Department of Pharmacy Practice

College of Health Professions and Biomedical Sciences

Strategic Plan: 2010-2015

Developed by:
Pharmacy Practice Department
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Prepared by:
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DEPARTMENT OF PHARMACY PRACTICE 2006-09 Strategic Plan

The Department of Pharmacy Practice strives to educate and train entry-level pharmacists to provide optimal pharmaceutical care and promote public health to the people of Montana and the nation, and to enhance the skills of pharmacy practitioners by providing educational opportunities. The department offers a dynamic and contemporary curriculum based on the pharmaceutical and biomedical sciences, to prepare students and practitioners to apply pharmacotherapy knowledge to patient care and practice situations. Students and practitioners are taught specific drug therapy knowledge and skills including critical thinking, problem solving, communication techniques, and organizational planning to promote medication management in collaboration with other healthcare practitioners.

The department engages in scholarly activity including clinical, administrative, and educational research, design and implementation of innovative clinical services, and presentation and publication of projects. The department provides service to the School and the University, to the profession and to the community. Clinical faculty serve the community by providing patient-based pharmacy services in healthcare settings, while acting as role models for students and practitioners and using the practice sites for teaching and research.

MISSION STATEMENT

The mission of the Department of Pharmacy Practice is to prepare graduates to enter the profession of pharmacy with the knowledge, skills, and systems management competencies required to provide optimal patient-centered and population-based care. The Department fosters self-directed learning, professionalism, cultural competency, interprofessional collaboration, and pharmacy leadership and advocacy.

NOTEWORTHY DEPARTMENTAL GOALS: 2010-15

- Enhance student evaluation and assessment methods in the professional program including collecting information, sharing the results, and demonstrating how the information was used to improve the program.
- 2. Work towards improved utilization of outcomes measures to modify and improve the curriculum.
- Conduct ongoing review of IPPE and APPE site activities to assure that they reflect changes in professional practice and meet the accreditation standards with regard to expected competencies.

- 4. Link course content and instructional methods to the program's outcomes for graduating students.
- 5. Continue to develop the computerized experiential program management system.
- 6. Focus on the continued development of quality community pharmacy APPE sites characterized by enhanced patient care activities and develop quality assurance to evaluate sites. Support efforts to develop community APPEs in rural sites.
- 7. Facilitate the development of additional general pharmacy residencies in Missoula and around the state. Promote the development of residencies in ambulatory care and community practice.
- 8. Continue increasing the number of faculty and department-affiliated personnel involved in scholarly activities including grant proposal preparation, research projects, publications, and presentations. Promote and assist in the scholarly development of residents.
- 9. Continue to provide drug information and continuing education services to health care practitioners in Montana.
- 10. Promote the role of pharmacy in public health activities especially those related to medication safety, access to services and pharmaceuticals, disease prevention, health promotion, and emergency preparedness.
- 11. Prepare students to provide quality pharmaceutical services in any setting including rural and frontier practice sites.
- 12. Work closely with pharmacy practitioners and organizations in Montana to advance the provision of, and reimbursement for cognitive pharmacy services.
- 13. Provide contemporary pharmacy care to patients and serve as role models for students in patient care settings.
- 14. Acknowledge that faculty salaries are low compared to regional and national averages and, in consideration of that fact, seize opportunities to enhance faculty salaries.
- 15. Acknowledge and prepare for the retirement of key departmental faculty to ensure an orderly and organized transition of important department activities.

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Curriculum

Lisa Wrobel , Co-Chair Bill Docktor, Co-Chair Rose Macklin Kendra Procacci Gayle Hudgins, ex-officio

GOAL: Maintain a curriculum that is current, evolving, and responsive to changing educational and training needs, and efficiently achieves program outcomes.

OBJECTIVES:

- 1. Utilize outcome measures to improve the curriculum, by obtaining measures on an annual basis, including:
 - students' performance data on Board exams from the Assistant Dean for Student Affairs
 - exit interviews of our students from the Experiential Coordinator
 - preceptors and clinical Instructors
 - self-assessment from our graduates of their abilities
 - end of semester reviews
 - faculty

Plan: Create a mechanism for annual survey of graduates

Plan: Annually survey the faculty for ideas on curricular improvements

Plan: Evaluate all outcome data to assess the effectiveness of the curriculum

Primary responsibility: CHPBS Assessment Committee, Director of Experiential Program, Curriculum Committee

2. Explore an online system for student evaluation of instructors and course.

Plan: Demonstrate/teach the system to the departmental faculty

Plan: Require Departmental faculty to use online evaluations starting Fall 2010

Primary responsibility: Department Chairperson, Department faculty

3. Review and revise pharmacy practice courses into a coordinated, logically progressing, and efficient system to build students' professional abilities

Plan: Include Pharm. D. program outcomes on each syllabus and the curricular map **Plan:** Review, and revise as needed, courses and content to meet needs of curriculum and

recommend these changes to the curriculum committee

Primary responsibility: Department faculty coordinating courses, curriculum committee

4. Promote a professional culture throughout the pharmacy program (Administration, faculty, staff, students, clinical instructors, preceptors)

Plan: Enhance professionalism in all courses and experiential sites by providing faculty and preceptors with additional training.

Plan: Encourage faculty and preceptors to utilize professionalism policy when appropriate **Plan:** Create a small committee to develop standardized expectations for students in the classroom and experiential settings to be included in all syllabi

Primary Responsibility: All individuals associated with the pharmacy program, Department Chair

5. Enhance interprofessional interaction in classroom, informally, and clinical experiences.

Plan: Create additional opportunities to incorporate other disciplines into classes with pharmacy students or pharmacy student into their courses

Plan: Add an objective to APPE to encourage interaction among all students of all disciplines in each experiential site

Plan: Encourage faculty involvement in any interdisciplinary activities available

Primary Responsibility: All faculty, clinical instructors, and preceptors, Experiential Coordinator

6. Promote active learning strategies and criteria referenced, evidence based assessment

Plan: Provide a seminars/retreats to enhance faculty abilities in these areas

Plan: Require faculty to use teaching, learning, assessment techniques needed to accomplish the goals of the curriculum

Plan: Add learning and assessment strategies used in each course to the curricular map

Primary Responsibility: All faculty, course coordinators, curriculum committee

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Experiential Program and Preceptor Development

Gayle Hudgins, Chair Donna Beall Sherrill Brown Katy Hale

GOAL: Revise and expand the Skaggs School of Pharmacy Experiential Program to meet the needs of students and preceptors and to maintain compliance with the ACPE standards and guidelines.

OBJECTIVES:

- 1. Evaluate and revise the Introductory Pharmacy Practice Experiences (IPPE) which need to make up 300 hours of the professional curriculum. These include:
 - Community Pharmacy IPPE 120 hours 3 credits
 - Hospital Pharmacy IPPE 120 hours 3 credits
 - Additional IPPE activities: Senior Partner interviews, Public Health Service Learning Projects – up to 60 hours – approximately 1 credit

Plan: Continue to evaluate and revise the goals and objectives of each experience, the activities, the evaluation instruments, and to educate preceptors.

Plan: Since the mini-IPPE experiences were recently eliminated from Phar 309 Pharmacy Practice I and up to 20% of the IPPE requirement can now be met through simulation, identify which simulation activities in the current curriculum can be counted towards the IPPE requirement.

Primary responsibility: Director of Experiential Education, Community Pharmacy Coordinator, Skills Lab Coordinator

2. Evaluate various aspects of the Advanced Pharmacy Practice Experiences to ensure that the ACPE standards and guidelines are being met.

Plan: Periodically review the structure of the APPE program and the length of the rotation used.

Plan: Monitor the utilization of APPE sites on an annual basis.

Plan: Review and update the various APPE guidelines and evaluations forms annually.

Primary responsibility: Director of Experiential Education, Community Pharmacy Coordinator, Pharmacy Practice faculty

3. Provide and document Preceptor Orientation/Training Program to meet the ACPE standards and guidelines.

Plan: Continue to provide and promote various opportunities for preceptors to complete preceptor orientation and training, primarily through web-based programs.

Plan: Track preceptor's completion of this requirement in E*Value.

Primary responsibility: Director of Experiential Education

4. Provide opportunities for preceptor development in conjunction with the continuing education activities of the Skaggs School of Pharmacy, the Montana Pharmacy Association and other health care organizations.

Plan: Evaluate needs of Montana preceptors, determine best methods to deliver preceptor development in Montana, work with Montana continuing education providers to meet these needs.

Primary responsibility: Director of Experiential Education and Continuing Education Coordinator

5. Encourage preceptors to pursue recognition through the clinical tract for adjunct faculty. **Plan:** Promote the clinical track advancement process and encourage preceptors to pursue promotion.

Primary responsibility: Director of Experiential Education and Department Chairperson

6. Identify clinical sites with appropriate pharmacy services to support additional APPE opportunities for our students needed to meet the ACPE standards and guidelines.

Plan: Identify new clinical sites for both required and elective APPE's.

Plan: Continue to work with facilities and practice groups to identify appropriate locations for ambulatory care APPE's.

Plan: Continue to work with all existing sites to expand the number of students that can be accommodated.

Primary Responsibility: Director of Experiential Education, Department Chairperson

7. Implement a computerized experiential program management system.

Plan: Continue the implementation of E*Value, the electronic experiential program management system that was selected.

Plan: Evaluate the accuracy of the weighting schemes being used in various evaluations in E*Value.

Plan: Assess the interest and need for expansion of E*Value to the rest of the pharmacy program, including the IPPE's, student portfolio, assessment and curriculum mapping capabilities.

Primary responsibility: Director of Experiential Education, Experiential Education Administrative Coordinator, Assessment and Curriculum Committees

8. Participate in student exchanges with pharmacy schools and other programs in other countries in order to increase experiential opportunities, enrich students' experiences and promote diversity **Plan:** Continue to promote existing student exchange program with the University of Rennes' pharmacy program.

Plan: Investigate other opportunities for student exchange with foreign pharmacy programs, as well as opportunities to participate in programs involving foreign travel and experiences.

Plan: Refine the Medicinal Plants APPE which involves a rain forest excursion. **Primary responsibility:** Director of Experiential Education, Department faculty

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Community Practice

Katherine Hale, Chair Lori Morin Gayle Hudgins Tanner Higgenbotham Kendra Procacci, ex-officio

GOAL: Maximize use of existing community pharmacy practice sites throughout the state and develop new sites to support required IPPEs/APPEs and elective APPEs in compliance with ACPE Accreditation Standards. Emphasize community pharmacy practice by using community practice patient situations and practice in both didactic and experiential courses.

OBJECTIVES:

1. Develop and maintain community practice sites throughout the state for required and elective 4-week Community Practice APPEs.

Plan: Network and/or collaborate with community practice pharmacists and other healthcare providers throughout Montana in the ongoing development and maintenance of Community Practice APPEs.

Primary Responsibility: Experiential Education Director and Community APPE Coordinator

2. Maximize use of existing community pharmacy practice sites throughout the sites for both required and elective APPEs.

Plan: Experiential Education Director and Community APPE Coordinator will place students in community APPE sites throughout the state and generate an annual spreadsheet showing numbers of students placed in each Community APPE site for review in order to maintain the optimal number of sites and students needed per location.

Primary Responsibility: Experiential Education Director and Community APPE Coordinator

3. Attempt to establish community APPE sites in rural locations in Montana for required and elective community APPEs, which meet the ACPE standards for experiential education.

Plan: Identify potential Community APPE sites and preceptors in rural locations throughout Montana (e.g. Fort Benton, Forsyth).

Plan: Work with AHEC to identify and maintain housing options for students participating in rural community APPEs.

Plan: Establish a minimum number of students to place at these sites on an annual basis and market these sites to incoming APPE students.

Primary Responsibility: Community APPE Coordinator

4. Identify a set of core competencies and skill set related to community practice that students should have as they transition from year to year, but most importantly as they transition from the didactic to experiential curriculum.

Plan: Determine what competencies and skills students are currently being taught related to community practice and at what point in the curriculum.

Plan: Network with community preceptors for IPPEs and APPEs to determine what competencies and skills are necessary in community practice to help guide development.

Plan: Review the ACPE standards to determine required community practice competencies and skills and identify where in the curriculum these standards are met and where improvement might be needed.

Primary Responsibility: Community APPE Coordinator, Curriculum Committee, Experiential Education Director

5. Evaluate the objective, core competencies, and activity guidelines for the Community Practice IPPEs.

Plan: Evaluate activities in consideration of ACPE accreditation guidelines **Primary Responsibility**: Experiential Education Director and Community APPE Coordinator,

Curriculum Committee

6. Assure the quality of the experience in elective Community Practice APPE sites.

Plan: Develop competencies for each elective community APPE (e.g. compounding, management).

Plan: Develop quality assurance procedures for elective Community Practice APPE sites to facilitate achievement of stated competencies, provide for feedback, ad support standardization among sites and preceptors.

Primary Responsibility: Experiential Education Director and Community APPE Coordinator.

Establish a Community Practice Residency site in Montana.
 Plan: Investigate the feasibility of establishing a community practice residency.
 Primary responsibility: Community APPE Coordinator, Community Practice preceptors,
 Department Chairperson, UM Residency Program Director

8. Facilitate community practice development by assisting pharmacists in the development, implementation, maintenance, and assessment of patient care services in the community pharmacy practice setting by fostering partnerships among community pharmacists, various healthcare providers, and faculty.

Plan: Investigate the feasibility of establishing a community pharmacy *P*ractice *B*ased *R*esearch *N*etwork (PBRN).

Plan: Offer continuing education and information on community practice related issues, policy, and research.

Plan: Provide consultations on the development, implementation, maintenance, and assessment of patient care services (e.g. Medication Therapy Management, Diabetes Self-Management Education programs) to community pharmacists throughout the state.

Primary Responsibility: Community APPE Coordinator, Pharmacy practice faculty

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-15

AREA: Ambulatory Care

Kendra Procacci, Chair Donna Beall Rose Macklin Vince Colucci Katy Hale, ex-officio

GOAL: Maximize utilization of existing ambulatory care practice sites throughout the state and develop new sites to support required and elective APPEs in compliance with ACPE Accreditation Standards. Continue to emphasize ambulatory care by utilizing ambulatory care patient situations and practice in both didactic and experiential courses.

OBJECTIVES:

1. Maximize utilization of existing ambulatory care practice sites throughout the state for both required and elective APPEs.

Plan: Experiential Education Director will place students in ambulatory care sites throughout the state and generate a annual spreadsheet showing numbers of students placed in the each ambulatory care site for departmental review.

Primary responsibility: Experiential Education Director

2. Attempt to establish Ambulatory Care APPE sites in all major cities in Montana (Billings, Bozeman, Butte, Great Falls, Helena, Kalispell and Missoula).

Plan: Identify potential APPE sites in health care organizations and/or clinics in Great Falls and Kalispell.

Plan: Add one new health care organization or clinic site in the next two years.

Primary responsibility: Experiential Education Director

3. Implement the new APPE evaluations for the student, site and preceptor that are available through E-value online. Weight each section on the Student Performance Evaluation to determine the final grade as requested by the ambulatory care preceptors.
Plan: Implement the online E-value system starting with Summer 2010 APPEs and weight each section for grading as requested. Students and preceptors were oriented to using the system. Problems with the new system are being addressed as they surface. Re-evaluate assessment tools and the assessment process on a yearly basis at the annual clinical instructor's meeting.
Primary responsibility: Ambulatory Care APPE Instructors and the Experiential Education Director

4. Establish an Ambulatory Care Pharmacy Residency site in Montana.

Plan: Investigate the feasibility of establishing ambulatory care and/or community pharmacy residency.

Primary responsibility: Department Chairperson, UM Residency Program Director, and Ambulatory Care instructors.

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Scholarly Activity

Doug Allington, Chair Jean Carter Katy Hale Larry Dent

GOAL: Increase faculty scholarly activity through increased grant activity, research projects, publications, presentations and other work that demonstrate regional, national or international recognition of expertise. Further clarify expectations of scholarship contributions for faculty in tenure-track, clinical adjunct, and instructor designated career tracks. Enhance scholarship opportunities of new faculty members.

A "scholarly activity" is an activity that contains the following characteristics.

- 1. Well-planned (i.e., goals and objectives [purpose] are clearly stated).
- 2. Well-documented by collecting data from legitimate sources.
- 3. Subjected to analysis and interpretation by peers.
- 4. Disseminated beyond the department with greater scholarship recognition given to activities that undergo competitive, peer review processes and subsequent recognition.

OBJECTIVES:

1. Increase grant activity over the next five years:

Plan: Increase the number of grant proposals submitted by department faculty for extramural funding by 10%.

Plan: Have 50% of department faculty submit proposals for extramural funding (i.e., principal investigator or co-investigator).

Plan: Increase the number of proposals which are successfully funded by 10%

Plan: Increase the amount of extramural dollars obtained by the department by 10%.

Primary responsibility: All department faculty

Plan: Identify new sources for research and development funding.

Plan: Obtain and maintain grant-funding information in a database that is housed in the department office.

 All department faculty forward grant proposals to department administrative assistant on annual basis by Oct 15th (FEC department deadline). This information posted to server in designated folder.

Primary responsibility: All department faculty, Department Chairperson

2. Increase number of research projects over next 5 years.

Plan: Have 75% of department faculty participating in at least one research project.

Plan: Increase the number of research projects conducted by faculty in the department by 10% over the 2006-2009 yearly average.

Plan: Engage 25% of department faculty in interdisciplinary research with other departments, schools, or organizations.

Plan: Obtain and maintain a research project database that is housed in the department office.

 All department faculty forward research projects to department administrative assistant on annual basis by Oct 15th (FEC department deadline). This information posted to server in designated folder.

Primary responsibility: All department faculty

3. Increase number of presentations

Plan: Have 50% of department faculty present scholarly work such as research or innovative applications in clinical programs to audiences outside the department on an annual basis.

Plan: Have 50% of department faculty present to audiences at the state-level or above each year over the reporting period.

Plan: Encourage department faculty to submit presentation abstracts at national meetings.

Primary responsibility: All department faculty

4. Increase number of publications.

Plan: Prepare and submit four manuscripts/books/book chapters from the department to peer-reviewed, nationally circulated journals/publications over the next 5 years.

Plan: Have seven department faculty prepare and submit manuscripts to peer-reviewed journals or other peer-reviewed publications on an annual basis.

Primary responsibility: All department faculty.

5. Enhance scholarship through professional development

Plan: Pair new or junior faculty with established and productive senior faculty to enhance opportunities for scholarly activities.

Plan: Encourage sabbaticals and other professional development activities to increase research expertise.

Primary responsibility: Department Chair

6. Incentive based rewards for significant scholarship activities

Plan: Provide release time from teaching for faculty with significant grant obligations.

Plan: Provide research contract or other salary enhancements for members with significant grants.

Primary responsibility: Department Chair

7. Achieve National and International recognition for faculty.

Plan: Nominate faculty for recognition of their expertise (e.g., fellow status, awards, significant honors)

Plan: Encourage faculty members to obtain board certification or additional professional credentials.

Plan: Present scholarly work to international audiences

Primary responsibilities: All department faculty.

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Service: Drug Information and Continuing Education

Sherrill Brown, Chair Lisa Barnes Tanner Higginbotham Doug Allington

GOAL #1: Provide drug information services to licensed health care professionals.

OBJECTIVES:

1. Serve health care professionals by providing drug information services.

Plan: Ensure the Drug Information Service (DIS) is staffed with students year round.

Plan: Monitor quality of responses.

Primary responsibility: Director of Drug Information Services, Director of Experiential Education,

DIS staff

2. Explore innovative approaches to increase call volume and promote and expand drug information services to health care professionals throughout Montana.

Plan: Pursue funding for advertising the Drug Information Service.

Plan: Increase call volume by 10%.

Primary responsibility: Director of Drug Information Services, DIS staff

3. Maintain the DIS web page to promote drug information services to health care professionals.

Plan: Update web page at least quarterly.

Plan: Place a counter on the web page to track number of views.

Primary responsibility: Director of Drug Information Services, DIS staff

4. Prepare and publish a monthly newsletter as an educational and promotional tool for the DIS.

Plan: Periodically evaluate the newsletter and make changes as needed.

Plan: Track number of views for online newsletter.

Primary responsibility: Director of Drug Information Services, DIS staff

5. Maintain and improve the holdings of the Drug Information Service.

Plan: Update book holdings at least annually.

Plan: Review current journal subscriptions and evaluate need for subscriptions based on access through the Mansfield Library.

Plan: Update holdings list at least twice a year.

Plan: Investigate Table of Contents service to streamline journal access. **Plan:** Investigate the feasibility of electronic access to reference books. **Primary responsibility:** Director of Drug Information Service, DIS staff

6. Work with the UM Mansfield Library to maintain and improve their holdings and resources including, but not limited to, on-line information, serials, and books to cover a wide array of pharmacy/medical topics.

Plan: Meet with Mansfield Library liaison annually to assess needs and budgetary requirements.

Plan: Solicit resource requests from Skaggs School of Pharmacy faculty.

Primary responsibility: Director of Drug Information Service

7. Evaluate the performance of the Drug Information Service through a quality assurance program.

Plan: Establish mechanism to automatically follow up on responses.

Plan: Continue to monitor quality of responses.

Primary responsibility: Director of Drug Information Service, DIS staff

8. Maintain the Drug Information Service database for documentation of drug information requests.

Plan: Make changes as necessary to better accommodate reporting needs.

Plan: Investigate possibility of in-house database maintenance and development.

Primary responsibility: Director of Drug Information Service

9. Provide annual reports of Drug Information Service activities to the Department Chair and Dean.

Plan: Continue documentation of DIS activities to the Department Chair and Dean.

Plan: Meet as needed with Department Chairperson to discuss DIS issues.

Primary responsibility: Director of Drug Information Service

GOAL #2: Enhance the drug information education and activities provided throughout the pharmacy curriculum, both in didactic and experiential settings.

OBJECTIVES:

1. Ensure all pharmacy students and residents attain a minimum competency level to evaluate the medical and drug information literature.

Plan: Evaluate the Drug Literature Evaluation course and update topics as necessary.

Plan: Set minimum competency requirements for pharmacy students and residents.

Primary responsibility: Director of Drug Information Service, DIS Staff

2. Continue to maximize the number of pharmacy students that take the drug information APPE.

Plan: Evaluate drug information activities in non-drug information practice experiences.

Plan: Evaluate the Distance DI APPE program and consider expansion.

Primary responsibility: Director of Drug Information Service, Director of Experiential Education, Department Chairperson

GOAL #3: Provide continuing professional education opportunities to licensed health care professionals in Montana.

OBJECTIVES:

1. Provide ACPE- and Montana Board of Pharmacy-approved group and individual continuing professional education (CPE) programs for Montana health care professionals, particularly pharmacists, pharmacy technicians, advanced practice nurses, and naturopathic physicians. Programs may include, but are not limited to, METNET programming at sites across the state, blended academic and ACPE programs, web-based courses, home study, and seminars.

Plan: Plan and administer at least six CPE programs each year.

Plan: Utilize faculty as CPE presenters.

Primary responsibility: Continuing Education Committee, ACPE Program Administrator, ACPE Program Assistant

2. Approve and cosponsor continuing education programs with a variety of professional organizations including, but not limited to, Montana Pharmacy Association and the Montana Diabetes Project.

Plan: Work with cosponsoring agencies to plan programs as requested by those agencies, if quality criteria can be met and there is evidence of need for the program

Plan: Work with cosponsoring agencies to assure that ACPE quality criteria are met in approved programs.

Primary responsibility: ACPE Program Administrator, ACPE Program Assistant

3. Offer practice-based learning certificates to licensed health care professionals and to senior pharmacy students which may be endorsed by Montana Board of Pharmacy and other agencies and organizations for purposes of practice credentialing.

Plan: Provide practice-based learning certificate programs as needs are identified.

Plan: Assure that ACPE quality criteria are met in approved programs.

Primary responsibility: ACPE Program Administrator, ACPE Program Assistant, Pharmacy Faculty for all ACPE approved CPE programming

4. Maintain ACPE accreditation as a continuing education provider by assuring the quality criteria for ACPE are consistently met.

Plan: Assure that ACPE quality criteria are met in approved CPE programs.

Plan: Provide documentation of CPE programs to the CE committee at least annually.

Primary responsibility: ACPE Program Administrator, ACPE Program Assistant, Department Chairperson, Dean

5. Involve faculty from all CHPBS departments in continuing education programming.

Plan: Continue to plan and provide CPE programs each year

Plan: Involve faculty as program coordinators and/or program presenters for programs in their area of expertise.

Primary responsibility: ACPE Program Administrator, all Pharmacy Faculty

6. Increase non-restricted grant funding in support of continuing education programs.

Plan: Seek grant support from industry and other sources.

Plan: Encourage the use of existing academic research grants, within the College and which have an educational component, to help support CPE programming within the constraints of the grant. **Primary responsibility:** ACPE Program Administrator and all Department faculty

7. Assure the availability of administrative support for ACPE programming on an ongoing basis and to assure ACPE quality criteria are met through consistent program coordination including, but not limited to: budgeting, file maintenance, program coordination, and quality response CPE customers' needs.

Plan: Effectively utilize a CPE administrative assistant.

Plan: Involve department and college administrative support staff, and/or student employees under the supervision of the CPE administrative assistant for administrative support as needed, subject to approval by the Department Chair

Primary responsibility: Dean, Department Chair, ACPE Program Administrator

8. Explore models for continuing professional development (CPD) as opportunities are presented. **Plan:** Offer assistance to Montana pharmacists interested in CPD to prepare for the integration of CPD principles into the CE re-licensure process for Montana pharmacists.

Primary responsibility: ACPE Program Administrator, CE Assistant, Continuing Education Committee, Pharmacy Faculty

9. Encourage and facilitate the use of active learning teaching strategies in CPE programs.

Plan: Provide guidance to CPE presenters on active learning techniques.

Plan: Assess the use of active learning in CPE programs

Primary responsibility: ACPE Program Administrator, CE committee, pharmacy faculty, guest

faculty and instructors for CPE programs

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Public Health

Jean Carter, Chair Larry Dent Bill Docktor Sarah Miller

GOAL: Develop pharmacy roles in population and environmental health and provide training and practice opportunities for pharmacists, students, and faculty to become more involved in public health initiatives. Use national and professional health promotion and disease prevention initiatives such as Healthy People 2020 to guide the development of programs.

OBJECTIVES

1. Promote student and pharmacist involvement in programs or practice sites associated with public health initiatives.

Plan: Inform students each year about pharmacy job opportunities with the Indian Health Services / Public Health service IHS/PHS.

Plan: Promote participation on county and state health boards or other health department groups and reach out to health departments and health officers to establish professional relationships.

Plan: Work with other organizations (e.g., professional associations, health insurance benefits managers, government agencies, health disciplines) to obtain reimbursement for pharmacy services to ensure those services can be offered as well as increase access to pharmacy services and pharmaceuticals in Montana

Plan: Work with local, state, and national groups to prepare for emergency or disaster response actitivities

Plan: Work with local, state, and national groups to advocate for public health policy that promotes health and reduces preventable disease

Plan: Facilitate the participation of students, residents, and student groups or organizations in public health activities and events.

Plan: Participate in research related to pharmacy and pharmacist roles in public health issues **Primary responsibility:** All department faculty

2. Provide population-based care tailored to fit needs of our community to ensure that evidenced-based treatments are used for all patients to help alleviate health care disparities, and culturally competent care is provided.

Plan: Educate students about the need to use evidence-based care for all patients

Plan: Provide students and pharmacists with tools to identify specific needs within subpopulations in a community and how to adjust care to suit those populations.

Plan: Educate students and faculty about how to provide culturally competent care when working with diverse populations

Primary responsibility: All department faculty

3. Contribute to efforts to screen at-risk populations for chronic diseases

Plan: Train students in screening techniques and population risk assessment while in school

Plan: Provide training opportunities for pharmacists in practice.

Plan: Provide screening services in communities across the state and encourage residents to follow up with their primary care providers

Plan: Seek extramural funding to support current screening program (IPHARM) and future expansion of services

Primary responsibility: All department faculty

4. Contribute to efforts to promote behaviors that improve health and prevent diseases associated with unhealthy lifestyle and risk behaviors.

Plan: Teach students to identify risky behaviors in themselves and others. Give them behavior change tools and counseling skills that they can use.

Plan: Promote healthy lifestyle choices and behaviors in students and faculty members through coursework, extracurricular activities, school events, and other school-related activities.

Primary responsibility: All department faculty

5. Continue efforts to improve safe medication use including safe disposal of unused medications

Plan: Educate students and practitioners how to participate in efforts to reduce medication errors; identify and remove counterfeit medications from the market as part of an overall effort to increase safety of the medication supply; apply quality assurance measures as their sites; identify populations at risk for pharmacy-related problems (e.g., lack of access to services or products, chronic diseases), and use information technology in their efforts to reduce medication errors and improve safety.

Plan: Participate in efforts to safely remove unused or unneeded medications from homes and dispose of them safely

Plan: Participate in quality initiatives through associations and government agencies

Plan: Participate in voluntary medication safety reporting programs

Plan: Continue student involvement in poison prevention programs

Primary responsibility: All department faculty

6. Protect the public from impaired or incompetent practitioners, including students and interns Plan: Increase student and faculty awareness of behaviors that can impact the ability of a pharmacist or intern to perform their professional duties in a responsible and competent manner Plan: Support programs designed to rehabilitate pharmacists or interns (e.g., Montana Impaired Pharmacist Program) **Plan:** Identify impaired students, faculty, and practitioners for referral to rehabilitation or counseling

Plan: Review current methods for identifying and remediating students who are not demonstrating competent or professional practice behavior.

Primary responsibility: All department faculty; adjunct clinical faculty

7. Contribute to efforts to reach immunization rate goals for the state.

Plan: Train all pharmacy students for the immunization certificate while in school.

Plan: Increase the number of certificate learning opportunities for pharmacists around the state.

Plan: Provide CE support for certified pharmacists to ensure they are able to continue immunizing

Plan: Increase the percent of practicing pharmacist who are immunization certified (Current level is ~20%)

Plan: Prepare a collaborative practice agreement template for travel immunization programs

Plan: Promote and facilitate immunization of children through educational activities **Plan:** Support efforts to educate the public about the benefits and risks of vaccination

Primary responsibility: All department faculty; ACPE Program Administrator

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Rural Health Care

Larry Dent, Chair Jean Carter Lori Morin Sherrill Brown

Goal: Develop programs, educational experiences, partnerships, and research projects that will enable pharmacists to enhance or increase the delivery of health care in rural and frontier areas.

OBJECTIVES:

1. Incorporate rural health topics in the didactic portion of the curriculum and rural health practice to experiential curriculum where appropriate.

Plan: Discuss the implications of barriers to health care access in rural and frontier areas **Plan:** Discuss the role of information technology and telehealth in serving rural populations

Plan: Discuss and identifyissues facing rural pharmacy practice

Plan: Seek opportunities in rural communities for experiental training

Primary responsibility: All Department faculty

2. Develop and maintain outreach programs that focus on the healthcare needs of rural Montanans.

Plan: Seek extramural funding to continue and expand projects such as IPHARM.

Plan: Continue to involve students and faculty from pharmacy and other healthcare disciplines in IPHARM outreach events

Plan: Seek opportunities to use technology to deliver care to rural communities (e.g., telepharmacy, telehomecare)

Plan: Seek opportunities to involve other projects (e.g., AHEC) and/or increase involvement of specific rural communities (e.g., tribal reservations).

Primary responsibility: All Department faculty and IPHARM pharmacist

3. To assist health care professionals in providing the best possible care services by offering continuing education and information on rural related issues, policy, and research.

Plan: Develop Continuing Professional Development (CPD) programming that is relevant to practitioners in rural practices

Plan: Deliver CPD to rural practitioners in a manner that increases accessibility (e.g., web-based or videoconferencing)

Plan: Review feasibility of the department providing CPD programming to practitioners around the state

Primary responsibility: ACPE Program Administrator

4. To develop and nurture collegiality and partnerships with and among professional associations and agencies to enhance or increase rural health care services.

Plan: Maintain active memberships in state and national pharmacy associations that include rural pharmacy issues in their programs

Plan: Maintain active memberships in state and national organizations that support rural health care

Plan: Seek and develop working relationships with agencies or organizations that serve rural areas

Primary responsibility: All Department faculty

5. To foster service partnerships, or mentoring relationships among health care providers and facilities to address rural health care issues and decrease professional isolationism.

Plan: Explore the need for greater involvement in dissemination of information on community pharmacies for sale and employment opportunities in rural hospitals and pharmacies.

Plan: Provide management and MTM consultations to rural community pharmacists

Primary responsibility: Pharmacy Practice Department Office

6. To address risks regarding loss of pharmacy services in small rural communities (population <5,000).

Plan: Develop tools through research to assess risk for loss of pharmacy services in rural communities.

Plan: Conduct survey studies to assess level of interest of pharmacy students to practice in rural communities.

Primary responsibility: Pharmacy Practice faculty

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Collaboration with Pharmacy Organizations

Vince Colucci, Chair Lori Morin Lisa Wrobel Lisa Barnes

GOAL: Collaborate with individual practitioners and pharmacy organizations, within Montana and nationally, to improve existing pharmacy services and to assist and promote the following objectives:

OBJECTIVES:

1. Participate with practitioners to provide cognitive services for improved patient care by pharmacists, gain recognition as advanced practitioner providers (nationally) and receive reimbursement or compensation for patient care services.

Plan: Collaborate with the Montana Pharmacy Association (MPA) and other pharmacy organizations, State (DPHHS) and Federal (e.g., Centers for Medicare and Medicaid [CMS]) agencies and legislators (Senators Baucus and Testor, Congressman Rehberg), and third – party payers/Health plans. Intent is to increase the number of pharmacists with credentials that would meet criteria set by health insurers for patient – care provider recognition. Ideally, this will lead to obtaining federal and third-party reimbursement. Continue to pursue national legislation to obtain this objective.

Primary responsibility: All Department faculty; Department Chairperson, Dean

2. Collaborate with the Montana Board of Pharmacy to implement, modify, or optimize rules to facilitate and standardize pharmacy practice commensurate with modern professional pharmacy-based patient care services

Plan: Continue to provide input, assistance, and leadership to Montana Board of Pharmacy as requested and/or as necessary.

Primary responsibility: All Department faculty

3. Remain collaborative with individual practitioners and both state and national pharmacy organizations to improve existing pharmacy services and to help develop and implement cognitive services, obtain reimbursement for cognitive services, develop professional practice standards, further advance the pharmacy profession. Remain involved in demonstration projects that reveal the value of cognitive pharmacy services.

Plan: Continue to explore and establish payment mechanisms for clinical faculty currently providing cognitive pharmacy services.

Primary responsibility: All Department faculty and Department Chairperson

4. Monitor for legislative, market, and professional activities which may impact pharmacy practice and promote awareness within the public and political environment of a pharmacist's scope of practice. Become involved in legislative movements at State and National levels to promote and recognize clinical pharmacists as providers of patient care under Medicare Part B and other 3rd-party payment organizations.

Plan: Become involved in legislative movements at State and National levels to promote and recognize clinical pharmacists as providers of patient care under Medicare Part B and other 3rd-party payment organizations.

Bring to Department's attention those issues which fit in above categories. Remain actively engaged with Montana's Congressional delegation regards to pharmacy and pharmacist issues. **Primary responsibility**: All Department faculty; Department Chairperson, and Dean

5. Continue to lead in promoting and developing pharmacy residency programs.
Plan: Full ASHP accreditation for St Patrick Hospital and Health Sciences Center has been obtained. Other Montana hospitals are in consideration (Benefis – Great Falls, Billings Clinic – Billings) Maintain existing accreditation for UM residencies. Facilitate the development of other residencies: a) ambulatory care residency at Missoula VA clinical practice site b) hospital-based residency at Benefis (Great Falls).

Primary responsibility: Department Chairperson and all Department faculty

6. Work with MPA and pharmacy practitioners to develop, promote, and utilize Collaborative Drug Therapy Management (CDTM) agreements. Where possible, educate, optimize, and facilitate the development of Medication Management Therapy Services (MTMS) as they relate to Medicare Part D and reimbursement for clinical pharmacy services.

Plan: Provide templates to Montana Board of Pharmacy for review/endorsement; Highlight and publicize examples of successful CDTM agreements and patient outcomes via the School and MPA.

Primary responsibility: All Department faculty

7. Continue to promote and develop faculty involvement with national pharmacy organizations **Plan:** Encourage leadership and committee roles; encourage initiation and promulgation of new ideas, teaching, scholarship and clinical programs that can be extended nationally.

Primary responsibility: All Department faculty

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Professional Service

Sarah Miller, Chair Lisa Barnes Vince Colucci Rose Macklin

GOAL: Provide drug therapy and pharmaceutical care consultation services to patients, licensed health care professionals, and health care organizations of Montana.

OBJECTIVES:

1. Provide direct pharmacy health care to patients and provide consultative pharmacy services to Montana health care agencies, health care professionals and their respective organizations.

Plan: Department faculty will continue to consult and document this activity to the FEC each year.

Plan: Provide continuing education for pharmacists, pharmacy technicians, nurse practitioners, and other health professionals.

Plan: Provide leadership toward achieving pharmacist reimbursement for medication therapy management.

Primary responsibility: All Department faculty, CE Coordinator

2. Provide consultative services to the Montana State Medicaid program on drug utilization review and outpatient formulary management issues.

Plan: Maintain the services contract.

Plan: Develop new consultative activities, if available.

Plan: Record DUECARE activity in the DIS activity report.

Primary responsibility: Department Chairperson and Director of Drug Information Services

3. Provide pharmaceutical expertise to State of Montana and Montana University System Health Plans.

Plan: Help to drive formulary selection and maintenance based on medication efficacy and cost.

Plan: Help to optimize pharmacotherapy through medication therapy management, focusing primarily on cardiovascular disease states and asthma.

Plan: Run call center (Ask-A-Pharmacist) for these programs.

Plan: Involve pharmacy students in medication therapy management component of these programs.

DEPARTMENT OF PHARMACY PRACTICE UM SKAGGS SCHOOL OF PHARMACY GOALS & OBJECTIVES 2010-2015

AREA: Department Personnel and Workload

Michael Rivey, Co-Chair Donna Beall, Co-Chair Sarah Miller Bill Docktor

GOAL: Fulfill personnel and material needs to enhance the provision of teaching, research, and service activities.

OBJECTIVES:

1. Maintain an accurate ongoing record of personnel workload in the Department and strive to balance workloads between faculty members and also administrative assistants..

Plan: Use course syllabi to record teaching load and course coordination for each department member on a yearly basis.

Plan: Solicit a breakdown of workload related to teaching, scholarly, and service activities from each faculty member on a yearly basis, for comparative purposes. Data sources include Individual Performance Record (IPR) used in faculty evaluation process, direct inquiry of faculty/staff member, and feedback from other sources.

Primary responsibility: Department Chairperson and course coordinators

2. Provide support for faculty members engaged in funded research projects.

Plan: Hire support personnel on a temporary basis to support faculty research, using money generated by the research grants.

Plan: Encourage consideration and the incorporation of funding for support personnel in significant research project proposals.

Plan: Provide relief from teaching responsibilities, dependent on the monetary size and personnel time involved in the grant.

Primary responsibility: Department Chairperson and all Department faculty

3. Promote the continued development of pharmacy practice residencies to support Departmental activities in the areas of teaching and research.

Plan: Complete implementation of a second PGY1 pharmacy practice residency at Community Medical Center, starting July 1, 2010.

Plan: Maintain ASHP accreditation of the UM residency program.

Plan: Promote and assist the development of additional residencies at other sites outside Missoula in the state of Montana.

Plan: Promote and facilitate the development of ambulatory care and community practice residencies in Missoula and the state of Montana.

Primary responsibility: UM Residency Program Director and all Department faculty.

4. Assure adequate office space and teaching materials for Department personnel.

Plan: Actively participate in decisions with the Dean and other Administration in CHPBS regarding allocation of office space.

Plan: Allocate resources to maintain current teaching materials for all courses, especially those related to the teaching of skills related to direct provision of patient care.

Primary responsibility: Department Chairperson

5. Plan for expected retirement of several senior faculty members over the next five years.

Plan: Identify any retirement plans (tentative or not) of senior faculty members as they age to 60 years of age.

Plan: Delineate needs in the areas of teaching, research, and service created by any planned retirements.

Plan: Reallocate teaching, research, and service duties of faculty nearing retirement to allow for maintenance of those activities at a quality level to the program.

GOAL: Foster and maintain job satisfaction, morale, and professional development for faculty and staff in the Department

OBJECTIVES:

1. Identify issues related to job satisfaction and professional development for Department members.

Plan: Schedule meetings as needed of the Chair with staff and faculty members.

Plan: Attend Administrative Meetings of the CHPBS to be aware of, and active in issues related to job environment and satisfaction.

Primary responsibility: Department Chairperson

2. Stimulate the professional development and academic advancement of faculty members **Plan:** Schedule junior faculty mentoring meetings twice yearly, first between the junior faculty member and their mentor to develop a plan for faculty performance, and then with the Department Chair to review the plan.

Plan: Advocate for, and promote the inclusion of junior faculty in granted projects directed by senior faculty members.

Plan: When feasible in the setting of unsuccessful funding efforts, provide Departmental financial support for small research projects conducted by faculty members.

Primary responsibility: Department Chairperson and tenured faculty members

3. Enhance the professional environment within the Department

Plan: Provide for training that enhances the professionalism of the faculty, affiliated preceptors, and staff personnel of the Department.

Plan: Support and participate in the enforcement of high standards of professionalism in students in the program.

Primary responsibility: All faculty members

4. Maintain and expand professional development opportunities for Department members

Plan: Maintain individual professional development accounts for all faculty members

Plan: Evaluate the need for increased professional development stipends at start of each fiscal year.

Plan: Promote consideration of sabbatical leaves within the Department. Have at least 1 faculty member complete a sabbatical within the next 4 years.

Plan: Provide Departmental support on an "as needed basis" for smaller professional development opportunities.

Primary responsibility: Department Chairperson

5. Attempt to provide salaries which are competitive for Department personnel

Plan: Maintain a current perspective of salaries in light of market conditions, by use of national, regional, and local data. Conduct periodic salary surveys if data are not available.

Plan: Improve the salaries of current faculty by using the merit and promotion system within the CBA.

Plan: Investigate and take advantage of opportunities to enhance salaries of all Department personnel, just as inversion adjustment, bonus awards, critical area funding, or similar programs to adjust them toward local, regional, and national averages.

Plan: Give new hires a nationally competitive salary, through use of AACP salary data.

Primary responsibility: Department Chairperson

6. Promote a collegial social interaction within the Department and with "outside" pharmacy professionals

Plan: Continue to sponsor a Montana Alumni reception at the ASHP Midyear Meeting, and look for other opportunities for the Department to sponsor events that promote interaction between the faculty and pharmacy practitioners.

Plan: Sponsor reception for Resident Certificate Presentation with UM faculty and hospital preceptors.

Plan: Give financial support to events and social outings which enhance Department personnel interaction in a non-academic environment.

Primary responsibility: Department Chairperson