

ACCP Report

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Miller to Receive 2005 Parker Medal

William A. Miller, M.S., Pharm.D., FCCP, FASHP, has been chosen by the Parker Medal Selection Committee as the 2005 recipient of the College's Paul F. Parker Medal for Distinguished Service to the Profession of Pharmacy. Dr. Miller is currently Professor of Clinical and Administrative Pharmacy at the University of Iowa College of Pharmacy.



Paul Parker was truly a pioneer in pharmacy. Before his death in 1998, Mr. Parker spent 24 years as director of pharmacy at the Chandler Medical Center/University of Kentucky in Lexington. His innovations include development of decentralized pharmacy services placing pharmacists in the hospital's clinical areas, as well as development of the nation's first pharmacist-staffed drug information center. Mr. Parker's vision for pharmacy practice was passed along to more than 150 residents and fellows who went through the Kentucky program during his tenure. These disciples include many of today's leaders in clinical pharmacy who continue to pass on his wisdom and vision to their trainees. The Paul F. Parker Medal recognizes an individual who has made outstanding and sustained contributions to the profession that improve patient or service outcomes, create innovative practices, affect populations of patients, further the professional role of pharmacists, or expand the recognition of pharmacists as health professionals.

In making its selection, the Parker Medal Committee noted that "Dr. Miller has been, and remains, one of the most influential clinical pharmacy leaders of the past 30 years." The committee also pointed out that Dr. Miller began his faculty career at the University of Kentucky, where he served under Paul Parker. He is widely considered a modern visionary for our profession. William E. Evans, Pharm.D., Director and CEO of St. Jude Children's Research Hospital, wrote in his letter of nomination of Dr. Miller, "Bill is a visionary for our discipline and for the entire profession. He saw twenty years ago where we needed to move pharmacy practice as a clinical profession, and he understood the nature and quality of pharmaceutical education that would be necessary to move our profession onto the same playing field as medicine and other clinical professions." Dr. Barry Carter, a past ACCP president,

noted in his letter to the Parker Medal Committee, "One of the contributions for which Dr. Miller is most recognized throughout the profession of pharmacy was his appointment of the Commission to Implement Change in Pharmaceutical Education when he was President of the American Association of Colleges of Pharmacy (AACCP) in July 1989. Bill's vision of the pharmacy educational landscape was evident when he charged this commission to redefine the mission of pharmacy practice as a basis for pharmaceutical education and to develop a conceptual framework for pharmacy practice." He went on to observe that, as charged by Dr. Miller, the commission made observations and recommendations "that have truly revolutionized pharmaceutical education and begun to bear fruit in the practice of pharmacy worldwide."

As a department chair, Dr. Miller was responsible for the development and expansion of clinical pharmacy programs at the University of Tennessee, the Medical University of South Carolina, and the University of Iowa. As faculty members who worked under Dr. Miller, Past ACCP Presidents Jean Nappi and John Bosso wrote, "Under Dr. Miller's leadership, these institutions implemented innovative clinical pharmacy programs, where clinical pharmacy specialists became intimately involved in direct patient care activities to the extent that they are considered integral team members."

Dr. Miller was a founding member of the College and served as ACCP President in 1985-1986. He is also a founding member of the *Pharmacotherapy* Board of Directors and has chaired that journal's board since 2003. A leading advocate of progressive postgraduate training and residency accreditation, Dr. Miller was a member of the American Society of Health-System Pharmacists (ASHP) Commission on Credentialing from 1991 until 1997 and chaired that body for three years. He served as a member of the Board of Pharmaceutical Specialties Specialty Council on Pharmacotherapy for six years and was instrumental in the development of the pharmacotherapy specialty credential (BCPS). He remains active on ACCP and AACCP committees, and serves as a frequent residency program accreditation surveyor for ASHP.

The 2005 Paul F. Parker Medal will be presented during the Awards Ceremony as part of the Opening General Session at the 2005 Annual Meeting in San Francisco, California, on Sunday morning, October 23. Dr. Miller will be in attendance to accept the medal and deliver a brief acceptance address. The Parker Medal Selection Committee is composed of

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representatives from member organizations of the Joint Commission of Pharmacy Practitioners, together with past presidents of ACCP. Members of the 2005 committee were Jerry L. Bauman (Chair), Frederick M. Eckel, Janet P. Engle, William E. Evans, Dennis Helling, Mary Anne Koda-Kimble, Kathleen Lake, J. Robert Powell, Robert E. Smith, and Dianne Tobias.

Berardi, Bond, Dong, and Fletcher to Receive ACCP Honors

ACCP members Rosemary L. Berardi, Pharm.D., FCCP, FASHP; C.A. Bond, Pharm.D., FCCP, FASHP; Betty Dong, Pharm.D., FCCP; and Courtney V. Fletcher, Pharm.D., FCCP have been selected by the College's Awards Committee to receive the association's prestigious 2005 Education, Russell R. Miller, Clinical Practice, and Therapeutic Frontiers Lecturer Awards, respectively. The awards will be presented in San Francisco on Sunday, October 23, during the Opening General Session of the College's Annual Meeting.

The Education Award recognizes an ACCP member who has made substantial and outstanding contributions to clinical pharmacy education at either the undergraduate or postgraduate level. Rosemary Berardi is Professor of Pharmacy at the University of Michigan College of Pharmacy. Having served on that faculty for over 30 years, Dr. Berardi has been an important educational innovator, mentor, and role model on the Ann Arbor campus. Letters written by colleagues and former students in support of Dr. Berardi's nomination attest to her role as an exceptional educator. One former student wrote, "During my four years as a pharmacy student, Dr. Berardi served as my mentor and inspired me to enter an academic career. She was, and continues to be, an engaging and effective teacher.... Her extraordinary teaching skills are also evidenced by her uncanny ability to convey knowledge and ideas, which she does regularly in the classroom and at professional meetings." A colleague adds, "I frequently hear student comments on how she is a 'GREAT' teacher ('the best teacher I have ever had,' etc.) and her course ratings reflect this." Also devoted to scholarship, Dr. Berardi has authored more than 75 articles, numerous educational monographs and audiovisual programs, over 40 book chapters, and is credited with having given presentations at more than 250 symposia (including many ACCP presentations). She has served as the editor-in-chief of the past three editions of the *APhA Handbook of Nonprescription Drugs*, a textbook that is widely regarded by both students and practitioners as the primary reference on the use of over-the-counter medications.

The Russell R. Miller Award is presented in recognition of substantial contributions to the literature of clinical pharmacy, thereby advancing both clinical pharmacy practice and rational pharmacotherapy. Russell R. Miller was founding editor of the College's journal, *Pharmacotherapy*. Dr. C.A. "CAB" Bond is Professor of Pharmacy Practice and Clinical Professor of Psychiatry in the Schools of Pharmacy and Medicine at the Texas Tech University Health Sciences Center in Amarillo, Texas. He has a sustained and impressive publication record in the field of health outcomes research with an emphasis on documentation of the impact of clinical pharmacy services on patient outcomes. His body of work includes more than 100 manuscripts and book chapters. Dr. Bond's most recent work

citing the effects of clinical pharmacy services on health and economic outcomes, much of it published in *Pharmacotherapy*, has been a major contribution to the clinical pharmacy literature. "These articles have exerted profound impact on the practice of clinical pharmacy, as well as showcasing to the rest of the world the vital role of the clinical pharmacist," noted one of Dr. Bond's nominators. His scholarly efforts have resulted in numerous national research awards, and he was the recipient of the 2001 Texas Tech University Health Sciences Center President's Distinguished Research Award. He was elected in 2004 to membership in the National Academies of Practice in Pharmacy as a distinguished pharmacy practitioner.

The ACCP Clinical Practice Award is given to a College member who has made substantial and outstanding contributions to clinical pharmacy practice. Among the criteria considered in identifying potential candidates are exceptional leadership in the development of innovative clinical pharmacy services and sustained excellence in providing these services. Betty Dong is Professor of Clinical Pharmacy and Clinical Professor of Family and Community Medicine in the Schools of Pharmacy and Medicine at the University of California, San Francisco. Dr. Dong's outstanding accomplishments include being the first pharmacist to deliver primary care to patients with thyroid disease, an area in which she has become nationally known for her expertise in the management of thyroid disease; being among the first pharmacists in the United States to deliver primary care within a group of family physicians, an accomplishment that has allowed her to train several generations of pharmacy students, medical students, and family practice residents in the art and science of therapeutics; and serving as the first pharmacist to be involved in the National HIV/AIDS Clinician's Consultation Service that provides a broad range of educational and training services to HIV health care providers. In recommending Betty for the ACCP Clinical Practice Award, one of her nominators wrote, "Betty exemplifies the innovative pharmacist that ACCP honors with this award. From the beginning of her career, Betty helped to define the role of a clinical pharmacist, and through a changing health care environment has successfully adapted and developed new services, while also broadening her scope to include new therapeutic areas and international outreach. It would be impossible to quantify how many patients and providers Betty has touched during her distinguished career." Dr. Dong has received numerous awards, including the 2001 California Society of Health-System Pharmacists Pharmacist of the Year Award. Her publication record is extensive and includes numerous research articles, book chapters, reviews, and editorials that focus on the therapy of thyroid disease or AIDS.

The ACCP Therapeutic Frontiers Lecture Award recognizes an individual, including ACCP member and non-member nominees, who has made outstanding contributions to pharmacotherapeutics in his or her field. Among the criteria for this award is the broad acknowledgment that the recipient is currently considered to be at the leading edge of research in the field. Courtney Fletcher is Professor and Chair of the Department of Clinical Pharmacy, and Director of the Antiviral Pharmacology Laboratory at the University of Colorado Health Sciences Center in Denver, Colorado. He has distinguished himself as a world renowned leader in antiretroviral research, focusing on the pharmacokinetics and pharmacodynamics of antiretroviral agents. Dr. Fletcher has published more than 100

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peer-reviewed research articles and numerous book chapters. He has maintained a consistent record of funding from the National Institutes of Health (NIH) for more than 15 years and currently serves as a member of the AIDS Discovery and Development of Therapeutics Study Section in the Center for Scientific Review at the NIH. One of Dr. Fletcher's nominating letters serves as an apt testimonial to his qualifications as this year's Therapeutic Frontiers Lecturer. "Courtney Fletcher is a remarkable thinker in the field of HIV therapeutics. Most pharmacologists measure concentrations, model data based on established paradigms, and take cues from other investigators... This is not the case with Courtney. He has been at the forefront of new concepts in HIV pharmacology." Dr. Fletcher's lecture, titled "The Pharmacology of HIV Infection: Worlds Apart," will be delivered from 10:30 – 11:30 a.m. during Sunday morning's Opening General Session.

Insider Tips on the ACCP Annual Meeting

With a little inside information, you can maximize your ACCP Annual Meeting experience. Even if you're attending next month's meeting as a first-timer, you can take advantage of all the meeting has to offer—just like a seasoned Annual Meeting veteran.

Tip #1: The meeting begins before the meeting begins.

The Annual Meeting's official dates are Sunday, October 23, through Wednesday, October 26. However, on Saturday, October 22, before the meeting's official start, there are several exceptional premeeting programs from which to choose. Many, such as 1) *Update in Cardiovascular Pharmacy*, 2) *Beyond Ouch: Pain and Palliation in Pediatrics*, 3) *Health Behavior Change: A Workshop for Clinical Pharmacists*, 4) *Depression: Ruling Both Mind and Body*, and 5) (especially for students) *Pharmacy Student to Student Pharmacist: Opportunities in Pharmacy Practice*, are half-day programs and begin around lunchtime. One premeeting symposium, *Basic Training for New Clinical Faculty and Preceptors*, is a full-day program. If you are new to pharmacy education, this workshop on the foundational principles of classroom and clinic-based instruction is for you. It begins at 8:00 a.m., so make your travel plans accordingly.

There is a separate registration fee for each of these programs. To learn more about the programs' content, schedule, and registration fees, visit <http://www.accp.com/05ampre.php>.

Tip #2: Take time to get oriented.

Early Saturday evening, plan to attend the *Newcomer Orientation to the Annual Meeting*. It runs from 4:45 to 5:45 p.m. And don't worry that you'll be one of only a handful of people in the room. Already more than 150 of the preregistered attendees report that they'll be first time attendees—and that number will undoubtedly grow. The Newcomer Orientation will offer advice to help you get the most out of your Annual Meeting experience, and discover how ACCP can help you in your career. Immediately after the orientation, be sure to go to the Newcomer Reception where you can meet other first-timers, as well as ACCP's leaders, over soft drinks and light hors d'oeuvres.



Courtesy of the San Francisco Convention & Visitors Bureau

Tip #3: Learn the lingo.

If the terms PRN Focus Session, Town Hall Meeting, or Satellite Symposium aren't familiar, here's a quick rundown of the Annual Meeting glossary of terms. You are likely a member of at least one of ACCP's Practice and Research Networks (PRNs). At every Annual Meeting, some PRNs plan educational programming, called focus sessions, related to their areas of emphasis. Sometimes they collaborate on a program, such as *State of the Art in HIV Pharmacotherapy—From Pregnancy to Childhood*, cosponsored by the Pediatrics and Women's Health PRNs, or *Non-Parkinson's Movement Disorders—Updates and Methods for Monitoring Drug Therapy*, co-sponsored by the Geriatrics and Central Nervous System Focus sessions are scheduled Monday and Tuesday afternoon. For a full listing of focus sessions, go to <http://www.accp.com/05ammeet.pdf>.

If you haven't yet joined a PRN, the Annual Meeting is an ideal time to see the PRNs in action at their Business Meetings and Networking Forums. They welcome you to attend, learn about the PRN's initiatives, and meet the members and officers. Some PRN business meetings are scheduled Monday evening, others on Tuesday evening. For specific schedules, consult the meeting guide you'll receive on-site.

More Annual Meeting terms: Town Hall, Curricular Tracks, Satellite Symposia, and Silent Auction. At Sunday evening's Town Hall, ACCP's officers and staff will report on the year's progress, and individual members will bring up questions and offer suggestions and comments. This year's Town Hall Meeting will focus on two very important issues related to pharmacy education and training: 1) ACPE's recently released draft of the revised doctor of pharmacy degree accreditation standards and guidelines, and 2) ASHP's proposed changes in residency accreditation standards and the residency matching program. As a meeting newcomer, don't miss this opportunity to see ACCP as a member-driven organization at work.

As you review the Annual Meeting schedule, you'll notice that Monday, Tuesday, and Wednesday morning's programming includes a session from each of five curricular tracks. The curricular tracks offer you the opportunity for in-depth learning on the subjects of clinical lab testing, clinical practice, inflammation, biotechnology therapy, and leadership development. You may choose to follow one track, or select programming from multiple tracks, depending upon your needs and interests.

The Annual Meeting schedule also includes Satellite Symposia (formerly known as Exhibitor Classrooms), a series of industry-supported educational programs. Currently,

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15 satellite symposia on a variety of therapeutic topics are scheduled, beginning Saturday evening and running throughout the meeting. There is no additional fee to attend the satellite symposia, although advance or on-site registration is required, as space may be limited. Information on the Satellite Symposia topics, schedule, and registration information will be available on the ACCP Web site in early October.

The Silent Auction: The first thing you should know about this event is that it's anything but silent. On Monday evening, from 8–10 PM, all Annual Meeting attendees will gather for the Research Institute/PRN Reception and Silent Auction. You will join other attendees in submitting written bids—that's the silent part—on an extensive array of items donated by ACCP members which in previous years have included vacation getaways, fine jewelry and crafts, regional food and wine, sports memorabilia, and textbooks and other professional resources. Meanwhile, at booths set up throughout the room carnival-style, you can try your luck at games of skill, games of chance, and other games unlike any you've seen. The event is a benefit for the ACCP Research Institute, but everyone benefits from a mid-meeting evening of fun and camaraderie.

Tip #4: Use the cafeteria approach.

Try every Annual Meeting activity you can. On Monday and Tuesday, tour the exhibits. Lunch will be provided in the exhibit area on Monday, and breakfast on Tuesday, so that you can spend more time talking with representatives of the exhibiting companies. While you're in the exhibit area, don't overlook the poster presentations on display. (More posters will be presented on Wednesday morning.) Visit the ACCP exhibit to meet ACCP officers and regents, and learn more about the Research Institute, the advocacy program, and StuNet, the new network for student members. And stop by the *Pharmacotherapy* exhibit to meet the journal staff.

Participate in the Recruitment Forum on Sunday afternoon and evening. Whether you're an employer seeking to meet highly qualified candidates or a job seeker interested in exploring new career opportunities, the Recruitment Forum is the right venue for you. There is still plenty of time to register, post a position or a resume on the Recruitment Forum Web site, and make the most efficient use of your time at the on-site Recruitment Forum. For full details on how to participate, go to <http://www.accp.com/recruitm.php>.

Take some time to visit the ACCP bookstore, and browse the newest books available through ACCP. The Annual Meeting is



Courtesy of the San Francisco Convention & Visitors Bureau

a good time to buy: we will ship your purchases free to addresses in the Continental U.S., and at reduced rates elsewhere.

Perhaps most importantly, take advantage of the many opportunities to network with like-minded colleagues from throughout the world. One of the best-kept insider secrets about the ACCP Annual Meeting is this: the meeting is large enough to enable you to meet many new colleagues and make vital professional contacts. And it's small enough to allow you to connect with them readily, and spend time sharing information and ideas in a relaxed atmosphere—just like an Annual Meeting veteran.

ACCP Submits Statement to the Institute of Medicine Concerning Medication Errors

One of the less well known provisions of the Medicare Modernization Act (MMA) of 2003 is the establishment of a committee of the Institute of Medicine to examine the issue of identification and prevention of medication errors. The committee, co-chaired by ACCP member and University of Arizona College of Pharmacy dean J. Lyle Bootman, was charged by Congress with the responsibility to “carry out a comprehensive study of drug safety and quality issues in order to provide a blueprint for system-wide change.”

ACCP staff have attended public meetings of the committee and have monitored its activities as part of the College's 2005 Advocacy Agenda. In addition, ACCP submitted a formal statement to the committee on August 23, 2005

(http://www.accp.com/position/com_IOMErrors.pdf), in which it urged the committee to “...examine the issue of ‘medication errors’ in a broader context, and as a symptom of a larger and more significant problem:

- That problem is the clear failure of the nation's current “system” of medication use to evolve in scope and sophistication comparable to the growth in the complexity and criticality of pharmacotherapy in contemporary patient care.
- The current “system”—involving disjointed processes for prescribing, dispensing, and monitoring of medications, combined with a lack of consistently delivered, standards-based, and quality-focused practice activities that evaluate, manage, and deliver better medication use outcomes in individual patients—must be acknowledged to be fundamentally flawed.
- Substantial change in provider responsibilities, care processes, and the systems and procedures that constitute the current medication use process must occur if meaningful improvement in the quality of medication use, including the prevention of avoidable medication errors, is to be achieved.

The committee will continue its work throughout 2005 and early 2006, with a report to Congress expected in the spring or summer of 2006. Additional information on the committee and its activities may be accessed at: <http://www.iom.edu/project.asp?id=22526>

President's Column

Barbara G. Wells, Pharm.D., FCCP,
BCPP



Year-end Reflections

It seems impossible that I am 10 months into my presidential year, but as I reflect on the events of that period, I feel very good about both the pace of our work and the outcomes, a few of which I would like to share with you in this column. Before I do that, I would like to again say THANKS for the opportunity to serve the ACCP membership and clinical pharmacy. It truly is an honor and a pleasure to work with your distinguished Board of Regents to plan for our future and to provide oversight and analysis to ensure that we do the right things and do them for the right reasons. I also want to thank Dr. Mike Maddux for his leadership and support. He is a gifted leader with boundless energy, in-depth understanding of the complex issues affecting our profession, and a deep commitment to the ACCP vision.

Last January I had the opportunity to represent ACCP at a conference in Arizona, to discuss how to move the residency agenda forward. The American Society of Health-System Pharmacists (ASHP) took the leadership role in organizing this conference of stakeholders, which included ACCP, the American Association of Colleges of Pharmacy (AACP), the Academy of Managed Care Pharmacy (AMCP), the American Pharmacists Association (APhA), the National Community Pharmacists Association (NCPA), the Department of Veterans Affairs, and the Accreditation Council for Pharmacy Education (ACPE). The expansion and continuous quality enhancement of residency training programs are keys to realizing our vision, and I encourage you to refer to the report summarizing the discussions and recommendations of that conference in the most recent issue of the *American Journal of Health-System Pharmacy* titled "Pharmacy Residency Training in the Future: A Stakeholder's Roundtable Discussion." I further encourage you to reflect on how you can refine your work to address the conference recommendations and thus be a part of the solutions.

Our standing committees have made great progress this year, and I would like to mention only a few highlights. The Board Certification Affairs Committee, chaired by Dr. Joe Saseen, has made great progress in preparing a position paper, which will be available soon to articulate the College's vision that in 20–30 years, the majority of clinical practitioners will be board certified specialists. The Clinical Practice Affairs Committee, chaired by Dr. Diane Goodwin, has finalized a Business Practice Model for Inpatient Clinical Services. They also are updating the College's paper, "Rewards and Advancements for Clinical Pharmacy Practitioners."

With the assistance of the Fellowship Review Subcommittee of the Credentials Committee, chaired by Dr. Gary Smith, the Board of Regents was able to refine the eligibility and scoring criteria for selection of ACCP Fellows. The Educational Affairs Committee, chaired by Dr. Susan Bruce, provided a carefully considered analysis and comment on the American Association of Colleges of Pharmacy Center for the Advancement of Pharmaceutical Education (CAPE)

Educational Outcomes. This analysis will soon be published. They also assisted the Board of Regents and staff in responding to the Accreditation Council for Pharmacy Education revised standards and guidelines. The Fellowship Program Review Committee, chaired by Dr. Gene Morse, recommended strategies to address problems associated with fellowship training and recruitment. The Membership Committee, chaired by Dr. Brian Hemstreet, created a resource kit for faculty and preceptors designed to increase ACCP visibility among pharmacy students and to inform them about career paths.

The Publications Committee, chaired by Dr. Karen Gunning, has written for publication a fine paper titled, "Clinical Pharmacy Practice in the Outpatient Setting: A White Paper from the American College of Clinical Pharmacy." The Research Affairs Committee, chaired by Dr. Kevin M. Sowinski, completed a paper on the State of Science and Research in Clinical Pharmacy. They are also finalizing a short paper that addresses the career paths for clinical pharmacy researchers in academia, contract research organizations, government, the pharmaceutical industry, and other settings. The Task Force on Ambulatory Practice, chaired by Dr. Ila Harris, worked to provide for publication a detailed analysis that defines and describes the core business-practice model for clinical pharmacy practice in the ambulatory care setting. The Deans and Department Chairs Task Force, chaired by Dr. Mary Lee, developed an executive analysis to advise the Board on how ACCP might increase its interactions with deans and chairs to work more closely on issues of importance to ACCP, such as developing strategies for increasing the visibility of ACCP among pharmacy students and identifying unmet educational needs. Indeed, ACCP is working to establish our annual and spring meetings as venues where deans, chairs, and clinical managers can gather to share ideas and discuss matters of vital importance to pharmacy education, practice, and research.

The Task Force on Clinical Pharmacist Competencies, chaired by Dr. Jack Burke, is developing for the clinical pharmacist a complete set of assessable competency statements that is suitable for publication. These statements will serve as the basis for assessment mechanisms that will be developed in the future to guide clinical pharmacists in their continuous professional development. The Task Force on Clinical Pharmacy Services Demand, chaired by Dr. Dave Lourwood, developed a marketing plan for ACCP that will foster increased recognition and demand for clinical pharmacy services among consumers, especially senior citizens. Through their work, discussions with the Association for the Advancement of Retired Persons (AARP) were initiated.

The Task Force on Critical Pathways, chaired by Dr. Paul Dobesh, developed a position statement addressing the role of the pharmacist in the critical pathways process by updating the paper "Critical Pathways: the Time is Here for Pharmacist Involvement." The Task Force on Advancement of Residencies/Fellowships, chaired by Dr. Jean Nappi, provided a template for information that can be developed into a format whereby program directors can directly input information into searchable residency and fellowship databases. They also provided a slide show for promoting residency and other types of programs to students, and they delivered a directory of other

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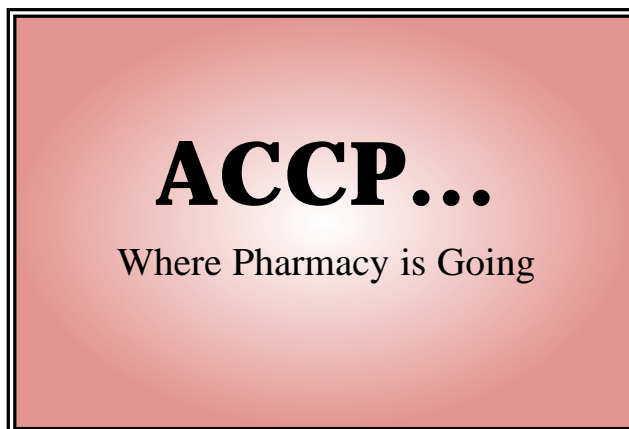
programs listed on another Web site to be used as a resource on our "Tool Kit" Web page.

The Task Force on Clinical Practice Management, chaired by Dr. C. Al Wood, identified benchmarks or indicators of excellent clinical pharmacy services. They also designed a curricular series of educational programs that could be made available to ACCP members to address critical topics for clinical pharmacy managers. Lastly, they identified unmet needs of clinical pharmacy managers and recommended strategies on how ACCP can address those needs. The Task Force on Leadership, chaired by Dr. Bob Smith, advised ACCP staff on the development of premeeting leadership courses designed to meet the needs of ACCP committee/task force chairs and other leaders. They also developed a curricular series of educational programs that can be made available to ACCP members as an education track within an annual or spring meeting. This educational track will be available to members at the Annual Meeting in San Francisco, October 22-26, 2005. The Board of Regents and the membership of ACCP clearly owe a large debt of gratitude to the leaders who chaired and served on these committees and task forces for their commitment to the College and to clinical pharmacy. Through their hard work and creativity, the College is able to advance our mission and assist our members to better serve patients.

I should also acknowledge that there were many other issues successfully addressed (and still being addressed) over the course of the year. The staff and Board of Regents worked extremely hard to continuously plan, implement, and evaluate all that we do. A definition of clinical pharmacy was finalized. An excellent and very successful Spring Forum was held, and a fine Annual Meeting will soon take place, thanks in large measure to the dedication and resourcefulness of our program committees chaired by Dr. Jimmi Hatton and Dr. Michael Ujhelyi. Planning is well under way for the 2006 meetings with the invaluable guidance of those planning committees chaired by Dr. William McIntyre and Dr. Robert Parker. The board and staff are also working to establish collaborative relationships with other organizations to enhance and expand our leadership roles consistent with our strategic plan as well as

to increase the effectiveness of our advocacy agenda and establish ACCP as a resource to government, regulatory entities, and healthcare organizations. We remain undaunted in our commitment to work collaboratively to achieve recognition of pharmacists as healthcare providers within Medicare Part B and to support members' efforts at the state level to secure payment for clinical pharmacy services. The Board of Regents, along with staff and the Board of Trustees of the Research Institute, also worked to define the research agenda, to increase the impact of research done by pharmacists, and to enhance financial resources to adequately execute the Research Institute's mission. Our work was also guided by an abiding commitment to maintain a sense of community and collegiality among the ACCP membership as it increases in number and diversity. Your board and staff are also committed to doing our part to foster the development of an adequate number and quality of clinical pharmacy educators, and we will continue to work internally and collaborate with other organizations, especially AACP, which have outstanding expertise and capabilities and share our goals in this regard.

One of the most vital needs of any 21st century professional/scientific organization is to ensure that members have bountiful opportunities to prepare themselves for leadership roles to continue toward the envisioned future. It is equally important to make certain that our members have development opportunities to ensure their success in achieving their own personal envisioned futures. I hope that each of you will reflect on your personal goals, assess where you are in your career development, and strategize about how you can take full advantage of the countless opportunities within ACCP to prepare yourself to realize your professional goals and your dreams. Opportunities to build leadership skills, to become exceptional practitioners, to grow into more effective teachers, and to build world class research programs are numerous with the College. I hope you will see service on ACCP committees (as member or as chair) as an opportunity to grow in professional understanding and recognition. I hope you will perceive the chance to run for office as an avenue to advance your discipline and your own career. Your profession needs your leadership, and there are numerous ways to enhance your leadership skills and abilities within ACCP.



Call for Nominations

All nominations should be sent to the indicated committee chair in care of: ACCP, 3101 Broadway, Suite 650, Kansas City, MO 64111. Additional information on award criteria may be obtained from ACCP headquarters.

2006 ACCP Fellows: Fellowship is awarded in recognition of continued excellence in clinical pharmacy practice or research. Nominees must have been a full member of ACCP for at least five years; must have been in practice for at least ten years since receipt of their highest pharmacy degree; and must have made a sustained contribution to ACCP through activities such as attendance or presentation at College meetings; service to committees, PRNs, or chapters; or election as an officer. Candidates may be nominated to the Chair of the Credentials Committee by any two Full Members other than the nominee or by any Fellow. Current members of the Board of Regents are ineligible for consideration. **Nomination deadline: February 15, 2006.**

2007 Officers and Regents: President-Elect, Regents, Research Institute Trustees. Nominees must be a Full Member of ACCP and should have demonstrated excellence in clinical pharmacy practice, research, or education; demonstrated leadership capabilities; and should have made prior contributions to ACCP. Current members of the Nominations Committee are ineligible. Send nominations to Chair, Nominations Committee. **Nomination deadline: November 30, 2005.**

2006 Paul F. Parker Medal for Distinguished Service to the Profession of Pharmacy: Recognizes an individual who has made outstanding and sustained contributions to improving or expanding the profession of pharmacy in an area of professional service, including but not limited to patient care, leadership, administration, financial, technological, information processing, service delivery, models of care, and advocacy. The award is not limited to pharmacists or ACCP members. Letters of nomination should be sent to the Chair of the Parker Medal Selection Committee. All nominations must be accompanied by the nominee's curriculum vitae, resume, or biographical sketch as available, and at least three letters of support that describe the individual's accomplishments relative to the award criteria, at least one of which is from an individual outside the nominee's current practice locale. Current members of the Board of Regents, Selection Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2006.**

Letters of nomination for the following ACCP awards should be sent to the Chair of the Awards Committee. All nominations must be accompanied by the nominee's curriculum vitae and a letter of support that describes the individual's accomplishments relative to the award criteria. Additional letters of support also may be included, particularly when the curriculum vitae may not have enough relevant information for a specific award. Current members of the Board of Regents, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: November 30, 2005.**

2006 Education Award: Recognizes an ACCP member who has shown excellence in the classroom or clinical training site, conducted innovative research in clinical pharmacy education, demonstrated exceptional dedication to clinical pharmacy continuing education, or shown leadership in the development of clinical pharmacy education programs.

2006 Clinical Practice Award: Recognizes an ACCP member who has developed an innovative clinical pharmacy service, provided innovative documentation of the impact of clinical pharmacy services, provided leadership in the development of cost-effective clinical pharmacy services, or shown sustained excellence in providing clinical pharmacy services.

2006 Russell R. Miller Award: Recognizes an ACCP member who has made substantial contributions to the literature of clinical pharmacy, either in the form of a single especially noteworthy contribution or sustained contributions over time.

2007 Young Investigator Award: This award will be given at the College's 2007 Spring Forum. Its purpose is to highlight the research program of an ACCP member who has made a major impact in an aspect of clinical pharmaceutical science. Nominees must have been a member of ACCP for more than three years; must be less than six years since completion of their terminal training or degree, whichever is most recent; and must have a research program with a significant publication record having a programmatic theme, or an especially noteworthy single publication. Fellows of ACCP (i.e., "FCCP") are not eligible. The award recipient will present a lecture at the College's 2007 Spring Forum based on his or her work.

2007 Therapeutic Frontiers Lecture: Honors an internationally recognized scientist whose research is actively advancing the frontiers of pharmacotherapy. Recipients need not be ACCP members.

Service Award: Given only when a particularly noteworthy candidate is identified in recognition of outstanding contributions to the vitality of ACCP or to the advancement of its goals that are well above the usual devotion of time, energy, or material goods.

ACCP Silent Auction ... Great Fun for an Even Greater Cause

The ACCP Research Institute Silent Auction / PRN Reception is one of the highlights of the College's Annual Meeting. This year should be no exception, so mark your calendar for Monday, October 24, 8–10 PM, and plan for a really good time—all in support of the ACCP Frontiers Fund!

Look at just some of the many wonderful items already donated for the auction by your fellow ACCP members:

- **artwork and photography:** fantastic landscape photographs.
- **clothing and sports equipment:** hand made clothing and accessories, 2005 Masters golf memorabilia, school of pharmacy logo wear from Buffalo, Illinois, Kentucky, North Dakota, and Pitt.
- **education and training:** minisabbaticals at Kaiser Colorado and NIH, reference books and subscriptions.
- **food and regional items:** a variety of fantastic wines, Lobel's steaks, and regional cookbooks.
- **home and luxury items:** beautiful handcrafted jewelry, decorative baskets, hand-carved desk box, pewter hors d'oeuvres server, marble apothecary jar.
- **travel and recreation:** week in an Idaho cabin; timeshare weeks in Orlando and Frisco, CO; golf outing for two; 40K frequent flier miles; day-sail on Chesapeake Bay.
- **electronics:** none yet, but we're still hoping.



Can you support the ACCP Frontiers Fund by donating items to be included in this year's silent auction? (Don't know about the Frontiers Fund yet? Then please visit <http://www.accp.com/frontiers/>.)

You don't have to be at the Annual Meeting in San Francisco to help out, and the value of your item is considered a tax deductible contribution to the Research Institute. Don't have anything to put up for auction? Cash contributions of at least \$100 will be used to obtain merchandise for the evening's raffles.

Get creative. Share your hobby or avocation with your fellow ACCP members and help the Frontiers Fund at the same time! Return the form below by e-mail to Robert Elenbaas, Director, ACCP Research Institute, at relenbaas@accp.com!

Your name:
Item to be donated:
Brief description of item:
Item's \$ value:



StuNet and Student Programming Help Students Connect

ACCP's student members can connect live at the upcoming ACCP Annual Meeting, and on-line using StuNet, ACCP's student network. Both resources are designed to help student pharmacists develop as professionals and build a network of peers nationally and internationally.

StuNet was launched early this year and is rapidly evolving. Originally envisioned as a virtual chapter, StuNet is maturing into an electronic network featuring a listserv and soon-to-be launched Web site with professional resources for ACCP student members. The StuNet listserv continues to grow, with more than 300 student subscribers. All current ACCP student members subscribe, and as new students apply for membership, they are automatically subscribed to StuNet. There is no additional fee to participate in StuNet—it's a benefit of membership for students. As it develops, StuNet will provide students with resources on many aspects of professional career development and personal growth. It will also offer students a place to express their opinions, get answers, develop leadership skills, and network with other ACCP members.

The StuNet Web pages will be available late this month, and will feature career development information, residency and fellowship FAQs, book reviews, and many other resources. Look for announcements on the ACCP Web site, in the October issue of the ACCP Report, and via e-mails to ACCP members as more information becomes available. Students and faculty members who would like to learn more about StuNet are encouraged to contact Melissa Morris, Membership Project Manager, at mmorris@accp.com, or (816) 531-2177, ext. 13.

Student Programming Introduced at Annual Meeting

Next month, student members will have an opportunity to meet live through special student programming at the 2005 Annual Meeting. On October 22 and 23, Saturday and Sunday, ACCP and the Northern California College of Clinical Pharmacy will present workshops, education sessions, networking events, and a career fair of interest to students. A special "\$49er" two-day registration is available to all students who want to attend Saturday's and Sunday's events. All activities will be held at the Hilton San Francisco, and students can participate in the weekend's full array of student activities for only \$49!

Saturday's activities begin at noon, with lunch and facilitated roundtable discussions. Table topics will include discussions of what it means to be a health professional, plus timely issues in pharmacy practice and how they create new opportunities for pharmacists.

Saturday afternoon continues with a slate of educational sessions on emerging concepts in preventing and treating acute coronary syndromes, followed by a "how-to" session on evaluating and selecting postgraduate residency and fellowship opportunities. Saturday evening offers an orientation to the ACCP Annual Meeting, followed by a reception for first-time meeting attendees, and then an opportunity to participate in a

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meeting and educational program hosted by the Northern California College of Clinical Pharmacy.

On Sunday, students can attend the Opening General Session of the ACCP meeting, with a scheduled keynote address by Mark McClellan, M.D., Ph.D., Administrator of the Centers for Medicare and Medicaid Services. On Sunday afternoon, the Recruitment Forum begins, where students can meet employers seeking to recruit for professional positions, residencies, and fellowships. The Forum is a two-part event that opens with a Career Fair, followed by an opportunity for employers and job seekers to meet one-on-one. Later that evening, students are invited to network with ACCP members at the Opening Reception.

For full details on the student pharmacist programming and a registration form, use the following link to the ACCP Web site, <http://www.accp.com/05amstu.php>. Students who are interested in attending the entire ACCP Annual Meeting, October 22-26, Saturday through Wednesday, can register at a full meeting discounted rate especially for students.

Special Call for Proposals ... ACCP Research Award Eligibility Expanded

The ACCP Research Institute has reissued a call for proposals for the following Investigator Development Research Awards:

Amgen Nephrology Research Award

TAP Pharmaceutical Products Gastrointestinal Research Award

Watson Pharmaceuticals Anemia Research Award

These Research Awards provide \$17,500 to support a specific clinical, pharmacoeconomic or outcomes, or health services research project directly related to the stated areas of emphasis. Any ACCP member who qualifies as a new or developing investigator is eligible to apply.



Coincident with this special call for proposals, the eligibility criteria for the Investigator Development Research Awards have been expanded to include principal investigators who are 10 or fewer years since completion of their formal training or first academic appointment. Previously, eligibility was limited to investigators who were five or fewer years into their research careers.

Many people move from practice to faculty positions, from non-tenure track to tenure-track positions, or from "non-research" to "research" positions. Depending on their circumstances, these individuals may be eligible to apply even though they are more than 10 years since completion of their formal training. Principal investigators are encouraged to contact Research Institute Director Robert Elenbaas, Pharm.D., FCCP, if they are uncertain whether they are eligible (816-531-2177; relenbaas@accp.com).

For more information about the ACCP Annual Meeting, go to <http://www.accp.com/am05.php>

Leadership Development: Skilled Managers Focus on Professional Development

(Ed. Note: The following is the second in a series of columns that began in the August ACCP Report adapted from management and leadership articles written by LeaderPoint's Jon Hope. LeaderPoint is the organization with which ACCP partners to provide the Leadership Experience®. Last month's column made the point that "Management [leadership] makes a difference. With great management [leadership], people know where they're going, what's important, and how they can make a difference. People have direction, focus, and commitment." You needn't have "manager" as part of your formal title to benefit from this series or from the concepts developed in the Leadership Experience. We hope you will enjoy and benefit from these columns.)

Earl Nightingale and others tell us that we can continue to grow and develop throughout our lives. We can learn to do new things, acquire an appreciation for the value of new things, and change our interests. I suspect that most of us have no argument with this concept of learning. The problem often arises when we try to figure out what to learn.

Contrary to popular literature, we don't learn all we need to know in kindergarten. Sure, we learn some things that are useful throughout our lives. We also learn some things that are only useful in kindergarten. These must be unlearned later.

To be successful, we must grow and develop in three areas. At the core of our learning is *personal development*—understanding ourselves and how we relate to those around us. We must also learn some set of *specialist skills*—how to achieve the specific levels of performance in our chosen line of work (pharmacy, for example). Finally, we must *develop as professionals*—be able to practice our chosen profession. (What is often referred to as "professionalization.") Each of these requires specific programs of development. Each of them requires us to adjust how we think.

Personal skills are required to deal with people and understand ourselves. Becoming a human being is, as psychologist Carl Rogers suggests, no easy task. We don't seem to be born with a great ability to see ourselves as we are. To understand who we are and how we deal with those around us, we can benefit greatly from personal development. Personal development programs usually consist of some form of feedback from others and instruments that tell us how to react to certain situations. We use the feedback to change how we act in specific situations to improve our effectiveness in getting results.

Specialist (or technical) skills are required to do the specific tasks of our work. Regardless of what we do, we must learn how to do it. Whether we are an accountant, carpenter, electrician, manager, physician, or clinical pharmacist, we must learn how to do the tasks required. Such skills are often gained through training and practice. There are often accepted ways of doing them. Our job is to learn how to use the tools and accomplish the tasks as required.

Professional skills are required to practice our chosen profession. Although there are certainly personal and specialist skills needed by professionals, there are skills required beyond these. The professional, such as the physician, lawyer, accountant, teacher, pharmacist, or manager, must fill the role of the profession as well as perform the tasks required in filling

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that role. While a good professional is often a good technician, the reverse is seldom true. Good technicians can become good professionals if they work on their professional development.

Professional development is usually difficult and time consuming. What makes a good physician, pharmacist, or manager is often a matter of personal philosophy, but we are all pretty good at recognizing one when we encounter him or her. So, how did professionals get there?

The good professionals spent considerable time and effort in professional development. Some of that effort was formal and some of it informal. Informal development occurs on the job. Formal development occurs in the context of the profession but uses specific methods to focus on how professionals fill the professional role. Formal professional development uses role models and models of the role. Formal programs provide models of how successful professionals think about the nature and universe of the profession.

All forms of development are required but none substitutes for the other. Personal development will not help us do technical work or fill the professional role better. Technical development will not help us understand better ourselves and our profession. Professional development will not help us understand ourselves or do technical work better.

Instruments can help us gather data on how effective our skill levels are, but knowledge alone cannot increase those skills. Each form of development has methods that can help us increase our effectiveness. A key to what the development program can do is the kind of data it provides as feedback. If, for example, the feedback is on how well we did something, the program provides specialist development. Personal development feedback is in the form of how people perceive us, such as the feedback from a 360-degree instrument. Feedback in professional development is in terms of how well we filled the role of the professional.

The problem is not with the instruments but with programs we select because of what the instruments tell us. If you want better specialist skills, look for programs that provide feedback on how well you did something. If you want better personal skills, look for programs that provide feedback on how people perceive your behavior. In all cases, look for programs that gather data in an authentic context—programs that focus on situations that match what you actually do or need to learn how to do.

So, if you want to become an outstanding manager or leader, make sure you invest some time in developing your professional management [leadership] mind-set. Learning more about yourself, while helpful in personal development, simply will not help you acquire the skills of an effective manager or leader.

Jon W. Hope
Director of Programs
LeaderPoint
www.leaderpoint.biz

*The next ACCP Leadership Experience, a multiday management and leadership development experience, will take place February 27–March 2, 2006. For information, visit <http://www.leaderpoint.biz/accp.htm>.

Articulating an ACCP Research Agenda

The ACCP Research Institute has taken on the task of guiding a process to articulate a Research Agenda for the American College of Clinical Pharmacy. In this context, an ACCP Research Agenda is meant to define and describe *those broad research domains, priority research themes, and specific research questions that the College advocates be pursued*—through the ACCP Research Institute, governmental agencies, or other organizations that support research related to the health professions or use of medicines.

The purpose of this document is to describe three broad research domains proposed to comprise an ACCP Research Agenda, and to begin the process of seeking input from College members and other stakeholders to: identify a focused, prioritized list of research themes pertinent to these three domains; and identify and prioritize specific research questions that, if answered, will help to achieve the optimal use of medicines in the prevention and treatment of disease.

Background

Included within pharmacy's societal purpose is a responsibility to create and disseminate knowledge related to drug entities, products, therapy, and use—a *research mission*. Integral to the concept of pharmacy as an evidence-based practice is that the research enterprise produces the "evidence" on which practice is based.

The core purpose of the American College of Clinical Pharmacy is to advance human health and quality of life by helping pharmacists expand the frontiers of their practice and research. This core purpose is accomplished by providing leadership within pharmacy and healthcare, and through a variety of professional development (educational), advocacy, and research related activities. This includes a mission, shared with the ACCP Research Institute, to advance pharmacotherapy through support and promotion of research and research training. The ACCP Research Institute provides a framework and catalyst to advance the research endeavors of clinical pharmacists and the scientific bases that underpin the discipline of clinical pharmacy.

It is ACCP's vision that pharmacists be recognized and valued as the preeminent healthcare professionals responsible for the use of medicines in the prevention and treatment of disease (see www.accp.com/plan2002.pdf). The College foresees the day when:

- pharmacists commonly serve as principal investigators for pharmacotherapy research;
- research led by pharmacists generates a *substantial* portion of the new knowledge that guides drug therapy; and
- a *significant* portion of ACCP's research-based members compete successfully at the highest levels for funding of research that creates this new knowledge to guide drug therapy.¹

¹Certainly, some ACCP members and other pharmacists serve as principal investigators, generate new knowledge that guides drug therapy, and compete successfully for research funding at the current time. ACCP's vision is meant to convey a quantitative stretch in the prevalence of these indicators, and a societal expectation that this is an activity and responsibility of the profession.

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The American College of Clinical Pharmacy has been committed to extending the frontiers of clinical pharmacy practice and research since its founding more than 25 years ago. The College's research mission is to "advance human health and quality of life by facilitating the generation, dissemination, and application of new knowledge that promotes the safe, effective, and cost-effective use of medications" (Appendix 1). The Research Institute contributes critically to achieving the College's overall research mission by:

- supporting the training and development of clinical scientists; and
- funding translational, clinical, and health services research.

ACCP is working to position the College and its members as highly influential contributors to rational pharmacotherapy. The ACCP Research Institute is striving to develop the resources and infrastructure to become a leading force for the advancement of research to achieve optimal medication use. A key initiative that will aid in achieving these goals is for both ACCP and the Research Institute to proactively conceive and pursue a clinical, translational, and health services research agenda that advances optimal medication use.

An ACCP Research Agenda

The conception of a research agenda does not mean that ACCP's and the Research Institute's research-related resources would be available only to support those issues specifically articulated within the agenda. Conceiving and pursuing such an agenda will:

- help to solidify ACCP's and the Research Institute's leadership roles in achieving optimal medication use in patients;
- add important guidance, clarity, and focus to many of the College's and Research Institute's priorities and initiatives;
- define opportunities for the Research Institute to actively develop or solicit specific research initiatives that address questions of key relevance to clinical pharmacists and optimal medication use;
- guide the identification of other organizations with similar professional or research interests with whom ACCP and/or the Research Institute may wish to collaborate;
- help to define the College's research-related advocacy, professional affairs, and policy initiatives; and
- provide needed focus to the Research Institute's internal and external fund raising efforts.

Discussions within the Research Institute Board of Trustees have identified three broad research domains believed to be of particular importance to patients, society, and ACCP members:

- Assuring Medication Effectiveness and Patient Safety Through Enhanced Therapeutic Decision Making
- Development and Retention of an Adequate Clinical Pharmacy Practitioner and Scientist Workforce
- Defining and Testing Models to Predict Patient Response to Drug Therapy

Assuring Medication Effectiveness and Patient Safety Through Enhanced Therapeutic Decision Making

Drug therapy is integral to and inseparable from the modern provision of health care. As noted in the College's position paper on collaborative drug therapy management, "effective

and rational management of increasingly complex drug therapies is now essential both to the health and welfare of patients and to the efficient economic performance of health care systems and organizations of all types" (*Pharmacotherapy* 2003;23:1210-1225). Yet, significant gaps exist between the definition of "optimal drug therapy" and the current state of medication use in the U.S. health care system. The issue of patient safety has become an important focus. However, our perspective must extend beyond enhancements to the system for providing and delivering medications to include the process by which therapeutic decisions are made and implemented (e.g., which drug is chosen, the dose administered, how therapy is monitored, how patient adherence is assured, etc.).

Examples of research themes suggested by these observations could include:²

- Enhancing patient safety by reducing medication and medical error at the time prescribing decisions are made.
- Translating therapeutic knowledge into sound patient management.
- Improving patient adherence to medication therapy.
- Evaluating the effect of different models of care delivery and payment for services on the outcomes, costs, and quality of medication use.
- Translating pharmacogenomics to practical clinical application.
- Using postmarketing surveillance, pharmacoepidemiology, and pharmacovigilance to enhance safe medication therapy.

Development and Retention of an Adequate Clinical Pharmacy Practitioner and Scientist Work force

Pharmacy has responded to society's need and call for a better medication use system with efforts to qualitatively and quantitatively enhance the capabilities and capacity of its practitioner and researcher workforce. This has included changes in educational curricula, growth of postgraduate residency and fellowship training, development of mechanisms for practitioner credentialing, re-engineering of the practice setting, and development of payment systems that recognize and value pharmacy's role and responsibility to assure optimal medication use.

Examples of research themes suggested by these observations could include:

Defining and assessing the adequacy of the pharmacy work force (e.g., responsibilities, number, training, and skills needed in various practice settings).
Assessing the value of residency and fellowship training.
Evaluating the value of board certification in pharmacy.
Methodologies for increasing the number and quality of clinical scientists.
Evaluating models for educating and training clinical scientists.

Defining and Testing Models to Predict Patient Response to Drug Therapy

The recent withdrawal of several medications from the United States market amply serves to emphasize how difficult it can be to predict the response of a given patient to a given medication. However, this issue has relevance beyond that of predicting the potential for adverse drug events. For example: How is drug

²Examples of research themes pertinent to each of the three main domains are provided at this time for illustrative purposes only and to stimulate further thought and discussion.

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dosage determined? How is efficacy and safety evaluated? What is known of the drug's pharmacokinetic, pharmacodynamic, and pharmacogenomic properties, and how is this information used to make sound therapeutic decisions? Changing the clinical drug development paradigm can enhance the value of new and existing medications while minimizing the occurrence of adverse drug events.

Examples of research themes suggested by these observations and questions could include:

- Defining the pharmacology of drugs and therapeutics of disorders and clinical conditions.
- Investigating optimal dosing strategies.
- Pharmacokinetic and pharmacodynamic modeling.
- Developing preclinical and clinical models that predict therapeutic response.

Next Steps

The next steps to articulate an ACCP Research Agenda are designed to include broad input from individual College members and ACCP's Practice and Research Networks (PRNs), as well as the Research Institute Board of Trustees, the ACCP Board of Regents, and other key stakeholders. Accordingly:

- Individual ACCP members are invited to provide comments regarding the proposed research domains, and to suggest research themes and/or specific research questions that they advocate be pursued. Comments and suggestions should be sent to Robert Elenbaas, Director, ACCP Research Institute, at relenbaas@accp.com;
- PRN leaders will be asked to include this initiative on the agenda for their PRN's Business Meeting during the 2005 ACCP Annual Meeting in San Francisco, for the purpose of also providing comments regarding the proposed research domains and to suggest research themes and/or specific research questions that they advocate be pursued; and
- a series of expert panels (one for each research domain to be included in the ACCP Research Agenda) will be appointed later this year. For their respective domains, each panel will be charged to propose a focused, prioritized list of research themes pertinent to the domain; and to identify and prioritize specific research questions that, if answered, will help to achieve the optimal use of medicines in the prevention and treatment of disease. ACCP members interested in serving as a member of these panels are encouraged to contact Dr. Elenbaas at relenbaas@accp.com.

Appendix 1: The Research Mission of the American College of Clinical Pharmacy

Endorsed by the ACCP Board of Regents April 25, 2003
Endorsed by the ACCP Research Institute Board of Trustees April 16, 2003

Professions exist to serve society. In fulfilling its societal role, pharmacy has been defined as a knowledge system that "generates or integrates knowledge about man in sickness and in health; takes knowledge from other sciences and arts; criticizes and organizes that knowledge; translates knowledge into technology; uses some knowledge to create products, devices, and instruments; [and] transmits the knowledge through the education of practitioners and dissemination to others, to the end that an individual known as a patient may benefit..."⁽¹⁾

Included within pharmacy's societal purpose is a responsibility to create and disseminate knowledge related to drug entities, products, therapy, and use—a *research mission*. Integral to the concept of pharmacy as an evidence-based practice is that the research enterprise produces the "evidence" on which practice is based.

The American College of Clinical Pharmacy has long valued its commitment to extending the frontiers of clinical pharmacy practice and research. It is logical that any attempt to articulate ACCP's research mission be done within the broader context of the research mission of the profession of pharmacy.

ACCP believes that the Research Mission of the Profession of Pharmacy is to advance human health and quality of life through the generation, dissemination, and application of new knowledge about drug discovery and use. This is accomplished by:

- developing individuals and programs to conduct research;
- funding and conducting basic, translational, clinical, health services, and educational research;
- communicating research results to the health professions, policy makers, and consumers;
- translating research results into practical applications; and
- advocating policies that advance research.

The Research Mission of the American College of Clinical Pharmacy is to advance human health and quality of life by facilitating the generation, dissemination, and application of new knowledge that promotes the safe, effective, and

- cost-effective use of medications. This is accomplished by:
- supporting the training and development of clinical scientists;
 - funding translational, clinical, and health services research;
 - communicating research results to the health professions, policy makers, and consumers;
 - providing educational programs and publications that help health care practitioners translate research results into enhanced patient care; and
 - advocating policies that support translational, clinical, and health services research.

Definitions

Basic Research: advances fundamental scientific knowledge. Although basic research may be in fields with current or future commercial interest, it does not have specific immediate applications toward processes or products in mind.

Clinical Research: research conducted in humans (or with human tissues) to study the mechanisms, epidemiology, or prevention of disease; test therapeutic interventions; or develop new technologies.

Educational Research: assesses the role of content, delivery methods, evaluation techniques, and management on the outcomes of teaching and learning.

Health-Services Research: examines the use, costs, quality, accessibility, delivery, organization, financing, and outcomes of health care services (including pharmacy services).

Translational Research: transfer of knowledge gained from basic research to new and improved methods of preventing, diagnosing, and treating disease, as well as the transfer of clinical insights into hypotheses that can be tested and validated in the basic research laboratory.

⁽¹⁾Pharmacists for the Future. The Report of The Study Commission on Pharmacy. American Association of Colleges of Pharmacy, Alexandria VA. 1975, p 13.

NIH Initiates Loan Repayment Programs

Starting Thursday, September 1, 2005, the National Institutes of Health (NIH) began accepting applications for its five Loan Repayment Programs (LRPs). The five LRPs offered by the NIH include the Clinical Research LRP, Clinical Research LRP for Individuals from Disadvantaged Backgrounds, Contraception and Infertility Research LRP, Health Disparities LRP, and Pediatric Research LRP.

Through these programs, the NIH offers to repay up to \$35,000 annually of the qualified educational debt of health professionals pursuing careers in biomedical and behavioral research. The programs also provide coverage for federal and state tax liabilities.

To qualify, applicants must possess a doctoral-level degree, devote 50% or more of their time (20 hours per week based on a 40-hour work week) to research funded by a domestic nonprofit organization or government entity (federal, state, or local), and have educational loan debt equal to or exceeding 20% of their institutional base salary. Applicants must also be U.S. citizens, permanent residents, or U.S. nationals to be eligible.

All applications for 2006 awards must be submitted online by 8:00 p.m. EST, December 1, 2005. For an online application, program information, or other assistance, visit the LRP Web site at www.lrp.nih.gov, telephone the Helpline at (866) 849-4047, or send e-mail inquiries to lrp@nih.gov.

Awards, Promotions, Grants, etc.

Candice L. Garwood, Pharm.D., BCPS, and **Susan LeRoque Davis**, Pharm.D., have been appointed Assistant Professors of Pharmacy Practice at Wayne State's Eugene Applebaum College of Pharmacy in Detroit, MI. . . **Julie Johnson**, Pharm.D., FCCP, BCPS, Director of the University of Florida Center for Pharmacogenomics, will serve as principal investigator for a recently awarded \$11.1 million grant from the National Institutes of Health to study the pharmacogenomics of antihypertensive therapy response. University of Florida faculty serving as coinvestigators include **John Gums**, Pharm.D. and **Issam Zineh**, Pharm.D. . . **Michael Rybak**, Pharm.D., FCCP, BCPS, Professor of Pharmacy and Medicine, and Associate Dean of Research in the Eugene Applebaum College of Pharmacy and Health Sciences at Wayne State University, has been named to the Expert Panel for the Antimicrobial Resistance Prevention Initiative, sponsored by the American Society of Microbiology and the Society of Health Care Epidemiology of America. . . **Sarah Spinler**, Pharm.D., FCCP, was recently promoted to Professor of Clinical Pharmacy at University of the Sciences in Philadelphia.

New Members

Lisa Allen
Michael A. Amorteguy
Tracie Balvanz
J. Nile Barnes
Albert Bermea
Julianna L. Burton
Matthew A. Cantrell
Agnes Chou
David L. Cornette
Alan Cullen
Jennifer R. Dauer
Noelle E. Daugherty
Mary L. Davenport
Paola DiRezze
Jason Dobbs
Xu Duan
Hong K. Duong
Sarah R. Erlanger
Cheryl Foley
Alan B. Ginsberg
Dennis W. Grauer
Gregory Grun
Elizabeth Hillebert
Humberto Jimenez
Jared Johnson
Tami N. Johnson
Katherine Kalns
Elizabeth A. Katondo
Michael Keating
Ardis Kliber
Molly Kurpius
Timothy G. Langford
Susan Lee
Maureen Lewis
Michelle Lewis
Jin Lian Liang
Dalia R. Mack
Kimberly Mahoney
Darius Mason
Laura E. Moore
Elisabeth Mouw
Kendrea Muldrew
Joan Muriceak
Sindhu Nair
Darshan Parekh
Melissa Pleva
Mary E. Quam
Kristine Rapan
Rafia S. Rasu
Heather Rickertsen
David B Romerill
Parya Saberi

Surabhi Sandhuja
Lisa A. Saubermann
Stacy Snyder
Shannon E. Songy
Victoria Stewart
T'racea D. Terrell
Katherine A. Tipton
Mimosa Tran
Justin B. Userly
Joe Vande Griend
Ghazal Vessal
Urvi Vora
Long D. Vu
Beatrice Wong
Steve Woods

The following individuals recently advanced from Associate to Full Member:

Prasad Abraham
Theodore Darkow
Jeffrey J. Ellis
Jane Kimble Jenkins
Michael L. Lim
Harita Patel
Kelli Sorrells

New Member Recruiters

Many thanks to the following individuals for recruiting colleagues to join them as ACCP members:

Jannet M. Carmichael
Corinne Chahine
Christopher Finch
Fang Lin
Sunny A. Linnebur
Patricia A. Marken
Michael Palkimas
Holly S. Rickman
Brian C. Sedam



Courtesy of the San Francisco Convention & Visitors Bureau

Be sure to check out details on the ACCP 2005 Annual Meeting at <http://www.accp.com/05ampre.php>. This year's meeting will be in San Francisco, California. See this issue for details, too.

The ACCP Leadership Experience

February 27 - March 2, 2006

San Antonio, TX

Plan now to participate in the 11th ACCP Leadership Experience. This is an intense, 3½-day course that uses both didactic and experiential learning methods. Participants are provided the opportunity to integrate a comprehensive, systematic management and leadership model into their daily personal and professional work.

- Recognize the difference between management and leadership and how they should be applied.
- Develop an understanding of the economic environment in which health care operates and the necessary focus of management in that environment.
- Apply the initial elements of strategic planning to a real world situation.
- Understand the concept of mind-sets in a professional capacity.
- Discuss the different mind-sets required for pharmacy and leadership.
- Develop a plan for improving your professional leadership and management skills.
- Identify and correct dysfunctional group dynamics.
- Identify and remove barriers that prevent people from focusing on the work.

Look at what some past ACCP participants have said about The Leadership Experience:

- *“This experience provides a different perspective ... from what I have been taught before. This has been a wonderful experience.”*
- *“This is by far the most valuable experience of my career.”*
- *“I really feel that I will be much more effective than I was before.”*
- *“The combination of the simulation with the clear concise discussions of the issues being experienced ... made this session a once-in-a-lifetime experience.”*
- *“This has also made me think critically about the management issues and methods that occur within institutions.”*

Session enrollment is limited to 24 participants. For more information, visit <http://www.leaderpoint.biz/accp.htm>.

Drug Information Clinical Pharmacy Specialist

Kaiser Permanente is one of the nation's largest privately sponsored health care delivery systems. The Colorado region has an exciting opportunity for a pharmacy clinician in drug information. The successful candidate will participate in the planning and implementation of region-wide programs to optimize drug therapy outcomes in this progressive managed care setting. Opportunities are available for educating pharmacy students/residents. Research participation is encouraged.

The pharmacy department in the Colorado Region of Kaiser Permanente employs over 600 individuals with over 100 clinical pharmacy specialists and clinical pharmacists in clinical practice areas such as primary care, infectious diseases, mental health, anticoagulation, cardiac risk, nephrology, endocrinology, cardiology, asthma, palliative care, oncology, drug information, home care, pharmacy call center, and international travel.

Qualified applicants must possess a doctor of pharmacy degree with a residency in drug information. Eligibility for pharmacy licensure in Colorado is necessary.

Kaiser Permanente offers an excellent salary and benefits package. Support for continuing education, board certification, and professional memberships are included. Qualified applicants should send a letter of interest, curriculum vitae, and names of three individuals who may be contacted for reference to:

Caroline Kicklighter, Pharm.D., BCPS, CDE
Clinical Pharmacy Manager
Kaiser Permanente Colorado Region
16601 East Centretch Parkway
Aurora CO 80011
Telephone: (303) 739-3687
E-mail: caroline.e.kicklighters@kp.org

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<http://kaiserpermanentejobs.org>



Heart Transplant/Heart Failure Clinical Pharmacy Specialist Ochsner Clinic Foundation

The heart transplant/heart failure team at Ochsner is a multidisciplinary group made up of physicians, nurse coordinators, nurses, social workers, and a pharmacist. There are about 35 to 45 heart transplants performed annually at our institution. The heart failure unit runs a daily census of 18 to 25 patients, and the pharmacist plays a vital role in the drug management of these patients. Because of the transplant expertise of the team members, the pharmacist often provides information in nontransplant areas, such as for infectious diseases and critical care.

Our clinical pharmacy specialists are an integral part of the medical team with the opportunity to develop an innovative clinical practice. This position involves teaching Pharm.D. students, medical residents, and pharmacy residents. Clinical pharmacy specialists also have the opportunity to perform clinical research in their chosen areas of expertise.

This position has no distributive functions. The work week is Monday through Friday, with no weekend or holiday duties required. Ochsner offers an excellent benefits package and competitive salaries. If you are interested in using your clinical pharmacy skills in a progressive teaching environment, please apply online at www.ochsner.org/employment, or contact Melissa Love at (504) 842-3603 or mlove@ochsner.org.

Applicants must have obtained the Pharm. D. degree, completed residency training, and hold a Louisiana pharmacy license (or be eligible for licensure). EEOE.





Abdominal Transplant Clinical Pharmacy Specialist

Ochsner Clinic Foundation

The abdominal transplant team at Ochsner is a multidisciplinary group made up of surgeons, hepatologists, nephrologists, nurse coordinators, nurses, social workers, and a pharmacist. The program performs about 80 to 90 liver transplants per year and between 60 and 70 kidney transplants annually. Ochsner has a pediatric liver transplant program with two pediatric gastroenterologists that specialize in pediatric liver transplantation. In 2004, we implemented a pediatric kidney transplant program with the addition of a pediatric nephrologist.

The pharmacist plays a vital role in the drug therapy management of these patients. Because of the transplant expertise of the team members, the pharmacist often provides information in nontransplant areas, such as cardiovascular therapy, infectious diseases, and critical care therapeutics.

Our clinical pharmacy specialists are an integral part of the medical team with the opportunity to develop an innovative clinical practice. This position involves teaching Pharm.D. students, medical residents, and pharmacy residents. Clinical pharmacy specialists have the opportunity to perform clinical research in their chosen area of expertise and also will be granted an appointment with the Xavier University of Louisiana College of Pharmacy.

This position has no distributive functions. The work week is Monday through Friday, with no weekend or holiday duties required. Ochsner offers an excellent benefits package and competitive salaries. If you are interested in using your clinical pharmacy skills in a progressive teaching environment, please apply online at www.ochsner.org/employment, or contact Melissa Love at (504) 842-3603 or mlove@ochsner.org.

Applicants must have obtained the Pharm. D. degree, completed residency training, and hold a Louisiana pharmacy license (or be eligible for licensure). EEOE.



Director of Pharmacy

Kansas City, Missouri

We have been retained by Truman Medical Center-Hospital Hill to recruit a new Director of Pharmacy. The hospital is licensed for 237 beds and has 2300 employees. It is part of Truman Medical Centers (TMC), a three-hospital health system, which serves as the primary teaching hospital for the University of Missouri-Kansas City School of Medicine. The system has won numerous awards including "Top 100 Hospitals" by Solucient for improved patient outcomes, "Most Wired Hospital" by Hospitals & Health Networks Magazine, and multiple awards by the University HealthSystem Consortium.

The new Director of Pharmacy reports to the Senior Director of Pharmacy Operations for the health system and is responsible for all planning and day to day operations of the Hospital Hill pharmacies as they move back under TMC management. This is an exciting time as TMC implements new and innovative pharmacy programs and as the health system develops its "Six Sigma Program."

The ideal candidate will have a Pharm.D with a graduate degree in management, business administration, or related field. Candidates should also have five years of director level experience in a clinical setting, ideally in a teaching hospital, experience with the 340B Drug Pricing Program, adjunct faculty experience, and interest serving in leadership positions with national healthcare organizations and associations.

Please send a resume in confidence to:

Peter Goodspeed
Peter Goodspeed Healthcare Recruiters, Inc.
202 West Louisiana, Suite 207
McKinney TX 75069
Telephone: 972-562-4800
Fax: 972-562-4808
Cellular Phone: 214-766-1032
E-mail: peter@petergoodspeed.com

All inquiries are confidential

Assistant/Associate/Full Professor

Department of Pharmacy Practice College of Pharmacy University of Nebraska Medical Center

The Department of Pharmacy Practice at the University of Nebraska Medical Center (UNMC) is currently recruiting for 12-month, tenure-leading faculty positions. Rank is open; individuals with prior academic experience are particularly encouraged to apply. A variety of specialty areas will be considered.

Candidates for each position must possess a Pharm.D. degree, fellowship training or equivalent experience, and be eligible for pharmacy licensure in Nebraska. Responsibilities include teaching Pharm.D. students in both didactic and clerkship courses, and providing clinical pharmacy services at the Nebraska Medical Center Hospital and Clinic. The successful candidate will be expected to participate in scholarly activities that result in publications and extramural research funding. Numerous interdisciplinary collaborative research opportunities exist with investigators throughout UNMC and its affiliated institutions. Laboratory space and start-up funds will be available.

Salary and rank will be commensurate with qualifications and experience. Applications will be accepted until the positions are filled. Minorities and women are encouraged to apply. Please submit an application online, with curriculum vitae and a list of three references, to: Jobs@unmc.edu. UNMC is an AA/EEO employer.

Staff/Clinical Pharmacist

Clinical Pharmacy Utilization Specialist Munson Medical Center Traverse City, Michigan

Munson Medical Center, a regional referral center repeatedly named one of the Top 100 Hospitals in the country, is seeking a full-time **Staff/Clinical Pharmacist** and **Clinical Pharmacy Utilization Specialist**.

The Clinical Pharmacy Utilization Specialist is responsible for formulary management and drug use policy in collaboration with the Pharmacy and Therapeutics Committee. This is an opportunity for a clinical practitioner with interest in pharmacoeconomics to promote cost-effective, "best practice" drug use and clinical pharmacy initiatives.

Staff/Clinical Pharmacists are very clinically oriented and share clinical rotations. No distribution component is involved during clinical rotations. The position includes opportunities to be involved in assisting the institution's teaching program, which includes early and advanced practice training, and a residency program.

We offer excellent compensation and benefits, plus relocation assistance. For more information, visit www.munsonhealthcare.org, or contact Gina Ranger, Clinical Recruiter, at (800) 713-3206.

Full-Time Pharmacists and Night Shift Pharmacist Critical Care Service Line Pharmacists Cardiology Service Line Pharmacists Pediatric/NICU Pharmacist

Mission Hospitals Asheville, North Carolina

Our clinical/distributive pharmacists work rotations of four weeks in a primary service line (8:00 a.m. - 4:30 p.m.), one week in our core pharmacy (2:30 p.m. - 11:00 p.m.), every fourth weekend, and one holiday per year (rotating). Pharmacists provide night shift vacation coverage (rotating) and are paid an evening shift differential. They also serve as preceptors for pharmacy practice residents and pharmacy students from the University of North Carolina at Chapel Hill. Personal Digital Assistants are utilized for clinical intervention documentation/drug information resources. In addition, weekly clinical meetings are provided with opportunities to obtain North Carolina CE credit.

Night Shift Position Description:

Night shift pharmacists work seven consecutive 10-hour shifts (9:30 p.m. - 8:00 a.m.). Two pharmacists provide coverage for the 800-bed hospital between 11:00 p.m. and 7:30 a.m.). A shift differential, plus a bonus, is provided.

Description of organization: Mission Hospitals, an 800-bed tertiary care center for Western North Carolina, has a progressive pharmacy staff that includes over 40 Pharmacists, including 8 Board Certified Pharmacotherapy Specialists, who work in patient care teams to provide a variety of clinical services. The hospital is affiliated with the Mountain Area Health Education Center, is a primary teaching site for the UNC School of Pharmacy (>70 student months/year), and supports family practice and obstetrics medical residency programs (46 residents). ASHP-accredited residencies are offered in pharmacy practice and primary care. The institution is located in Asheville near the Blue Ridge Parkway, Smoky Mountains National Park, and the Biltmore Estate. The city is plentiful in arts, music, and culture.

To apply, please visit our website at www.missionhospitals.org or contact:

Kelli Kirkpatrick, Pharm.D.
Clinical Manager
Telephone: (828) 213-4213
E-mail: cphklo@msj.org



Clinical Scientist

**Cognigen Corporation
Buffalo, New York**

This is a challenging research position for a clinical scientist with an interest in a variety of therapeutic areas, pharmacokinetics, and modeling disease. The candidate selected will collaborate with project teams by providing 1) clinical direction and interpretation from early development to commercialization for specific compounds and/or disease states, 2) performing literature and product reviews, 3) writing reports and manuscripts, and 4) preparing and presenting study findings at local and national meetings.

Qualifications:

- Pharm.D., Ph.D., or an M.S. with at least 3 years of experience required
- Experience in compartmental pharmacokinetic analysis required
- Familiarity with NONMEM a plus
- Excellent verbal and written communication skills
- Ability to thrive in a team environment

Benefits:

Cognigen offers excellent salaries, a comprehensive benefits package, advancement opportunities based on demonstrable success as a leader and collaborator, and the opportunity to make significant contributions to the pharmaceutical and biotechnology industries.

For more information, including how to apply for this position, visit our Web site at
<http://cognigen.com>.

Clinical Pharmacists

Children's Medical Center Dallas

Children's Medical Center Dallas is the Southwest's leading health care facility specializing in diseases and disorders in children from birth to age 18. A private, not-for-profit hospital, Children's is licensed for 406 beds. It is the only pediatric hospital in Texas and one of only 14 in the nation to be designated a Level 1 Trauma Center.

A comprehensive benefits package is available. We are seeking three clinical pharmacists in the following areas:

Emergency Room

- Responsible for providing clinical pharmacy services in a pediatric emergency room including trauma and code response, medication history documentation, medication teaching for patients and families, and review of appropriateness of medications. Previous pediatric hospital experience preferred. Pediatric Advanced Life Support (PALS) training and Texas licensure required. Hours: 9:00 p.m. - 7:00 a.m.; 7 consecutive days on duty followed by 7 days off.

Psychiatry

- Responsible for providing clinical pharmacy services for both inpatients and outpatients. Requires experience with pediatric or adult psychotropic medications and advanced training in psychiatric pharmacy. Candidates with advanced training will be eligible for a Senior Clinical Pharmacist position. Previous experience and Texas licensure required.

Central Pharmacy

- Responsible for filling prescribed medications and other pharmacy services as appropriate; monitoring and supervising technicians; maintaining drug inventory and supplies; and ensuring security of narcotics. Previous hospital experience preferred and Texas licensure required. Hours: night position involving 7 consecutive days on duty followed by 7 days off.

To apply for this position or to learn more about career opportunities at Children's Dallas, visit www.childrens.com, or contact:

Phyllis Levy-Mitchell
1935 Motor St.
Dallas TX 75235
Telephone: (214) 456-8933
E-mail: Phyllis.mitchell@childrens.com

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