

**EXECUTIVE SUMMARY**

# ASHP Meeting of the Deans

DECEMBER 6, 2022 | ASHP MIDYEAR CLINICAL MEETING & EXHIBITION | LAS VEGAS, NV

Each year ASHP convenes a meeting of the deans during the ASHP Midyear Clinical Meeting & Exhibition, inviting all deans of accredited schools and colleges of pharmacy (SCOP) across the United States. The meetings serve to review societal and healthcare trends and developments that may affect pharmacy education, discuss ASHP updates relevant to the SCOP, and identify potential strategic areas of focus for ASHP.

The December 6, 2022 Meeting of the Deans was held in Las Vegas, Nevada, and focused on three domains:



**HEALTH SYSTEMS  
(HS) AND ACADEMIA  
COLLABORATION**



**PHARMACY PRACTICE  
INFLUENCE AND  
ADVOCACY**



**PHARMACY  
WORKFORCE  
PIPELINE**

In addition to deans of SCOP, this meeting included leaders of large HS across the nation. The meeting was facilitated by ASHP President Paul Walker and invited an open discussion to address issues and opportunities for harmonization and collaboration between health-system practice and academia to better serve the pharmacy profession.

This report is intended as a general overview of the discussion among participants under each of the three key domains. The report does not represent the official position of either ASHP or any of the individuals or organizations involved.



# HS AND ACADEMIA COLLABORATION

Participants were asked to discuss strategies utilized by their organizations in order to coordinate engagement, strategic planning, and partnership between HS and SCOP. Below is a summary of the discussion.

Several large HS noted that they have dedicated roles within their organization to manage relationships with SCOP and coordinate learners. Some position titles described for this role include education manager, system manager for education, director of education, and education coordinator. Key responsibilities for this role may include:

- Managing affiliation agreements between the organization and various SCOP.
- Maintaining ongoing communication with SCOP regarding student placement and site expectations.
- Coordinating scheduling, orientation, and placement of learners across the HS.
  - » A challenge identified is a misalignment of rotation blocks between SCOP that may contribute to the administrative burden for HS operations.
- Assisting with recruitment of students and residents for the organization (including internships, shadowing programs, and residencies).
- Offering preceptor development programming and onboarding new preceptors.
- Residency program coordination (if program offers residencies).
- Leading pharmacy technician training efforts (including establishing early training for students interested in HS practice pre-pharmacy and transitioning to internships).

Some HS noted that while a position responsible for coordinating learners and managing relationships with SCOP would be desired, several limitations could pose barriers for approving this role, including:

- Budgetary limitations that would restrict their ability to fund or approve this position.
  - » Organizations may be limited by positions that do not provide direct patient care clinical value or financial returns to the organization.
  - » Preceptor stipends may not be accepted due to mission of the organization and/or may not cover the cost of additional positions or time for precepting.
- Justification of staff time for this role if institution does not have academic mission and/or if program does not offer residencies.

Most SCOP have dedicated positions that manage relationships with HS. Usually, these responsibilities fall under the directors or deans of experiential education. However, some schools have created unique roles that specifically work on HS initiatives, such as associate deans for clinical affairs, associate deans or directors of pharmacy practice, and associate deans for interprofessional education. Each SCOP may have unique roles associated with these positions, including:

- Managing affiliation agreements with HS sites.
- Coordinating communications and collaborative efforts with local departments of pharmacy and practice sites.
- Conducting site visits to ensure quality of rotation sites and strengthen relationships with practice sites.
- Formalizing partnerships with practice sites in-state and out of state.
- Hosting advisory boards to help direct curricular changes and student placement.
- Leading preceptor committees to advance preceptor development efforts.
- Coordinating residency site placement and resident experiences with the SCOP.
- Leading interprofessional partnerships and student experiences or simulations.

SCOP and HS employ a number of additional opportunities for collaboration. A few examples include:

- Exchange of annual strategic planning reports between SCOP and HS.

- HS offerings:
  - » Block rotations that facilitate more advanced experiences/responsibility for students (also a tool for residency program recruitment).
  - » Encouraging clinicians to participate in adjunct faculty roles and/or precept regularly.
  - » Director of pharmacy or chief pharmacy officer roles:
    - Serving as faculty to SCOP.
    - Serving on advisory boards to SCOP.
    - Hosting advisory groups representing different sites and practices to secure strong connections with small hospitals, independent pharmacies, correctional facilities, and home infusion sites.
    - For integrated HS with SCOP, the chief pharmacy officer may share some common performance goals with the dean.
- SCOP offerings:
  - » Ensuring that all (or most) faculty have clinical practices and responsibilities.
    - Challenges noted with this model are the determination and negotiation of the percentage of time for faculty doing clinical, teaching, and scholarly activity to prevent burnout and foster success. Some schools utilize 3 to 4-month blocks of responsibility rotations for faculty, while others utilize a weekly breakdown of responsibilities for each role/requirement.
  - » Offering teaching certificate programs or leadership seminars to residents.
  - » Sponsoring drug information sites (and faculty that participate in drug information centers).
  - » Including community partners during strategic planning efforts (such as HS leaders, community and hospital practitioners, industry partners, etc.).
  - » Establishing formal advisory boards that invite key HS leaders from the area to:
    - Inform strategic planning efforts.
    - Inform curricular changes and/or expectations.
    - Discuss and coordinate recruitment into the SCOP and/or HS pipeline.
    - Discuss resolution of workforce issues (including pharmacy technician shortages).
  - » Dean roles:
    - Hosting regular meetings (advisory boards, executive councils, or informal, recurring meetings) with local HS chief pharmacy officers (monthly, quarterly, and bi-annually frequency noted).
    - Hosting open forum meetings to allow practitioners and leaders to provide feedback relating to joint initiatives, curricular expectations, and workforce dynamics.
    - For integrated HS with a SCOP, the dean may share some common performance goals with the chief pharmacy officer.

Regardless of the methods for collaboration, participants identified some common goals in collaborating between HS and SCOP:

- Elevate pharmacy practice.
- Optimize patient care by ensuring consistent pharmacy services, encouraging innovative practices, encouraging interprofessional collaboration, and securing a strong, competent workforce pipeline.
- Reach underserved areas and patient populations.
- Encourage student autonomy, professional development, and training.
- Enhance recruitment efforts within SCOP, as well as post-graduate training programs in HS.
- Empower faculty and practitioners to elevate their practice, scholarship, and contribution to the profession.
- Protect the well-being and resilience of the pharmacy workforce.

- Increase the focus on diversity, equity, and inclusion.
- Maximize staff, time, and financial resources (including identifying joint business opportunities and diversification).
- Continue to innovate within practice and education, consideration of mirroring nursing or medical models of education and training.

Participants concluded the discussion by offering a number of potential solutions to facilitate collaboration between HS and SCOP to achieve the above goals:

- Development of toolkits that define collaborative partnerships (including strategic statement, communication templates, role delineation, etc.).
- Exploring different models for funding and operationalizing split clinical faculty roles and preceptorships between SCOP and HS.
- Contributing to the continued promotion of pharmacy as a career option for students.
- Encouraging pharmacy technician program establishment.
- Encouraging pharmacy practitioner members to contribute to precepting and training efforts for students and residents.
- Demonstrating the value of learners to practitioners by aligning student learning (IPPEs/APPEs) with the scheduling and service needs of the HS as an extension of the workforce and establishing student learners as an integral role of the practice model.
- Continuing to create resources that facilitate precepting for busy practitioners (e.g., [ASHP Preceptor Toolkit](#)).
- Continuing to show value of faculty contributions to HS practice.
- Conducting joint strategic planning between the HS and SCOP to align shared goals.

The group recommended that ASHP continue to facilitate joint discussions between leaders of HS and SCOP in the future.



# PHARMACY PRACTICE INFLUENCE AND ADVOCACY

Participants were asked to discuss strategies utilized by their organizations in order to align practice advancement and advocacy efforts between HS and SCOP. Below is a summary of the discussion.

Some HS noted that they have dedicated roles within their organization to manage advocacy agendas and priorities. Some of these positions are full-time advocacy positions for entire HS, including pharmacy, while other HS co-fund pharmacy-specific lobbying and advocacy representatives through state societies. Other organizations have less formalized positions but designate or encourage involvement within their departments. Legislative efforts for representatives could include:

- Drafting or signing letters relevant to issues in practice.
- Collaborating with partner organizations (societies, institutions, or other partners) to issue joint statements.
- Working with marketing and communications team to promote issues relevant to practice.
- Drafting collaborative practice or other model legislation.
- Participating in legislative committees or hosting legislative subcommittees that support advocacy priorities (this could include students, practitioners, and interprofessional colleagues).
- Securing or encouraging participation of organizational representative in Board of Pharmacy (this could be fulfilled by staff pharmacists or pharmacy leaders).
- Encouraging participation of organization in state or national pharmacy, hospital, and medical associations.
- Coordinating regular meetings with state Boards of Pharmacy to stay informed on changes and challenges.
- Coordinating coalitions with other local and state leaders to advance state-based advocacy priorities.
- Partnering with SCOP to leverage student, faculty, and academic stakeholders in advocacy efforts (through financial support, staff support, phone banking, legislative day efforts, and other initiatives).

Some SCOP noted similar advocacy efforts through various methods:

- Co-funding state-based lobbying efforts or pharmacy lobbyists to support legislative priorities.
- Securing or encouraging participation of academic representative on the Board of Pharmacy (typically faculty).
- Encouraging faculty and students to become involved in advocacy efforts through student societies, state societies, and national associations (through support of legislative day, education on legislative issues, contribution to phone banking, and other initiatives).
- Coordinating or supporting coalitions with other local and state leaders to advance state-based advocacy priorities.
- Conducting quarterly meetings with local SCOP, pharmacy associations, and HS leaders to discuss advocacy topics.
- Implementing curricular requirements for faculty to support advocacy efforts.
- Establishing regular educational sessions for students on advocacy efforts and priorities.
- Encouraging student groups to invite legislators to speak to student organizations on campus.

Participants expressed a number of challenges in pursuing advocacy involvement within their organizations, including:

- Budget limitations for travel or funding positions required for advocacy efforts.
- Alignment of state-based partners on key advocacy priorities (and a strategic agenda to concentrate efforts).
- Differing models of advocacy approach between different organizations, associations, and states.
- Generational gaps that may influence understanding of urgency or importance of advocacy for the profession.
- Limited representation of faculty or HS practitioners on the Board of Pharmacy that may challenge impact (could be skewed towards issues that are focused on community or trade rather than advancing clinical practice).

Participants concluded the discussion by offering a number of potential solutions to facilitate advocacy efforts for both HS and SCOP:

- Designing model structure of effective state-based alliances (including engagement models with Board of Pharmacy, interprofessional partners, etc.).
- Identifying and distributing advocacy priorities on a national and state level to formulate strategic agenda each year.
- Continuing to monitor and disseminate legislative and advocacy updates as they arise.
- Identifying state and federal legislators who have ties to pharmacy and could be influential in promoting advocacy agenda.
- Requiring student participation (especially early on) in state legislative days for pharmacy.
- Encouraging students to observe a board of pharmacy meeting.
- Encouraging collaboration between state affiliates with academic and practice leaders regularly, surrounding legislative priorities.
- Disseminate case studies of successful involvement of HS and SCOP in passing impactful regulations that advance the pharmacy profession.



# WORKFORCE PIPELINE

Participants were asked to discuss strategies utilized by their organizations in order to alleviate pipeline strains for the pharmacy profession. Below is a summary of the discussion.

Leaders from both HS and SCOP identified a number of challenges with the pharmacy workforce pipeline:

- Declining number of students interested in pursuing pharmacy as a career.
  - » Factors relating to cost, time, professional expectations, virtual work preferences, and public perception of the profession.
  - » Increased competition with other healthcare professions.
- Declining number of quality applicants pursuing pharmacy school limits options for SCOP.
  - » Challenges with SCOP having to balance enrollment concerns while serving as the gatekeepers for ensuring quality candidates and practitioners within the profession.
  - » Challenges surrounding NAPLEX and MPJE requirements, as some states are considering removing one or both entry exams.
- Empowering preceptors to implement rigorous expectations and appropriate feedback to learners during advanced experiential pharmacy practice rotations before they enter the workforce.
  - » Challenges with sites feeling empowered to not pass students that do not meet competencies.
  - » Challenges with preceptor development and feedback quality, structure, and delivery.
- Declining number of students interested in pursuing post-graduate residencies.
  - » Factors relating to this were burnout, low resident/fellowship salaries, and increased interest by student pharmacists to pursue careers in industry.
- Concerns with student accountability and professionalism both in school and the workplace.
- Concerns with clinician burnout that may lead to exiting the workforce or negatively influencing prospective candidates.

SCOP identified low recruitment as one of their biggest challenges at present. Organizations have employed different strategies to help alleviate this issue, including:

- Hiring communication specialist to help market pharmacy as a career option and promote school.
- Establishing an early-admission program for students pursuing biology or chemistry degrees.
- Coordinating with other health professions to pool together possible candidates for professional programs.
  - » Three-way recruitment and collaboration between medicine, nursing, and pharmacy.
  - » Pooling applications with physician assistant (PA) programs to help steer students who do not make it to PA school into pharmacy (given increased competition for PA schools).
- Amplifying recruitment efforts to high schools, middle schools, boy/girl scouts to encourage early interest in pharmacy.
- Helping fund free or reduced-tuition associate programs to assist high-performing students pursuing pharmacy school.
- Offering accelerated, 3-year degrees to reduce total number of years in school (and cost).
- Collaborating with HS to create shadowing opportunities for undergraduate or high school students.
- Collaborating with HS to conduct health fairs and other programs that expose students to pharmacy.

Participants concluded the discussion by offering a number of potential solutions to alleviate current and future workforce shortages in the pharmacy profession for both HS and SCOP:

- Student enrollment and recruitment-related:

- » Creating marketing documentation that outlines career benefits and pathways, patient care opportunities, as well as cost-benefit analysis of a doctor of pharmacy degree education.
  - Utilizing social media and disseminating nationally to amplify message.
  - Leveraging pandemic impact of pharmacists to patient care.
  - Videos and other media platforms explaining and elevating HS practice for younger audiences.
  - Reaching out to career counselors in high school and undergraduate programs.
  - Outlining steps needed to become a licensed pharmacist, educating students on available pathways.
- » Creating marketing documents that compare pharmacy to other healthcare professions as a viable career pathway.
- » Expanding shadowing opportunities for students to witness pharmacists on-the-job through informal mentorships and guidance.
- » Modeling educational process of other health professions (particularly medicine) for graduate and post-graduate education and training.
  - Consideration of harmonizing pharmacy school education to be consistent (currently, there are 3-, 4-, and 6-year doctor of pharmacy programs).
  - Considering amplifying early and advanced hands-on experiential training for student pharmacists.
  - Considering changes to the way/time of day classes are offered in SCOP to allow students to contribute to needs of practice sites and offset costs through employment opportunities in pharmacy (especially in consideration of workforce shortages).
- » Encouraging and fostering student and new practitioner resilience to withstand challenges.
- Pharmacy technician training and recruitment-related:
  - » Encouraging HS and SCOP to create collaborative technician training programs utilizing onsite facilities and faculty expertise.
    - Potential also for collaborative practices of HS with community colleges.
  - » Partnering with high schools to recruit students who might be interested in pharmacy technician careers.
  - » Creating marketing materials that promote career advancement opportunities and benefits of pharmacy technicians.
  - » Considering creation of longitudinal IPPE rotations focused on HS that could help prepare students for careers in HS pharmacy early, while contributing to the workforce (alleviating some of the shortage needs).
    - Some HS are implementing this model.

## CONCLUSION

The meeting was adjourned by ASHP President Paul Walker at 9 a.m.. The next ASHP Meeting of the Deans will be convened on May 8, 2023, virtually.