

April 15, 2016

Judy Chong
Ontario College of Pharmacists
483 Huron Street
Toronto, ON M5R 2R4

Re: CSHP – Ontario Branch - Feedback on Revised Assessment Criteria

Dear Judy:

The Ontario Branch of the Canadian Society of Hospital Pharmacists (CSHP-OB) thanks you for the opportunity to provide feedback on the revised assessment criteria. The Ontario College of Pharmacists (OCP) should be commended for the efforts to define and improve upon the criteria that are being used to ensure patient safety and quality in hospital based medication systems.

CSHP-OB fully supports the concept of a “best practice” approach to hospital assessment. It must be noted that this is a radical change from the more traditional “minimum standard” approach. The culture within many institutions will not know how to react to this approach, and will require a transition period until the methodology is implemented, tested and validated.

An in-depth review of the criteria has not been completed by CSHP-OB; rather, our approach has been to raise points with respect to key themes that members have raised and provide options for resolution for OCP consideration.

Minimum Standards

The assessment criteria do not explicitly state what minimum standards are for hospital practice in Ontario. As a result, hospitals may not prioritize work on minimum standards and instead focus energy on emerging or organizational standards. Alternatively, organizations may try to meet all assessment criteria and due to lack of focus, achieve decreased overall results. CSHP-OB proposes a change to the criteria to include a statement ‘minimum standard’ on any criteria that must be met to obtain certificate of accreditation as a hospital pharmacy.

Timelines for ‘Emerging Standards’

The assessment criteria outline those standards that should be considered ‘emerging’. Without a firm timeline, many hospital organizations may be unable to adequately plan for these ‘emerging’ standards. Further, some organizations may choose to utilize a reactive vs. proactive approach with emerging



standards. CSHP-OB proposes a change to 'emerging standards' to include a timeline that the standard must be met to obtain certificate of accreditation as a hospital pharmacy.

Terminology –Pharmacist in a Management Role vs. Pharmacy Administrator/Designate

The assessment criteria include terminology referring to a 'Pharmacist in a Management Role' and 'Pharmacy Administrator / Designate'. CSHP-OB strongly supports the position that pharmacists must be involved to ensure the highest level of patient safety and quality in hospital based medication systems. CSHP-OB's understanding is that there are several hospitals that currently do not employ a pharmacist. In the proposed criteria, it is unclear whether a hospital with no pharmacist may meet the criteria of a 'Pharmacist in a Management Role'. CSHP-OB recommends clear definitions and rationale for the differences in terminology be included in the assessment criteria document to ensure clarity for roles of 'Pharmacist in a Management Role' and 'Pharmacy Administrator / Designate'.

Unintended Consequences of Meeting a Criteria

Members have raised concern that in meeting some of the assessment criteria, resources may be shifted from one area within pharmacy to another, with the potential for the system to become less safe. CSHP-OB recommends OCP consider unintended consequences of criteria that may require a substantial shift in pharmacy resources. One option may be to identify these criteria as 'emerging standards' with a timeline that will allow the system to re-adjust to meet the standard and ensure that any unintended consequences may be mitigated.

Document Formatting

The revised criteria were circulated in an excel format that did not inform reviewers of the changes to previous criteria and did not allow the reviewer to 'track' changes.

For future consultation/ reviews CSHP-OB suggests that any changes are 'marked' and that the ability to 'track' changes in the criteria is enabled. These changes would make the review more efficient for all involved and may lead to greater participation.

Again, thank you for the opportunity to provide feedback. CSHP-OB would also be pleased to provide feedback on the risk matrix which we will use to determine the frequency of site assessments. Please contact me if this opportunity arises and note that the CSHP-OB executive is available for discussion of any of the points raised in this submission.

Respectfully submitted on behalf of CSHP-OB executive and council,



Sammu Dhaliwall

President, Canadian Society of Hospital Pharmacists – Ontario Branch