

## EXECUTIVE SUMMARY

# ASHP Meeting of the Deans

### ASHP MIDYEAR CLINICAL MEETING & EXHIBITION DECEMBER 10, 2024 | NEW ORLEANS, LA

On Dec. 10, 2024, ASHP convened the annual meeting of the deans during the ASHP Midyear Clinical Meeting & Exhibition in New Orleans, Louisiana. Invited attendees included deans of accredited schools and colleges of pharmacy (SCOP) and pharmacy leaders from health systems across the United States.

The meeting focused on three pressing issues facing the pharmacy profession:



#### WORKFORCE PIPELINE AND RECRUITMENT



#### EXPERIENTIAL EDUCATION AND POSTGRADUATE SUCCESS



#### HEALTHCARE TECHNOLOGY AND DATA ANALYTICS

## TABLE OF CONTENTS

ASHP Updates .....	2
Workforce Pipeline and Recruitment .....	3
Experiential Education and Post-Graduate Success .....	5
Healthcare Technology and Data Analytics .....	7
Conclusion .....	8

ASHP President Leigh Briscoe-Dwyer facilitated the meeting and invited open discussion to address issues and opportunities for harmonization and collaboration between health-system practice and academia.

“Bringing academic leaders together with practice leaders in health-system pharmacy is a unique value ASHP provides to promote the profession of pharmacy,” Briscoe-Dwyer said in her welcoming remarks. “No one in this room can be successful without the others.”

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

# ASHP UPDATES

The meeting began with brief updates from ASHP staff leaders.

**Public Awareness Campaign:** Lois Witkop, ASHP chief marketing officer and vice president of the Office of Marketing and Communications, shared metrics from the first six months of the [“We’re Your Pharmacist” public awareness campaign](#), which aims to increase awareness of and appreciation for the pharmacy profession among the general public. The campaign has garnered nearly 70 million impressions through paid digital and social media to date. In the future, ASHP plans to execute an earned media strategy, add stories from other perspectives, including physicians, nurses, and patients; and explore ways to better reach the student audience through social and mobile-first channels. ASHP also welcomes SCOP partners for the campaign’s next phase. “The inspiration for this campaign is our members, and that will always be the foundation,” Witkop said, adding that ASHP hopes it will inspire the next generation of pharmacists.

**Residency CMS Funding:** Tom Kraus, ASHP vice president of government relations, shared updates on [residency funding](#), specifically the challenges posed when SCOP faculty serve as preceptors or when residency programs are affiliated with large health systems with shared resources. Legislation has been introduced in the U.S. House and Senate, called the Rebuild America’s Health Care Schools Act, to solve these issues. “We’ve been trying to rally policymakers around this, and I’m excited to share that this year we’re now seeing policymakers take some action ... with bipartisan support,” Kraus reported. He encouraged attendees and their student associations to sign letters advocating for this legislation, which will demonstrate to members of Congress that the issue affects the communities they represent.

**Residency Accreditation:** Sam Calabrese, ASHP vice president for accreditation services, reported that ASHP has removed restrictions regarding distances between facilities for multi-site programs, alleviating a pain point for many community-based pharmacy residencies. “That was a big push, but it came from folks like you who give us that feedback ... [and helped us] understand the ripple effects that happen when we put some regulations in place,” he said.

Calabrese also shared that ASHP has modified preceptor qualifications from the [residency accreditation standards](#), based on feedback from members and stakeholders. Calabrese also noted he was hopeful ASHP’s public awareness campaign would inspire more people to pursue health-system pharmacy and postgraduate training.



# WORKFORCE PIPELINE AND RECRUITMENT

Meeting attendees were asked to reflect on how SCOP and health systems can support each other in recruiting students into PharmD programs and pharmacy graduates into residencies and jobs, respectively. ASHP asked for examples of successful collaborations between health systems and SCOP, as well as ideas for how both groups can leverage the ASHP public awareness campaign for recruitment. Below is a summary of the discussion.

## PERCEPTION AND UNDERSTANDING OF PHARMACY

- Attendees were excited about the public awareness campaign's potential to “unmask” health-system pharmacy and create greater market demand for pharmacists through storytelling.
  - » Many people compared pharmacy to nursing: “Everybody knows what a nurse does,” and interest in the profession has surged since the COVID-19 pandemic. “We didn’t do as good a job promoting the role of pharmacy and the expanded impact we had [as nurses did],” said one attendee.
  - » Said another: “We just put our heads down, and we don’t do a good job of touting ourselves, patting ourselves on the back, and letting everybody know who we are. That’s why we have to share our stories.”
- A major challenge is that the public doesn’t understand the difference between community and health-system pharmacy.
  - » When people see pharmacies closing in their community, they may assume that pharmacy isn’t a viable career path — when, in fact, there is a nationwide shortage.
  - » Attendees were eager to counteract the negative stigma about pharmacy on social media and to share positive stories of patient outcomes through pharmacist care.

## RECRUITING FUTURE PHARMACISTS

- Participants generally agreed that prospective students and residents must be exposed to a broader view of pharmacy.
  - » “Shadowing” was recommended as an effective way to show pre-pharmacy students the diversity of career opportunities.
  - » Some state boards of pharmacy prohibit shadowing by those without licenses, but that is slowly changing. Federally qualified health centers (FQHC) may be a good option for exposure because they typically have fewer requirements.
  - » They recommended emphasizing work-life balance in health-system and hospital pharmacy, which is attractive to many students.
- Attendees observed that students are increasingly planning for their careers in middle school or late elementary school — so recruitment needs to begin as early as possible.
  - » More students (and their families) should consider pharmacy if they are interested in math and science.
  - » Parents/guardians are a key audience, as they strongly influence their children’s ambitions and academic experiences.
- Many families are concerned about the ROI of higher education, such as job placement rates. Pharmacy school is no different.
  - » Many students could be eligible to start pharmacy school sooner than two years, thanks to AP credit and other academic programs.
  - » Other places to reach students “upstream” include after-school enrichment, career days and job fairs, field trips, summer camps, and pre-pharmacy clubs akin to pre-med clubs in high schools and colleges. “We find that a lot of our pharmacy students started out as pre-med, so we might as well start recruiting there,” said one attendee.
  - » Attendees felt that pharmacy residents could support many of these needs.

## THE RIGHT PEOPLE IN THE RIGHT ROLES

- Some health-system leaders expressed that they can't always find pharmacists to fill the most needed roles, including ambulatory care, specialty pharmacy, oncology, and transitions of care. Participants discussed a few possible solutions for this, including:
  - » Health systems can offer more scholarships to pharmacy students in exchange for a guaranteed job upon graduation. This would also address students and families who struggle financially or are hesitant to take on student loans.
  - » SCOP should consider adding PharmD degree concentrations that align with where their regional health-system partners need support or are looking to grow. "I would like to see tracks and specialty because that's the one piece that we're not seeing," said one health-system pharmacy leader, who reported that most incoming residents are interested in inpatient care.
  - » However, participants acknowledged that new requests for programming put a strain on already-full SCOP curricula. With each addition, something must go.
  - » One dean shared that the necessary coursework already exists for most SCOP; it just needs to be "repackaged" to nimbly meet the changing demands of the profession and their health-system partners.
- Pharmacy technicians leave the profession for nursing and other healthcare roles instead of staying in pharmacy. Pharmacy leaders must be intentional about capturing this highly qualified audience.
- To inform further recommendations, attendees recommended gathering and examining data about barriers to pharmacy school, residencies, and postgraduate training.



# EXPERIENTIAL EDUCATION AND POST-GRADUATE SUCCESS

Next, SCOP and health-system leaders were asked to share how they ensure the quality of experiential education placements to meet the “practice-ready” ACPE accreditation standards, as well as innovative strategies for engaging effective preceptors. ASHP also asked the group to reflect on how SCOP and health systems might use data from national and state examination statistics and other trends to reassess their curriculum and experiential learning rotations as well as to define and measure postgraduate success. Below is a summary of the discussion.

## BALANCING LEARNERS WITH PRECEPTOR BURNOUT

- Today’s health-system pharmacists have built their workflows and workloads around the presence of learners. Students are a vital extension of the workforce.
- However, there was concern that too many learners can “burn out” health system preceptors.
  - » One leader noted that an overabundance of learners is a significant reason pharmacists leave their health system, according to exit surveys. “We want to help, but we also have to balance burnout of our staff at the same time.”
- Attendees emphasized the importance of collaboration, coordination, and pre-planning between SCOP and health systems to deliver high-quality experiential programs that meet every stakeholder’s needs, including students.
  - » Said one person: “Once we discussed how we can help each other, we found we have the same needs. We’re a perfect partnership.”
  - » It was noted that a good rotation experience not only helps students figure out what they want to do with their careers but also affects the institution’s reputation in the field.
- One potential solution to the burnout challenge is to offer more Longitudinal Advanced Pharmacy Practice Experience (LAPPE) programs, composed of three to six sequential rotations at the same practice site.
  - » This model creates efficiencies for health systems (less time spent with administrative and IT/EHR onboarding) and maximizes the learning experiences for students, on par with a post-graduate residency.
  - » LAPPEs also increase the chances that a student will choose the site for residency and eventual full-time hire.
- Medicine and hospital rotations are often in the highest demand, more than health systems can fulfill. This requires health systems to be innovative with what counts as those categories.

## NURTURING PRACTICE-READY PHARMACISTS

- Some participants believed student independence was the key to success. Many preceptors provide too much oversight, so students don’t learn to think or act independently.
  - » Training preceptors to work across generational differences and communication styles, as well as with learners who have neurodivergence or mental health conditions, would also improve outcomes with experiential learning.
  - » Conversely, in the post-COVID era, many preceptors would like to reestablish expectations for student professionalism, such as timeliness and attendance.
  - » If a student is struggling in their experiential learning rotations, for any reason, the preceptor or SCOP should intervene as early as possible.
- Preceptors should feel empowered to fail a student from a rotation if necessary.
  - » Consolidated preceptor feedback can also help modify the SCOP’s curriculum.

## ENGAGING PRECEPTORS

- Health systems find the greatest success in fostering a culture where every pharmacist is expected to precept no matter how seasoned they are. This helps distribute the work and eases burnout.
  - » Recruiting preceptors often requires some convincing about why precepting is so beneficial, health-system leaders said.
  - » On the other hand, unwilling preceptors make poor preceptors, so some leaders believe it's best not to force participation. Instead, "let's put some energy into the really good ones."
- One leader observed that the younger generation of pharmacists is very observant of equitable (or inequitable) workloads.
  - » Having pharmacy students work occasional night and weekend shifts is beneficial to the pharmacy department and helps spread out the precepting work.
- Proposed incentives for pharmacy preceptors include:
  - » More paid time off.
  - » Subsidized attendance at professional development conferences.
  - » Faculty positions and other steps along the pharmacy career ladder.

## EXAMS AND OTHER MEASURES OF POSTGRADUATE SUCCESS

- Pharmacy leaders observed that success metrics differ depending on whether students enter residency, fellowships, or industry roles. They feared that the success metrics of SCOP were not aligned with this reality.
- The decline in national North American Pharmacist Licensure Examination (NAPLEX) scores was widely discussed.
  - » Pharmacy graduates often skip the NAPLEX if they pursue career paths that don't require a license immediately post-graduation. Most attendees agreed it was essential to encourage pharmacy graduates to take the NAPLEX soon after graduation, even if they don't plan to practice immediately.
  - » It was suggested that pharmacy students form advisory boards to provide feedback on the NAPLEX and how the next class can best prepare for the exam.
- Participants discussed whether the field is expecting graduates to know too much. What should they learn in pharmacy school, and what should they learn on the job?
  - » Students shouldn't be expected to know as much as their faculty and preceptors, they pointed out.
  - » One SCOP dean advocated for a broad, general curriculum – their students performed better on the NAPLEX after they revised theirs accordingly. "More is not better," she said.
  - » Another academic leader thought it was most important to produce students who are "rock stars at the basics... because the NAPLEX is basic." This includes knowledge of big disease states such as asthma, hypertension, and diabetes. This approach helped their school earn the second-highest NAPLEX pass rate in the country.
  - » The group was optimistic that NAPLEX scores would improve in the post-COVID era.
- The discussion highlighted other solutions for how SCOP could improve academic achievement, including NAPLEX and board certification performance:
  - » Moving toward national standardized student evaluations, as SCOP all follow the same standards.
  - » Auditing every course and reprioritizing A-level (basic) content over specialized content.
  - » Implementing high-stakes exams where students must pass one module before moving on to the next.
  - » Implementing more comprehensive exams throughout pharmacy school to prepare students for APPE exams, plus "board boot camps" before graduation.
  - » Holding special tutoring sessions led by P4s, which is especially effective for math skills.
  - » Providing incentives for students who share their NAPLEX scores with their SCOP (because the test reporting is optional), so that the school has the necessary data to track trends and adjust its curriculum accordingly.



# HEALTHCARE TECHNOLOGY AND DATA ANALYTICS

In the final portion of the meeting, SCOP deans and health-system leaders talked about the evolving role of digital health and technology tools such as artificial intelligence (AI). Discussion topics ranged from enhancing faculty and practitioners' understanding of these tools to leveraging them for workplace efficiencies and recruitment. Attendees also explored how to effectively prevent misuse and address privacy, consent, and other considerations when AI is integrated into experiential education and clinical pharmacy practice. Below is a summary of the discussion.

- Overall, participants had a positive outlook on the role of emerging technology in healthcare, commenting on how such technologies are shaping the future of pharmacy training and practice.

## EMERGING TECHNOLOGY IN THE CLASSROOM

- Generally, students are early adopters of technology and tools — even more reason for academic and health-system leaders to embrace it. This two-way exchange of learning can be a good thing, attendees felt.
  - » Because technology is constantly changing, it's best for SCOP and health systems to focus on instilling big-picture skills and guidelines for using new technology rather than training people on specific applications (e.g., Chat GPT).
  - » Health-system pharmacy preceptors could visit classes at their partner SCOP to share how they use new technology in their daily work.
- Academic leaders expressed concern that the emphasis on digital health, technology, and informatics is burdening their already-full curriculum. For this reason, it's best to integrate the knowledge and skills into what students are already learning.

## EMERGING TECHNOLOGY IN PHARMACY PRACTICE

- Participants seemed comfortable that new technology would not jeopardize the profession or replace the need for experienced pharmacists.
- In pharmacy practice, AI's most appropriate use is streamlining repetitive operations and analytics tasks, not clinical decision-making. Put another way, the technology can be helpful in the Collect and Assess portions of the [Pharmacists' Patient Care Process](#), leaving humans to Plan, Implement, and Follow-up.
  - » Many pharmacists use AI to transcribe patient visits and meeting notes.
  - » In AI-based channels where the source data can be controlled and secured, like Microsoft Copilot, organizations can load manuals and other information into a chatbot for a reliable Q&A.
  - » Attendees wondered whether AI could be used to review student, residency, and job applications.

## ENSURING RESPONSIBLE USE

- The discussion emphasized ethical use, critical thinking, and validation whenever AI is involved.
  - » Students should be taught healthy skepticism. Anything generated by AI should be backed with fact-checking using trusted sources. Also, AI is only as good as the data that goes into it.
  - » SCOP should consider alternatives to written reflections to avoid the temptation for students to "AI cut and paste."
  - » One pharmacy dean likened AI to a calculator: It's a tool students should learn how to use appropriately to support their work. It cannot replace experience or judgment.

## AI RESOURCES FROM ASHP

- The ever-growing ASHP resources on this topic can guide pharmacy leaders as they innovate in education and practice:
  - » [ASHP Digital Health and AI Resource Center](#)
  - » ASHP recently [released the proceedings for ASHP's first Summit on AI in Pharmacy Practice](#), which includes recommendations and a road map for AI in pharmacy.
  - » Additional resources, education, and engagement opportunities related to AI in pharmacy will be forthcoming through ASHP's Innovation Center, Section of Digital and Telehealth Practitioners, and Section of Pharmacy Informatics and Technology.

## CONCLUSION

ASHP President Leigh Briscoe-Dwyer adjourned the meeting at 9:30 a.m. ASHP plans to continue facilitating open dialogue between leaders of health systems and SCOP in the future.

The next ASHP meeting of the deans will be convened virtually in spring 2025.