ASHP Practice Advancement Initiative (PAI) 2030:
PAI 2030 Champion Orientation

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Outline

- Overview of PAI 2030 recommendations
- PAI 2030 focused initiatives as indicators of progress
- Development of a statewide effort for recommendation adoption and implementation
  - PAI 2030 State Affiliate Champion
  - PAI 2030 State Affiliate Toolkit
  - PAI 2030 Self-Assessment Tool and sample results
“If you don’t know where you’re going, you’ll end up someplace else.”

Yogi Berra
Promulgated the idea that hospital pharmacies should function as clinical departments with the mission of fostering the appropriate use of medicines.

Directions for Clinical Practice in Pharmacy (Hilton Head Conference)

Pharmacy in the 21st Century Conference
Examined major issues and trends expected to confront the profession during the next 15-20 years

ASHP Health-System Pharmacy 2015 Initiative
Provided a framework to significantly improve the practice of pharmacy in hospitals and health systems.

Ambulatory Care Summit
Developed 25 ambulatory care-specific recommendations for practice advancement

Practice Advancement Initiative
Provides pharmacy teams with guidance for advancing healthcare, patient outcomes, and pharmacy practice through 59 recommendations.

ASHP received funding for the first comprehensive, national audit of pharmacy services in hospitals

Mirror to Hospital Pharmacy

Pharmacy Practice Model Summit
Developed 147 consensus recommendations for practice focused primarily on hospital settings.

Practice Advancement Initiative 2030

Provides a framework to significantly improve the practice of pharmacy in hospitals and health systems.

Pharmacy in the 21st Century Conference

ASHP Conference on Implementing Pharmaceutical Care
Focused on how to expand pharmaceutical care beyond pilot programs; called for personal commitment of pharmacy staff to advance pharmaceutical care

Pharmacy Practice Model Summit

2014

2015

2020

Credit: www.presentationgo.com/
WHAT IS PAI 2030?

59 recommendations on providing optimal, safe, and effective medication use

Aspirational guidance serving as a roadmap to pharmacy practice advancement

Future-focused set of concepts looking beyond today’s barriers to change

The ASHP Practice Advancement Initiative (PAI) 2030 includes 59 recommendations to promote optimal, safe, and effective medication use; expand pharmacist and technician roles; and implement the latest technologies.

Learn more about PAI 2030 at ASHP.ORG/PAI
Subdomains of PAI 2030 Recommendations
(Example: Technology and Data Science Domain)

C1. Patient care, population health
C2. Advanced analytics
C3. Emerging patient-care technologies
C4. Health information technology competency

Practice-focused

C5. Telepharmacy services
C6. Technology-related medication-use safety standards
C7. Analytics resources
C8. Sterile product compounding technology

C9. High reliability designing and selecting health information technology
C10. Interoperable and transparent health information technology
C11. Standards for application of artificial intelligence (AI)
Pause for Reflection

Reflecting on the PAI 2030 recommendations, how will you identify the greatest opportunities for the profession to improve patient care outcomes and advance practice in your state?
ASHP Practice Advancement Initiative 2030: Focused Initiatives
PAI 2030 Focused Initiatives

**FI 1:** Optimize medication-use and access through pharmacist prescribing.

**Objective:**
By 2024, increase authority for pharmacists to independently prescribe medications, pursuant to a diagnosis, by 20%.

**FI 2:** Leverage and utilize technology to optimize pharmacist provision of care to patients.

**Objective:**
By 2024, increase by 20% the number of health systems using analytics and technology to reduce the risk of adverse drug events or suboptimal outcomes.
PAI 2030 Focused Initiatives

**FI 3:** Ensure all patients receive seamless and coordinated pharmacy services at all transitions of care.

*Objective:*
*By the end of 2024, increase the number of health systems with integrated pharmacy services to coordinate effective patient care transitions by 20%.*

**FI 4:** Improve patient access to pharmacist services in ambulatory care clinics.

*Objective:*
*By the end of 2024, increase the number of pharmacists in ambulatory care clinics by 20%.*
Focused Initiatives → Indicators of Progress

- **Podcast: ASHP PAI 2030 Focused Initiatives**
- Baseline for focused initiative #3 (care transitions)
  - 2020 ASHP National Survey of Pharmacy Practice
    - Care transitions question (n = 261)
    - 0.6% seamless integration
    - 30.6% not at all integrated
    - Smaller hospitals report lower levels of integration

FI 5: Expand role of pharmacy technicians.

Objective:
By 2024, increase the number of health systems utilizing pharmacy technicians in advanced roles by 20%.
ASHP State Affiliate Quick Poll (PAI 2030 Focused Initiatives)

- March 2021
- ~60% response rate
- Order of priority:
  - FI 1 (pharmacist prescribing)
  - FI 3 (transitions of care)
  - FI 5 (expand role of pharmacy technicians)
  - FI 4 (pharmacists in ambulatory care clinics)
  - FI 2 (leverage technology)
ASHP Practice Advancement Initiative 2030: Statewide Recommendation Adoption and Implementation
PAI 2030 Tools & Resources

www.ashp.org/pai

State Affiliate Toolkit and Champion Approach

PAI 2030 Self-Assessment Tool
• Two tracks (Practitioner and Organization)
• Identify gaps with the PAI 2030 recommendations
• Create an action plan for adoption and implementation

Case Studies, Podcasts, Webinars
Testimonials on where pharmacy departments and pharmacists are making an impact implementing the PAI 2030 recommendations

Awards and Research
• ASHP Best Practices Award
• ASHP Student Leadership Award
• ASHP Foundation Research Grants
**PAI 2030 Implementation Pathway**

- **Get Started & Build Your Team**
  - Identify State Champion
  - Champion PAI 2030 orientation
  - PAI 2030 Self-Assessment Tool tutorial

- **Prepare to Launch**
  - Complete PAI 2030 Self-Assessment Tool
  - Organization
  - Practitioner
  - Personal vs. Official

- **Assess Current Practice**
  - Review Action List and Assign Feasibility & Impact

- **Create an Action Plan**
  - Strategic Planning
    - Goals
    - Objectives
    - Develop specific plans of action
    - PAI 2030 Focused Initiatives

- **Improve Your Practice**
  - Complete reassessment PAI 2030 Self-Assessment Tool

- **Monitor Your Progress**
  - Case Studies, podcasts, webinars
  - Toolkits/playbooks
  - Publish articles
  - Inform professional policy
  - Advocacy agenda
  - Indicators of progress

- **Tell Your Story**
PAI 2030 Implementation Pathway

• **Identify**
  - *Building team* (champion identification, orientation, tutorial)
  - *Prepare to launch* (state affiliate marketing, communication campaign)

• **Involve**
  - *Assess current practice* (completion of PAI 2030 Self-Assessment Tool)
  - *Create an action plan* (assignment of feasibility and impact)
  - *Take steps to improve practice* (goal & objective setting, develop plans of action, indicators of progress)

• **Influence**
  - *Monitor progress* (complete reassessments, sharing results, PAI 2030 focused initiative progress)
  - *Tell the story* (case study, podcast, webinar, manuscript submission, playbook)
PAI 2030 State Affiliate Champion

• Role of PAI 2030 champion
  • Promote the PAI 2030 initiative
    • Engage in conversation with colleagues and leaders
    • Bring the initiative to your Affiliate meetings and discussions
    • Encourage completion of the PAI 2030 Self-Assessment Tool
    • Extend reach to rural and medically underserved areas
    • Partner with residents and student pharmacists (e.g., SSHP chapters)
  • Strategic planning, develop plans of action, focused initiatives
  • Avoid tackling everything – focus on a few goals/initiatives
  • Tie in with state advocacy, education, and resources based on gaps and priorities identified
PAI 2030 State Affiliate Champion

• Role of PAI 2030 champion (continued)
  • Compile, monitor, and distribute results
  • Report on progress
  • Sharing stories of success and resources (e.g., case studies, podcasts, webinars, AJHP publication, playbook, education/poster session proposals)
  • Identify areas where ASHP can help
    • Advocacy and messaging
    • Education
    • Channeling engagement through ASHP Sections/Forums
    • Professional policy needs (e.g., ASHP Councils)
PAI 2030 State Affiliate Champion

• Deliverables

• Achieve a target statewide completion rate of ≥ 50% using the PAI 2030 Self-Assessment Tool
• Create a statewide PAI 2030 action plan
• Incorporate elements of action plan in statewide strategic plan
  • Inform and support practice advancement goals and objectives
  • Shape and support state advocacy priorities
• Submit a publication, tool/resource, and/or a presentation to highlight PAI 2030 successes
• Identify at least one PAI 2030 focused initiative to pursue and monitor as a priority as part of statewide action plan
• Highlight PAI 2030 efforts in ASHP Affiliate Annual Review Report
• Consider volunteering as coach/mentor for states slow to adopt
PAI 2030 State Affiliate Champion

- **What you can expect from ASHP**
  - Narrated PAI 2030 overview presentation for PAI champions
  - PAI 2030 standard template presentation for champions to customize
  - PAI 2030 Self-Assessment Tool report assistance
  - Indicator of progress reports (action list trends, focused initiatives)
  - Updates through Affiliate Newsletter and State Affiliate calls
  - Soliciting states to share PAI success stories
  - Explore learning partners/peer mentor matching*
  - Telephone follow-up support
  - On-line learning community discussion (e.g., ASHP Connect)
PAI 2030 State Affiliate Toolkit

- Sample announcements
- Sample leader team discussion and meeting agendas
- PAI 2030 Self-Assessment Tool tutorial (recorded)
- PAI 2030 champion overview presentation (recorded)
- Prepared slide presentation template to personalize for each state
- Sample communications template (email, newsletter, social)
- Links to other relevant PAI materials (AJHP articles, podcasts)
- SSHP PAI 2030 resource page
PAI 2030 Self-Assessment Tool

Overview

ASHP's Practice Advancement Initiative 2030 (PAI 2030) provides pharmacy teams with guidance for advancing healthcare, patient outcomes, and pharmacy practice through 99 recommendations.

The PAI 2030 Self-Assessment Tool is designed to help you determine how well your practice setting aligns with the PAI 2030 recommendations. The tool identifies areas where the PAI 2030 recommendations could have the biggest impact on your practice setting.

The survey format is applicable to both institutional and ambulatory care pharmacy practice settings. Participants can complete the assessment, which takes about 45 minutes, from the perspective of a single practitioner or an organizational perspective. The results will identify several areas for improvement. From there, a list of priorities for implementing change can be developed.

Please note that this assessment tool does NOT assist with therapeutic decision-making.

Getting Started

Tiered Scoring by Domain & Action Plan

ACCESS TO SELF-ASSESSMENT TOOL:
https://pai2030tool.ashp.org/

ASHP Podcast: Using the ASHP Practice Advancement Initiative (PAI) 2030 Self-Assessment Tool to Influence Practice Transformation
Assignment of **feasibility** and **impact** to lowest scoring items from self-assessment tool.
Action Plan

Recommendation D2: Pharmacy technicians should have complete responsibility for advanced technical and supporting activities (e.g., order fulfillment, tech-check, regulatory compliance, supply chain management, diversion prevention, revenue cycle management, patient assistance programs).

Make pharmacy technicians completely responsible for supply chain management.

Related Resources
- Best practices: Incorporating pharmacy technicians and other support personnel into the clinical pharmacist’s process of care (Website)
- ACCP White Paper. Best practices: Incorporating pharmacy technicians and other support personnel into the clinical pharmacist’s process of care (Website)
- Expanding the role of pharmacy technicians to facilitate a proactive pharmacist practice (Website)
- Pharmacy Technicians’ Role in Pharmacy Informatio (PDF)
- Roles of Pharmacy Technician (PDF)
- ASHP long-range vision for the pharmacy workforce in hospitals and health systems: Ensuring medication use is optimal, safe, and effective in acute and ambulatory care settings (Website)
- PTCB Credentialed (Website)
- Expanding the role of pharmacy technicians to facilitate a proactive pharmacist practice (Website)
- Evaluation of the potential impact of pharmacy technician performance on anticoagulation clinic tasks on operational efficiency (Website)

Recommendation A3: The pharmacy workforce should collaborate with patients, caregivers, payers, and healthcare professionals to establish consistent and sustainable models for seamless transitions of care.

Increase the frequency at which the pharmacy workforce collaborates to establish a consistent and sustainable model for seamless transitions of care with payers.

Related Resources
- Telemedicine-based collaborative care for PSD: A randomized clinical trial (Website)
- Adverse drug events after hospitalization: Are we missing the mark? (Website)
- Role of a care transition pharmacist in a primary care resource center (Website)
- Opioid exit plan; a pharmacist’s role in managing acute postoperative pain (Website)
- A reengineered hospital discharge program to decrease rehospitalization (Website)
- Pharmacists’ implementation of a workflow of care electronic referral process to provide hand-off between inpatient and outpatient settings. (Website)
- A suite of inpatient and outpatient clinical measures for pharmacy accountability: Recommendations from the Pharmacy Accountability Measures Work Group (Website)
- Improving patient care and demonstrating value during a global pandemic: Recommendations from leaders of the Pharmacy Accountability Measures Work Group (Website)
- Population health management and the pharmacist’s role (Website)
- Tools and tactics for postdischarge medication management interventions (Website)
- Tools and tactics for postdischarge medication management interventions (Website)
- Development of health-system inpatient pharmacy clinical metrics (Website)
- Use of multiple methods to measure impact of a contracted call center on academic health system community pharmacies (Website)
Reporting Capabilities

• Custom groups
• Re-assessments
• Account holder reports (benchmark report)
• Administrator reports
  • Analytics access
Assessment Report (National results as of 10/24/2021)

- Official assessments completed (n = 65)
  - 57 organization
  - 8 practitioner
- Personal assessments completed (n = 139)
  - 48 organization
  - 91 practitioner
- Range: 5/1/2021 – 10/24/2021
- Top 5 completions by state (IL, WI, RI, PA, MN)
• **Recommendation A2.** Pharmacist interns and/or student pharmacists engage in medication reconciliation processes during care transitions: *Discharged from an inpatient ward*

• **Recommendation A2.** Pharmacy workforce (pharmacists, pharmacy technicians) leads medication reconciliation processes during care transitions: *Admitted to an inpatient ward*

• **Recommendation A2.** Pharmacy workforce (pharmacists, pharmacy technicians) leads medication reconciliation processes during care transitions: *In the emergency department*

• **Recommendation A4.** Make documentation made by pharmacists related to patient care available to: *Community pharmacies or other external pharmacy service providers*

• **Recommendation A2.** Pharmacist interns and/or student pharmacists engage in medication reconciliation processes during care transitions: *In the emergency department*
• **Recommendation A2.** Pharmacy workforce and/or learners engage in medication reconciliation processes during care transitions: *Discharged from an inpatient ward*

• **Recommendation A2.** Pharmacy workforce (pharmacists, pharmacy technicians) leads medication reconciliation processes during care transitions: *Discharged from an inpatient ward*

• **Recommendation D3.** Increase the number of newly hired pharmacy technicians who have completed an ASHP/ACPE-accredited technician education and training program

• **Recommendation A2.** Pharmacist interns and/or student pharmacists engage in medication reconciliation processes during care transitions: *Admitted to an inpatient ward*

• **Recommendation A2.** Pharmacy workforce and/or learners engage in medication reconciliation processes during care transitions: *Admitted to an inpatient ward*
## Comparative Report Results (Organization)

(A2) The pharmacy workforce in my organization leads and/or engages in medication reconciliation processes during care transitions:

### In ambulatory care settings

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>43.86%</td>
<td>Pharmacist/Pharmacy Technician</td>
</tr>
<tr>
<td>15.79%</td>
<td>Intern or Student Pharmacist</td>
</tr>
<tr>
<td>10.53%</td>
<td>Practice setting not available at my facility</td>
</tr>
<tr>
<td>45.61%</td>
<td>The pharmacy workforce is NOT involved with the medication reconciliation processes in this area</td>
</tr>
</tbody>
</table>

### In the emergency department

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>70.18%</td>
<td>Pharmacist/Pharmacy Technician</td>
</tr>
<tr>
<td>36.84%</td>
<td>Intern or Student Pharmacist</td>
</tr>
<tr>
<td>1.75%</td>
<td>Practice setting not available at my facility</td>
</tr>
<tr>
<td>28.07%</td>
<td>The pharmacy workforce is NOT involved with the medication reconciliation processes in this area</td>
</tr>
</tbody>
</table>

### When admitted to an inpatient ward

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>75.44%</td>
<td>Pharmacist/Pharmacy Technician</td>
</tr>
<tr>
<td>35.09%</td>
<td>Intern or Student Pharmacist</td>
</tr>
<tr>
<td>1.75%</td>
<td>Practice setting not available at my facility</td>
</tr>
<tr>
<td>21.05%</td>
<td>The pharmacy workforce is NOT involved with the medication reconciliation processes in this area</td>
</tr>
</tbody>
</table>

### When discharged from an inpatient ward

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>73.68%</td>
<td>Pharmacist/Pharmacy Technician</td>
</tr>
<tr>
<td>19.3%</td>
<td>Intern or Student Pharmacist</td>
</tr>
<tr>
<td>1.75%</td>
<td>Practice setting not available at my facility</td>
</tr>
<tr>
<td>24.56%</td>
<td>The pharmacy workforce is NOT involved with the medication reconciliation processes in this area</td>
</tr>
</tbody>
</table>
## Comparative Report Results (Organization)

(A4) Make documentation made by pharmacists related to patient care available to:

*Community pharmacies or other external pharmacy service providers*

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>98.25%</td>
<td>Other members of the patient’s healthcare team</td>
</tr>
<tr>
<td>78.95%</td>
<td>The patient</td>
</tr>
<tr>
<td>71.93%</td>
<td>Healthcare providers external to my practice site</td>
</tr>
<tr>
<td><strong>29.07%</strong></td>
<td><em>Community pharmacies or other external pharmacy service providers</em></td>
</tr>
<tr>
<td>1.75%</td>
<td>Pharmacists at my site do not document</td>
</tr>
</tbody>
</table>
(D3) Require newly hired pharmacy technicians to have completed an ASHP/ACPE-accredited technician education and training program

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.28%</td>
<td>Completion of an ASHP/ACPE-accredited education and training program</td>
</tr>
<tr>
<td>19.3%</td>
<td>Completion of an externally provided, structured education and training program (non-ASHP/ACPE-accredited)</td>
</tr>
<tr>
<td>24.56%</td>
<td>Completion of a non-accredited in-house education and training program (e.g., didactic, lecture, self-study and a written exam)</td>
</tr>
<tr>
<td>43.86%</td>
<td>Participation in on-the-job training, but no formalized, comprehensive training program</td>
</tr>
</tbody>
</table>
Submit a case study on line:

Thank you for sharing how your hospital or health system has implemented the PAI 2030 recommendations. Your experiences will be included in ASHP's PAI 2030 Case Studies to help hospitals, health systems, or other practice areas embark on similar initiatives.

We want to learn from you! Your testimonials will help us understand where pharmacy departments and pharmacists are making an impact by implementing PAI 2030 recommendations, as well the challenges that these initiatives may present. As we review the content, we will follow-up with any additional questions and next steps.

Submitter Information:

Name:  
Name:  
Credentials:  
E-mail:  

Improving Diabetes Self-Management Via Pharmacist-Run Diabetes Education Group Classes
Submitted by: Natalja Schenkerger, Pharm.D., BCPS, CDE

Case Overview
Clinical pharmacy services were established at Selma Medical Associates in the 1990s and include medication management and drug information services. The pharmacy team has established collaborative practice agreements with providers and offers one-on-one, patient-centered appointments for various disease states. Clinical areas of focus include diabetes education and medication management.

At Selma Medical Associates, pharmacy team one-on-one diabetes care visits have consistently
PAI 2030 Case Study Outline

- Select domain and sub-domain
- Case overview
- Key elements
- Impact on patient outcomes
- Pharmacy and pharmacist roles
- Lessons learned
- Budget and resource allocation
- Future goals
Policies, Programs, and Publications in Support of PAI 2030

1. Vizient HVPE framework
2. ASHP Foundation Pharmacy Forecast
3. ASHP Specialty Pharmacy recommendations

ASHP Commission on Goals
• Impact of artificial intelligence on healthcare and pharmacy practice
• Preparing the workforce for a digital future
• Telehealth

GTMRx Institute
https://gtmr.org/

AJHP theme issues
• Telehealth
• Precision medicine
• Substance use disorder

ASHP professional certificate programs
• Pharmacogenomics
• Medication Safety
• Clinical specialties (pediatrics, diabetes, pain, anticoagulation, nutrition, emergency medicine)

Residency program expansion

Key Takeaways

1. PAI 2030 introduced 59 contemporary recommendations that reflect changes and anticipate trends in the healthcare environment.

2. PAI 2030 focused initiatives monitor the progress toward achievement.

3. Use PAI 2030 Self-Assessment Tool to probe key components of a strategy and as a baseline for practice improvements.
Questions or Comments?

If you have any questions or comments related to ASHP’s PAI 2030, please send an email to pai@ashp.org.