New practitioners and the Pharmacy Practice Model Initiative: Our opportunity to define the future

It is often said that the only constant in life is change. Arguably, many of us would suggest there is another universal constant regarding change: people’s reluctance to accept it. Despite this resistance, we must continually manage change in order to thrive. This is especially true in our own profession. With the passage of the Patient Protection and Affordable Care Act, coupled with ongoing dialogue regarding the future of our health care system, a unique opportunity exists for the pharmacy profession to reflect on its worth and develop a progressive health-system pharmacy practice model.1 However, we face many challenges as we try to advance pharmacy practice. External pressures, including changing demographics, work-force demands, and various social and economic influences, can be barriers to effectively leveraging our own professional acumen for the betterment of our patients.2,3 Fortunately, pharmacists continue to prove their value within health systems, serving patients throughout the continuum of care.4 Increased emphasis has been placed on postgraduate education, residency training, and credentialing. As such, new practitioners are uniquely positioned to help drive the profession forward. New practitioners must take ownership of the pharmacy profession, becoming educated about important issues, involved in crucial decisions, and dedicated to the development and implementation of innovative, evidence-based practice models.

The Pharmacy Practice Model Initiative. The American Society of Health-System Pharmacists (ASHP), in collaboration with the ASHP Research and Education Foundation, is currently supporting the advancement of the profession through the Pharmacy Practice Model Initiative (PPMI). The ultimate goal of this initiative is to significantly improve the health and safety of patients by capitalizing on pharmacists’ unique knowledge of the medication-use system and professional acumen as direct patient care providers.5,6 When developing new and innovative models, various factors must be considered, including

• Medication-use policy and product selection,
• Medication distribution,
• Clinical pharmacy practice,
• Pharmacy technician roles,
• Pharmacists’ roles as organizational leaders,
• Adherence to standards-based practice,
• The response to the medication-use quality and safety movements in the United States, and
• The impact of technology.

When discussing practice models, many key professional questions will be addressed with the purpose of developing a vision and strategy for future pharmacy practice. How will pharmacists be deployed throughout an institution? How can the role of pharmacy technicians help advance the role of pharmacists in providing medication management services? To what extent should the pharmacist accept responsibility for both clinical and distributive activities? Clearly, new practitioners play an important role in defining the right answers and outcomes of these significant questions.

The Pharmacy Practice Model Summit. The PPMI was launched with the Pharmacy Practice Model Summit held in Dallas, Texas, this past November to discuss the development of a new pharmacy practice model. Through healthy discussion, informed debate, and evidence-
based research, a document was compiled comprising the beliefs, assumptions, and recommendations of the summit participants. The recommendation, "All patients should have a right to the care of a pharmacist" speaks to the heart of our profession and the passion for us to ensure the provision of high-quality pharmaceutical care to our patients. Barriers to developing optimal practice models were also discussed and included insufficient leadership, resistance to change, and lack of pharmacy staff resources. Further, participants noted that in the next 5–10 years, there will be "an increasing demand among new pharmacy graduates for residency training," and "an increasing number of pharmacists will pursue clinical specializations."

The consensus statements and recommendations from the summit are only the beginning. To ensure the summit has a long-lasting impact, we must continue to debate, share, and implement the future practice model vision; simply, the successful implementation of an advanced practice model demands commitment and action from the entire workforce. As the future pharmacy workforce, new practitioners can be leaders in this initiative, directly involved in key changes in pharmacy practice. New practitioners should become familiar with the summit’s recommendations. New practitioners’ thoughts about the most effective use of pharmacists and expectations regarding desired future practice responsibilities have the potential to greatly influence the future success of the PPMI.

Pharmacy practice and the new practitioner. Currently, limited data define the preferences and attitudes of new practitioners, who represent the future leaders of the profession, and such data are crucial in developing and implementing successful practice models. A survey-based study was completed recently to address this need for information. The electronic survey was sent to 4146 ASHP members who were new practitioners; 497 responses were received (12% response rate). Respondents indicated a greater preference for clinical, direct patient care activities compared with traditional operational functions. The data also suggest that a gap exists between new practitioners’ preferences for direct patient care responsibilities and current practice demand. For instance, in survey questions designed to assess job function desirability, only 20% of respondents indicated that entering or verifying medication orders was desirable. On the other hand, adjustment of medication dosage based on therapy response and monitoring of drug therapy were deemed desirable by 96% of respondents. In all, the top five most desired job functions were clinical in nature, while the top five least desired were operational or administrative functions.

New practitioners’ satisfaction with their current position and pharmacy practice in their institution as well as in the United States was also assessed in the survey. In general, new practitioner respondents were satisfied with pharmacy practice at their institution (86%) but less satisfied with the current state of health-system pharmacy practice in the United States (56%). Respondents who had completed postgraduate training were 2.3 times more likely to be satisfied with the current state of pharmacy practice in the United States than those without postgraduate training (p = 0.02).

The study data also suggest that new practitioners may encounter challenges in pursuing professional interests. When the results from this new practitioner survey were compared to those of pharmacy directors in the 2008 ASHP national survey of pharmacy practice in hospital settings with a focus on dispensing and administration, disparities were identified between new practitioner professional preferences and job availability. For instance, Hertig et al. found that the majority of new practitioner respondents wanted to have the opportunity to participate on noncritical patient care rounds (91% of respondents indicated that this was desirable), yet the national survey found that only 37.9% of institutions provided this opportunity, and 39.2% of directors had no plans to offer this service. The differences noted in new practitioners’ preferences and practice availability highlight a gap between new practitioners’ expectations and practice realities. New practitioners are encouraged to find ways to get involved in practice model change, continuing to share their thoughts regarding innovative pharmacy practice.

New practitioners must demonstrate a willingness to implement changes to the current pharmacy practice model. Within the framework of the PPMI, successful implementation of practice changes will require that individuals take responsibility for change. Understanding that new practitioners are willing to accept and implement positive change will enable the leaders of the PPMI to design a strategy that empowers new practitioners to adapt to the changing pharmacy climate.

The new practitioner’s role. The PPMI gives new practitioners a golden opportunity to shape the future of pharmacy practice. There are many ways to get involved in the PPMI.

- **Become an advocate for the profession and your own career.** Engage in dialogue with your colleagues regarding the important issues. Continue to share the benefits pharmacists provide their patients and volunteer to support changes as they occur.
- **Become engaged in the PPMI.** The summit may be over, but there are many opportunities to become involved in practice model change. Visit www.ashp.org/PPMI to read more about the specifics of the initiative, including chances to get involved, network, and share your practice model successes with the world.
- **Review and understand the recommendations and full proceedings of the summit.** The next step is to adapt these concepts to our practice, ensuring we translate these best practices to daily patient outcomes.
- **Stay connected.** Communication is a key factor in the success of any initiative, and practice model change is no exception. ASHP provides many resources to its new practitioner members. The ASHP New Practitioner Forum webpage is a gateway to these resources. Use this site as your professional home as you navigate change. Further, log in to ASHP Connect (http://connect.ashp.org) to virtually communicate with your colleagues. ASHP Connect offers a great electronic discussion board to view and post a multitude of practice model-related topics.


**New Practitioners Forum**

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**John Hertig, Pharm.D., M.S.,** Coordinator of Administrative Services
Department of Pharmacy
Duke University Hospital
14221 Duke South
Durham, NC 27710
john.hertig@duke.edu

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