Celebrating Our Heritage
A History of the Association of Faculties of Pharmacy of Canada
The First Fifty Years
1944 - 1994
Edited by Bernard E. Riedel, C.M. and Ernst W. Stieb
A History of the Association of Faculties of Pharmacy of Canada

The First Fifty Years

1944 - 1994

Edited by
Bernard E. Riedel, C.M. and Ernst W. Stieb

Published by the Association of Faculties of Pharmacy of Canada
Association des Facultés de Pharmacie du Canada

2001

With great appreciation for a grant from
Hoffmann-La Roche Canada Ltd.

Saskatoon, SK
May 2001
To those far-sighted educators whose dedication to and perseverance in the development of academic pharmacy in Canada led to the founding of the Canadian Conference of Pharmaceutical Faculties and to all those who have followed in their footsteps as it continues as the Association of Faculties of Pharmacy of Canada.
“I am certain [that 1944] will eventually be pointed to as the beginning of a period of renaissance in Canadian pharmacy. Surely it can be said that the time is propitious and that probably at no other time since pharmacy began to be organized in Canada was there a greater opportunity for constructive thinking and development. So . . . let us now determine that there will come out of these discussions something of real and lasting value in which each and every one of us will take pride in future years.”

A.W. Matthews, Monday, August 14, 1944
Proceedings of the First Meeting of the Canadian Conference of Pharmaceutical Faculties
The Authors

André Archambault, Professeur Emeritus, Faculté de Pharmacie, Université de Montréal
  B.Pharm. (Université de Montréal); D.Pharm. (Sorbonne, Paris)

Helen M. Burt, Professor, Faculty of Pharmaceutical Sciences, University of British Columbia
  B.Pharm. (University of Bath, U.K.); Ph.D. (University of British Columbia); Certificate of Teaching in Higher Education (University of British Columbia)

J. Esmonde Cooke, former Dean, Maritime College of Pharmacy
  B.Sc.(Pharm.) (Dalhousie University), LL.D.(Hon) (Dalhousie University)

F. Norman Hughes, Dean Emeritus, Faculty of Pharmacy, University of Toronto
  Phm.B. (Ontario College of Pharmacy); B.S.(Pharm.) (Purdue University); M.A. (University of Toronto); LL.D.(Hon) (Purdue University); LL.D.(Hon) (Dalhousie University); LL.D.(Hon) (University of Toronto); D.Sc.(Hon) (Memorial University)

Roger Larose, Professeur Honoraire, Faculté de Pharmacie, Université de Montréal
  B.Pharm. (Université de Montréal)

Keith M McErlane, Professor, Faculty of Pharmaceutical Sciences, University of British Columbia
  B.Sc. Pharm. (University of Alberta); Ph.D. (University of Alberta)

Bernard E. Riedel, CM Dean Emeritus, Faculty of Pharmaceutical Sciences, University of British Columbia
  B.Sc.Pharm. (University of Alberta); M.Sc. (University of Alberta); Ph.D. (University of Western Ontario); D.Sc.(Hon) (University of Alberta)

Ernst W. Stieb, Professor Emeritus, Faculty of Pharmacy, University of Toronto
  B.Sc.Phm. (University of Toronto); M.Sc.Phm. (University of Toronto); Ph.D. (University of Wisconsin)

J. Alex Wood, Professor Emeritus, College of Pharmacy, University of Saskatchewan
  B.S.P. (University of Saskatchewan); M.S. (University of Washington); Ph.D. (University of Washington)
# Table of Contents

Foreword ........................................................................................................................................i  
   F. Norman Hughes  

Preface ..........................................................................................................................................iii  
   Helen M. Burt  

Introduction, Editorial Comment, and Acknowledgements ................................................. 1  
   Bernard E. Riedel CM  

Gestation, Birth and the Early Years, 1944-1950 ................................................................. 5  
   F. Norman Hughes, with the collaboration of Ernst W. Stieb  

The State of Pharmaceutical Education in 1944 ................................................................. 5  
The CPhA Supports Education from the Start, 1907-......................................................... 7  
The Prairie Schools Show the Way, 1917-1921 ................................................................. 7  
The CPhA Arranges the 1937 Kingston Conference of Faculties.............................. 8  
The CPhA Sponsors the 1944 Toronto Conference of Faculties:  
   the Founding Meeting of the CCPF ................................................................. 9  
The Renaissance of Canadian Pharmacy ................................................................. 12  
Some CCPF Recommendations for Canadian  
   Pharmaceutical Education ................................................................. 13  
Conference Delegates Show Strong Spirit of Cooperation................................. 14  
Provincial Statutory Bodies Meet the Challenge ............................................................. 14  
Some CCPF Milestones, 1944-1950 ................................................................. 15  
Canadian Pharmaceutical Education Benefits ............................................................. 17  

The Maritime Connection .................................................................................................... 21  
   J. Esmonde Cooke  

George A. Burbidge Exerts National and Regional Influence................................. 22  
Unifying Apprenticeship Requirements........................................................................... 23  
Considering Admission Standards ............................................................................... 23  
The Length of the Academic Program ......................................................................... 24  
The Advantages and Disadvantages of Certified Clerks ............................................. 24  
Facing the Needs of Facilities and Staffing Post World War II ......................................... 25  
The College of Pharmacy Inaugurates the Dalhousie Faculty  
   of Health Professions............................................................................................... 26  
Working toward Reciprocity ......................................................................................... 26  
Newfoundland as an Element in the Maritime Connection .............................................. 27  
Yesterday’s Tomorrow is Today ..................................................................................... 28
The Quebec Connection, 1944-1969 .......................................................... 123

 Andrée Archambault and Roger Larose
Pharmacy Teaching and Research at Quebec Universities to 1945 ....... 124
 The Institutions and Their Leaders ............................................. 124
 Developing Graduate Studies and Research ............................. 125
The Issues and Challenges of the Day .............................................. 126
 The Practice of Pharmacy in Quebec in the Early 1940’s .......... 126
 The Growth of the Pharmaceutical Industry
to the Mid-1940’s ............................................................. 126
Education and Public Health in Quebec after World War II ...... 127
Pharmacy Teaching and Research, 1944-1969 .......................... 130
 The Baccalaureate Degree Program in Pharmacy
 Gains Official Status ......................................................... 130
Postgraduate Programs Evolve into Master’s Degree
 Programs in Hospital Pharmacy: A Canadian First .............. 131
 Supporting the Advanced Education of Teaching Staff ............ 131
 Strengthening Graduate Studies and Research ....................... 132
Faculty Participate in National and Regional Pharmacy Activities .... 133

Evolution and Growth, 1969-1977:

The CCPF Becomes the AFPC and Develops .................................. 135

 J. Alex Wood
The Future Takes Direction from the Past ................................. 136
The AFPC Shares in the CFAP’s 25th Anniversary ...................... 136
The AFPC and Constituent Faculties Participate in the PEBC ......... 137
The Curriculum Changes to Suit the Times .................................. 137
Practical Professional Experience Gets Updated ...................... 139
Graduate Studies and Research Strengthen .............................. 140
The AFPC Debates the Need for a Permanent Executive Officer .... 141
The AFPC and Pharmacy in a New Age ................................. 142
The AFPC’s Role in the CCCEP and Continuing Education ......... 142
The AFPC Advises Newfoundland on Pharmaceutical Education .... 144
Some Reflected Glory, Joy Tempered with Sorrow ..................... 145

Maturing, 1977-1982:

The First Executive Director Takes Office .................................. 149

 J. Alex Wood
The Curriculum Continues to Evolve ....................................... 151
Considering Alternative Degrees ............................................. 153
The AFPC Promotes National Accreditation
 of Constituent Faculties ................................................. 154

The Canadian Journal of Pharmaceutical Sciences Falters ..... 155
The AFPC Develops Closer Relationships with the PMAC ............... 155
The AFPC Reaches Out ..................................................................... 159

On an Even Keel, 1982-1994:
The First Half Century Ends ................................................................. 163

Keith M. McErlane
The Accreditation of Constituent Faculties Becomes a Reality .......... 163
Pharmacy Management Gets Close Attention..................................... 165
The AFPC Examines Its Constitution and By-laws ......................... 166
The Canadian Journal of Pharmaceutical Sciences Ceases Publication... 167
Doctor of Pharmacy Programs Emerge in Canada ......................... 167
The AFPC Develops Its Awards Program .......................................... 168

The Challenge of Crystal Ball Gazing:
Predicting the Next Half-Century ............................................................. 171

Helen Burt
Introduction ......................................................................................... 171
Change: The General Consensus .......................................................... 173
Six Action Shoes Defined .................................................................... 174
A Long-Range Vision: Pharmacy’s Action Shoes ................................ 175
Grey Sneakers ................................................................................. 175
Purple Riding Boots ......................................................................... 177
Navy Formal Shoes ......................................................................... 179
Pink Slippers .................................................................................... 180
Brown Brogues and Orange Gumboots ............................................ 181
Concluding Remarks ......................................................................... 183

I. Annual Meetings and Officers ....................................................... 186
II. Honored Life Members ................................................................ 189
III. AFPC Awards 1982-1994 ......................................................... 192

Index of Names .................................................................................... 194
Foreword

I readily accepted the invitation to provide the foreword to this volume devoted to the first fifty years of the Canadian Conference of Pharmaceutical Faculties and its lineal successor the Association of Faculties of Pharmacy of Canada. I participated at the founding meeting in 1944 and at the fiftieth anniversary celebrations. I also had the honor of serving as the first secretary-treasurer of the CCPF and twice as Chairman (now called President), once each of both the CCPF and the AFPC.

There is no question in my own mind that the development since World War II of pharmaceutical education in Canada at both the undergraduate and graduate levels is a direct result of the CCPF/AFPC. It was also initiatives that sprang from this organization that led to the establishment of the Canadian Foundation for the Advancement of Pharmacy (now the Canadian Foundation for Pharmacy), the Pharmacy Examining Board of Canada, and the Canadian Council for the Accreditation of Pharmacy Programs; spawned the Association of Deans of Pharmacy of Canada; and helped to make the Canadian Pharmaceutical Association truly representative of all facets of Canadian pharmacy. It has been a privilege to have participated in much of this and to be the only remaining member of that small group who came together in 1944 to start the whole process.

I wish the AFPC continued success and growth in its second half century. I also commend to all present and future members the reading of this book chronicling its history as a tribute to all those who have come before. I hope you will draw as much strength of purpose and inspiration from it as have your predecessors.

F. Norman Hughes, Dean Emeritus, Faculty of Pharmacy, University of Toronto
Although it has been a long time in preparation, this worthy project of the AFPC has been finally completed. As I write this preface at the request of the editor, Dr. Bernard E. Riedel, I have seen very little of the final copy of the book and I look forward to having the opportunity to read it in its entirety. Over the years I have heard many references made by individuals to “landmark” events in the history of pharmacy that were either driven directly, or facilitated by the CCPF and later the AFPC. This book has been written to celebrate 50 years of the CCPF/AFPC and chronicles the significant events, and the growth and changes in this important national association and in pharmaceutical education, research and service.

I was a member of the Council and Executive of the AFPC for 12 years, from 1982 to 1994, and had the privilege of working with many colleagues across the country on AFPC committees and projects. “The History Book Project” arose out of a Strategic Planning Session, tacked on to the end of the Mid-year AFPC Executive Meeting, held in February, 1991. The Executive Committee consisted of President-elect Michael Spino, Past-President Pauline Beaulac, Secretary Marianne Greer, Executive Director Keith McErlane and myself as president. Our planning session was focused around how we might celebrate the 50th anniversary of the AFPC and we proposed an international symposium on pharmaceutical biotechnology and a book on the history of the AFPC. These two proposals were accepted at the Annual General and Business Meeting in May, 1991, in St. John’s, Newfoundland. The first event marking AFPC’s 50th Anniversary was the highly successful AFPC Pharmaceutical Biotechnology Conference held in Vancouver in August, 1993. At this meeting Dr. Bernard Riedel agreed to chair the Committee on the AFPC History Book and the project was initiated. The 50th Anniversary itself was commemorated in Charlottetown, P.E.I, in May 1994, with a program of invited papers, which appear as the first two chapters in this book.

In closing I would like to thank Bernie Riedel and Ernie Stieb and the various AFPC councils for their commitment to seeing this excellent project completed.

Helen M. Burt, Professor
Faculty of Pharmaceutical Sciences,
As the one who committed himself by accepting the invitation to assume the role of editor of this history, I need now to accept much of the responsibility that this publication, which was supposed to appear soon after the actual fiftieth anniversary of the CCPF/AFPC, 1994—has taken this long to see the light of day.

I need also on this occasion to recognize and stress for the readers that from the very beginning there has been a co-editor who has been most active and most influential on the nature of the document which this has become. Dr. Ernst Stieb, a true historian with appreciation for the scientific significance of proper documentation, and of the importance of accurate reporting of facts and details, has been at my side throughout this period. He has not only written an important part of the history, as the reader will note, but has also edited other important sections, bringing to them the same degree of historical accuracy that he, himself, has provided. To Ernie goes much of the credit for the usefulness of this document as a reliable picture of this organization over this period, as those in the future may have occasion to refer to it.

Any history is really a reflection of the things that have occurred over a certain period of time and, most importantly, reflects the part that individuals have played in those developments. A history must, therefore, recognize and identify the many individuals who have played a part in this whole process. It was decided that it was of great importance to have some of those who were active participants in the development of this period be those who would write the various chapters of this history. It has been possible to get such individuals, for the most part, and their contributions have now become this document. It will be noted that there is variation,
indeed some considerable variation, from one presentation to another. This was expected and was anticipated as the choice of writers was being made. There were no rigid rules imposed, no specific requirements, except that the writers were encouraged to present the material in a form that was readable by those who would be following up on the developments of this organization in the future. It was expected, of course, that the result would be a clear presentation of those things which, over the years, made, shaped, and changed the organization. Indeed it is hoped the reader finds refreshing the changes of pace from one chapter to another.

It is probably not good form to single out individuals but a reference to the names of a few of those who started this whole thing in the 1940’s might be permitted—Alexander Campbell of the University of Saskatchewan, Halley Hamilton Gaetz of Alberta and Henry E. Bletcher of Manitoba led off with meetings of the Western Schools of Pharmacy. The name of George A. Burbidge of the Maritime College of Pharmacy also arises often in this period.

The inauguration of the Canadian Conference of Pharmaceutical Faculties, the CCPF, occurred in 1944. Those involved included J.A. Marquis of Laval University, D. McDougall of the University of Manitoba, R.O. Hurst of the Ontario College of Pharmacy, E.L. Woods of the University of Saskatchewan, and A.W. Matthews of the University of Alberta. Also in attendance were C.N. Wood from the British Columbia Pharmaceutical Association, C.E. Fader representing the Maritime College of Pharmacy, and C.C. Clark and F.N. Hughes both of the Ontario College of Pharmacy. Dean E.L. Woods was elected the first Chairman and Norman Hughes, the Secretary. We are indebted to a large degree for the continuous involvement of Norman Hughes through these many years, and his presentation on the occasion of the Fiftieth Anniversary Meeting of the AFPC in Charlottetown, P.E.I., leads off this history.

Since that time there have been many who have contributed and many changes have occurred and new directions established. The chronicles of these things appear in the chapters included here. The names of those individuals appear in reference to their roles and contributions, and there have been many who have been involved. The reader is invited to note these individual commitments as he or she reads this document.

I have felt most privileged to be allowed this opportunity to put together
some of the pieces of this fifty years of progress in pharmacy academia. The period under consideration, except for the first two years when I was still serving in the Royal Canadian Air Force, corresponds exactly with my years of involvement, although the last ten years, from 1984 to 1994, I was a participant essentially as an observer, a position from which I could express my views, criticize, and protest most vehemently, but was singularly unable to influence the course of events. I had my times—I was involved. I was the Chairman of the CCPF in 1959 and I was Chairman of the last year of the CCPF, as it was at the annual meeting held in St John’s Newfoundland in 1969, decided to make changes in the organization and it was renamed the Association of Faculties of Pharmacy of Canada, the AFPC. Almost exactly then this is the chronicle of the CCPF for the first twenty-five years and of the AFPC for the next twenty-five years. What will it be twenty-five or fifty years hence?

I must give credit to those who have accepted the challenge to prepare chapters. There have been periods of inaction and delays in production but, probably, the blame lies primarily with this editor who seemed to get side-tracked by family matters and other things rather easily. A significant disappointment to me was the inability of Dean Emeritus M.J. Huston to follow through on a section that I felt he was the most able person to present, as one of those who was most active at that period of time. As one of his staff for a period of many years, I was aware of his enthusiasm for the evolution of academic pharmacy and indeed the practice of pharmacy. His name appears in a number of places throughout this history and his contributions are to be recognized.

There are many others who have contributed over the intervening years as the reader will note. It is particularly gratifying to see the involvement of younger, more recent contributors. Of those more recently involved one was given the opportunity to write a special chapter. Dr. Helen Burt accepted, somewhat timorously, the invitation to write a chapter in which she would consult a crystal ball and propose what will occur in the next fifty years as we move into the next century—the years 2000 and up. This must be recognized as an impossible task, but Helen has valiantly undertaken the challenge and included here is the result of her efforts. It is a most fitting conclusion to this history, and for some it will be an interesting reflection as they look back in the year 2044 on what was being thought about in the
last century.

There are many who have provided me with special bits of information, with pictures, memorabilia, and advice. I have used my coterie of friends and associates to critically review chapters and to propose directions that might be useful. Dr. Finlay Morrison has been a frequent recipient of my requests for advice and has served as a foil for my tirades upon occasion. Dr. Alex Wood, for a number of years a very active member of this organization and indeed its first Executive Director, has been a great help. Dr. Gordon Duff, who is known for his collection of Canadian academic pharmacy artifacts, has provided pictures and details. Members of the staff of the AFPC—Kevin Moody, Penny Graham, Ken Ready (who badgered me unmercifully—and really got me to pay attention) and Jim Blackburn have assisted me greatly.

The final stage of this project, its publication, has been provided for by a generous grant from a member of the pharmaceutical industry, Hoffmann-La Roche Canada Ltd., and we are most indebted to them for their support and their patience in waiting for the day of completion.

Bernard E.Riedel, CM  
Chairman, CCPF  
1958-59 and 1968-69

Hoffmann-La Roche is pleased to have the opportunity to sponsor this book celebrating the history of the Association of Faculties of Pharmacy of Canada. Pharmacists play an increasingly important role in our health care system today and are trusted by Canadians to give solid, valuable advice on prescription and over the counter medications. Hoffmann-La Roche values pharmacists and we congratulate the schools of pharmacy across the country for their significant contribution to pharmacy education in Canada.
Gestation, Birth and the Early Years, 1944-1950*

by F. Norman Hughes†
with the collaboration of Ernst W. Stieb††

Fifty years actually represent nearly three generations. Each of those generations of members of what is now the Association of Faculties of Pharmacy of Canada (AFPC) has made its own valuable contributions to the profession. However, our purpose today is to look at the early years. On a Golden Anniversary, it seems especially appropriate to do so. We can thus see where we have come from and in this way remember the early workers and, beyond them, some of the pioneers in Canadian pharmaceutical education.

The State of Pharmaceutical Education in 1944

The younger members of our Association would find it difficult to understand how exceedingly different Canadian pharmaceutical education was in 1944. There were seven schools, including two in Quebec, but none yet in British Columbia or Newfoundland. Two—the Ontario College of Pharmacy and the Maritime College of Pharmacy—were operated by the profession, while the other five were in universities. In two provinces (British Columbia and Prince Edward Island), licensing was by examination with no formal course of study. In four of the schools (Alberta, Saskatchewan, Ontario and the

---

* Based on an invited paper presented to the AFPC 50th Anniversary Tribute, 29 May 1994, Charlottetown, PEI.
† Dean Emeritus and Professor Emeritus, Faculty of Pharmacy, University of Toronto; Chairman of CCPF 1951-52 and AFPC 1970.
†† Professor Emeritus, Faculty of Pharmacy, University of Toronto; Chairman, AFPC 1973-74.
Maritimes) serving five provinces, the prelicentiate course was two years. One of these (Alberta) offered an optional 3-year degree course; a second one (Saskatchewan), optional 3- and 4-year degree programmes; and a third (the Maritime College), an optional 4-year degree. On the other hand, Manitoba gave only the 3-year degree course as required for the licence in that province; while both Quebec schools had part-time 4 years of study as preparation for the licencing examinations.\(^1\)

There was no graduate study available in a Canadian pharmacy faculty and very little scientific research. My recollection is that the total number of full-time academic staff in the schools approximated 15, compared to over 180 today. The space, equipment, and facilities were primitive compared with today’s.

To compound the problem, almost all of the schools of pharmacy in the USA had 4-year courses for a decade. To make it worse, Canadian educators were aware of this. For example, the *Canadian Pharmaceutical Journal* carried an article by this writer in its December 15, 1943 issue, entitled: “Canadian Pharmacy Education is Behind the Times”.\(^2\) Well then, why had nothing been done about it? Dean E. L. Woods, of the University of Saskatchewan College of Pharmacy, gave one very good reason when, a short time later, he commented on that article as part of the collected views of Canadian deans and directors on the current state of pharmaceutical education in Canada:

> Undoubtedly, one of the chief reasons for this unfortunate situation is to be found in the lack of general agreement on aims and objectives and the absence of a definite national programme for their realization.\(^3\)

In other words, the educators from all provinces needed to sit down together and resolve problems related to standards, courses, and curricula. This too had been known for some time.
CPhA Supports Education from the Start, 1907 -

When the Canadian Pharmaceutical Association (CPhA) was founded in 1907, the importance of education was reflected in the objectives in its constitution. Terms of reference for its Committee on Education included consideration of educational requirements in the different provinces and “the adoption of a uniform standard for the Board of Examinations in pharmacy throughout Canada”. Except during the period of World War I, 1914-1918, the Committee appears to have been active. In 1909, it suggested a “central Board” as a way to achieve uniformity.

The Prairie Schools Show the Way, 1917-1921

The first recorded meeting of a group of Canadian pharmacy educators from more than one school occurred in Winnipeg in 1917, among the respective heads of the pharmacy programmes at the universities of Alberta, Saskatchewan, and Manitoba—Halley Hamilton Gaetz, Alexander Campbell, and Henry E. Bletcher. Those prairie schools participated in three further meetings, in 1918, 1919, and 1921. George A. Burbidge of the CPhA Committee pointed, in 1920, to these meetings as examples to be followed. (Burbidge subsequently, 1925-1943, became Dean of the Maritime College of Pharmacy, which he had been largely instrumental in founding, after having been actively involved in pharmaceutical education since 1908.) Among others suggesting similar meetings, including academics and presidents of CPhA, was the editor of the Canadian Pharmaceutical Journal, George E. Gibbard, who editorially in 1922 urged a “Conference of Pharmacy Faculties” to be part of the CPhA conventions.

The principal problem preventing such meetings was for many years a financial one related to the size of Canada. The CPhA was essentially a
federation of the provincial statutory bodies, each of which paid a small per capita fee for its members. For some years this was a mere 50 cents. Bearing in mind that in at least some provinces only owners and managers of community pharmacies were on the registers, the fee income to the national association was meager indeed. By the 1930’s, at least, the fee had risen to $2.00 and in the early 1940’s, to $5.00. This created quite an improved fiscal picture for the CPhA.10

The CPhA Arranges the 1937 Kingston Conference of Faculties

CPhA arranged what was termed a “Conference of Faculties” at a joint convention of the CPhA and the Ontario Retail Druggists Association (ORDA, now OPA) in Kingston, Ontario, in 1937.11 An editorial comment published prior to that conference indicates that A.W. Matthews, then at the University of Alberta, had “suggested such a conference” at the time of the joint meeting of the American Pharmaceutical Association with CPhA in Toronto, five years earlier in 1932.12 Indeed, a general call had been issued by the American Association of Colleges of Pharmacy for their Canadian colleagues to meet with them at that time; and faculty members from four Canadian schools apparently took up the invitation. The names Charles F. Heebner, R.O. Hurst, and Cecil C. Clark of the Ontario College of Pharmacy, along with George Burbidge of the Maritime College surface in various connections, but there are few published details of direct Canadian participation in AACP activities.13 Ironically, at that same meeting, AACP approved a four-year B.Sc. degree as the minimum requirement for its member colleges; and the ubiquitous Burbidge, this time in his address as CPhA President to the CPhA part of the joint Toronto meeting, urged “a Conference of the [Canadian] Colleges in the near future”, to discuss a four-year course as a Canadian standard.14

The Kingston conference, 5 years later, was the earliest response to either Burbidge’s or Matthews’s calls. Three pharmacy deans—Burbidge of the Maritime College, Woods of the University of Saskatchewan, and Hurst of the Ontario College—met, along with OCP Professors Cecil Clark and Paul L. Scott, and OCP President H. Milton Corbett. University of Alberta Dean F.A. Stewart Dunn had also been at that CPhA meeting, but apparently was not present for this conference. Topics dealt with included: the uniformity of standards, including admission requirements and curricula, apprenticeship
requirements, and the advantages of having such meetings. It was agreed that a summary of topics discussed would be sent to each faculty member of the various schools of pharmacy in Canada suggesting interchanges of views by mail with ideas for future meetings.15

So time continued its ripening process for a full-scale, national academic conference. Insofar as Ontario was concerned, another event had a real catalytic effect for much higher standards. Upon being engaged by the College in 1937, according to plan this writer went to Purdue University to continue studies. The experience showed him how badly pharmaceutical education had fallen behind in Ontario. Consequently, he began to promote with the faculty and OCP Council members the necessary steps to correct the situation. As part of his campaign, he wrote the article in 1943, referred to earlier in this account.

The CPhA Sponsors the 1944 Toronto Conference of Faculties: The Founding Meeting of the CCPF

Similar calls for change took place concurrently in the other provinces and within the CPhA. That same year, 1943, M.J. Warner of Alberta was elected President of the CPhA and V.E. Hessell, also from Alberta, was named Director of the CPhA Board of Commercial Interests. Both men had been promoting a broader training for pharmacists to meet expanding pharmaceutical services, particularly in hospitals. At the January 1944 meeting of the CPhA Executive, President Warner received authorization to convene a conference of deans, directors, and heads of the schools of pharmacy to take place under CPhA sponsorship in Toronto, that August, at the same time as the annual meeting of the CPhA.16

Consequently, a gathering of representatives of Canadian schools took place, 14-16 August 1944, at the Ontario College of Pharmacy. Thus was born what was to be named the Canadian Conference of Pharmaceutical Faculties (CCPF), which in 1969 became the Association of Faculties of Pharmacy of Canada (AFPC). It is interesting that each name existed for 25 of the first 50 years, with “AFPC” now continuing, of course, into the future.
Those present were: Dr. A. W. Matthews, Director, School of Pharmacy, University of Alberta; Dean E.L. Woods, College of Pharmacy, University of Saskatchewan; Professor D. McDougall, Head, Department of Pharmacy and Pharmaceutical Chemistry, University of Manitoba; Dean R. O. Hurst, Ontario College of Pharmacy; Dean E.L. Woods, University of Saskatchewan; and Dr. A.W. Matthews, University of Alberta.

In planning for that conference, none of us really knew whether there would be another meeting in the foreseeable future. Consequently, considerable time and correspondence was spent in advance discussing the agenda and the specific objectives, so that as many as possible of the most important matters could be decided at that meeting. Therefore, in these exchanges led by A. W. Matthews, another ubiquitous player in Canadian pharmacy, an
agenda of 15 items was drawn up and distributed to all schools. In addition, Dean Matthews also prepared and presented at that meeting a remarkable document on objectives for the Conference and on the desirable nature that a permanent organization might take. His presentation, on the first day, of his creative master plan for the association was indeed a most compelling one. Undoubtedly, it shortened the time required to settle some of the important subject matters. The excellent leadership of the elected chairman for the meeting, E. L. Woods, was also important.

The first session of the Canadian Conference of Pharmaceutical Faculties with Dean E. L. Woods of the University of Saskatchewan as chairman. (Clockwise around the table) Professor D. McDougall (Manitoba); C. E. Fader (Maritime College of Pharmacy); C. C. Clark (Ontario College of Pharmacy); Dean R. O. Hurst (Ontario College of Pharmacy); Chairman Woods; Professor F. Norman Hughes (Ontario College of Pharmacy); Dr. A. W. Matthews (Alberta); C. N. Wood (British Columbia); and Professor J. A. Marquis (Laval University).

The proposed Immediate Objectives, important for the time, but irrelevant today, included apprenticeship, the Canadian Formulary, and the rehabilitation of ex-service personnel. The Long-range Objectives may be summarized as follows: student selection and scholarships, course requirements and minimum syllabus, graduate study, research, extension programs, and “collaboration of allied drug industries in a program for improving facilities for pharmaceutical education”.17
The Renaissance of Canadian Pharmacy

In his presentation, Dr. Matthews made a prediction which turned out later to have been remarkably true when he said that 1944 would:

eventually be pointed to as the beginning of a period of renaissance in Canadian pharmacy. Surely the time is propitious and at no other time since pharmacy began to be organized in Canada was there a greater opportunity for constructive thinking and development.18

Among those notable “developments” which followed, some in very short order, were:

- the Canadian Foundation for the Advancement of Pharmacy (CFAP), in 1945, as a direct consequence of CCPF and particularly A. W. Matthews;
- the Canadian Society of Hospital Pharmacists (CSHP), in 1947;
- the move initiated in 1951 through the so-called “Hughes Report” to broaden the CPhA to embrace pharmacists from all branches of pharmacy, including academe, saw CCPF (and CSHP) gain earliest representation, followed gradually by the other estates of pharmacy;
- the Canadian Academy of the History of Pharmacy (CAHP), in 1955;
- the Conference of Pharmacy Registrars of Canada (CPRC), in 1956;
- the Canadian Society of Industrial Pharmacists (CSIP), in 1958;
- the Canadian Hospital Pharmacy Residency Board (CHPRB), in 1962, with input from CSHP and jointly, until recently, CCPF/AFPC;
- the Pharmacy Examining Board of Canada (PEBC), by federal statute, in 1963, with active involvement by CCPF/AFPC from the beginning to the present;
- the Canadian Wholesale Drug Association (CWDA), in 1964;
- the Canadian Society of Governmental Pharmacists (CSGP), in 1965;
- the Association of Deans of Pharmacy of Canada (ADPC), in 1965,

A. Whitney Matthews, Director, School of Pharmacy, University of Alberta (1943-1945) and Dean, Faculty of Pharmacy, University of British Columbia (1952-1967)
flowing out of CCPF;
• the Canadian Drug Manufacturers’ Association (CDMA), in 1966-67;
• the Canadian Association of Pharmacy Students and Interns (CAPSI), in 1968, with CPhA and CCPF/AFPC encouragement;
• the Canadian Conference [later “Council”] on Continuing Education in Pharmacy (CCCEP), in 1973, with AFPC participation from the start and
• the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) in 1993.

This catalogue could continue, but the “developments” cited certainly support Dr. Matthews’s premise that 1944 was indeed the beginning of a renaissance in Canadian pharmacy.

Some CCPF Recommendations for Canadian Pharmaceutical Education

To complete the agenda and to approve the Report of the Committee on Resolutions,¹⁹ which crystallized the decisions arrived at in the discussions at the founding meeting in 1944, took two and a half days. The last afternoon was reserved for the sponsor Council of the CPhA to receive the Report of the Conference. That Report reflected well the sound way in which the principal problems defined in advance were resolved by the participants. It recommended, broadly stated:

1. Establishment of a permanent body—the CCPF—composed of the named constituent faculties, with at least one official representative from each, to convene concurrently with the annual meeting of the CPhA Council.
2. A compromise reduction of the apprenticeship requirement to 18 months.
3. Approval for a minimum college course of three years, after senior matriculation, for the degree of B.Sc. in Pharmacy, to be obligatory for the licence to practise retail pharmacy. For specialization in “related fields” or for graduate study, four full years should be mandatory. Consideration to be given as early as possible to require four years as well for retail pharmacy.
4. Establishment of a “Foundation” through the CPhA, the allied drug industries, and this Conference, to receive and administer funds
to support graduate study and research. (This body, founded in May 1945, received its federal charter that same September. The organization was, of course, the Canadian Foundation for the Advancement of Pharmacy, CFAP, since 1984 shortened to CFP).

Conference Delegates Show Strong Spirit of Cooperation

As I look back after 50 years, I am amazed at how much was accomplished in such a short period. Yet at that 1944 meeting, we all felt that it was going to happen. The need was so great, and advance preparations had been so complete. At the same time, the participating delegates worked very hard and were quite willing to compromise on minor points in order to achieve consensus on major subjects. We were fortunate too in the choice of Chairman E. L. Woods, who was superb and re-elected for 1945 and 1946. It was my good fortune to serve with him as Secretary for those years and to learn at first hand how very competent he was and how well he worked with any group. However, all present at that first meeting worked well together, and I felt privileged to be part of the process.

Aside from the few individuals already mentioned, Canadian pharmacy owes a great deal to all participants in the early CCPF meetings between 1944 and 1950: M. J. Huston, J. E. Cooke, F. C. Vadboncoeur, W. C. MacAulay, J. U. Demers; and gradually increasing numbers of the then so-called “junior” staff members, such as J. G. Jeffrey, G. C. Walker, J. R. Murray, B. E. Riedel, R. Larose, G. A. Groves, G. R. Paterson, P. B. Brewer, L. Brown, R. Plourde, I. Stauffer, J. Summers, A. J. Anderson, G. Filteau, and many others. By 1950, attendance at the meetings had reached 30, three times the number at the first meeting.

Provincial Statutory Bodies Meet the Challenge

Raising academic standards for licensure required action, not only by the educators but also by the respective provincial pharmaceutical statutory authorities. The rapport between the two in most provinces was so good that the necessary changes occurred relatively quickly, and this began within the year. In fact, two provinces (Ontario and Saskatchewan) very soon approved four years as the minimum for the licence, with the exact effective dates to be determined. Within several years, the three-year...
course as minimum was operative in the others, except Quebec, which now offered only a full four-year program following which licensure was by examination. (CCPF ultimately approved a minimum four-year course for all purposes in 1957).21

Some CCPF Milestones, 1944-1950

Some of the other matters which occupied the Conference up to 1950 included:

- Several years were required to finalize the sort of organization desired with financial support to ensure annual meetings. As early as 1945, CPhA voted to pay for one delegate from each constituent faculty of CCPF as well as the Secretary to attend the annual CCPF meeting, then in 1946, agreed to finance those meetings to a limit of $1,500. Later, the CFAP and CPhA agreed to share costs to $2,000, with Foundation support continuing in one way or another until 1988.22

- Details of the minimum three-year curriculum approved in 1944 evolved over the next several years and were completed in 1950.23 A few years later in 1957, as already indicated, CCPF agreed to a minimum four-year curriculum.24 As in the United States, often held up as a model to be emulated, a number of Canadian schools initiated longer programs well before they became minimum standards across the country.

- In 1945, the Conference agreed to work for the CPhA on what became the 1949 revision of the Canadian Formulary.25 (That, as it turned out, was to be the last edition of the CF, although it survived, remarkably, as an official compendium under federal legislation until 1993).

- In 1946, the CCPF Secretary began to present to the annual meeting a yearly report26 replete with tables showing enrollments, examination results, and graduation statistics in provinces in various years; extremely useful data was thus preserved. In this connection, I would like to recognize George Jeffrey for the great personal assistance he was to me during the latter half of my term as Secretary-Treasurer, when he served (1947-1950) as Assistant Secretary. His major responsibility was to assist in the collection and processing of the increasing volume of that same data, which had become an integral but onerous (for me) part of the report; he also began the important process of indexing the annual CCPF Proceedings.

- George Jeffrey also briefly took over from the Secretary-Treasurer as
editor of a very informative and popular newsletter, the CCPF Bulletin, launched in 1948. It lasted until 1969, when CCPF became AFPC. (AFPC Communications is a recent re-incarnation, albeit applying advances of modern technology.)

- Over a period of two decades, 1946-1966, members of the constituent faculties contributed papers for a Conference Section of the Canadian Pharmaceutical Journal. CPhA paid CCPF for many of these contributions, as a means of providing welcome assistance for junior staff to attend the meetings.

- Annual reports from delegates revealed steady progress in each faculty respecting courses, staff, facilities, and research. For example, the 1947 CCPF Proceedings carried the significant story of the establishment, in 1946, of the Department of Pharmacy in the University of British Columbia, with Dean E. L. Woods from the University of Saskatchewan as its first head. (Very shortly thereafter, the Department gained “Faculty” status). Wesley C. MacAulay succeeded to the Deanship of the University of Saskatchewan College of Pharmacy. Mervyn J. Huston became Director of the University of Alberta School when A. W. Matthews accepted a position with the Rexall Drug Co. Dr. Matthews returned to academic life as Dean of Pharmacy at the University of

The Canadian Conference of Pharmaceutical Faculties held eight sessions during the 1947 CPhA Conference in Vancouver. Seated, left to right: Dr. E. Vadboncoeur, University of Montreal; Professor F. N. Hughes, Ontario College of Pharmacy (OCP), Conference Secretary; Dean R. O. Hurst, OCP, Conference Chairman; Prof. J. G. Jeffrey, University of Saskatchewan; J. E. Cooke, Maritime College of Pharmacy. Standing, left to right: Prof. J. A. Marquis, Laval University, Dr. A. W. Matthews, Director of Analytical Research, Rexall Drug Co., Toronto; Prof. D. McDougall, University of Manitoba; Prof. P. Brewer, University of British Columbia; Dean E. L. Woods, University of British Columbia; Prof. M. J. Huston, University of Alberta; J. R. Murray, University of Alberta; Dean W. C. MacAulay, University of Saskatchewan. (Not included in the picture were: F. A. Morrison, University of British Columbia; Prof. L. W. Rising, University of Washington, and A. O. Davidson, Dominion Analyst, Dept. of National Health and Welfare, Ottawa.)
British Columbia following the sudden death of Dean Woods a few years later.

• A Teachers’ Conference, patterned after that of the AACP, became a regular event at each annual meeting, starting in 1945, and with long-term CFAP financial support once the Foundation became established.

• The first Conference on Research was held in 1948 under the sponsorship of CFAP and with ongoing Foundation assistance for some four decades. With the increase in research in the constituent faculties, consideration was given about the same time to creating a “Scientific Pharmaceutical Journal” or a Scientific Section in the Canadian Pharmaceutical Journal. The scientific section eventually materialized in the Journal in 1957 and continued through 1965, to be succeeded by the Canadian Journal of Pharmaceutical Sciences, 1966-1980. CPhA as well as CFAP financial support were crucial to maintain the latter venture as long as it lasted.

• Considerable attention was given to extension or continuing education activities for the benefit of practitioners, especially with the steady additions to teaching staffs and with CFAP financial support. In 1950, there were nearly 60 continuing education papers presented, some a number of times. I have very happy memories of many contacts with pharmacists as a result of those programmes. Both practitioners and colleges benefited from the experiences.

**Canadian Pharmaceutical Education Benefits**

These are only some representative examples of the concerns and activities that occupied the lineal precursor of the AFPC during the first few years. Vital steps were taken to bring Canadian pharmaceutical education up to North American standards. As mentioned before, the catalytic effect on the profession has been profound and far reaching, and most importantly, the Association has consistently moved the standards of education forward, providing greater scope for the practice of pharmacy. Pharmaceutical education today bears little resemblance to what it was when I first became involved with pharmacy in 1924. Without question, the CCPF/AFPC has been responsible to a large degree, but let us not stop there.

If the CPhA had not brought the academics together in 1944, no one knows how long the changes would have been delayed. Furthermore, the basic interest of our national association goes back to its founding in 1907, when
the importance of education was contained in its objectives and in the terms of reference for its Committee on Pharmaceutical Education. There is also no question that without the substantial financial assistance of the CFAP/CFP over most of the first fifty years, the truly dramatic progress of the CCPF/AFPC and of pharmaceutical education in Canada from the mid-1940’s onward would likely have been noticeably delayed or seriously curtailed.

Finally, I remember that looking ahead to the founding of the CPhA, and certainly afterwards, George A. Burbidge wrote urging the recognition of the importance of education by the new Association. His name comes up so often. So let us ever be grateful to the CPhA, CFP, and to the early pioneers who predated our own beginnings. They deserve it.

References

1 Summary table, Proc. CCPF (1944): 32.


8 For a fuller review of Burbidge’s activities and accomplishments, see the insightful account by one of his contemporaries, Jessie I. MacKnight, *George Arnold Burbidge, Dean of Pharmacy in the Maritimes and a Founder of Canadian Pharmacy; A Biography* (University of Toronto Press, 1966, for the Canadian Academy of the History of Pharmacy, viii + 18 pp.), based upon her presentation to a CAHP meeting at the 1964 CPhA Conference.


The Maritime Connection*

by J. Esmonde Cooke†

I consider it a distinct honor to have been invited to contribute to a publication recognizing the 50th anniversary of the founding of the Association of Faculties of Pharmacy of Canada. In May 1994, I shared with Dr. F. Norman Hughes a much treasured place on the special Golden Anniversary program as part of the AFPC sessions in Charlottetown, PEI, during the annual Conference of the Canadian Pharmaceutical Association and related organizations. That assignment was indeed a most delightful one, not only for the flood of memories it stirred in its preparation, but also in seeing again friends and colleagues, like Norman Hughes, my association with whom extends back through all but one of those 50 years. Because our paths have crossed so much over the years and in the same causes, some of what I record now may touch on the same ground as others cover, for which I ask the readers to be understanding and tolerant.

Please appreciate the magnitude of my assignment to deal with “The Maritime Connection” as part of AFPC or the Canadian Conference of Pharmaceutical Faculties (CCPF), as it was known from 1944 to 1969, the first half of its existence. Although I had personally participated actively in much of that history onward from 1945, the second CCPF meeting, my

* Based on an invited paper presented to the AFPC 50th Anniversary Tribute, 29 May 1994, Charlottetown, PEI.
† Former Dean, Maritime College of Pharmacy; Chairman, CCPF 1955-56
poor recall of many details forced me to revisit the CCPF/AFPC Proceedings to revive memories of association activities during the last five decades. I, naturally, have had to be selective in the items I plucked from those imposing records, being particularly mindful of my assigned task to view them from the Maritime perspective.

**George A. Burbidge Exerts National and Regional Influence**

By way of preface, may I comment that we in the Maritimes were most fortunate to have a strong advocate in matters pertaining to the advancement of Canadian pharmaceutical education, as well as of pharmacy itself, in the person of George A. Burbidge (1871-1943). He was actively involved with pharmaceutical education in the Maritimes from 1908 onward and served (1925-1943) as Dean of the Maritime College of Pharmacy (affiliated with Dalhousie University), which he had been instrumental in founding. Burbidge’s influence, however, extended far beyond the Eastern seaboard of Canada. A staunch proponent of a national professional association for Canadian pharmacy, he clearly suggested the establishment of and became one of the founding “fathers”, as well as the first vice-president, of the Canadian Pharmaceutical Association in 1907.

For most of his life from then on as a CPhA Council member and twice president, Burbidge supported in particular CPhA’s aspirations for pharmaceutical education. Thus, in 1920, during his tenure as chair of CPhA’s Committee on Education, as Dr. Hughes has chronicled earlier in this publication, Burbidge pointed to the meetings of heads of the prairie schools of pharmacy as worthy to be emulated at a national level. Later, as CPhA president during its Silver Anniversary celebrations in Toronto in 1932, jointly with its American sister organization, Burbidge strongly recommended “a conference [soon] of the [Canadian] Colleges [of Pharmacy]” to discuss the baccalaureate degree as a Canadian standard.
He was again very much a presence among the pharmacy educators gathered at the 1937 CPhA Kingston meeting.

Unfortunately, George Burbidge was not destined to take part in the August 1944 founding of CCPF/AFPC; he died less than a year before the momentous event. His place was taken at the Toronto conference by Charles E. Fader, a member of the Board of Trustees of the Maritime College, which had not yet resolved the difficult task of selecting Burbidge’s successor—indeed, made do with an acting dean until 1950.1 (Editor’s Note: One J. Esmonde Cooke, author of these pages of AFPC history, proved a worthy successor to Burbidge, when Cooke later served as dean, during the period 1952-1961). I started to represent the Maritime College at CCPF meetings in 1945 (Editor’s Note: And, he hasn’t missed a CPhA conference since then!). But for now, let us return one short year to 1944 and come to 1945 in due course.

**Unifying Apprenticeship Requirements**

Let us turn now to our pleasant task of exploring the Maritime part in the life and deliberations of CCPF/AFPC during its first half century, starting with some matters of immediate and others of long-range concern at the founding meeting in 1944. The subject of apprenticeship presented many dilemmas for pharmacy schools and regulatory bodies across Canada. In the Maritimes, our College had to deal with varying requirements imposed in Nova Scotia, New Brunswick, and Prince Edward Island. Questions of the optimal length of time of such apprenticeship or internship and at what point in the would-be pharmacist’s training or education could it be most valuable concerned respective bodies in all provinces, and consequently provoked much discussion at the 1944 meeting. Opinions varied greatly from zero to several years, served before, during and/or after admission to a school of pharmacy. Moreover, practices south of the border and across the “Pond” were also too disparate to be of any great consequence for the debate.

**Considering Admission Standards**

Coupled with the questions of the length and positioning of apprenticeship were those concerning requirements for admission to schools of pharmacy across the country. Here again, there were differences within the three
Maritime provinces as established by the relevant bodies in their respective jurisdictions. The terms “equivalent” and “matriculation” needed to be considered to agree upon a minimum entrance requirement.

Charles Fader, speaking for the Maritime College, pointed out that discussion of these matters was ongoing within the Maritimes with a view to achieving uniformity. He expressed the view that when or if the Conference group approved “the equivalent of Senior Matriculation [as] . . . the minimum requirement, it would strengthen the hand of the proponents of this standard in the Maritimes”. The Minutes of the 1944 meeting subsequently record that “it was the unanimous opinion of the meeting [that such a standard] . . . be required for the study of Pharmacy”.

The Length of the Academic Program

The minimum length of the academic program in Canadian schools also occupied the 1944 and many successive CCPF meetings. At this time in the Maritimes, registration as a pharmacist required the completion of a 2-year diploma program (an outgrowth of an earlier 1-year program) as the academic component, along with a period of practical training. An additional two years of study earned the optional B.Sc. degree in pharmacy. The elementary pharmacy and diploma programs eventually terminated in 1961 with the initiation of the 4-year degree program, recommended as a minimum Canadian requirement by CCPF already in 1944 and affirmed in 1957. Both the diploma and degree programs involved staff members of Dalhousie University.

The Advantages and Disadvantages of Certified Clerks

A course of study leading to the category of “Certified Clerk” also existed by correspondence during the fall and winter months, followed by a spring term requiring 6 to 8 weeks of attendance at the College of Pharmacy. Successful completion of this, along with an in-service requirement granted the status of certified clerk, which permitted the individual to dispense under the supervision of a registered pharmacist. While the system provided staff with minimum qualifications, abuses occurred and thus created problems with the enforcement of the Pharmacy Act of Nova Scotia.
Facing the Needs of Facilities and Staffing Post World War II

Also on the agenda in the Maritimes for the long range, as in other CCPF schools, was the need for major expansion of facilities and staff—to deal with anticipated pressures on enrollment in the post World War II era, as well as the need to catch up with their American cousins in terms of undergraduate curriculum, graduate studies, and research. At the Maritime College, Dean Burbidge had carried on the major teaching role, but depended for assistance on Dalhousie faculty members and a group of willing local pharmacists. I joined the College staff on a full-time basis in 1945, under Acting Dean J. D. Walsh, to teach and do administrative work, much as Burbidge had done for many years. Jessie I. MacKnight was then responsible for the direction of the Elementary Pharmacy program, she conducted the dispensing classes in each year of the diploma program, and also managed at the same time to practise in the pharmacy at the Victoria General Hospital. She was persuaded to join the College staff on a full-time basis in 1945, with expansion of the diploma program.
Many of these changes reflected the fact that the Maritime College of Pharmacy, like other CCPF schools, faced many problems at that time when large numbers of men and women returning from military service put great extra strain upon already stretched physical, financial, and human resources. Some of that would be remedied by welcome financial infusions from the newly formed (1945) Canadian Foundation for Pharmacy, an outgrowth of CCPF, as well as by increasing recognition of the needs of pharmacy schools within their universities as the schools pulled themselves up through increased CCPF standards.

**The College of Pharmacy Inaugurates the Dalhousie Faculty of Health Professions**

For the Maritime College, the appointment of Dr. Gordon Duff as my successor (1961-1972) was both welcome and timely. He became Director of the new College of Pharmacy, which was the first of the constituent parts of the equally new Faculty of Health Professions, launched just then by Dalhousie University. The pharmacists of the Maritimes and I, personally, owe much to Dr. Duff for his years of untiring work for the College and for pharmacy in the Maritimes and nationally. Certainly key factors were his initiation of the baccalaureate degree program, as well as development of College graduate and research activities, hand in hand with the strengthening of the faculty complement and physical facilities—all in keeping with long-range CCPF goals.

**Working toward Reciprocity**

The subject of free movement of graduates between provinces also provoked much discussion at early Conference meetings with the use of two terms predominating, “interprovincial transfers” and “reciprocity”. While not unanimous, the general consensus was that the prospect of some form of
uniform licensure would be required in the future. Reciprocity, of course, also depended very much upon reasonable uniformity of apprenticeship, admission, and academic requirements. The precipitating factor leading to the ultimate establishment of the Pharmacy Examining Board of Canada came when then CPhA Executive Director John C. Turnbull asked the Conference to study and report on all aspects of the subject that might ultimately lead to reciprocity in pharmacy across Canada. It was made clear that because licensing was a provincial matter, this was only a request to advise the CPhA Council and that Council members should seek directives from their respective provincial licensing bodies (CPhA being at that time still predominantly a federation of those same bodies). All CCPF constituent faculties, including the Dalhousie College of Pharmacy, worked together to achieve curricular and related revisions necessary for uniform Canadian standards to allow PEBC to come into being in December 1963.4

**Newfoundland as an Element in the Maritime Connection**

I think that this presentation of the “Maritime Connection” must also include some comments about Newfoundland, which joined Confederation in 1949, and the work of members of the Newfoundland Pharmaceutical Association, which was invited to join CPhA in 1955. From the time of its founding in 1910 until 1966, the Newfoundland Association supervised a system of apprenticeship, augmented by classes conducted by local pharmacists. However, a number of students came to the Maritime College from Newfoundland to complete its diploma program. When I joined the College faculty, and while Acting Dean Walsh was in office, several regrettably unsuccessful attempts were made to work out an agreement with the Newfoundland Association to send their students to Halifax for a course of study as a prerequisite to licensure.

Efforts were also made in the early to mid 1960’s to establish an academic program by working with Memorial University and Dalhousie Pharmacy College Director Duff, who recommended approaching CCPF for help. From this there flowed in 1965 a special CCPF committee, supported by the Canadian Foundation for Pharmacy, to visit, study and recommend upon pharmaceutical education in Newfoundland. That committee consisted of F. Norman Hughes, André Archambault, and Bernard Riedel. That exhaustive study recommended the establishment of a pharmacy program in Memorial University, which received the unqualified approval of the
Newfoundland Association. However, the Newfoundland government eventually agreed to considerably less than had initially been recommended or promised. As a result, pharmaceutical education came instead, by government insistence, under the jurisdiction of the Newfoundland College of Trades and Technology, from 1971 until the present program was finally established at Memorial in 1986. The program at the College of Trades had been devised, under duress, with advice from Gordon Duff.

In the interim, in 1975, there had been still another AFPC special task force, again Foundation supported. This task force included Alex Wood, Ernst Stieb, and Bernard Riedel who essentially came to the same conclusions as the earlier study. In any case, a major catalyst in overcoming all the obstacles that lay in the way of the happy outcome was unquestionably J. J. (“Jim”) O’Mara, Newfoundland Association Secretary-Registrar (1981-90). He worked tirelessly, with boundless Irish determination and congeniality, to gain a rightful place for pharmacy and pharmaceutical education in Newfoundland.5

**Yesterday’s Tomorrow is Today**

While undoubtedly in my effort to be brief I have necessarily not been able to include many details, I hope the readers will get at least an overview of some of the concerns of educators and pharmacists in the Maritimes and how they related to those in the rest of Canada and specifically those of CCPF/AFPC during my years of involvement.

Many years ago, Dr. Rufus A. Lyman, noted American educator and editor, wrote that “American Pharmacy [stood].... on the threshold of a new era of great opportunity and service if [it took] advantage of the setting”. Fifty years ago, the CCPF (now AFPC) took those words to heart and, while keeping their minds on matters of immediate concern, did not lose sight of the vision of “tomorrow”. That tomorrow is now, today. AFPC is among
the important, influential groups that serve Canadian pharmacy today. The
discussions and decisions taken by our association over the past 50 years
have had a profound effect on the development of not only pharmaceutical
education, but ultimately also of the profession of pharmacy itself in
Canada.

May the next half century be as fruitful!

References

1 For a fuller account of Burbidge’s activities and accomplishments,
see F. Norman Hughes, “The Early Years .....”, elsewhere in this
publication. Also useful are Jessie I. MacKnight, George Arnold
Burbidge, Dean of Pharmacy: A Biography (University of Toronto
Press, 1966, for the Canadian Academy of the History of Pharmacy,
viii + 18 pp.); and Arnold V. Raison, ed., A Brief History of Pharmacy
in Canada (Canadian Pharmaceutical Association, [1969]), especially
8-21 passim, 33 and 34, and 66-69 passim.


3 Ibid.

4 For details, see F. Norman Hughes, A. Whitney Matthews, and John
F. Creasy, The Pharmacy Examining Board of Canada—The First
Twenty-Five Years (PEBC, Toronto, Ont., 1990; viii + 46 pp.).

5 For details, see J. J. O’Mara, “Development of Pharmacy Education
“History of Pharmacy in Newfoundland”, CAHP Newfoundland 1969
(Canadian Academy of the History of Pharmacy, 1969; i + 16 pp.
mimeograph.), passim; and N. P. Curtis and J. J. O’Mara, “History
passim.
The AFPC Comes of Age, 1951-1969

by Ernst W. Stieb†

The early years, 1944 to 1951, of the Association of Faculties of Pharmacy of Canada (AFPC)—until 1969 known as the Canadian Conference of Pharmaceutical Faculties (CCPF)—were clearly years of growth. The first chapter in this work explores that in some detail.

Just as clearly, the CCPF matured and came of age during the period from then until its twenty-fifth anniversary in 1969, when it changed its name and operational structure to reflect that maturity. Succeeding chapters will follow the progress of the AFPC through the next twenty-five years to 1994.

The development of the Conference from 1951 to 1969 was not always smooth, nor did it always proceed quite on schedule according to plan. However, the organization did surely mature as Canadian pharmacy itself matured. Indeed, as we will see, the CCPF played a key role in the evolution of Canadian pharmacy, particularly from the time it gained a permanent place within the policy-making body of the Canadian Pharmaceutical Association with acceptance of the so-called “Hughes Report,” which emanated from the CCPF. We describe that important event in a separate section of this chapter.

The CCPF owes much during the whole period, 1951-69 and subsequently, to its cordial relations with the CPhA. Not only was the Conference born with the blessings of the CPhA, but it continued to grow during this time with the full support of the Association, including major financial support. Such support, for the CCPF and particularly for its constituent faculties also came from the Canadian Foundation for the Advancement of Pharmacy (CFAP) from the time of its founding in 1945. We will refer to this support when

† Professor Emeritus, Faculty of Pharmacy, University of Toronto; Chairman, AFPC, 1973-74
The Curriculum Remains a Primary Focus

The undergraduate curriculum constituted one of the major concerns when the Canadian Conference of Pharmaceutical Faculties first came into being in 1944 and remained a primary consideration throughout the period under consideration here, 1951-1969. The main order of business for the Committee on Curriculum chaired by F. Norman Hughes, reporting in 1951, was to determine to what extent the constituent faculties had adopted the basic minimum three-year curriculum (after senior matriculation) accepted by CCPF in 1950 after six years of intensive study under the chairmanship of D. McDougall.

Unfortunately the survey elicited responses from only five of the eight member faculties, Alberta, British Columbia, Laval, Ontario, and Saskatchewan. However, with some exceptions, most (three of the five) seemed to meet the recommendations. All were “well above” the recommended total hours.¹ That raised some concerns about whether students could thus really get a full perspective of the program. In terms of subject nomenclature, again most conformed to recommendations. There were reactions from individual faculties concerning the proper placement of certain courses and some indication that perhaps there was no longer a place for a separate course in pharmaceutical Latin.

Flowing from a discussion of the movement in the USA to 5- and 6-year programs, CCPF members were reminded that when it was moving to a minimum 3-year program, it also resolved to consider “as soon as possible” a minimum 4-year program.² Consequently the Committee was directed

appropriate in the course of this chapter rather than in a separate section since it crosses so many of the topical themes we explore. It is only as the CCPF approached the end of the period that the constituent faculties began to assume more financial responsibility for their own organization. That was one of the clear signs of maturation, but there were many others as we hope to show in this chapter.

We will follow the story from a topical point of view. It is a relatively long period in terms of time and achievement. We will try to cover at least the most important events and accomplishments that occupied the CCPF during this period.
to continue with its present focus but to turn some of its attention to a minimum four-year curriculum with specialization in community, hospital, and manufacturing pharmacy, as well as pharmaceutical chemistry and pharmacology.³

Accordingly during 1951-52 the Committee polled the constituent faculties concerning a four-year program (following five years of secondary school or its equivalent). All respondents but one favored a four-year program that would both amplify existing courses in the three-year program, but also allow for specialization. All agreed on the need to devote more time to certain areas of the existing curriculum, including biological and pharmaceutical sciences, and pharmacy administration. All but one agreed that an extended program should include more humanities electives. All also agreed with a basic plan put forward for a four-year course of study. All agreed that the areas of specialization suggested should be included, with the general proviso that adequate funding, staff, and facilities were available to do so.⁴

In his address in 1953, CCPF Chairman McDougall suggested that the three basic criteria any pharmacy curriculum should meet were: “adequate and thorough training in the professional field,” “a background of general and liberal education,” and the “knowledge of how to live a life.”⁵ The Committee itself posed seven questions to better help it design a proposed four-year curriculum. Although it had hoped that these could be explored through discussion at the meeting, it was subsequently directed that they be circulated to all constituent faculties for consideration in 1954.⁶

Consequently, in 1954 the Committee suggested as designations for main subject divisions, each of which would follow a designated sequence of required courses: pharmaceutics; pharmacy administration; chemistry, pharmaceutical chemistry, and physics; pharmacognosy; biological sciences; and humanities and social sciences. Furthermore the proposed elective divisions proposed for the fourth year were: retail pharmacy, hospital pharmacy, manufacturing pharmacy, pharmaceutics, pharmaceutical chemistry, and pharmacology. It subsequently directed constituent faculties to submit written comments on these recommendations of the Committee.⁷ By 1955, only one reply had been received after considerable urging, although three of the five schools represented on the Committee had indeed expressed opinions prior to the previous year’s meeting and the 1954 meeting reflected their thoughts. All three already had four-year programs in place,
but there was a need for the rest to come on board since American schools were moving to a five-year program by 1960. The Committee felt it had come to an impasse, but was subsequently directly to concentrate solely on the matter of a four-year program, given the urgency of the matter.\textsuperscript{8}

As new chairman of the Committee, Wes (Wesley C.) MacAulay presented a masterful review in 1956 of the CCPF efforts up to that point in time to establish a minimum four-year program in Canada. He quoted and summarized numerous articles and reports on the subject, particularly the deliberations that had taken place in the USA. He concentrated on addressing a large number of negative issues that had been raised by critics of moving forward.\textsuperscript{9} In a separate discussion concerning academic aspects of interprovincial licensing, as part of the Committee on Interprovincial Licensing (what would ultimately become the Pharmacy Examining Board of Canada), there was general agreement that a standard four-year course...
could be established and provide the basis for a “National Examining scale . . . by 1960.”

During 1956-57, the Committee under new Chairman J. George Jeffrey again tried to elicit responses to a questionnaire on the matter of the proposed baccalaureate, this time from members of the Committee. Again, three replied (Toronto, Montreal, and Saskatchewan), all of which had four-year programs in operation. Jeffrey tabulated the response to illustrate the similarities and differences among the three and with a comparison between the CCPF-approved three-year course and the proposed minimum four-year. The report ended with the recommendations that the four-year program (following senior matriculation) become the minimum Canadian requirement by 1960 and that the minimum hours suggested in the report become those for the basic curriculum for that program.

In preparation for the 1958 meeting, the Committee was instructed to circulate still another questionnaire “to clarify certain points and get a more considered opinion on certain others.” These tended to be very much more specific about certain courses, minimum hours, and the matter of specialization. The minimum hours listed in the Report, with the exception of elective courses, were approved unanimously. One more survey, this time responded to by seven of the eight schools, all but one of which had a four-year program, was presented at the 1959 meeting. The intent was to determine the total hours, which eventually were approved unanimously as 3200.

When the year of the projected move to the four-year curriculum arrived, Chairman Jeffrey summarized the progress in the constituent faculties. All had already moved or were in the process of moving to the extended program except the University of Alberta and the Maritime College of Pharmacy. The CCPF voted to send letters to the respective presidents of the University and College indicating the position of the CCPF; and, to permit the two constituent schools until August 1961 to conform.” For a variety of reasons it would be 1966 before Alberta and the new College of Pharmacy of Dalhousie University were able to implement the minimum four-year degree program.

Bernie (Bernard E.) Riedel assumed chairmanship of the Committee for the 1962 meeting. In the light of no specific directives from the CCPF, he
presented a great deal of curricular information from seven of the eight constituent faculties and raised questions about total hours, clock hours versus credit hours, and the lengthening of the term. In the end, the CCPF really resolved none of these issues but raised further questions of whether the term “academic year” should be defined and whether the trimester system should be investigated further. The Committee set itself for 1962-63 a study of how the curriculum might change to better prepare pharmacists to serve as consultants, what might be included in continuing education programs, and the trimester question. However, little additional relevant information was forthcoming on these issues. The Report also included details of an optional fourth year at the University of Alberta, which “a number of students had indicated their intention to take.”

For 1963-64, Chairman Riedel had solicited information from the faculties to determine what significant differences there might be between individual offerings and the approved curriculum. For a change the Committee was overwhelmed by the response. Rather than try to analyze everything, it was decided to concentrate on entrance requirements, liberal arts offerings, and pharmaceutics and pharmacy. The Committee planned to make similar comparisons of other areas later. Although a number of questions were raised, a number of issues appeared to remain unresolved.

The 1965 annual meeting saw George C. Walker in his first term as committee chairman. His first Report took a more philosophical bent, attempting to see the curriculum as a reflection of how pharmacy itself was evolving. He also raised the issue of a single curriculum with the possibilities of specialization or of a bifurcation with two separate qualifications. After an unusually lengthy discussion, Chairman Walker indicated that the Committee would like to pursue the topic of bifurcation and course content during the succeeding year.

During 1965-66 a number of “corresponding” members were added to the Committee to enlarge the original group of three, so that the deliberations might more easily reflect activities in all constituent faculties. The Committee concentrated on amassing course content for pharmaceutical chemistry as well as chemistry courses taught outside the faculties. Among the lengthy list of advantages of this approach course by course was the assistance that this would be to the Pharmacy Examining Board of Canada (PEBC). Elsewhere the argument heard before was repeated that the PEBC
should follow the CCPF approved syllabi rather than that the courses would be taught to conform to PEBC-set syllabi. To present as many ideas as possible, in addition to its customary report, the Committee also initiated a panel discussion on curriculum, introduced by Chairman Walker. The panel included Joseph B. Sprowls, representing the AACP, who spoke on “The Ferment in Pharmaceutical Education,” from the American point of view; André Archambault of the University of Montreal, “Pharmaceutical Education in France” and “Pharmaceutical Education in French-Canadian Schools of Pharmacy”; Ronald T. Coutts, of the University of Saskatchewan, “Comments on Independent and Semi-independent Curricula for Different Types of Practice,” which concentrated on the University of Strathclyde in Glasgow, Scotland and Sunderland Technical College in Durham, England, and the University of Saskatchewan. Most of the discussion following concentrated on how and where specialization might be introduced into the curriculum.19

At the Centennial-year meeting in 1967, Chairman Walker commented on the usefulness of both the panel discussion approach and the extended Committee of the previous year, but admitted that this was not always possible given conflicts of various kinds. The Report ended with a list of fifteen subjects that might be explored for the future. A lengthy discussion followed with wide ranging suggestions as to what the best order of priority might be.20 Without firm directions, the Committee, now chaired by Fred W. Teare, chose five of the fifteen subjects to explore for 1967-8: curriculum changes required to prepare graduates as experts on drugs; the matter of dual curricula to follow a professional, pharmaceutical science, or other approach; the design of a curriculum to achieve the preceding; consideration of a core curriculum to integrate basic scientific material; and the place of clinical practice, along with the development of professional skills and judgment. These were explored in some detail, although not equally, and at some length under the general headings of “Comments on the Present Curriculum,” “Some Curricular Requirements for Professional Pharmacists of the Future,” the “Clinical Pharmacy Course,” “Recent Suggestions on Curriculum Revision,” “Specialization at the Bachelor’s Level,” “A Bifurcated Pharmaceutical Curriculum,” and the “Dual Curriculum.”21 Since the full report had not been distributed as planned in advance of the meeting as the result of a postal strike, it was subsequently decided to distribute them afterward with “delegates from each constituent member . . . prepared to discuss this report in depth at next year’s meetings.”22
By the following year, the Committee was headed by Frank S. Abbott. To solicit the necessary formal responses from constituent faculties, a questionnaire was prepared and directed to the chairs of individual faculty curriculum committees. Contributions to the program were also sought from Finlay A. Morrison, who discussed “An Applied Pharmaceutics Course”; Pierre-George Roy, “Comité Permanent des Sciences de la Santé de l’Université Laval”; Douglas J. Stewart, the “Clinical Pharmacy Program at the Toronto General Hospital”; and George C. Walker, on “Dual Curricula.” Discussion followed each of these presentations and finally there were “Reports on Curriculum Developments from Individual Faculties.” Since 1969 was the year of the reorganization of the CCPF to the Association of Faculties of Pharmacy of Canada, motions directed it to consider pre-pharmacy preparation, a new minimum core curriculum, especially the place of clinical pharmacy in that curriculum and its prerequisite subjects for a decision no later than 1971.23

The changes in curriculum between 1951 and 1969 were certainly considerable as reflected by the activities of the Curriculum Committee. They also proceeded from basic considerations to various nuances, such as considerations that really touched on what was perceived to be the direction of the future practice of pharmacy.

**Enrolment Fluctuates and Reflects Changing Demographics**

Reports on enrolment in CCPF constituent faculties across Canada for 1950-51 continued along similar lines to those in years immediately preceding. Student numbers were decreasing slightly, due mostly to fewer ex-servicemen as more time elapsed after World War II and a peak in 1948-49; also to a slightly lower proportion of women as more males (other than former servicemen) were entering pharmacy. There were a few general increases, due to the extension of new programs, such as the four-year baccalaureate launched by the Ontario College of Pharmacy. However, over all, there was perceived to be a shortage of pharmacists—this being partly attributed to the number of women graduates who had married and were no longer practising.24 Just a year later, a drop in enrolment was attributed not only to fewer ex-servicemen, but also to fewer other men entering pharmacy, perhaps, some mused, because they were not encouraged to do so. Only OCP reported a “decisive increase,” attributed to the four-year program.25 The report also indicated a slight national increase in the number of women
enrolled for 1951-52. In spite of some fears expressed about the decline, by the following year numbers appeared to be holding steady, including women students at about 12% of the total.26

The flag of warning went up again at the 1954 meeting with an indication of a “decided decrease” in enrolments at Canadian schools, the first in four years, which was however attributed to the phasing out of the two-year OCP program, anticipated for some time.27 At the same time the chairman reported an increase in the percentage of women entering first year; but elsewhere, 54 graduates were apparently “misplaced,” because of discrepancies in reporting.28 Concerns about such discrepancies continued periodically through the whole period (to 1969) under discussion here. As far as the matter of dropping enrolment was concerned, a number of opinions were expressed. Visiting Dean Christensen of the School of Pharmacy at Ohio State University suggested that the demand for more pharmacists in practice would spur more students to enter pharmacy and that cyclical enlistment and discharge of pharmacists from the military created both shortages and surpluses. Others suggested everything from the need for recruitment to government control of student enrolment tied to the number of pharmacists in practice.29

Whatever the underlying causes, enrolment in Canadian schools did continue to decrease, particularly that of male students, while the percentage of women students increased. However, by 1958, it was being predicted by CCPF Chairman George Walker that in both the United States and Canada universities should prepare for a major increase in applications as a large wave of students flowed relentlessly through secondary schools.30 Indeed, the following year his successor, Bernie Riedel, spoke of “a sudden astronomical increase in University development” and the “explosive student enrolment prophesied in 1945.”31 Elsewhere, the CCPF Committee on Enrolments was reporting an overall 9.8% increase in the number of undergraduates, with approximately 57% of this phenomenon being attributed to the increase in female students. Furthermore, for the first time ever in Canada, women outnumbered men in the first year Pharmacy class at the University of Alberta, 36 to 29.32 In the discussion following, it was noted that the 21.4% of women students in Canadian pharmacy schools at this point was almost double the 12% being reported then by the American Association of Colleges of Pharmacy.33 It is difficult to gauge just how much of this could be attributed to the so-called post-war “baby boom” and how much to the
active recruitment of potential applicants taking place on both sides of the border. Eventually, when applications began to significantly outnumber available places, faculties would be forced to develop rational selection policies and would have the luxury of raising standards significantly. (We briefly discuss pharmacy recruitment, vocational guidance, and student selection in the section immediately following in this chapter.)

By 1960, first-year enrolment in Canadian faculties was up 15.5%. At the same time, the CCPF Committee on Enrolments began reporting in detail students who were transferring into pharmacy with previous university credits, including previous degrees in other fields. The total numbers (262 or 55.9% of first year enrolments) tended to appear higher than anticipated until it was recognized that UBC now required a year in the Faculty of Arts in lieu of Grade XIII, while the prerequisite for admission to Pharmacy at the University of Montreal was a degree in Arts or its equivalent.34

The trend to increased enrolments continued at a good pace. Thus, for 1961, the CCPF committee reported a 20.8% increase for first year, while women comprised 24.3% of the first year and 26.5% overall. The report also included a discussion of changes in Pharmacy as a part of university enrolment for the period 1947-48 to 1961, and indeed university forecasts as far forward as 1979-80. Finally, it was noted that all the work done by the committee would form a valuable contribution to an anticipated Canadian pharmacy manpower study (as part of the Royal Commission on Health Services).35

After all the concern expressed for so long about decreasing enrolment, it is interesting to see that by 1962 there was a suggestion that several CCPF constituent faculties might soon have to consider limiting enrolment. Furthermore, that the University of Toronto Faculty had recommended the need for a second faculty in Ontario by 1965 to the Royal Commission on Health Services.36 The 1963 committee report consisted entirely of statistics, with a promise of analyses after the publication of the Pharmacist Manpower Study of the Royal Commission. However, there was considerable discussion following the presentation of the report about the terms of reference of the committee and the nature of the types of data that might be collected in the future.37
Continuing on the subject of the increasing number of women students, in 1964 the Conference Committee on Enrolment observed that the ratio of women to men was “significantly higher in Alberta and Manitoba, where entrance quotas based on academic standing” had been used for some time, although it conceded that the number entering pharmacy was up in all colleges. 38 Indeed the data published show that women comprised 45.36% of the total pharmacy undergraduate body in Canada, with Alberta at 47.75% and Manitoba at 42.02%; while, Toronto, with considerably more students than those two combined, was then at 46.96%. 39 By the following year, the Committee was beginning to raise some basic questions: “1. Should there be any restrictions on enrolment apart from those imposed by physical facilities? . . . 2. Should there be any attempt to regulate the relative numbers of men and women? . . . [and] 3. What kind of educational preparation do students require for the types of job opportunities available to them?” 40 The questions of the kind of information it should be collecting continued in 1966, based on what was being done in a related way in dentistry. 41 When we reach 1968-1969, the end of the period being examined here, women students comprise 43.4% of the total Canadian pharmacy student body. However, in a number of individual faculties they were still clearly in the majority, with Alberta at 60.7% being the highest. 42 The Committee report that year also surveyed Pharmacy entrance requirements across the country. Although the prerequisites in terms of subject matter tended to be similar, there was a difference in the level of achievement required, and in those that were admitted from a secondary-school as opposed to post-secondary-school background. 43 Most of the questions raised toward the end of the period had yet to be answered.

Vocational Guidance and Student Selection
Deal with Enrolment Concerns

Student selection was a responsibility of one of the first committees appointed by the CCPF when it was first founded, but already by 1946 the Conference established a Committee on Vocational Guidance and Selection. It remained as such until 1962 when it became simply the Committee on Student Selection, reflecting growing numbers of applications for admission and less need for active recruitment. The Committee continued until 1969, when the CCPF became the AFPC.
During the whole period under study here, 1951-1969, the CCPF remained keenly aware of similar trends and concerns as their own being monitored by the American Association of Colleges of Pharmacy (AACP), benefited from its recruitment literature and films, and its development of procedures for student selection.\textsuperscript{44} The CCPF was equally dependent upon and worked with the Canadian Foundation for the Advancement of Pharmacy (CFAP) to develop vocational literature (first available in 1957) and a film strip, both with a Canadian orientation.\textsuperscript{45} In addition, before these Canadian materials were ready, the CFAP supported the purchase of large quantities of the AACP booklets and some copies of their film.\textsuperscript{46}

CCPF constituent faculties and their academic staff also developed some of their own literature and visual aids, held public open houses, and made presentations to groups of potential students. Furthermore, faculties also encouraged practising pharmacists, individually or as part of their professional association and licensing bodies, to play an active role in recruitment—recognizing that informed community pharmacists could be particularly effective in influencing eligible young people in their vicinity to consider pharmacy as a profession. The importance of long-range public relations activities by and for the profession were also emphasized as factors important to student recruitment and selection, as well as the need to keep secondary-school guidance counselors well informed about admissions criteria.\textsuperscript{47}

By 1962, as student enrolment grew, a shift began to appear from merely increasing student numbers to selecting those best qualified and keeping them if they proved promising once they were admitted. Gradually it became desirable to devise admission criteria that considered more than academic proficiency, to deal with the increasing number of applicants presenting with qualifications beyond the secondary-school level, to raise admission and program standards, as well as to set limits on the size of classes and even enrolment in some optional courses.\textsuperscript{48}

By the time we reach 1969, the end of the period under consideration here, applications to CCPF constituent faculties regularly exceeded available spaces, all faculties required senior matriculation or higher, and increasing numbers of applicants sought advanced-standing admissions. The final report in 1968 of the Committee on Student Selection, which disappeared with the evolution from CCPF to AFPC, witnessed Toronto indicate that it
was considering early selection for up to 60% of future first year classes, based on mid-year Grade XIII examinations. Since most faculties appeared to be receiving more applications from students with one or more years of university credits, it was suggested that in the future students be selected after a first year of university-level courses. By this time British Columbia was already doing this, while Montreal and Laval required a bachelor’s degree from a Quebec classical college as admissions prerequisites—later replaced by the health option diploma of the CEGEPs.

**Apprenticeship/Internship/Practical Training: Whose Responsibility?**

While the subject of curriculum and the length of the program continued to be one of the chief focuses of CCPF, practical training or apprenticeship came in for renewed interest and discussion starting with the activities of a new committee appointed in 1950 and chaired by Roger Larose. That had been sparked by a lengthy report “On the Value of Apprenticeship Training” presented that year to the annual meeting by Larose of the University of Montreal Faculty of Pharmacy. His paper was based on a survey conducted among 90 first-year students at his faculty.

The Report of the Committee on Apprenticeship presented in 1951 was certainly comprehensive. It included information submitted from 8 provinces (not including Quebec) as well as the United States, England, France, and Switzerland. In Canada at that time the length of apprenticeship varied from one year in British Columbia to 4 years in Nova Scotia. In most cases all or a major part of the time was served prior to the academic program, with Saskatchewan and Ontario being the exceptions. Saskatchewan required that 12 of the 18 months be served during the two senior years or after the College program; while Ontario allowed completion before, during, or after the academic program, but stipulated that 12 of the 18 months be served consecutively.

The Committee finished by listing 15 basic points that should be considered in formulating a standard set of regulations governing practical training. These points included such things as the length and best placement of such training, a standard Canadian manual of apprenticeship, and periodical progress reports by both students and preceptors. Surprising was the suggestion to “make the success of apprenticeship one of the prerequisites
in obtaining a University Degree in Pharmacy, as well as in obtaining from a Pharmacy Board a license to practice.\textsuperscript{53} It was proposed that the various points put forward and others be explored further by the Committee or by the Conference.

Consequently, the 1952 report explored the functions or objectives of apprenticeship pre-college, concurrent with college, and post-college (internship), both from the perspective of the student and the preceptor.\textsuperscript{54} The committee report did not indicate what the members considered to be the best placement of the practical training component, but suggested that this might be explored in some detail during the year following, along with how the objectives might best be attained.\textsuperscript{55} The report also noted that while it had been distributed for comment to all the provincial regulatory or licencing bodies in January 1952, no responses had been forthcoming (up to the time of the August meeting).\textsuperscript{56}

While not ruling out other placements, the Committee Report of 1953 went on record as favoring post-college apprenticeship. It also specified that the degree be awarded after the completion of the academic program and the licence to practise after completion of the post-college practical training. While the report recognized that practical training continued to be controlled by the licensing bodies, it suggested that faculty members might appropriately serve as advisors. The report also suggested the need for a standard manual for both apprentices and preceptors, as well as certain minimum standards that might be expected of pharmacies that served as the training sites. Furthermore, it recommended that the term “apprentice” be eliminated and replaced by “trainee,” and that those doing their practical training in hospitals do it in pharmacies approved by the Canadian Society of Hospital Pharmacists.\textsuperscript{57} The recommendations were to be forwarded to CPhA, CSHP, and every provincial pharmacy regulatory body.

Contrary to the disappointing lack of response that the committee received to its early work from the licencing bodies, it was pleasantly surprised by the positive response to the recommendations put forward in 1953. This included new legislation in Quebec, British Columbia, and Ontario, and partial implementation of the report in Saskatchewan. The committee suggested that all CCPF members remain vigilant about assisting their own provincial bodies as appropriate.\textsuperscript{58} The issue of a standard manual on practical training remained unresolved. Chairman Larose suggested that
this task was not appropriate for a committee, but should be assigned to an individual with proper support from his particular faculty. While the committee was disbanded, it was suggested that Larose “keep in touch with the problem of practical training and report when necessary.”

Roger Larose dutifully reported in 1955 that he thought a useful basis for a proposed national practical training guide might be a combination of the newly revised guide of the University of British Columbia Faculty, along with that of the CSHP and R. O Hurst’s *Apprenticeship Studies*. He also referred to a guide made available by the Pharmaceutical Society of Great Britain. On the question of where practical training was presently placed, it was suggested that 95% of the Ontario trainees took it after graduation, while in Saskatchewan the figure was probably closer to 75%.

While there was no full report at the 1956 CCPF annual meeting, two significant motions flowed from Roger Larose’s brief remarks. One asked for the appointment of a committee “to study and report on the different methods of evaluating practical training facilities as they are now in use”; another, “that provincial constituent bodies consider the establishment of minimum standards for pharmacists for accepting internees, and that this motion be forwarded to the CPhA.”

The new Committee on Practical Training, chaired by Jack Halliday, gave a fulsome report at the 1957 meeting. It reviewed major changes that had occurred since 1951 in Canada, Britain, and the United States; the most drastic of these was the decision in 1957 by the Manitoba Pharmaceutical Association (MPhA) to discontinue apprenticeship in any form. Also of significance was the suggestion by the American Association of Colleges of Pharmacy (AACP) in the USA that with an imminent move to a minimum five-year academic program internship should be no longer than 6 months, should follow graduation, and should conform to certain general principles. Pertinent documents from both the MPhA and AACP were appended to the report. The committee report also included some information on the nature of pharmacies approved as practical training sites in England and the USA.

While the committee had no formal report to present in 1958, Chairman Halliday suggested that a “realistic possibility” for Canada was probably one year of practical training, with not more than 6 months served
after graduation and the rest no earlier than after the second year of the academic program. He also pointed out that no province now required that the training occur before entering university. These changes may be considered momentous indeed and as a clear sign that qualifications to become a pharmacist had now moved from merely training for a trade to educating for a profession. They reflect a major step forward and a complete reversal from the 19th century norm in Canada of four years of apprenticeship as a prerequisite for admission to a one-year academic program.

In its 1959 report, the committee was still searching for the types of control that might be expected over the practical training experience to guarantee a meaningful experience for the trainee. The bulk of the report was given over to descriptions of the approach to the problem in New Jersey and British Columbia. The latter, as the chairman noted, tended to concentrate on commercial rather than professional matters, which was not considered to be appropriate.

After reporting in 1960 on such minimum standards as existed in various provinces of Canada and the recommendation for such by the National Association of Boards of Pharmacy in the USA, the committee suggested those it considered most appropriate for application across Canada. The report concluded by pointing out that, in addition to meeting such minimum standards, a pharmacy training student should also “comply with further regulations... aimed at ensuring the best possible type of experience for the trainee.” Little new was reported in 1961, except for some changes in B.C. and ongoing activities of the NABP in the USA.

For 1962, under new Chairman A. J. Anderson, the committee decided to step back and review what had been accomplished since the committee was first established in 1950. Consequently Roger Larose reviewed activities for the period through 1961, including unfinished business such as the accepted use of terms for the process of practical training and the trainees, as well as the preparation of a manual on practical training. The rest consisted of a report on current developments province by province. Most significant, however, were appendices dealing with professional standards for pharmacies and a survey of students in Manitoba where practical training was no longer a requirement for licensure.
At the 1963 annual meeting, the committee and CCPF were still struggling with terminology and neither “practical training/trainee” nor “internship/intern” gained approval and the committee decided to remove the subject of terminology as one of its terms of reference. The report made passing reference to the pharmacy preceptor’s guide being prepared jointly by the AACP and NABP, and reviewed changes made to practical training in Nova Scotia. In 1964 Chairman Anderson aptly described the activities of the committee as the “maintenance of a watching brief.” The committee did report changes in Ontario, where students were required to complete 12 months of training, beginning after the second year of the academic program, but with at least 6 months to be served after the completion of the degree. Ontario was also in the process of preparing a training manual and had established prerequisites for preceptors. There was again discussion of the NABP/AACP preceptor’s manual, still in process, and the practical training requirements in several of the American states.

Although a committee stood appointed to report in 1965, no report was forthcoming. In 1966, the report was received as coming from Chairman Allan Goodeve alone. However, there was apparently no discussion or action on the chairman’s startling suggestion that CCPF “recommend to the provincial licensing bodies that practical training be abolished” as outmoded. In 1967, there was no formal report, but Goodeve moved that the Committee on Practical Training be abolished; however, in response to “spirited opposition” to the motion, its mover and seconder withdrew their motion. Obviously speaking to this situation, the report in 1968 was preceded by a lengthy outline of suggestions for the guidance of the committee, now chaired by Glen Hartnett. Although the report itself surveyed the provincial licensing bodies to determine the present state of practical training requirements across the county, responses to the question whether these bodies wished to have the academic bodies involved in practical training tended to be mostly negative. Consequently the committee again suggested that it be disbanded and only revived on an ad hoc basis as needed. The final item of business saw a motion carry “that the Committee on Practical Training be disbanded but that we [CCPF] convey to the Conference of Pharmacy Registrars of Canada the willingness of the Conference to assist them when called upon.”

Thus the Committee on Practical Training came to an end after 18 years of some useful activities and discussion, but with many issues left unresolved. However, it is only fair to observe that as well intentioned as CCPF was
in this regard, it ultimately realized that this was an area in which it and its constituent members were not the masters of the ship and needed to be satisfied with playing an advisory role, when requested to do so, until such time as a major change occurred in the area of practical training.

**Graduate Studies and Pharmaceutical Research Grow Impressively in Depth and Breadth**

The CCPF Committee on Graduate Study and Pharmaceutical Research was one of the first to be established when the Conference first came into being in 1944. Originally the title also included student selection, but as will be noted in the section devoted to that subject, following a single report in 1945 that area separated off to the more logical Committee on Vocational Guidance and Student Selection. The Committee on Graduate Study and Pharmaceutical Research was to claim at least one other distinction of note, namely that its chairman, A. Whitney (Whit) Matthews, was to guide it for a remarkable 12 years, until 1957. It is also worth noting that at the time he made his impassioned appeal in 1944 for the importance of promoting research and graduate studies in Canadian schools of pharmacy, he was indeed the only one in what were to be the constituent faculties of the Conference to hold the doctorate.

The first report for the period under discussion here (1951-1969) began, as did many in those early years, with a brief resumé of the number of staff or recent graduates who had earned their Ph.D. degrees or were pursuing them. At this time, the numbers were often small enough that they could be counted on one hand. However already by 1951, constituent faculties at the universities of Alberta and Saskatchewan reported that in the academic year 1950-51 three Master’s degrees had been earned “for graduate work within those colleges.” The first faculty in Canada to gain the right to offer the Ph.D. degree was that at Alberta, with Dr. K. M. James being the first to earn the distinction in 1961, supervised by Dr. Bernard Riedel. Ken James later joined the staff of the then new College of Pharmacy at Dalhousie University, where he remained for his whole career. Constituent faculties at the universities of Montreal, Saskatchewan, and Toronto followed with their doctoral programs and graduands just a few years later.

That first meeting in 1951 also indicated the need for surveying what the anticipated demand might be for pharmacy graduates. Matthews reported what the policy was of the Canadian Foundation for the Advancement of
Pharmacy (CFAP) relative to grants-in-aid for graduate study and how much had been awarded to graduate students in 1950-51; also that one student had received support from the National Research Council. Matthews was pleased to report a “gratifying increase in the number of research projects being carried out [in constituent faculties] and in publications resulting therefrom” in recognized journals. Matthews expressed his hope that regular conferences on pharmaceutical research might be held since CFAP was willing to sponsor them. Reports showing current research projects and students pursuing graduate degrees were not published, although appended to the original report.

In his address at the 1952 annual meeting, CCPF Chairman F. Norman Hughes expressed some concern about the “preponderance of interest” apparently then shown by graduate students in pharmaceutical chemistry and wondered whether Canadian schools had enough openings to sustain such numbers in the field—a concern apparently shared by some American educators of pharmacy. In reporting on those pursuing advanced degrees, Matthews enthused that “we are rapidly approaching the point where greatly expanded research will be possible.” Matthews also summarized the nature of pharmaceutical research being carried out in the constituent faculties.

Matthews’s report in 1953 was somewhat more tempered in terms of how many graduate students could be accommodated in Canadian schools relative to the number of staff still pursuing advanced degrees; also since another year had gone by without a CCPF research conference. However, he was obviously buoyed up by news that the new (1953) University of Toronto Faculty of Pharmacy (previously long affiliated with the U of T, but as a school of the Ontario College of Pharmacists, the licensing body) was moving to establish an M.Sc. degree in Pharmacy with half a dozen or so prospective students in line and with sufficient Ph.D. Pharmacy staff to supervise them.

By the following year, Whit Matthews was able to report more students and faculty members pursuing advanced degrees, and a greater “momentum” of research activities in member faculties. His report listed some 20 projects being carried out in a variety of areas by a dozen or so faculty members in five Canadian schools. The report concluded with a list of eleven M.Sc. projects currently being supervised by graduate faculty in three schools. Also listed were 26 undergraduate research theses completed in four faculties. It
was obviously becoming a bit of a problem to keep track of exactly where all the graduate students were (especially those outside Canada) and what they were doing, so a suggestion was made that the committee should start tabulating this information with the assistance of the faculties.81

Aside from all the usual activities reported in 1955, there came the great news from Dean M. J. Huston that his faculty at the University of Alberta was now prepared to accept candidates pursuing the Ph.D. degree. Also encouraging was the increase in research funds at both the national and provincial levels. Matthews again expressed hope that a research conference might soon be revived on a regular basis.82

In his twelfth and last report as chairman of the Committee on Graduate Study and Pharmaceutical Research, in 1956, Matthews was encouraged to report that more than thirty recent graduates of Canadian faculties were pursuing graduate studies and about half of them in Canada. He was also happy about the level, variety, and volume of research activities in constituent faculties as represented by a tabulation of these and a list of publications during the preceding year. Research support of some $24,000 from a variety of sources, national, provincial, and the pharmaceutical industry was equally notable, as was the news that faculty members would now be eligible to apply for summer research associateships of the National Research Council of Canada. Considering how fervently Matthews had promoted it, his announcement of a research conference at the 1956 meeting (the first since 1948, itself the first) was surprisingly low key.83

In his first report as the new chairman of the Committee, Mervyn (Merv) J. Huston, began by reviewing previous reports going back to 1944. Huston’s well recognized talents as a writer are particularly evident in the second paragraph of that report in 1957:

*The history of this Committee reflects the progress of the Conference and of Canadian pharmaceutical education. It is a truly amazing story. When the Conference was formed, pharmaceutical research and graduate study in Canadian colleges were practically non-existent. It was immediately recognized that if pharmacy was to retain the position it then had and regain the role it had lost that a new concept would have to obtain and its tenets be developed with vigor. A true profession must be based on science and the life blood of science is research.*
The Conference members faced a formidable task complicated by a dearth of trained personnel; stultifying teaching loads; lack of funds, space and equipment; and administrative apathy. Despite these obstacles, in only thirteen years we have emerged from this scientific Sahara to lush valleys flowing with Ph.D.’s and made verdant with burgeoning budgets.  

Huston properly gave credit to the CFAP for their “basic and irreplaceable role” in this amazing achievement. He also credits the research involved in the revision of the *Canadian Formulary* as another important factor in this growth because it was at a level suitable to the qualifications of faculty members of that earlier time; it also helped to develop a research mentality in the constituent faculties. Huston followed Matthews in urging the value of annual research conferences, with faculty members contributing a progressively larger proportion of the papers. At the same time he recommended that as soon as possible a CCPF teachers’ conference be devoted to graduate work. Huston was also justifiably proud of the inauguration during the year of a Scientific Section in the *Canadian Pharmaceutical Journal* and in the gratifying reception it had; he did not mention it, but he himself served as editor of that section. He also pointed to the major step represented by the initiation of a Ph.D. program in Pharmacy at the University of Alberta; again he did not mention that this was in the same faculty he served as dean. The addenda formerly given over to lists of current faculty research and publications had now been moved to the Report of the Executive Committee as part of the activities reported by individual faculties.

Dr. Huston’s voluminous 1958 report was in response to a request for certain kinds of relevant information. Thus there were three appendices preceded by two tables, and the report itself addressed itself to these addenda. Table I presented a numerical record of students still working on graduate degrees or the current activities of those having completed their studies. By far the largest majority were teaching in Canadian (20%) or U.S. (7%) colleges of pharmacy. Huston pointed out in the text that most of those on staff in Canadian colleges had completed their education after World War II because of the great need for individuals with such a background just then. Table II listed some fourteen areas of graduate specialization and indicated the number of Ph.D.’s completed (65), as well as those still in process (22) and the M.Sc.’s in process (18). Appendix I, arranged by faculty and individual
graduate students, gave details about the graduate studies undertaken and their activities. Appendix II listed research theses on file in Canadian faculties by faculty and areas of specialty. Finally, Appendix III listed the research fields in Canadian faculties by faculty, field, and subject, with graduate supervisors identified as appropriate. As part of the discussion following, it was suggested that a copy of the report be sent to the CFAP, “starred for those who . . . had Foundation assistance.”

As it would do in succeeding years, the report for 1959 updated information contained in Appendix I, but the bulk of the report itself dealt with a survey of time utilization by faculty members. The Committee deferred reporting on any other subjects in detail that were included in the Teachers’ Conference for that year, since it was devoted for the first time to Pharmaceutical Research and Graduate Study, a suggestion that had been made in 1957 as part of Huston’s first report as chairman of the Committee.

Bernie Riedel chaired the Teachers’ Conference, while Norman Hughes provided the summary. It dealt with a great variety of subjects, which we merely list here for information: “Opportunities for Pharmacists with Advanced Training in Industrial Pharmacy,” by Roger Larose; “Opportunities for Pharmacists with Advanced Training and the Nature of Advanced Training Considered Desirable,” by Isabel Stauffer; “Opportunities for Pharmacists with Advanced Training in Teaching and University Research,” by Ross Baxter; “Areas of Research,” by Randy Murray; “Curriculum Requirements for Graduate Studies,” by J. Auguste Mockle and separately, the same subject by George Jeffrey; “The Use of Graduate Students in Teaching Programs,” by Jack Summers; “Finances of Graduate Education [from the student’s and faculty’s points of view],” by W. C. MacAulay; “The Development of a Graduate Program within a Faculty,” by Merv Huston; “Contribution of a Graduate Programme to General Pharmaceutical Education and to the Profession,” by Norman Hughes; and contributions to a panel discussion participated in by Ross Baxter, Roger Larose, Whit Matthews, Perce Moisley (Ontario College of Pharmacy), Isabel Stauffer, Jack Summers, and George Walker.

The report in 1960 was scaled down considerably from previous years since many of the details were now published elsewhere in the proceedings and a great deal of information had appeared as part of the CCPF Teachers’ Conference the previous year. A single addendum to the report did record
updates on graduates of the constituent faculties who had undertaken graduate work. However, Chairman Huston indicated “considerable satisfaction” concerning the ongoing development and growth of graduate studies and research in Canadian faculties as evidenced by the number of students enrolled, the number of publications, the quality of the research conferences, and the relatively new scientific section in the *Canadian Pharmaceutical Journal*.94

The following year, in his last report as chairman of the Committee, Huston devoted considerable space to a discussion of how the constituent faculties might relate to the National Research Council (NRC) and the newly established (November 1960) Medical Research Council (MRC) as a semi-autonomous “Council” within the NRC. The MRC received its own charter in 1968-69 and its charter members were appointed by Order-in-Council, 15 April 1969. Pharmacy gained recognition by the appointment as one of those charter members; namely, Bernard Riedel, Dean of the Faculty of Pharmaceutical Sciences at the University of British Columbia. Although there was some thought expressed as to which disciplines might apply to which agency, it was understood that applications would be re-directed as needed. Besides, it was decided that there seemed little good reason to push for pharmacy applications to be considered exclusively under one agency alone. The report also suggested that there would be “a marked disadvantage to pharmacy being established as a separate entity since a sum would be assigned to cover all applications from pharmacy colleges and this might be inadequate.”95

J. George Jeffrey assumed the chair of the Committee for 1961-62, having previously been a member. Part of the report in 1962 discussed the report of a special CCPF committee, chaired by Merv Huston, to report for the Conference to the Royal Commission on Health Science. Interesting statistics relating to research and graduate studies in Canadian schools of pharmacy included the fact that in a period of just a decade and a half, they had advanced from having only one teacher (A. W. Matthews) with a Ph.D. to 39; from 8 students working on advanced degrees to 30; from little emphasis on graduate studies to 7 out of 8 schools offering the M.Sc. degree and four offering the doctorate; and from the CCPF holding a research conference only sporadically starting in 1948 to doing them now annually and with all or most of the papers emanating from Canadian faculties of pharmacy. The CCPF submission to the Commission was also considered
notable for the variety of research projects reported being pursued in constituent faculties.96

By way of interjection, which the arresting statistics in the preceding paragraph seem to beg, perhaps some comment is necessary here particularly about the remarkable advance from one staff member in the CCPF constituent faculties who held a Ph.D. degree in 1944, when the Conference was founded, to 39 with that qualification by 1962. As one of those who lived through that period, Bernard Riedel speaks for all the others when he comments about how those dramatic changes in what we would today call “staff development” occurred:

It was, of course, all done through the efforts of the individual schools and the individuals themselves who endured some very difficult times as they were called upon to teach very heavy loads by today’s standards and at the same time to develop themselves to advanced degree levels. Furthermore, this happened at a time in life when most of us had family responsibilities and were at a point when we should have been fully educated and launched on a career. For the most part, we had no resources of any significance, having often just returned from service in World War II. The importance of the contributions at this crucial time by the Canadian Foundation for the Advancement of Pharmacy cannot be stressed too heavily. The Foundation saw as one of its chief purposes to advance Canadian pharmacy by raising the level of pharmaceutical education. Consequently, financial assistance to both the constituent faculties and to members of their academic staffs or students were at the heart of their mission. Without that help it is clear that it would likely have taken a great deal longer for the faculties and their staff to achieve results of the degree they did in such a relatively short period of time. We need to remember with pride, as well, that the Foundation was born in 1945, just a year after the CCPF, and grew out of a recommendation made by Whit Matthews at the founding meeting of the Conference. As Alex Wood—one of our authors for this CCPF/AFPC history—reminded me recently, apart from much of the above, because of the level of development that some constituent faculties were at then, it was often necessary for staff to first obtain a baccalaureate degree in pharmacy at another institution than their own before they could even embark on a graduate degree. He remembered that it was common for Ontario graduates, before their own four-year graduates began to appear in 1952, to venture west to
the University of Saskatchewan College of Pharmacy—where he was on staff—to earn the qualifications necessary to proceed to graduate degrees.97

*****

The Committee report in 1963 devoted fully 36 pages to an updated, corrected list of graduate students in the hope of catching as many errors and omissions as possible from past lists. The report also heralded the 10th (actually the 9th by count) Conference on Pharmaceutical Research, sponsored, by now customary, jointly by CCPF and CFAP. The varied sources of papers proved gratifying as did the advantage of distributing printed abstracts in advance, a custom started the preceding year. The
Committee also reported the change in titles of graduate programs at the University of Montreal Faculty of Pharmacy from M.Pharm. and D.Pharm. to M.Sc. and Ph.D. In the discussion following the presentation of the report, one member of the Committee indicated that it “no longer dealt sufficiently with graduate studies and that the compilation of statistics was not sufficient reason for continuing the Committee in its present form . . . [and] his desire to either retire from the Committee or have it disbanded.”

Conference Chairman Ross Baxter placated the situation somewhat by indicating the Committee was to be given new responsibilities. Those turned out to be a request to study the question of the selection of graduate students, including such things as the evaluation of their potential for research capabilities, etc. That did not appear to be sufficient to hold the complaining member, who subsequently resigned during the year ensuing. Indeed, there was no indication the following year that the Committee had engaged in any such study. It reports its main activity having been to organize the 1964 Research Conference.

Ross Baxter himself took over as chairman of the Committee for 1964-65. Aside from continuing some ongoing activities, the 1965 report appended a list of graduate courses and programs offered in Canadian schools of pharmacy and a list of research grants in each school. One of the continuing activities was updating the list of graduate students. However, it became obvious that the logistics of the task were becoming burdensome, and it was suggested that both the Committee and the incoming Executive might approach the problem by looking closely at the terms of reference for the Committee.

Chaired now by Les Chatten, the Committee in 1966, indicated it was still struggling with the matter of its terms of reference and suggested that perhaps a round table discussion of the matter might be the answer. The Committee did continue its publication of research grants for the constituent faculties, but not the list of graduate students, which continued to present many problems. The CFAP had been approached to take on the task but declined. The Committee suggested that in the future the individual faculties submit the information and that a clerk employed by the CCPF could maintain the list. On a happier note, the Committee indicated its delight that 12 of the 16 papers presented at the Research Conference that year had come from members. By his second and last year as chair of the Committee, Chatten in 1967 listed the new terms of reference: to report all
the graduate degrees earned in the previous year by faculty, graduate student, research topic, and director of the research; the research funds available in each faculty according to source and amount; the research interests of new staff members; and to “make this information freely available to any potential fund-granting organizations.” In the discussion following, the recommendation that the Research Conference be extended to two days was taken under advisement; and in the future, constituent faculties were to be given specific instructions concerning the form in which information was to be submitted. However, no conclusion was reached as to whether some of the information was appropriate to distribute to agencies such as the NRC, the MRC and the CFAP. George Walker informed those present that the CFAP would be suggesting a two- or three-day international conference for Canada; he asked that CCPF members consider the matter. No details were presented.

Jack Halliday reported as the new chairman of the Committee in 1968. However, Bernard Riedel subsequently provided the substantial new information. His report set the stage for a major change in the financial research support for faculties of pharmacy in the future. The Medical Research Council, at the time a subunit of the National Research Council, initiated a survey of all medical research in Canada in 1966. The National Research Council had previously been the principal source of those limited research grants given to faculty members in pharmacy schools. The NRC invited pharmacy to become involved in this process, with Bernard Riedel selected to chair a group for an assessment of pharmaceutical research in Canada. Early in the Spring of 1967, in the board room at the University of Montreal, Riedel met with Dr. W. Schneider, NRC president, and Dr. Malcolm Brown, MRC chairman, for a discussion which resulted in the decision that thereafter the MRC would handle the research interests of pharmacy and provide the primary support for researchers in pharmacy. However, the NRC would continue to fund research considered to be more within its domain than in the medical field.

As a result of this decision, the group became “The Medical Research Council’s Survey of Pharmaceutical Research in Canada,” with Riedel as chairman. It conducted a very extensive survey and evaluation of pharmaceutical research in all the constituent faculties of CCPF. Core members of the survey group, in addition to Riedel, were Dr. R. L. Salvador of the University of Montreal Faculty of Pharmacy and Dr. D. E. Guttman
of the University of Buffalo School of Pharmacy. Others who served on individual assessment visits were Dr. Keith MacCannell, UBC Professor of Pharmacology; Dr. N. L. Benoiton, University of Ottawa Professor of Biochemistry; Dr. A. Beaulnes, University of Sherbrooke Professor of Pharmacology; and Dr. Michael Smith, UBC Professor of Biochemistry, who it should be noted received the Nobel Prize for his work on DNA in 1993.

This survey resulted in the establishment of a grants Committee for Research in the Pharmaceutical Sciences within the MRC. In addition, pharmacy research applications in the areas of pharmacology or biochemistry were directed to those particular MRC committees, with a pharmaceutical scientist appointed to those bodies. Riedel had the distinction of becoming the first chairman of the Pharmaceutical Sciences Committee and also sat on the Biochemistry Committee.

When the Medical Research Council received it’s charter in 1969, it included recognition of pharmacy as a member, and one appointee on the Council was to be from the pharmaceutical sciences. Riedel again earned the distinction of being the member so appointed at that time.

In the first year that pharmacy entered the MRC research funding competition, Riedel could report with justifiable pride that $560,340.00 or fully 50% of the total monies received for research by Canadian faculties of pharmacy had come from the Medical Research Council. He also mentioned the involvement of other pharmacy representatives, R. L. Salvador of the University of Montreal and G. R. Duncan of the University of Toronto. Riedel discussed in some detail the procedures used to review grant applications and made it clear that it was important to pay due attention to the completeness of applications and that progress in a research project and the effective use of grant funds were matters that were considered by review committees. Dr. Salvador also addressed those present on the same subject.106

The final report of 1969 for the period covered here consisted primarily of the usual tabulations and statistics. More interesting perhaps was the revelation of some doubt whether a research conference should even be attempted in St. John’s, Newfoundland. It was, nevertheless, successfully with 16 papers in all, including one from the pharmaceutical industry.107
Perhaps one of the most telling indicators of how far the CCPF and its constituent faculties had developed during the period 1951-1969, aside from the number of staff with advanced degrees and the number of graduate students, was the funds received for graduate study and research. The Report in 1951 indicated a single NRC grant (of an unspecified amount) to assist one graduate student; and $5,375 from the CFAP, $3,400 to support 9 graduate students and $1,575 to support an unspecified number of research projects. In contrast, the total research funding reported in 1969 (actually for 1969-70, as of July 1969) was $1,081,602; of that sum $677,275 (62.6%) came from the MRC and $18,500 (1.7%) from the CFAP.108

### Continuing Education as a Function of the Faculties and Provincial Professional Bodies

Under a new Committee on Extension Activities, continuing education began to receive some regular attention, starting in 1950-51, aside from the lists of activities in constituent faculties which appeared as part of the Report of the Executive Committee. CCPF Chairman Wes MacAulay thought it significant enough to draw attention to it in his Chairman’s Address in 1951. He saw it as a good way to study various methods of presentation, to coordinate them, and to exchange ideas.109 Details of extension activities had been and would continue to be reported as part of the information on individual faculties under the Executive Committee, but obviously the CCPF thought that something more was required centrally to make the best possible use of available resources.

Committee Chairman Merv Huston in his first Report in 1951 took on the task with a thoughtful examination of various methods of delivering continuing education based on reports that had been solicited from constituent faculties and which were in addition to what they normally reported to the Executive Committee. Huston acknowledged that while printed material could reach more practising pharmacists, those provinces that used that method saw it as supplementary rather than as a primary format. Indeed, one province suggested that the distribution of printed materials tended to decrease attendance at live presentations; and there seemed to be some doubt that it was as effective a method as the live presentation. Huston suggested that an exchange of papers among faculties or at least the publication of topics would be helpful to avoid duplication of efforts. While most faculties did seem to favor lectures, they recognized that tying it into pharmacy
conventions or conferences tended to be distracting and better conditions should be sought. Several provinces used district meetings effectively. Most provinces made no charges, while a few had only nominal registration fees. Huston suggested that “people are more apt to attach worth to something they have to pay for and it would therefore be desirable to charge something.”¹¹⁰ Huston also favored paying extension lecturers, although only one province was at the time.

All reported using various audiovisual aids, but there were apparent difficulties in carrying out active discussions and in directing lectures at both recent and old graduates. Mixed results were reported in trying to solicit lecture topics from pharmacists, although asking them to choose from prepared lists seemed to work. Faculties were also encouraged to present material “of proper professional and scientific worth” rather than “practical” information of questionable quality and challenge.¹¹¹ One respondent suggested a “dominion extension programme . . . the work to be split among the various colleges, such material to be incorporated into a yearly bulletin, financed by [CPhA] and [CFAP], to be distributed free of charge to all Canadian pharmacists.”¹¹² In the discussion following the Report, it was suggested that some method might be sought to share information nationally, for instance on Pharmacy Administration (since Toronto was then the only faculty with a full-time staff member in the area). The CFAP representative present announced that the CFAP had just established grants to support extension activities; however, he indicated that the cost of publishing an extension bulletin for national distribution would be prohibitive for the Foundation.

One member suggested that public relations activities might be included with extension presentations. A motion to include public relations in the title and activities of the CCPF Committee subsequently passed.¹¹³ Consequently, the first Report of the Committee on Extension Activities and Public Relations, as it was now called, appeared at the 1952 meeting, with Huston remaining as chairman. In the section devoted to continuing education, one faculty reported using a standard medicinal chemistry textbook as a guide, while another favored the district meeting approach, another tried a panel approach, and Alberta and Ontario reported some success in incorporating continuing education material into their bulletins. One member suggested that lists of suitable films be published and distributed to constituent faculties. More than twice as much space was devoted in 1952
to public relations, including the value of presentations to political, civic, and community groups, along with newspaper and radio publicity, both by faculty members and practitioners, as appropriate.\textsuperscript{114}

By 1953 only minimum attention was paid to extension activities compared to public relations. It was suggested that interprofessional relations should be considered an important part of public relations. That could be accomplished by academic staff within their universities, by pharmacy students interacting with other health professional students, and by other health professionals participating in pharmacy continuing education programs. The Report concluded with a short bibliography of suggested reading on interprofessional relations.\textsuperscript{115}

The following year, continuing education activities continued to remain very much at a low level, and Horace J. Fuller had now assumed chairmanship of the Committee. Of particular interest was that the \textit{Bulletin of the Ontario College of Pharmacy} had now become a printed periodical published five times a year with an estimated circulation of 3,800. Several short articles on one subject there replaced a refresher course lecture and reached the registrant in permanent form. In terms of interprofessional relations, lectures to medical and joint medical-pharmaceutical groups are reported. Presentations to high school career days are also viewed as an important public relations activity.\textsuperscript{116}

In 1955, Chairman Fuller tabulated the extension and public relations activities of the constituent faculties, thus providing a clear indication of the wide scope of these across the country. The Toronto Faculty had received a particular boost from considerable coverage given its open house and research activities by the \textit{Globe and Mail}.\textsuperscript{117} That was to be the last Report of the Committee, for it was dissolved at the 1956 meeting. It was noted that the extension activities of constituent faculties would continue to be detailed as a schedule to the Executive Report. Furthermore, former Committee Chairman Huston suggested that “the method of considering public relations was of value earlier when we were feeling our way but that now it was probably not necessary.”\textsuperscript{118}

Just five years later in 1961, with a restructuring of the CCPF committees, a new Committee on Continuing Studies was struck, although terms of reference were not given until 1962. These were: “(a) to evaluate the need
and methods of fulfilling the need for continuing education; (b) to develop with the assistance of the Committee on Curriculum an acceptable program of continuing education which could be approved by the Conference.”

Finlay A. Morrison, the chairman of the new committee, found himself unable to report in 1962, except to point out two papers on the subject appeared as part of the 1962 Teachers Conference on “The Education of the Pharmacist as a Consultant.” André Archambault, of the University of Montreal Faculty of Pharmacy, discussed “Continuing Education for the Practising Pharmacist in Order that He Become a Better Consultant”; and D. H. Williams, head of the University of British Columbia Department of Continuing Medical Education, “Methods of Continuing Education by the Faculty for the Practising Pharmacist.” It is rather puzzling that at no stage during the initiation of this new committee was any reference made to the earlier Committee on Extension Activities. However, it is clear that the terms “refresher” or “extension” course had given way to “continuing education” in an effort to reinforce the idea that life-long learning was a concept that became ingrained in pharmacists while they were still students. Ross M. Baxter articulated that clearly in his CCPF Chairman’s Address in 1963.

While there was again no report of the Committee on Continuing Studies in 1963, the entire Teacher’s Conference that year was devoted to “Continuing Education for the Pharmacist.” All but one of the constituent faculties was represented by a speaker from among its own staff or the university extension division of its university. In addition, Secretary-Manager John C. Turnbull of the Canadian Pharmaceutical Association discussed the “Coordination of Continuing Education at the National, Provincial and Local Levels.” More interesting than Turnbull’s ideas concerning a sort of hierarchy of individuals at three levels, were his suggestions that continuing education would ultimately be seen as required for practitioners and that a “certificate of attendance” might be issued by the CPhA to make the public aware of the pharmacists’ achievements.

The first real report of the CCPF Committee on Continuing Studies appeared in 1964, still under the chairmanship of Finlay Morrison. After a discussion of some basic concepts, there was an appendix summarizing activities during the preceding year by each of the constituent faculties, and a discussion following. The Report suggested that the responsibility for continuing education really lay with the provincial bodies, but that while they sometimes
co-sponsored programs, most of the work fell on the faculties of pharmacy or extension divisions in their universities. Alberta, British Columbia, and Ontario were commended as provinces in which individuals in various of these bodies had been appointed with full- or part-time duties in the area. There was still a variety of lecture-type programs, with correspondence courses under consideration, and on-campus programs gaining popularity because of the variety of facilities available for lectures, laboratories, and housing. Certificates of attendance had become common, but compulsory attendance to guarantee re-licensing was still under consideration. The report proper finished with some ten conclusions and recommendations. Among other things those re-affirmed the joint responsibility between faculties of pharmacy and professional associations; supported the advantages of campus venues; and pointed out the need to provide appropriate programs for pharmacists in all areas of practice. The discussion following was also generally supportive.¹²³

The first Report by the new chairman, David R. Kennedy, had been hampered by a postal strike from receiving the usual reports from constituent faculties and depended upon live reports. Activities in British Columbia and Ontario were pointed to, but most of the formal report dealt with activities at the Philadelphia College of Pharmacy and Science and continuing education from the point of view of pharmaceutical chemistry as presented during a joint Teachers’ Seminar on Pharmaceutical Chemistry of the AACP and the CCPF held in Toronto earlier that same year. The presenter, G. R. ("Pat") Paterson, favored a system under which select pharmacists themselves would be trained to make continuing education presentations. As usual a variety of opinions was expressed in the discussion, including that it was not possible for the Committee to act as a clearing-house for all activities nationally, but that these could appear as part of Schedule A of the Executive Committee Report. The fact that they had indeed been appearing in that way for many years seems to have escaped those present.¹²⁴

The 1966 Report consisted mostly of reports on continuing education activities by the constituent faculties, the most interesting of which perhaps was the nine-day Armed Forces Pharmacy Extension Course mounted by the University of Saskatchewan. The Report also included comments about papers on continuing education at the AACP Teachers’ Seminar on Pharmaceutical Education attended by Kennedy and other CCPF members. Kennedy expressed the opinion that “Canadian programmes are at least the
equivalent of and in many cases superior to those offered by most [American] states." In the discussion following it was stressed that ideally both the provincial professional associations and faculties of pharmacy working closely together should provide continuing education.

Apparently because of the favorable reaction to the format of the 1966 Report, the one in 1967 followed the same pattern. Chairman Kennedy interjected his personal opinion that the full potential of continuing education had not yet been reached and suggested that pharmacists changing from one area of practice to another, for example from community to hospital pharmacy, should be required by their licensing bodies to demonstrate that they possessed the appropriate knowledge to do so.

For 1968, the Committee moved away from publishing details of the programs mounted during the preceding year by constituent faculties and decided to concentrate instead on its terms of reference. These were to expand the Committee to include ex officio representatives of the provincial regulatory bodies; to explore with those bodies the question of mandatory continuing education as a condition of the renewal of registration and to operate a pharmacy; and to recommend the issuance of certificates of attendance. The Committee also asked for suggestions concerning the types of programs that “could be approved by the Conference.” It is not clear what was intended by this recommendation, since approval—except, perhaps, in the form of commendation—was clearly not one of the terms of reference of the Committee or of the CCPF.

The last Report of the CCPF Committee on Continuing Studies for the period 1951-1969 departed from all previous ones by devoting itself entirely to the AACP Teachers’ Seminar of 1969 on “Continuing Education for Pharmacists.” Chairman Kennedy was encouraged by the number of Canadians registered for the Seminar. He pointed out that the major differences evident between Canada and the USA were that the members of American pharmacy regulatory bodies, the state boards of pharmacy, were political appointees and that continuing education programs were organized by the schools of pharmacy and not the boards. Kennedy found particularly interesting a presentation dealing with audio-visual aids, the idea that credit should be given for continuing education, and that two states had mandatory continuing education for continuing licensure.
While the sharing of information about continuing education activities among constituent faculties undoubtedly proved helpful, the CCPF Committee never did achieve one intended purpose of providing a kind of national clearing house suggested in 1951 when the original Committee on Extension Activities came into being. That was to come only somewhat later with the founding of the Canadian Council on Continuing Education in Pharmacy, established in 1973. Although the CCPF, by now the AFPC, was to be represented with other appropriate national organizations in the CCCEP, the primary control was to be in the hands of the provincial regulatory bodies of pharmacy.

**The Teachers’ Conference Grows in Scope and Complexity**

Modeled on the same principles as the Teachers’ Seminar of the American Association of Colleges of Pharmacy (AACP), the CCPF’s Teachers’ Conference was intended to share ideas among pharmacy teaching staff about course content and teaching methods. CCPF mounted its first effort in this direction as early as 1945. However, during the period 1951-1969 these conferences gradually became more ambitious and had more scheduled time allotted to them. They were no longer tacked on late in the afternoon or in the evening after a long day of CCPF business. We have referred in other sections to teachers’ conferences that dealt with areas such as graduate studies and continuing education; we will not repeat those in detail in this section, simply mention the subject area.

The first under consideration here, in 1951, followed no particular theme, but consisted of a variety of subjects as diverse as “Teaching Pharmaceutical Chemistry,” by Dan Murray; “Cosmetics,” Leona Brown (later Goodeve); “European Prescriptions,” Norman Hughes; “Organization of a Pharmaceutical Dispensing Laboratory,” Merv Huston and Esli Woods; and “Agricultural Pharmacy,” Alex Wood. In 1951, it was also agreed that all the papers should be published in the Conference Bulletin. Previously, copies had sometimes been distributed by the authors among the constituent faculties.

The following year, 1952, again saw a mixed program. Horace Fuller discussed “Pharmacy Administration,” as the first academic in a Canadian school of pharmacy to specialize in that area. In addition, Dugald McDougall convened a panel—consisting of George Walker, Roger Larose, and “Pete”
Fairley—on “Prescription Specialties.” The subject met with enough success that there was some support expressed for continuing the theme the following year.° That occurred only to the limited extent that Isabel Stauffer discussed the filing and classification of professional literature. (Professor Stauffer’s background included advanced education in hospital pharmacy as well as library science and she worked simultaneously in both areas at this time—at the University of Toronto Faculty of Pharmacy and at the Canadian Medical Association.) There were also brief outlines by George Walker on the approach to prescription specialties with pharmacy students and by Whit Matthews and Finlay Morrison on filing professional literature. The subject of practical dispensing, which had also been planned for the same session, was postponed to the following year, since the Teachers’ Conference was reduced to a very limited time period in the late afternoon after other activities.°°

Leona Brown’s charge to prepare a paper on a course in practical dispensing for the 1954 Teachers’ Conference did indeed come to fruition. She based the paper on an extensive questionnaire, which method was so well received that it was decided to consider it as a standard procedure for future years and to determine the subject area for the 1955 meeting. Following Brown’s paper, there was also extensive discussion, which included details about content, grading, and presentation, as well as the desirable balance between compounding and specialties.°°°

The Teachers’ Conference for 1955 was given over to the area of pharmaceutics in the curriculum. Under the chairmanship of Bernie Riedel, who had drawn up a series of questions to help organize the thoughts and contributions of the participants, Finlay Morrison discussed “Pharmaceutical Principles and Processes,” and Riedel, “Pharmaceutical Preparations.” There was also a little discussion about dispensing pharmacy.°°°°

For the first time in 1956, all the papers presented at the Teachers’ Conference were bound in the proceedings issue for the year. Auguste Mockle tackled the subject of “Pharmaceutical Studies at the Faculté de Pharmacie de Paris with Particular Reference to the Biological Sciences”; Alex Wood, “The Biological Sciences in the Pharmacy Curriculum”; Stephen Sim, “Towards a Sound Pharmacognosy Course in the Pharmaceutical Curriculum”; Jack Halliday, “Pharmacology in the Pharmacy Curriculum: Its Importance to the Present-Day Practice of Pharmacy”; and Randy Murray, “Prerequisites
for Pharmacology.” Murray followed the next year with a paper on “Pharmacology Requirements for Pharmacy Students,” while that theme was continued by Jack Halliday on “Courses in Pharmacology Taught within the Faculty of Pharmacy,” N. Cullumbine and Pat Paterson on “Teaching Pharmacology to Pharmacy Students in a Faculty of Medicine,” and Auguste Mockle on “Pharmacology at the Faculty of Pharmacy, University of Montreal.”

The 1958 CCPF’s Teachers’ Conference, which was devoted to pharmaceutical chemistry, was also the first in which there appeared a summary of the Conference, after the text of the papers. Roger Larose provided that summary, while the papers were given by Terry Brown on “Chemistry and Pharmaceutical Chemistry Requirements by the Pharmacist—(a) Basic Requirements”; Whit Matthews on “—(b) Electives for Retail and Hospital Pharmacy”; Fred Teare on “Special Requirements in Chemistry and Pharmaceutical Chemistry for the Pharmacist Who Plans to Enter the Pharmaceutical Industry, Food and Drug Directorate, and Graduate School”; W. F. Allen on “Courses in Chemistry and Pharmaceutical Chemistry—(a) Chemistry Courses in a Pharmacy Curriculum”; E. A. Martin on “—(b) Pharmaceutical Organic Chemistry”; Pat Paterson on “Inorganic and Organic Pharmaceutical Chemistry”; George Jeffrey on “Analytical Pharmaceutical Chemistry”; Terry Brown on “Correlation of Pharmaceutical Chemistry with Other Courses—(a) Pharmacology”; Stephen Sim on “—(b) Pharmacognosy”; and George Walker on “—(c) Pharmaceutics.”

The 1959 Teachers’ Conference proved to be another comprehensive one, this time on Hospital Pharmacy. It is pertinent that the Canadian Society of Hospital Pharmacists met with the CCPF for the first half of this conference. After a brief introduction by Conference Chairman Bernie Riedel, J. E. Smith explored “The Challenge of Hospital Pharmacy”; A. L. Swanson, “The Hospital Pharmacist as an Executive”; George Walker, “Manufacturing Pharmacy for Hospital Pharmacy as a Specialized Vocation”; Stan Lissack, “The Intern’s Point of View;” Finlay Morrison, “Internship—Its Aims and Objectives;” Isabel Stauffer, “Advanced Training and Certification in Hospital Pharmacy;” John Bester (University of Southern California), “Hospital Pharmacy Education in the United States”; Glen Moir, “Field Trips for Hospital Pharmacy Courses”; Isabel Stauffer and Norman Hughes, “Hospital Pharmacy Courses in the Pharmacy Curriculum”; W. Maday,
“Teaching by the Hospital Pharmacist”; and Randy Murray, “Summary of the Teachers’ Conference on Hospital Pharmacy.”138 (Stan Lissack, in 1958-1959, was the first to complete a hospital pharmacy residency in Canada, this at the University Hospital in Saskatoon.)

The Teachers’ Conference on Pharmaceutical Research and Graduate Study in 1960 is referred to in the section on “Graduate Studies and Pharmaceutical Research” elsewhere in this chapter. For 1961, the attention shifted to Physical Pharmacy, again under the chairmanship of Bernie Riedel, who led off with a brief introduction. There followed presentations by Art Anderson on “The Scope of the Pharmaceutics Discipline in Pharmacy,” André Archambault on “A Survey of Present Methods of Teaching Pharmaceutics”; Alfred Martin (Purdue University) on “The Sphere of Knowledge and the Helix of Learning: A Critical Examination of Physical Pharmacy”; Gordon Duff on “Prerequisites for a Course in Physical Pharmacy”; Graham Nairn on “A Course in Physical Pharmacy”; Gordon Groves on “Integration of Physical Pharmacy into Pharmaceutics”; and Dan Murray with the “Summary of the Teachers’ Conference 1961.”139

The 1962 Teachers’ Conference made a notable shift in subject to “The Education of the Pharmacist as a Consultant,” with Graham Nairn as chairman and Roger Larose providing the summary. Jack Orr (University of Washington) lead off with a discussion of “The Future Role of the Pharmacist,” followed by David Kennedy on “The Pharmacist as a Consultant”; Gordon Groves on “Curricular Changes in the Field of Pharmaceutics in Order that the Pharmacist Become a Better Consultant”; Merv Huston on “Curricular Changes in the Biological Sciences in Order that the Pharmacist Become a Better Consultant”; André Archambault on “Continuing Education for the Practising Pharmacist in Order that he Become a Better Consultant”; and D. H. Williams on “Methods of Continuing Education Available to a Health Science Faculty for its Professional Graduates Practising in the Health Field for the Public.”140 Another departure from the usual was the 1963 Teacher’s Conference on Continuing Education for the Pharmacist, to which we refer in the section on “Continuing Education” elsewhere in this chapter.

The 1964 Teacher’s Conference made still another shift from what had been mostly subject based presentations to “Teaching Methods and Techniques.” Chaired by Graham Nairn, who made the introduction, and summarized by Pat Paterson, the other participants included Alex Mowat
on “The Philosophy of Educational Method”; H. J. Uhlman on “The Administrator Looks at Method”; R. D. H. Black on “Practical Methods of Teaching in the Classroom”; M. J. Belair on “Educational Television in the University”; Auguste Mockle and R. Daoust on “Automatic Teaching—Teaching Machines and Programmed Learning”; and Graham Nairn on “Examinations.” Since the annual meeting was in Halifax that year, the first three speakers were drawn from Dalhousie University, while the fourth came from St. Mary’s University.141

There was no separate CCPF Teachers’ Conference in 1965 since the CCPF joined with the AACP to stage their Teachers’ Seminar in Toronto that year on the subject of pharmaceutical chemistry, with Pat Paterson as co-chairman. Details appear in the section on “The CCPF and the AACP,” elsewhere in this chapter. The 1966 Conference again took an interesting twist with the imposing subject of “The Role of the Pharmacist, Present and Future.” Divided into three parts, the first dealt with “Recent Developments in Pharmacy Internationally.” André Archambault lead off with a paper on Europe, followed by Whit Matthews on the United Kingdom, Joseph Sprowls (Temple University) on the United States, and Glen Moir and Jack Dancey on Canada. Part two on “Present Problems in Pharmacy” heard Finlay Morrison and Ross Baxter discuss “Utilization of Pharmacists’ Time in Retail Pharmacies;” Doug Stewart, “The Role of the Non-professional Assistant in Hospital Pharmacy;” Alf Pepper (Saskatchewan Pharmaceutical Association), “The Role of the Non-professional Assistant in Retail Pharmacy;” and Roger Larose, “The Role of the Non-professional Assistant in Industrial Pharmacy.” The third part was an open discussion on “Training for the Future in Pharmacy,” which revolved mostly around the question of non-professional assistants. Jack Halliday completed the proceedings with a summary of the Conference.142

The Centennial Year Teachers’ Conference of 1967 tackled the subject of “Pharmacy Courses for Today.” After brief opening remarks by Chairman Graham Nairn, Gerhard Levy (State University of New York at Buffalo) discussed “A Course in Biopharmaceutics for Pharmacy Students;” Jerald Bain (University of Toronto), “A Course in Therapeutics for Pharmacy Students,” from the perspective of a physician with a pharmacy degree; and J. E. Dooley (University of Toronto School of Business), “A Course in Computer Programming and Applications for Pharmacy Students.” David Kennedy and Graham Nairn provided the summary of the Conference.
The 1968 Teachers’ Conference in Regina took as its theme “Forensic Toxicology,” with speakers from the Public Health Laboratory and the RCMP Crime Laboratory. Papers did not appear in the CCPF Proceedings. Furthermore, the Committee on Future Planning suggested a need “to define the objectives of the Teachers’ Conference . . . and . . . the desirability to restructure [it].” It suggested planning the Conference over a period of years and spread over more than a day, with topics known well in advance. It also wondered whether the Teachers’ Conference might be held every other year at the same time and place as the Research Conference, perhaps at a time and place other than that of the annual CCPF meeting.

The last year of our examination, 1969, was the year of the major reorganization of the CCPF into the Association of Faculties of Pharmacy of Canada. The whole first day of the annual meeting was devoted to this matter under the heading of the “Teachers’ Conference.” The new AFPC Constitution and By-laws appear to have ignored the suggestions of the Committee on Future Planning, since the relevant section reads: “There shall be an annual Teachers’ Conference and an annual Research Conference organized and hosted by a constituent faculty on a rotational basis. The conferences shall be held at a time and a place to be determined by the Executive Committee in consultation with the host faculty.”

CCPF and Individual Member Publishing Activities

CCPF and Individual Member Publishing Activities Cover a Wide Range

Many of the CCPF publications had their origin prior to 1951. The Proceedings of the annual meetings started already in 1944 and continue to the present time. The CCPF Bulletin or newsletter began in 1948 and continued until 1969 when the CCPF became the AFPC; the AFPC Communications later took its place and continues today. As noted elsewhere, the Bulletin often carried papers from the CCPF Teachers’ Conference until those were published in the Proceedings.

CCPF members were also actively involved in a number of publishing ventures of the Canadian Pharmaceutical Association. A major responsibility had been the research and preparation by CCPF members of the 1949 edition of the Canadian Formulary. A separate section of this chapter deals with “The CCPF and the Canadian Formulary.”
Furthermore, the CPhA’s *Compendium of Pharmaceuticals and Specialties* (CPS) began in 1945 as a *Canadian Pharmaceutical Journal* column by F. N. Hughes, called “New Drugs” and later “New Pharmaceuticals,” which in 1951 became the *New Products Index*, then in 1970 the CPS. Hughes remained associated with the CPS until its 9th edition in 1974, when he retired as consulting editor. An earlier prototype of “New Drugs,” at first untitled, then later called “Do you Know These New Products?,” appeared between 1940 and 1944 as part of or in close juxtaposition to a column called “The Dispenser’s Digest,” by still another CCPF stalwart, Whit Matthews. Between 1939 and 1946 Hughes edited another column in the *CPhJ* that discussed in succinct form the latest medical and pharmaceutical advances; it was at first called “Pharmacy Review” and subsequently “March of Pharmacy.” A similar column reappeared under the byline of still another prominent protagonist of the CCPF, Ross Baxter. This series ran from 1952 to 1962 and was variously known during its lifetime as “Scientific News,” “Science and Medication,” “Medication Research,” and “Therapeutic Trends.”

Although there had been a number of Canadian pharmaceutical academics who enriched the publications of the CPhA, perhaps we could mention just two more, Merv Huston and Horace Fuller. Apart from his scientific contributions [to which we will refer later], Leacock Award winning Huston added spice of a different kind through writings such as his indescribable “Julius Seizure” (1966) and his 1954-67 series, “‘Scientific Word Power.” Fuller first became associated with the “Annual Survey of Community Pharmacy,” as it was then called, in 1952 and he was still associated with it in its 39th year, 1980, in the latter case in cooperation with one of those subsequently involved with AFPC, Harold Segal.”

For twenty years, 1946-1966, CCPF members contributed papers for a “Conference Section” in the *Canadian Pharmaceutical Journal*. That carried mostly material that would be useful to practising pharmacists in their dispensing and day-to-day activities. At various times, mid-way through that period, different editors wondered whether it was still worth continuing in view of the difficulty of soliciting sufficient appropriate material and sometimes differences of opinion with the *CPhJ* editor. In 1959, Conference Section Editor Bill Wensley asked that the CCPF re-examine the terms of reference for the Section and “clarify the responsibilities and authority of the editor of the Conference Section of the Journal.”
request appears to have had some positive effect since a full roster of publications appeared for 1959-1960.\textsuperscript{150} However, the Section lasted only a few more years, until 1966.

In 1950, while discussing CCPF member contributions to the \textit{Journal}, then Conference Section Editor Norman Hughes wrote: “The time is near, I am convinced, when it will be necessary to have some Canadian publication with the proper type of circulation to provide a medium for the presentation of scientific pharmaceutical papers. The increasing amount of research being done in our colleges and the availability of more personnel fully qualified to prepare exhaustive reviews on subjects of pharmaceutical interest deserve a publication through which a worthwhile Canadian pharmaceutical literature may be developed. This might be through a quarterly publication, initially, until contributions were sufficient to justify a monthly journal. I believe this matter is sufficiently important that it should be studied as early as possible. Therefore, I recommend that the Conference appoint a Committee to investigate the possibility of a quarterly scientific pharmaceutical journal being published in Canada, such Committee to report to the 1950 Meeting.”\textsuperscript{151} The motion to strike such a committee followed directly after the Report, while Roger Larose suggested a detachable scientific section in the CPhJ.

The Committee on Scientific Pharmaceutical Journal, chaired by Esli Woods, concluded in 1950, after considering the matter from the point of view of material available, cost, and circulation that “because there is not, at present, a sufficient number of research papers in view to maintain a quarterly Canadian Pharmaceutical research journal . . . it would be unwise to make any attempt to publish a journal of this restricted type. It is recommended, therefore, that this Conference take no action, at the present time, in the publication of a scientific journal of the research type.”\textsuperscript{152} A variety of suggestions followed in the discussion of the report, beyond those made previously, including a special issue of the \textit{Canadian Pharmaceutical Journal} or publication in other existing Canadian research journals. The final conclusion, however, remained the same; namely that the idea was not yet feasible in view of an inadequate supply of suitable papers. The Committee was disbanded. In spite of this, the discussion continued the following year that at least an annual publication might be considered until such time as a more frequent publication was warranted and that the matter be explored further.\textsuperscript{153} George Walker, as editor of the Conference Section
of the *CPhJ* suggested in 1953 that the subject be re-opened and explored further. However, this was not supported by those present and the matter ended there, for the time being.  

By way of something of a compromise for the time being, the CCPF arranged for a “Scientific Section” in the Canadian Pharmaceutical Journal (CPhJ), starting in 1957. Merv Huston, as chairman of the Committee on Graduate Study and Pharmaceutical Research was obviously delighted. Referring back to the 1950 report concerning the viability of a scientific pharmaceutical journal, he wrote “it was reported that only between 5 and 8 papers a year might be anticipated and the project was shelved. It is gratifying that only seven years later sufficient papers are available to begin this Section. We hope that we are not being overly optimistic when we say we anticipate that it can be continued. You will be interested to know that in the readership survey conducted by the Journal the Scientific Section stood quite high. Every effort is being made to extend the circulation to scientific libraries throughout the world.” As early as 1958, in discussion following the report of the Conference Section editor, it was suggested that perhaps the CCPF should appoint a Committee on Publications to cover the various publishing activities.  

The movement for a scientific journal of Canadian pharmacy appears to have begun again in 1962, with a resolution that “the Committee on Publications initiate a study of the Canadian Pharmaceutical publications.” As chair of the Committee on Publications, Merv Huston in 1963 reproduced an exchange of correspondence he had as editor of the *CPhJ* Scientific Section with the National Research Council (NRC) concerning where pharmacy might fit in a suggested re-grouping of certain disciplines in NRC-sponsored journals. The response expressed the opinion that the volume of available work for publication was still too small, but that the matter could be explored again when that situation changed. However, by 1965, Huston was reporting as editor of the Scientific Section of the *CPhJ* that “efforts are still given to develop a separate entity for research publications and to be known as the ‘Canadian Journal of Pharmaceutical Sciences’ (CJPS).” During the preceding year, Huston had discussed the matter with *CPhJ* editor Arnold Raison and had surveyed the constituent faculties and individuals
in the Food and Drug Directorate, all with some encouragement. Huston concluded that “at the moment, the feasibility of establishing the Journal is more evident and we are most hopeful that it will be possible since we feel very strongly that it is desirable, necessary and feasible. The Committee encourages very strongly the Conference members to publish their research papers in the Scientific Section and to invite their friends in the industry or elsewhere to get their research papers published in the Scientific Section. A keen interest in the Scientific Section is the best assistance that members can give to have in a not too [distant] future a separate entity for research publications.”\(^{161}\) The CCPF Committee on Resolutions that year expressed “its indebtedness to Dean M. J. Huston for his untiring efforts in establishing a Canadian Journal of Pharmaceutical Sciences.”\(^{162}\)

By 1966, Huston was able to announce with obvious pride that one issue of the *Canadian Journal of Pharmaceutical Sciences* had been published and that a second would come in the Fall. He urged those submitting papers to the CCPF Conference on Pharmaceutical Research to commit to publish in the *CJPS*.\(^{163}\) The CCPF Committee on Resolutions that year not only congratulated Huston and Raison for launching the *CJPS*, but also urged supporting the application to the NRC for a grant-in-aid to help subsidize the new journal.\(^{164}\)

Although the author could find no official notices in the proceedings issues of either 1965 or 1966, the last CCPF Scientific Section appeared in the *CPhJ* in 1965. The new journal had obviously and logically taken its place, but the Section could perhaps be given credit for having made the journal viable. Merv Huston served appropriately as scientific editor of the *CJPS*, with Arnold Raison as managing editor, CPhA Executive Director John Turnbull, and an editorial board of five members from constituent faculties. Ron Coutts assumed the position of assistant scientific editor, then in 1970, scientific editor until Don Zuck replaced him in 1973. After the first year, Huston served as editor-in-chief until he retired in 1978. Don Zuck was to carry the journal on until 1980. Four issues had appeared each year from 1967 until 1977. Unfortunately, the early plan to increase the number of issues to six and ultimately twelve issues annually was never realized since the volume of papers submitted never increased sufficiently to accomplish that dream. Although financial support had come variously from the CPhA, the NRC, the CFAP, the National Sciences and Engineering Research Council, and subscribers, the noble venture eventually failed due to a lack
of sufficient stable long-term funding.\textsuperscript{165}

\textbf{The CCPF Plays a Significant Part in the Last Edition of the Canadian Formulary}

In 1945, just a year after the CCPF was founded, it accepted responsibility from the CPhA for the revision of the \textit{Canadian Formulary}. The product of that work culminated as the 1949 edition of the Formulary. To ensure that future revisions would proceed in an orderly fashion, the CCPF established a dozen subcommittees, each dealing with specific different classes of products and each resident in the Canadian faculty where the bulk of the research was to proceed. Each of those committees also included one member from another faculty and representatives were invited from the Canadian Society of Hospital Pharmacists and from the Canadian Pharmaceutical Manufacturers Association (later became the Pharmaceutical Manufacturers Association of Canada). A regular feature of the annual meetings of the CCPF was the reports from these subcommittees, which appeared in the yearly proceedings as well as in the \textit{CCPF Bulletin}. A. W. Matthews was re-appointed editor of the next edition.\textsuperscript{166}

At the 1951 annual meeting, CCPF Chairman W. C. MacAulay suggested that the Conference should question whether the \textit{Canadian Formulary} was “being used extensively enough to warrant the labour and expense put into it by the members” of the Conference. However, he himself immediately expressed the hope that the Conference would retain the “responsibility, even for no better reason than that it [stimulated] investigation and research in [the] schools [of pharmacy]. Many of the C. F. problems [lent] themselves to investigations that [could] be undertaken by senior undergraduates and . . . original and individual investigation [was] an effective teaching technique.”\textsuperscript{167} The same question of the validity of the work in view of its apparently declining use by health professionals was raised by the CCPF Executive Committee that year, while Whit Matthews and Norman Hughes suggested the value of consulting with Canadian food and drug authorities.\textsuperscript{168} To that end, G. L. Kalbfleisch of the Department of National Health and Welfare participated in the 1952 meeting, addressing in particular a new food and drug Act and whether the \textit{Canadian Formulary} could gain status as an official standard under the Act. Those present agreed to establish a committee to include representatives of the CCPF, the Formulary, the Department of National Health and Welfare, and the Canadian Pharmaceutical Manufacturers Association to suggest the scope
of the next revision of the work. However, the situation appeared no clearer by the following year, when reference was made to the “indefinite and uncertain future of the C.F.” Subcommittees on revision were told that they might continue with such projects as they thought might “prove worthwhile from the point of view of publication in a medium to be approved by the Executive of the Conference.”

By 1955, the status of the Canadian Formulary as a source of official standards for federal food and drug purposes was still in question and Matthews suggested that CF revision subcommittees could continue their work if they wished, but “their usefulness [was] in doubt.” There appeared to be little or no activity in succeeding years until a motion carried in 1959 to dissolve both the Subcommittees of the CF and the Committee on the Scope of the CF. Inexplicably, both committees were again abolished in 1961 with the future of the Canadian Formulary now left to the CCPF Committee on Publications.

Thus there ended what had been a notably Canadian enterprise, with a history considerably older than its association with the CCPF. The Canadian Formulary had started in 1905 as a publication of the Ontario College of Pharmacy, which turned over responsibility for it in 1929 to the CPhA, after having published four revisions (1908, 1910, 1915, 1921) in the interval.

By 1963 the decision was finally taken not to publish any further editions of the Canadian Formulary. Ironically, it was not until three decades later, in 1993, that the compendium finally ceased to be official under federal legislation.

Interprofessional Relations: Interacting with Other Health Professions at Various Academic Levels

The CCPF Committee on Interprofessional Relations was first struck in 1961, at a time that witnessed a major change in committee structure. We recall that somewhat earlier interprofessional relations had been regarded as part of public relations, which had been added to the title of the Committee on Extension Activities, itself dissolved in 1956. It was considered that the new Committee on Interprofessional Relations would concern itself more with the area from an academic point of view. However, that was not mentioned specifically when the terms of reference were first stated in 1962 as: “(a) to stimulate a better understanding of the professional aspects of
Pharmacy as one facet of the Medical Sciences; (b) to develop an interchange of knowledge and ideas between Pharmacy and its allied professions.”175

The first report of the new Committee, chaired by George C. Walker, appeared in 1963. Although Walker believed that the annual meeting was not the place to simply report information as part of a national record, he felt a way to start would be for each constituent faculty to indicate what activities of an interprofessional nature were taking place and to offer suggestions concerning the future course of the Committee. He obviously felt uncomfortable with the “nebulousness . . . of the term ‘interprofessional relations’.”176 The activities reported tended to be lectures presented by the constituent faculties to medical, dental, and nursing students; the interaction of pharmacy students with those in other health professions, as part of regular courses or special programs; lectures to pharmacy students by veterinarians or veterinary colleges; suggested faculty interaction with university departments of continuing medical education; and participation by faculty members on panels of diverse professional mix.

Contrary to Walker’s intent for the Committee not to serve merely as the depository of information, the next Report, which did not appear until 1966 and was now under the chairmanship of Pierre Claveau, did simply that. Furthermore, only four of the eight constituent faculties reported, all but one in French. There was no discussion.177 Again the following year, half the faculties reported no new activities. Among newer interactions, British Columbia and Toronto indicated interdisciplinary activities at the faculty level within their universities, as well as within provincial associations and government committees. For the first time responses also came from two of the affiliate members, i.e. member colleges of the AACP.178 The annual meeting of 1968 saw no report from the Committee, now chaired by J. Gordon Duff, but the CCPF Committee on Future Planning suggested that perhaps a joint committee with the CFAP, among others, might be a direction to go.179 For 1969, now as the Committee on Academic Interprofessional Relations, Chairman Duff asked constituent faculties to report on the integration of students in the health sciences within their respective universities. The College at Dalhousie was part of a new Faculty of Health Professions, which included Nursing, Physiotherapy and Physical Education; however, Medicine and Dentistry were in separate faculties. British Columbia was in the process of establishing “The Office of the Coordinator of Health Sciences” as a means of bringing together the
faculties and schools of the health disciplines to integrate the teaching of health sciences and to develop inter-professional programs and courses. The Coordinating Committee was made up of the deans and directors of the health science faculties and schools—Dentistry, Medicine, Pharmaceutical Sciences, Nursing, and Rehabilitation Medicine. Also included were representatives of Social Work, Arts, Science, and Home Economics. The group was chaired by Dr. Jack McCreary, Dean of Medicine, who also served as Coordinator of Health Sciences. At Toronto, the heads of health sciences divisions met with the vice-president of health sciences. Laval had a vice-rector for health sciences, a permanent committee of students for health sciences, and a new program of studies for students in the health sciences. Although it existed for only the last decade of our designated period of 1951-1969, the concept of cooperative academic interprofessional relations did by 1969 at least appear to be evolving with some promise in some of the constituent faculties.

**Intraprofessional Relations: The CCPF**  
**Interacts with Other National Pharmacy Organizations**

The CCPF “Hughes Report”  
**Opens the CPhA to Representation by All Segments of Pharmacy**

Perhaps no action that emanated from the Canadian Conference of Pharmaceutical Faculties or its successor Association of Faculties of Pharmacy of Canada had greater ramifications for pharmacy in Canada than the “Hughes Report.” It began simply enough as the first of three brief statements in the last report in 1950 of CCPF’s first secretary-treasurer, F. Norman Hughes. All three Hughes put forward as “ways in which the effectiveness of the Conference might be enhanced to the benefit of Canadian Pharmacy as a whole.” Arguably, however, the widest ramifications would flow from the first, simply stating that:

*a national pharmaceutical body such as [the Canadian Pharmaceutical Association] should be constitutionally representative of all branches of Pharmacy. One can visualize a national body embracing all groups—hospital, manufacturing, academic, sales, etc., as well as retail pharmacists—without interference with the basic essentially federalistic nature of the association. Any step which this Conference can make to become*
more closely linked with the [CPhA] would be a step toward this objective.”  

The CCPF subsequently endorsed these views, which were well received by CPhA, resulting by 1953 in “unanimous support [being] accorded these views by the [CPhA].”

There followed a special meeting of CPhA in Toronto in February 1954, with A. W. Matthews and F. Norman Hughes representing the CCPF, to discuss the implementation of what by now was being referred to as the “Hughes Report.” The CCPF subsequently elected Norman Hughes to be their first representative on the CPhA council and executive, starting with the 1955 meeting in Vancouver. That position on the CPhA executive was to be alternated for a period of time with a representative from the CSHP. There is good reason to believe that the new (in 1953) CPhA Secretary-manager (later Executive Director) John Turnbull may have been largely responsible for the openness to change exhibited by CPhA.

The presence of Hughes on the CPhA Council and on various committees was supplemented by 1956 with a number of other academics on committees, including Isabel Stauffer (also CSHP), Horace Fuller, and George Walker, so the CCPF was well represented indeed. As Hughes approached the end of his term as the CCPF representative to the CPhA in 1958, it was clear that he and others felt there had been positive benefits from the relationship. The CCPF was also in a good position to provide input into the early discussions that led to the establishment of the Pharmacy Examining Board of Canada. Beginning in 1958, both the CCPF and CSHP had representatives simultaneously on the CPhA Council, with A. W. Matthews having replaced Norman Hughes. By 1967, the Conference had also gained a permanent seat on the CPhA executive, for which the CCPF representative on the CPhA Council had argued for some time. It is equally significant that A. W. Matthews became second vice-president of the CPhA in 1961 and president in 1963, while Jack Summers became president in 1965.
The ADPC Evolves from the CCPF to Make Its Own Particular Contributions

What was to become the Association of Deans of Pharmacy of Canada (ADPC) began as the Canadian Association of Deans of Pharmacy at the 1965 CCPF Annual Meeting. The suggestion for such a body appears to have flowed from a special meeting of the deans and directors convened in Toronto in April of that year to deal with recommendations flowing from the Royal (Hall) Commission on Health Services that would affect the faculties. The change in name came only some years later so that the initials would be the same in French and English and thus readily identifiable in either language. When the AFPC evolved from the CCPF in 1969, it followed the same practice. Although the deans of the constituent faculties of CCPF had played a leading role in that organization, they did come to feel that there was a felt need apart from the CCPF to address specific concerns that found no real place within the Conference. That is not to say that the deans separated from the CCPF, only that they also met among themselves to discuss certain issues mainly of interest to them.

As Whit Matthews explained it, on behalf of the deans, the Canadian Association of Deans was “a natural outgrowth of past activities of the Conference. They were interested exclusively in administrative problems and thus there would not be any conflict of interests with Conference activities. In fact, he felt that whenever possible such meetings as they would have be held at times other than during the Conference meetings to avoid dilution of effort . . . He emphasized that there was no thought of secreting themselves from members of staff, but rather of gaining information and assistance through exchange of experience across the country. He was sure that each Dean made a point of discussing such problems with staff on a local level. On the other hand, the airing of mutual problems at the annual Conference meetings would take up too much of the available time, and so the formation of a Dean’s Association had become a necessity.”

Matthews elaborated on several specific examples of current concern that he felt the deans might respond to more logically than the Conference and vice versa.

Ross Baxter, chairman of the CCPF Committee on Future Planning, supported some of these ideas, when in 1967 he suggested that the recent formation of the Canadian Association of Deans of Pharmacy and
the Commission on Pharmaceutical Services would “undoubtedly have considerable impact on the Conference and its activities over the next several years.” Baxter suggested this meant that the CCPF could thus in the future concentrate on undergraduate and graduate pharmaceutical education. There followed a specific recommendation that the CCPF executive study carefully its own activities and meet with their counterpart in the Dean’s Association to achieve “the maximum utilization of the potential of both organizations.”

At the same time, the Association of Deans indicated that in February of 1967 they had forwarded resolutions to the Research Committee of the Association of Presidents of Ontario Universities, to the Minister of Health of Ontario, and to the Deputy Minister of Health of Ontario. These dealt with the nature of education that was required by pharmacists and auxiliary personnel in view of erroneous conclusions made public by the first named body. The CCPF consequently moved to endorse the position of the Association of Deans.

When the executive of the CCPF and the Association of Deans did meet in 1969, they established that no conflict of interest existed between the two organizations and that their respective constitutions accurately reflected their particular objectives. It was also agreed that a change should be sought in the CCPF constitution so that all individual members attending annual meetings would have a full voice in the activities that transpired there. However, it was also suggested that travel expenses should continue to be provided for one representative from each constituent faculty to guarantee involvement of every faculty.

The 1969 Annual Meeting was, of course, the one at which the decision was made to make some major changes in the CCPF, including changing the name to the Association of Faculties of Pharmacy of Canada. The new AFPC Constitution provided for a Council, consisting of elected representatives from each constituent faculty, which basically became the policy-making body of AFPC. Item 12 of that document clearly gave to these elected representatives alone the power to vote on all matters, except the election of honorary members and of members of the AFPC executive. Consequently the recommendations of the preceding year emanating from the joint meeting of executives of the CCPF and the Association of Deans became redundant.
There was, however, a rather major change in representation implicit in the new constitution. The representatives were now elected and might be any academic member of the constituent faculties rather than primarily the deans, which had been the case since 1944.

The Canadian Association of Deans of Pharmacy subsequently met under the auspices of the Association of Universities and Colleges of Canada along with other university administrators and with the Canadian Health Association along with other health science schools. Meetings with the MRC, the PMAC, and the Health Protection Branch were also held. Some years later, by this time as the Association of Deans of Pharmacy of Canada, the ADPC was invited to report to the then AFPC on a regular basis on matters of interest to that group.

The CCPF and Constituent Faculties Play Important Roles in the Founding and Operation of the PEBC

The first suggestion for Canada-wide uniform standards of pharmacy examinations and perhaps reciprocity of diplomas came as early as 1907 when the formation of the CPhA was first proposed. This and the first twenty-five years of the PEBC have been well told and documented in *The Pharmacy Examining Board of Canada: The First 25 Years*, published in 1990, by F. Norman Hughes, A. Whitney Matthews, and John F. Creasy. CCPF involvement first came in 1954, almost half a century after the first suggestion, when the CPhA requested that the Conference “study and report on the formation of a Dominion Examining Board which would ultimately lead to reciprocity in pharmacy in Canada.”198 The discussion about the presence on the CPhA Council and Executive of a CCPF representative by this point undoubtedly also helped. In any case, the CCPF responded positively by appointing a committee to study the matter and to work with the CPhA.199

Consequently, the CCPF Committee on the Academic Aspects of Interprovincial Licensing, chaired by W. C. MacAulay, reported at great length in 1955 on the various conditions for licensing that existed in nine Canadian provinces (excluding Newfoundland).200 The following year continued with a detailed examination of the related National Dental Examining Board of Canada and the Medical Council of Canada. There followed a poll of how the various provincial bodies might feel about an
“Interprovincial Examining Board,” which suggested that there could be reasonable acceptance of such a body for Canadian pharmacy. Further discussion saw a motion carry “that the C.Ph.A. be advised that the Conference is prepared to establish minimum standards with respect to the length and content of courses of study [standard four-year course by 1960] for the purposes of a National Board of Examiners.” Further discussion also dealt with the question of older, i.e. previous graduates, and moved for transmission of the actions taken to the CPhA.

The annual meeting of the CCPF in 1957 saw a summary of the Conference committee reports and CPhA Council and Executive activities relative to them starting with 1954. The term “National Pharmacy Examining Board of Canada” begins to appear in 1956, while by 1957 the CPhA was suggesting that the CCPF should proceed “to propose regulations and by-laws concerning examinations and other educational aspects.” And by 1958 the Conference was approving in principle the Draft Act for the establishment of the Board and clarified that the minimum academic standards for the Board be the same as the minimum standard curriculum approved by CCPF at the time the candidate entered the academic course.

By 1959, the Conference was growing impatient at how long it appeared to be taking to establish the National Board and sent a resolution to the CPhA expressing its regret at the delay. However, at the same time, it suggested that the CCPF itself get on with its work concerning the academic aspects of the Board and promised to circulate a draft of the proposed by-laws to the constituent faculties. There also appeared to be some doubt whether an Act of Parliament was the way to go, so the Conference Committee prepared a draft of “A Charter to Provide for the Establishment of a Pharmacy Examining Board of Canada.” At the same time, it expressed concern that the PEBC remain free of “regional pressures and personalities.” (The Quebec statutory body had indicated that it would not participate.) The CPhA Council subsequently approved the idea of a charter to establish the PEBC, but “stressed that [the PEBC] was not a licensing body but rather a national academic certifying mechanism.” By 1962, the CCPF was waiting for the introduction of the bill to establish the PEBC by national charter in the Canadian Senate. However, it did continue to work on regulations governing prospective PEBC candidates.
The PEBC was finally established by Royal Assent, 21 December 1963. Norman Hughes documents the twists and turns of the three-year journey through Parliament. Hughes follows with a discussion about the development of the PEBC for the period 1964-67, while Whit Matthews picks up from there. The CCPF appointees to the first Board were Wes MacAulay and Roger Larose, while a number of other CCPF members were appointed by their respective provincial statutory bodies: namely, Norman Hughes and Esmonde Cooke. Hughes in turn was chosen first president (1964-66) of the body, having served for two years previously as chairman of the CPhA Organizational Committee. Whit Matthews served as PEBC registrar-treasurer from 1967 to 1973, following his retirement as dean of the UBC Faculty of Pharmacy. He subsequently became the secretary of examinations, and Norman Hughes assumed the position of registrar-treasurer from 1973 to 1981, after his own retirement from the U of T Faculty of Pharmacy.

The CCPF proceeded in 1964 to review and approve course syllabi, while MacAulay was to present this information to the PEBC. It was also agreed that the annual review of these syllabi be made part of the terms of reference of the Conference Committee on Curriculum. The first PEBC exams were administered from 31 May to 4 June 1965. Full analysis of the results were reported to the CCPF at its annual meeting that year by its Liaison Committee to the PEBC and generated considerable discussion. The latter centred on questions concerning supplemental examinations and on the request by the PEBC for the CCPF to take on the role of accreditation and the evaluation of foreign degrees, which was firmly declined. By 1966, there was a full report by and discussion following the Conference Liaison Committee on the PEBC concerning conjoint examinations, the eligibility of candidate proxy representation, syllabi, and that year’s examinations. The CCPF also prepared a position paper concerning foreign applicants for the examinations.

Canada’s Centennial year, 1967, saw the CCPF occupied with a variety of other matters relating to the PEBC carrying on with matters initiated in previous years. The following year saw the first Conference report of its committee on conjoint examination. However, since there appeared to be little likelihood of acceptance by individual universities of examinations set outside by the PEBC, the Conference moved not to proceed in that direction and to disband the committee.
The CCPF Participates Jointly with the CSHP in the CHPRB

What was to become the Canadian Hospital Pharmacy Residency Board (CHPRB) began as a request in 1956 from Isabel Stauffer that the CCPF work with the education committee of the Canadian Society of Hospital Pharmacists (CSHP) to establish a program for hospital pharmacy internships. A joint subcommittee was subsequently struck, in October 1956, with two members each from the CCPF and the CSHP. The terms of reference were to help the CSHP establish minimum standards for hospital pharmacy internship programs acceptable to the CCPF. The subcommittee was also to serve in an advisory capacity to both organizations on matters relating to education in hospital pharmacy. The first order of business was to consider and react to “Proposed Minimum Standards for Pharmacy Internships in Hospitals” submitted by the CSHP Education Committee. The recommendations of the bipartite group were presented to both parent bodies at their annual meeting in 1957. They dealt with the qualifications of the applicants, of the training hospitals, and of the pharmacy departments, as well as the schedule for the program.

No further reports were forthcoming until 1961 while the CSHP developed an appropriate set of standards. Reception by the CCPF members may have been prepared somewhat by the 1960 CCPF Teachers’ Conference, which was devoted to hospital pharmacy. The document considered in 1961 was certainly detailed as were the recommendations to it flowing from the joint subcommittee of the CSHP and the CCPF. Those were the establishment of a Board on Approval responsible to both organizations with two members each from the CCPF and CSHP and with the chairman to be an active member of both organizations. The details followed those first sketched out in 1957. Isabel Stauffer became the chairman of the Board, while André Archambault and Glen Moir were named the CCPF representatives and Orest Buchko and Phyllis Yagi those of the CSHP. The CCPF Executive Committee approved the recommendations of the joint subcommittee with the proviso that it could not “assume any financial obligations for this work of accreditation.” The CCPF subsequently decided that future reports and correspondence from the new Board of Approval of Hospitals for Hospital Pharmacy Internships in Canada should be directed to the CCPF Executive and that actions taken would be included in the reports of the Executive Committee. (The Board was also to report to the Executive of the CSHP.)
The first meeting of the new Board, in 1963, reviewed the recommendations of the joint committee of the CSHP and the CCPF, thereby launching the accreditation of hospital pharmacy internships or what would subsequently become known as residencies. The remainder of the Board’s deliberations in 1963 were not reported until the following year. The “Statement on Accreditation of Internships in Hospital Pharmacy in Canadian Hospitals” was subsequently widely distributed to hospital organizations, pharmacy associations, schools of pharmacy, the pharmaceutical press, etc.; and five hospitals with internship programs were asked to take part in a pilot study to evaluate application forms approved by the Board. The Board was also in the process of preparing a “Guide for Pharmacy Internship Programmes in Hospitals.”

At its 1966 annual meeting, the CCPF executive in dealing with matters relating to the Board discussed whether it should re-appoint the original subcommittee of the CCPF and the CSHP because it saw the benefit of closer relations between the two organizations. It decided instead to establish interaction directly between the respective executive bodies of the two organizations. At the same time the CCPF approved a motion emanating from the CSHP to change the name of the hospital pharmacy internship to “residency.” Thus starting in 1967, reports on the matter were to emanate from the Canadian Hospital Pharmacy Residency Board (CHPRB). At the 1966 meeting the Board also recommended that a panel discussion be organized on the accreditation of hospital pharmacy residency programs in Canada for the 1967 meeting of the CSHP. As work by the Board proceeded at various levels, it subsequently recommended a joint CCPF/CSHP seminar or conference on hospital pharmacy residency programs in Canadian hospitals in 1968 or 1969. A very successful invitational seminar was ultimately held at the 1974 annual meeting in Ottawa.

A full report of the CHPRB in 1968 included proposals for a survey of hospital pharmacy residency programs in Canada. Appendix A to the report reveals an interesting list of the residents from 1958-59 to 1967-68 in seven hospitals across Canada by the end of that period. The name of one Stan Lissack appears prominently as the very first resident in Canada (1958-59) heading a list of 48 in all across the country; Lissack completed his residency at the University Hospital in Saskatoon.

As our examination of this subject comes to an end for the period under
discussion here, there was some discussion about fees to be charged each hospital and the appointment of a part-time surveyor. Isabel Stauffer finished her period as chairman of the CHPRB at the end of that year’s meeting, with Doug Stewart named as her successor. All of those who had taken an active part in the development of the Board and in the activities it generated could be justifiably proud of what had been accomplished.

The CCPF and the PMAC Make Tentative Contact

Relations between the Association of Faculties of Pharmacy of Canada (AFPC), its constituent faculties and the Pharmaceutical Manufacturers Association of Canada (PMAC) are now well established. However, they developed slowly between each of these organizations’ predecessors, the Canadian Conference of Pharmaceutical Faculties (CCPF) and the Canadian Pharmaceutical Manufacturers Association (CPMA/CPhMA).

In 1959, Roger Larose informed the CCPF that the CPMA was exploring means by which it could establish relations with outside institutions, including the health professions. Larose indicated two areas in which such relations might be possible between the CPMA and the CCPF. The first of these suggested that there could be areas of pharmaceutical research in the faculties that some of their member companies would be willing to support as such or in the form of graduate fellowships. The CCPF Committee on Graduate Study and Research was directed to work with the appropriate CPMA committee. A second proposal from CPMA was to offer awards to graduating classes for essays on the subject of industrial pharmacy. CPMA was asked to submit tentative terms of reference to the deans and directors of constituent faculties for their reactions.

No immediate results seemed to emanate from these matters, since no reference is made to them at the 1960 meeting. However, it was noted that no industry representatives had presented papers at that year’s Conference of Pharmaceutical Research. It was suggested that perhaps titles and abstracts should be sought and circulated well in advance of future conferences to attract company representatives.

A few years later, in 1963, there was a single resolution that the CCPF “commend the CPMA on the establishment of a fund for the clinical evaluation of drugs and urge upon them the advisability of making this fund, or other
funds, available to the schools of Pharmacy for research purposes.” The CPMA responded through André Archambault (CCPF chairman, 1963-64) that the CPMA required a better picture of pharmaceutical education and research in the constituent faculties, which could perhaps be provided to the industry in the form of a brochure. The CPMA also invited a speaker to address their meeting the following year, which Archambault agreed to do. It was suggested that constituent faculties sponsor tours of their facilities for CPMA representatives. Later, it was hoped that perhaps the CPMA could sponsor a Symposium on Pharmaceutical Research.

The 1965 meeting brought the suggestion that rather than a brochure that W. W. Wigle, the permanent president of the PMAC, be invited to visit each of the constituent faculties to get a first hand idea of the facilities and staff. There is no indication that the invitation was ever extended or accepted, nor that any further steps were taken to develop a closer relationship between the CCPF and the PMAC by 1969.

The CCPF and the AACP Grow Closer

Individual members of the CCPF were certainly well aware of the American Association of Colleges of Pharmacy (AACP) and its activities. Most of them had earned their graduate degrees in the USA and had attended AACP meetings, particularly the annual AACP Teachers’ Seminar, with some travel support from the Canadian Foundation for the Advancement of Pharmacy (CFAP). There had also always been comparisons by Canadian schools and CCPF committees with American schools concerning curricula, etc. For instance, we recall that when in 1951 the CCPF was moving to a minimum four-year program, members were reminded that American schools were already offering five- and six-year programs.

As early as the founding meeting of August 1944, it was “suggested that an attempt could be made to link up with the American colleges.” A few weeks later, Whit Matthews and Esli Woods (then CCPF chairman) “extended greetings of the CCPF to the AACP at their annual meeting in Cleveland in September 1944. The AACP were quite interested in the organization of the CCPF and extended their greetings in return.” Subsequently, AACP President G. L. Jenkins invited the CCPF to take part in a proposed Pan-American Conference on Pharmaceutical Education scheduled for 1946 and the CCPF chose Whit Matthews as their representative.
Occasionally, American academics also attended CCPF meetings. During the period 1951-1969 the relationships between the AACP and the CCPF increased and became more formal, in terms of membership arrangements between the two bodies and official representation at annual meetings.

Official exchanges between the AACP and the CCPF in 1952 concerned a clarification of the academic background of Canadian pharmacy graduates wanting to become licensed in the USA. The CCPF secretary was instructed to inform the AACP that Canadian graduates of four-year programs following five years of secondary school education should be considered to be on a par with American graduates.244

Dean Christensen of the Ohio State School of Pharmacy was welcomed publicly as a visitor to the Halifax meeting in 1954. He mentioned his familiarity with Canadian students attending his institution, his “appreciation . . . of the growth and development” of CCPF faculties, and the fact that his father-in-law was a Canadian from the Maritimes.245 It was typical that such visitors would comment upon various matters at such meetings and that their comments would be reported in the official CCPF Proceedings. That same meeting recorded an offer by the American Council on Pharmaceutical Education (ACPE) to distribute copies of their vocational booklet in Canada. Also, for the first time, the CCPF executive acknowledged not only the valuable information they had gained from American pharmacy organizations and publications, but suggested the next logical move. The executive indicated that “all steps should be taken for the interchange of information and cooperation between our respective countries in Pharmaceutical education.”246

Matters moved somewhat more quickly than one might anticipate, since at the 1955 meeting a letter was read from the AACP “respecting a suggestion from the Executive of the AACP that affiliate membership be extended to the CCPF and that the CCPF be consulted regarding their sentiments on the matter.”247 When this was discussed fully later in the meeting, the response was extremely positive to work toward a closer relationship between the sister organizations. Accordingly, a CCPF committee was appointed—consisting of A. W. Matthews, F. N. Hughes, and R. Larose, with the CCPF chairman and secretary as ex-officio members—to meet with their AACP counterparts, headed by D. R. Murray, then Dean of Pharmacy at the University of Buffalo, but Canadian born and educated, and a former active CCPF member.248
In placing the matter on the agenda for discussion, the CCPF Executive also acknowledged the “very favourable report” which the Toronto Faculty had received from the accreditation team of the American Council on Pharmaceutical Education (ACPE) it had invited to evaluate its programs in 1955. When the invitation from AACP was discussed, the matter of accreditation of Canadian schools was raised and it was suggested that the CCPF deans meet with ACPE at a forthcoming meeting to discuss the matter. It is also interesting to note that another matter that was raised by G. R. Paterson during the discussion of opening regular relations between the CCPF and the AACP was that the CCPF “consider holding one of the [AACP] Teachers’ Seminars in this country.” The latter initiative would finally come to fruition fully a decade later.

Arrangements for reciprocal membership between the CCPF and the AACP came by 1956. The AACP offered affiliate membership to all Canadian schools that met the minimum standards of the CCPF; allowed reciprocal membership of their own (i.e. AACP) member colleges in the CCPF; and recommended reciprocal representation at meetings and seminars. Although all the documents and correspondence transmitted by the AACP are printed in the CCPF Proceedings for 1956, the ensuing discussion by the Conference meeting is not published. However, the published report did detail recommendations and suggestions pertaining to CCPF and AACP participation agreed to by both sides in their original discussions. Also, a motion carried “that the CCPF approve such recommendations of the joint committee report of the AACP regarding affiliation and that the [CCPF] Executive be empowered to make such changes in the by-laws as are necessary for such affiliation, and that the appropriate groups be informed of such action.”

The 1956 CCPF meeting also heard a report of the meeting of the deans with the ACPE concerning accreditation of Canadian schools. The decision taken was to leave it up to individual deans how they wished to proceed on the matter. The CCPF amended its constitution in 1957 to create a class of affiliate membership for American colleges of pharmacy which were members of the AACP.

In 1958, CCPF Chairman George Walker addressed the similarity of problems, such as enrolment and recruitment, in the USA and Canada and suggested that the CCPF should proceed with the original suggestion coming
out of the arrangements for reciprocal membership that CCPF committee chairs also follow through on the original plan for corresponding CCPF and AACP committees to be in close touch concerning their activities. At the same meeting, the Committee on Resolutions acknowledged that the Columbia University College of Pharmacy was the first American affiliate member of the CCPF.

By 1960, B. E. Riedel began to explore seriously with the AACP the idea first raised in 1955 that the CCPF offer to host the AACP Teachers’ Seminar. Riedel had been the successful chair of the CCPF’s own long-standing teachers’ conference for some time. On the basis of information received, the Conference decided to go after the 1965 Seminar on the subject of Pharmaceutical Chemistry—ironically the area of specialty of the CCPF member who had first proposed the idea in 1955.

The 1961 annual meeting represented something of a milestone in CCPF/AACP relations. That was the first time that a current AACP president, Lloyd M. Parks of Ohio State University, came to represent the organization. Dr. Parks subsequently recommended to his own organization that on the basis of his experience, the AACP should be represented officially at all future CCPF meetings. His successor in the role, J. E. Orr of the University of Washington College of Pharmacy, in addition to traditional greetings also made a major contribution as the keynote speaker, on the subject of “The Future Role of the Pharmacist,” at the 1962 CCPF Teachers’ Conference devoted to “The Education of the Pharmacist as a Consultant.”

By 1963 the plans for a joint AACP/CCPF Teachers’ Seminar were finally beginning to take shape. Then CCPF Chairman Ross Baxter had discussed options with the AACP executive secretary and president. The AACP had accepted the invitation to hold the meeting in Toronto, 22-29 June 1965. The Conference authorized the CCPF Executive to work out the details. To help meet its share of the costs, the CCPF was fortunate to receive a special grant from the CFAP. The CCPF also appointed two members, Gordon Duff and Pat Paterson, to the AACP Seminar Committee. A suggestion that the regular 1965 CCPF Annual Meeting scheduled for Calgary be held in Toronto immediately before the joint Teachers’ Seminar failed to gain acceptance. However, a further recommendation that the CCPF forego having its own usual Teacher’s Conference at Calgary was accepted. When it was finally held, the joint Teachers’ Seminar of
1965 turned out to be an unqualified success. Pat Paterson had been one of the co-chairmen. The registration of 160 individuals, representing 60 American and 8 Canadian universities, was announced by the AACP to be the best attendance ever for a seminar in a single discipline area. In private correspondence afterward, Charles Bliven, Executive Secretary AACP, commented that the CCPF had “set a high standard for subsequent joint seminars.”264

Although those comments were construed as meaning there would be more joint seminars in Canada and the suggestion was made that the CCPF try for another similar effort within three to five years, that turned out to be both the first and last of its kind. The CCPF Executive did indeed investigate the possibility of such a meeting, preferably in 1969 and preferably at the University of Alberta, but the AACP indicated that Edmonton was too far. (The AACP did hold one of its annual meetings in Toronto in 1987, but it was not a joint effort.) However, the experience of the joint seminar did seem to bring a new era of closer relations between the two organizations, so that in 1966 Dr. Bliven issued an invitation for CCPF representation annually at the AACP meeting starting with the Dallas meeting that year. Ironically again, the first CCPF chairman to carry those greetings to AACP that year was none other than the same Pat Paterson who co-chaired the successful joint teachers’ seminar in 1965 and who first suggested the idea in 1955.265

Before we leave the subject of the relations of the CCPF and the AACP, may we close with one other manifestation of the warmth that did exist on a more personal level. For many years, George L. Webster, former dean of the University of Illinois School of Pharmacy and Professor W. G. Smith of the University of Southern California regularly attended CCPF meetings with their wives, because they found them so congenial and reminded them of a day when the AACP had also seemed to be of a more manageable size. Dr. Webster was also the only non-Canadian ever named an honorary member of the CCPF (in 1969).266

**Reaching Out to Contribute beyond Traditional Parameters**

**Special CCPF Task Forces Benefit Canadian Pharmaceutical Education**
Twice during the period 1951-69, the CCPF was called upon to appoint special task forces to advance the cause of pharmaceutical education in Canada. The first was in 1958, when the CCPF appointed an advisory group, consisting of F. N. Hughes (University of Toronto), chairman, A. W. Matthews (University of British Columbia), and R. Larose (University of Montreal), to respond to a request from the president of Dalhousie University to advise him on the future course of pharmaceutical education at the University and consequently in the Maritime provinces. Dean J. Esmonde Cooke of the Maritime College of Pharmacy suggested the basic requirements would include an adequate physical plant and teaching staff to offer the B.Sc. degree. Dean Cooke was obviously an important figure for the inauguration of this study, since he realized that it was essential for his school to meet the minimum requirements of other faculties in Canada according to guidelines set by the CCPF. The CFAP was to provide financial support for the survey.

Norman Hughes and Roger Larose subsequently met with President Kerr, then later with Whit Matthews to discuss their proposed report. The 10,000 word document was submitted to President Kerr and to the Maritime College, but was considered to be confidential and thus not released to the CCPF constituent faculties. Action came relatively quickly, because by 1961, both CCPF Chairman Finlay Morrison and the Executive Committee were lauding the creation of the College of Pharmacy at Dalhousie University and the appointment of J. Gordon Duff as its first director. They praised the role of Esmonde Cooke in the matter and offered support to President Kerr and Director Duff. Positive results in the pharmacy program at Dalhousie were also relatively quick in coming, for by 1965 Gordon Duff was able to announce that beginning in 1966 Dalhousie would have a four-year pharmacy degree program following senior matriculation.

The other task force, consisting of André Archambault (University of Montreal), Bernie Riedel (University of Alberta), and Norman Hughes (University of Toronto), was appointed in 1965 to study pharmaceutical education in Newfoundland at the request of the Newfoundland Pharmaceutical Association (NPhA) and with the financial support of the CFAP. The “Report of a Special Committee to Study Pharmaceutical Education in the Province of Newfoundland,” completed in March 1966, was presented to the NPhA in late March and distributed to the CCPF executive, as well as to each of the constituent faculties. The Conference itself pledged
“its continuing support to the [NPhA] in its efforts to upgrade pharmaceutical education in Newfoundland.” For a variety of reasons, mostly political, positive action in Newfoundland was not to flow during the period under discussion here, 1951-1969. Indeed a second study was undertaken by the CCPF’s successor, the AFPC, in 1975 and Pharmacy did not become a regular part of Memorial University until 1986 and thus also a constituent faculty of the AFPC. (See also the chapter “The Maritime Connection” by J. Esmonde Cooke for another perspective on this subject.)

The CCPF Plays a Major Role in the Commission on Pharmaceutical Services

The Commission on Pharmaceutical Services—published as Pharmacy in a New Age in 1971 by the Canadian Pharmaceutical Association—originated in the CCPF’s Committee on Future Planning. The study proved to be the most comprehensive study of every aspect of Canadian pharmacy ever undertaken.

The CCPF Committee on Future Planning was first suggested in 1963 by Ross Baxter in his Chairman’s address. As the conclusion of a carefully crafted address, he clearly thought that the only logical way to determine what the nature of the best pharmaceutical education should be in the future was to try to determine what pharmacy practice itself might be in the future. To do that, he reasoned that the CCPF should consult as widely as possible with others in the academic world, the profession, and allied professions. Indeed, the Committee on Resolutions that year recommended the appointment of a Committee on Future Planning, although that did not happen until 1964, when Baxter’s successor, André Archambault, repeated the suggestion. Appropriately, Ross Baxter chaired that Committee, which first reported in 1965. Because of the contributions he felt both had made, Baxter listed Archambault as a consultant, as well as Whit Matthews, who filled in while Finlay Morrison was on a year’s leave. In that first report of 1965, Baxter and his committee reviewed some existing thought on the subject then suggested some terms of reference for the Committee. These included to review the future role of the CCPF itself, as well as that of pharmacy in society, the place of science in pharmaceutical education, the role of pharmacists as consultants, the place of technicians, and the maintenance of professional competence. The Committee also asked for what in today’s terms would be a small grant of up to $800 to carry out an appropriate study. Given CCPF approval, Baxter suggested
that the Committee by the following year could present a specific plan of action. Discussion of the Report consumed almost as much print space as the Report itself, but with some minor changes, both the terms of reference and the grant were approved.\textsuperscript{274}

The lengthy Report of 1966 did show wide consultation by the Committee with various pharmacy executives, as well as educators and sociologists. Key to the projected study was the recommendation that the CCPF approach the Canadian Pharmaceutical Association to appoint a co-ordinating committee as soon as possible to undertake as broad a study as conceivable and practicable of Canadian pharmacy past, present, and especially future.\textsuperscript{275}

Both the CCPF and the CPhA did accept the importance of the major step recommended by the Committee on Future Planning. Accordingly, the CPhA appointed the Commission on Pharmaceutical Services as the body that would oversee the study. As one of the designated special speakers for the CCPF’s commemoration of Canada’s Centennial in 1967, Ross Baxter stated that the “establishment of the Commission on Pharmaceutical Services has undoubtedly the potential of being the most positive force in the future of the profession. It offers the possibility of making a realistic start on defining our future objectives and of establishing a more meaningful interplay between the various areas within the profession, between the profession and other health professions, and between the profession and government. The significance of the work of the Commission to Pharmacy is indeed great and therefore deserves the total support of the profession.”\textsuperscript{276}

In the Report of the Committee on Future Planning for 1967, Baxter provided details about how the Commission was structured and how it would function.\textsuperscript{277} This is not the place to cover this in detail, except to note that the chairman of the Commission was J. B. MacDonald, former President of the University of British Columbia. Sociology was represented by Bernard Blishen, head of the Department of Sociology and Dean of Graduate Studies at Trent University. Pharmacy academics included Ross Baxter, Roger Larose, Whit Matthews, and Jack Summers. In addition, the body of the Commission also included a member of the CPhA Council and two representatives of Canadian provincial pharmacy licensing bodies. A number of others were also appointed to actually carry out the work of the Commission, supervised by Matthews as executive officer. Among the pharmacy academics appointed as staff were Harold J. Segal and John A.
Bachynsky (then a research officer in the Research and Statistics Directorate of the Department of National Health and Welfare). Finlay Morrison, on behalf of the CCPF Committee on Future Planning undertook to coordinate a brief for submission to the Commission representing input from all the constituent faculties—although not without some difficulty.

When the Report of the Commission on Pharmaceutical Services did appear in 1971 as *Pharmacy in a New Age*, it represented a remarkable achievement by a large number of individuals and organizations. The Canadian Pharmaceutical Association deserves due credit for undertaking the mammoth task, including seeking financial support, and publication of the end result. The Canadian Conference of Pharmaceutical Faculties, however, deserves equal commendation for having recognized the need and what was required.

**The CCPF Makes Its Voice Heard by the Royal Commission on Health Services**

The Royal Commission on Health Services or the Hall Commission, as it often became known for brevity’s sake, would clearly become the basis for momentous legislation affecting not only the health professions but all Canadians. This was after all the study that would establish a system of national health care for Canada. As a consequence, when the call went out for the submission of briefs in 1961, with a deadline of intent to be filed by mid September for presentations the following Spring, many bodies indicated their intentions to be heard. Among them, logically, were not only the Canadian Pharmaceutical Association but also the Canadian Conference of Pharmaceutical Faculties.

Accordingly, the CCPF at the 1961 meeting appointed a “Committee on Health Matters,” with Merv Huston as chairman and consisting of André Archambault, Norman Hughes, George Jeffrey, Whit Matthews, and Randy Murray. In view of the urgency and seriousness of the matter, the Committee was urged to “have an organizational meeting” before the end of the 1961 sessions.

In his address at the 1962 annual meeting, Randy Murray described the Conference brief to the Hall Commission as “one of the highlights of
Conference activities.” Murray was justly proud of the end product of the CCPF’s committee and of its positive effects for pharmacy as well as public health and welfare. Among immediate results were two surveys called for by the Commission, one by Finlay Morrison on “Recruitment and Education Utilization” and another by Tom Ross, CPhA Associate Secretary, on pharmacy manpower. Murray also pointed out that the process made the CCPF more aware of the “importance of [maintaining] good public relations” as well as the importance of “academicians keep[ing] closely in touch with what is going on in all areas of pharmacy . . . [and] keep[ing]. . . courses up to date.” He saw that as including academics expressing their opinions about various things pertinent to pharmacy to their respective licensing bodies, as well as stressing to their students “the importance of pharmacists taking part in public health matters.”

For their part, the CCPF Executive also expressed their commendation to their Special Committee on Health Matters, in particular to its chairman, Merv Huston, for their superlative submission. That went beyond mere words to the recommendation, subsequently acted upon, that the CCPF reimburse both the University of Alberta and the CPhA for expenses they incurred relative to the Conference brief to the Commission. At the same time, the CCPF wished to “assure the Canadian Pharmaceutical Association of its readiness and willingness to play its full part in presenting Pharmacy to the public in the best (and truest) terms possible.”

The Commission in 1962 requested a supplementary submission from the University of Toronto Faculty of Pharmacy, the full text of which appeared in the February 1963 issue of the Canadian Pharmaceutical Journal. That submission suggested that pharmacists concentrate on providing professional services, eliminate non-health-related items and services, and restrict pharmacies to establishments unconnected with other commercial operations, all of this to be mandated by law. The submission appears to have been a little ahead of its time in view of its generally negative reception by many pharmacists at the time.

When some years later in 1965, the Commission issued the second volume of its report, CCPF Chairman Gordon Duff indicated that Whit Matthews had carefully studied and summarized the recommendations flowing from the Commission that seemed of particular interest to pharmacy and to the faculties of pharmacy. Furthermore, that the deans and directors had met
in April to study those recommendations of pertinence to them. It was also the nature of some of the matters discussed at their meeting that suggested the value of organizing a Canadian association of pharmacy deans. The relationship of the ADPC to the CCPF is discussed elsewhere in this chapter.

### CCPF and Civil Defence: A Reflection of the Times

Civil Defence occupied a fairly visible presence in the affairs of the CCPF and its constituent faculties during most of the period under discussion here. It began with a brief discussion at the 1951 Conference meeting following a presentation by W. C. MacAulay that outlined the responsibilities for involvement in civil defence activities by individuals as responsible citizens, as well as the need for the constituent faculties to disseminate appropriate information to their students and to practising pharmacists. This after all was the period of the “Cold War,” when civil defence became a major preoccupation of Canadians and Americans preparing to meet potentially aggressive acts by the USSR. Like MacAulay, many teaching and administrative staff in CCPF constituent faculties at the time had returned relatively recently from active service in World War II, might be serving in reserve units, and remained acutely conscious of their patriotic duties.

MacAulay himself represented the CCPF at various federal civil defence programs, such as the Working Party on Essential Medical Supplies for Civil Defence; and J. Earle Matthews, on staff at Civil Defence Headquarters in Ottawa, made regular appearances at CCPF and subsequently AFPC meetings for some years. Furthermore, the Conference appointed the faculty members of the University of Saskatchewan College of Pharmacy, which MacAulay served as dean, as a “Committee to study the suggested courses in Civil Defence.” That resulted in a presentation to the CCPF on the program at Saskatchewan, followed by an outline of what was recommended, lecture by lecture, for other constituent faculties, climaxing with MacAulay’s expressed firm conviction that all faculties had “a responsibility in . . . Civil Defence.” That prompted the Conference to undertake beginning “a course of indoctrination on the role of the pharmacist in Civil Defence in the eight faculties of pharmacy in Canada.”

A new CCPF Committee on Civil Defence, struck in 1956, with a representative from each constituent faculty, surveyed and reported for
a few years on various activities across the country, including those for pharmacists, as well as a manual specifically on the “Role of the Pharmacist in Civil Defence,” issued by Civil Defence Headquarters. By 1960, the Committee was able to report that most constituent faculties provided their students with some information about civil defence, but they were also reporting some apathy by the time those students were in practice. Shortly thereafter for this and other reasons relating to drastic changes relative to civil defence announced by the federal government, CCPF decided to disband its Committee. However, it had its then chairman, George Walker, continue to represent it on the comparable CPhA committee and otherwise, while those matters relevant to teaching in constituent faculties were referred to the Conference curriculum committee.

It is perhaps fair to say that as commendable as pharmacy’s, including the CCPF’s contributions were to the civil defence movement in Canada, post World War II, interest by both the government and citizens did wane after two decades in both Canada and the USA. The “thaw” in the Cold War was not to come for some time, but the recognition that things were perhaps in a steady state undoubtedly affected perceptions of the relevance of activities on all sides. Nevertheless, the CCPF’s involvement in civil defence remains a clear reflection of the times.

The CCPF’s Nod to Canada’s Centennial

The Canadian Conference of Pharmaceutical Faculties did take part in a modest way in the celebration of Canada’s centennial in 1967. Jack Halliday in his chairman’s address that year introduced the subject. Pat Paterson (CCPF chairman, 1965-66) had been particularly involved over several years in the challenging position as chairman of the Centennial Committee of the Canadian Pharmaceutical Association and in organizing a number of major functions for the CPhA’s annual meeting that year in Toronto. Paterson himself submitted a short history of CCPF for inclusion in a CPhA publication—what became A Brief History of Pharmacy in Canada, published in 1969. The Brief History consisted of a series of articles about the history of the CPhA and other national organizations, as well as about the development of pharmacy in each of the provinces, all of which had been published originally in the Canadian Pharmaceutical Journal during centennial year and edited by Arnold Raison.
Some of the other projects proposed by the CPhA Centennial Committee which came to fruition affected CCPF as well as the constituent faculties. In some cases the effect was for the year alone, in some other cases the projects continue to the present time or at least provide benefits to the present time. Thus a project to photocopy all of the *CCPF Proceedings* and donate them to the CPhA was actually carried out by the University of Alberta faculty.\(^{297}\) Arrangements were also made to make a microfilm of all the early issues of the *Canadian Pharmaceutical Journal* for the first 75 years of its existence, i.e. 1868 to 1942.

Among the benefits for students was a provision made that the prestigious Aubrey A. Brown Memorial Award, sponsored by the Canadian Foundation for the Advancement of Pharmacy, would for 1967 alone be awarded for a winning undergraduate thesis on some phase of the history of Canadian Pharmacy. Perhaps the most important of the centennial projects that continues to benefit one student in each faculty each year was the establishment of the Centennial Pharmacy Scholarships. They were and continue to be awarded to those students of academic ability in the penultimate year who have made outstanding contributions to the undergraduate life of their faculties. The award includes travel to Toronto, Ottawa, and Montreal, as well as to the annual conference of the Canadian Pharmaceutical Association, wherever that may be held. Funds were originally provided for the Centennial Scholarships through the generosity of L. G. Elliott of the Montreal pharmaceutical manufacturer Elliott Marion Ltd. (Sponsorship has varied in recent years).\(^{298}\)

As far as the CCPF was concerned, Whit Matthews was reported to be working on a history of the CCPF.\(^{299}\) It is not known if he ever finished the project, since it was apparently never published. A search has been initiated in his personal papers. It is a particular shame since Matthews played such an active role in the organization from the time of its founding and his perspective on the subject would be enlightening. The major tributes to Canada’s centennial at the CCPF annual meeting, however, were two special papers prepared for the occasion by two other individuals who played key roles in the organization. Ross Baxter addressed the subject of “Where the Profession is Going,” while André Archambault spoke about “Where Pharmaceutical Education is Going.”\(^{300}\) Both were then members of CCPF’s Committee on Future Planning, Baxter as chairman. Aside from the major role that committee played for the CCPF, it also served as the stimulation for
the establishment of the notable Commission on Pharmaceutical Services, discussed in more detail elsewhere in this chapter.

**CCPF Tackles the Difficult Issue of Stable Funding**

Because of the special relationship that the Canadian Conference of Pharmaceutical Faculties had with the Canadian Pharmaceutical Association and the Canadian Foundation for the Advancement of Pharmacy, the CCPF long depended upon both organizations for financial support for a variety of its programs and activities. At the CCPF founding meeting in 1944, it was questioned whether the Conference could be modeled after the AACP, financed by constituent faculties. However, it was recognized that because of the great difference in size, the Canadian organization would require extra assistance from a body like the CPhA. Indeed, it wasn’t until 1958 that the Conference voted a modest $50 annual fee for its constituent faculties, and there were as yet no individual membership fees. However, already by the following year, after some prior discussion, the CCPF Executive Committee recommended “that the executive be empowered to study the financial structure of the Conference.”

The report resulting from that directive emerged in 1960. A summary of the Conference’s sources of income for the period 1947 to 1959 showed that only 1.43% came from constituent faculty membership fees (granted begun only in 1958-59), a further 2.01% from the same source to finance the CCPF Bulletin, and 1.06% from miscellaneous sources, such as bank interest. In sharp contrast, the CPhA provided 45.98% to support attendance by faculty members at meetings, 6.33% from sales of the Canadian Formulary, and 6.83% for the CCPF contributions to the Canadian Pharmaceutical Journal in the “Conference Section.” Furthermore, the CFAP contributed 31.21% to support attendance at meetings and 5.16% to finance the CCPF Bulletin, quite apart from their support of students and research in the constituent faculties and its subsequent sponsorship of the various CCPF special projects. The by now annual conferences on pharmaceutical research were sponsored jointly by the CCPF and the CFAP, but the financial support came from the Foundation. The Foundation also provided resources for student recruitment and vocational activities, as well as continuing education. Thus the CPhA and CFAP clearly provided the CCPF with virtually all its income, without which it could not have functioned. That is clear also from analyzing the CCPF expenses for the same time period. Thus fully
76.43% was needed for travel funds for voting delegates, 10.49% for non-voting attendees, 9.47% to publish the Bulletin, and 2.89% to publish the Proceedings. What does not appear in the official figures is the sums that individual faculties absorbed from their own budgets to process the Bulletin and the Proceedings. University travel budgets also provided some travel support for individual constituent faculty members.

In the analysis of these facts presented in the report, there were various scenarios for cutting expenses and predictions concerning how they might increase. Since annual meeting costs were obviously a major part of the expenditures, it was suggested that perhaps it would be better if CCPF met separately from CPhA because it could then finish its business in a few days rather than over a week when spread through the CPhA meeting. However, considering how much funding the CPhA provided, it was considered prudent to check with the CPhA to see how it might feel about such a course of action. The Executive was fully aware of how crucial both CPhA and CFAP support had been for the life of the CCPF and also for the development of their undergraduate, graduate and research programs as far as CFAP assistance was concerned. The executive also recognized that constituent faculty fees were only nominal with respect to the overall budget. Increased revenues were seen to be needed to support the attendance of both voting delegates and non-voting faculty members. Some suggestions for more funding included increasing the fees for constituent faculties, specifying approved expenses for delegates, applying for increased CPhA and CFAP funding, and checking into travel funds available from the universities and other sources.

Still in 1961, in his chairman’s address, Finlay Morrison spoke about CCPF’s “ever-present problem of finances” and recommended appointing “a committee to study the financial picture in detail.” And the Report of the Executive Committee that same year mentioned discussions held with John Turnbull to try to better forecast expenses and to devise simple guidelines for allowable expenses for delegates and executive. The Report also recognized the increased travel support from various universities. Finally, the Committee on Resolutions did recommend that the incoming executive appoint a committee “to study in detail the financial structure of the Conference.”

A lengthy report emerged in 1962 from the Committee Studying the
Financial Structure of the CCPF, chaired by Ross Baxter. The report began with a brief history of the nature and amount of CPhA and CFAP financial support and a statement of the CCPF’s current expendable income. That now included affiliate membership fees of $25 assessed to AACP member colleges, although their number always remained small. There followed a breakdown of principal expenditures with average figures for 1958-62. As before the greatest annual expenses were for voting delegates and non-voting academics at the annual meetings. There followed statements on how expenditures might be trimmed and how income might be increased, then a list of recommendations for achieving these. These included reviewing ongoing support of voting delegates and non-voting attendees, recommending to the CPhA on the use of Canadian Formulary funds, and circulating a proposed budget to the deans and directors of constituent faculties early in the year. More important perhaps were the recommendations for the present Committee to continue its work for a time and to “consider what measures [were] most desirable to strengthen the financial structure of the conference in light of its future objectives and responsibilities.”

Perhaps the most decisive action taken following discussion of the recommendations was to explore doubling the constituent membership fees to $100 and that the Committee continue to study the CCPF’s financial structure. The Committee disbanded in 1963 after recommending that it seek permission from the CPhA to use a specified amount if needed in any year of the accumulated royalties of sales of the CF, with larger amounts to require approval by the Annual Meeting. The meeting also approved raising the constituent faculty fees to $100 beginning with the 1963-64 fiscal year.

Although the CCPF seemed to feel that these actions would meet its needs for some time, already in 1965, the Executive Committee recommended exploring the willingness of the universities to support an increase in the CCPF fees for their respective constituent faculties. After considerable discussion, it was agreed unanimously that full supporting information should be provided to the deans and directors with a view to increasing the constituent faculty fees by an additional $100.

Furthermore, the Committee on Resolutions recommended “that the whole financial structure of the CCPF be investigated with a view of adjusting our income to take care of increasing expenditures.”

In 1966, the Executive Committee devoted considerable space to the financial issues. It optimistically suggested that with judicious management
it might be possible to view the new recommended constituent faculty fee of $200 as temporary rather than permanent. It also relayed the strong recommendation that funds from research grants be used to support travel to the annual meeting when individuals were presenting research papers.\textsuperscript{313} After lengthy discussion of the Report, a unanimous vote supported the increase of the fee to $200 and directed “the Executive to study other possible sources of revenue and its utilization.”\textsuperscript{314} A question of whether individual membership fees had been considered was essentially dismissed as being incapable of enforcement and of probably not producing sufficient additional funds. Another suggestion that increased funding might be requested of the CPhA and perhaps requested of provincial licensing bodies met the reasoned response that CCPF “must not only seek methods of raising more money but . . . constantly review how [it] should be spending this money” and that individual CCPF members “should consider membership in the CPhA.”\textsuperscript{315} Exploration of the use of National Research Council grants to support travel to CCPF meetings was mentioned specifically.

Yet another lengthy discussion concerning funding ensued at the 1967 annual meeting. Most ideas put forward repeated those already discussed and in many cases rejected. For example, even though an approach to both the CPhA and the CFAP indicated that neither thought the time was right to increase assistance to the CCPF, that idea was again broached. Finally a model budget was proposed for 1967-68 that eliminated travel support to the CCPF annual meetings for non-delegates. A suggestion that universities pay the expenses for the delegates from their respective constituent faculties was countered by the deans that it would be easier to increase the constituent member fees. The latter were proposed as $560 realistically, but the opinion as to the possibility of achieving that varied with the deans. Whatever evolved, it was stressed that one delegate be present from each faculty. Finally, after the implication in polite terms that the subject had pretty much been exhausted without any clear resolution, a motion was made and carried that the CCPF refer to the ADPC “for immediate consideration the problem of determining the best ways and means of raising this budget for Conference purposes from the constituent members.”\textsuperscript{316} Perhaps after all this was a more creative and practical solution than simply referring it to the incoming executive or to yet another committee to resolve.

The last reference to fiscal planning for the period under discussion here, 1951-1969, came in 1969 recommendations flowing from the Committee on Future Planning to the Executive Committee. It stated flatly that “methods of
approaching the question of financial support were not studied,” even though earlier in the same context it reported that “lack of finances prevented any action in obtaining the services of a full-time Secretary-Treasurer.”

Clearly, by the time the Canadian Conference of Pharmaceutical Faculties became the Association of Faculties of Pharmacy of Canada in 1969, the organization was beginning to realize that it needed to take more responsibility for its fiscal matters. That included exploring various means of finding additional funding, but also of having the members of the organization — both institutional and individual — take greater responsibility for that funding. The author believes that particular change in philosophy represented a clear sign, among many others, that the organization itself was reaching maturity.

It has obviously been necessary to be somewhat selective in our presentation of the principal activities and accomplishments of the Canadian Conference of Pharmaceutical Faculties in the period 1951-1969. We hope that we have at least hit most of the highlights.

We clearly saw many signs of maturation and coming of age for both the Conference and its constituent faculties. The achievement of a minimum four-year baccalaureate at the university level with a drastic reduction in the place and length of practical training were obviously major steps forward for the CCPF and its constituent faculties. The remarkable growth of graduate studies and pharmaceutical research, particularly recognition by funding sources such as NRC and MRC, were equally important barometers of the growth of pharmaceutical education in Canada resulting from the efforts of the Conference. The growing relations of the CCPF with a number of other national organizations of pharmacy—such as the CPhA, CSHP, PEBC, and the AACP—also revealed growing maturity, as did CCPF’s important role in the Royal Commission on Health Services and the Commission on Pharmaceutical Services. CCPF could thus face its twenty-fifth anniversary in 1969 with pride of accomplishment as it approached the rest of its first half century as the AFPC.
References


43 Ibid., 76.


52 Ibid., 62g-62h.

53 Ibid., 62h.


55 Ibid., 55.

56 Ibid.


59 Ibid., 55.

Ibid., 52.


Ibid., 39.


Ibid. For the full report, with discussion, see *ibid.*, 43-45.


100 J. G. Jeffrey, “Report of the Committee on Graduate Study and
111 Huston, *ibid.*, 66.
112 *Ibid.*, 71, as item d) of Ontario College of Pharmacy submission.


*ibid.*, 65.


*ibid.*, 122-123.

J. A. Mockle, “Report of the Committee on Resolutions,” *ibid.*, 155, item 35.

R. M. Baxter, “Report of the Committee on Resolutions,” *ibid.*, 172, item 7 (a) and 173, item 12.


Report of the Executive Committee,” *ibid.*, 24; and “Reports of Subcommittees on C. F. Revision,” *ibid.*, 74.


Ibid.


198 “Dominion Examining Board,” *ibid.*, 56.


201 “Committee on Interprovincial Licensing,” *ibid.* 61.
Ibid., 85 and 101.


“PEBC as an Agenda Item for Discussion,” Proc. CCPF (1964):44.


Liaison Committee to the PEBC,” *ibid.*, 166-167.
227 “The Board of Approval of Hospitals for Hospital Pharmacy Internships in Canada,” *ibid.*, 43-61.
228 “Report of the Board of Approval of Hospitals for Hospital Pharmacy Internships in Canada to the Executive of the Canadian Society of Hospital Pharmacists and the Executive of the CCPF,” *Proc. CCPF* (1964):46-52; and “Board of Approval of Hospitals for Hospital Pharmacy Internships in Canada,” *ibid.*, 54.


Introductions following presentation of the “Chairman’s Address,” *Proc. CCPF* (1954):11; and “Report of the Committee on Resolutions,” *ibid.*, 61, item 1(n).


“Proposed Affiliation with the AACP,” *ibid.*, 115-116; and “Appointment of Committees,” *ibid.*, 124 (“Committee to Work with the AACP”).


“Proposed Affiliation with the AACP,” *ibid.*, 116 (“Accreditation”).


“Report of the Special Committee to Work with the AACP,” *ibid.*, 78; report as a whole, 76-80.


“Amendment to the Constitution” *Proc. CCPF* (1957):20 (“Motion II”) and 23 (Sec. 24).


“Report of the Committee on Resolutions,” *ibid.*, 125, item 12.


“Business Meeting,” *Proc. CCPF* (1962):10, as part of AACP
greetings brought by J. E. Orr in 1962.


277 For details of how the Commission on Pharmaceutical Services
was structured and how it would function, see R. M. Baxter, “Report of the Future Planning Committee,” *ibid.*, 107-108 and 113-120.


280 J. R. Murray, “Chairman’s Address,” *Proc. CCPF (1962):*12, as part of comments 12-14.


287 J. G. Duff, “Chairman’s Address,” *Proc. CCPF (1965):*17.

288 W. C. MacAulay, “Role of Pharmacy in Civil Defence,” *Proc. CCPF (1951):*60; full report and discussion, 59-60.


293 “Civil Defence Session,” *Proc. CCPF (1956):*19; “Civil Defence,”


314 “Discussion on the Report of the Executive of the CCPF,” *ibid.*, 65, item, 9; full discussion, 64-66.
315 W. R. Wensley, *ibid.*, 65.
The Quebec Connection, 1944-1969

by André Archambault and Roger Larose†

The Canadian Conference of Pharmaceutical Faculties (CCPF), created in 1944, had among its mandates to lay the foundation and to establish the requirements for a program leading to a bachelor’s degree in pharmacy in Canada’s faculties and schools of pharmacy, while respecting the provinces’ autonomy in the area of academic instruction. The CCPF wanted to give fresh impetus to training and therefore to the status of the profession in Canada.

It is from this historical perspective that we will discuss the issues facing the Université de Montréal Faculté de pharmacie and the Université Laval École de pharmacie from 1944 to 1969, the period of the first 25 years of the CCPF. But first, let’s take a look at what pharmacy teaching at Quebec’s universities was like in the early 1940’s.

† Archambault, Professeur Emeritus, and Larose, Doyen Emeritus, Faculté de Pharmacie, Université de Montréal; Chairmen, CCPF (Archambault, 1963-64, and Larose, 1953-54).
Pharmacy Teaching and Research at Quebec Universities to 1945

The Institutions and Their Leaders

In the fall of 1942 the Université de Montréal elevated the rank of its École de Pharmacie (School of Pharmacy), which had been part of the University since 1920, to Faculty (Faculté). That was an important historic event, which would not have been possible had it not been for the foresight and vitality of a group of pharmacists who founded the then Laval School of Pharmacy in Montreal in 1906. (Initially, 1906-1920, the University of Montreal existed as a branch of the Université Laval de Québec.) The selflessness of these founders, who had, for several years provided unhesitatingly—without any limitations and without any compensation—almost all the pharmacy teaching, is worthy of our admiration.

We mention here the outstanding contribution of two of these pharmacists key to the School’s and Faculty’s growth, Alfred Joseph Laurence and Joseph Contant.

A. J. Laurence was the University of Montreal School of Pharmacy’s director (1938-1942) and the Faculty’s first dean (1942-1948). He previously served as secretary of the Laval (1906-1920) and Montreal (1920-1938) schools, while Joseph Contant was director of each during that same period. Lawrence was a pioneer with all the talent of a highly skilled organizer and with the enthusiasm and initiative needed to accomplish a major task. His deep desire for the School’s good was unfailing.
PhARMacist Joseph Contant never stopped furthering the interests of the School of Pharmacy or of its teaching. His name is still associated not only with the development of pharmacy in Quebec, but also with the development of Montreal society. He was an important figure in Montreal’s business community and a co-founder of the School of Business (École des hautes études commerciales).

When the School of Pharmacy became a faculty, the pharmacy courses, totaling 1300 hours of instruction, comprised: pharmacy, hygiene, materia medica, ethics, chemistry, biochemistry, pharmacodynamics, botany, chemical galenic pharmacy, pharmacy law, and analytical chemistry.

Developing Graduate Studies and Research

In the early 1940’s, A. J. Laurence and two of his distinguished colleagues, Professors J. Labarre and R. Barré, very much wanted to develop research. The degree of master of pharmacy (M.Ph.) was created, and the requirements for obtaining a professional doctorate (D.Ph.) were established; the M.Ph. required one year of specialization beyond the baccalaureate, whereas the D.Ph. required two years and a thesis. The Faculty awarded its first two professional doctoral degrees in 1945. Up to that point, researchers had relied on provincial fellowships or grants from pharmaceutical companies, such as Rougier Frères, in order to carry out their research. Various subjects and entities were investigated, e.g. amino acids and their action on heavy metal cations, vitamin C and its stabilization, the use of blood proteins, and the synthesis of new sulfanilamide derivatives.

The challenges facing the new faculty were clear. Its directors would have to undertake a major reform of the studies leading to the bachelor of pharmacy degree and develop research. However, the Université de Montréal was going through a serious financial crisis. Its full-time professors were few in number and poorly paid, and the laboratory equipment and rooms were inadequate. The situation was serious. In
1945, the University decided to create a board of inquiry, which we will mention later.

Also in 1942, under the direction of Antonin Marquis, Université Laval’s School of Pharmacy was incorporated into the Faculty of Science. This was an important event in its development.

The Issues and Challenges of the Day

The development of pharmacy teaching and research in Quebec from 1942 to 1969 was definitely influenced by a number of factors, the most important of which are discussed below.

The Practice of Pharmacy in Quebec in the Early 1940’s

According to Collin and Béliveau, there were 541 pharmacy owners in Quebec; 418 were pharmacists and 123 were physicians. However, the presence of physicians in this field of practice gave rise to competition, which the Association Pharmaceutique du Québec (Quebec Pharmaceutical Association) wanted to end. It requested amendments to the Pharmacy Act, but amendments limiting the number of municipalities in which physicians could practise pharmacy were not adopted until 1953.3

Pharmacists also deplored the facts that just about anyone could sell drugs, that it was difficult for them to earn a living by practising their profession alone, and that the lack of effective countermeasures for eliminating the competition from physicians and limiting competition from grocery stores was driving them to an undesirable type of commercialism ranging from cameras and candy to tobacco products, stationery, soda fountains, and refreshment stands.

The profession was divided. Some denounced the commercialism and saw in the development of university education a means of more effectively asserting their role and responsibilities. However, others, who were more pessimistic, were tempted to embark further into a commercial-type practice.

The Growth of the Pharmaceutical Industry to the mid-1940’s

At about the same time, a strong pharmaceutical industry was developing in
Quebec. In 1889, Charles E. Frosst founded, in Montreal, the first Canadian company involved in true industrial pharmaceutical production. This was followed by the founding of the Frank Wyeth Horner Company in 1913 and of Ayerst, McKenna, S. L. Harrison Limited in 1924. The latter company discovered Premarin, which is still used to treat estrogen deficiency.

It was also during this period that Quebec francophones set up companies such as those of pharmacist Louis S. Desautels; of Hervé Nadeau, a chemistry professor in the Université de Montréal Faculty of Medicine; and Rougier Laboratories Inc.

However, the industry’s growth was characterized mainly by the establishment and development of foreign multinationals. More than a dozen located in Quebec between 1911 and 1946. All of these laboratories would have a profound impact on the pharmacist’s role as a compounding of drugs, but at the same time they would enable him to expand his role, by requiring new skills, such as those in industrial pharmacy and research.

**Education and Public Health in Quebec after World War II**

The post-war period was one of growth and prosperity, and within about twenty years, Quebec underwent radical change, going from a rural and agricultural society to an industrialized, urban society preoccupied with educating its children. Also, during this long period of obscurantism forced on it by the Duplessis government, Quebec was saving up. In 1960, Quebec became an open society ready for major reforms and capable of paying the cost. All the conditions were in place for peacefully carrying out important major changes referred to as the “quiet revolution.”

It was in the 1960’s that Quebec’s universities received the resources needed to develop their training and research programs. Even though tuition fees were the universities’ main source of revenue, the new ministry of education decided to give large operating subsidies and capital grants to the universities and froze tuition fees in order to facilitate access to university education. Both with regard to the funds put at its disposal for teaching and research and to recruiting students and reasserting the profession, the Faculty and School successfully tackled some major challenges. These included the battles that they had to wage over the admission of students into their pharmacy programs and the requirement of a bachelor of pharmacy degree to practise in Quebec.
In 1961 Quebec’s Pharmacy Act still authorized the Collège des pharmaciens de la province du Québec (Quebec College of Pharmacists), the statutory or licensing body, to grant a certificate to anyone who passed the College’s exam, which meant automatic admission into a pharmacy program. This situation, which the Faculty had deplored for many years, became unacceptable. The Faculty had no control over this exam and was obliged to admit students who were often less qualified than others with a bachelor of arts or science degree, who could be admitted without taking the exam.

In 1962, the Faculty’s directors, Roger Larose, Dean, and André Archambault, Assistant Dean and Chief Academic Officer, buoyed by support from the rector of the Université de Montréal and the Faculty’s board of directors, started to make representations to the College to correct the situation. It was a long and laborious process, which dragged on for nearly two years. Since the College’s directors could not be persuaded to introduce an amendment to the Pharmacy Act to remedy this abnormal situation, the rectors of the Université de Montréal and Université Laval, backed by their boards of governors, decided to support the Faculty and School of Pharmacy in their efforts to give the universities all the autonomy they needed to admit qualified students into their pharmacy programs.

The situation was so tense that, as a last resort, the Faculty’s directors had to appeal to Premier Jean Lesage, who authorized the universities’ legal counsel, C. Ducharme, to submit an amendment to section 8 of the Pharmacy Act during the debate over Bill 96, which the College had submitted to the public bill committee. Lesage then pointed out that the change to the admission requirements for pharmacy programs was essential because, in his opinion, it would be the first step in reasserting the profession. From then on, the Faculty and School were able to admit pharmacy students who met the requirements for the academic programs that they wanted to offer.

At this point, therefore, the Bachelor of Arts degree conferred by the classical colleges of the day became the main degree leading to admission into academic pharmacy programs. Although this degree ranked highly in Quebec—eight years of education in the sciences and humanities after elementary school—it was given a low appraisal by colleagues in the rest of Canada and in the United States, who, in addition, criticized it for not including instruction in economics, psychology or English. On numerous occasions, Roger Larose, a regular participant in the CCPF meetings,
had to make the necessary clarifications to the CCPF and the American Association of Colleges of Pharmacy. With the subsequent creation of the Collèges d’enseignement général et professionnel (CEGEPS), the diploma of collegial studies (health option) became the minimum standard for admission. CEGEPS was the equivalent of the Colleges of Applied Arts and Technology (CAATS) or community colleges elsewhere in Canada.

Also thanks to the pressing demands of the Faculty, School, and their graduates, the College later abolished the title of assistant pharmacist, which used to be granted upon passing an examination given by this organization and authorized only holders of a bachelor’s degree in pharmacy from a Quebec university to practise pharmacy.

The institution of a hospital insurance plan in 1961 and of a health insurance plan in 1970 was very beneficial to the profession, because it gave pharmacists the opportunity to expand their professional responsibilities and gave them the means—mostly of a legal nature—to properly assume them. To enable Quebec’s health-care professionals to contribute fully and effectively to the achievement of the objectives of the health and hospital insurance plans, Quebec adopted a professional code and created the Office des professions (Professions Board). It also revised the statutes governing each of the professions. The Pharmacy Act was amended in 1973, and included in it was a statement of the objectives that the profession and universities had been pursuing for many years with a view to asserting the clinical role of the pharmacist.

In the hospitals, the hospital insurance plan completely transformed the practice of pharmacy. Before 1960, hospitals were corporations managed by religious orders and were funded by donations and payments requested from patients. They used few dispensing pharmacists. After they became public corporations, the hospitals received the necessary operating capital. At this point, an important change in the practice of hospital pharmacy took place in Quebec. Hospital pharmacy required new skills of pharmacists. Consequently, the Faculty decided to create a degree in hospital pharmacy, about which we will talk later.

As for the health insurance plan, it made it possible, during negotiations between the Ministry of Health and the Association des pharmaciens propriétaires du Québec (Association of Owner Pharmacists of Quebec), to
clarify the notion of the pharmaceutical act and to recognize the competence of pharmacists by paying them fees not only for dispensing prescriptions, but also when they considered it inadvisable to dispense a given drug or when they had to write a pharmaceutical opinion. To our knowledge, this recognition of the value of acts performed by pharmacists was unique in North America. It greatly promoted the development of the profession’s clinical orientations in Quebec.

These issues had a profound impact on the Faculty and School of Pharmacy related to educating pharmacists. Not only did the School and Faculty have to fight in cooperation with the Collège des pharmaciens, which became the Ordre des pharmaciens du Québec in 1972, but it seemed obvious to them from the start that all these reforms would be for naught if their graduates were not properly prepared to assume new responsibilities in the areas of community pharmacy, hospital pharmacy, industrial pharmacy, and research.

### Pharmacy Teaching and Research, 1944 to 1969

#### The Baccalaureate Degree Program in Pharmacy Gains Official Status

In 1947, Alfred F. Larose, son-in-law of Joseph Contant and father of Roger Larose, was appointed the Faculty’s dean and chief academic officer. A first major academic reform was initiated that gave effect to the recommendations of the board of inquiry set up in 1945. Irwin Conroe and American experts were thus given the mandate to analyze “the organization, management, administration, operation and needs of all of the Université de Montréal’s faculties.” The adoption of this report, followed by a fund-raising campaign that brought in $12 million, enabled the Université de Montréal to decisively begin another phase of its development.
In pharmacy, the courses were modified, new ones were created, and the program was spread over four years and became compulsory. The changes to the curriculum concerned the development of instruction in chemical, biological, medical, and pharmaceutical sciences.

Another important change to the program took place in 1963. It involved a revision of all the courses, a reorganization of the program, and the creation of options in community pharmacy, hospital pharmacy, industrial pharmacy, and research. The Faculty thus met the needs of the expanding role of pharmacists in these areas and the job opportunities available to them. Further reforms were carried out in 1976 and 1993, resulting in major developments in training in clinical pharmacy and in social and administrative pharmacy.

The development of teaching at Université Laval’s School of Pharmacy was practically the same as at the Université de Montréal. However, the presence of the pharmaceutical industry in Montreal had an impact on the training provided in industrial pharmacy and research at the Faculty.

Postgraduate Programs Evolve into Master’s Degree Programs in Hospital Pharmacy: A Canadian First

In 1961, the Faculty of Pharmacy in collaboration with university hospitals, created a postgraduate program in hospital pharmacy, which later became a master’s program in hospital pharmacy. It was the first time that a Canadian university endorsed the creation of a graduate program (courses and residency) in hospital pharmacy and agreed to recognize it officially with a university degree. More than 600 pharmacists have obtained this degree and are practising their profession in hospitals. For its part, Université Laval’s School of Pharmacy created a certificate in hospital pharmacy in 1962.

Supporting the Advanced Education of Teaching Staff

In 1953, there began the lengthy process of putting together a high-quality teaching staff. Since it was difficult to attract professors from abroad and since there were no young, well-trained doctors of pharmacy available in Quebec, the directors of the Faculty and of the University agreed to send young pharmacy graduates to France and to the United States, granting them
fellowships to support their doctoral studies. The Collège des pharmaciens de la province du Québec and the Canadian Foundation for the Advancement of Pharmacy participated in this initiative by contributing financially to the training of candidates selected by the Faculty. This initiative enabled J. A. Mockle, André Archambault, R. Latour, R. Salvador and later C. Lafontaine, G. Sirois, G. Thibodeau, J. Béliveau, R. Goyer (dean of the Faculty June 1994 - June 1999), and others to become professors in the Faculty. The first group of professors subsequently promoted the recruitment of eminent colleagues from Belgium and the United States.

**Strengthening Graduate Studies and Research**

In 1960, graduate studies and research were quite underdeveloped at the Faculty and School. The arrival of a young and dynamic teaching staff led to remarkable progress in the Faculty from 1960 to 1969. The School of Pharmacy’s affiliation with Université Laval’s Faculty of Medicine also promoted the recruitment of research professors.

In May 1963, the Université de Montréal’s board of governors authorized the Faculty to grant the degrees of Master of Science (M.Sc.) and Doctor of Philosophy (Ph.D.) in four fields of pharmacy: medical chemistry, pharmacognosy, biochemical pharmacodynamics, and pharmaceutics. Subsequently, the number of students enrolled in these degree programs increased very rapidly until 1970. Université Laval’s School of Pharmacy also created a master’s and doctoral program in pharmacy.

At the same time, the Faculty was putting forth considerable efforts to promote research and give it visibility outside the Faculty, to obtain the funds needed to carry out the Faculty’s projects. Possible closer ties with the universities were already anticipated. André Archambault, a former chairman of the CCPF (1963-64), as a guest speaker at the 54th annual meeting of the Pharmaceutical Manufacturers Association of Canada (PMAC) in May 1968, expressed his views as follows:

> Research, mainly health-related research, has become a very complex and expensive enterprise, and it has become clear to me that only true cooperation between the three major sectors of society—government, universities, and industry—can bring the results that will achieve today’s health goals. Each sector has its own contribution to make: government, through its financial resources and its ability to assess
national goals; the academic world, through its traditions of scholarly
discipline, and industry, through its great
developmental abilities and long-established record of
ingenuity and creative application.

It is interesting to read in section C (Partnerships) of the Medical Research
Council’s 1994 guide that it is now a reality. Dr. Archambault continued:

Of course, one of the great moments in research for the Faculty was
when the Medical Research Council of Canada decided to recognize
pharmacy as a discipline within the framework of the MRC for the
purpose of considering sources of funds for future development.

Faculty Members Participate
in National and Regional Pharmacy Activities

From 1944 on, the Faculty’s directors and professors continued to participate
very actively in the annual meetings and committees of the Canadian
Conference of Faculties of Pharmacy and its successor, the Association
of Faculties of Pharmacy of Canada. Everyone found there a source of
enrichment, concerted action and cooperation, as well as the opportunity to
make a positive contribution to national issues. What mainly distinguished
the contribution from the directors of Quebec’s Pharmacy faculties was the
constant concern for forging closer ties and contributing to the achievement
of a national consensus on the means to be used to promote the development
of teaching and research, and on the strategies to be used to affirm the
expansion of the professional role of the pharmacist.

Maintaining this attitude was not always an easy thing to do in Quebec.
A case in point was the creation of the Pharmacy Examining Board of
Canada (PEBC). In 1961, the organizational committee for the PEBC, of
which Roger Larose was a member, advised the CPhA to “formally seek
the presentation to and passage through Parliament of a private bill which
would give corporate entity to a national examining board.”5 In June of that
year, the Quebec pharmacy statutory body decided to oppose any kind of
national exam and withdrew from the CPhA. This decision put Quebec’s
pharmacists, the Université de Montréal Faculty and the Université Laval
School in an awkward and delicate situation: those who wanted to receive
certification from the PEBC under the grandfather clause or by taking the
national examination had to submit an eligibility certificate signed by the
College registrar, which the College’s board of directors forbade him to do.
Also, the CCPF was entitled to have two representatives on the PEBC’s board of directors, and one of them was supposed to be bilingual. Could an academic from Quebec agree to sit on the examining board? These questions were the subject of lengthy debates within the CCPF and PEBC’s board of directors. Roger Larose, then the dean of the Faculty, was thus appointed as a PEBC board member serving as a bilingual representative from the CCPF, but he had to withdraw after his first mandate upon the request of the College. As for the conditions for receiving a certificate from the PEBC, they were clarified a few years later to permit any Quebec pharmacist to apply.

It was through this willingness to cooperate and forge closer ties that the Faculty’s directors proudly contributed to important studies by the CCPF, the evaluation of the pharmacy program at Dalhousie University (Roger Larose) and the creation of a school of pharmacy at Memorial University (André Archambault). This fact was particularly significant when Roger Larose, then the vice-rector of administration at the Université de Montréal, was made a member of the Commission on Pharmaceutical Services. The organization of the annual meetings between the faculties of pharmacy of the University of Toronto and the Université de Montréal in the early 1960’s and later with Université Laval’s School of Pharmacy was motivated by this willingness to forge closer ties.

It was during that difficult and stimulating period of 1944-1969 that the Faculty and School of Pharmacy were in a position to lay the foundation that permitted the organization of solid programs of education and research in pharmacy at Université Laval and the Université de Montréal. Of course, the challenges to be met after this period were and are enormous, but both the Faculty and the School can accomplish their mission with pride and dignity.

References

4  Hélène-Andrée Bizier, *Université de Montréal. La quête du savoir* (Editions libres expressions, 1933).
5  F. Norman Hughes, A. Whitney Matthews, and John F. Creasy, *The Pharmacy Examining Board of Canada—the First 25 Years* (PEBC, Toronto, 1990), 5.
Evolution and Growth, 1969-1977: The CCPF Becomes the AFPC and Develops

by J. Alex Wood†

In 1969, on the 25th anniversary of the founding of the Canadian Conference of Pharmaceutical Faculties (CCPF), members of the Conference—meeting for the first time ever in St. John’s, Newfoundland—took a bold step. They approved a re-organized body, with a new constitution and a new name: “The Association of Faculties of Pharmacy of Canada,” whose AFPC initials served by design equally well in French translation, “L’Association des Facultés de Pharmacie du Canada.”

The forward-thinking changes proposed by a committee chaired by Richard E. (“Dick”) Moskalyk “were designed to involve all faculty members as much as possible in Association matters throughout the year, to reduce drastically the time spent on committee reports and other business at annual meetings, and to strengthen the [by now well-established] Teachers’ and Research Conferences [as part of the annual meetings]. A Council . . . consisting of one [representative] elected by each constituent faculty [was established as the policy-making body of the new organization].”¹ These faculty representatives constituted the voting members of the Council, except in elections for AFPC officers, in which all individual members participated. The members of the Executive were not voting members of the Council, but the Chairman presided over it.²

An effort to change the name of the chief elected officer from “chairman” to “president,” in keeping with the change in name of the organization from “Conference” to “Association” to suggest ongoing activity between annual meetings, did not gain favor in 1969 (indeed not until 1975). Except for such later changes in title and the addition of an executive director in 1977, the structure and function of the AFPC remains essentially the same.

† Professor Emeritus, College of Pharmacy, University of Saskatchewan; Chairman, CCPF (1967-68) and Executive Director, AFPC (1977-1982).
to the present time. The move to the first executive director, even though only part-time, signaled the beginning of another major step forward for the Association, but we reserve a discussion of that for the next chapter of our account.

**The Future Takes Direction from the Past**

The first year of the reorganized CCPF/AFPC proved a full and interesting one in many respects, with the beginning of some new ventures in Canadian pharmaceutical education, some significant steps forward, as well as some revisiting of established involvement. It was perhaps symbolic that the first chairman elected under the new constitution was Dean F. Norman Hughes, who had served previously as CCPF chairman (1951-52), and earlier yet had been present at the founding of the CCPF in 1944 and served as the first CCPF secretary (1944-1950). To permit an orderly transition and time to arrange for what has become a mail ballot of all members, the outgoing CCPF Chairman Bernard E. (“Bernie”) Riedel continued in office until the end of 1969.

**The AFPC Shares in the CFAP’s 25th Anniversary**

The AFPC’s first year of operation after its reorganization witnessed a variety of events that involved or affected the Association. Of particular note was the 25th anniversary in 1970 of the Canadian Foundation for the Advancement of Pharmacy (CFAP, since 1984 known only as CFP). CFP had originated from suggestions made by A. Whitney (“Whit”) Matthews at the CCPF’s founding meeting in 1944—as Norman Hughes has recounted earlier in this book. Since the Charter Meeting in 1945, the Foundation, sparked by its successive boards of directors, had made a monumental contribution to Canadian pharmacy. AFPC Chairman Hughes put it succinctly in 1970 when he said:

> Recognizing the fundamental role of education in elevating the status of the profession, the Foundation provided substantial assistance to our colleges of Pharmacy, always seeking the advice of the educators as to the greatest need. In the early years especially, when our schools were woefully understaffed and poorly equipped and when educational standards were variable, but generally low, [Foundation] funding provided a vital catalyst for the rapid improvement of staff, facilities and standards. The Foundation has not only assisted the schools,
their staff and students directly, but also substantially supported the Canadian Conference of Pharmaceutical Faculties and now its successor.3

The Foundation support of the AFPC over the years was very wide ranging, including its publications, annual meetings, teachers’ conferences, and research conferences. The Foundation was likewise open to appeals for special purposes, such as the task force visits to Newfoundland and the Maritimes to assess and advise on the needs of pharmaceutical education there; the invitational conference that grew into the Canadian Conference (now Council) on Continuing Education in Pharmacy (CCCEP); etc. “Without the CFAP,” Norman Hughes concluded with heartfelt eloquence, “I can say with conviction, that pharmaceutical education in Canada could not possibly have made the progress which has marked the past 25 years.”4

The AFPC and Constituent Faculties Participate in the PEBC

The AFPC and its member schools were also involved in the radical changes instituted in the examinations of the Pharmacy Examining Board of Canada (PEBC) written in June 1970. The papers, now more practice-oriented and objective in nature, were reduced in number from seven to three; the practical examination, eliminated. As a result, there was a substantial increase in the number of candidates writing, and it was suggested that the participating provinces might now move to require the Board’s certification for registration of candidates from outside their respective provinces.5 Ontario went well beyond that recommendation, when as part of its new enabling legislation, the Ontario Health Disciplines Act of 1974, it required all new Ontario registrants, whether graduates from inside or outside the province, first to obtain PEBC certification. The enabling principle invoked was that of civil liberties. The effect was to increase the number sitting the annual PEBC examinations by a considerable number, particularly since Ontario graduates had not previously been conspicuous among those opting for the certification.

The Curriculum Changes to Suit the Times

Curriculum, naturally enough, always constituted a major element in the deliberations of the CCPF, as well as its successor, the AFPC, whether as part of the Teachers’ Conference, or committee reports, or general
discussions. Thus, Dr. Hughes at the 1970 meeting raised several issues regarding the orientation toward clinical pharmacy in the core curriculum. Several constituent faculties had by then already begun to change their own programs to reflect a greater emphasis on the clinical component, as part of the general trend toward greater patient as opposed to product orientation. That meant not only the introduction of clinical pharmacy courses, didactic and practical, but also an increase in prerequisite medical science elements in the program.

Support for such a movement came about that same time from noted medical educator Dr. John Evans, then Vice-President, Health Sciences, McMaster University. McMaster University was inaugurating what was considered to be a radical approach in Canada to medical education—student-centred and problem based, with a minimum of traditional didactic instruction and examinations, all aiming for a more empathetic, patient-oriented practitioner. Evans, speaking to the Ontario Pharmacists’ Association in 1969 on Pharmacy’s future role in society, endorsed the general principle of a “consulting pharmacist” in an integrated system for the delivery of health services. He advanced several specific suggestions for the attention of pharmacists, educators, and practitioners.7

A somewhat related theme of an integrated health-sciences approach to both education and practice as a way that health professions should go was being touted a few years later, in 1972-73. In reference to the conference on “The Interactions of the Health Sciences in the University and the Community in the 1970’s,” organized in 1972 by the Association of Canadian Medical Colleges (ACMC) and related organizations, AFPC Chairman A.M. Goodeve commented that “despite the fact that pharmacy, dentistry and nursing were rarely, if ever considered in the discussions, I felt it, nevertheless . . . worthwhile.”8 Goodeve and the AFPC also reacted extensively to the implications for pharmacy and pharmaceutical education in the so-called “Hastings” Report (of the Community Health Centre Project).9 From the perspective of his own extensive experience, John Evans had certainly given some serious thought to the idea of integrated education of the health professions. However, he was also forthright in his expression of the practical problems attendant thereto, in terms of the chronological age, academic preparation, professional aspirations, and typical personality traits of students in various professional faculties.10
Another relatively new area for Canada, social and administrative sciences in pharmacy, received special attention as the theme for the 1974 AFPC Teachers’ Conference. In opening the Conference, AFPC Chairman E. W. (“Ernie”) Stieb expressed particular pleasure over inclusion of the subject. “It represents, I believe,” he said, “the growing, if somewhat belated, concern within AFPC in recent years for promoting this area of pharmaceutical education and research.” (It is a remarkable historical fact that while pharmacy administration, by whatever title, had been an accepted graduate discipline in the USA from the early 1950’s and at least four Canadians with that background were actively involved in teaching and research prior to 1970, those same Canadians had difficulty getting their AFPC colleagues to accept their papers as legitimate offerings for the AFPC Research Conferences prior to that time. More recently, a similar inertia appears to have been applied relative to the first serious attempts to introduce more socially oriented elements, accepted in the USA since the early to mid 1960’s. It does seem to suggest that as educators we appear to be rather late applying to our own arenas a similar openness of mind and experiment than we try to imbue in our students and practitioners.)

Beyond individual disciplines, the AFPC also revisited another subject broached early on by the CCPF, the basic core curriculum. Thus at the 1972 annual meeting, the Committee on Pharmaceutical Education presented a “Basic Curriculum for a Four-Year Baccalaureate Degree in Pharmacy for Canada.” This was a significant move toward establishing curricula across Canada that would have at least a certain level of uniformity in both subject matter and uniformity of content. This would facilitate movement of undergraduates from one jurisdiction to another, assist students in preparing for the PEBC examinations, and ensure an acceptable degree of commonality of subject matter or entry into pharmacy practice and graduate studies from a national perspective.

**Practical Professional Experience Gets Updated**

Like curriculum, practical professional experience was one of the major topics of concern and discussion at the CCPF founding meeting in 1944, as both Norman Hughes and Esmonde Cooke have noted elsewhere in this book. Between 1944 and 1970 traditional apprenticeship moved slowly from being the only or predominant method of professional training, initially as a prerequisite to admission to formal academic study, to a more minor,
secondary place, usually during and after the university program. That reflected what could generally be interpreted as a change from nineteenth-century training for a trade to twentieth-century educating for a profession. The terms “internship/internship,” “clerkship,” “practical training,” etc., found their way into Canadian academic parlance, transferred from our colleagues in the American schools, the CCPF/AFPC sister organization American Association of Colleges of Pharmacy (AACP), or medical circles, which became increasingly influential with the growth of clinical pharmacy and Pharm.D. programs. Moreover, the experience by whatever name, came more and more under academic as opposed to professional control, because it was seen to be an extension of “education,” rather than practice training. The experience would still be in the professional setting of community or hospital pharmacy, but now under the aegis of the educators, as a natural, integrated extension of the academic program.

Graduate Studies and Research Strengthen

At the AFPC’s 1970 Annual meeting, Chairman Hughes pointed out the good progress made in recent years in the development and expansion of graduate programs. He indicated that all eight Canadian schools now offered the master’s degree; at least five, the Ph.D.; and one, a professional master’s in hospital pharmacy. “The quality of research under the stimulus of the support of [the Medical Research Council of Canada] MRC,” said Hughes, “had also improved as a result of both substantially increased funding and of rigorous standards imposed by the competitive nature of MRC’s grants policy.”14 It was suggested that the total number of registrants in graduate programs raised two pertinent questions: “(i) How many such candidates [could] be adequately absorbed into the Canadian economy?” and (ii) Was there a “reasonable balance” between the numbers of those enrolled in the respective fields and the anticipated demands?15

A few years later in 1976, the AFPC’s first “president” (formerly called “chairman”), John Steele, expressed a different kind of concern about graduate students, namely, the lack of interest among Canadian pharmacy graduates in proceeding to higher pharmacy degrees. He raised the pointed question: “What are we doing wrong?” which results in this lack of interest.16 Dr. Steele indicated several reasons had been suggested to him for this situation including the high salaries earned by graduating students as beginning community pharmacists, increased interest in clinical pharmacy,
The AFPC Debates the Need for a Permanent Executive Officer

Although there may have been earlier allusions to the need for such a position, based upon the increasing demands made upon officers working in a volunteer capacity, the first clear call for the AFPC to have a permanent executive officer appeared in the 1970 Proceedings. That came under a list of objectives to be considered put forward by Chairman F. Norman Hughes:

Appointment of a permanent paid secretary-treasurer on a part-time basis. There is a great deal more correspondence and other paperwork than previously. Moreover, committee chairmen should have available such an officer to assist them, and a permanent officer can develop and maintain adequate communication. It is not reasonable now to expect a full-time professor to carry all of this load and still conduct a full teaching and research program.18

Other references to a permanent executive officer appeared in the proceedings of meetings for each of the following years until 1973. At that meeting, it was moved that a special committee be struck “to study the question and to report back in ample time for active consideration by the Executive and Council before the next annual meeting.”19 A very comprehensive report from this committee was accepted at the 1974 meeting.20 At the 1976 meeting, which also saw the AFPC’s first “president” installed, the following enabling motion was posed and carried unanimously: “That AFPC accept in principle the enactment of procedures to establish a position of Executive Officer on the basis of an initial honorarium of $2,500, with the financial implication of this development being communicated to the ADPC [Association of Deans of Pharmacy of Canada] for their consideration.”21

Credit for making a compelling case for that increase to the ADPC must go to then AFPC President John W. Steele. Proverbial “hat in hand,” Dr. Steele had carried his plea for decanal assistance to the ADPC annual meeting in Ottawa in the Fall of 1976. We need to remind ourselves also that at this period in the AFPC’s history, it was still heavily dependent upon Foundation and some CPhA financial support; furthermore, unlike the AACP, neither the AFPC individual member fees nor constituent faculty
fees had yet reached a substantial level. It is clear from John Steele’s 1976 presidential address, aptly titled “One Step at a Time,” that a considerable amount of his time and energy during his year in office had been devoted to the matter of the executive officer, the AFPC’s financial picture, and relations with the ADPC.\footnote{22}

**The AFPC and *Pharmacy in a New Age***

Another event of significance that came to fruition during the period under examination here and that was sparked originally by a recommendation flowing from the CCPF was the Report of the Commission on Pharmaceutical Services. That momentous study and document for both Canadian pharmacy and pharmaceutical education started in 1966 as a suggestion of the CCPF’s Committee on Future Planning, chaired by Ross M. Baxter. The Committee presented its own brief to the Commission in 1970, while the Report, *Pharmacy in a New Age*, reached print in 1971. Dr. Baxter played a key role in the study and report, as did also a number of other present or former CCPF/AFPC members, such as John A. Bachynsky, Roger Larose, Whit Matthews, Jack L. Summers, and Harold J. Segal. AFPC Chairman J. Graham Nairn’s address to the 1971 Winnipeg meeting pointed out those chapters or portions of chapters of the publication which he considered to be of particular relevance to AFPC and/or to pharmaceutical education—undergraduate, graduate, and continuing.\footnote{23}

**The AFPC’s Role in the CCCEP and Continuing Education***

Graham Nairn’s discussion of the potential significance of *Pharmacy in a New Age* raised a number of questions about the AFPC’s national role in continuing education, as a natural extension of undergraduate education. It recommended a joint effort between the AFPC and the Canadian Conference of Pharmacy Registrars (CCPR) to establish guidelines for acceptable levels of competence, which would be maintained as a condition of ongoing licensure by appropriate continuing education, as a responsibility of the faculties.\footnote{24}

A practical manifestation of this recommendation was the Invitational Seminar on Continuing Education held in Montreal the following year, 1972, under CFP sponsorship. The Seminar, coordinated jointly by Bernie Riedel and Roger Larose, included input from the AFPC, the CPhA, and one
representative each from the schools of pharmacy and from the provincial licensing bodies. The Seminar strongly suggested the need for a national coordinating body to oversee continuing education in Canada. The urgency of the call related to the perceived growth of continuing education (C.E.) programs of variable quality provided by an equally varied group of bodies, some with questionable educational qualifications and motives. From that seminal meeting there germinated in 1973, with Foundation assistance and nurturing, the present Canadian Council on Continuing Education in Pharmacy (CCCEP). The full voting members of the CCCEP from the beginning were representatives of the provincial licensing bodies, because of the perceived connection between continuing education, the maintenance of professional competency, and the renewal of licensure.

Chairman A. M. Goodeve had suggested at the 1973 AFPC meeting that the Association “make its support known . . . to the appropriate organizations” relative to the CCCEP. However, the CCCEP itself recognized the role of the schools and of the AFPC in providing and assessing continuing education. Thus Ernie Stieb, then AFPC chairman-elect, was invited to serve, along with OCP’s Bernard P. (“Bernie”) DesRoches, on the CCCEP’s Subcommittee on Defining the [Canadian] Continuing Education Unit, chaired by Sister Ligouri (Jacqueline McCarthy). Dr. Stieb was subsequently also invited as an observer to the organization’s first meeting in 1973, at which he questioned whether the AFPC should not be accorded a more formal place within the CCCEP. He carried that same message as chairman to the 1974 AFPC meeting in Ottawa, when he asked: “As an organization of educators, should we not be actively seeking a direct voice in the newly-formed [CCCEP]? Stieb himself was selected as the Association’s first representative to the CCCEP (1975-1980); that AFPC representation continues to the present time, along with a like input now from CFP, CSHP, and CPhA.

After more than two decades, the CCCEP is probably only now beginning to function as originally envisaged. This is not the place to discuss the subject in detail. Suffice it to say that a degree of financial instability (not unfamiliar to the CCPF/AFPC) and conflicting purposes proved a problem. Furthermore, some provinces had already established comprehensive programs before the CCCEP came into existence; they proved loath to surrender that control. The debate of compulsory versus voluntary C.E. now appears to be moving in favor of the latter, while professional competency
testing is developing as a somewhat separate and more difficult issue.

The AFPC Advises Newfoundland on Pharmaceutical Education

The year 1970 saw the beginning of a series of events that were to keep the education of pharmacists in Newfoundland outside the realm of direct AFPC affiliation until near the end of this quarter century. Neil P. Curtis, Registrar of the Newfoundland Pharmaceutical Association (NPhA), wrote AFPC Chairman Hughes asking for assistance with the curriculum of a 3-year diploma course (after Grade XI) in the Newfoundland College of Trades and Technology. Hughes had chaired the CCPF task force—which also included André Archambault and Bernard E. Riedel—that in 1966 recommended the establishment of a pharmacy program in Memorial University; as we see in Esmonde Cooke’s account of developments in the Maritimes elsewhere in this book, both the NPhA and initially the Newfoundland government supported that recommendation. However, political changes of climate being what they are and Premier Joey Smallwood being at least one complex component in the picture, the official dictum for pharmacy on the island came down as trade school diploma rather than university degree. Since direct AFPC accession to Neil Curtis’s request would have been contrary to what the AFPC had agreed long before was the basic minimum standard for all constituent faculties, most of the advice on the curriculum came strategically from the geographically closest source, namely various staff members of the College of Pharmacy at Dalhousie.

However, the saga was far from over. Neil Curtis, on behalf of the NPhA approached the AFPC again a few years later, to ask that pharmacy diplomates of the Newfoundland College of Trades and Technology be judged equivalent to Canadian university graduates in other provinces. Thus, they would be permitted to sit the PEBC examinations and practise freely across Canada, rather than be restricted to Newfoundland. The AFPC declined that request, as the PEBC had previously, but agreed at the 1974 meeting to send still another task force, assuming financial support would be forthcoming from the CFP, to study the pharmacy program in the College. The report in 1975 from the AFPC task force, this time headed by UBC Dean B. E. Riedel, with J. Alex Wood and E. W. Stieb, while sympathetic to the situation and acknowledging what had been achieved under the circumstances, maintained that nothing short of a university degree program...
would satisfy the standards of the AFPC and the PEBC or, indeed, serve well the public and pharmacists of Newfoundland.31

The ultimate resolution of the story falls outside the time frame assigned to me. Without going into details of the ongoing efforts and activities on many fronts and at many levels, let me report only that the pharmacy program remained in the Newfoundland College of Trades and Technology from 1971 until 1986. The present degree program emerged at Memorial University, a little more than two decades after the first CCPF task force recommended that in 1965. The action brought the Memorial University School of Pharmacy into the AFPC family and gained for its graduates free access to the PEBC, with all that it implied. The wheels of progress in Canadian pharmaceutical education do indeed sometimes appear to move excessively slowly, but just as clearly, the standards of professional education and practice continue to strengthen.

Some Reflected Glory, Joy Tempered with Sorrow

The period 1969 to 1976 that I have chronicled during these past pages carried within it many causes for joy of accomplishment and recognition, although naturally enough also for some sorrow. Without intending to be all inclusive or exclusive, let me mention just a few.

The year 1970 witnessed a significant step forward for pharmaceutical education in one province, when the University of Manitoba elevated the status of its School of Pharmacy to that of a “Faculty.”32

December 1975 marked the end of the career of one of the principal players for many years in both the CCPF and the AFPC. Wesley C. MacAulay, long-time dean of the University of Saskatchewan College of Pharmacy (1946-1975), had been an active participant over that period in the CCPF/AFPC, as well as in many other aspects of Canadian pharmacy.33

On a happier note, the AFPC experienced reflected glory when two of its prominent members, F. Norman Hughes and Isabel Stauffer, were named honorary life members in the CPhA during its 1971 Winnipeg Annual Conference. Dr. Hughes and Mrs. Stauffer shared many aspirations and moved in many of the same realms, academically and organizationally. Of particular note relative to the CPhA is that they were the first two
representatives of other related professional organizations or disciplines welcomed to sit, beginning in 1955, on the Council and Executive (at first in alternative years) of the CPhA. That momentous move had come in response to the so-called “Hughes Report,” which forever changed the character of the CPhA from an organization that from its founding in 1907 to then had been controlled exclusively by community pharmacy owners. Norman Hughes ably represented the CCPF; Isabel Stauffer, the CSHP. It truly marked a new era for the CCPF as much as for Canadian pharmacy.

References


4 Ibid.

5 Ibid., 7.

6 Ibid., 10-12.

7 Ibid., 11-12.


10 John Evans, about 1972-1973, in his capacity then as new president of the University of Toronto, in the course of informal discussions with members of the Faculty of Pharmacy towards the end of F. N. Hughes’s tenure as dean.


12 Ernst W. Stieb, “Greetings to the 1974 AFPC Teachers’ Conference,”


15 Ibid.


17 Ibid.


21 “Consideration of Employing an Executive Officer,” Proc. AFPC (1976):65. See also the rest of the discussion, ibid., 66-79.


on Continuing Education in Pharmacy, The History of CCCEP (Winnipeg, 1987):[1-2 unnumbered].

The appointment of the first AFPC executive director unquestionably represented a major step forward for the Association. In a previous chapter, we saw much of the discussion and effort that led up to that stage. The first appointee, in 1977, was Dr. J. Alex Wood, then on staff at the College of Pharmacy, University of Saskatchewan, and long active within the AFPC and its predecessor, the CCPF. AFPC President William E. (“Bill”) Alexander at that 1977 meeting rightly suggested that this appointment represented an historical moment in the evolution of the Association and could move the AFPC into a new era of development. Dr. Alexander, with a foot in both camps, also expressed appreciation to the Canadian deans of pharmacy for their financial support of this venture.¹

Some of the same confidence explicit in Bill Alexander’s comments may also have been implicit in the address at the 1978 Annual Meeting of President Wayne Hindmarsh, who used the title “Good-bye Old Girl” for his presentation. He said he chose the title because it was time to say good-bye to the negative feelings about the AFPC and concentrate on the positive things it could accomplish. He also asked the question, “If our organization did not exist, where would pharmacy be in Canada today?”² He answered in part by indicating that among other things Canada would not have a relatively uniform curriculum which allowed pharmacy graduates a good level of mobility across the country.

† Professor Emeritus, College of Pharmacy, University of Saskatchewan; Chairman, CCPF (1967-68), and Executive Director, AFPC (1977-1982).
Dr. Wood served most ably for five years. Very shortly after the 1982 Annual General Meeting, he retired from his position as executive director (part-time) and from his teaching position in the College of Pharmacy, University of Saskatchewan. At that meeting he had this to say about this AFPC position:

Given the limited time available to devote to this office, there is very little opportunity to study and reflect upon issues that are before us or to initiate projects that would benefit the work of our association. Consequently, I believe that the most vital role of a part-time person in this position is to keep the flow of communications moving among members of our association, between different segments of our association, and between our association and other related organizations. The Executive Director must frequently decide whether to take action directly upon information that comes to his attention or to whom to refer the matter for action. In many instances, communication is purely a matter of ensuring that information that is available is passed on to those who need it and to elicit information from those who can provide it.3

A number of changes relating to the AFPC came during the tenure of the first executive director. Thus during his term, President Hindmarsh consolidated the organization by having Council members chair and co-chair the Standing Committees. This ensured that the chairmen of Standing Committees would attend the Annual Meeting, since financial constraints did not permit providing travel expenses for non-Council members. He also felt that such roles would provide Council members with more important ongoing functions than they had in the past.4

It was also in 1978 that an individual membership fee, initially set at $10, was first introduced. This was based on the assumption that if members contributed financially to the organization they would take more interest in ensuring that it would be an effective organization and that there would be increased interest and activity at the local level.5

In response to several enquiries directed to President Richard E. (“Dick”) Moskalyk, a constitutional change was made at the 1980 meeting to accommodate membership for those individuals who could not otherwise qualify (as members of constituent faculties). Provision had been made earlier to include, as “associate members,” organizations or institutions
other than constituent faculties. The 1980 change created a new class of “associate individual members,” by providing that: “Any person interested in the aims and objectives of this organization may apply for Associate Individual Membership in the Association of Faculties of Pharmacy of Canada. Associate Individual Members shall enjoy all the rights and privileges of the Association, except the right to vote and to hold office.”

Some other interesting innovations also occurred during President Moskalyk’s term of office. In the 1979-80 period, he undertook an ambitious visit to all the constituent faculties of the AFPC. From these visits he obtained a first-hand view of what was happening in each faculty, increased his knowledge of the interests and concerns of a wide range of individual members and was able to compile a comprehensive list of comments, suggestions, and concerns expressed to him. This list appeared in his president’s address, published in the Proceedings of the 1980 Annual Meeting. We will return to some of his findings later in this chapter where they fit best topically for the period, but will mention here that in his visits across the country, the President did not find any significant negativism about the AFPC and concluded that the organization was essentially “alive and well.”

A significant innovation during that same time was that for the first time in the history of the association a “conference call” was held during the mid-year executive committee meeting in March 1980. This provided a means for holding a “meeting” of the AFPC Executive as well as the Council without the very large expense of travel and accommodation which would have been impossible given the financial constraints under which the Association functioned. It was deemed to be a very successful venture.

The Curriculum Continues to Evolve

Understandably, curriculum as always occupied a good deal of the attention of the AFPC and its members. President Hindmarsh suggested that since the AFPC had been charged with planning and implementing all phases of pharmaceutical education, all members individually became concerned with changes in the basic core curriculum.

On his nationwide tour, President Moskalyk found that there were many differences as well as similarities in the academic programs among the
faculties. He suggested that the differences should not be stifled, because these provided for individual faculty character and incentive for innovative development in the constant search for excellence. However, he indicated that the similarities must be of sufficient strength to ensure that each faculty was capable of educating an “undifferentiated pharmacist capable of practising in any one of the ten provinces or indeed anywhere on the continent.” This, of course, had been the rationale for a very large amount of the effort directed toward developing, and meeting within each faculty, a basic core curriculum. Dr. Moskalyk also noted that among the objectives of the Association enunciated in its Constitution was “to encourage high and uniform educational standards in Pharmacy throughout Canada.”

Dick Moskalyk also suggested that the minimum curricular requirements for constituent faculty membership in the AFPC were useful beyond being educational standards for graduates in pharmacy. If it were determined that there were deficiencies in curriculum development in a particular faculty, the dean could use this fact to bolster his submission to the university administration for greater resources and additional personnel to meet at least the minimum standards set forth by the AFPC. (It may be observed here that while such tactics did indeed work to the advantage of some faculties in earlier times, more recently university administrators working with restricted funds have become suspicious of and resistant to such arguments.)

Clinical pharmacy provided the focus for a forum at the 1980 Annual Meeting of the AFPC. Dr. W. Parker presented a position paper on “The Relationship of Clinical Pharmacy within the Pharmacy Curriculum.” The following two paragraphs reflect current thinking on the subject:

The preparation of students for the modern practice of Pharmacy requires educational programs which emphasize the effects of drugs, their use by patients and the relationships of the pharmacists with patients, rather than a study of drug products in isolation. We need to balance our active roles as drug consultants, as monitors of drug compliance and as consultants on drug utilization against the need to continue to play an active role in the preparation of drug products and in managing the distribution of those products.

We must remain flexible in our clinical evolution and establish appropriate evaluation mechanisms for our clinical services—the
fruits of our clinical education. Many people advocate against defining clinical pharmacy in static terms. Rather, we should attempt to recognize patient care responsibilities assumed by our clinical faculty, assess their validity in terms of need and cost effectiveness (by patients and prescribers), and incorporate corresponding instruction into our curricula.13

At the same forum, Dr. J. Blackburn presented a position paper on “The Interrelationships of Pharmaceutical and Clinical Sciences in Today’s Curriculum.” He noted that the AFPC Committee on Pharmaceutical Education was presenting “The Minimum Curriculum for a Four-Year Degree in Pharmacy in Canada” in which clinical pharmacy was allocated one-third of the number of hours designated for the pharmaceutical sciences, a dramatic shift from ten years earlier. Dr. Blackburn indicated that he did not perceive this as a decrease in the importance of the pharmaceutical sciences in Canadian curricula, but an attempt to relate pharmaceutical science information to patient care. He concluded his paper by stating that as clinical pharmacy educators we must make the student increasingly aware of the importance of a good background in the pharmaceutical sciences for an effective clinical pharmacy practice.14

On the subject of uniformity of educational standards, it was suggested that Faculty-supervised clerkships should be promoted. He further suggested that this topic should be investigated by the AFPC committees on Goals and Objectives, as well as Education.15

Considering Alternative Degrees

Executive and Council at the 1978 AFPC Annual Meeting expressed the opinion that Canada should provide advanced training for a professional degree such as the Pharm.D. in the USA, but designed to fit into a Canadian perspective.16 At the 1979 Annual Meeting it was suggested that consideration of a five-year (1 + 4) degree program had arisen on several occasions and that it could arise again if our colleagues were to be accredited for provision of students to U.S.A. Pharm. D. programs. The topic had also been discussed when expansion of clinical programs was considered. It was suggested that this was a major step and should be assigned for study to the Committee on Goals and Objectives and to the Education Committee. Related curricular concerns regarding compliance
of faculties with basic curriculum parameters and the establishment of permissible latitudes of deviation from the standard could be investigated by the Education Committee.\textsuperscript{17}

\textbf{The AFPC Promotes National Accreditation of Constituent Faculties}

The questions about national standards as well as the free access of Canadian graduates to programs in other countries led naturally enough to consideration of systems of accreditation. During this period, discussion about the need for accreditation came up at the 1979 meeting. The benefits related mostly to interchange of graduates with the United States and other countries. It was reported that some Canadian graduates had encountered problems in applying for further advanced programs (e.g. for the Pharm.D.) in the United States, since Canadian faculties were not accredited. The AACP supported the eligibility of Canadian graduates but the American Council on Pharmaceutical Education (ACPE), the U.S.A. accrediting body, had threatened to withdraw accreditation from United States Colleges that admitted Pharm.D. students from non-accredited schools. It was agreed by the AFPC that it should establish its own system for accreditation if that was considered necessary. It was suggested that the Canadian Foundation for the Advancement of Pharmacy (CFAP) might fund a study on the need for accreditation and the means by which it could be effected. The deans suggested a joint ADPC/AFPC group to study the question of accreditation.\textsuperscript{18}

The issue of accreditation came to the fore again at the 1981 Annual Meeting in the form of a recommendation from the Committee on Pharmaceutical Education. It recommended “that the AFPC continue to consider the necessity for a means of evaluating the program offered by each constituent Faculty and a means of ensuring that all Faculties meet an approved curriculum.”\textsuperscript{19}

What eventually resulted more than a decade later was the Canadian Council for the Accreditation of Pharmacy Programs (CCAPP), heavily (and with permission) based on its American counterpart, the American Council for Pharmacy Education (ACPE). CCAPP completed its first three-year cycle of on-site evaluations of Canadian faculties during the 1996-97 academic year.
The Canadian Journal of Pharmaceutical Sciences Falters

Another matter of concern that surfaced periodically was the viability of the Canadian Journal of Pharmaceutical Sciences (CJPS). Published from 1966 onward by the Canadian Pharmaceutical Association, the CJPS had grown out of the “Scientific Section,” edited from 1957 to 1965 by representatives of the CCPF, in the Canadian Pharmaceutical Journal. The CJPS was edited by M. J. Huston, the Dean of the Faculty of Pharmacy and Pharmaceutical Sciences at the University of Alberta. The CJPS operated with financial support primarily from the CPhA, CFAP, and the National Research Council of Canada, all of which was crucial to maintaining the publication.

In 1979, Dr. Hindmarsh was asked to chair an AFPC committee to study the feasibility of the Association taking over the publication of the CJPS, since CPhA had given notice that it was no longer interested in doing so. A very comprehensive report was presented at the 1980 AFPC Annual Meeting. The Committee pointed out the problems that would be encountered and the improvements that would need to be implemented, but recommended that the AFPC take over publication of the CJPS. This is an indication that an adventurous spirit was alive in the AFPC, but history would show that the venture would not come to fruition and that the Journal would cease publication in 1982.

The AFPC Develops Closer Relationships with the PMAC

During the 1978 AFPC meeting, at the request of its Interprofessional Relations Committee, the Executive met with representatives of the PMAC and the ADPC. W. M. Garton, PMAC President, acted as chairman and brought with him Gordon Postlewaite, Director of Communications, and J. Doherty, Chairman of the Board. The AFPC was represented by Drs. F. Teare, J. Blackburn, C. Briggs, W. Hindmarsh, and A. Wood; and ADPC, by Deans B. Schnell and P. LeBlanc. This was an important meeting, paving the way toward a much closer relationship between industry and pharmaceutical education and research.

Among the early manifestations of that new cooperation was the first edition of the Research Directory, published in 1980 by PMAC. This was a directory of pharmacy research activities at Canadian universities and
provided an excellent source of information about the individual researchers in the pharmacy faculties. The first copy was presented at the Annual AFPC Meeting that year to President Mosklayk by Guy Beauchemin, PMAC Executive Vice-President.22

A year later, AFPC Executive Director J. A. Wood reported that the PMAC had approved an award of a $1,000 Industrial Fellowship to a Faculty of Pharmacy member for the year 1981, with the member to be selected by AFPC. The purpose of the Fellowship was to help defray the expenses of a visit by a faculty member to selected pharmaceutical manufacturing companies in Canada. The AFPC and PMAC expected that the benefits to be derived would include:

(i) promotion of the liaison that is being developed between the academic community and the pharmaceutical industry;
(ii) improving one’s knowledge about several facets of the industry, particularly research, production quality control and marketing; and
(iii) the use of this experience in the enrichment of one’s teaching and research.23

PMAC President Garton passed a cheque to President Colin Briggs for subsequent presentation to the first recipient, Dr. Dick Moskalyk. PMAC Director of Communications, Gordon Postlewaite, commented that “Through publicity of the program and the insight into the industry, which will no doubt be reflected in Dr. Moskalyk’s lectures to his students, I hope this program will prove to be a mutually profitable experience for those directly involved, and of long term benefit to perceptions of the industry in the academic milieu of pharmacy.”24 A similar award was made to the ADPC, all of whose members were also members of AFPC, Dr. D. Yung being the first recipient.

The AFPC Executive Director indicated that most organizations with similar aims and objectives to those of the AFPC had awards programs. He suggested that the AFPC Committee on Goals and Objectives could study the matter and bring in a report for the 1982 meeting.25

At the 1982 AFPC Annual General Meeting, Dr. Moskalyk presented a very comprehensive report on the 1981 PMAC Industrial Visitation Fellowship,
and there was considerable discussion arising therefrom, all of which was recorded in the 1982 Proceedings. Dr. Moskalyk’s report contained a number of recommendations, which he summarized as follows:

1. That the AFPC and PMAC cooperate in the preparation of a brochure elaborating the career opportunities for pharmacists in the pharmaceutical industry and that these be made available to all schools of pharmacy. Additional materials such as video-cassettes or other audio-visual material might also be considered.

2. The PMAC, in cooperation with individual pharmacy schools, organize and support biennial student visitations of several days’ duration to provide first-hand opportunities for undergraduate pharmacy students to view and experience pertinent aspects of the Canadian pharmaceutical industry in operation.

3. That the AFPC and its member faculties work together with the PMAC and their member companies to promote legislative and policy changes which would create more favourable incentives for innovative research investment in Canada. Other than outright withdrawal of the legislation, consideration should be given to including amendments such as the following:
   (a) that compulsory licensing legislation exclude drugs that are discovered and developed in Canada,
   (b) that applicants for a compulsory license on a particular drug be required to add to the “body of knowledge” on that drug before such a license is granted, and
   (c) that the royalties paid to the holder of the patent be increased.

4. That the AFPC and the PMAC give consideration to establishing an Industrial Pharmacy Residency Program at selected industrial sites in Canada.

5. That the PMAC continue to provide this award, but that they expand the program at the earliest possible date so that more academics can derive the benefit of this most rewarding and beneficial experience.

Dr. Moskalyk noted that pharmacy research and graduate programs are not well known in industry and as a result the faculty in Alberta had a visit by industry management. He felt that now industry would better appreciate the programs in pharmacy faculties and would seek help from these rather than going to chemistry or pharmacology faculty members as a matter of
course. He appealed for a better distribution within industry of the Directory of Pharmacy Research Activities.  

Dr. Les Chatten commented on the small number of pharmacists in industry and the Health Protection Branch. He hoped that something would come of this report and program because it was difficult for western provinces to send students to industry in the East, and hence students of western faculties did not receive the exposure to industry that they should. Regarding the Compulsory Licensing Law, he was optimistic that the government would respond to the pleas of industry and the comments in this report. He said it appeared to him that the government tended to discourage research in industry and elsewhere.

Dr. Alex Wood noted that Canadian pharmacy industry was primarily a branch-plant operation, which makes it very difficult for pharmacy graduates to enter the research areas. He noted that years ago, Dr. Modest Pernarowski tried to convince industry that pharmacists had a training that would be valuable in dealing with government—a problem that continued to exist. Dr. Moskalyk had mentioned in his report that when sabbatical leaves of pharmacy professors to industry were discussed, a major concern was with the secrecy aspect of the basic research laboratories. Regarding the question of secrecy, Dr. Wood noted that there was a very considerable movement of employees from one industrial firm to another and that this would be the place for important secrets to change hands rather than through faculty.

Dr. Tawashi noted that in a number of cases the pharmacy student did not go to industry because the pay schedule could not compete with the more traditional role (as a community pharmacist), but that this was gradually changing. He said that another problem in Canada was that for a number of years the pharmaceutical industry did not support research and did not consider investment in the training of pharmacy students at any level. This resulted in many faculty members changing the direction of their research away from basic pharmaceutics to a more clinically-oriented program in order to obtain funding from government agencies.

Gordon Postlewaite expressed a commonality of interest in Dr. Moskalyk’s report between industry and the faculties.

Dr. Moskalyk stated that manufacturing is a branch of pharmacy and that
if we do not do something about getting some of our own people into industry, we could lose any sense of association with this area of pharmacy. Regarding industry’s statement that they seem unable to recruit pharmacy students, Dr. Moskalyk suggested that their methods of recruitment were inadequate. The level at which pharmacy graduates enter industry was discussed, and it was noted that our graduates frequently entered industry through the sales branch. J. A. Wood suggested that the industry should take a more active role in recruiting graduates and publicizing the long-term benefits of a career in industry.

There was discussion about Dr. Moskalyk’s recommendation number 2 above with deans of pharmacy and the chief executive of several companies in Montreal and Toronto. It was agreed that the PMAC would support student visits and that the deans and the AFPC would organize the student selection.

Aside from some of these more formal associations between the AFPC and the PMAC, the AFPC also made useful contacts with individual companies. Thus, an event of particular interest at the 1980 AFPC Annual Meeting was the AFPC/Lilly Canada Communication Skills Workshop. Principal facilitators were Baxter Rowsell of Eli Lilly Canada along with Bill Pillow of Eli Lilly, Indianapolis, who were responsible for organizing the Workshop faculty and for arranging to have them stay over and contribute to the AFPC Teachers’ Conference.

The AFPC Reaches Out

In his President’s Address at the 1981 Annual Meeting, Dr. Colin Briggs raised the issue of whether AFPC ought to do something to assist underdeveloped communities. He wrote:

The majority of Canadians are well served for their pharmaceutical requirements. We may have concerns about patient compliance, drug information, clinical pharmacy, etc., but on the whole the distribution of pharmaceuticals operates smoothly. Most people receive the drugs they require and they can afford them or the government or an insurance scheme pays. This is not the case in 3rd world countries (or in Canada’s North). Drug distribution methods are often poor, information is lacking and there is a shortage of trained personnel. These countries (and territories) are asking for help, particularly
for personnel and supplies. Can we, or should we, do more to help them?"38

Dr. Briggs in his address also makes a plea for a more active promotion of a public image for pharmacy on the basis that education on drugs should not be restricted to pharmacists and degree programs. He states, further, “School curricula often place excessive emphasis on drug abuse, but I know from personal experience that the school students are frequently lacking in understanding the proper licit uses of medicines. We teach our students to teach their patients, but I think we should do more to educate the general public, and the best way to do this is to start in the schools.”39 He carries this theme further, into the realm of the public domain of funding:

I was told recently that Pharmacy and the pharmacy convention were “soft news,” but only last week there was a headline in our paper which stated that drug store break-ins had reached a new high. It is a pity that more productive aspects of our profession don’t make the front page. Did anyone mention that medication helped the Pope’s recovery? Or the importance of drugs in modern kidney treatment? How often does Canadian pharmaceutical research get into the papers, let alone the front page? Why are columns in the newspapers dealing with drugs and their use normally written by physicians? Some people consider these things unimportant, but it is public image that influences the fundability of projects, even in times of constraint. Can we do more to promote this image for Pharmacy education?40

******

There was another notable event during this time period that deserves mention, even though it doesn’t fall into any of the preceding topics. In 1979, the American Association of Colleges of Pharmacy presented the prestigious Lyman Award—for the most outstanding article in the American Journal of Pharmaceutical Education—to David W. Fielding and Gordon G. Page of the University of British Columbia Faculty of Pharmaceutical Sciences. This was the first time that the award had gone to individuals at an institution outside the United States.
References


40 *Ibid.*, 34.
The Accreditation of Constituent Faculties Becomes a Reality

Perhaps the most significant role initiated in this time period of the AFPC was that of developing a procedure for the accreditation of programs within the faculties of pharmacy in Canada. At the 1984 meeting in Vancouver, Drs. Jacques Gagné and R. Tawashi reported that they had met with Dr. Dan Nona of the American Council on Pharmaceutical Education. After some discussion, it became clear that several avenues were available for an accrediting body in Canada. One that was suggested was to have a joint United States/Canada accreditation procedure similar to that used by veterinary medicine. This would allow the new accreditation procedures in Canada to take advantage of a wealth of experience gathered in the USA. It was considered likely that costs would also be reduced by avoiding duplication of effort. The disadvantages of such a system could include some loss of control from the Canadian perspective and the possibility that American accreditation requirements were superior to the recommended curriculum already in place in Canada.

In 1986, in Quebec City, Keith Simons presented a report on his meetings with the American Council on Pharmaceutical Education. This report was accepted as a first step in developing an accreditation process for programs in Canadian faculties of pharmacy.

† Professor, Faculty of Pharmaceutical Sciences, University of British Columbia and Executive Director, AFPC (1986-1992)
At the AFPC meeting in Jasper the following year, the first set of guidelines for the accreditation process was presented along with a preliminary budget. The budget was thought modest, at an estimate of approximately $32,000. However, the fact that each constituent faculty would have to contribute additional funds made some of those present nervous. The Conference of Pharmacy Registrars of Canada (CPRC) noted that they really did not have a budget per se, and thus their contribution to general expenses could be difficult to assume. Despite the fact that the sum budgeted contained a stipend for an executive director, it was suggested that it might be impossible to find a viable candidate for such a figure. It was decided, however, that this was a reasonable first step and that further consultation with the faculties involved would have to take place before the accreditation process could be considered viable.

Keith Simons presented a position paper on accreditation at the Saint John meeting of AFPC in 1988. While there was general agreement that the process was going in the right direction, considerable concern remained about control of the Accreditation Council once it was set up. Furthermore, the faculties and the AFPC feared that they would lose some control of the direction of the proposed Council if it were totally autonomous. At the same time, they realized that in order to be effective and recognized, a true accrediting body would need to consist of a balance of representatives from all the organizations involved in the process.

In 1990 at the AFPC meeting in Regina, Sylvia Wallace proposed a new set of guidelines for the accreditation process along with a revised budget that was almost twice that of the original proposal. It included an increase in fees from the faculties and an increase in the stipend paid to the Accreditation Council’s executive director. While there was not unanimous support from the faculties, it was realized that this was a reasonable budget for the proposed body and its executive director. Members accepted the fact that it was now time to proceed with the development of an accreditation council and that the necessary next steps needed now to be taken with the constant input of all the organizations concerned.

Finally, at the AFPC 1991 meeting in St. John’s, Newfoundland, the accreditation proposal was finally accepted and the AFPC appointed two members of the Accreditation Council, Pauline Beaulac and David Fielding. Wayne Hindmarsh had been appointed as a representative from
the Pharmacy Examining Board of Canada. Although not all organizations had yet appointed a representative at this time, the entire document was to be submitted to the new accreditation Council along with a record of discussions leading up to this stage and the budgetary history.

The Canadian Council for Accreditation of Pharmacy Programs was duly established at the 1993 Vancouver meeting with the election of its first president, Dr. Wayne Hindmarsh. Dr. Bruce Schnell became the Executive Director and Dr. Joyce MacKinnon from London, Ontario was selected for the non-pharmacy academic director position on the Council. Other members included: Dr. Pauline Beaulac and Dr. David Fielding, for the AFPC; Mr. Fred Boyle and Mr. Bob Nakagawa from the CPhA; Dr. Wayne Hindmarsh from the PEBC; Dr. Pierre-Paul LeBlanc from the ADPC and Mr. Norman Thomas from the Conference of Pharmacy Registrars of Canada (CPRC). The new council was to meet and, using the guidelines adopted at the 1991 meeting in Newfoundland, to design an accreditation procedure and to select the faculties which would be evaluated for accreditation status in the initial stages of the Council’s activities.

Pharmacy Management Gets Close Attention

For many years the AFPC had discussed the fact that courses in pharmacy management and pharmacy administration were, by and large, not progressing as well as hoped in most faculties. While they realized that many pharmacy management concepts were provided either in separate courses or as part of courses in forensic law, it was also evident that this was not really sufficient for student needs. In addition, many of the larger pharmacy employers had expressed concern that our students were not well prepared in these areas.

To this end, Jack Summers reported in Montreal at the 1983 meeting that he had appointed a committee to look into the areas of pharmacy management and administration. Chaired by Dr. John Bachynsky, the special committee was charged with developing a position paper on this aspect of pharmaceutical education.

In 1984, the Education Committee recommended that 110 hours of pharmacy administration/management instruction should be included at some point in Canadian pharmacy curricula. These needed not be in a single course or a
combination of courses but at least should be included at some points in the instructional program. In addition, it was recommended that elective courses should also be offered in these areas, and several pertinent suggestions were made.

**The AFPC Examines Its Constitution and By-Laws**

For many years the Association operated under a constitution that was adopted in 1969, then amended seven times in a little more than a decade thereafter—in 1970, 1971, 1975, 1977, 1978, 1979 and 1982. Although the modifications were relatively minor, the constitution would likely not have stood the basic guidelines established by the federal Department of Consumer and Corporate Affairs for a voluntary association such as the AFPC.

Accordingly, discussions were initiated with Mr. Jan Apse, a lawyer for the CPhA. The first concerns of the AFPC were that, according to the regulations for organizations with membership designations, the Association should have a system of “one member - one vote”. This recommendation did not seem to comply with the general feelings of the members since with one general meeting each year in different areas of the country, it would be difficult to gauge the feelings or wishes of the various faculties. Consequently, it was considered appropriate for the AFPC to have a policy of “one faculty - one vote”, and that this vote should be cast by the Councillor representing each constituent faculty.

In 1990, in Regina, Pauline Beaulac presented a revised set of reports that separated the By-Laws from the Constitution, thereby making it acceptable to the Department of Consumer and Corporate Affairs. Consequently the AFPC membership approved the Constitution; however, they sent the By-Laws back for further study since they still wanted to have the system of “one faculty - one vote”.

By 1991, the AFPC again revised its By-Laws and included a provision to stay with the “one faculty - one vote” concept. Thus the Association of Faculties of Pharmacy of Canada finally received its Charter from the Department of Consumer and Corporate Affairs, 8 December 1991—at last we were a recognized, legal association in Canada! One aspect of the new By-Laws was a change to a two-year term of office for the President,
President-Elect and the Immediate Past President. This would mean essentially a six-year commitment to the AFPC executive. While some thought that this might be excessive, there was also agreement that a one-year term put pressure on the presidents to implement and complete the tasks undertaken by the Association within the period of their mandates.\textsuperscript{11}

\textit{The Canadian Journal of Pharmaceutical Sciences Ceases Publication}

A rather sad moment occurred at the 1982 meeting for the AFPC in its discussions and goals. For it was at this meeting that the Association had to accept the cold fact that it could not assume publication of the \textit{Canadian Journal of Pharmaceutical Sciences} as it had hoped to do. As Professor Summers stated: “There are three items that must be considered: first, an editor must be found; secondly, a Faculty must take on the role of providing a home for the Journal, total publication and financial management; and thirdly, approximately $10,000 was needed as a solid financial basis”.\textsuperscript{12} After considerable discussion, it was realized that even with the support of the Canadian Foundation for the Advancement of Pharmacy, the Association could not accept the burden of publication. In addition, an editor could not be found who was prepared to undertake this position. Thus, a motion passed that “the AFPC is not able to assume responsibility for the continued publication of the Canadian Journal of Pharmaceutical Sciences”, and publication terminated. This decision was made with regret since it meant that Canada no longer had a scientific pharmaceutical journal to call its own.

\textbf{Doctor of Pharmacy Programs Emerge in Canada}

The possibility of having a Pharm.D. program in Canada had been the topic of many discussions over the years. However, in view of the costs involved and the lack of personnel, optimistic suggestions often met with the financial realities of launching such a program in one or more faculties of pharmacy in Canada. We had, perhaps, become complacent since we could always send our potential students to colleges in the United States for such studies.

Dr. Ingrid Sketris presented the results of a survey of Canadian pharmacy students to the 1984 AFPC meeting.\textsuperscript{13} They showed substantial support for a professional post-graduate program in pharmacy, the Pharm.D., and
lesser support for a graduate clinical M.Sc. or residency program. On the other hand, faculty members surveyed preferred the M.Sc. with a clinical component or, as a second choice, the Pharm.D. Following discussions at the meeting, AFPC decided that the ultimate goal of a post-baccalaureate program in Canada should focus on the Pharm.D. and the development of a recommended curriculum. By 1994 two constituent faculties—those at the University of British Columbia and the University of Toronto—had Pharm.D. programs in place.

**The AFPC Develops its Awards Program**

As a result of discussions between the pharmaceutical industry, the Executive of AFPC and the ADPC, a number of awards became available to faculty and students of pharmacy in Canada. The first of these was the McNeil Award initiated in 1982 to recognize the contribution of outstanding research in pharmacy and sponsored by McNeil Laboratories.

Syntex Inc. introduced the Syntex Award at the 1987 Jasper meeting to recognize research excellence by a graduate student in a faculty of pharmacy in Canada. That year also saw the introduction of three post-graduate awards for pharmacy students in the first year of their programs. Merck Frosst Canada Inc. provided the funding for these awards. The initial intent was to direct one award, the “Julien Braun Award”, to a student from Quebec, while the other two awards were to be available to all students in Canada.

The 1989 meeting in Portland of the AFPC with the American Association of Colleges of Pharmacy was the first such venture since the highly successful joint 1965 AACP/CCPF Teachers’ Seminar hosted in Toronto. The Portland meeting also heralded the establishment of two new awards funded by the Canadian Foundation for Pharmacy. The $1,000 awards were to be given for the best poster and podium presentations by graduate students at the AFPC portion of the conference. Since there were only poster presentations at the 1989 meeting, only one award was presented on this occasion.

In 1991, at the meeting in St. John’s, Sterling-Winthrop initiated an award to a pharmacy graduate student in Canada to recognize outstanding research and academic achievement.
Over the period 1982-1992 the Pharmaceutical Manufacturers Association of Canada continued to provide support for an increasing number of undergraduate and graduate awards, including summer support for pharmacy students in research areas in Canada. Many of these awards were undertaken in conjunction with the Medical Research Council of Canada.

The AFPC, itself, instituted a new award called the “Award of Recognition”. This award, a plaque, was made to non-faculty members whose contribution to the Association had not received official recognition in some tangible way.

The AFPC introduced still another award, in 1992, called the “Special Service Award”. In the form of a plaque, it recognized service to the Association by its own members. That year also saw the introduction of the Upjohn New Investigator Award with its first presentation made in 1993. The award included a financial component of $1000 as well as a plaque and travel expenses to attend the AFPC annual meeting. The terms of reference included the requirement that the applicant be less than five years in the professional stream at the time of application.

Appendix III in the section at the end of this book provides a list of award winners for each year after the awards mentioned above were established.

References

The Challenge of Crystal Ball Gazing: Predicting the Next Half Century

by Helen M. Burt†

Introduction

I wrote this chapter of the book in 1995 at the request of Bernie Riedel, the editor. At that time, I was familiar with all aspects of the Association’s activities and plans, having just completed an 8-year stint on the AFPC executive and prior to that, a 4-year term on council. It is now spring of the last year of the millennium and this project is about to be completed! Although 4 years have passed and I have not had any significant, direct involvement with the association during that time, I decided that much of what I originally wrote still seemed appropriate. Therefore, the reader should keep in mind that the quotes and comments were written in 1995. For the purposes of completing this assignment in 1999, I have included only a few additional comments in some sections!

I decided that two approaches for writing this chapter seemed possible. One would be to go back over the data and various reports of the AFPC of the last 10 years or more, with a view to trying to analyze/model any observable trends and thereby attempt some projections and predictions for the future. The other approach would be to solicit the views and ideas of pharmaceutical scientists, practitioners and administrators on “the next 50 years” and incorporate these into the chapter.

† Professor, Faculty of Pharmaceutical Sciences, University of British Columbia; President, AFPC (1990-92)
On further consideration, I rejected the first approach of trend analysis, modeling and projections—given the likely outcome of such an endeavor. Individuals with expertise in this area (I have none, by the way!) would question the assumptions, the approximations, the model, the statistics and ultimately therefore the relevance of the predictions and conclusions.

Therefore in the summer of 1994 I sent letters requesting some “visioning” on the following issues:

The future of academic pharmacy.

The future of pharmaceutical research in Canadian faculties of pharmacy.

Predictions for curriculum development, teaching strategies, areas of specialization, Pharm.D. programs, etc.

The challenges/issues faced by Canadian faculties of pharmacy in the next 50 years.

The challenges/issues for the AFPC in the next 50 years.

The letters were sent to the AFPC councilors, Deans of Pharmacy, affiliate and associate members of the AFPC, representatives of various organizations (CCAPP, PEBC, CFP, CPhA, CSHP, PMAC, AACP, CACDS), colleges and pharmaceutical associations of all provinces and representatives of numerous pharmaceutical companies. I received 19 replies from the 97 letters sent out, a response rate of 20%, which may be considered a reasonable return. My grateful thanks to all those individuals who sent me their thoughts and views. Many respondents also granted me permission to quote their comments in the chapter and again, my thanks to them.

Before proceeding, I should point out that several people noted in their responses that to attempt to discuss the challenges of the next 50 years is not only overly ambitious but probably impossible and that I would be advised to consider a shorter time frame, of say 10 years. Accordingly, the reader may wish to bear in mind that some of the visions outlined in this chapter may be focused towards the next decade, but that some may indeed have an expanded horizon of the next half-century.
"The accelerating rate of change . . . the rapidly changing environment . . . major change . . . change is occurring rapidly." These phrases stand out as the general themes of the responses I received. One comment on change, which also reinforced my decision to reject an analysis of past trends, was from John Bachynsky: "The past is less and less relevant in predicting the future as the rate of change accelerates." In an address to the 1994 AGM of the CSHP, Wayne Hindmarsh noted that "higher education is going to change more in the next decade than it has in the last 50 [years]." Finally, as rather nicely put by an ex-UBC colleague of mine, now at the University of Montana, Tim Stratton: "Things are changing so fast in the health care area on both sides of the 49th parallel that my predictions and a looney are worth about a candy bar!"

"Change" also figures prominently in recent articles, commentaries and editorials in pharmaceutical journals and reports. "The Challenge of Change" was the title of the PMAC’s Annual Review of 1994. In an article on the international pharmaceutical industry was the statement: "Around the developed world, the pharmaceutical industry is facing profound change". "Agenda for Change" and "Mastering Change" were the themes of the 1990 and 1992 AACP Annual Meetings. An article on the changes in the U.K.’s National Health Service was entitled: "The Certainty of Change". In a discussion of the provision of pharmacy services in the new National Health Service was the following statement: "These changes are so radical and occurring at such a rate that many of us feel very uncertain about the future".

In the address of the president-elect at the 1994 AACP Annual Meeting, David A. Knapp emphasized the commitment of the AACP to reformulating curriculum objectives toward the goal of preparing all graduates to deliver pharmaceutical care. He went on to make the following comment on change in academia: "Our pace of change has been tortuously slow, especially when measured against the pace of change in the external environment. For the academic world, we may be doing okay. After all, the pace of change in academia is often somewhere between that of a slug and a sloth!"
There is little doubt that the profession of pharmacy in all its aspects (industrial, hospital, community, academia, etc.) has faced changes before. These have included the meteoric rise and growth of clinical pharmacy and therapeutics, social and administrative pharmacy, pharmacoeconomics, biotechnology, advances in computer technology and its use in patient record keeping, communications and drug information, to name but a few. In my view, we have responded and adapted fairly well to these and many other changes. Nevertheless, the take-home message seems clear: the profession is facing a period of major upheaval and dramatic changes, and these changes appear likely to take us well into the next century.

In the following sections, given that the focus of the chapter is academic pharmacy and the AFPC, the various viewpoints and visions of the next 10 years will reflect some, but not all of the changes occurring within the different areas of the pharmacy profession.

**Six Action Shoes Defined**

In May 1991, I began my term as president of the AFPC and as part of my address at the annual meeting, I explored the issue of the viability and future of the organization using Edward de Bono’s “Six Thinking Hats” technique. It seemed to work as an attention-getter! Even if people could not recall what I said, they could at least remember the 6 hats I wore! So when I came across the sequel, entitled “Six Action Shoes” with a little adaptation, I decided this approach had merit in providing a framework for this chapter. Shoes imply action. One needs shoes to walk to a given destination. Each pair of action shoes is assigned a different color and covers one particular mode or style of action. These are summarized below.

**Navy formal shoes:** Signify routine actions using defined policies and procedures. The navy shoe action mode requires the carrying through of established routines and emphasizes formality. Routines can be valuable in helping people avoid errors and often provide the best way of doing something. They should be flexible enough to cope with special circumstances.

**Grey sneakers:** Represent a quiet low-key casual mode in which thinking and collection of information is emphasized. The grey sneaker action mode involves investigation, development of ideas, leads, theories, hypotheses,
data gathering, collecting and absorbing information and use of the information to test a hypothesis, problem solve, etc.

**Brown brogues:** The emphasis in brown brogue action is on practicality, pragmatism and good sense. The brown brogue action mode is determined by the actual situation. It is effective, flexible, doable and simple. The actions are a combination of good values, good sense and good principles.

**Orange gumboots:** The orange gumboot mode is directly concerned with emergency situations. It is characterized by fast moving events and unpredictable, unstable and unique situations. Urgent action is usually required. The orange gumboot action mode involves the assessment of the situation and the risks, planning and prioritizing the actions to be taken and the fallback positions. The focus is on resolving the crisis as soon as possible and getting the situation under control with constant reassessment of the action.

**Pink slippers:** Signify a warm, caring, sympathetic, compassionate action mode. The pink slipper mode applies to all actions involving human feelings and human caring. Simply put, people matter.

**Purple riding boots:** The purple riding boots action mode indicates an authority role. Actions must be consistent with the duties, obligations and expectations of the official role performed by an individual. The authority role provides leadership, power and responsibility.

With a little creative licence, one can assign each of these action shoes or action modes to the activities which respondents described in their 10-year vision of areas such as pharmaceutical care, curriculum, research, academic and AFPC leadership and faculty development.

**A Long-Range Vision: Pharmacy’s Action Shoes**

**Grey Sneakers**

This is a straightforward matching of grey sneaker action (investigation, data collection, problem solving, etc.) with pharmaceutical research activity at Canadian faculties of pharmacy and other institutions. From the individuals who commented on pharmaceutical research, the general consensus appears
to be that there will be fewer and fewer “individual” researchers and that researchers will collaborate in their scholarly activities. Most people felt that both basic and applied research would be ongoing in faculties, research institutions and hospitals. However, applied research funded by, and in collaboration with, the pharmaceutical industry will almost certainly be more in evidence in the future. While research in Canadian faculties of pharmacy and other institutions has traditionally been supported by numerous sources of funding, government research funding in particular will be severely cut back and there will be a greater reliance on monies from multinational drug companies.

According to the 1994 PMAC Annual Review, pharmaceutical companies are forging alliances outside the industry in order to optimize their R and D investments. The MRC/PMAC Health Program is intended to foster collaborations between scientists in pharmaceutical companies and those in universities and other research institutions.

The National Centres of Excellence program in universities, hospitals and institutes will continue to expand as a means of promoting strong, innovative, collaborative research efforts and of obtaining “the biggest bang for the buck” (R.J. Ensom).

It is felt that specialized graduate programs in areas such as biotechnology, pharmacoepidemiology, pharmacoeconomics, drug-delivery systems and toxicology will continue to grow and that a greater emphasis needs to be placed on pharmacy practice-based research. More faculty members in pharmacy practice should be involved in practice-based research and universities must recognize the scholarly contributions of individuals working in this area. As noted by Y. Shevchuk: “Practice-based researchers need to . . . get out there and practise, do exciting things and be good mentors and role models.”

“There is both a strong demand and expectation from the profession for Faculties of Pharmacy to conduct extensive professional practice research. While this demand exists, the profession must be motivated to support this type of research by both participating actively and contributing financially” (R.J. Joubert).
Looking at pharmaceutical research in 1999, there have been several important developments over the last 4 years:

Pharmacy-practice research continues to gain momentum and a national Canadian Pharmacy Practice Research Group has been established.

New National Centres of Excellence (NCE’s) have been, and will continue to be funded, with pharmaceutical scientists participating in these centres.

The Canadian Foundation for Innovation (CFI) was established in 1997 by the Government of Canada, “to increase the capability of Canadian universities, colleges, hospitals and other eligible institutions to carry out world-class scientific research and technology development.” The CFI will fund new infrastructure projects, jointly with funding partners, across the country.

The Canadian Society of Pharmaceutical Scientists (CSPS) was established in 1996 to foster excellence in pharmaceutical research. The electronic journal, the Journal of Pharmacy and Pharmaceutical Sciences, is the official, international journal of CSPS.

In 1998, a Task Force made up of representatives from the broad health research community, proposed the concept of the Canadian Institutes of Health Research (CIHR). The CIHR would ultimately replace the existing Medical Research Council of Canada. A proposal has been submitted by pharmaceutical scientists from academia, government and industry, for the establishment of an Institute of Drug Research, Discovery and Development, as part of the CIHR.

There can be little doubt that these developments will impact pharmaceutical research well into the next century.

**Purple Riding Boots**

The purple riding boots mode signifies the “official position” with a requirement for providing a clear message and consistent, responsible action. I felt that this action mode was relevant to a vision for the AFPC and the challenges facing the organization in the next decade.
Very few responses referred specifically to the AFPC, but there was a clear consensus that AFPC needs to take on a greater role in pharmaceutical education and in the evolution of pharmacy into a patient-care focused profession.

“With changes in methods of delivery in education ... we will need this ‘venue’ (AFPC) for national input and sharing of ideas ... AFPC will have a big influence on CCAPP by helping set the direction of pharmacy education in Canada” (K.W. Hindmarsh).

“As a link to the profession, the AFPC will have the opportunity to work with the other pharmacy organizations to shape the role of pharmacy and the standards of practice” (J. Bachynsky).

“The AFPC has a responsibility to reflect the needs of pharmacy into curricula and to fulfill the requirements of society and the health care system in the quality and quantity and orientation of future pharmacy professionals. The AFPC therefore needs to communicate with, and be represented at, the highest possible level in national and provincial pharmacy organizations with clearly stated mission and goals and with strong membership endorsement” (F.M. Attalla).

“I would anticipate that the future will see much more collaboration between faculties of pharmacy and other key players such as the licensing bodies, professional associations, industry and third party payers. This collaboration will in part be driven by the realization that each group is working towards a similar goal and will be more likely to reach that goal working as a team. It will also, in part, be driven by issues and activities that are common concerns” (A.J. Dunsdon).

In summary, in assuming a purple boots action mode for the AFPC, the future challenges for the organization are that it should:

- Be a stronger advocate for faculties of pharmacy.
- Meet the needs of its individual members.
- Ensure it has a clear vision and action plan.
Be a part of a national network of organizations and institutions working towards common goals.

Play a greater role in pharmaceutical education. Specific examples of this role might be assisting faculties of pharmacy with the changing teaching and learning strategies, sharing curricular issues and developments, helping to implement non-traditional programs and specialty residencies, sharing developments in computer-aided instruction, etc.

Four years later, the AFPC has indeed chosen to play a greater role in pharmaceutical education. The association has developed documents on “Educational outcomes for a baccalaureate pharmacy graduate in Canada” and “Development of levels and ranges of educational outcomes expected of baccalaureate graduates.” In 1999, a draft of “Educational outcomes for a post-baccalaureate doctor of pharmacy graduate in Canada” was produced. These reports will continue to assist and guide the faculties of pharmacy in the process of curricular change.

**Navy Formal Shoes**

These shoes signify routines, rules, laws, regulations, formality, policies and procedures. How might this action mode be of importance? My interpretation was to consider the challenges ahead for the profession of pharmacy, faculties of pharmacy and the AFPC in terms of the monitoring or regulation of their activities by other groups.

One such group is the CCAPP (Canadian Council for Accreditation of Pharmacy Programs). The mission of this Council is “to assess the quality of professional degree programs in pharmacy in Canadian universities and to promote the continual improvement of such programs.” The CCAPP should play an increasing role in assisting the faculties of pharmacy in the advancement and improvement of pharmaceutical education and ultimately therefore in the improvement of pharmacy practice.

The various levels of government in Canada are likely to continue to have a major impact on university education, pharmacy practice, pharmaceutical research and development and health-care policies in general, well into the next century. Specific examples to date include: the National Pharmaceutical
Strategy; the Lowy Inquiry—Prescriptions for Health, Report of the Pharmaceutical Inquiry of Ontario; the B.C. Royal Commission on Health Care and Costs; Bill C22; Bill C91; the Canadian Coordinating Office for Health Technology Assessment, to name but a few.

At the international level, there is the NAFTA (North American Free Trade Agreement). As noted by C.E. Trinca, “the implications of such an agreement (NAFTA) on science, education and practice in the U.S., Mexico and Canada are profound and range from access to pharmaceuticals to reciprocity for practitioners.”

I believe the challenge facing all the various pharmacy associations, organizations and universities is to exert a strong, and where possible, a united voice to influence the outcomes, decisions, policies, procedures and regulations of political and other groups at all levels, locally, nationally and internationally.

**Pink Slippers**

Pink slipper action involves human feelings, caring, compassion, understanding, empathy and a willingness to listen. It is the action mode that most often mixes with other action modes. For example, navy shoes and pink slippers could be combined to mean routine procedures carried out in a compassionate manner; grey sneakers and pink slippers could indicate investigation using a sensitive and considerate manner to obtain information.

Pharmacy should be considered a “pink slipper profession” particularly as we evolve to a patient-care focused profession. I believe a major challenge for pharmacy educators and the AFPC and its members is to move as rapidly as possible toward the goal of preparing all graduates to deliver pharmaceutical care.

Wherever people are involved, there is a pink slipper element. As teachers, supervisors, leaders, employees, managers, employers, we should strive to always maintain a humane and caring focus in our interactions with people.
Brown Brogues and Orange Gumboots

I reserved this combination of action shoes to describe a vision for pharmaceutical education. Brown brogues signify action, which is guided by objectives, based on sound values and principles and which is simple, effective, practical and yet flexible. Orange gumboot action is urgent action. It requires courage, a sense of priorities, focus and decisiveness. Thus the combination of brown and orange might mean practical action in a rapidly changing or emergency situation.

A sense of the requirement for urgent action in implementing changes in pharmaceutical education may be gathered from the following quotes:

“I . . . urge all of you to share my sense of urgency that we all pick up the pace to implement change in pharmaceutical education”.

“With the need for the rapid transition in Pharmacy, Faculties and the profession need to react swiftly” (K.W.H. Hinmarsh).

“The culture of the pharmaceutical profession is changing and the provision of seamless pharmaceutical care could be the only hope for survival”.

In my view, the combination of the orange mode with the pragmatic brown brogues is logical because curricular revision must always be based on sound principles and be guided by objectives. The direction of the change in pharmaceutical education is quite evident from the following and many other responses, which I received:

“To become part of the Health Care Team and to acquire the knowledge, skills and experience needed to be the individual that others will seek out for information on drugs, we have to start (providing our students) from day one with substantial exposure to patients with real drug-related issues that need to be solved. This may mean a radical and painful adjustment in the education of pharmacists” (D.W. Fielding).
“Academia will continue to be challenged to train pharmacists who can adapt easily to a rapidly changing environment. For example, the pace of change in the evolution of the profession from clinical practice to pharmaceutical care to the next model will accelerate and pharmacists will need to be prepared to adapt to these changes” (R.J. Joubert).

“We in academia must continually monitor the rapid changes that are occurring in the ‘real world’ of health care, continually review our curricula and continually adapt our programs to meet the needs created by those changes” (T. Stratton).

Many respondents commented on more specific changes in pharmacy education and methods of delivery of education. For example:

“The ever expanding knowledge base will shift education from knowledge transmission to the development of life-long learning ability through problem-based and student-centered learning approaches. More emphasis will be placed on other sciences like psychosocial sciences, ethics, economics and communication. Computers and information managing technology will play a very important role in the learning process” (P.P. LeBlanc).

“Curriculum and teaching must expand to include new areas such as pharmacoepidemiology, pharmacoeconomics, molecular biology, biotechnology, gene therapy, information technology, communication techniques, etc.” (F.M. Attalla).

“Traditional lectures will be fewer with more emphasis on small group learning, self-directed learning, computer-assisted instruction and more problem solving. There needs to be more integration of basic science with pharmacy practice lectures/topics. We must instill in our graduates the desire or need to be lifelong learners” (Y. Shevchuk).

It is apparent that the challenges for pharmaceutical education over the next 10 years or more are numerous. The vision is that of continued revision of pharmacy curricula with a focus on preparing graduates to practice pharmaceutical care, the incorporation of new areas of the basic, clinical, social and administrative sciences into curricula and changes in teaching methods.
In 1999, these issues continue to be the challenges facing pharmaceutical education. Faculties of pharmacy will, in all likelihood, be developing their learning outcomes-based curricula well into the next century. The learning outcomes approach to curriculum development essentially means basing program and curriculum design on an identification of the knowledge, skills and attitudes needed by pharmacy graduates and society. There is a recognition that we need to move beyond content-driven curricula, to student-centered, inquiry-driven learning. Over the past couple of years, faculties of pharmacy and the AFPC have begun to consider the issue of the entry-level Pharm.D. program in Canada. It is likely that this will continue to be hotly debated over the next 5 to 10 years.

**Concluding Remarks**

I have used the “Six Action Shoes” for the sole purpose of walking you through some of the anticipated challenges which lie ahead. Each section has been laced with quotes which I hope helped tie it all together. To polish it off, I have included below some final comments on faculty recruitment, faculty development and leadership.

“Non-pharmacist faculty will replace the pharmacist faculty retiring . . . . Faculty will be highly specialized in research and at the same time will be asked not to be too specialized in teaching, emphasizing lifelong learning ability instead of transmission of information” (P.P. LeBlanc).

“Some pharmacy educators will be process specialists rather than content experts. They may even teach the softer sciences of patient health guidance, caring and quality of life ethics” (J. Bachynsky).

“The biggest challenge all academics face will be fiscal issues. How can we survive with continuous cut backs in our budgets?” (College of Pharmacy, Dalhousie University).

“The primary responsibility of the dean is to provide leadership to advance the mission of the school. In this time of rapid change, this most often involves the use of a consensus-driven strategic plan. The dean must also be adept at managing the fiscal, personnel and academic affairs of the school. In addition, the dean must provide leadership
so that the school is responsive to multiple constituencies including: faculty, students, upper administration, alumni, other pharmacy practitioners and professional organizations. We need leadership talent from the entire academy if we are to succeed in meeting the challenges of advancing the mission of pharmacy education in these times of rapid change”.11

In discussing the lack of individuals to take on the positions of deans at U.S. Colleges of Pharmacy, C.E. Trinca (1993) noted: “Perhaps not enough has been done to excite, motivate and prepare new talent for the demands of decanal leadership in the closing years of this century.”9

Individuals with leadership talent will undoubtedly be needed if we are to succeed in meeting the challenges facing the AFPC, faculties of pharmacy and the profession in the next 10 or even 50 years.

References

11 Rutledge, C.O. “Do You Need to be a Pharmacist to be Dean of a School of Pharmacy?”, Am. J. Pharm. Ed., 58(1994):351.
Appendices

### APPENDIX I - ANNUAL MEETINGS AND OFFICERS
#### CCPF (1944-1969)
#### AFPC (1969-1994)

<table>
<thead>
<tr>
<th>YEAR</th>
<th>PLACE</th>
<th>PAST CHAIRMAN</th>
<th>CHAIRMAN</th>
<th>VICE CHAIRMAN</th>
<th>SEC/TREAS</th>
<th>ASST.SEC</th>
</tr>
</thead>
<tbody>
<tr>
<td>1944(1)</td>
<td>Toronto</td>
<td>E.L. Woods</td>
<td>E.L. Woods</td>
<td>R.O. Hurst</td>
<td>F.N. Hughes</td>
<td></td>
</tr>
<tr>
<td>1945(2)</td>
<td>Bigwin Inn</td>
<td>E.L. Woods</td>
<td>R.O. Hurst</td>
<td>D. McDougall</td>
<td>F.N. Hughes</td>
<td></td>
</tr>
<tr>
<td>1946(3)</td>
<td>Toronto</td>
<td>E.L. Woods</td>
<td>R.O. Hurst</td>
<td>D. McDougall</td>
<td>F.N. Hughes</td>
<td></td>
</tr>
<tr>
<td>1949(6)</td>
<td>Saskatoon</td>
<td>R.O. Hurst</td>
<td>M.J. Huston</td>
<td>J.A. Marquis</td>
<td>F.N. Hughes</td>
<td>J.G. Jeffrey</td>
</tr>
<tr>
<td>1950(7)</td>
<td>Montreal</td>
<td>M.J. Huston</td>
<td>J.A. Marquis</td>
<td>W.C. MacAulay</td>
<td>F.N. Hughes</td>
<td>J.G. Jeffrey</td>
</tr>
<tr>
<td>1951(8)</td>
<td>Calgary</td>
<td>J.A. Marquis</td>
<td>W.C. MacAulay</td>
<td>F.N. Hughes</td>
<td>D.H. Murray</td>
<td></td>
</tr>
<tr>
<td>1952(9)</td>
<td>Toronto</td>
<td>W.C. MacAulay</td>
<td>F.N. Hughes</td>
<td>D. McDougall</td>
<td>D.H. Murray</td>
<td></td>
</tr>
<tr>
<td>1956(13)</td>
<td>Ottawa</td>
<td>A.W. Matthews</td>
<td>J.E. Cooke</td>
<td>R. Larose</td>
<td>G.C. Walker</td>
<td></td>
</tr>
<tr>
<td>YEAR</td>
<td>PLACE</td>
<td>PAST CHAIRMAN</td>
<td>CHAIRMAN</td>
<td>VICE CHAIRMAN</td>
<td>SEC/TREAS*</td>
<td>RECORDING SEC</td>
</tr>
<tr>
<td>-------</td>
<td>------------</td>
<td>---------------</td>
<td>----------------</td>
<td>---------------</td>
<td>----------------</td>
<td>---------------</td>
</tr>
<tr>
<td>1965(22)</td>
<td>Calgary</td>
<td>A. Archambault</td>
<td>J.G. Duff</td>
<td>G.R. Paterson</td>
<td>A.J. Anderson</td>
<td></td>
</tr>
</tbody>
</table>

**PRESIDENT**
- 1976(33) Saskatoon G.E. Hartnett
- 1977(34) Charlottetown J.W. Steele
- 1978(35) Victoria W.E. Alexander
- 1979(36) Sarnia K.W. Hindmarsh
- 1980(37) Calgary F.W. Teare
- 1981(38) Winnipeg R.E. Moskalyk
- 1982(39) Ottawa C.J. Briggs
- 1983(40) Montreal M. Mezei

**VICE PRESIDENT**
- 1976(33) Saskatoon J.W. Steele
- 1977(34) Charlottetown W.E. Alexander
- 1978(35) Victoria K.W. Hindmarsh
- 1979(36) Sarnia F.W. Teare
- 1980(37) Calgary R.E. Moskalyk
- 1981(38) Winnipeg C.J. Briggs
- 1982(39) Ottawa M. Mezei
- 1983(40) Montreal J.L. Summers

**PAST PRESIDENT**
- 1976(33) Saskatoon G.E. Hartnett
- 1977(34) Charlottetown J.W. Steele
- 1978(35) Victoria W.E. Alexander
- 1979(36) Sarnia K.W. Hindmarsh
- 1980(37) Calgary F.W. Teare
- 1981(38) Winnipeg R.E. Moskalyk
- 1982(39) Ottawa C.J. Briggs
- 1983(40) Montreal M. Mezei

**EXEC DIR**
- 1976(33) Saskatoon K.W. Hindmarsh
- 1977(34) Charlottetown F.W. Teare
- 1978(35) Victoria R.E. Moskalyk
- 1979(36) Sarnia C.J. Briggs
- 1980(37) Calgary M. Mezei
- 1981(38) Winnipeg J.L. Summers
- 1982(39) Ottawa R. Tawashi
- 1983(40) Montreal A.M. Goodeve
<table>
<thead>
<tr>
<th>YEAR</th>
<th>PLACE</th>
<th>PAST PRESIDENT</th>
<th>PRESIDENT</th>
<th>PRESIDENT-ELECT</th>
<th>EXEC. DIR.</th>
<th>RECORDING SEC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1986(43)</td>
<td>Quebec</td>
<td>J. Gagné</td>
<td>J. Bachynsky</td>
<td>K. Simons</td>
<td>K.M. McErlane</td>
<td>H.M. Burt</td>
</tr>
<tr>
<td>1992(49)</td>
<td>Winnipeg</td>
<td>P. Beaulac</td>
<td>H.M. Burt</td>
<td>M. Greer</td>
<td>K. Moody</td>
<td>J. Louvelle</td>
</tr>
<tr>
<td>1993(50)</td>
<td>Vancouver</td>
<td>H.M. Burt</td>
<td>M. Greer</td>
<td>R. Coutts</td>
<td>K. Moody</td>
<td>J. Louvelle</td>
</tr>
<tr>
<td>1994(51)</td>
<td>Charlottetown</td>
<td>H.M. Burt</td>
<td>M. Greer</td>
<td>R. Coutts</td>
<td>K. Moody</td>
<td>J.L. Glennie</td>
</tr>
</tbody>
</table>

1. This office ceased to exist after the 1978 meeting.
2. This position existed for 1947-50 to be replaced by that of Recording Secretary in 1966-67.
3. This office was assumed by A.M. Goodeve in the Spring of 1967 due to the sudden illness of K.M. James.
4. J.A. Wood assumed the position when A.M. Goodeve replaced the ailing K.M. James.
5. Officers of the new organization, AFPC, assumed their offices January 1, 1970, after a mail ballot; while the CCPF officers of 1968-69 served in the interim after the 1969 meeting.
6. H.J. Segal assumed the office at the start of the 1972 meeting upon the unexpected departure of W.J. O'Reilly.
7. L.I. Wiebe assumed the position when H.J. Segal resigned.
8. The AFPC Proceedings 1975 were prepared by A.M. Goodeve due to the resignation of R.M. Gentles in June 1975.
10. A.M. Goodeve held the position until October 1985 when K.M. McErlaine succeeded him.
11. Oregon, with the American Association of Colleges of Pharmacy.
12. Although 1994 constituted the 51st meeting of the organization, it marked the 50th anniversary of its founding in 1944.
## APPENDIX II

**Honored Life Members** *1*

<table>
<thead>
<tr>
<th>Year Awarded</th>
<th>Honoree</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1946-52, 1967</td>
<td>A.W. Matthews*</td>
<td>University of Alberta, University of British Columbia</td>
</tr>
<tr>
<td>1947</td>
<td>G.T. Cunningham*</td>
<td>For role in acceptance of Pharmacy at University of British Columbia</td>
</tr>
<tr>
<td>1957</td>
<td>J.G. Richard</td>
<td>University of Montreal</td>
</tr>
<tr>
<td>1959</td>
<td>J.R. Kennedy*</td>
<td>Canadian Foundation for the Advancement of Pharmacy</td>
</tr>
<tr>
<td>1960</td>
<td>A.F. Larose*</td>
<td>University of Montreal</td>
</tr>
<tr>
<td>1964</td>
<td>J.I. MacKnight*</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1965</td>
<td>J.E. Cooke</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1965</td>
<td>R. Larose</td>
<td>University of Montreal</td>
</tr>
<tr>
<td>1966</td>
<td>R.C. Cary*</td>
<td>Canadian Foundation for Advancement of Pharmacy</td>
</tr>
<tr>
<td>1969</td>
<td>G.L. Webster*</td>
<td>University of Illinois</td>
</tr>
<tr>
<td>1969</td>
<td>J.A. Marquis*</td>
<td>Laval University</td>
</tr>
<tr>
<td>1973</td>
<td>F.N. Hughes</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1974</td>
<td>I. Stauffer</td>
<td>University of Toronto</td>
</tr>
</tbody>
</table>

*1 The asterisk indicates that the honoree is now deceased.

*2 A.W. Matthews left academic life between 1946 and 1952, when he returned; he was subsequently honored when he retired in 1967.
<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1974</td>
<td>H.J. Fuller*</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1974</td>
<td>L.G. Elliott*</td>
<td>Elliott Marion Inc., Montreal</td>
</tr>
<tr>
<td>1975</td>
<td>A. Archambault</td>
<td>University of Montreal</td>
</tr>
<tr>
<td>1978</td>
<td>J.E. Halliday</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1979</td>
<td>G.C. Walker*</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1979</td>
<td>M.J. Huston*</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1980</td>
<td>A.J. Anderson*</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1980</td>
<td>G.R. Paterson</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1981</td>
<td>J.R. Murray*</td>
<td>University of Manitoba</td>
</tr>
<tr>
<td>1981</td>
<td>J.J. O’Mara*</td>
<td>Newfoundland Pharmaceutical Association</td>
</tr>
<tr>
<td>1982</td>
<td>J.A. Wood</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1983</td>
<td>L.G. Chatten</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1983</td>
<td>F.A. Morrison</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1984</td>
<td>S.K. Sim</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1984</td>
<td>J.G. Jeffrey*</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1984</td>
<td>D.J. Stewart*</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1985</td>
<td>R.M. Baxter*</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1985</td>
<td>B.E. Riedel</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1986</td>
<td>P. Claveau</td>
<td>Laval University</td>
</tr>
<tr>
<td>1986</td>
<td>D. Zuck</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>Year</td>
<td>Name</td>
<td>University</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>1986</td>
<td>G.E. Harnett</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1986</td>
<td>J.L. Summers*</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1987</td>
<td>R. Bilous</td>
<td>University of Winnipeg</td>
</tr>
<tr>
<td>1987</td>
<td>L. Stephens-Newsham</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1987</td>
<td>T.H. Brown</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1987</td>
<td>A.M. Goodeve</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1987</td>
<td>J.O. Runikis*</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1987</td>
<td>R. Plourde</td>
<td>University of Montreal</td>
</tr>
<tr>
<td>1988</td>
<td>J.G. Moir*</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1989</td>
<td>G. Myers*</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1989</td>
<td>J. Ryan</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1990</td>
<td>F.W. Teare*</td>
<td>University of Toronto</td>
</tr>
<tr>
<td>1990</td>
<td>K.M. James</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1991</td>
<td>J.G. Duff</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1993</td>
<td>A. Noujaim</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1994</td>
<td>M. Mezei*</td>
<td>Dalhousie University</td>
</tr>
</tbody>
</table>
# Appendix III

## AFPC Awards 1982 - 1994

### The McNeil Award for Excellence in Research

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1982</td>
<td>R. Coutts</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1983</td>
<td>J. McNeill</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1984</td>
<td>K. Midha</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1985</td>
<td>B. Roufogalis</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1986</td>
<td>E. Knaus</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1987</td>
<td>A. Noujaim</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1988</td>
<td>L. Wiebe</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1989</td>
<td>M. Mezei</td>
<td>Dalhousie University</td>
</tr>
<tr>
<td>1990</td>
<td>M. Wolowyk</td>
<td>University of Alberta</td>
</tr>
<tr>
<td>1991</td>
<td>J. Axelsson</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1992</td>
<td>E. Hawes</td>
<td>University of Saskatchewan</td>
</tr>
<tr>
<td>1993</td>
<td>F. Abbott</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1994</td>
<td>F. Jamali</td>
<td>University of Alberta</td>
</tr>
</tbody>
</table>
# The Upjohn - AFPC New Investigator Research Award

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1993</td>
<td>J. Turgeon</td>
<td>Laval University</td>
</tr>
<tr>
<td>1994</td>
<td>R. Foster</td>
<td>University of Alberta</td>
</tr>
</tbody>
</table>

# The AFPC Award of Recognition for Outstanding Support of APFC

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>Fares Attalla</td>
<td>Merck Frosst</td>
</tr>
<tr>
<td>1992</td>
<td>Canadian Foundation for Pharmacy</td>
<td></td>
</tr>
<tr>
<td>1993</td>
<td>Jean-Guy Cyr</td>
<td>Bristol-Myers Squibb Canada Inc.</td>
</tr>
<tr>
<td>1994</td>
<td>Carl Trinca</td>
<td>American Association of Colleges of Pharmacy</td>
</tr>
</tbody>
</table>

# The AFPC Special Service Award

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992</td>
<td>K. McErlane</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1993</td>
<td>H. Burt</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>1994</td>
<td>University of British Columbia</td>
<td>Host Committee for 1993 AFPC Biotechnology Conference</td>
</tr>
</tbody>
</table>
# Index of Names

## A
- Abbott, Frank, 192
- Alexander, William E. (“Bill”), 149, 187
- Allen, W. F., 67
- Anderson, A. J. (“Art”), 14, 18, 46, 68, 101, 187, 190
- Apse, Jan, 166
- Archambault, André, vii, 27, 37, 62, 68, 69, 86, 88, 94, 95, 97, 101, 123, 128, 132-133, 134, 144, 187, 190
- Attalla, Fares M., 178, 182, 193
- Aubin, P., 18
- Axelson, J., 192

## B
- Bachynsky, John A., 96, 142, 165, 173, 178, 183, 188
- Bain, Jerald, 70
- Bäré, R., 125
- Baxter, Ross M., 52, 56, 62, 69, 71, 81, 92, 95, 96, 101, 103, 142, 186, 187, 190
- Beauchemin, Guy, 156
- Beaulac, Pauline, xv, 163, 164, 165, 166, 188
- Beaulnes, A., 58
- Belair, M. J., 69
- Béliveau, J., 132
- Benoît, N. L., 58
- Bester, John, 68
- Bilous, Roy, 191
- Black, R. D. H., 69
- Blackburn, Jim L., 4, 153, 155
- Bletcher, Henry E., 2, 7
- Blishen, Bernard, 96
- Bliven, Charles, 92-93
- Boyle, Fred, 165
- Braun, Julien, 168
- Brewer, P. B., 14, 16
- Briggs, Colin, 155, 156, 159-160, 187
- Brown, Aubrey A., 100
- Brown, Leona (later Goodeve, Leona), 14, 18, 65, 66
- Brown, Malcolm, 57
- Brown, T. H. (“Terry”), 67, 191
- Buchko, Orest, 86
- Burbidge, George A., 7, 8, 10, 18, 22-23, 25
- Burt, Helen M., vii, xv, 3, 163, 171, 188, 193

## C
- Campbell, Alexander, 2, 7
- Cary, R. C. (“Reg”), 55, 189
- Chandler, R. Frank, 187, 188
- Chattén, L. G. (“Les”), 56-57, 158
- Christensen, Bernard V., 39, 89
- Clark, Cecil C., 2, 8, 10, 11
- Claveau, Pierre, 18, 77, 187, 190
- Conroe, Irwin, 130
- Contant, Joseph, 124, 125
- Cooke, J. Esmonde, vii, 14, 16, 18, 21-22, 23, 34, 84, 93, 94, 139, 186, 189
- Corbett, H. Milton, 8
- Coutts, Ronald T. (“Ron”), 37, 188, 192
- Cox, R., 18
- Creasy, John F., 82
- Cullumbine, N., 67
- Cunningham, G. T., 189
- Curtis, Neil P., 144
- Cyr, Jean-Guy, 193

## D
- Dancey, Jack, 69
- Daoust, R., 69
- Davidson, A. O., 16
- Demers, J. U., 14, 18
- Demers, P., 18
- DesRoches, Bernard P. (“Bernie”), 143
- Doherty, J., 155
- Dooley, J. E., 70
- Ducharme, C., 128
- Duff, J. Gordon, 4, 26, 27, 28, 68, 73, 78, 92, 94, 98, 187, 191
- Duncan, Gerald R. (“Gerry”), 58
- Dunn, F. A. Stewart, 8
- Dunsdon, A. J. (“Jim”), 178
Elliott, L. G., 190
Ensom, R. J., 176
Evans, John, 138

Fader, C. E., 2, 10, 11, 23, 24
Fairley, G. W. (“Pete”), 66
Fielding, David W., 160, 164, 165, 181
Filteau, G., 14, 18
Foster, R., 193
Fuller, Horace, J., 61, 66, 71, 79, 190

Gaetz, Halley Hamilton, 2, 7
Gagné, Jacques, 163, 188
Garton, W. M., 155, 156
Gentles, R. M., 187
Gibbard, George E., 7
Glennie, J. I., 188
Goodeve, A. M. (“Al”), 47, 138, 143, 187, 188, 191
Goyer, R., 132
Graham, Penny, 4
Greer, Marianne, xv, 188
Groves, Gordon A., 14, 34, 68, 73
Guttman, David E., 58

Halliday, Jack, 45-46, 57, 67, 69, 100, 187, 190
Hartnett, Glen, 47, 187, 191
Hawes, E., 192
Heebner, Charles F., 8
Hessell, V. E., 9, 10
Hindmarsh, Wayne, 149, 150, 151, 155, 164, 165, 173, 178, 181, 187
Hughes, F. Norman, vii, xiii, 2, 5, 9, 10, 11, 12, 13, 16, 18, 21, 27, 31, 32, 52, 55, 65, 68, 71, 72, 76, 78-79, 80, 82, 84, 90, 93, 94, 97, 136-137, 138, 139, 140, 141, 144, 145-146, 186, 187, 189
Hurst, R. O., 2, 8, 9, 10, 11, 186
Huston, Mervyn J. (“Merv”), 3, 14, 16, 50-51, 52, 53, 59-60, 61, 65, 68, 71, 73-74, 75, 97, 98, 155, 186, 190
Jamali, F., 192
James, Ken M., 34, 48, 187, 191
Jeffrey, J. George, 14, 15, 16, 18, 35, 52, 53, 67, 97, 186, 190
Jenkins, Glenn L., 89
Joubert, R. J., 176, 182
Kalbfleisch, G. L., 76
Kennedy, David R. (“Dave”), 63, 64, 68, 70, 189
Kerr, Alexander Enoch, 93-94
Knapp, David A., 173
Knaus, E., 192
Labarre, J., 18, 34, 125
Lafontaine, C., 132
Larose, Alfred F., 18, 34, 130, 186, 189
Larose, Roger, vii, 14, 18, 34, 43, 45, 46, 52, 66, 67, 68, 69, 72, 84, 87, 90, 93, 96, 123, 128-129, 133, 134, 142, 143, 186, 189
Latour, R., 132
Laurence, Alfred Joseph, 10, 124
LeBlanc, Pierre Paul, 155, 165, 182, 183
Lesage, Jean, 128
Letourneau, M., 18
Levy, Gerhard, 70
Ligouri, Sister Mary (McCarthy, Jacqueline), 143
Lissack, Stan, 68, 87
Locock, R. A. (“Tony”), 187
Louvelle, J., 188
Lowy, Frederick H., 180
Lyman, Rufus A., 28
MacAulay, Wesley C. (“Wes”), 14, 16, 18, 34, 52, 59, 75, 83, 84, 98, 99, 145, 186
MacCannell, Keith, 58
MacDonald, J. B., 96
MacKinnon, Joyce, 165
<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>MacKnight, Jessie I.</td>
<td>25, 189</td>
</tr>
<tr>
<td>Maday, W.</td>
<td>68</td>
</tr>
<tr>
<td>Marquis, J. Antonin</td>
<td>2, 10, 11, 16, 18, 34, 126, 186, 189</td>
</tr>
<tr>
<td>Martin, Alfred</td>
<td>68</td>
</tr>
<tr>
<td>Martin, E. A.</td>
<td>18, 67</td>
</tr>
<tr>
<td>Matthews, A. W. (“Whit”)</td>
<td>v, 2, 8, 10, 11, 12, 16, 48, 49-50, 52, 53, 66, 67, 69, 71, 75-76, 79, 80-81, 82, 84, 89, 90, 93, 95, 96, 97, 98, 99, 101, 136, 142, 186, 189</td>
</tr>
<tr>
<td>McCarthy, Jacqueline</td>
<td>(see Ligouri)</td>
</tr>
<tr>
<td>McCready, Jack</td>
<td>78</td>
</tr>
<tr>
<td>McDougall, Dugald</td>
<td>2, 10, 11, 16, 18, 31, 32, 34, 66, 186</td>
</tr>
<tr>
<td>McErlane, Keith M.</td>
<td>vii, xv, 163, 187, 188, 193</td>
</tr>
<tr>
<td>McNeill, John</td>
<td>192</td>
</tr>
<tr>
<td>Mezei, M.</td>
<td>187, 191, 192</td>
</tr>
<tr>
<td>Midha, K.</td>
<td>192</td>
</tr>
<tr>
<td>Mockle, J. Auguste</td>
<td>52, 66-67, 69, 132, 187</td>
</tr>
<tr>
<td>Moir, Glen</td>
<td>68, 69, 86, 191</td>
</tr>
<tr>
<td>Moisley, P. T. (“Perce”)</td>
<td>52</td>
</tr>
<tr>
<td>Moody, Kevin</td>
<td>4, 188</td>
</tr>
<tr>
<td>Morrison, Finlay</td>
<td>4, 16, 38, 62-63, 66, 68, 69, 94, 95, 96, 97, 103, 186, 190</td>
</tr>
<tr>
<td>Moskalyyk, Richard E. (“Dick”)</td>
<td>135, 150, 151-152, 156, 157-158, 159, 187</td>
</tr>
<tr>
<td>Mowatt, Alex</td>
<td>69</td>
</tr>
<tr>
<td>Murray, D. R. (“Dan”)</td>
<td>18, 65, 68, 186</td>
</tr>
<tr>
<td>Murray, J. R. (“Randy”)</td>
<td>14, 16, 34, 55, 67, 68, 97, 186, 187, 190</td>
</tr>
<tr>
<td>Myers, G.</td>
<td>191</td>
</tr>
<tr>
<td>Nairn, J. Graham</td>
<td>55, 68, 69, 70, 142, 187</td>
</tr>
<tr>
<td>Nakagawa, Bob</td>
<td>165</td>
</tr>
<tr>
<td>Nona, Dan</td>
<td>163</td>
</tr>
<tr>
<td>Noujaim, A. (“Tony”)</td>
<td>191, 192</td>
</tr>
<tr>
<td>O’Mara, J. J. (“Jim”)</td>
<td>28, 190</td>
</tr>
<tr>
<td>O’Reilly, W. J.</td>
<td>187</td>
</tr>
<tr>
<td>Orr, J. E. (“Jack”)</td>
<td>68, 92</td>
</tr>
</tbody>
</table>

**P**

<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Page, Gordon G.</td>
<td>160</td>
</tr>
<tr>
<td>Parker, W. A.</td>
<td>152-153, 187</td>
</tr>
<tr>
<td>Parks, Lloyd M.</td>
<td>91</td>
</tr>
<tr>
<td>Paterson, G. R. (“Pat”)</td>
<td>14, 18, 55, 63, 67, 69, 90., 92, 93, 100, 186, 187, 190</td>
</tr>
<tr>
<td>Pepper, Alf</td>
<td>69</td>
</tr>
<tr>
<td>Pernarowski, Modest</td>
<td>158</td>
</tr>
<tr>
<td>Pillow, Bill</td>
<td>159</td>
</tr>
<tr>
<td>Plourde, R.</td>
<td>14, 18, 191</td>
</tr>
<tr>
<td>Postlewaite, Gordon</td>
<td>155, 156, 158</td>
</tr>
</tbody>
</table>

**R**

<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raison, Arnold</td>
<td>74, 100</td>
</tr>
<tr>
<td>Ready, Ken</td>
<td>4</td>
</tr>
<tr>
<td>Richard, J. G.</td>
<td>189</td>
</tr>
<tr>
<td>Rising, L. W.</td>
<td>16</td>
</tr>
<tr>
<td>Ross, Tom</td>
<td>97</td>
</tr>
<tr>
<td>Roufogalis, B.</td>
<td>192</td>
</tr>
<tr>
<td>Rowsell, Baxter</td>
<td>159</td>
</tr>
<tr>
<td>Roy, Pierre-Georges</td>
<td>38</td>
</tr>
<tr>
<td>Runikis, J. O.</td>
<td>191</td>
</tr>
<tr>
<td>Ryan, John</td>
<td>191</td>
</tr>
</tbody>
</table>

**S**

<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salvador, R.</td>
<td>58, 132</td>
</tr>
<tr>
<td>Schneider, W.</td>
<td>57</td>
</tr>
<tr>
<td>Schnell, Bruce</td>
<td>155, 165</td>
</tr>
<tr>
<td>Scott, Paul L.</td>
<td>8</td>
</tr>
<tr>
<td>Segal, Harold J.</td>
<td>71, 96, 142, 187</td>
</tr>
<tr>
<td>Shevchuk, Y.</td>
<td>176, 182</td>
</tr>
<tr>
<td>Sim, Stephen</td>
<td>67, 190</td>
</tr>
<tr>
<td>Simons, Keith</td>
<td>163, 164, 188</td>
</tr>
<tr>
<td>Sirois, G.</td>
<td>132</td>
</tr>
<tr>
<td>Sketris, Ingrid</td>
<td>167</td>
</tr>
<tr>
<td>Smith, J. E.</td>
<td>67</td>
</tr>
<tr>
<td>Smith, Michael</td>
<td>58</td>
</tr>
<tr>
<td>Smith, W. G.</td>
<td>93</td>
</tr>
<tr>
<td>Spino, Michael</td>
<td>xv, 188</td>
</tr>
<tr>
<td>Sprowls, Joseph B.</td>
<td>37, 69</td>
</tr>
<tr>
<td>Stauffer, Isabel</td>
<td>14, 34, 52, 66, 68, 79, 85, 86, 87, 145-146, 189</td>
</tr>
</tbody>
</table>

N

<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salvador, R.</td>
<td>58, 132</td>
</tr>
<tr>
<td>Schneider, W.</td>
<td>57</td>
</tr>
<tr>
<td>Schnell, Bruce</td>
<td>155, 165</td>
</tr>
<tr>
<td>Scott, Paul L.</td>
<td>8</td>
</tr>
<tr>
<td>Segal, Harold J.</td>
<td>71, 96, 142, 187</td>
</tr>
<tr>
<td>Shevchuk, Y.</td>
<td>176, 182</td>
</tr>
<tr>
<td>Sim, Stephen</td>
<td>67, 190</td>
</tr>
<tr>
<td>Simons, Keith</td>
<td>163, 164, 188</td>
</tr>
<tr>
<td>Sirois, G.</td>
<td>132</td>
</tr>
<tr>
<td>Sketris, Ingrid</td>
<td>167</td>
</tr>
<tr>
<td>Smith, J. E.</td>
<td>67</td>
</tr>
<tr>
<td>Smith, Michael</td>
<td>58</td>
</tr>
<tr>
<td>Smith, W. G.</td>
<td>93</td>
</tr>
<tr>
<td>Spino, Michael</td>
<td>xv, 188</td>
</tr>
<tr>
<td>Sprowls, Joseph B.</td>
<td>37, 69</td>
</tr>
<tr>
<td>Stauffer, Isabel</td>
<td>14, 34, 52, 66, 68, 79, 85, 86, 87, 145-146, 189</td>
</tr>
</tbody>
</table>
Steele, John 140, 141, 142, 187
Stephens-Newsham, L., 191
Stewart, Douglas J. (“Doug”), 38, 55, 69, 87, 190
Stieb, Ernst W. (“Ernie”), vii, xv, 1, 5, 28, 31, 138, 143, 144, 187
Stratton, Tim, 173, 182
Summers, J. L. (“Jack”), 14, 18, 34, 52, 80, 96, 142, 165, 167, 187, 188, 191
Swanson, L., 67
T
Tawashi, R., 158, 163, 187, 188
Teare, Fred W., 37, 67, 155, 187, 191
Thibodeau, G., 132
Thomas, Norman, 165
Tilston, Frederick A. (“Fred”), 55
Tremblay, J., 187
Trinca, Carl E., 180, 184, 193
Turgeon, J., 193
Turnbull, John C., 27, 62, 74-75, 79, 103
U
Uhlman, H. J., 69
V
Vadboncoeur, E., 16
W
Walker, George C., 14, 18, 34, 36, 37, 38, 39, 52, 56, 57, 66, 67, 73, 77, 79, 91, 99, 186, 190
Wallace, Sylvia, 163, 164, 188
Walsh, J. D., 25, 27
Warner, M. J., 9
Webster, George L., 93, 189
Wensley, William R. (“Bill”), 72, 187
Wiebe, L. (“Len”), 187, 192
Wigle, W. W., 88
Williams, D. H., 62, 68
Wolowyk, M., 192
Wood, C.N., 2, 10, 11
Wood, J. Alex, vii, 18, 28, 65, 67, 135, 144, 149, 150, 155, 156, 158, 159, 187, 190
Y
Yagi, Phyllis, 86
Yung, David, 156
Z
Zuck, Don, 75, 191
Woods, Esli L., 6, 10, 11, 14, 16, 18, 65, 72, 89
Yagi, Phyllis, 86
Yung, David, 156
Zuck, Don, 75, 191
The mission of pharmacy education is to provide programs of excellent quality which by their content and presentation produce graduates who contribute significantly to societal, professional and patient care responsibilities, and who are committed to life-long learning.