ASHP Practice Advancement Initiative 2030
AGENDA

PAI History
PAI Engagement
PAI 2030 Themes
PAI 2030 Application
What is ASHP?

ASHP serves its members as their collective voice on issues related to medication use and patient safety.

- Founded in 1942
- Headquarters in Bethesda, MD
- 200+ Staff
- Elected Board of Directors and Officers
**Vision**
Medication use will be optimal, safe, and effective for all people all of the time

**Mission**
To help people achieve optimal health outcomes
Our Members

- Pharmacists
- Student Pharmacists
- Pharmacy Technicians

55,000
“We always overestimate the change that will occur in the next two years and underestimate the change that will occur in the next ten. Don’t let yourself be lulled into inaction.”

-- Bill Gates
In 2010, an invitational summit was held to develop recommendations for practice. A total of 147 recommendations resulted, focused primarily on hospital settings.

In 2014, a summit was held to develop ambulatory care-specific recommendations for practice advancement. A total of 25 recommendations were made.

In 2015, the PPMI and ACS recommendations were combined to address both acute and ambulatory care settings. The initiative was rebranded to PAI.
The PAI Story

1. **Engagement**
   It has successfully engaged practitioners, leaders, students, technicians and others in assessing and advancing practice

2. **Partnerships**
   It has resulted in a great partnership with ASHP affiliates... practice change is local

3. **Practice Advancement**
   Provided practice education, resources, strategic planning resources – with measurable results
PAI 2030

1. Many recommendations in PAI have been achieved
2. Healthcare landscape changes and disruptive trends
3. Expansion of services and practice opportunities
4. Technology enablers and population health

WHY?
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
PAI 2030 THEMES FOR PRACTICE CHANGE

- Optimize care via pharmacist-provided comprehensive medication management
- Integrate pharmacy enterprise for convenient and cost-effective care
- Increase public health opportunities in social determinants, chronic illness, and addiction
- Adopt personalized, targeted therapies
- Harness data to improve patient health
- Advance pharmacy technician roles
PAI 2030 Development Timeline

- **February-March**: PAI 2030 Advisory Panel
- **April**: ASHP Strategic Planning Retreat
- **June**: PAI 2030 Town Hall
- **July-August**: 5-Week Public Comment Period
- **September**: ASHP Board of Directors Approval
PAI Advisory Panel met in March 2019

- Reviewed initial 172 PAI points-of-consensus to suggest improvements or whether to retire
- Identify new, aspirational recommendations

Strategic Planning Retreat in April 2019

- Reviewed and discussed preliminary concepts and recommendations
- Discussed gaps and other areas to consider addressing in PAI 2030
- Discussed adoption and implementation of the recommendations

Release at 2019 ASHP Midyear Clinical Meeting

- Official launch, available on ASHP website
- News coverage, publication in AJHP, editorial, webinar
- Additional resources
PAI 2030 Domains

1. Patient-Centered Care

2. Pharmacist Role, Education, and Training

3. Technology and Data Science

4. Pharmacy Technician Role, Education, and Training

5. Leadership in Medication Use and Safety

3 Subdomains:
- Practice-focused
- Organization-focused
- Profession-focused
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
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)
Patient Centered Care

1. Health-systems are becoming accountable for the entire patient care spectrum, including preventative health, acute care, and longitudinal ambulatory care
2. Shift from patient advocacy to patient and family activation
3. Continued growth of ambulatory care pharmacists and specialty pharmacist services to meet patient care needs
Patient-Centered Care: Themes and Examples

Engagement with Patients, Families and Caregivers
The pharmacy workforce should collaborate to establish consistent and sustainable models for seamless transitions of care.

Continuum of Care
The pharmacy enterprise should be integrated and modeled to provide patient-centered care across the continuum.

Medication Education
The pharmacy workforce should lead medication education for patients and caregivers that optimize outcomes, including in care transitions.

Documentation and Transparency
Pharmacist documentation related to patient care should be available to all members of the healthcare team, including patients, in all care settings.

Access to Pharmacists
All patients should have access to a pharmacist across all settings of care.

Innovative 24/7 Clinical Models
Patients should have access to 24/7 pharmacy services with advanced clinical capability available seven days a week.
Pharmacist Role, Education, and Training

1. Continuing education remains common practice vs. continuing professional development
2. Credentialing and privileging of pharmacists established in some health systems - not yet common practice nationally
3. Continued shortage in primary care providers and unmet patient care needs, especially in rural areas
4. Proliferation of board-certification in many practice areas. Gaps exist in some areas, such as informatics
5. Need to build workforce skills in population health management and mental and behavioral health
Pharmacist Role, Education, and Training: Themes and Examples

- Pharmacist training
  Health systems should require completion of ASHP-accredited residency training as a minimum credential for new pharmacist practitioners.

- Continuing Professional Development
  Pharmacists should have an individualized continuing professional development plan.

- Board Certification
  Pharmacists practicing in specialty areas should be board-certified through the Board of Pharmacy Specialties or other appropriate body.

- Pharmacist Prescribing
  Pharmacists should expand their scope of practice, including prescribing, to optimize patient care.

- Credentialing and Privileging
  Pharmacists should participate in organization-based credentialing and privileging processes to ensure competency in their scope of practice.

- Pharmacists as Primary Care Providers
  Credentialed ambulatory-care pharmacists should be considered primary care providers.
Technology and Data Science

1. Health IT will continue to have a significant impact on the profession
2. Advancements in healthcare technologies should support clinical, financial, and operational efficiencies
3. Pharmacy informatics competencies important for all workforce not just specialists
4. Pharmacy leaders are essential to the assessment, selection, and validation of new medication-use technologies
5. Technology safety is an important consideration as we rely on technologies in practice
6. Analytics strategies are key to navigating the substantial amount of contemporary medication-use information and applying these data to improvement
7. AI/ML are important developing technologies that will impact operation and practice
Population Health
Pharmacists should use health information technologies to advance their role in patient care and population health.

Artificial Intelligence
Pharmacy should establish standards and continuously evaluate the application of artificial intelligence in prescribing and review of medication orders.

Wearables and Ingestables
Pharmacy practice leaders should be engaged in assessing emerging patient care technologies to support optimal medication use outcomes.

Technology in Medication Use
Pharmacy departments should use technology to ensure the safe compounding of sterile products.

Interoperability
Pharmacy should advocate for information technology that is interoperable and transparent with respect to usability, security, and functionality across the continuum of care.

Advanced Analytics
Pharmacy practice leaders should foster the development and application of advanced analytics in high risk activities.
Pharmacy Technician Role, Education, and Training

1. Pharmacy technician participation in advanced roles in all practice settings
2. Responsibility for advanced technical and supporting activities
3. Completion of ASHP/ACPE-accredited technician education and training
4. Entry-level certification
5. Foster development of professional career path for pharmacy technicians
6. Achieving a recognized scope of practice including core competencies
Pharmacy Tech Role, Education, and Training: Themes and Examples

**Technician Responsibilities**

Pharmacy technicians should have complete responsibility for advanced technical and supporting activities (order, TCT, regulatory, supply chain, revenue cycle).

**Technicians in Advance Roles**

Pharmacy technicians should participate in advance roles in all practice settings to promote efficiency and improve access to patient care.

**Technician Certification**

Health systems should require technicians to be certified by the Pharmacy Technician Certification Board (PTCB).

**Education and Training**

Newly hired pharmacy technicians should have completed an ASHP/ACPE accredited technician education and training program.

**Career Paths for Pharmacy Techs**

Pharmacy departments should foster the development of professional career paths for pharmacy technicians.

**Technician Scope of Practice**

A scope of practice including core competencies should be developed for pharmacy technicians in acute-care and ambulatory-care settings.
Leadership in Medication Use and Safety

1. Pharmacists should lead pharmacogenomic and medication stewardship
2. Leadership should support staff well-being and resiliency
3. Support of interprofessional innovation centers
4. Support of diversity, equity and inclusion
5. Policy influence for individual patients and population health
6. Develop opportunities for interdisciplinary problem solving around patient care
Leadership in Medication Use and Safety: Themes and Examples

Well being
Health systems should support the well-being and resiliency of their staffs.

Pharmacogenomics
Pharmacists should advance the use of pharmacogenomic information for personalized medication treatment.

Medication Stewardship
Pharmacists should assume leadership roles in medication stewardship activities (e.g. antimicrobial, opioid, others) at the local, state and national levels.

Financial Stewardship
Pharmacists must be an active and accountable partner in the financial stewardship (e.g. waste, cost effective therapy) of care delivered in all settings.

Pharmacist Executive Leader
Health systems should have a pharmacist executive leader, with high reporting, to oversee enterprise-wide decision making related to medication use and technology.

Innovation Centers
Health systems should support interprofessional innovation centers designed to pursue breakthroughs in areas such as patient experience, medication use, and other areas.
ASHP’s Practice Advancement Initiative 2030 includes tools and resources aimed at advancing pharmacy practice through the next decade.

Since its inception in 2010, ASHP’s Practice Advancement Initiative has resulted in a remarkable partnership with ASHP state affiliates, health systems, and pharmacists to help drive pharmacy practice change at a local level.
PAI 2030 Tools & Resources

Explore

About PAI 2030
As healthcare evolves, PAI 2030 provides pharmacists with tools and guidance they need to lead and shape the profession.

LEARN MORE →

Practice Advancement Reports
Access the research and thinking driving practice advancement efforts.

LEARN MORE →

PAI 2030 Recommendations
Quick reference to recommendations ensuring the pharmacy profession meets the demands of future practice.

LEARN MORE →

Advancement Tools
Tools and resources to help you advance practice in your setting.

LEARN MORE →
PAI 2030 Resources in Development

- Member engagement and contributions through ASHP Sections, Forums, State Affiliates, and SSHPs
- Creation and amplification of tools and resources
  - Web resource center (https://www.ashp.org/pai/)
  - Self-assessment tool
  - Best practice reports (case reports, podcasts, videos, webinars)
  - Toolkits for SSHPs and State Affiliates
  - Indicators of progress
  - Education, research, publications, and recognition
What is my SSHP’s role in PAI 2030?

**Study PAI 2030 Recommendations**
- Visit PAI 2030 website and review relevant publications
- Attend educational programming during ASHP conferences
- Complete self-assessment tool

**Promote the PAI 2030 Initiative**
- Engage in conversation with pharmacy leaders
- Bring the initiative to your SSHP meetings and discussions
- Participate in ASHP events, initiatives, and discussions of PAI 2030

**Propose student resources**
- Bring innovative projects and activities related to PAI 2030
- Exchange ideas with local SSHP leaders and nationwide colleagues
- Develop student resources (blogs, toolkits, event planners, timelines, etc.)
Key Takeaways

1. ASHP has streamlined and updated its recommendations for practice change in health-system pharmacy targeted toward the year 2030

2. A wide range of individuals and organizations was engaged in the process resulting in 59 recommendations

3. The recommendations take into account changes in the healthcare environment over the past decade, projected trends, and the pharmacy profession’s aspirations