



## **2005 Report of the Board of Directors to the AACP House of Delegates**

### **Putting Planning into Action: People, Quality, Leadership**

The AACP Board of Directors presents an annual report to the administrative and faculty delegates from institutional member schools. This report summarizes achievements based on the strategic plan adopted in July 2004 by the House of Delegates. The current AACP strategic plan has 11 prioritized goals, six for advancing the quality of pharmacy education and five for leading change.

This report has two sections. Section one is the summary contained in these pages of the most significant progress made during the year on AACP goals. Section two, available via the AACP website, includes a more comprehensive presentation of bulleted areas of program development prepared in April 2005 for review by the Board of Directors. Delegates are encouraged to review the printed report and utilize House sessions and open hearings during the AACP Annual Meeting to ask for additional information and make recommendations for future action based on the strategic plan and this report. We also encourage delegates to review the more detailed summary following the meeting and share portions or all of both reports with colleagues at their institutions.

The reality of increasing demand for pharmacists in all sectors of the profession is a critical challenge before us. AACP and its member institutions and faculty have responded with significant enrollment expansions and the establishment of new programs. We partner with stakeholders outside academic pharmacy to identify the best ways to meet the challenges we face in an era of restrained resources. The interface between education, practice and regulation has never been more important. There is still much to be done to make pharmaceutical care universally integrated across our health care system. Evolving models of health care delivery, need for improved quality of medication use, mandates for significant change in federally supported health care programs such as Medicare, concerns about professional workforce size and distribution, and maintenance of professional skills and competence are but some of the many issues that inevitably impact both the educational and professional practice sectors of pharmacy and health care more broadly. As the 2004-05 Argus Commission report outlines, pharmacy educators have significant value to contribute in these and many more arenas through strategic engagement of our human and intellectual resources as engaged partners with a wide range of “communities” and stakeholders. To this end, AACP deploys its strategic plan to maximize our impact with talented people, a commitment to quality, and exceptional leadership efforts.

#### **People**

- **Academic Practice Partnership Initiative**
- **WalMart Annual Conference Scholarship Program**
- **Academic Leadership Fellows Program**
- **PharmCAS – Cycle 2**

AACP’s top priority goal is the recruitment, development and retention of a diverse and highly capable faculty and academic/professional staff to advance teaching, research and practice. This was the focus of the standing committees for 2004-05 and their reports offer fresh clarity regarding the issues and substantive recommendations for addressing challenges to developing and retaining a 21<sup>st</sup> century faculty. Approximately one half of pharmacy faculty are in the practice departments of our member institutions and there is a significant increase in the numbers of final year PharmD students entering advanced practice experiential (APE) rotations. AACP, with support from Merck & Company, launched the **Academic/Practice Partnership Initiative** (APPI) in 2005 to plan and implement a variety of strategies aimed at increasing the quality and quantity of APEs so that all students have opportunities to learn how to deliver pharmaceutical care from exemplary practitioner-educators, whether faculty or adjunct/preceptor educators. A summit was held in June 2005 with representatives from colleges and schools,

preceptors, associations, employers of pharmacists, and other stakeholders. The outcomes of the meeting, which will be disseminated soon via several print and electronic vehicles, provide focused and prioritized recommendations for experiential education initiatives that will accomplish the goals of the APPI. Other projects of the Partnership will yield a library of preceptor training and development programs member institutions can access as well as a profiling mechanism for exemplary practitioners and learning sites.

Reaching out to the next generation is also key to insuring an adequate supply of qualified faculty and two new strategies were implemented in 2004-05. AACP debuted a **new exhibit** at the American Association of Pharmaceutical Scientists Annual Meeting in Baltimore with the theme “Prescription for a Rewarding Career”. AACP will continue to explore conduits to reach graduate students and non-academic scientists where they gather. The **Wal-Mart Annual Meeting Scholarship Program** was also launched this year providing 20 pairs of professional and graduate students (including residents and fellows) and their faculty mentors support to attend the 2005 AACP Annual Meeting to encourage and further develop their interests and aptitudes for academic careers. Several other activities were initiated in 2004-05 that will carry forward into future years. AACP is in the final stages of launching an **electronic job posting service**, hopefully networked with other scientific and practice organizations, to better serve members’ needs for attracting the best talent to administrative, faculty, and staff positions. **The Council of Deans and Council of Faculties joint committee on metrics development** is progressing in efforts to put measures to scholarly activities in keeping with the recognition that all faculty must be scholars.

Academic pharmacy must have strong leaders to move our programs forward. The first class of **Academic Leadership Fellows** complete their year-long program of professional development at the 2005 AACP Annual Meeting. Over a series of four sessions, the fellows completed self-assessment of their strengths, peer assessment, in-depth leadership development, team building, exploration of legislative and public policy issues, administrative competency development, and media training. Fellows completed group projects related to academic leadership that will be presented at a special session during the 2005 AACP Annual Meeting. The second class of fellows begins their year of professional development in August.

Interest in pharmacy remains extraordinarily high as reflected in both the numbers of applicants taking the Pharmacy College Admissions Test and using the centralized application service (**PharmCAS**) to help them gain admission to the professional degree program. A total of 14,433 applicants processed 47,350 applications to pharmacy programs during the 2004-05 PharmCAS cycle. This represents an increase of 5 percent in the number of applicants and 9 percent in the number of applications when compared to 2003-04 cycle information.

Developing the strongest number of high quality **people** for successful careers in academic pharmacy will remain AACP’s highest priority for the foreseeable future. This will enable AACP members to meet society’s needs for graduating 21<sup>st</sup> century medication use specialists for all sectors of practice.

### **Quality**

- **ACPE Standards and Guidelines Revision**
- **COD/COF Metrics Development Committee**
- **2005 AACP Academic Institute**
- **Curricular Resources Development**

Several top goals in the current strategic plan emphasize the means by which AACP assists members in continuously improving the quality of pharmacy education. Completion and dissemination of the CAPE Educational Outcomes as revised in 2004 has been central to these efforts in the past year. ACPE has integrated these, as well as the Institute of Medicine core competencies for all health professionals, into the draft revision of the standards and guidelines for accreditation. AACP has provided substantial input thus far into the development of the draft standards and guidelines. Material for our input was drawn from the “Excellence Papers” which were released in 2003, recommendations from reports of AACP standing committees and task forces, and additional work by segments of the membership. The open hearing on the draft **ACPE standards and guidelines** on Monday, July 11<sup>th</sup> provides the first opportunity for any public input on the completed draft. AACP President Draugalis has appointed an ad hoc work group that will prepare comments for submission to ACPE by November and invites all members to submit comments either directly or through AACP and this work group.

AACP has also completed three curriculum quality perception instruments in collaboration with ACPE which are now available for use by schools. Perceptions of graduating students, faculty, and alumni may be gathered at this

time by using documents in .pdf format. By the 2005-06 graduation cycle all data collection tools, including these surveys, will be available for on-line data collection. **The Institutional Research staff and Advisory Committee** continue to identify and implement enhancements in the data collection and analysis systems in hopes that it will make self-study preparation, other benchmarking efforts, and on-going quality assurance activities more efficient and easier for members.

The largest **AACP Institute** in the 10-year history of this meeting was held May 23-26 in Lansdowne, VA. The focus of the Institute was on evolving a contemporary and relevant professional degree program with emphasis on the profession's vision for pharmacy in 2015, priorities for interprofessional education, and delivery of team-based patient care. Twenty-eight teams, many of which were deployed because their institution was embarking either on self-study or major curriculum reform, crafted "back-home plans" taking into consideration concepts and strategies recommended throughout the program. AACP is committed to continuing to offer member institutions this model of programming to enable teams to work creatively on problem-solving and program development across a range of priority areas. AACP anticipates the 2006 Institute will focus on experiential education programs and implementing strategies outlined in the 2005 APPI Summit.

Assisting faculty with access to high quality material to enhance teaching is a priority that AACP addresses through live meetings, webcasts, print publications, and the evolving **Curricular Resources Center** on [www.aacp.org](http://www.aacp.org). During the past year members contributed significant content to the Women's Health section of the CRC, fulfilling contractual obligations to the Offices of Women's Health at several federal government agencies. Content is now posted in women's health, patient safety, geriatrics, pharmacogenomics, prevention/public health, managed care, and social and administrative sciences. AACP continuously searches for additional topics and quality teaching resources to add to the site.

Helping AACP members continuously improve the quality of pharmacy education, broadly defined, has been the hallmark of AACP's work for 105 years and will continue to be the focus of our programming, our advocacy, and AACP support services.

#### **Leadership**

- **Policy and Advocacy**
- **Coalitions and Collaboration**
- **Pharmacists: Unsung Heroes**
- **Interprofessional Programs**

As at no time in past history, proper medication use is recognized as central to quality patient care. External stakeholders express concern about safety, affordability/access, and the impact of medications on health outcomes. AACP's advocacy efforts are designed to communicate how the research, practice, and service activities of the pharmacy education enterprise address these concerns. Securing necessary resources and opportunities for member institutions and faculty to participate in programs sustained by public and private dollars is the heart of AACP **legislative and regulatory efforts**. This is expressed through communications related to funding of NIH and other science agencies, discussions with Hill staff on retaining support for Title VII and other access programs, and briefings focused on how programs and services from colleges and schools of pharmacy bring value to specific priority problems, such as rural health care. The political and regulatory environment has changed substantially in the past 4 to 5 years, making active member engagement and communication with elected officials even more salient than ever before.

To truly make an impact in policy and other circles, AACP must join forces with other organizations in coalitions and other collaborative projects. Too numerous to mention individually, activities of several current collaborations do warrant attention. AACP staff lead the **e-prescribing work group of the SOS Rx** coalition with the goal of enhancing the electronic exchange of information between prescribers and pharmacists to enhance the quality and safety of patient care. Professionwide consensus has been developed through an 11-organization project on components of **medication therapy management**, including that which should be standard for all eligible Medicare beneficiaries under Part D benefits beginning in 2006. AACP also continues its strong participation in the Ad Hoc Group with over 400 medical and science organizations seeking additional funding for research in the biomedical sciences. At the 2005 **National Conference of State Legislatures**, AACP and 9 other partners will present a media briefing on services pharmacists can offer state governments (e.g., Medicaid, state employees) to improve access to and quality of medications and their use. Finally, AACP has been monitoring the work of an Institute of Medicine study panel working on medication safety and appropriate use. Comments on the implications of the change to

professional doctoral education have been prepared and submitted to this panel which is co-chaired by University of Arizona Dean J. Lyle Bootman. This panel's report should be released in spring 2006.

How do we get the message about the importance of pharmacists and their current level of educational preparation out to consumers and other influential audiences? Over more than a year AACP has joined forces with the PDA Foundation, WLIW21, a public broadcasting station in New York, and several other sponsors to produce **Pharmacists: Unsung Heroes**, a one-hour documentary on 21<sup>st</sup> century pharmacy education and practice. The documentary will air on stations across the US beginning in October 2005 as part of American Pharmacists Month. The project is also producing a shorter product that will be available via DVD/CD ROM and fed into a network of public junior high and high schools with accompanying educational guides that will allow teachers, pharmacy faculty, and practicing pharmacists to increase young people's awareness of roles pharmacists play in contemporary health care.

Quality patient care must be delivered by functional teams of health care providers whose skills complement one another in patient assessment, therapy planning, and monitoring activities. AACP has been involved in several **interprofessional education projects**, including a roundtable established by the Joint Commission on Accreditation of Healthcare Organizations, the IHI Collaborative aimed at revising health professions education, and a third initiative that is studying different models of interprofessional education. The questions surrounding how to facilitate AACP member involvement in the delivery of interprofessional education is the focus of the 2005-06 Board of Director's Strategic Planning Committee.

The material presented in this report simply highlights a subset of the projects and activities undertaken by AACP in the past year to assist member colleges and schools and their faculty and staff in efforts to deliver outstanding education and succeed as scholars. A detailed summary by goal is accessible at [www.aacp.org](http://www.aacp.org) in the section About AACP/Strategic Plan or by clicking below.

[http://www.aacp.org/Docs/AACPFunctions/AboutAACP/6801\\_CombinedGoalSummaries.pdf](http://www.aacp.org/Docs/AACPFunctions/AboutAACP/6801_CombinedGoalSummaries.pdf)