

New Zealand Hospital Pharmacists'

Association (Inc)

Te Kāhui Whakarite Rongoā Hōhipera o Aotearoa



Annual Report

2010 - 2011

NEW ZEALAND HOSPITAL PHARMACISTS' ASSOCIATION

Te Kāhui Whakarite Rongoā Hōhipera o Aotearoa

ANNUAL REPORT 2010/2011

PRESIDENT

Billy Allan

IMMEDIATE PAST PRESIDENT

(vacant this year)

EXECUTIVE MEMBERS

Simon Jamieson

Nirasha Parsotam

Lorraine Welman

Dianne Wright

OFFICIAL ARCHIVIST

Euan Galloway

SPECIAL INTERST GROUP CONVENORS

Drug Information and Clinical Pharmacy

Jocelyn Livesey

Compounding, Nutrition and Oncology

Paula Ferguson

Mental Health

Corina Young + Nikki Holmes

Pharmacy Technician

Debbie Methers

Hospital Pharmacy Managers' Forum

Chris Jay



President's Annual Report 2011

Vision: Supporting innovation in the practice of pharmacy and promoting effective medicines management

It is with great pleasure that I present the 59th Annual Report of the New Zealand Hospital Pharmacists' Association (NZHPA) for the 2010/11 year.

The Executive was unchanged from the previous year with Billy Allan (President), Lorraine Welman (Vice President and Treasurer), Dianne Wright (Secretary), Nirasha Parsotam (SIG Officer) and Simon Jamieson (Communications Officer). Euan Galloway remained as our Archivist.

I would like to formally thank all the NZHPA Executive for giving considerable time, effort and talent to ensure that the Association's affairs are managed appropriately and effectively. The Executive do so willingly and on a voluntary basis.

As usual we have received excellent financial and administrative support from Margaret Pearce (Finance Manager) and Sarah Long (Administrator) through our Management Service Level Agreement (SLA) with the Pharmaceutical Society of New Zealand (PSNZ).

Executive Activities

The Executive met as follows:

15 July 2010	Wellington
2 September 2010	Hamilton (pre-Conference 2010)
12 November 2010	Wellington
11 March 2011	Wellington

We are fortunate that we are able to hold our meetings in the Pharmaceutical Society Library/Boardroom under our management agreement with PSNZ. A great deal of business is also dealt with by email and telephone. However, face to face meetings are also invaluable to engage in meaningful debate and discussion.

Examples of activities that the Executive have been working on include:

1. A review of the Association's strategic direction over the next 5 or so years (2010-2014). These discussions were facilitated by Joe Asghar (ex NZHPA Executive member and Chief Executive of Diabetes New Zealand). Joe gave his time to this review voluntarily for which the Executive are extremely grateful.
2. Undertook an Organisational Review for Māori Responsiveness (11th November) as a partnership to the Māori Health Strategy for the Pharmacy Profession. The Executive has developed an action plan to address the Association's short comings over the next 3-5 years. One particular challenge for the Executive, SIG Convenors and the membership at large, is to develop cultural competence in all areas in which we practice.
3. Ministry of Health's Review of Pharmacy Medicine Recalls. The process has not yet been finalised as it is awaiting the outcome of the Pharmacy Guild vs. GSK court case over the Marevan recall.
4. Pharmacy Council of New Zealand (PCNZ) Recertification Working Group (Di Wright).

5. Responded to the Ministry of Health consultation on legislative barriers to workforce innovation.
6. Responded to the PCNZ consultation on the Proposed Pharmacist Prescriber Scope of Practice.
7. Heath Workforce New Zealand (HWNZ) – Chris Jay worked with HWNZ to develop a mentoring scheme for both the clinical and management aspects of hospital pharmacy practice. Unfortunately it appears that it is unlikely that any national scheme will be developed under HWNZ.
8. Review of the Association's newsletter to a more up-to-date, 'sexy' presentation with the inclusion of photographs.
9. Provided financial support for the Combined Schools of Pharmacy Māori Pharmacy Students' annual hui.
10. Brokered a consortium to have MICROMEDEX available to all DHB pharmacy services.
11. Published an Antidote Database (Managers' Forum) listing the availability of antidotes in hospitals around New Zealand. This is available on the Association's website. The database replaces the database previously funded by the Ministry of Health (MoH) and maintained by the National Poisons Centre. This MoH database was pulled once Ministry funding was withdrawn.
12. Updated the NZ Medicines Information Training Workbook (Medicines Information Group of the DICP SIG).

Liaison with Associated Bodies

The NZHPA has been represented on the following committees:

- | | |
|--|--|
| 1. Pharmacy Reference Group for the Implementation of the Strategy for Māori Health (PRISM) | Billy Allan |
| 2. Heads of Schools and Professional Organisation of Pharmacy (HOSPOP) | Kirsten Simonsen
Billy Allan (from November 2010) |
| 3. Board of Studies – SoP, UoO | Kirsten Simonsen |
| 4. Board of Studies – SoP, UoA | Sian Dawson |
| 5. Accident Compensation Corporation Pharmacy Liaison Group (This national group is currently in recess) | Chris Jay |
| 6. Pharmacy Industry Training Organisation (PITO) Board | Sanjoy Nand
Olivia Johnson (from April 2011) |
| 7. PITO Qualifications and Training Review Steering Group | Claire Barnfather |
| 8. PITO Qualifications and Training Review Working Group - Technicians | Di Gulliver, Brenda Edwards, Amanda Rich, Anna-Lee Innes |
| 9. PITO Qualifications and Training Review Working Group – Pharmacists | Kim Brackley |
| 10. NZ Pharmacy Education and Research Foundation (NZPERF) | Lorraine Welman |
| 11. Safe Medication Management Programme (SMMP) steering group (dissolved March 2011) | Billy Allan |
| 12. New Zealand Universal List of Medicines (NZULM) and New Zealand Medicines Formulary (NZMF) steering group (dissolved March 2011) | Billy Allan |

13. National eMedicines Programme Interim Steering Group (NeMP) Billy Allan

In March 2011 the SMMP and NZULM/NZMF steering groups were dissolved and subsumed under the governance of the NeMP Interim Steering Group

14. Pharmaceutical Society of New Zealand (PSNZ) Billy Allan

As president I had the privilege to attend a PSNZ National Executive meeting (16 September 2010) at the invitation of Elizabeth Plant, PSNZ President. This meeting was invaluable in forging a closer working relationship and moving toward a more unified voice for Pharmacy

The Executive is most grateful for members who represent the Association at these various national forums. Without such support the Association would not have a voice at such a broad range of meetings.

Awards

The Association continues to maintain a portfolio of awards for the benefit of members:

Award	Recipient 2010/11
1. Ebewe Award – Joint Award	Laura Clunie and Virginia Smith
2. Sanofi-Aventis Award	Anne Blumgart
3. NZHPA Education Fund	Dave Woods
4. NZHPA Education Fund	Catherine Herd (withdrew)
5. NZHPA Education Fund	Karen Street (withdrew)
6. NZHPA Education Fund	Maxine Handford
7. NZHPA Education Fund	Rob Ticehurst

The pharmaceutical company awards would not be possible without the continuing support from their sponsors, in particular Ebewe, Sanofi-Aventis and GlaxoSmithKline. The NZHPA is most appreciative of their support and encouragement of our members.

Unfortunately Baxter Healthcare was unable to maintain their support for the Baxter Development Fund this year.

All award recipients usually present at a Special Interest Group (SIG) meeting or NZHPA conference and provide a report to the NZHPA members on how they have used their award. These reports are available on the Members' Section of the NZHPA website.

The NZHPA also offers a range of awards to undergraduates and postgraduates through the Schools of Pharmacy in Auckland and Otago. Last year's recipients were:

Award	Recipient 2010
1. NZHPA Award for Aseptic Dispensing (UoA)	Edwin Lim
2. NZHPA Award for Integrated Pharmacy Studies (UoA)	Jay-Anna Brewster
3. NZHPA Award in the Postgraduate Diploma in Pharmacy Practice (UoA)	Not awarded

- | | | |
|----|---|--|
| 4. | NZHPA Syd Little Memorial Prize (UoO), Highest standard of achievement in Drug Delivery Systems and Drug Disposition and Pharmacokinetics. Top average of PHCY342 and 343 | Mandy Ma
Richard Prentice
Michelle Whyte |
| 5. | Pharmacy Prize in Clinical Pharmacy (UoO), for the best achievement in the 3 Quality Use of Medicines papers PHCY345, PHCY471 and PHCY473 | Su Sern Samuel Pau |

NZHPA Workforce Development Working Group

The working group (Kim Brackley, Chris Jay and Sanja Mirkov) have been working with a health services researcher (Jill Wrapson) developing a national career structure for hospital pharmacy staff. The group's purpose is to develop a proposal for the NZHPA Executive (and therefore membership) as to the feasibility of developing a nationally agreed career or pay structure for hospital pharmacy staff. This is a significant piece of work and expense for the Association. To date interviews have been held with key national stakeholders, Hospital Pharmacy Managers and a survey has been distributed to all current hospital pharmacy staff.

It is anticipated that a formal proposal will be available late 2011 / early 2012.

Notes on Injectable Drugs (NoIDs)

Unfortunately the publication of the 6th edition of Notes on Injectable Drugs (NoIDs) was significantly delayed – 12 months later than originally anticipated. Technical difficulties have contributed to this delay (including formatting inconsistencies, indexing, paper quality in relation to the overall thickness of the publication, binding problems). However, we are now on track for publication in July 2011. The NoIDs monographs will also be available in printable pdf format (as eNoIDs).

On a positive note, the delay does mean that the Association was not left with any dead stock of the 5th edition.

My thanks to Lucy Broughton, co-ordinating editor, and all her sub-editors who reviewed, updated and pulled the monographs together. However, a special thank you must go to Lorraine Welman. Lorraine put in unmeasured hours to overcome the technical difficulties that delayed publication. Without Lorraine's interminable efforts the Association may have 'lost' its flagship publication.

NoIDs is a major source of income and publicity for NZHPA. The Association is indebted to everyone involved in preparing the 6th edition of this nationally respected publication.

Website (<http://www.nzhpa.org.nz/>)

Dave Woods continues as our webmaster maintaining the website. The Members' Section is proving to be very valuable for publishing documents specifically for our members (e.g. minutes of Executive meetings, financial reports, award recipient reports, conference presentations, Newsletters and Heads Up).

A Search facility has been added to the website making finding documents more straight forward. A link to the ACC Treatment Injury case studies has also been established.

Thank you Dave for your continuing management of the website.

Conferences, Seminars and Meetings

The flagship event for the Association is the annual conference. The 2010 conference in Hamilton (Forging New Pathways) was another terrific success. My thanks to the core organising committee, of Jan Goddard, Melissa Young, Fiona McNabb and Nic Ellinger, for their time, effort and hard work in pulling off an excellent conference that should have met all delegates' expectations educationally, collegially and at a social level.

Throughout the year the following Special Interest Group (SIG) meetings were held:

1. Pharmacists in Mental Health, Past, Present and Future, 7-8 August 2010, in Auckland (Nikki Holmes)
2. Hospital Pharmacy Managers' Forum, 29 July 2010 (Auckland; Melissa Witbrock), 26 November 2010 and 25 March 2011 (Wellington; Chris Jay)
3. Technician SIG, 9 April 2011, in Dunedin (Debbie Methers and Lynette Ballantyne)
4. A combined DICP/ CNO SIG meeting was to be held in Christchurch, but due to the earthquakes was postponed and is now to be held in Auckland, 9-10 July 2011

The Management SIG changed its focus and name this past year. The group was re-branded the Hospital Pharmacy Managers' Forum because the SIG had not done anything for non-hospital managers for at least the past 8 years, and it was unfair to keep taking money from people and not giving them anything in return.

The Forum will provide an increased focus for hospital pharmacy management issues and encourage more regular meetings (the Forum has agreed to meet quarterly). Chris Jay, Hutt Hospital, is the new Convenor/Chair. The Forum has made some significant progress already.

The Executive invited SIG convenors to attend an Executive meeting (12 November 2010). The intent is that the Executive and SIG/Forum Convenors will meet formally at least once a year to foster closer working relations.

We have seen another year of successful meetings. These meetings are the backbone of the Association. So 'Special Thanks' to all the SIG, conference and meeting convenors for their dedication in providing such diverse meetings to such a high standard.

This year we saw two SIG Convenor stalwarts step down; Melissa Witbrock stepped down from the Management SIG and Dianne Gulliver from the Technicians' SIG. Both have put considerable effort over many years into running their respective SIGs. Thank you for your energy, enthusiasm and time.

Membership

Membership numbers for 2010/11 have increased slightly over past years:

Member category	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11
Ordinary	169	149	72	163	199	214	211	227	286
Associate	17	16	11	36	45	29	30	38	43
Corporate	3	7	3	5	4	4	3	3	3
Total[¥]	189	172	86	204	248	247	244	268	332

¥ Excludes Life and Fellow members

For 2010/11 this gives ~70% of pharmacists who identified themselves as working in hospital (June 2010; 410)¹ as being members of NZHPA.

Finances

Following the passing of a remit at the 2010 AGM the membership fees will increase for the 2011/12 year. This is the first increase since the 2006/07 financial year, and also includes an element for the increase in GST to 15%. SIG fees remain unchanged at \$10.

To be more equitable in the distribution of administration fees it has also been necessary to 'levy' an administration fee on SIG meeting administration. SIG administration is a significant proportion of the annual management fee the Association pays PSNZ under our Management SLA.

The year closes in a reasonably strong position financially, although the bottom line has been adversely affected by the delay in the publication of NoIDs and the subsequent delay in this revenue stream. However, we anticipate 'catch up' in the 2011/12 financial year. Please see the Financial Statements for the full financial position.

Absent Friends

Unfortunately we lost two foundation members of the Association – Tod Webster and Harry Jones who sadly passed away during the past year.

Tod Webster FPS FHFA

Tod did his apprenticeship at Palmerston North Hospital 1944-48, was pharmacist-in-charge at Cook Hospital Gisborne 1953-72, Hutt Hospital 1972-73 and Napier Hospital 1974-91.

Tod gave a lifetime of dedicated service to the pharmacy profession. He was a quiet and unassuming pioneer. Tod's outstanding contribution was to establish the reputation of pharmacists as primary sources of medicine information. Before the arrival of word processors and the internet he meticulously planned, prepared (with assistance from other hospital pharmacists) and distributed a series of drug information cards over a period of 26 years from 1965 to 1991. These were a very useful resource for nurses and junior doctors in hospital wards.

We are also grateful for his many years as convenor of the NZHPA drug information subcommittee, the network of drug information centres he was instrumental in having set up throughout the country, and the preparation and publication of the first edition of Notes on Injectable Drugs.

¹ Pharmacy Council of New Zealand. Workforce Demographics as at 30 June 2010.

Tod was honoured with Fellowships of both the Pharmaceutical Society and the Hospital Pharmacists' Association, and was awarded the prestigious Wellcome Award in recognition of his distinguished service to the NZ Hospital Pharmacists' Association.
(Euan Galloway, 14 April 2011)

Harry Jones FPS FHPA

Harry commenced his pharmacy apprenticeship at Napier Hospital in 1938. He registered in 1942, worked 6 years at Napier Hospital, was pharmacist-in-charge at the Memorial Hospital Hastings for 14 years, then Chief Pharmacist at Waikato Hospital until his retirement in 1985.

Harry, together with his pharmacist wife Noelene, attended the inaugural meeting to form NZHPA on 26 July 1952 in Wellington.

He was Secretary/Treasurer of NZHPA from 1955-1968, on the Executive from 1968-1975 and President from 1969-1972.

Harry was honoured with Fellowships of both the Pharmaceutical Society (1971) and the Hospital Pharmacists' Association (1979), and was awarded the prestigious Wellcome Award (1980) in recognition of his distinguished service to the NZ Hospital Pharmacists' Association.

He was the North Island non-proprietor member of the Council of the Pharmaceutical Society from 1971 to 1979, the hospital representative on the Pharmacy Education and Research Foundation Board from 1972 to 1980 and for 14 years served on the Pharmacy Advisory Committee at the Central Institute of Technology, Heretaunga.

Harry was a well respected, and very entertaining, advocate for hospital pharmacy. We are grateful for his considerable contribution to the development of our profession.
(Euan Galloway, 18 April 2011)

Strategic Priorities 2010-2014

The Association's Vision is:

Supporting innovation in the practice of pharmacy and promoting effective medicines management

The review of the Association's strategic priorities highlighted a number of areas where NZHPA could strengthen its presence, increase its activity or better use its available resources. The broad Strategic Goals identified by the Executive are:

1. To align with key sector partners to increase the contribution from and the visibility of NZHPA.
2. To advocate for and influence healthcare policy decisions for the benefit of patients and NZHPA members.
3. To provide leadership and direction for NZHPA members and hospital pharmacy.
4. To ensure that NZHPA's philosophy and strategy encompass the Māori Health Strategy for the Pharmacy Profession, recognising Māori well being as a priority for the Association.
5. To use available expertise and knowledge from the membership to build links with other education providers.
6. To address issues of recruitment, retention and continuing professional development, supporting the development of pharmacy staff.
7. To capture the passion and enthusiasm of the membership to increase NZHPA's visibility.

The Executive of NZHPA will take these priorities forward over the next five years. We have made significant steps to realise these goals, but have still some way to go to achieve full realisation. The Executive have developed an action plan to help process these priorities, and the strategy is a standing agenda item at all Executive meetings.

As a voluntary membership organisation we are reliant on the time and goodwill of the membership. I would like to acknowledge and thank all the SIG convenors, meeting and conference organisers, editors, webmaster, members who represent the Association at the various forums, our archivist and the Executive for freely giving their time and talents and making a tremendous contribution to the Association.

The Association remains strong and continues to be recognised at a national level. The challenge to the new Executive and the membership is to maintain this momentum and the recognition we have achieved over the past few years for the benefit of the membership.

I wish the Association and the new Executive well for the coming years.

William (Billy) Allan
President
June 2011

**NEW ZEALAND HOSPITAL
PHARMACISTS' ASSOCIATION
INCORPORATED**



Financial Statements

For the year ended 31 May 2011

Statement of ■ Financial Performance

For the year ended 31 May 2011

	Note	2011 (\$)	2010 (\$)
Operating revenue			
Membership subscriptions		29,099	23,856
Members' activities	1	38,880	55,658
Conference	2	149,491	144,661
Grants and awards	3	11,500	10,500
Projects	4	99,228	-
Interest		5,473	7,336
Total operating revenue		333,671	242,011
Operating expenditure			
Members' activities	1	33,966	38,033
Conference	2	120,526	111,800
Grants and awards	3	20,794	23,055
Projects	4	115,560	-
Administration	5	55,760	52,536
Total operating expenditure		346,606	225,424
Net operating (deficit)/surplus before taxation		(12,935)	16,587
Tax (expense)/credit		(277)	4,704
Net operating (deficit)/surplus for the year		(13,212)	21,291

Statement of ■ Movements In Equity

For the year ended 31 May 2011

	2011 (\$)	2010 (\$)
Net operating (deficit)/surplus for the year	(13,212)	21,291
Total recognised revenues and expenses	(13,212)	21,291
Equity at the beginning of the year	200,423	179,132
Equity at the end of the year	187,211	200,423



The Statement of Accounting Policies and Notes to the Financial Statements on pages 3 to 9 form part of the financial statements

Statement of Financial Position

As at 31 May 2011

	Note	2011 (\$)	2010 (\$)
Current assets			
Cash and bank balances		71,290	22,649
Receivables and accrued income	6	57,638	50,634
Inventory		-	2,827
Investments	7	100,000	170,000
Total current assets		228,928	246,110
Non-current assets			
Website		-	1,364
Total non-current assets		-	1,364
Total assets		228,928	247,474
Current liabilities			
Payables and accruals	8	41,717	47,051
Total current liabilities		41,717	47,051
Net assets		187,211	200,423
Equity			
Retained earnings	9	45,942	67,163
Special interest groups	10	93,637	85,557
Special funds	11	47,632	47,703
Total equity		187,211	200,423

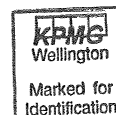
On behalf of the Executive Council



W Allan
President
22 July 2011



L Welman
Treasurer
22 July 2011



The Statement of Accounting Policies and Notes to the Financial Statements on pages 3 to 9 form part of the financial statements

Statement of

■ Accounting Policies

For the year ended 31 May 2011

Basis of preparation

The New Zealand Hospital Pharmacists' Association Incorporated (the Association) is incorporated under the Incorporated Societies Act 1908 (the Act). These financial statements are prepared in accordance with the Act.

The financial statements of the Association have been prepared in accordance with New Zealand Generally Accepted Accounting Practice, which in the case of the Association means statements of standard accounting practice and financial reporting standards. The financial statements are prepared in New Zealand dollars.

Measurement base

These financial statements have been prepared on a going concern basis in accordance with historical cost concepts.

Specific Accounting Policies

The following specific accounting policies that materially affect the measurement of the financial performance and financial position have been applied.

Revenue and expenditure recognition

All revenue is recognised when earned on an accruals basis, except for donations which are recognised on a cash basis when payment is received. All expenditure is recognised when billed or an obligation arises on an accruals basis, except for donated services.

Donated services

The work of the Association is dependent on the voluntary services of members and the Pharmaceutical Society of New Zealand (Incorporated). Due to the difficulty in determining the value of the donated services with sufficient reliability, donated services are not recognised in the Statement of Financial Performance.

Taxation

Income tax expense is charged to the Statement of Financial Performance based on the estimated income tax payable in the current year, adjusted for any differences between the estimated and actual income tax payable in prior years.

Investments

Investments are stated at the lower of cost or net realisable value on a trade date basis. Debt securities are those securities where there is both the positive intent and ability to hold to maturity.

Equity

Equity is the member's interest in the Association and is measured as the difference between total assets and total liabilities. Equity is disaggregated into components to enable clearer identification of the specified uses. The components of equity are special funds and special interest groups.

Differential reporting

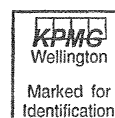
The Association is a qualifying entity by virtue of the fact that it has no public accountability and is small as defined by the Framework for Differential Reporting issued by the New Zealand Institute of Chartered Accountants. All available differential reporting exemptions allowed have been applied.

Comparatives

To ensure consistency with the current year, the comparative figures have been reclassified where appropriate.

Changes in accounting policies

There have been no material changes in accounting policies during the year.



Notes to the ■ Financial Statements

For the year ended 31 May 2011

	Income (\$)	Expenditure (\$)	Net result (\$)
1 Members' activities			
Special interest groups	34,588	25,893	8,695
Notes on injectable drugs	4,292	2,827	1,465
Costs of other conferences	-	5,246	(5,246)
Total members' activities 2011	38,880	33,966	4,914

Special interest groups	42,858	25,030	17,828
Notes on injectable drugs	12,800	9,149	3,651
Costs of other conferences	-	3,854	(3,854)
Total members' activities 2010	55,658	38,033	17,625

2 Conference

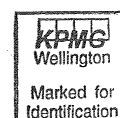
Total conference 2011	149,491	120,526	28,965
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Total conference 2010	144,661	111,800	32,861
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3 Grants and awards

Baxter Award	3,000	3,000	-
Ebewe Award	4,500	3,838	662
Sanofi-Aventis Award	4,000	4,000	-
Education assistance grants	-	9,206	(9,206)
Student prizes	-	750	(750)
Total grants and awards 2011	11,500	20,794	(9,294)

Baxter Award	-	-	-
Ebewe Award	7,500	5,594	1,906
Sanofi-Aventis Award	3,000	2,000	1,000
Education assistance grants	-	14,511	(14,511)
Student prizes	-	950	(950)
Total grants and awards 2010	10,500	23,055	(12,555)



Notes to the ■ Financial Statements - continued

For the year ended 31 May 2011

	2011 (\$)	2010 (\$)
4 Projects		
<i>Income</i>		
Micromedex Consortium	99,228	-
Total project income	99,228	-
<i>Expenses</i>		
Micromedex Consortium	99,228	-
Maori Health Strategy Organisational Review	3,128	-
National Career Structure for Hospital Pharmacy Staff	13,204	-
Total project expenses	115,560	-
Total net project (expenses)/income	(16,332)	-

5 Administration		
Accounting and secretarial services	28,057	20,961
Depreciation	1,364	1,636
Executive expenses	4,560	4,743
Fees paid to the auditors (includes consultancy)	9,243	10,910
Information technology	5,153	4,637
Insurance	1,558	1,542
Other working groups	3,867	4,364
Printing and stationery	560	3,505
Sundry expenses	1,398	238
Total administration	55,760	52,536

6 Receivables and accrued income		
Trade receivables	6,065	4,578
Tax refund	14,318	324
Accrued income	80	-
Prepayments	37,175	45,732
Total receivables and accrued income	57,638	50,634

7 Investments

The Association has one 30 day term deposit of \$100,000 maturing June 2011. Interest at the rate of 2.91% is due on maturity. The deposit is held with the ANZ National Bank Limited (2010: 180 days, \$170,000, 4.40%).

8 Payables and accruals		
Trade creditors	4,480	7,402
Sundry payables	8,890	7,300
Total payables	13,370	14,702
Income in advance	28,347	32,349
Total payables and accruals	41,717	47,051

9 Retained earnings

Retained earnings at the beginning of the year	67,163	59,431
Net (deficit)/surplus for the year	(13,212)	21,291
Transfer (to)/from special interest groups	(8,080)	(17,828)
Transfer from/(to) special funds	71	4,269
Total retained earnings	45,942	67,163

Notes to the

■ Financial Statements - continued

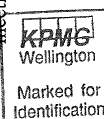
For the year ended 31 May 2011

10 Special interest groups	Drug Info (\$)	Management (\$)	Oncology (\$)	Mental Health (\$)	Technicians (\$)	Total Funds (\$)
Opening balance	18,422	3,772	14,940	44,559	3,864	85,557
Income	1,109	222	355	30,216	2,686	34,588
Expenditure	314	775	-	23,292	1,512	25,893
Gross income for the year	795	(553)	355	6,924	1,174	8,695
Less share of administration expenses	-	-	-	-	615	615
Net income for the year	795	(553)	355	6,924	559	8,080
Closing balance 2011	19,217	3,219	15,295	51,483	4,423	93,637
Opening balance	15,559	3,708	12,032	34,732	1,698	67,729
Income	4,840	187	4,387	28,854	4,590	42,858
Expenditure	1,977	123	1,479	19,027	2,424	25,030
Gross income for the year	2,863	64	2,908	9,827	2,166	17,828
Less share of administration expenses	-	-	-	-	-	-
Net income for the year	2,863	64	2,908	9,827	2,166	17,828
Closing balance 2010	18,422	3,772	14,940	44,559	3,864	85,557

The Association has established special interest groups (SIGs) in the following areas of pharmacy practice:

- Drug Information and Clinical Pharmacy
- Compounding, Nutrition and Oncology
- Pharmacy Technicians
- Management
- Pharmacists in Mental Health

The aim of each SIG is to promote and provide continuing education, interaction and peer support between its members, with each group encouraged to run an annual meeting or event. Funds derived from the meeting/event and membership fees are attributed to that SIG to further promote other activities, such as developing national guidelines and standards of practice. During 2011, the Association began allocating a portion of its administration expenses to each SIG to more accurately reflect the work involved in running the meetings/events.



Notes to the

■ Financial Statements - continued

For the year ended 31 May 2011

11 Special funds	Baxter Fund	Ebewe Award	Glaxo Smith Kline Award	Sanofi-Aventis Award	Education Fund	Clinical School	Research School	Total Funds
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
Opening balance	(3,000)	1,906	-	1,000	44,845	2,999	(47)	47,703
Income	3,000	4,500	-	4,000	-	-	-	11,500
Interest	-	-	-	-	5,473	-	-	5,473
Expenditure	(3,000)	(3,838)	-	(4,000)	(9,206)	-	-	(20,044)
Transfer to Retained Earnings	3,000	-	-	-	-	-	-	3,000
Net result for the year	3,000	662	-	-	(3,733)	-	-	(71)
Closing balance 2011	-	2,568	-	1,000	41,112	2,999	(47)	47,632
Opening balance	(3,000)	-	-	-	52,020	2,999	(47)	51,972
Income	-	7,500	-	3,000	-	-	-	10,500
Interest	-	-	-	-	7,336	-	-	7,336
Expenditure	-	(5,594)	-	(2,000)	(14,511)	-	-	(22,105)
Net result for the year	-	1,906	-	1,000	(7,175)	-	-	(4,269)
Closing balance 2010	(3,000)	1,906	-	1,000	44,845	2,999	(47)	47,703

Notes to the

■ Financial Statements - continued

For the year ended 31 May 2011

11 Special funds – continued

Baxter Development Fund

This fund is used to enable hospital pharmacists to further their knowledge in the pharmacy profession, either clinical, research, or management based, and may include assistance to attend conferences. This fund was disestablished during 2011.

Ebewe Pharma Oncology Pharmacy Grant

The Ebewe Award offers support for a wide range of research and professional development activities in oncology pharmacy, or oncology pharmacy management.

GlaxoSmithKline Merit Award

This in-service award is presented to a member of the Association who in the opinion of fellow members and on endorsement by the Association's Executive is "a member who has provided outstanding service to the Association and New Zealand pharmacy".

Sanofi-Aventis Pharmacy Grant

This grant is designed to offer support for a wide range of research and professional development activities in oncology and cardiovascular pharmacy.

Education Fund

The Education Fund is used to assist members to attend courses, attend conferences to present papers, or to undertake special projects.

Clinical School

This is a biennial clinical seminar/workshop for pharmacists wishing to update their clinical skills.

Research School

The Research School is a biennial event for pharmacists wanting to learn more about research in the pharmacy profession.



Notes to the ■ Financial Statements - continued

For the year ended 31 May 2011

12 Commitments

There are no commitments as at balance date (2010: nil).

13 Contingencies

There are no contingencies as at balance date (2010: nil).

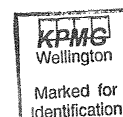
14 Events subsequent to balance date

There have been no events subsequent to balance date that would materially affect these accounts.

15 Adoption of International Financial Reporting Standards

In December 2005 the New Zealand Accounting Standards Review Board ("ASRB") announced that New Zealand International Financial Reporting Standards ("NZIFRS") would apply to all New Zealand entities for the periods commencing on or after 1 January 2007.

Since this announcement, there has been some debate on the applicability of NZIFRS to small and not-for-profit entities. On 14 September 2007 the ASRB announced that the mandatory adoption of NZIFRS by some entities is to be delayed until a review is undertaken. The entities affected are those that are not required to prepare financial statements under the Financial Reporting Act 1993, are not publicly accountable, and are small as defined by the Framework for Differential Reporting issued by the New Zealand Institute of Chartered Accountants. Until the completion of the review, these entities may continue to adopt existing financial reporting standards. As the Association meets these requirements, it has elected to adopt the existing standards.





Independent Auditor's Report

To the readers of the financial statements of New Zealand Hospital Pharmacists' Association Incorporated

Report on the Financial Statements

We have audited the accompanying financial statements of New Zealand Hospital Pharmacists' Association Incorporated ("the Association") on pages 1 to 9. The financial statements comprise the statement of financial position as at 31 May 2011 and the statements of financial performance and movements in equity for the year then ended, and a summary of significant accounting policies and other explanatory information.

Executive Council's Responsibility for the Financial Statements

The Executive Council is responsible for the preparation of financial statements in accordance with generally accepted accounting practice in New Zealand that give a true and fair view of the matters to which they relate, and for such internal control as the Executive Council determines is necessary to enable the preparation of financial statements that are free from material misstatement whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing (New Zealand). Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Association's preparation of the financial statements that give a true and fair view of the matters to which they relate in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates, as well as evaluating the presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Our firm has also provided other services to the Association in relation to taxation services. This matter has not impaired our independence as auditors of the Association. The firm has no other relationship with, or interest in, the Association.

Opinion

In our opinion the financial statements on pages 1 to 9 present fairly, in all material respects, the financial position of the New Zealand Hospital Pharmacists' Association Incorporated and the financial performance of the Association, in accordance with generally accepted accounting practice in New Zealand.

KPMG

22 July 2011

Wellington



Pharmacists in Mental Health SIG Annual Report 2011

Introduction

As ever it has been a busy year for the SIG, with several pieces of work covered off and several still in progress.

The 2010 SIG seminar was held in Takapuna, Auckland in August 2010. Looking ahead, this year's SIG seminar is due to be held on 20-21 August 2011 in Dunedin. The keynote speaker is Associate Professor Chris Alderman and he will be presenting on post traumatic stress disorder, depression in the context of comorbid illness, and providing an update on bipolar affective disorder. Presenters will also include a number of local psychiatrists and SIG members.

The SIG continues to be active in responding to relevant proposals and consultation documents. This past year, the SIG has submitted feedback to PHARMAC on consultations regarding olanzapine long-acting injection, generic venlafaxine, and generic oral olanzapine.

Achievements against annual plan

- The 2010 annual Pharmacists in Mental Health SIG seminar was held on 7-8 August in Takapuna, Auckland. Feedback was positive and a surplus was made against the original budget. The seminar was extremely successful, with excellent speakers and a diverse range of delegates from both NZ and overseas. We were well supported by manufacturers, however, we are aware this will likely not continue in the current financial climate.
- For the Mental Health Study Grant:
 - Nick Leach was awarded a study grant to help fund her Masters Degree by research.
 - Guna Kanniah was awarded a study grant to help fund an Aston University postgraduate course in psychiatric pharmacy, however, since then has decided not to pursue postgraduate study at this time, and will not be using the grant.
 - The Study Grant Rules will be reviewed soon.
- The Terms of Reference for the SIG are currently being drafted.
- The SIG continues to submit regular summary articles for the NZHPA newsletter and the UK College of Mental Health Pharmacy (formerly the UK Psychiatric Pharmacy Group) bulletin.
- The SIG has submitted responses to several proposals from PHARMAC this last year.
- The Yahoo chat group continues to be a useful means of communicating with colleagues about clinical and supply issues. As at August 2011, the group has 94 members from NZ and elsewhere.
- Various SIG members were involved in the review and update of content of the mental health component of the national intern training days in 2010. This updated training was delivered with excellent feedback, and will be presented at the 2011 SIG seminar as well as possibly being written up for publication.

Income and Expenditure

The main expenditure is the SIG seminar. Due to the surplus made via the 2010 seminar, the SIG has continued to expand its funds and the account balance stands at \$51,483 as at 31/5/11.

Officers and Members

Nominations and voting for the 2011/2012 officers will take place at the AGM at the annual seminar in August 2011. The Convenor will inform the NZHPA Executive of the outcome of this shortly after the SIG seminar. Current officers for 2010/2011 are:

Co-convenors:	Corina Young and Nikki Holmes
Deputy Convenor:	Vacant
Seminar Organiser/Treasurer:	Jocelyn Livesey
Secretary:	Nicola Rowbottom
Yahoo Email Group Moderator:	Nikki Holmes
PALs Contact:	Kane Pettitt

Total number of SIG members = 32 (as at 1 July 2011). Please note there is difficulty obtaining accurate numbers from DHBs who pay for NZHPA SIG registration in bulk payments.

Attendance at meetings

Five meetings are planned for the regional north of North Island mental health pharmacists group this year. Sanofi-Aventis and Janssen are supporting these meetings this year. The meetings continue to be well attended, especially by pharmacists who are new to mental health.

Nikki Holmes and Corina Young attended the NZHPA Executive meeting in November 2010 and it is anticipated that attendance by SIG Convenors at a NZHPA Executive meeting will now be an annual occurrence. A member of the NZHPA Executive will also be invited to attend the SIG AGM.

Corina Young and Nikki Holmes
Pharmacists in Mental Health SIG Co-convenors
August 2011



Drug Information and Clinical Pharmacy SIG Annual Report 2011

Introduction

The DICP SIG has made further progress this year in standardising and sharing resources. The annual SIG meeting scheduled for Christchurch in May had to be postponed and is to take place in August. Many thanks to Middlemore Hospital for taking this on at short notice. Work has begun on the Terms of Reference for the SIG to bring it in line with the NZHPA guidelines.

Achievements against annual plan

- The updating of the Medicines Information Training Manual was completed despite a delay due to the Christchurch earthquake. The updated manual now contains answers to “Test yourself” questions and has revised “Real enquiries”. It is now available on the website. Many thanks to the hard work of the editor, Pam Buffery.
- A very successful Critical Care course was run by Annie Egan with help from colleagues who could make it through the ash cloud. Participants found it extremely worthwhile and we hope this can be a forerunner to similar courses.
- National hospital-wide access to Micromedex was successfully negotiated by Billy Allan and Rob Ticehurst with agreement from hospital managers. It is hoped that this can continue.
- Rob Ticehurst has produced a revised version of the interventions database which has been circulated; some funding is needed to progress this further.
- A further hospital now has been added to those using Mi.net to record Medicines Information enquiries and work is continuing on adding a “short answer” section to the database.
- The MINZ subgroup has continued to provide a “Question of the month” to the NZHPA email list and have updated the Recommended Resources list led by Zoe Hagenson.

Income and expenditure

No SIG meeting was held in this period so the only income was from subscriptions,

Income for the year:	\$1,109.00
Expenditure:	\$314.00
Net surplus:	\$795.00

Balance in account:	\$19,217.00
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Officers and Members

Jocelyn Livesey (convenor), Melissa Young (minutes secretary), Chloe Campbell, Bob Buckham, Annie Egan, Pam Buffery, Elizabeth Brookbanks.

Membership for 2010/2011: 125 (as at 31/5/11)

Attendance at meetings

A meeting was held in conjunction with the NZHPA conference in Hamilton on 4 September 2010 with 47 members in attendance.

The AGM is to be held at the SIG meeting at Middlemore in July 2011.

Jocelyn Livesey
Drug Information and Clinical Pharmacy SIG Convenor
August 2011



Compounding, Nutrition and Oncology SIG Annual Report 2011

Introduction

Current committee - Convenor Paula Ferguson, Deputy Convenor Anita Frew and Secretary Maxine Handford.

Convenor was due for re-election so it was decided to hold re-elections for all three posts at the AGM held in July 2011.

Achievements against annual plan

- A very successful and interesting SIG meeting took place in May in Wellington, organised jointly by the DICP and CNO SIG members working at Wellington Hospital. There was a varied programme covering extemp, aseptic and cyto compounding and nutrition with presentations by CNO SIG members and external people and also combined sessions with the DICP SIG.
- Developing teaching strategies for CNO activities. It has been decided to break this down into manageable goals – see above.
- The progress of the goals of the working group set up by Pharmacy (Extemporaneous Compounded Products (ECP)) was the main focus of CNO SIG over the last year. This was very successful in that the Ora products were funded to be used as suspending agents in the compounding of oral liquids.
- There has also been an implementation of a standardised list of formulas. This is a work in progress. David Woods 'Formulation in Practise' website has been modified to accommodate this.
- Standard operating procedures (SOPs) - Geoff Stark led this subgroup and collated a list of each hospital's SOPs and briefly reviewed them with the view to standardise. It was decided that although there were variances in the SOPs they were all relevant and nothing would be gained by trying to make them all the same.
- A position statement regarding safety recommendations when reconstituting and administering BCG was compiled. This is currently with the NZHPA Executive for comment.

Officers and Members

Convenor:	Paula Ferguson
Co-convenor:	Anita Frew
Secretary:	Maxine Handford
Committee member:	Marinda van Staden

Responsibilities: Oncology lead by Anita Frew
 Extemp Compounding lead by Paula Ferguson
 Nutrition lead by Doreen Liow
 Aseptic Compounding lead by Derryn Gargiulo

Membership for 2010/2011: 40 (as at 31/5/11)

Attendance at meetings

Compounding Nutrition and Oncology (CNO) SIG Annual General Meeting, Wellington Hospital, 1 May 2010.

Present: Paula Ferguson, Derryn Gargiulo, Anita Frew, Bevan Harden, Geoff Stark, Jason Gray, Maxine Handford, Lynn Gregory, Catherine Herd, Karen Street.

CNO Special Interest Group Meeting, held at the Annual NZHPA Conference in Hamilton, 5 September 2010.

Present: Paula Ferguson, Anita Frew, Maxine Handford, Laura Clunie, Marinda van Staden, Karen Street, Tomasi Marovia, Riana Richardson, Jo-Anne Wilson, Bianca van den Heuvel.

Paula Ferguson
Compounding, Nutrition and Oncology SIG Convenor
August 2011



Technician SIG Annual Report 2011

Introduction

Our aim this year is to raise the profile of the Technician SIG by encouraging membership along with attendance at study days and the NZHPA annual conference.

Achievements against annual plan

A successful study day was held in Dunedin in April 2011 with 42 technicians attending. Interesting topics were covered and great support was received from drug companies supplying information for the technicians to take away. Congratulations to Debbie and Joanne, the team from Dunedin, for planning the day.

The Terms of Reference for the Technician SIG have been updated to now include that the SIG Convenor will be funded by the organising group to attend the annual SIG meeting (flights and accommodation).

Income and expenditure

Sponsorship and registration fees were received for the study day that was held in 2011, with the budget submitted and approved. The current account balance is \$4,423

Officers and Members

Convenor: Debbie Methers
Deputy: Brenda Edwards
Members: Dianne Gulliver

Debbie Methers
Technician SIG Convenor
August 2011



Hospital Pharmacy Managers' Forum Annual Report 2011

Introduction

The Management SIG has now been rebranded as a forum for Hospital Pharmacy Managers only. Non-members will be invited to attend meetings or present to the group. The rebranding occurred because nothing had been done for NZHPA Management SIG members for a long time, and it was unfair to keep taking subs and not giving anything in return.

Occurrence of meetings

The forum meets quarterly and provides an increased focus to hospital pharmacy management issues. This has also resulted in an increase in the number of people attending each session.

Achievements

- Agreement to undertake a joint purchase of MICROMEDEX for all DHB pharmacies.
- Implementation of a consensus statement around Repackaging Expiry Dates, which has been endorsed by Medicines Control.
- Support and advice to Pharmacy Industry Training Organisation (PITO) on the development of the Pharmacy Technician and Assistant Qualification.
- Development and implementation of a National Hospital Pharmacy antidote database.
- Sharing best practice around the Health Quality Safety Commission medicine management requirements for DHBs.

Work in development

- Establishment of a National Pharmacy Intervention Database (from the EPIFANY work).
- Exploring the options for mentoring for hospital pharmacists.
- Development of a National Clinical Pharmacist Service Framework.
- Exploring the option of a joint purchase of Medicines Complete for all DHB pharmacies.

Officers

Convener: Chris Jay
Secretary: Nigel Dean

Chris Jay
Hospital Pharmacy Managers' Forum
August 2011



2011 Report from NZHPA Archivist Euan Galloway

40 YEARS WITHOUT LAMINAR AIR FLOW

It is 40 years since I gave my first paper to a NZHPA Conference. It was in Balclutha in 1971 attended by just 26 hospital pharmacists with me the youngest, having been registered for only 3 weeks. I remember little of the papers presented that year, but what really struck me was afterwards in the bar of the local pub, mixing with the elders of hospital pharmacy and hearing their vision for the profession and their desire for it to evolve, to develop new activities and to capitalise on opportunities. The Berry Report on the practice of hospital pharmacy in New Zealand had been published the year before and stemming from that Ministerial Committee's recommendations were a host of opportunities. There were opportunities for hospital pharmacy, if only hospital pharmacists would grasp them, organise themselves and do something. I am pleased to say that as a group hospital pharmacists did just that, but individually there were exceptions.

The title of my paper 40 years ago was "Laminar Air Flow and its Pharmaceutical Applications". When I wrote it there were no laminar flow cabinets in any New Zealand hospital pharmacy, although two were on order. At the 1991 conference (along with fire crackers and billowing clouds of mag carb lev) I presented a variation on the theme titled '20 years without laminar air flow'. I confessed then that I had never worked in one, and I still haven't, so have no experience of laminar flow to talk about. It appears that laminar flow cabinets have now disappeared from most hospitals pharmacies, so I don't suppose many young pharmacists will have had that experience either.

I concluded my original presentation saying that laminar air flow is a parallel flow of highly filtered air from a high efficiency particulate air filter, which produces an extremely high degree of cleanliness. While this may be the most suitable environment for preparing a sterile pharmaceutical product, I said in 1991 that I did not believe that it was necessarily the most satisfactory environment for the practice of hospital pharmacy. I extorted complacent hospital pharmacists to stir themselves, to move out of their dispensaries into the wards and create a refreshing turbulence.

*** **

30 years ago at the 1981 NZHPA conference Jo Peel, the founder of NZHPA in recognition of the centennial year of pharmacy in New Zealand, gave a presentation titled 'The Birth of our Association'. In it he described how far hospital pharmacy had advanced in the 30 years since the formation of NZHPA in 1952. He described the difficult conditions of the 1940s and how pharmacists working in the hospital service felt humiliated and frustrated. Professionally they were considered the lowest of the low. They were not represented on the Pharmacy Board, and were not permitted to vote on its membership – only 'retail chemists' were. The formation of NZHPA and its annual conferences led to professional development, recognition and leadership of the pharmacy profession.

Also at the 1981 conference Wellington Hospital Pharmacy staff presented their new drug chart. It was a revolutionary design compared to others in use throughout the country at the time, and remarkably similar to what finally eventuated this year as the National Medication Chart – 30 years later!

1981, when hospital pharmacists received a 15% pay increase – oh for the good olde days!!

*** **

20 years ago in 1991 a review of pharmacy services in both the Canterbury and Auckland Area Health Boards led to big dramas and the beginning of many such reviews around the country resulting in changes to the management and organisation of hospital pharmacy services.

*** **

It is sad to record the deaths this year of two hospital pharmacy pioneers – Tod Webster and Harry Jones, both Fellows of NZHPA and of the Pharmaceutical Society and both recipients of the GSK/Wellcome Award in recognition of their distinguished and meritorious service to the New Zealand Hospital Pharmacists' Association.

*** **

After 40 years of causing turbulence within the hospital pharmacy and the wider pharmacy profession I am about to retire. I also want to pass onto someone else my honorary role as archivist of NZHPA. In 1981 I began collecting and preserving historical records of our Association – past newsletters, reports, conference agendas and proceedings, correspondence, membership lists and photographs, because if we don't save these treasures now, someone is sure to send them to the tip in a clean-up. Over the past 30 years I have been disappointed in the response to my many requests to members to provide this material. With a couple of exceptions the collection is only what I have spotted and saved. I ask you all for any records and memorabilia of NZHPA and hospital pharmacy practice that you may have, or happen to find, and which you could give to the archive. Also anything you have that describes the current activities and significant events of your pharmacy.

I am reminded of the wise words of the late Sheikh Zayed, the founder of the United Arab Emirates: ***“He who does not know his past cannot make the best of his present and future, for it is from the past that we learn.”***

Please help save our historical documents

and create a record of our present activities for the future.

Euan Galloway
B.Pharm FPS FHPA MNZCP ED

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September 2011