

## NEWS

### From the Desk of the ACCP President

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### Service on National Committees

I have been fortunate during my career to have served on several interprofessional national panels or committees for a variety of governmental and nongovernmental organizations, including the FDA, NAM (formerly IOM), HHS, AHRQ, and USP, as well as other volunteer efforts in my area of specialty practice, critical care medicine. Requests to serve on such national panels and committees typically involve considerations such as name recognition and experience.

In 2017, ACCP President Jill M. Kolesar developed a charge for the Public and Professional Relations Committee related to Strategic Direction 3.3 of ACCP's strategic plan, which calls for the College to "expand and scale practice and research opportunities for clinical pharmacists." The subsequent report submitted to the Board of Regents in the summer of 2018 provided ACCP with additional insight into the typical prerequisites for involvement in guideline panels, consensus conferences, and similar expert task groups. In response to a survey by the committee, 98% of ACCP members who stated they were involved in these activities had been in their positions at least 5 years beyond terminal training. Furthermore, 83% had worked 10 years or more after terminal training. Other typical prerequisites listed by survey respondents included active organizational/panel membership, publications and presentations in the interest area, and either nomination or election to the panel or task group.

During my presidential year, I have charged the Research Affairs Committee to "develop a content outline and suggested instructional methods for an ACCP online mini-course for pharmacy students, residents, fellows, and new practitioners that focuses on how clinical practice guidelines are developed and critically evaluated." In addition, I have charged the Certification Affairs Committee to "develop mechanisms to identify ACCP member-experts who could be recommended by the College to serve on interprofessional guideline/consensus panels." For the past several years, ACCP Government and Professional Affairs staff have increased their involvement in a variety of external organizations and other groups to recognize clinical pharmacists' contributions to achieving medication optimization. Therefore, the College has contacts with interprofessional collaboratives and professional medical organizations that can be expanded on to promote ACCP member involvement in panels, task forces, and other expert task groups.

ACCP is fortunate to have many nationally and internationally recognized experts in specific areas of practice and research. However, the College cannot and should not rest on its laurels. ACCP should continue to develop newer, more junior members for future involvement in these expert groups and promote and recommend more experienced members who are not currently involved but are well qualified to participate in these activities.