Pharmacists without Borders Canada: An update

Suzanne Levesque, BPharm, MBA

WITH YOUR RECENT COVERAGE OF THE IMPORTANT WORK OF pharmacists during natural disasters,^{1,2} I thought it would be an opportune time to update *CPJ* readers about a pharmacist organization that has spent decades working in areas around the world in greatest need of medical and pharmaceutical aid.

Pharmacists without Borders Canada/Pharmaciens Sans Frontières Canada (PSF Canada) was founded in 1994 and is a nonprofit organization. Recognized by the United Nations and the World Health Organization (WHO), this humanitarian movement of pharmacists helps people in need by optimizing the distribution network and the management of essential drugs. PSF Canada provides pharmaceutical care through training, education and organization of resources. In addition to its many projects, PSF Canada is also a pharmaceutical reference for other nongovernmental organizations and works with them on joint projects.

Since 2009, PSF Canada has been leading a mission in northern Uganda to help reorganize the pharmacy at St. Mary's Hospital Lacor. St. Mary's Hospital in Lacor (also known as Lacor Hospital), founded in 1959, is a nonprofit charitable institution belonging to the Gulu Catholic Diocese, located 6 km west of Gulu town. Lacor Hospital operates in a very difficult social and economic environment. Since 1986, local insecurity has devastated the economy of northern Uganda, leaving the population in dire need, suffering and despair. Most of the patients receiving services at Lacor Hospital are among the poorest of the country, living well below the poverty line. The hospital accommodates a daily average of 500 inpatients, plus their caregivers, and receives an average of 800 outpatient visits each day. In addition to its main hospital compound, Lacor Hospital also owns and operates 3 peripheral health centers, each with a 24-bed capacity. Because of its size and reputation as the best tertiary care hospital in East Africa, Lacor Hospital serves as a training ground for various health care professionals; it is a teaching site for the Gulu University Faculty of Medicine, as

well as for the Nurse Training School and Laboratory Training School of Uganda.³ In 2012, a Pharmacy Department within the Faculty of Medicine of the Gulu University was established, and Lacor Hospital is now one of the training centres for the Certified (2-year program) and Diploma (3-year program) pharmacy technician students. Each year, there are Ugandan pharmacy students who complete their pharmacy degree by interning for a year at Lacor as part of their training program.

This mission officially started in May 2010, after a baseline site evaluation in 2009 by the PSF Canada leadership team, Régis Vaillancourt and Diane Lamarre. Following the assessment, an action plan of 24 recommendations was established and grouped into 5 categories: pharmacotherapy management, provisioning and inventory management, evaluation of sterile preparation, development of a communication plan and human resources and training. The initiatives highlighted at

Nathalie Chenel, a Canadian pharmacist from Quebec, stands with pharmacy technician Janet Adoch in the hospital pharmacy depot.

Lacor Hospital parallel the vision of WHO and the 2008 International Pharmaceutical Federation (FIP) Basel Statements, reflecting the shared aim of optimizing patient safety, making responsible utilization of health care resources and ensuring integrity of the medication supply.³ These standards of pharmacy practice have been used to assess or advance hospital pharmacy practice in many areas of the world.

Following the end of this 5-year mission in October 2015, Canadian pharmacy volunteers continued to support the Pharmacy Department at St. Mary's Hospital Lacor. Limitations of human resources are a constant factor in Uganda and, of course, at Lacor Hospital.

The high standards that were achieved over the past years with the support of PSF Canada can be maintained with extra pharmacy staff, whether it be volunteers (pharmacists and/or students, pharmacy technicians) from Canada or by funding to have more pharmacy-trained staff in the department.

PSF Canada supervised 7 Canadian pharmacists on this mission, in addition to many Canadian pharmacy students who completed an internship program. PSF Canada would like to recognize the contributions of these Canadian pharmacists who made a difference at St. Mary's Hospital,

Uganda: Lisa Brander, Mission Lead, Edmonton, Alberta; Ghada Shaka, Toronto, Ontario; Doret Cheng, Toronto, Ontario; Jennifer Wiebe, Winnipeg, Manitoba; Nathalie Chanel, Québec City, Québec; Allison Kirkwood, Vancouver, British Columbia; and Elizabeth McMahon, Bedford, Nova Scotia. PSF Canada also wishes to recognize the contribution of Caroline Potvin from Québec at the start of the implementation of the project.

We would also like to thank the Teasdale-Corti Foundation and the Marcelle and Jean Coutu Foundation for their support throughout this project. ■

References

1. Tsuyuki RT. Pharmacists' responses to natural disasters: insights into the souls of pharmacists and our role in society. *Can Pharm J (Ott)* 2016;149:188-91.
2. Epp DA, Tanno Y, Brown A, Brown B. Pharmacists' reactions to natural disasters: from Japan to Canada. *Can Pharm J (Ott)* 2016;149:204-15.
3. Poh J, Vaillancourt R, Lamarre D, Oyella J. Use of the 2008 Basel Consensus Statements to assess, realign, and monitor pharmacy practice at a tertiary care hospital in Northern Uganda: illustrative case study. *Can J Hosp Pharm* 2013;66:318-27.

SAVE THE DATE

CANADIAN
PHARMACISTS
CONFERENCE

CONGRÈS DES
PHARMACIENS
DU CANADA

2017

Celebrating the
400th anniversary of
the first pharmacist,
Louis Hébert,
arriving in Canada.

www.pharmacists.ca/conference

CANADIAN
PHARMACISTS
ASSOCIATION

ASSOCIATION DES
PHARMACIENS
DU CANADA