



American Society of  
Health-System Pharmacists®

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# **ASHP Guidelines for Affiliation with State Organizations**

**Approved by the ASHP Board of Directors January 15, 2010**

## **Introduction**

This document expresses ASHP's policies regarding formal affiliation with state organizations that represent pharmacists who practice in hospitals and health systems.

## **Philosophy**

Article 8 of the ASHP Bylaws (Appendix A) establishes that ASHP shall recognize groups of pharmacists practicing in organized health care systems within the states when such groups promote the purposes of ASHP (see Appendix B). ASHP's membership focus is serving the unique needs of pharmacists who practice in hospitals and health systems. ASHP believes strongly that the practice of pharmacy in hospitals and health systems is a distinct area of practice and that practitioners in such practice have unique needs and interests. The association establishes formal relationships with affiliates who share this membership focus and who share ASHP's vision and commitment to concentrate on serving the unique needs of pharmacists in hospitals and health systems.

ASHP's goal in establishing affiliate relationships is to extend ASHP's ability to achieve its purposes as defined in its Charter (Appendix B). ASHP's value and influence is extended through the development of mutually supportive relationships with organizations that mirror its purpose at the state level. ASHP also benefits through the establishment of a grassroots network of organizations that enhance ASHP's ability to understand and respond to issues affecting members. Affiliates support the growth of ASHP and advocate its policies at a state and local level.

In return, ASHP supports the growth of its affiliates through programs aimed at assisting their development and improvement. ASHP also assists affiliates by providing information and tools regarding professional practice, practice standards, government affairs, and public relations. Affiliates are also invited to actively participate in shaping ASHP's national agenda for health-system pharmacy.

ASHP participates in a number of coalitions, alliances, business partnerships, and other liaison relationships. These other partnerships focus more narrowly on specific objectives rather than on the closely aligned membership missions of ASHP and its affiliates. Affiliation represents a unique relationship of ASHP with closely aligned, like organizations that exist at the state level.

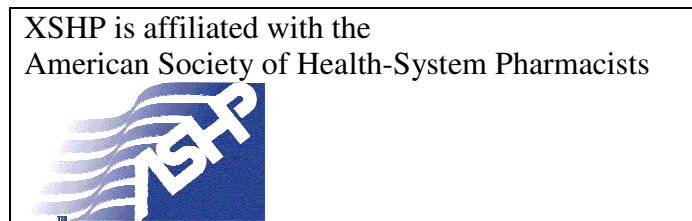
## **Authority**

Affiliation is a voluntary agreement between two organizations; a state-based organization and a national organization. Associations of pharmacists practicing in hospitals and health systems may voluntarily seek to pursue formal recognition as affiliates of ASHP. The authority to approve such requests for affiliation rests solely with the ASHP Board of Directors as defined under ASHP's Charter and Bylaws.

## **Obligations of ASHP**

ASHP's obligations to its affiliates include the following:

Permit use of the ASHP name and logo in accordance with ASHP policy as described below. Any other use of the ASHP name or logo requires the express written consent of ASHP.



Dedicate ASHP staff support to maintain and enhance the ASHP-affiliate relationship.

Regularly communicate regarding ASHP policies, programs, and initiatives and engage its affiliates in the development and implementation of ASHP's agenda.

Provide opportunities for shaping ASHP professional polices, programs, and priorities.

Provide tools and services available designed to help an affiliate carry out its mission and its affiliate responsibilities as defined in this document.

Promote membership in ASHP affiliates.

## Obligations of Affiliates

The obligations of ASHP affiliates include the following:

Support ASHP initiatives in public-policy advocacy and practice development.

Promote the standards and policies of ASHP within their states.

Actively participate in ASHP events and programs including but not limited to:

- Affiliate conferences
- Recommending members for appointment to ASHP councils, commissions, committees, or other related bodies.
- Proposing policy issues for ASHP action
- Providing ASHP with advice and comment on various initiatives and programs

Encourage the use of ASHP products and services.

Conduct the election of state delegates to the ASHP House of Delegates

Promote membership in ASHP.

## Requirements for Affiliation

The ASHP Board of Directors shall act on all requests for initial affiliation. The following guidelines describe the minimum requirements for affiliation with ASHP:

### ***Initial Affiliation:***

1. ASHP Bylaws permit only one ASHP affiliate per state.
2. The mission, scope, and membership focus of the requesting organization must be consistent and congruent with the purposes and mission of ASHP as defined in Article Third of the ASHP Charter (Appendix B) and the Board-approved policy on affiliation (Appendix C).
  - a. The requesting organization may be an independent hospital or health-system pharmacists organization or may exist as a component of a broader-based organization representing other segments of the profession, but in all cases the requesting body must be autonomous in its governance and finances and must have independent authority to establish programs, professional policies, and priorities related to pharmacy practice in hospitals and health systems.
  - b. If ASHP receives a petition for affiliation from an organization in a state where an affiliate of ASHP already exists, ASHP will receive the petition in consideration of affiliation. However, ASHP will notify the current state affiliate of the new petition for affiliation. The current affiliate will be given the opportunity within a time frame determined by the ASHP Board of Directors to submit a report to ASHP in which the organization may provide a continuing affiliation petition.

## ***Procedures for Initial Affiliation:***

1. Submitting Requests for Initial Affiliation
  - a. Organizations seeking affiliate status with ASHP should submit a written request signed by the president or chief elected officer of the requesting organization. The request should include the following documentation:
    - i. Cover letter outlining rationale for affiliation request, including acknowledgement of and agreement to comply with these guidelines.
    - ii. Governing documents (including Charter and Bylaws)
      1. Requesting organizations that exist as components of broader organizations should also include copies of relevant policies defining the role and authority of the requesting organization in addition to Charter and By laws of the parent organization.
    - iii. Membership report, including membership categories
      1. Requesting organizations that exist as components of broader organizations should submit a membership report, including membership categories of the component organization.
    - iv. Roster of Board of Directors and the curriculum vitae of each board member.
      1. Requesting organizations that exist as components of broader organizations should include a roster of both the Board of Directors of the parent organization and the elected leadership of the health-system component, including the curriculum vitae for both groups.
    - v. Organizational budget
      1. Requesting organizations that exist as components of broader organizations should include either a budget and/or related policies which delineate financial autonomy.
    - vi. Additional documentation demonstrating that the requesting organization meets the requirements for affiliation as defined herein.
      1. Comment letters from ASHP members in the petitioning state will be encouraged by the ASHP Board of Directors.
      2. ASHP reserves the right to request additional information from the petitioning organization.
2. Initial Review and Approval
  - a. Requests for affiliation are initially reviewed by the ASHP Commission on Affiliate Relations.
  - b. Following review of the request, the Commission will forward the request to the ASHP Board of Directors along with its recommendation.
  - c. Decisions regarding affiliation rest solely with the ASHP Board of Directors.

## **Affiliation Definitions:**

The ASHP Board of Directors shall act on all requests for affiliation. The following are the definitions of affiliation with ASHP:

**Full Affiliation:** The organization has successfully addressed all requirements for affiliation based on the ASHP Guidelines for Affiliation with State Organizations. The organization will undergo periodic review for continuing compliance with the ASHP Guidelines for Affiliation with State Organizations or review following any significant changes in organizational structure or bylaws.

**Provisional Affiliation:** The organization demonstrates substantial compliance with the ASHP Guidelines for Affiliation with State Organizations but additional information needs to be provided or specific organizational improvements need to be implemented before being granted full affiliation. The organization must address the information or improvement needs expeditiously, within a time frame determined by the ASHP Board of Directors. Failure to address the information or improvement needs will result in a change in affiliation status that may include a denial of affiliation. The specifics of the provisional information needed including a time frame will be addressed in a formal communication to the state organization from the ASHP Board of Directors

**Conditional Affiliation:** The organization is not in substantial compliance with the ASHP Guidelines for Affiliation with State Organizations. The organization must remedy the identified problem areas and submit a revised petition for affiliation within a period of time to be determined by the ASHP Board of Directors. Failure to address the areas of noncompliance with the Guidelines will result in a denial of affiliation.

**Denial of Affiliation:** The organization has been denied affiliation based on noncompliance with the ASHP Guidelines for Affiliation with State Organizations. ASHP is willing to entertain a new petition for affiliation from the state if changes are made to meet the criteria for ASHP affiliation. The specific areas of noncompliance with the Guidelines, including a time frame to remedy the problem areas, will be addressed in a formal communication to the state organization from the ASHP Board of Directors

### ***Ongoing Affiliation:***

Affiliation is a two-party process. A state organization voluntarily applies for affiliation and is recognized by ASHP based on the criteria outlined in this document. Either party may choose to discontinue the affiliation relationship. Official recognition as an ASHP Affiliate is maintained through a process of periodic review and assessment that is coordinated through the ASHP Commission on Affiliate Relations. Final authority to maintain recognition as an affiliate of ASHP rests with the ASHP Board of Directors.

## **Routine Communications**

Affiliates should routinely provide ASHP with updates describing the programs and priorities of the affiliate. Copies of Board (or component) minutes, strategic plans, newsletters, membership communications, and other documents that describe the programs and priorities of the affiliate may be provided directly or the affiliate may choose to prepare separate documentation that summarizes these leadership activities of the affiliate.

## **Periodic Self-Assessment**

Affiliates shall submit self-assessment reports to ASHP at least every five years documenting the organization's effectiveness in the following areas:

1. Continuing to meet the requirements for affiliation as set forth in this document.
2. Demonstrating service to hospital and health-system pharmacists through efforts in the following areas:
  - a. Communications with key audiences in the state about the value of professional contributions of hospital and health-system pharmacists.
  - b. Participation in organizational and planning development activities sponsored by ASHP.
  - c. Fostering compliance with ASHP practice standards for hospital and health-system pharmacy.
  - d. Fostering the creation of postgraduate residency training programs
  - e. Establishing and nurturing student societies of hospital and health-system pharmacy at colleges and schools of pharmacy.
  - f. Promoting involvement and leadership development of new practitioners in the organization and ASHP.
  - g. Any other activities that demonstrate the value of the organization to hospital and health-system pharmacists in the state.

# Appendix A

## **Article 8. Affiliated State Chapters**

**8.1.** ASHP shall recognize groups of pharmacists practicing in organized health care systems within the states when such groups promote the purposes of ASHP.

**8.1.1.** Only one group in each state (hereafter, affiliated state chapter) shall be affiliated with ASHP.

**8.1.2.** ASHP shall establish standards and criteria that a state group must meet to be affiliated with ASHP.

**8.2.** ASHP shall promote and strengthen affiliations with affiliated state chapters in order to support and fulfill the mission of ASHP and its affiliates.

**8.2.1.** Affiliated state chapters shall promote the standards and policies of ASHP within the state.

**8.2.2.** Affiliated state chapters may use the official Society logo and note its affiliation with ASHP under such terms and conditions as may be established by the Board of Directors.

**8.2.3.** Within the limits of its resources, ASHP shall endeavor to provide services, benefits, and programs to assist affiliated state chapters in furthering the purposes of ASHP and in furthering the organizational strength of affiliated state chapters.

**8.2.4.** Affiliated state chapters shall administer the election of voting state delegates to the House of Delegates.

**8.2.5.** Affiliated state chapter involvement is critical to ASHP and should advance the best interests of the membership at the national and state levels, encourage and facilitate two-way information exchange and support between ASHP and the affiliate, and provide benefits to ASHP and the affiliate.

**8.3.** Affiliation shall not limit the rights of ASHP or the affiliated state chapter.

**8.3.1.** Affiliated state chapters may not adopt, publicize, promote, or otherwise convey any policy or principle in the name of the American Society of Health-System Pharmacists that has not been officially adopted by ASHP.

**8.3.2.** Acts of affiliated state chapters shall in no way commit or bind ASHP.

**8.3.3.** Dues in affiliated state chapters may be set at the discretion of the chapter. Dues in ASHP shall be established pursuant to these Bylaws.

## Appendix B

### Purposes of ASHP as stated in the ASHP Charter

The purposes for which ASHP is formed are as follows:

- 1.** To advance public health by promoting the professional interests of pharmacists practicing in hospitals and other organized health care settings through:
  - a.** Fostering pharmaceutical services aimed at drug-use control and rational drug therapy.
  - b.** Developing professional standards for pharmaceutical services.
  - c.** Fostering an adequate supply of well-trained, competent pharmacists and associated personnel.
  - d.** Developing and conducting programs for maintaining and improving the competence of pharmacists and associated personnel.
  - e.** Disseminating information about pharmaceutical services and rational drug use.
  - f.** Improving communication among pharmacists, other members of the health care industry, and the public.
  - g.** Promoting research in the health and pharmaceutical sciences and in pharmaceutical services.
  - h.** Promoting the economic welfare of pharmacists and associated personnel.
- 2.** To foster rational drug use in society such as through advocating appropriate public policies toward that end.
- 3.** To pursue any other lawful activity that may be authorized by ASHP's Board of Directors.

## **Appendix C**

### **Mission, Scope, and Membership Focus of ASHP and Its Affiliates**

#### **ASHP Board policy—April 16, 2004**

To reaffirm that pharmacy practice in hospitals and health systems is a distinct area of the profession and that practitioners in this area have unique interests and needs; further,

To reaffirm that ASHP's mission is to serve the interests and needs of pharmacists who practice in hospitals and health systems; further,

To declare that ASHP has no interest in merging with other pharmacy organizations; further,

To reaffirm ASHP's desire to cooperate with a variety of organizations both inside and outside of pharmacy in ways that serve its members and help it achieve its objectives; further,

To reaffirm that affiliation is a formal relationship in which ASHP collaborates with organizations whose purposes and priorities are aligned with ASHP's mission, scope, and membership focus; further,

To revise the ASHP affiliation guidelines to be consistent with the above points; further,

To enhance ASHP's role in fostering the success of its affiliates.

(Note: While the ASHP affiliation guidelines are under revision, ASHP will maintain the status of currently affiliated organizations and will not consider any new applications for affiliation.)

(Note: This action supersedes Board action, April 27, 2000.)