

ASHP Director of Pharmacy and Leadership Assessment Form

*Developed as an Assessment Form
By the ASHP Section of Pharmacy Practice Managers
Advisory Group on Management Competencies*



Purpose

The modern health care system places many demands on administrative pharmacy personnel. Pharmaceutical care in the acute and chronic settings impacts every facet of the hospital, from patient satisfaction to financial and clinical outcomes. An effective director of pharmacy exhibits both strong leadership skills and an understanding of the diverse branches of health-system pharmacy. Such an individual is able to lead in the inpatient, ambulatory care, and community pharmacy settings to ensure institutional success.

The qualities of great leaders and managers are easy to recognize but sometimes difficult to quantify. This tool is designed to assist health-care administrators in objectively measuring those elusive characteristics; it contains pharmacy-specific competencies as well as general leadership principles. It is intended to assist hospital administrators in the selection of pharmacy directors and administrators.

Description of Rating Scale

5 Could teach others and serves as a mentor.

Demonstrates an exemplary skill set, showing a particularly sophisticated approach to handling the situation.

4 Role model in this area.

Demonstrates the full range of skills appropriate for handling a situation, providing the best outcome.

3 Demonstrates this characteristic.

Demonstrates a sufficient range of skills for handling the situation, providing the desired outcome.

2 Opportunity for improvement in this area.

Should improve skills in order to appropriately handle situations.

1 Lacks experience in this area.

This area will be detrimental to the person and the program if significant improvements are not made; education and experience in these skills are needed.

NOTE: The developers of this document are aware that the person being assessed may not have a uniform rating for all attributes described under each area of competency. For example, in "Medication-Use System

Management,” the pharmacist given a rating of 3 may not be considered a 3 on every behavior in that section. We suggest that you either weight each behavior according to what is most important in your institution or give the rating that applies to more than 50% of the items in that description.

References and Acknowledgements:

- 1) ASHP MINIMUM COMPETENCY GUIDELINES FOR ADMINISTRATIVE PHARMACY PRACTITIONERS; PREPARED BY: THE ADVISORY WORKING GROUP FOR ADMINISTRATIVE PRACTICE STANDARDS, APRIL, 1988
- 2) The Section of Pharmacy Practice Managers' Advisory Group on Pharmacy Management Competencies 2006-2007
- 3) The Section of Pharmacy Practice Managers Executive Committee 2006-2007

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Assessment Sheet



Evaluator: _____

Person: _____

Date: _____

<p>1. Medication-Use System Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>2. Pharmacy Operations Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>
<p>3. Human Resources Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>4. Financial Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>
<p>5. Information/Technology Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>6. Leadership and Vision</p> <p>1 2 3 4 5</p> <p>Comments:</p>
<p>7. Planning and Organizational Skills</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>8. Problem Solving and Critical Thinking</p> <p>1 2 3 4 5</p> <p>Comments:</p>
<p>9. Self-Development and Teachability</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>10. Self-Awareness and Self-Management</p> <p>1 2 3 4 5</p> <p>Comments:</p>
<p>11. Empathy and Social Skills</p> <p>1 2 3 4 5</p> <p>Comments:</p>	<p>12. Communication Skills</p> <p>1 2 3 4 5</p> <p>Comments:</p>

13. Integrity 1 2 3 4 5 Comments:	14. Commitment (Initiative and Persistence) 1 2 3 4 5 Comments:
15. Responsibility (Selfless Accountability for Actions) 1 2 3 4 5 Comments:	16. Caring about Others 1 2 3 4 5 Comments:

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Attribute Descriptions

Pharmacy Practice Knowledge



1. Medication-Use System Management (the processes of medication prescribing, order processing, dispensing, administration, and effects monitoring)

1 2 3 4 5

Ranking of 5:

Behavior: Would assume leadership for effective drug-use policy (policies for evaluation, selection, and therapeutic use of drugs and related devices) in partnership with medical staff and other health care providers, through the pharmacy and therapeutics committee and other means. Would skillfully maintain effective medication-use systems for diverse patient care settings (e.g., inpatient care units, operating rooms, ambulatory care clinics, emergency departments, long-term care facilities, ambulatory care facilities, hospice). Would be able to oversee clinical research that complies with regulatory requirements, accreditation standards, and national initiatives. Has a strong grasp of the literature on medication safety (specifically, information on the inherent characteristics of drugs in terms of their safety profile) and would be a leader within the organization for medication safety initiatives.

Ranking of 3:

Behavior: Would have some success in partnering with medical staff and other health care providers to lead effective drug-use policy. Would be able to maintain effective medication-use systems for diverse patient care settings, and to oversee clinical research compliant with regulatory requirements, accreditation standards, and national initiatives. Demonstrates an understanding of the medication safety literature, and would be an active participant within the organization for medication safety initiatives.

Ranking of 1:

Behavior: Does not possess the leadership and communication skills to lead drug-use policy development in cooperation with medical staff and other health care providers. Does not demonstrate the ability to maintain effective medication-use systems for diverse patient care settings, oversee clinical research, or lead the organization in medication safety initiatives. Does not have a strong grasp of the medication safety literature or best practices from similar health care settings, and does not have a complete understanding of regulatory requirements for medication safety.

2. Pharmacy Operations Management

1 2 3 4 5

Ranking of 5:

Behavior: Possesses an outstanding awareness of the diverse services that a health-system pharmacy should provide. Would be able to maintain comprehensive pharmacy services that include timely medication order review, safe and effective drug preparation, and accurate and timely drug distribution. Would ensure that pharmacists are involved in the following: provision of drug information and patient consultations as necessary, collaboration with caregivers to ensure that drug therapy is evidence based and cost-effective, development of drug protocols (guidelines for safe and effective medication use), and monitoring of patient drug therapy (medications prescribed, administered, and evaluated across the continuum of care). Would maintain both routine and unique drug control systems (methods of medication storage, preparation, dispensing, and monitoring) (e.g., unit dose, controlled substances, IV admixtures, investigational drugs). Would plan pharmacy facilities to ensure effective and safe pharmacy workflow. Would effectively develop systems to ensure staff orientation to and training in pharmacy processes and verification of competency. Understands the principles of productivity measurement and performance improvement and the use of internal and external benchmarks as appropriate. Shows a desire and ability to develop an interface and procedures with internal and external bodies for providing needed medications in natural disasters, terrorist events, and other emergencies.

Ranking of 3:

Behavior: Possesses sufficient awareness of the diverse services that a health-system pharmacy should provide. Would be able to maintain, but not develop, comprehensive pharmacy services that include timely medication order review, safe and effective drug preparation, and accurate and timely drug distribution. Usually would ensure that pharmacists are involved in the following: provision of drug information and patient consultations as necessary, collaboration with caregivers to ensure that drug therapy is evidence based and cost-effective, development of drug protocols, and monitoring of patient drug therapy. Would maintain both routine and unique drug control systems (e.g., unit dose, controlled substances, IV admixtures, investigational drugs). Would plan pharmacy facilities to ensure effective and safe pharmacy workflow. Would effectively maintain, but not develop, systems to ensure staff orientation to and training in pharmacy processes and verification of competency. Understands the principles of productivity measurement and performance improvement and the use of internal and external benchmarks as

appropriate. Shows a desire and ability to manage, but not to develop, an interface and procedures with internal and external bodies for providing needed medications in natural disasters, terrorist events, and other emergencies.

Ranking of 1:

Behavior: Possesses insufficient awareness of the diverse services that a health-system pharmacy should provide. Would not be able to maintain or develop comprehensive pharmacy services that include timely medication order review, safe and effective drug preparation, and accurate and timely drug distribution. Does not demonstrate or articulate the ability to ensure that pharmacists are involved in the following: provision of drug information and patient consultations as necessary, collaboration with caregivers to ensure that drug therapy is evidence based and cost-effective, development of drug protocols, and monitoring of patient drug therapy. Would not be able to maintain both routine and unique drug control systems (e.g., unit dose, controlled substances, IV admixtures, investigational drugs). Would not be able to plan pharmacy facilities to ensure effective and safe pharmacy workflow. Would not be able to effectively maintain or develop systems to ensure staff orientation to and training in pharmacy processes and verification of competency. Does not understand the principles of productivity measurement and performance improvement and the use of internal and external benchmarks. Shows a desire but lacks the ability to manage or develop an interface and procedures with internal and external bodies for providing needed medications in natural disasters, terrorist events, and other emergencies.

3. Human Resources Management

1 2 3 4 5

Ranking of 5:

Behavior: Would be able to effectively recruit, interview, select, develop, manage, and retain pharmacy staff talent. Would adeptly handle the interpersonal and regulatory intricacies of managing people. Would use performance appraisal processes to optimize staff performance and would take appropriate corrective action as needed on the basis of staff performance. Would routinely recognize strengths and interests among others and actively provide opportunities to promote their professional development. Would identify promising practitioners and offer to mentor them. Would communicate vision, goals, and standards to staff and foster an equitable workplace that supports diversity. Possesses a strong ability to work with human resource specialists within the institution in order to benefit pharmacy.

Ranking of 3:

Behavior: Might require assistance to be able to effectively recruit, interview, select, develop, manage, and retain pharmacy staff talent. Would adequately handle the interpersonal and regulatory intricacies of managing people. Would use performance appraisal processes to address staff performance and would take appropriate corrective action as needed on the basis of staff performance. Would recognize strengths and interests among others and provide opportunities to promote their professional development. Might identify promising practitioners and offer to mentor them. Within established organizational expectations, would communicate vision, goals, and standards to staff and foster an equitable workplace that supports diversity. On some occasions, would be able to work with human resource specialists within the institution in order to benefit pharmacy.

Ranking of 1:

Behavior: Shows the desire, but might require training and significant guidance to be able to effectively recruit, interview, select, develop, manage, and retain pharmacy staff talent. Has little experience in handling the interpersonal and regulatory intricacies of managing people. Would require guidance and oversight in using performance appraisal processes to optimize staff performance and, without oversight, might not take appropriate corrective action as needed on the basis of staff performance. Would require additional experience to be able to routinely recognize strengths and interests among others and actively provides opportunities to promote their professional development. Might identify promising practitioners, but has inadequate personal experience to become a mentor to them. Would require additional training and guidance to develop and communicate vision, goals, and standards to staff and to foster an equitable workplace that supports diversity.

4. Financial Management

1 2 3 4 5

Ranking of 5:

Behavior: Has the decision-making skills and financial acumen necessary to adeptly handle the pharmacy budget. Can be trusted to develop, manage, and be accountable for control of departmental revenue, expense, and capital budgets. Knows how to apply analyses such as cost-benefit and return on investment (ROI) principles to decision-making and would use financial reports in departmental planning. Would consider budget realities when assessing current and future staffing needs. In planning for pharmaceutical expenditures, would consider organizational factors, such as case mix and severity adjustments, new technologies, new drug releases, and new hospital services and procedures. Would adapt systems to optimize revenue capture in accordance with changes in pharmaceutical and reimbursement models. Has the capability to communicate with administrators and members of the administrative suite, and the financial management skills to optimize pharmacy growth, staffing, and drug and biologicals budgets. Possesses a strong ability to work with financial management specialists within the institution in order to benefit pharmacy.

Ranking of 3:

Behavior: Has decision-making skills and adequate financial understanding to handle the pharmacy budget. Is competent to prepare, manage, and be accountable for control of departmental revenue, expense, and capital budgets. Has a good working knowledge of cost-benefit analysis and a basic understanding of ROI principles, but might not necessarily make the best use of financial reports in departmental planning. Has a good working picture of budget realities, but would not always consider them when assessing current and future staffing needs. In planning pharmaceutical expenditures, would consider some organizational factors, such as new technologies, new drug releases, and new hospital services

and procedures, but might not always look at the bigger picture (e.g., case mix and severity adjustments). Often might tweak systems to optimize revenue capture in accordance with changes in pharmaceutical therapy, but not always in response to changes in reimbursement models. On some occasions, would be able to work with financial management specialists within the institution in order to benefit pharmacy.

Ranking of 1:

Behavior: Has few of the financial decision-making skills necessary to adeptly handle the pharmacy budget. May lack competency to develop, manage, and control departmental revenue, expense, and, capital budgets. Lacks the knowledge or experience to apply analyses such as cost-benefit and ROI principles to decision-making, and would fail to analyze or use financial reports in departmental planning. Would rarely consider budget realities when assessing current and future staffing needs. If planning for pharmaceutical expenditures, generally would not consider organizational factors, such as case mix and severity adjustments, new technologies, new drug releases, or new hospital services and procedures and their eventual and inevitable impact on budgets. Would usually ignore, miss, or overlook opportunities to adapt systems to optimize revenue capture in accordance with changes in pharmaceutical and reimbursement issues.

5. Information/Technology Management

1 2 3 4 5

Ranking of 5:

Behavior: Would leverage technology to improve patient care and medication safety, boost efficiency, and enhance communication among health care providers. Would be able to facilitate appropriate interaction among the pharmacy department, information technology staff, and other health care disciplines to ensure effective use of medications and medication-related technologies. Would ensure that information systems are interfaced or integrated across the health system. Would protect the confidentiality of patient information through protocols and security monitoring. Would seek new technology and automation applications to optimize medication-use processes, and would use technology assessment principles to evaluate the cost-effectiveness of new technology. Would maximize the use of available technology by ensuring that recommended optimization processes (system operations to achieve the highest level of performance and results) and procedures are consistently followed. Has full understanding of proceeding through the change process to implement the selected technology with all pertinent staff. Knows and can communicate the value and ROI of the selected technology within the institutional hierarchy.

Ranking of 3:

Behavior: Has an awareness of health care technology but seems to either overestimate or underestimate its role in improving patient care, medication safety, efficiency, and communication. Would usually promote sufficient interaction between the pharmacy department, information technology staff, and other health care disciplines to ensure effective use of medications and medication-related technologies. However, might sometimes struggle to ensure that information systems are interfaced or integrated across the health system. Would adequately react to new technology proposed to him or her, but might lack clear understanding of the cost-effectiveness of that technology. Would adequately manage available technology, but might not maximize its potential with optimization processes and procedures. Has some understanding of proceeding through the change process to implement the selected technology with some pertinent staff. Has knowledge of the value and ROI of the selected technology but would have a difficult time communicating within the institutional hierarchy.

Ranking of 1:

Behavior: Is not adequately aware of technology's role in the health care system. Would be minimally able to facilitate appropriate interaction among the pharmacy department, information technology staff, and other health care disciplines to ensure effective use of medications and medication-related technologies. This person's handling of pharmacy information systems and personal relationships would prevent effective integration with the health system's technology. Person would seek out suboptimal technology or would resist any new technology changes. Has minimal understanding of the principles of cost-effectiveness in information technology. Use of available technology will be hindered because recommended optimization processes and procedures would not be consistently followed.

Skills and Abilities

6. Leading and Vision

1 2 3 4 5

Ranking of 5:

Behavior: Exhibits qualities and innovative ideas that elicit quality behavior in others. Consistently becomes the natural team leader. Frequently sees better ways to do things in the future and effectively inspires others to agree with the same vision. Has an accurate understanding of pharmacy practice and would focus on long-range planning for departmental activities. Often conceptualizes new services. Colleagues and subordinates view this person as a leader. Would consistently become the leader for projects at the health-system level. Can conceptualize new ways to do things and is able to influence others to believe in a shared vision, while maintaining professional credibility. Is able to mobilize support for initiatives by developing strategies to engage key stakeholders. Seeks understanding of different points of view from other disciplines and considers these in making decisions. Engenders mutual respect and trust with other disciplines. Helps others to achieve their goals. Is able to use expert knowledge to gain support for change.

Ranking of 3:

Behavior: By example and discussion, encourages other pharmacists to assume assigned responsibilities. Might lack specific planning or follow-up when implementing new policies and procedures, but usually would get all staff to implement the policy without much difficulty. Understands most aspects of and the rationale of procedures and would follow up to see that new policies continue in effect. Alternatively, might need to explain the rationale in order to persuade most staff to follow new policies. At times, might be too focused on today's problems to plan for the future.

Ranking of 1:

Behavior: Knows policies and is able to follow them, but has difficulty persuading others to do so. Alternatively, does not understand current policies and is not able to persuade others to follow them. Is unable to get others to cooperate or convince them of the need for new policies. No planning or follow-up would occur.

7. Planning and Organizational Skills

1 2 3 4 5

Ranking of 5:

Behavior: Appropriately assigns priorities to maximize use of resources, materials, and personnel. Anticipates changes in the work environment, and schedules concurrent and sequential activities as necessary to meet deadlines. Appropriately plans both personal tasks and group or organizational work in which he or she is involved. Is always prepared and is able to organize and coordinate activities to meet deadlines regardless of the number of projects he or she is involved in. Is concerned about details and quality. Efficiently balances all responsibilities.

Ranking of 3:

Behavior: Effectively plans for the major portions of the task, but is not always able to anticipate and prepare for less obvious requirements. Though generally capable, sometimes misses deadlines or is late for scheduled appointments or meetings. With some prompting, is able to coordinate the activities of others in order to get the job done. Usually completes tasks on time.

Ranking of 1:

Behavior: Has little sense of priorities. Moves from one crisis to another with no regard for an integrated plan. Is unable to anticipate or forecast future needs. Always procrastinates and rarely is able to complete projects on time.

8. Problem Solving and Critical Thinking

1 2 3 4 5

Ranking of 5:

Behavior: Is extraordinarily skilled at exploring and solving problems. Is fully competent in identifying and abstracting problems, ascertaining what information is relevant to them, searching for information, and formulating an appropriate solution. Is habitually inquisitive, well-informed, trustful of reason, open-minded, flexible, fair-minded in evaluation, honest in facing personal biases, prudent in making judgments, willing to reconsider, clear about issues, orderly in complex matters, diligent in seeking relevant information, reasonable in the selection of criteria, focused in inquiry, and persistent in seeking results that are as precise as the subject and the circumstances of inquiry permit. Evaluates and selects from relevant alternatives for solving problems, and also structures a problem in a way that would lead to generation and testing of new alternatives with a focus on long-term success. Learns from failures and tries new solutions.

Ranking of 3:

Behavior: Is moderately skillful in analyzing problems and formulating solutions; is generally competent, but exhibits weaknesses in one or more important aspects. May not recognize limitations of specific techniques. Regularly breaks problems into parts and could be expected to provide several different approaches to solving them. Follows through on the problem, paying special attention to details. Alternatively, isolates a set of issues when confronted with a problem but fails to define reasonable criteria for comparing the merits of alternative proposals. When a proposed solution results in failure, may need some help in formulating another approach.

Ranking of 1:

Behavior: Is generally ineffective in problem analysis. Usually fails to see significant elements, or proceeds in a confused, disorderly fashion. Sometimes relies on inappropriate data or intuition and might not be able to explain his or her actions. Alternatively, has significant difficulty in solving problems and is unable to break the problem into solvable parts.

9. Self-Development and Teachability (Receptivity to Learning)

1 2 3 4 5

Ranking of 5:

Behavior: Is particularly alert to opportunities to broaden his or her competence and insight beyond required assignments. Has a sense of direction and purpose and a well-crafted and realistic plan for realizing educational and career goals and for assessing and modifying them. Places a high priority on continuing professional development. Is an expert on pharmaceutical care issues and is also knowledgeable about problems associated with nursing care, health care delivery, technology, and other areas. Enjoys learning and creates methods of acquiring new information; may seem driven to learn as much as possible.

Ranking of 3:

Behavior: Is moderately alert to opportunities for learning. Might not have a fully thought out career development plan. Occasionally takes special steps to strengthen his or her professional preparation. Is well-informed through self-guidance in some areas of his or her interest, but the scope or intensity of involvement is limited. Is fully capable, but at times has other priorities that overshadow the need to learn.

Ranking of 1:

Behavior: Undertakes only prescribed assignments and courses within defined field of study. Chooses projects and courses in areas of previously demonstrated strength and competence. May do nothing to develop a career plan or to implement whatever plan he or she has. Does only what is required.

Emotional Intelligence

10. Self-Awareness and Self-Management

1 2 3 4 5

Ranking of 5:

Behavior: Is always aware of his or her internal states, preferences, resources, and intuitions. Is always in control of his or her emotions, and effectively uses own emotions to motivate and guide self. This person's emotional state never adversely affects his or her decisions, behaviors, or conversations. Person is not driven by uncontrolled urges, desires, or ambitions. Is calm under pressure, but never cold, distant, or aloof. Is comfortable with "true self" and is therefore genuine, open, and receptive to feedback. Might be described as an emotional "rock," but still is in tune with gut feelings.

Ranking of 3:

Behavior: Is usually aware of his or her internal states, preferences, resources, and intuitions. With a few exceptions, is in control of his or her emotions. Decisions, behavior, or conversations are sometimes adversely affected by fluctuations in emotions. Is sometimes flustered in pressure-filled situations or somewhat distant emotionally. Is not always receptive to feedback at first.

Ranking of 1:

Behavior: Is not aware of his or her internal states, preferences, resources, and intuitions, and frequently loses control of emotions. This could manifest in conversations, decisions, behavior, or performance. Decisions and behaviors may be adversely affected by his or her emotional state. Seems driven by uncontrolled urges or desires. Is flustered under pressure, emotionally aloof, or both.

11. Empathy and Social Skills

1 2 3 4 5

Ranking of 5:

Behavior: Is highly adept at understanding and responding to other people's emotions and needs. Is attuned to the reactions of those around him or her and can sense even slight changes in positive or negative emotions. Because of this trait, is aware of the political climate of an organization or department and uses skills to build coalitions across departments. Is empathic and supportive, shows sensitivity, and can successfully use these traits in group and one-on-one interactions. Because this person understands other people's emotions, he or she can artfully mentor, challenge, encourage, and guide their development. Is aware of the type of feedback that each person appreciates and frequently praises co-workers. Uses humor when appropriate and can resolve disagreements with tact and diplomacy. Interactions with people are fascinating and ingenious.

Ranking of 3:

Behavior: Has no major deficits in his or her ability to understand and react to other people's emotions and needs. Some areas are more developed than others. Is adequately in tune with the reactions of those around him or her and can sense major changes in positive or negative emotions. Shows adequate empathy and sensitivity but lacks some skill in practicing these traits in groups or one-on-one interactions.

Ranking of 1:

Behavior: Regularly misunderstands other people's emotions and needs and reacts poorly. Is often out of touch with the reactions of those around him or her, missing even major changes in positive or negative emotions. Would not be described as empathic and supportive, shows insensitivity, and is deficient in group and one-on-one interactions. Is not able to effectively mentor, challenge, encourage, and guide others. Interactions with people are often painful and disruptive.

12. Communication Skills

1 2 3 4 5

Ranking of 5:

Behavior: Goes out of his or her way to proactively inform all involved parties about decisions or changes. Those who report to this person know exactly what is expected of them. Those to whom this person reports have a clear understanding of the vision and needs of the department. (Effectively articulates point of view in written and oral communication.) Both written and oral communication are clear and precise, not unduly

technical or lengthy, and appropriate for the situation. Person knows his or her audience well, in order to effectively transmit information in a way they can understand. Is able to connect with the audience and keep their attention. Is a good listener and values the input and opinions of others. Main points in his or her presentations are clear. Those in attendance would pay close attention and would learn from this person.

Ranking of 3:

Behavior: Usually communicates information to the people who will be affected by decisions or policies. Either written or oral communication is not always clear or precise; perhaps both are of moderate quality. Presentations are sometimes weak or inappropriately lengthy. Communication is adequate for most settings. The person possesses adequate oral presentation skills, but written work lacks clarity—or vice versa.

Ranking of 1:

Behavior: Both written and oral communication are weak, difficult to understand, and confusing. Often forgets to communicate with interested parties when decisions or changes are made. This person's communication is so brief that it fails to convey the true message or the rationale behind it. Long jumps from one idea to another make his or her reasoning difficult to understand. Alternatively, this person's communication is obscure and full of incomplete thoughts and grammatical errors.

Character

13. Integrity

1 2 3 4 5

Ranking of 5:

Behavior: Exhibits the ability to face conflicting needs, demands, and interests and not avoid them; reconciles them in an open and constructive manner. Displays the courage to act consistently with principles, values, and beliefs. Always does what is right, in spite of fear or differing opinions. Demonstrates honesty and transparency so that others have trust and do not have to guess what his or her actions or opinions might be in a particular situation. Routinely implements sound ethical practices as required by the diverse workforce and the patient population served.

Ranking of 3:

Behavior: Exhibits the ability to face conflicting needs, demands, and interests and not avoid them, but may have an opportunity to improve his or her ability to reconcile them in an open and constructive manner. May present his or her principles, values, and beliefs in ways that alienate others rather than helping others understand what is right. Displays the courage to do what is right, but may do this inconsistently in the face of fear or differing opinions. Others are not always sure what his or her actions or opinions might be in a particular situation.

Ranking of 1:

Behavior: Does not exhibit the ability to face conflicting needs, demands, and interests in an open and constructive manner. May respond emotionally or be easily swayed by popular opinion rather than doing what is right and making every attempt to reconcile conflicting interests constructively. Does not display the courage to act consistently with principles, values, and beliefs or to do what is right in spite of fear or differing opinions. Others are unable to trust that this person's principles, values, and beliefs will weather controversy.

14. Commitment (Initiative and Persistence)

1 2 3 4 5

Ranking of 5:

Behavior: Voluntarily takes steps to accomplish tasks or solve problems without impetus from other people. Is sometimes described as a self-starter. Gives prolonged attention to a task, whether self-initiated or assigned, until it is completed. Does not require constant supervision or coaxing. Works energetically without delay or procrastination. Often undertakes a number of activities simultaneously in pursuit of a single goal. Finds problems within the department and initiates suggestions or procedures to solve them with minimal assistance. Is driven to meet all expectations and deadlines that are set, without excuse or exception. Consistently demonstrates passion and motivation to achieve results.

Ranking of 3:

Behavior: Is capable of prolonged attention to a few tasks that are of special personal interest. Stays with a task until it is completed, provided that there are no conflicting time constraints. May have difficulty finishing a project that is of little interest to him or her. Sometimes points out problem areas to the institution's administration for consideration.

Ranking of 1:

Behavior: Stays with tasks for a limited amount of time. Is unable to pursue several tasks concurrently to completion. Does not identify or anticipate problems. Finds it very difficult to work on his or her own. Would not complete projects adequately.

15. Responsibility (Selfless Accountability for Actions)

1 2 3 4 5

Ranking of 5:

Behavior: Always follows through, no matter what the personal cost. Exhibits “servant leadership” by constantly, consistently sacrificing self to meet the needs of employees, coworkers, patients, and other customers. Always displays willingness to be accountable for the consequences of his or her actions and choices. Always admits and take full responsibility for mistakes and failures, even if he or she is only partially to blame. Demonstrates sound judgment in balancing individual goals with those of the organization. Makes no decisions for self-serving reasons, and has a consistent pattern of personal humility.

Ranking of 3:

Behavior: Usually follows through, even at a personal cost. Understands the importance of “servant leadership” and occasionally exhibits it. Usually displays willingness to be accountable for the consequences of actions and choices, admits mistakes and failures, and usually takes full responsibility for failures. Makes few decisions for self-serving reasons, and is generally humble.

Ranking of 1:

Behavior: Frequently does not follow through if the task requires extra effort or sacrifice. Uses leadership positions to advance personal causes or to gain more power. The needs of employees, co-workers, patients, and other customers are of secondary importance. Displays unwillingness to be accountable for the consequences of actions and choices, does not admit mistakes and failures, and shifts blame to others. Makes many decisions for self-serving reasons, and has a consistent pattern of personal arrogance.

16. Caring about Others

1 2 3 4 5

Ranking of 5:

Behavior: Is drawn to people, enjoying the diversity that people represent. Is always honest to customers, suppliers and others that interact with the department and institution. Is extremely compassionate and always forgives others, avoids gossip, and invests in relationships. Believes deeply in the benefit of human interaction, socialization, and teamwork, understanding that these things improve work quality and productivity. Has a goal of making the job a source of support and healing. Understands the importance of departmental and institutional community—a shared purpose and vision, collaborative efforts, and a common wealth of learning. Is generally perceived as patient, generous, and sincere.

Ranking of 3:

Behavior: Is drawn to people. Rarely engages in activities that harm other people, and does not lie to others. Understands the importance of forgiving others, avoiding gossip, and investing in relationships, but may falter in some of these areas under extreme circumstances. Understands the importance of departmental and institutional community, but does not actively foster that community.

Ranking of 1:

Behavior: Interacts with people because it is a necessity, but sees diversity as an obstacle. Frequently bends the truth if it is expedient to do so. Lacks compassion and only invests in relationships that seem to provide a benefit for him or her. Thinks that discussing community is unimportant and a waste of time. Is rarely generous, patient, or sincere. Cares about the quality of work performed but does not seem to care about the worker as a person.

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