



2007 Report of the Board of Directors to the AACCP House of Delegates

Discover, Learn, Care...Improve Health

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

A communications audit was completed during the past year using an outside firm and interviews with a wide range of stakeholders, including members and individuals outside the Association. The analysis assisted AACCP in determining strengths and weaknesses in our current communications vehicles and messages. It was recommended that a contemporary tagline be developed to communicate the major priorities of AACCP and its members more effectively. "*Discover, Learn, Care...Improve Health*" is the tagline that has been selected, and this year's report will use these terms as the framework for examining significant accomplishments for 2006-07.

DISCOVER

Numerous AACCP reports and current accreditation standards emphasize the responsibility of all faculty to be scholarly and to contribute new knowledge through original inquiry, broadly defined. AACCP has enabled early career faculty to launch their research programs by offering grants through the New Investigator Program for Pharmacy Faculty funded by the American Foundation for Pharmaceutical Education. This program celebrates its 21st cycle of grant-making this year.

Enhancing the ability of faculty to succeed in the arena of clinical translational research was the focus of the Educating Clinical Scientists Task Force chaired by Robert Blouin (UNC). The Task Force examined different models for preparing independent clinical scientists equipped to conduct "bench to bedside" or T-1 translational research programs. It is the recommendation of the committee that programs be established to prepare Pharm.D/Ph.D. graduates in substantially greater numbers in experimental pharmacotherapeutics using a multi-disciplinary approach and several potential pathways to degrees. Members of the committee participated in a December conference hosted by NIH on training clinical scientists. AACCP was pleased to note the launch in March of the NIH "Pharm.D. Gateway to NIH", a specially designed portal to guide our graduates and faculty members in maximizing their participation in federally funded training and research programs which can be found at http://www.nigms.nih.gov/Training/pharmd_gateway.htm. A second clinical scientist task force will work this year on "bedside to patient", or T-2, translational research issues and the training needs of faculty to be successful scholars in this expanding realm of discovery.

Another priority in discovery for 2006-07 is the area of practice-based research. The Agency for Health Care Research and Quality (AHRQ) defines a practice-based research network (PBRN) as a group of at least 15 practices or 15 practitioners devoted to the primary care of patients, affiliated with each other

(often with the support of an academic or professional organization) in order to investigate questions related to community-based practice. PBRN research is grounded in the concept that “if we want more evidence-based practice, then we need more practice-based evidence.” Specifically, practice-based evidence is obtained in real world provider-patient interactions, not within the confines of a controlled clinical study. The research questions addressed by PBRNs are proposed and defined through mutual collaboration of academic researchers and practitioners.

While practice-based research has been conducted by various groups of academicians and practitioners in pharmacy, there are presently no research networks that meet the AHRQ definition of a PBRN. Recognizing the need for a systematic approach to practice-based research, the AACP 2004-05 Research and Graduate Affairs Committee recommended that a national conference was needed on the subject of practice-based research in pharmacy settings to develop a plan. An advisory committee was convened and an application was made to AHRQ for a small conference grant which was successful. The conference, with AHRQ support, *Embracing the PBRN Model to Improve Medication Use*, was attended by faculty and practitioner representatives from 24 colleges/schools of pharmacy, and representatives from several pharmacy practice organizations. AHRQ funding permitted video capture of all invited presentations, which will be made available through the AACP website. Conference proceedings will also be published and made available to the pharmacy academic and practice communities. Earlene Lipowski (Florida) served as Brodie Scholar in Residence in 2005-06 and led the development of the conference plan and proposal to AHRQ.

Evidence-based standards of quality in education and the use of objective measures in assessment and accreditation are another priority in discovery for AACP. The AACP Board of Directors submitted significant input into the final phase of the ACPE standards revision process that focused on educational outcomes and process, assessment, professionalism, experiential education, faculty and institutional scholarship, and process issues related to program assessment, consistency of standards application, and evaluation team composition. Given the new ACPE Standards and Guidelines which become effective July 2007 as well the current focus placed on educational outcomes and accountability by the US Department of Education, AACP now looks forward to assisting member institutions, faculty members, and administrators in meeting the new standards through an array of targeted programs, products, and services. For example, the AACP 2007 Institutes focused on the evaluation, assessment, and outcomes of doctor of pharmacy degree programs.

Based on input from various stakeholders, the AACP Institutional Research Advisory Committee (IRAC) chaired by Judith Barr (Northeastern) finalized the Graduating Student, Faculty, Alumni, and Preceptor surveys which are now available in an on-line format. These new surveys help schools and colleges address the ACPE requirement for input from these four stakeholder groups as part of the self-study process to validate compliance with particular attention to standards related to the curriculum, students, faculty and staff, and facilities and resources as delineated. We are in continued discussions with NABP and ACPE around the development of a nationally standardized progress test to provide formative student performance data as well as to inform curriculum quality improvement decisions. Exam development entered the beta-testing phase in spring of 2007 and analysis should be completed by the fall.

The AACP Board approved a request in October 2007 to provide “a home” for the Pharmacy Practice Research Alliance, a group established by Max Ray, then dean at Western University. The Alliance was established in 1998 to serve as a forum for projects and discussion of research in practice and on practice. Several monographs were published on pharmacy practice research and the group had reached out to thought leaders at national organizations and agencies that funded or utilized the results of health outcomes research for policy development, quality measurement and other applications. In 2007, the PPRA has embarked upon a project to create consensus on best methods for conducting research on

medication safety in a variety of settings (e.g., institutional, community) and will host a conference in 2008 to complete the consensus development project.

LEARN

AACP members enjoy many opportunities to learn together and from each other how best to continuously improve pharmacy education. The annual Institutes on Pedagogical and Curricular Change for over ten years have offered teams of faculty and administrators from member institutions a structured opportunity to create plans for program assessment and change. A total of five AACP Institutes were convened since May 2006. Over 280 faculty and administrators in teams from 56 colleges and schools of pharmacy participated in the 2006 AACP Institute (May and November) that focused on building effective structures and processes for experiential education within their pharmacy programs. The 2007 Institute (May and June), attended by approximately 300 faculty from 66 colleges and schools of pharmacy at one of two venues, was designed with particular attention to: i) the new ACPE Standards and Guidelines; ii) ACPE's new rubric of evaluation for the accreditation self-study process and iii) the educational outcomes and accountability implied by the U.S. Department of Education. A pre-Institute assessment survey, administered to each team, showed the top priorities described for their respective programs were: 1) designing instruments and tools; ii) curricular mapping strategies; and iii) developing and implementing an assessment plan.

The Cultural Competence in Health Professions Education Institute (January) was the first interdisciplinary program sponsored by the Federation of Associations of Schools of the Health Professions (FASHP). The program was initiated and managed by AACP staff in response to a 2005 recommendation by the AACP Council of Deans and to complement issues raised during the 2006 AACP Interim Meeting on Cultural Competence: Closing Gaps and Expanding Access. AACP invited other FASHP members to attend in an effort to promote a diverse and rich learning environment for the attendees. There were 128 attendees from 13 disciplines and 36 institutions at the Institute. The Institute was designed to help faculty and administrators better inculcate cultural competence into health professions curricula. The speakers described the imperative for culturally competent health care services and how health care providers can play a role in reducing disparities.

Insuring that all AACP member institutions have a rich applicant pool of talented students is a priority for AACP and led to the establishment of the Pharmacy College Application Service in 2003. PharmCAS successfully launched its fifth cycle in June 2007 with 55 participating institutions. Additional institutions may join PharmCAS this summer. In February 2007, the AACP Board of Directors officially approved a PharmCAS fee waiver for financially disadvantaged applicants applying for fall 2008 enrollment in order to promote student diversity and access to pharmacy education. In the 2006-07 admissions cycle, PharmCAS experienced a 1.5 percent increase in the number of applicants and a 5.6 percent increase in the number of applications submitted with an average of 4 applications per applicant. The number of applications for all pharmacy schools in 2006 increased by 16 percent to 92,463 in 2005-06 from 79,135 in 2004-05. The consistent increase in pharmacy applications since 1999 reflects a higher ratio of applications per applicant as well as strong interest in the profession.

AACP's partner in admissions testing is introducing new features to the Pharmacy College Admission Test (PCAT) beginning with the June 2007 administration. Increased emphasis on genetics in the biology subtest reflects the importance of this area of science to pharmacy education and practice. All PCAT Writing prompts will state a problem involving either a health issue; a science issue; or a social, cultural or political issue. Examinees will be scored on how well they write an essay that is of sufficient length to adequately explain a solution to the problem. Harcourt will report a problem solving score in addition to a conventions of language score. Applicants can select from four test dates in the upcoming admissions cycle: June 23, 2007; August 25, 2007; October 20, 2007; and January 19, 2008.

In leading pharmacy's Career Information Clearinghouse, AACP distributed 826 complimentary copies of *Pharmacists: Unsung Heroes* DVD, a contemporary documentary on pharmacy education and practice produced by PBS station WLIW in New York, along with a Teacher's Guide to members of the National Association of Advisors for the Health Professions (NAAHP). Nearly 500 copies were sent on request to high school guidance counselors and pharmacists making career day presentations. The DVD was also sent to more than 1000 members of the American Association of Community Colleges (AACC), as well to more than 250 members of the National Science Teacher Association (NSTA). These efforts will keep the pipeline of talented prospective students full in the years ahead.

Three other student affairs projects warrant mention. In November 2006, the AACP Criminal Background Check Advisory Panel issued its report which introduced pharmacy colleges and schools to the relevant issues regarding access to, and use of, criminal records of pharmacy students. AACP is evaluating how the Association might assist schools in meeting the background check requirements of hospitals and other institutions. AACP, collaboratively the APhA-ASP, also embarked upon a revision of the Oath of the Pharmacist which will be presented to the House of Delegates for discussion in Orlando. AACP in partnership with Astra Zeneca distributed personalized oaths to the Class of 2007. AACP is also APhA's academic partner in revising and updating the Pathways Career Evaluation Program which is available to all colleges and schools as an on line resource for career guidance for pharmacy students. AACP is specifically working to enhance the information in the program focused on academic career pathways.

Education Scholar, the multidisciplinary web-based program for the promotion of teaching excellence and scholarship development for health professions educators, in partnership with Western University of Health Sciences continues to serve as a valuable faculty development tool. In addition to improvements to the website overall, in 2007 AACP and Western University with the support of the other health profession contributors embarked on the creation of a multidisciplinary Preceptor Module. The Preceptor would become the eighth module in the series and would address previous recommendations from the Professional Affairs Committee on expanding the use of Education Scholar in the area of preceptor development.

The 2006-2007 Academic Affairs Standing Committee chaired by J. Chris Bradberry (Creighton) was charged with conducting an environmental scan of what has happened in the Academy from a curricular perspective since the Commission to Implement Change in Pharmacy Education Papers were released. Their report will and its policy statement of updating the vision of pharmacy education will be presented to the AACP House of Delegates in July for consideration. The report explores both internal and external factors that have impacted pharmacy curricula in the more than decade since the Commission Papers as well as a consideration of what is driving curricular change now.

The expansion of the pharmacy education enterprise in the US in terms of the number of programs and number of students enrolled in those programs coupled with the current faculty shortage and anticipated faculty and administrator turnover due to impending retirements necessitate a contemporary, critical review of 1) expected faculty roles, 2) current and suggested strategies for promotion of academic careers to young professionals, and 3) the spectrum of faculty development across the span of an academic career. For several years a joint task force of the Council of Faculties and Council of Deans chaired by Robert Beardsley (Maryland) and Gary Matzke (VCU) has worked to analyze the faculty workforce situation and craft recommendations for efforts that will produce sufficient faculty for the expanding pharmacy education enterprise. A copy of their report can be found at http://www.aacp.org/Docs/AACPFunctions/Governance/8296_FinalFullFacultyWorkforceReport2007.pdf.

The Wal-Mart Student/Faculty Annual Conference Scholarship Program was created in 2005 to address the need for well-prepared, passionate faculty for the expanding enrollments and number of academic pharmacy institutions across the country. Faculty mentor/student pairs are awarded travel funds and

meeting registration to attend the AACP Annual Meeting to introduce the student to the academic career. Each of the 35 scholarship recipients in attendance at the 2006 AACP Annual Meeting evaluated their experience to determine what impact their attendance had on their future careers in academic pharmacy. In each evaluation, the recipients expressed how beneficial attendance was at the annual meeting for narrowing in on a specific pharmacy path. Evaluations from student recipients noted that their attendance at the annual meeting had a positive influence on their perspectives of their future pharmacy careers especially within academia. Wal-Mart has provided funding for 50 scholarships to qualified student and faculty pairs to attend the 2007 AACP Annual Meeting.

To help colleges and schools of pharmacy minimize the expected faculty pharmacy shortage, AACP has established *PharmHands* to match available retired scholars for temporary assignments at pharmacy schools that will mutually benefit both the retiree and the institution. Potential assignments can include administrative consultancy, temporary on-site or visiting lectureship, faculty mentoring, sabbatical replacement or other routine faculty assignments.

Strong academic programs require strong leadership in our colleges and schools. In 2004, AACP launched the Academic Leadership Fellows Program with founding support from Pfizer, Inc. This year-long development program for aspiring academic leaders has matriculated over 80 faculty and administrators representing half of our member institutions. The program provides structured opportunities for networking, self-discovery, and leadership skills development and will contribute greatly to the need for an expanded pool of leadership talent for the growing number of colleges and schools of pharmacy. The class of 2006-07 will celebrate the completion of their yearlong experience at the AACP Annual Meeting, and the next cohort will begin their developmental year in August bringing to over 100 the number of individuals whose careers have been shaped and enhanced through effective leadership development.

CARE

With grant support from Merck & Company, AACP launched a new initiative in 2005 to enhance the quality of and capacity for experiential education. In its third year, the Academic-Practice Partnership Initiative (APPI) involves critical stakeholders and seeks to identify strategies that AACP and other stakeholders can use to advance the delivery of patient-focused care in a variety of settings while also enhancing the education of pharmacy students. Projects completed under the APPI include a national stakeholder conference which stimulated stakeholder involvement and investment, a process for documenting practice profiles of exemplary sites (APESPS) and a web-based library of resources for development of preceptors and academic experiential personnel.

The specific goals of the APPI address implementation of the JCPP Future Vision for Pharmacy Practice and enhancing opportunities for pharmacists to become vital partners of colleges and schools of pharmacy as practitioner educators in Doctor of Pharmacy degree programs and residency training efforts; enabling colleges and schools of pharmacy in their efforts to assist practitioners in enhancing their practices; and assisting administrators at both the academic institution and the practice partner organization to enhance the efficiency and effectiveness of experiential program management in a variety of dimensions, such as preceptor training and evaluation of experiential learning. In 2006 AACP announced the inaugural Academic-Practice Partners Recognition Program Crystal APPLE Award to recognize the contributions of the faculty/administrators of colleges/schools of pharmacy and the pharmacist practitioner-educators and administrators who are their practice partners in successfully conducting and supporting quality experiential education in exemplary patient care clinical teaching environments. The inaugural awards will be presented to eight exemplary practice partners at the AACP Annual Meeting.

AACP also embarked collaboratively with ASHP on a project (The Capacity of Hospitals to Provide Experiential Education to Doctor of Pharmacy Students) to determine issues related to the capacity of

hospitals and health-systems to partner with colleges and schools of pharmacy to deliver strong experiential learning programs. This project will yield an analysis of the current and projected capacity (both quantitative and qualitative) of hospitals to conduct pharmacy practice experiences in accordance with ACPE Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (Standards “2007”). The findings will be published in a guidance report to influence partnerships between colleges/schools of pharmacy and hospitals for mutual development and support of professional experience programs. AACP appointees are: Abby Kahaleh (LECOM), Katherine K. Knapp (Touro University), Terrence L. Schwinghammer (West Virginia University), Steven L. Sheaffer (University of the Sciences in Philadelphia).

Included in the AACP Strategic Plan is a goal that states “AACP will provide leadership for the development of interprofessional and multidisciplinary education, research, and patient-care opportunities for faculty and students at all colleges and schools of pharmacy.” Since 2005 the Council of Faculties Task Force on Interprofessional Education, Research, and Patient Care has been working to:

- Define educational outcomes that delineate the knowledge, skills, and attitudes pharmacy graduates must have to function in an inter-professional patient care environment;
- Identify and/or develop curricular models for inter-professional education that include inter-professional components throughout the curriculum, including experiential curricular components; and
- Formulate appropriate recommendations to encourage action by AACP and/or colleges and schools to implement these models into pharmacy curricula.

This group will soon provide health professions educators with 70-100 learning opportunities and activities to thread interprofessional learning throughout curricula in pharmacy, medicine and other disciplines.

AACP and selected member institutions are also engaged in the Institute for Healthcare Improvement (IHI) Health Professions Education Collaborative to improve the education of future health care professionals for the provision of quality, safe patient care. Twenty self-selected academic health centers currently participate in the Collaborative, eight of which house degree programs in pharmacy. Members of the collaborative meet twice annually to share innovations in teaching and practice related to the aims of the program. All HPEC members have committed to engage all students enrolled in health professions education on their campuses in interprofessional learning and quality improvement courses and projects.

Finally, the 2006-07 Professional Affairs Committee chaired by Patricia Kroboth (Pittsburgh) was charged to identify strategies to accelerate the implementation of interprofessional education at colleges and schools of pharmacy. Their report and its policy recommendation will be presented to the AACP House of Delegates in July for consideration. It offers additional insights into successful practices, curriculum and practice innovations, and administrative strategies for overcoming the obstacles to true interprofessional learning.

IMPROVE HEALTH

AACP’s policy agenda seeks to assure that members have the requisite resources to be innovative and successful in their teaching, research, and service and to ensure that their contributions to the public health will continue to expand. The 110th Congress faces significant challenges addressing the education and health issues important to AACP. The ongoing wars in Afghanistan and Iraq create substantial drains on funding for discretionary programs, including the National Institutes of Health, Agency for Healthcare Research, and Quality, Food and Drug Administration, Centers for Disease Control and the Department of Education. The non-defense discretionary budget is expected to remain under-funded through FY08 as the Democratic majority works to initiate funding strategies that better reflect their interests and priorities.

The outlook is certainly not all that rosy with non-defense discretionary programs likely to receive at most an inflationary increase of around 2% above FY07 funding levels.

In light of the bleak funding picture that will play out for FY08, AACP continues to work with members of Congress and their staff to improve programs through increased participation of colleges and schools of pharmacy. During our interim meeting in February, our members visited with Hill staff and discussed with them the issues Congress will consider during this session and how colleges and schools of pharmacy can serve as a resource in regard to these issues. Our members are prepared to:

- assist the FDA in its efforts to improve drug safety;
- offer insight into their work with state Medicaid programs as Congress works to reauthorize the State Children's Health Insurance Program;
- increase the role of the pharmacist as a community-based public health educator;
- maximize health care interactions for patients by supporting the development of interprofessional, team-based education;
- improve the MTM programs of Medicare Part D plans and create sustainable business models for the delivery of MTM services; and,
- create improvements in student educational achievement measurement and assessment.

The Argus Commission chaired by Milap Nahata (Ohio State) was charged to analyze the most recent IOM report in the Quality Chasm Series: *Preventing Medication Errors* for its impact on the Association. This report sets forth an agenda for improving the safety of medication use.

The Argus Commission proposes a policy statement for consideration by the House of Delegates: "AACP supports research, education, and development of practice models to promote safe medication practices as the standard of care in all practice settings". If adopted, this policy would provide a clearly articulated position for the Association. Recommendations in the report are directed toward improving safety of medication use through education, practice change and research. Notably, one recommendation supports development of a standards-based accreditation process for community pharmacy. The full text of the report is available in the delegate's materials.

Quality measurement and accountability is affecting the practice sector similarly to the directions for new quality assessment activities in higher education. AACP joined the Pharmacy Quality Alliance in 2006 and several AACP members actively participate in its work groups that are identifying quality measures for pharmacy practice and the systems for data collection and reporting.

The Interim Meeting program focused on the community engaged programs of education, research and service of AACP members and attempted to put them into the broader context of the public health needs of US citizens. Members submitted abstracts of their research and education programs and service activities and participated as panelists or roundtable discussants. University of Minnesota President Robert Bruinicks provided a stimulating testimony for a university, whether public or private, attending to the needs of the community, broadly defined.

Workforce, medication safety, quality assurance, and a mandate for expanded medication therapy management services have contributed to sustained significant media exposure for pharmacy as a healthcare profession and health professions career opportunity. AACP serves as the secretariat for the Pharmacy Manpower Project and its workforce projects have made substantial contributions to the literature and to the heightened visibility of pharmacy and recognition of the importance of pharmacy services in the healthcare system. The ongoing web-based demand index (The Aggregate Demand Index (ADI) Project) under the direction of PMP consultant Dr. Katherine Knapp (Touro University-California)

has an enhanced Website: www.pharmacymanpower.com and new data features. Pharmacist demand information is available by state, region and practice setting in addition to national reporting.

AACP is committed to implementing the JCPP “Future Vision of Pharmacy Practice in 2015”. This vision statement clearly articulates a future vision for pharmacy, how it will be practiced, and how pharmacy practice will benefit society. During the past year three work groups were established to 1) define the practice model that must become the standard of practice in all settings to achieve the 2015 vision, 2) determine actions needed to secure the financial base for that practice, and 3) determine how to effectively communicate to all stakeholders the importance of pharmacists delivering patient-centered care in a reformed health system. Action plans from these three work groups will be presented to JCPP later this year.

AACP places a high value on collaboration and alliance development, especially in the area of outreach and advocacy. A list of the many on-going coalitions and partnerships we support financially and through active participation includes:

- Coalition for Health Funding
- Provider Payment Coalition
- SOSRx
- Ad Hoc Group for Medical Research
- Alliance for Pharmaceutical Care
- Health Professions and Nursing Education Coalition
- Student Aid Alliance
- Friends of Indian Health
- Friends of HRSA
- Friends of the VA
- Friends of CDC
- Friends of the National Center for Health Statistics
- Friends of AHRQ
- Pharmacy Quality Alliance
- Partnership to Fight Chronic Disease
- Research!America
- Centralized Application Services Group
- Career Information Clearinghouse (CIC) for the Profession of Pharmacy
- National Association of Advisors for the Health Professions – Advisory Council
- Interprofessional Professionalism Measurement Group
- Health Professionals for Diversity (HPD) Coalition
- Council on Credentialing in Pharmacy
- Joint Commission of Pharmacy Practitioners
- Federation of the Associations of Schools of the Health Professions
- Health Professions Education Collaborative

AACP OPERATIONS AND FINANCES

AACP has operated in a fiscally responsible manner over the past year with all sources of revenue performing well. There has been record-setting attendance at every meeting held this past year with over 1,250 attending the 2006 Annual Meeting, over 300 at the Interim Meeting and almost 500 individuals attending institutes. Membership dues revenue continues to rise with new institutional and individual members though the level of dues has been constant since 2003 (for institutions). Revenue from the Pharmacy College Admissions Test and PharmCAS similarly reached new levels in 2006-07. AACP fully restored to reserves the original investment made to establish PharmCAS and such that we now have a reserve balance of well over \$1 million. This reserve will grow substantially with the proceeds from the sale of AACP’s current headquarters later this year.

The headquarters property at 1426 Prince Street has served the Association well since it moved from Bethesda, MD to Alexandria, VA in the late 1980’s. As the staff grew from 9 to 20 over that 20 year period of time, AACP outgrew its space and two years ago began looking to acquire a new headquarters property

in or near Alexandria. Convinced that there was not a property to purchase given the very tight real estate market, AACP will soon sign a lease to acquire rented space on King Street in Alexandria, just a few blocks from the current headquarters and directly across the street from the King Street metro. Just two metro stops from National Airport, we invite members to visit the office when in Washington for business or pleasure. We hope the property can serve the Association as well as the last for years to come.

Additional programs in the areas of faculty development, assessment and advocacy are under development and will require new resources and personnel. As these are outlined, AACP will communicate with deans and other stakeholders to insure the programs fully meet members' highest priorities for support and that they can be supported through a combination of dues, registration fees and development funds.

The AACP leadership and staff operate with a strong commitment to partnering as we work to understand members' needs and build programs and services that address them. We will add to AACP's leadership a treasurer and speaker of the House of Delegates to the AACP Board in 2007 and a standing committee on advocacy following action of the 2006 House of Delegates. This adds "bench strength" in the areas of finance and issues management. Additional governance changes have been proposed for discussion in Orlando.

AACP works to help individuals and institutions with their efforts to discover, learn, care and ultimately improve health. It is a privilege to be associated with a strong and activist organization that truly makes a difference in the quality of education and health care services.