new role in front-line health care delivery.

Pharmacists' professional services, or Meds Check, as I described earlier is available as eligible benefits under the Ontario Drug Benefit Program. This long-awaited initiative leverages the skills and knowledge of community pharmacists and expands our role as front-line health care providers like never before. It ensures patients better understand their medication therapy and that their medications are being taken as prescribed.

Patients benefit best from medications when they take the right medicines at the right dose at the right time.

The Medication Review is a voluntary service that must be conducted by a licensed pharmacist as a one-on-one interview with the patient in order to qualify for payment through the Ontario Drug Benefit (ODB) Program. ODB will pay pharmacies \$50.00 to provide a free Medication Review service to ODB-eligible recipients who are taking three or more medications. The Medication Review might take approximately 20 to 30 minutes to complete and is conducted on an annual basis.

By conducting a Medication Review, a pharmacist better helps their patient understand drug names, strengths, adverse effects, usage instructions, and ensures that their patient is taking their medications as their doctor has directed. As part of this service, the patient will be provided with an accurate and complete medication list that they may take with them when they visit their physician, other healthcare providers, or if they go to the hospital.

Patients who would most benefit from a Medication Review are those who have several chronic medical conditions and are taking multiple medications; patients who may be having trouble managing their medication, or who have a history of non-compliance; patients who have had significant changes made to their regimen in the past 100 days; patients on "high alert" medications, such as warfarin, digoxin, opiates; and patients who have been recently discharged from hospital.

One of our challenges at OPA in the weeks and months ahead is to ensure pharmacists are equipped and trained to manage the change represented by the advent of professional services. We are working now on change management education that will help pharmacists decide whether and how to provide professional services to their patients.

Some will do so. Others will retain their dispensing-focused business models. It's a priority for us to ensure the sustainability of dispensing-based, services-based and blended pharmacy business models going forward.

The advent of pharmacists' professional services represents the keeping of a major health care promise by the government, and it is part of how the rubber has to hit the road in this country to make health transformation succeed and a model worth bragging about.

In fact, OPA has been contacted from jurisdictions throughout the world inquiring as to how this program is faring and on what outcomes we can report.

Personally speaking, this is exactly what we need, the world to view what we do here in Ontario, for health services for patients, to be a model worth emulating.

In the new paradigm of Ontario's drug system, the enterprise of community pharmacy is finding new ways and new opportunities to secure our role as health care providers and maintain the viability of our business models. The integration and collaboration of professional services is one such avenue.

These are not simple issues; and neither is the work of the pharmacist today simple or one-dimensional. Patient needs are intricate, moreso as we age as a population, and the pharmacist-patient relationship is one of increasing complexity – where trust is important.

You know, pharmacists enjoy a very high score on the trust factor. A recent survey suggested that 86% of patients trust the advice they receive from their pharmacists. It also suggested that 87% trust nurses, 80% trust physicians, CEOs 21% and politicians 7%...

But not every politician rates low on trust. When U.S. President Gerald Ford died earlier this year, I was amused to read the following tribute:

Quote: "He had the look of a pharmacist. You never got the sense he was as conniving as the others."

But I have to assert today that it would be incorrect to mistake the niceness of pharmacists for complacency. Particularly when the health and well-being of our patients is at stake.

I'm hoping that as I describe where we are going as a profession, I'm shedding some light for you on the changes we've been through over the past year and the challenges we face.

The reality today is that in the new drug system that results from the TDSPA (imperfect as it still is), as part of the transformed health system, OPA and pharmacists are ascending in importance and impact to patients and to the general public across Ontario.

We are spending more and more time with patients and we are becoming the crucial source of information for patients about the medications they take and how they can use medications better to improve their health.

OPA has come to the forefront over the past year as a hugely impactful health stakeholder, and we are moving forward from TDSPA in collaboration with other stakeholders. It's also important for us to share understanding about pharmacists with groups of other professionals, and that's why it's important for me to be able to speak with you today.

So to all of us who are ultimately users of the system whether it's you, your parents, or your children – we're all hoping for a future in which health care is there for us, and we say pharmacists are there for you now, and will be in the future in new and exciting ways.

As pharmacists we have moved beyond one-dimensional thinking – reimbursement. We've spent huge resources on developing a loud voice on the policy changes required to fix our health system; we've embraced the thinking around collaboration and integration.

And, we're working closer with our partners – enlightened partners like physicians, nurses, hospitals, long term care providers. We are determined and ready to be on the same enlightened team collectively and collaboratively with primary healthcare providers on behalf of the patient's wellness.

Thank you.