

**ASHP** Section of PHARMACY PRACTICE MANAGERS

**LIVE WEBINAR: Leadership Competencies to Advance Pharmacy Practice - Change Management Essentials**

**Wednesday, March 23, 2011  
2:00 - 3:00 PM ET**

Planned by the ASHP Section of Pharmacy Practice Managers Section Advisory Group on Manager Development as a value added service for members.

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**Objectives**

- Understand the factors driving a pharmacy practice model change
- Describe the Pharmacy Practice Model Initiative (PPMI)
- Apply strategies to lead your team through change
- Describe the key leadership skills all managers need to implement new pharmacy practice model

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**Factors Driving a Practice Model Change**

- Challenges in the US health care system to improve quality and decrease cost
- Growing number of eligible patients due to health care reform
- Impact of healthcare reform on how we deliver care
- Increased complexity of drug therapy
- Recognition of pharmacists as drug experts on the interdisciplinary team
- Public access to health care information

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### Today's Challenges

- Public perception of a pharmacist
- Demonstrating the value of pharmacy services
- Scope of practice
- Turf battles



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### Practice Model Definition

- The operational structure that defines how and where pharmacists practice, including the type of drug distribution system used, the layout and design of the department, how pharmacists spend their time, practice functions, and practice priorities
- Most important factor determining the role and effectiveness of the pharmacy department

≡Breland BD. Am J Health Syst Pharm. 2007; 64:1284-91.



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### Practice Model Overview

- The pharmacy practice model must be structured in such a way that the basic core pharmacy services are provided in a consistently high-quality manner
- If this doesn't happen, the institution will lose faith in the pharmacy, regardless of how competent specific clinical specialists may be

Breland BD. Am J Health Syst Pharm. 2007; 64:1284-91.



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### Practice Model Overview

- A major challenge for the pharmacy manager is to develop a practice model that includes safe and efficient drug distribution systems
- Maximizing pharmacist patient care services
- Pharmacists need the time and opportunity to practice their clinical skills as a direct caregiver (e.g.; as part of the patient care team)

Breland BD. Am J Health Syst Pharm. 2007; 64:1284-91.



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### Practice Model Overview

- How to build the practice structure or model to deliver this value is a major challenge facing pharmacy leaders today
- Goal is to provide optimum value through practice excellence

Breland BD. Am J Health Syst Pharm. 2007; 64:1284-91.



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### Designing a Pharmacy Practice Model

- Seven basic principles
  - ❖ Every patient deserves a pharmacist
  - ❖ Delivery of consistent care
  - ❖ Adequate pharmacist staffing to provide patient care all hours of the day
  - ❖ Ability to prioritize work
  - ❖ Balance between value added versus enjoyable tasks
  - ❖ Consistency with scheduling and practice area
  - ❖ The pharmacist is first responsible to the patient

Breland BD. Am J Health Syst Pharm. 2007; 64:1284-9112



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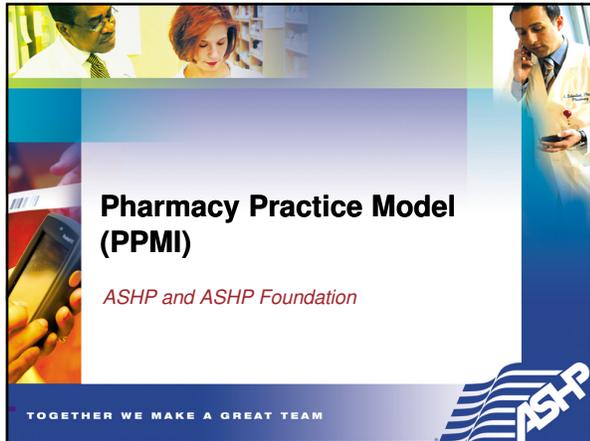
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**Pharmacy Practice Model (PPMI)**  
*ASHP and ASHP Foundation*

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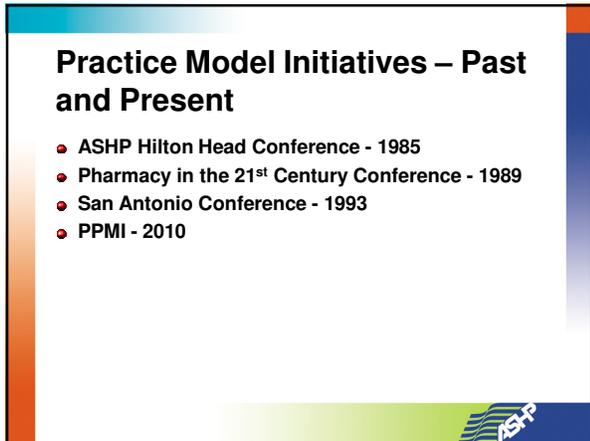
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**Practice Model Initiatives – Past and Present**

- ASHP Hilton Head Conference - 1985
- Pharmacy in the 21<sup>st</sup> Century Conference - 1989
- San Antonio Conference - 1993
- PPMI - 2010

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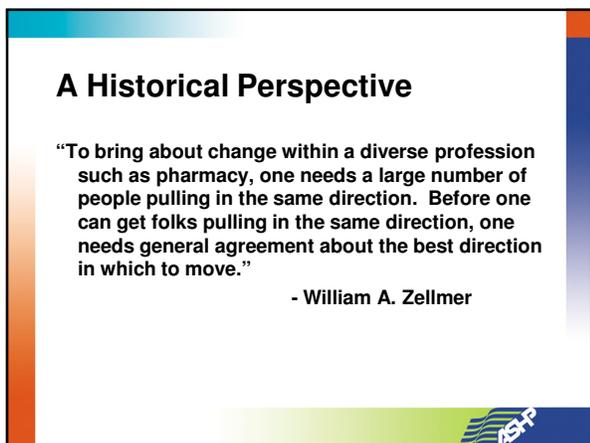
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**A Historical Perspective**

“To bring about change within a diverse profession such as pharmacy, one needs a large number of people pulling in the same direction. Before one can get folks pulling in the same direction, one needs general agreement about the best direction in which to move.”

- William A. Zellmer

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### PPMI: What was it?

- 2 day invitational summit in Dallas TX
  - ❖ November 7 – 9, 2010
  - ❖ 150 pharmacist participants
  - ❖ Diverse representation
- Issue briefings commissioned
  - ❖ 5 papers will be published
  - ❖ Help understand imperative for change
- Plenary presentations and workgroups
  - ❖ Followed by a consensus process to address key outcomes of a futuristic pharmacy practice model



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### ASHP Advisory Committee's Objectives for PPMI



- A vision that ensures provision of safe, effective, efficient, accountable, and evidence-based care for all hospital/health system patients;
- Determine patient care-related services that should be consistently provided by departments of pharmacy in hospitals and health systems and increase demand for pharmacy services by patients/caregivers, healthcare professionals, healthcare executives, and payers;
- Identify the available and emerging technologies that should be leveraged to support implementation of the practice model;
- Support the optimal use of pharmacy resources through development of a template for a practice model which is operational, practical, and measurable; and
- Identify specific actions steps pharmacy leaders and staff should take to implement practice model change.



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### 5 Core Areas of PPMI

- Overarching Principles
- Services
- Technology
- Technicians
- Implementing Change and Responding to Challenges



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## Overarching Principles

- **Consensus on the following principles:**
  - ❖ Opportunity to advance the health and well being of patients by changing the practice model
  - ❖ Financial pressures will force changes in how resources are used
  - ❖ Every pharmacy department should identify drug-therapy management services provided consistently by pharmacists
  - ❖ In the coming years, there will be increasing demand among new pharmacy graduates for residency training



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## Services

- **Essential services should include:**
  - ❖ Tracking and trending pharmacist interventions
  - ❖ Medication reconciliation and transitions of care
  - ❖ Every patient deserves the care of a pharmacist
  - ❖ Resource allocation will need to accommodate the complexity of patients and organizational needs



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## Technology

- **Electronic medical record systems**
- **Use of barcode technology during medication administration**
- **Real-time monitoring and intervention documentation systems that provide a work queue of patients needing review and possible intervention**
- **Pharmacy residency programs should provide informatics training**



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### Technicians

- Assigning medication distribution tasks to technicians would make it possible to deploy pharmacists to drug-therapy management services
- Uniform national standards should apply to the education and training of pharmacy technicians
- Pharmacy technicians who have appropriate education, training, and credentials should be used to free pharmacists from drug distribution activities
- To support optimal pharmacy practice models, technicians must be licensed by state boards of pharmacy



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### Implementing Change

- Pharmacists who provide drug-therapy management must have completed an ASHP accredited pharmacy residency
- Support from health care executives, pharmacy department and clinical pharmacy leadership



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### Principles for a Successful Change

- All pharmacists have significant clinical roles, not just a few specialists
- Good clinical decision support tools and integrated electronic health records across the continuum of care.
- Importance of pharmacy technicians
- Expansion of pharmacy residency programs



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### Impact of the PPMI

- Implementing the future practice model(s) will mean incremental changes
- Incremental changes will need to be understood and embraced by key decision makers
- Building reliable patient centric services with measurable success will be required of tomorrows leaders



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### The Soft Science of Change

- 3 Aspects to Change
  - ❖ Conceptual
  - ❖ Methodological
  - ❖ Psychological
- 2 Categories of Change
  - ❖ External forces
  - ❖ Individual/organizational initiatives

Ray MD, Breland BD. PPMI Summit Briefing Paper 5. 2010; 89 - 102



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### Strategies to Lead your Team through Change

- Getting your team to embrace change, not resist it
- Change management does not happen randomly
- Fostering change entails:
  - ❖ Conceptualization
  - ❖ Consensus-building
  - ❖ Implementation
  - ❖ Dissemination (diffusion)

Ray MD, Breland BD. PPMI Summit Briefing Paper 5. 2010; 89 - 102



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### Planning for Change

- **Change Model Process**
  - ❖ Create urgency: PPMI
  - ❖ Form a powerful coalition
  - ❖ Create a vision for change
  - ❖ Communicate the vision
  - ❖ Remove obstacles
  - ❖ Create short-term wins
  - ❖ Build on the change
  - ❖ Anchor the changes culture

Ray MD, Breland BD. PPMI Summit Briefing Paper 5. 2010; 89 - 102



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### Applying a Practice Model Change

- **Implementing a practice model change at St. Joseph Medical Center using 8 steps of the Change Model**



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### Pitfalls to Change

- **What motivates the manager (change agent) does not motivate most of their employees**
- **Managers should let employees write their own change story**
  - ❖ Non-negotiable, scope
- **A change message, in order to create sufficient energy, must contain both positive and negative elements**
- **Leaders may mistakenly believe they are already effective role models**

Ray MD, Breland BD. PPMI Summit Briefing Paper 5. 2010; 89 - 102



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### Pitfalls to Change

- Assess the role of “influence leaders”
  - ❖ Can be over and under estimated
- Money is not the most effective motivator
- Change must be perceived as fair and just
- Employees do not change without their permission
- Environmental barriers to change must be addressed

Ray MD, Breland BD. PPMI Summit Briefing Paper 5. 2010; 89 - 102



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### Summary: Strategies to Lead your Team through Change

- Psychological, methodological, conceptual
- Fostering change
- 8 step change model process
- Avoid the pitfalls to change



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### Leading and Managing People

- Hire the best people possible, and don't compromise on this
  - ❖ Provide challenging work, the best people don't want easy jobs
  - ❖ Effective recruitment, establish network
    - Provide frequent and consistent feedback
- Define acceptable boundaries for behavior and performance
  - ❖ Boundaries themselves are not so much the issue, as the fact that there are some
  - ❖ Provide positive feedback more frequently than negative feedback



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### Leading and Managing People

- **Never blame the person; *always* focus on the problem!**
  - ❖ If a problem arises or an expectation that you have is not being met, focus on the problem and not the person's abilities to accomplish the task
  - ❖ Most of the time there has been a communication breakdown or no communication at all (e.g.; staff has different understanding of what is expected and what is a priority)



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### Leading and Managing People

- **Create a culture of accountability**
  - ❖ Continuous Learning
  - ❖ Decisions based upon evidence, not personal preference
  - ❖ Non-punitive environment
  - ❖ Multi-disciplinary approach



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### Leading and Managing People

- **Allow people that have to live with a decision make (or at least have significant input into) the decision**
- **People are motivated by:**
  - ❖ Recognition
  - ❖ Responsibility
  - ❖ Advancement
  - ❖ Challenging and interesting work
  - ❖ Achievement
  - ❖ Work-life balance
  - ❖ A distant last is money



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### Leading and Managing People

- **Treat everyone with respect**
  - ❖ Establish ground rules and values
  - ❖ If you don't have something nice to say to or about someone, then be quiet
  - ❖ If you identify a problem list at least one viable solution
- **Your employees are your customers**
  - ❖ Respect them
  - ❖ Listen carefully to them
  - ❖ Actively seek their advice
  - ❖ Remember, your success depends on them doing a great job



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### Leading and Managing People

- **Always follow through on what you say you will do**
  - ❖ If you don't, you will not have employees that believe or trust you
  - ❖ If you can't, then tell them you can't or they may think you don't care
- **There is rarely an absolute right or wrong, only different perceptions of what is right and wrong**
- **Exemplify being solution-driven, not problem-centric**



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### Tools to help lead change

- **Creating the Team**
  - ❖ High performing teams have the following characteristics:
    - Purpose
    - Process
    - Communication
    - Involvement
    - Commitment
    - Trust



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### Tools to help lead change

- Creating a Need or Urgency
  - ✦ SWOT analysis
- Creating a Vision
- Engage in Dialogue
- PDCA



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### Practical ideas to begin the PPMI change process with your staff

- Recommendations from PPMI
- Gap analysis
- Updating 2015 to 2020
- SAG on PPMI developed



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### What can you do now?

- Read 5 PPMI briefing papers
- Hold your own PPMI at your health system or in your state
- Take key recommendations to your leadership
- Hold journal club with your VP
- Talk with your Boards of Pharmacy
  - ✦ Technician utilization
  - ✦ Pharmacists scope of practice
- Investigate funding sources: Grants
- Incorporate talks into state and regional association/society meetings



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