

The ASHP Policy Development Process

Background for the ASHP House of Delegates

Revised March 2009

Introduction

It is important for ASHP members who serve in the House of Delegates to have a thorough understanding of their responsibility for reviewing and overseeing the professional policies of ASHP. This paper, which summarizes ASHP's policy process from the perspective of the House of Delegates, supplements the primary sources for this information, namely the ASHP Charter, Bylaws, and Rules of Procedure for the House of Delegates.

The House of Delegates includes 163 voting state delegates elected from among ASHP active members through a process conducted by affiliated state societies. In those states where no affiliate exists, the ASHP President appoints a committee from among ASHP active members to conduct the election of that state's delegates. State delegates are apportioned according to the distribution of ASHP active members among the states.

Responsibilities of state delegates include (1) developing an understanding of the issues on the House of Delegates agenda, (2) learning the perspectives of ASHP members in the state on those issues, (3) participating in a Regional Delegate Conference, (4) participating in the House of Delegates session, and (5) reporting back to ASHP members in the state on the outcome of the House session. In addition, experienced delegates are expected to mentor new delegates.

Other voting delegates include all officers and directors of ASHP, past presidents (if eligible to be active members), the chairs of the executive committees of sections and forums, and the five fraternal delegates representing the United States Army, Navy, Air Force, Public Health Service, and Department of Veterans Affairs.

From Idea to Policy—The Process of Policy Development

The formation of ASHP professional policy begins with the member (see **Appendix A**). Members have many opportunities to identify topics for policy development, including at open hearings and Regional Delegate Conferences; through the House of Delegates in the form of Recommendations, Resolutions, and New Business; through affiliated state societies by responding to the "call for Resolutions"; through topics suggested for the councils or the executive committees of sections and forums; and through discussions with ASHP officers, Board members, and staff. Proposed new professional policies must be approved by the Board of Directors before they are submitted for House of Delegates action. Characteristics of good ASHP professional policies may be found in **Appendix B**.

Council Meetings. The five councils—Education and Workforce Development, Pharmacy Management, Pharmacy Practice, Public Policy, and Therapeutics (new designations adopted in January 2006)—meet annually in September. After two days of thoughtful deliberations, each council submits a report with policy recommendations that are acted upon by the Board of Directors in January. Policy recommendations approved by the Board for ratification by the House of Delegates are placed on the ASHP Web site in mid-March and published in the April 15 issue of *AJHP*.

Section and Forum Executive Committees. New professional policies may be recommended to the Board of Directors by the executive committees of sections and forums. This track in policy development is relatively new and is expected to be used more frequently in the coming years.

Resolutions, Recommendations, and New Business. In November, a "call for Resolutions" is sent to affiliated state societies and publicized to all ASHP members. Resolutions require two ASHP

active members—not necessarily delegates—as sponsors and must be submitted 90 days in advance of the House session.

Recommendations, another avenue for members to identify a topic for further review by ASHP, may be presented at the House session by any delegate.

New Business motions may be introduced by any delegate at the second meeting of the House.

Regional Delegate Conferences. In April, ASHP posts on the website the reports that will be considered at the House session. In early May, the Regional Delegate Conferences (RDCs) are held, which are designed for delegates and alternate delegates to review upcoming House business with ASHP officers and staff. The RDCs are also a forum for informal discussion of issues related to hospital and health-system pharmacy practice, state society operations, and ASHP activities. State society officers are welcome to attend RDCs.

The time between the RDCs and the House session provides delegates an opportunity to discuss items on the House agenda with colleagues. Such dialogue gives delegates insight into various points of view on issues and helps ensure well-rounded debate in the House.

Open Forum for Members. This session serves as both the “Open Hearing of the House of Delegates” and a time for discussion by ASHP members of any matter of concern related to pharmacy practice in hospitals and health systems. The session is held at the Summer Meeting before the first meeting of the House, and discussion is facilitated by the Chair of the House. The Open Forum is an excellent opportunity for practitioners to bring emerging issues to the attention of ASHP leaders.

House of Delegates Procedures

The House session is composed of two meetings, held on Sunday and Tuesday during the ASHP Summer Meeting, which runs from Sunday to Wednesday. A sample agenda is shown in **Appendix C**.

Registration of Delegates. Delegates present their credentials for delegate registration at designated times at the Summer Meeting. Alternate delegates need not register in advance of the House session unless they are replacing a delegate. If an alternate delegate is replacing a delegate for the second meeting of a House session, registration will be accepted in advance of the meeting in the ASHP office at the meeting site.

Seating of Delegates. Once a delegate has responded to the roll call at the beginning of the House session, the delegate is considered recognized. **An alternate can replace a delegate and thus become a recognized delegate only at the beginning of a House meeting.**

If neither a delegate nor alternate delegate from a state is present at the beginning of the House session for the roll call and therefore is not recognized in the House, the Chair will recognize the first certified delegate or alternate from that state who comes before the House.

Caucuses. Delegate caucuses are typically scheduled before the first meeting and between the first and second meetings of a House session. Caucuses are particularly valuable for airing ideas about potential amendments to policies and for refining amending language. Information on the process for scheduling caucuses is distributed to delegates in advance of RDCs.

Discussion of Issues by the House of Delegates. All business before the House is open for discussion upon introduction at the specified point in the agenda. (An exception is Recommendations, which are merely introduced and not discussed.) Each Board report on councils is presented by the Board liaison to the council. The policy recommendations in each report are introduced as a block. Delegates may discuss any policy recommendation after the report is introduced. **Delegates may request a separate vote on any individual recommendation; such requests are automatically accepted by the Chair unless any delegate objects, in which case a majority of delegates must vote in favor of separate consideration.**

Due Consideration of Amendments to Professional Policy Proposals. If the House amends a professional policy proposal presented to it by the Board, the Board must reconsider the matter before it becomes official policy. This step is required in the ASHP Bylaws and ensures that policies adopted by the House meet legal requirements, are consistent with existing policies and organizational commitments,

and are financially feasible. Typically, the Board schedules a brief meeting between the first and second meeting of a House session for purposes of “duly considering” any amended proposals. Occasionally, an issue may require more time for due consideration than is available between meetings of the House, in which case the matter will be referred by the Board to a council or other body for further study. The Board reports the results of its due consideration of amended proposals during the second meeting of the House.

After hearing the Board’s report on due consideration of amendments, the House has the option of reconsidering a matter, which requires the approval of two-thirds of delegates. This option is raised if the Board does not accept an amendment and the House wishes to reconsider the original language approved by the Board.

The ASHP Bylaws permit the House of Delegates to take final action on any matter placed before it if the Board of Directors rules that bona fide extraordinary circumstances require immediate action, and if a majority of delegates concur.

Recommendations. Recommendations are the simplest and most direct way for a delegate to identify topics for further review and policy development. At the designated point in the House agenda, any delegate may present a Recommendation by simply approaching a microphone and voicing it. A written copy of the Recommendation should be presented to the Secretary of the House. Recommendations do not require a second, are not debatable, and are received without a vote. Recommendations are automatically referred to the appropriate ASHP body for consideration. The outcome of a Recommendation is reported both to the originator and to the House. **Appendix D** is a form that may be used to submit a Recommendation.

New Business. New Business items may be proposed by delegates and require a second before consideration by the House. New Business must be submitted in writing by 4:00 p.m. the day before the second meeting of the House, and must include appropriate background information. The Board is not able to “duly consider” New Business items before the House considers them. Hence, the House has only two options, namely, referring a New Business item to the Board for review or rejecting the item. The Board reports all action taken on New Business at the next session of the House. **Appendix E** is a form that may be used to submit New Business items.

Resolutions. Resolutions require sponsorship by two active members, who need not be delegates. Resolutions must be submitted 90 days in advance of the House session.

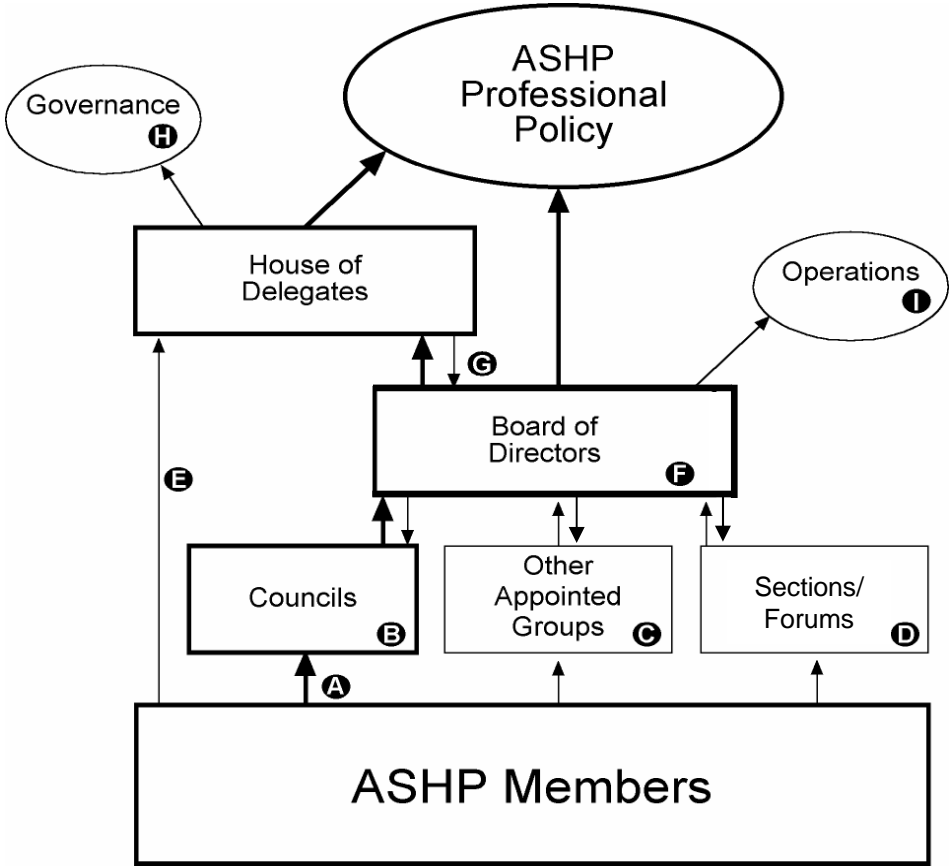
Resolutions are submitted to the House with a recommended course of action from the Board, although the House’s action is on the Resolution itself, not on the Board’s recommendation. The House may adopt, amend, reject, or refer the Resolution. If a Resolution is passed with amendments, the Resolution must be duly considered by the Board, as required by the Bylaws.

Rules of Order. The ASHP Charter, Bylaws, and Rules of Procedure for the House of Delegates, supplemented by the latest edition of *Robert’s Rules of Order*, govern the proceedings of the House. A professional parliamentarian is appointed to advise the Chair of the House on procedural matters. Basic points in parliamentary procedure are outlined in **Appendix F**. These procedural issues are covered in an orientation session for delegates conducted by the Chair of the House and the parliamentarian in advance of the first meeting of the House.

APPENDIX A

ASHP Policy Development Process

- A The primary policy process is indicated by heavy arrows.
- B There are five councils: Education and Workforce Development, Pharmacy Management, Pharmacy Practice, Public Policy, and Therapeutics. The councils are the primary policy-recommending groups.
- C Standing committees, commissions, advisory groups, task forces, ad hoc committees.
- D The executive committees of the Sections and Forums.
- E Resolutions, which are intended for emergent policy issues, are submitted directly to the House of Delegates.
- F The Board of Directors has final authority over most practice standards, and it may adopt interim professional policies on any issue when the House of Delegates is not in session.
- G The House of Delegates also has a role in identifying issues for policy development, which are referred to the Board of Directors. The Board, in turn, may refer an issue to a specific council.
- H The House of Delegates has final authority over the ASHP Bylaws and the Rules of Procedure for the House of Delegates; amendments to the ASHP Charter require approval by ASHP active members.
- I The Board of Directors has authority over operations policy, including financial management.



APPENDIX B

Characteristics of Good ASHP Professional Policy

Definition

Professional policy: ASHP's official stance on an issue related to pharmacy practice or use of medications in society.

Optimal Characteristics

Optimally, an individual policy position of ASHP will

1. Deal with an important issue in health-system pharmacy practice or societal medication use (consistent with the purposes of ASHP).
2. Generally target a distinct, sharply-defined issue rather than a diffuse, multifaceted issue.
3. Be based on a thorough, balanced analysis of the issue and policy options.
4. Be clear, efficient, and precise in its wording.
5. Be direct in its wording. (It is permissible to be opposed to something; not every position needs to be expressed in "positive" language.)
6. Identify the desired outcome or situation and thereby give ASHP a clear basis for advocacy.
7. Generally be expressed in sufficiently broad language to give ASHP latitude (room for negotiation) in pursuing the desired outcome.
8. Foster the ability of health-system pharmacists to optimize the application of their knowledge, skills, and abilities in practicing their profession.
9. Be consistent with broad national goals in health care delivery, including goals related to health care access, value, and quality.
10. Be motivated by the broad public interest rather than narrow self-interest.
11. Focus on the "right thing to do" (from the public's perspective) rather than on the "easy thing to do" (from a practitioner's perspective).
12. Avoid redundancy with or contradiction of other ASHP policy.
13. (Note: Published titles of policy positions are considered an editorial matter; staff is receptive to suggestions for title changes.)

Implementing ASHP Policy

ASHP has four options in advocating a policy. The Board of Directors and staff decide after a policy is adopted which combination of options to apply in implementing a particular policy position. The four options are

1. Actively and directly pursue implementation of the policy.
2. Collaborate with other stakeholders in actively pursuing implementation of the policy.
3. Communicate the policy to others who have a stake in the issue and who may be working on the issue.
4. Maintain the policy as general guidance and look for opportunities to communicate the policy to interested stakeholders or to collaborate with others on implementation.

In general, the level of effort devoted to implementing a new policy is determined by the extent to which it is embodied in the ASHP Leadership Agenda, which reflects the association's top advocacy priorities.

April 2007
Characteristics of Good ASHP Professional Policy.doc

SAMPLE AGENDA

American Society of Health-System Pharmacists
House of Delegates
Convention Center

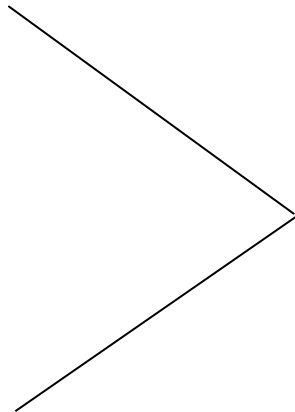
Presiding: _____
Chair, House of Delegates

FIRST MEETING

1. CALL TO ORDER
2. INVOCATION
3. ROLL CALL OF DELEGATES..... (Review "Seating of Delegates," page 2.)
4. REPORT OF PREVIOUS SESSION
5. COMMITTEES OF THE HOUSE
 - a. REPORT ON RESOLUTIONS..... (Introduced here, but House action is in second meeting.)
 - b. REPORT OF COMMITTEE ON NOMINATIONS..... (Candidates announced here. Election takes place in second meeting.)
6. REPORT OF OFFICERS
 - a. PRESIDENT AND CHAIR OF THE BOARD..... (Discussion, submitted for House acceptance.)
 - b. TREASURER..... (Discussion, submitted for House acceptance.)
 - c. EXECUTIVE VICE PRESIDENT..... (Discussion, FYI only.)
7. RECOMMENDATIONS OF DELEGATES..... (No discussion, no House action, automatically referred.)

APPENDIX B/2

- 8. BOARD OF DIRECTORS REPORTS ON COUNCILS
 - a. COUNCIL ON EDUCATION AND WORKFORCE DEVELOPMENT
 - b. COUNCIL ON PHARMACY MANAGEMENT
 - c. COUNCIL ON PHARMACY PRACTICE
 - d. COUNCIL ON PUBLIC POLICY
 - e. COUNCIL ON THERAPEUTICS



House action on Policy recommendations only; discussion may occur on full report.

- 9. STATEMENTS OF CANDIDATES, HOUSE OF DELEGATES CHAIR
- 10. ANNOUNCEMENTS
- 11. ADJOURNMENT OF FIRST MEETING

SECOND MEETING

- 1. CALL TO ORDER
- 2. QUORUM CALL..... (Review replacement procedure for delegates by alternates, page 2.)
- 3. ELECTION OF CHAIR OF THE HOUSE OF DELEGATES (AND TREASURER OF ASHP, occurs every 3 years)..... (Secret ballot)
- 4. COMMITTEES OF THE HOUSE
 - a. REPORT ON RESOLUTIONS..... (Discussion, House action.)
- 5. RECOMMENDATIONS OF DELEGATES..... (No, discussion, no House action, automatically referred.)
- 6. UNFINISHED AND NEW BUSINESS..... (Discussion, House action. Items not duly considered by the Board are referred to the Board or rejected by the House.)
- 7. INSTALLATION OF OFFICERS AND DIRECTORS
- 8. ANNOUNCEMENTS
- 9. ADJOURNMENT OF SESSION

ASHP HOUSE OF DELEGATES

RECOMMENDATION SUBMISSION FORM

The official proceedings of the House of Delegates session will include the name(s) and state(s) of the submitter(s), the title of the Recommendation, the text of the Recommendation, and brief background information. After the House session, the submitter(s) may supply additional background information for the benefit of a council or other body that is considering the Recommendation, but only the original brief background will be published in the proceedings.

Submitter (name and state):

Title of Recommendation:

Text of Recommendation (one sentence):

Background (must be limited to five typewritten lines):

Note: You may supply additional background information to ASHP after to the House of Delegates session. Such additional information may be useful to a council or other body that considers the Recommendation. Do you wish to supply additional background information after the House session? (place an X next to your answer)

Yes:

No:

If you checked yes, ASHP staff will be in touch with you to obtain the information. Please provide your contact information here:

Email address:

Daytime telephone number:



ASHP HOUSE OF DELEGATES

NEW BUSINESS SUBMISSION FORM

*AMERICAN SOCIETY OF
HEALTH-SYSTEM PHARMACISTS
HOUSE OF DELEGATES
June 16, 2009
Rosemont, Illinois*

*To be completed by the
Office of Secretary of
House of Delegates
Date Submitted _____
Time Submitted _____*

INTRODUCED BY:

Name:

SUBJECT:

MOTION:

BACKGROUND:

SUGGESTED OUTCOME:





BASIC PARLIAMENTARY PROCEDURE

Joy Myers
Parliamentarian

TOGETHER WE MAKE A GREAT TEAM



PARLIAMENTARY PROCEDURES

- **Processing a Motion**
- **Division of a Question**
- **General Consent**
- **Refer or Commit**
- **Previous Question**
- **Postpone : 2 types**
- **Point of Order**

PROCESSING A MOTION

1. Obtaining the floor
Addressing the Chair: Mr./Madam President
2. Recognizing the Delegate:
3. Making the motion: I move that
4. Seconding the motion: I second (or) Second.

PROCESSING A MOTION (CONT...)

5. Stating the motion: It is moved and seconded that....
6. Debating the motion:
Is there discussion? (or) Are you ready for the question?
7. Putting the question:
Those in favor, say AYE.
Those opposed, say NO.
8. Announcing the vote
The 'ayes' have it, the motion is carried
(or) The 'noes' have it, the motion is defeated,

DIVISION OF A QUESTION

- **When a motion relating to a single subject contains several parts, the parts can be separated and voted on as if they were distinct questions.**
- **Must be seconded.**
- **Is not debatable.**
- **Is amendable.**
- **Requires a majority vote.**
- **Usually done by General Consent.**

GENERAL CONSENT

- **Used for routine business**
- **Time saving**
- **Used to take action without the formality of a motion and formal vote**
- **Chair states: “If there is no objection, the action will be taken.”**

REFER OR COMMIT

- **Used to send a motion to a relatively small group of selected persons (e.g., Board, committee) so that the question may be carefully investigated and put into better condition for the assembly to consider.**
- **Must be seconded.**
- **Is debatable.**
- **Is amendable.**
- **Requires a majority vote.**

PREVIOUS QUESTION

- A motion used to bring the assembly to an immediate vote on one or more pending questions. - Stops debate.
- Must be seconded.
- Is not debatable.
- Is not amendable.
- Requires a 2/3 vote.

POSTPONE TO A CERTAIN TIME

- A motion to put off, within limits, action on a question to a definite day, meeting, or hour, or until after a certain event.
- Must be seconded.
- Is debatable.
- Is amendable.
- Requires a majority vote.

POSTPONE INDEFINITELY

- **Kills for the duration of the meeting. Motion can be renewed at next meeting.**
- **Debatable - Debate can go fully into the merits of the Main Motion.**
- **Affirmative vote can be reconsidered.**
- **In a Session consisting of several meetings, the suppression continues throughout the entire series of meetings.**

POINT OF ORDER

- **Calling upon the Chair of the House for a ruling and an enforcement of the rules.**
- **Not debatable, not amendable.**
- **No vote.**