

# Open Forum on APhA2021 New Business Items

Brandi Hamilton

Chair, New Business  
Review Committee

Joey Mattingly

Speaker, APhA House  
of Delegates

# Webinar Information

Dial-in and use access code and audio pin on your control panel to limit audio issues and background noise during the webinar

Submit your comments/questions during the webinar using the chat box on your control panel or email [HOD@aphanet.org](mailto:HOD@aphanet.org)

Select “raise hand” button to request to speak and you will be recognized by the moderator as time permits

This webinar is being recorded for future access on the House of Delegates webpage, [www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)

Note: all comments/questions received will be considered by the New Business Review Committee

# Webinar Information

Webinar scheduled for 90 minutes

- **10 minutes for overview**
- **70 minutes for NBI Review & Discussion**
- **10 minutes for closing information**

Moderators will clarify issues, but will not engage in debate

# New Business Review Committee

**Brandi Hamilton, Chair**

Los Angeles, CA

**Grace Baek**

Seattle, WA

**Lauren E. Bode**

Saint Albans, VT

**Collin Conway**

Bothell, WA

**Julie Dopheide**

Burbank, CA

**Brian Hose**

Clear Spring, MO

**Frank North**

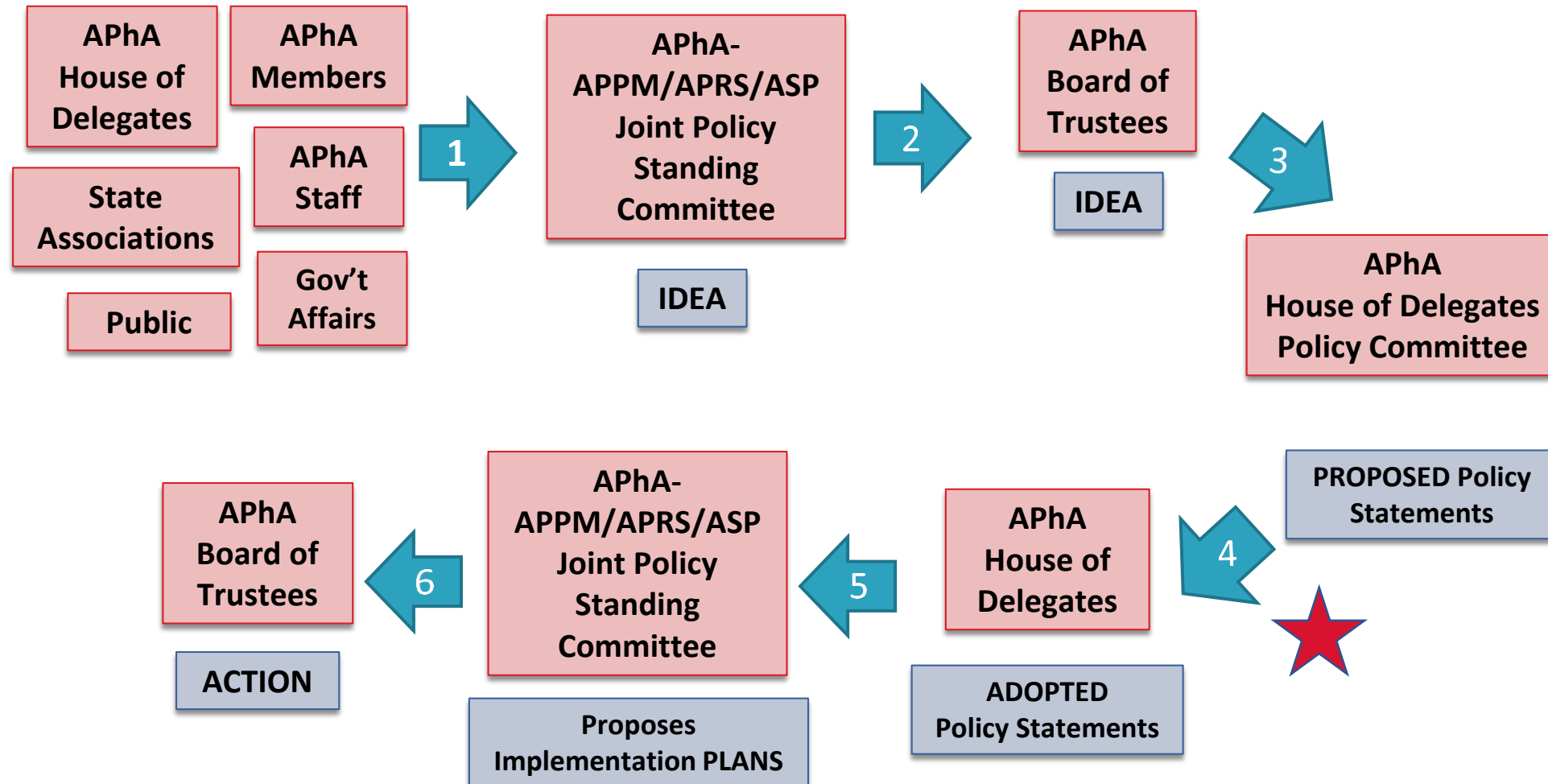
Houston, TX

**John Proctor**

Knoxville, TN

# Policy Process Roadmap

*Transforming Ideas into Action*



# Current Policy Information

## Policy Manual

- Online searchable database:
  - <http://www.pharmacist.com/policy-manual>
- Online PDF version:
  - [https://media.pharmacist.com/HOD/18512+-+HOD+Policy+and+Procedures+Manual+2020\\_online.pdf](https://media.pharmacist.com/HOD/18512+-+HOD+Policy+and+Procedures+Manual+2020_online.pdf)

# American Pharmacists Association Antitrust Statement

The American Pharmacists Association complies with all Federal and State Antitrust laws, rules and regulations. Therefore:

- 1) Meetings will follow a formal, pre-approved agenda which will be provided to each attendee. Participants at meetings should adhere strictly to the agenda. Subjects not included on the agenda should generally not be considered at the meeting.
- 2) The agenda will be specific and will prohibit discussions or recommendations regarding topics that may cause antitrust problems, such as prices or price levels. In addition, no discussion is permitted of any elements of a company's operations which might influence price such as:
  - a) Cost of operations, supplies, labor or services;
  - b) Allowance for discounts;
  - c) Terms of sale including credit arrangements; and,
  - d) Profit margins and mark ups, provided this limitation shall not extend to discussions of methods of operation, maintenance, and similar matters in which cost or efficiency is merely incidental.
- 3) It is a violation of Antitrust laws to agree not to compete, therefore, discussions of division of territories or customers or limitations on the nature of business carried on or products sold are not permitted.
- 4) Boycotts in any form are unlawful. Discussion relating to boycotts is prohibited, including discussions about blacklisting or unfavorable reports about particular companies including their financial situation.
- 5) Whenever discussion borders on an area of antitrust sensitivity, the Association's representative should request that the discussion be stopped and ask that the request be made a part of the minutes of the meeting being attended. If others continue such discussion, the webinar will be terminated.

# 2021 House of Delegates New Business Item Process

## Submission

- **Deadline has passed (February 10, 2021)**
- **Urgent matters may be considered if submitted 24 hours prior to the start of the House session**
  - ❑ Considered at the discretion of House Leadership or through suspension of House Rules

## Webinars / Open Hearing

- **Obtain initial feedback for committee**
  - ❑ Two webinars (2/24 and 3/3)
  - ❑ Engage – HOD Community Discussion
  - ❑ Virtual Open Hearing - Saturday, March 13, 1:00 to 2:30pm

## New Business Review Committee Meeting

- **Activity during Annual Meeting**

Debate / decisions on New Business Items on March 15 Virtual House Session



# New Business Review Committee

## 8 New Business Items

- **Subject / Motion**
- **Current related APhA Policy & Bylaws**
- **Brief Summary of background**
- **Discussion / Feedback**

# New Business Item #1

## *Systemic Racism*

Introduced by Michael Mone, Former Speaker Delegation on behalf of Task Force

**Motion:** To adopt the following policy statements:

1. APhA denounces all forms of racism.
2. APhA affirms that racism is a social determinant of health that contributes to persistent health inequities.
3. APhA urges the entire pharmacy community to actively work to dismantle racism.
4. APhA urges the integration of anti-racism education within pharmacy curricula, post-graduate training, and continuing education requirements.
5. APhA urges pharmacy leaders, decision-makers, and employers to create sustainable opportunities, incentives, and initiatives in education, research, and practice to address racism.
6. APhA urges pharmacy leaders, decision-makers, and employers to routinely and systematically evaluate organizational policies and programs for their impact on racial inequities.

# New Business Item #1

## *Systemic Racism*

Introduced by Michael Mone, Former Speaker Delegation on behalf of Task Force

### Related Policy:

*2017, 2012, 1989* Equal Rights and Opportunities for Pharmacy Personnel

*2012, 1991* Recruitment of a Diverse Population into Pharmacy

*1979* Consideration of the Equal Rights Amendment

*2009* Disparities in Healthcare

*2006* Cultural Health Beliefs and Medication Use

*2005* Cultural Competence

### Background Summary:

The author reviews the issues of systemic racism within the context of the profession of pharmacy and notes the continued impact of structural racism on both patient outcomes as well as pharmacy professionals who identify as Black, Indigenous, and Persons of Color because of the obstacles posed to fulfill the basic human rights to survival, security, development, and social participation. The author notes that the APhA Task Force on Systemic Racism conducted a review of existing association policy and developed this new business item to address gaps in policy.

# New Business Item #1

***Time for Discussion***

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5. APhA urges pharmacy leaders, decision-makers, and employers to create sustainable opportunities, incentives, and initiatives in education, research, and practice to address racism.
6. APhA urges pharmacy leaders, decision-makers, and employers to routinely and systematically evaluate organizational policies and programs for their impact on racial inequities.

# New Business Item #2

## *People First Language*

Introduced by Aimee Dawson, APhA-APPM Delegation

**Motion:** I move to adopt the following new policy statement:

1. APhA encourages the use of people first language in all written and oral forms of communication.

# New Business Item #2

## *People First Language*

Introduced by Aimee Dawson, APhA-APPM Delegation

Related Policy: N/A

### **Background Summary:**

The background information highlights that people first language, or person first language was first adopted and embraced by organizations that support people with disabilities. The expansion of this language to all patients with any medical condition is being recognized in healthcare settings. The author notes the difference between people first language and identify first language and discusses the appropriateness of each. Lastly, the author notes that when referring to another person, people first language should always be used unless that person has indicated that they prefer identity-first language.

# New Business Item #2

## People First Language

Introduced by Aimee Dawson, APhA-APPM Delegation

**Motion:** I move to adopt the following new policy statement:

1. APhA encourages the use of people first language in all written and oral forms of communication.

***Time for Discussion***

# New Business Item #3

## *Increasing Awareness and Accountability to End Harassment, Intimidation, and Abuse of Power, Position, or Authority in Pharmacy Practice*

Introduced by Jimmi Hatton Kolpek, ACCP Delegation

**Motion:** To adopt the following policy statements:

- 1) APhA calls on all national and state pharmacy organizations, colleges/schools of pharmacy, and other stakeholders to support the development of a profession-wide effort to address harassment, intimidation, and abuse of power or position.
- 2) APhA supports the development of a profession-wide guideline on reporting harassment, intimidation, or abuse of power or position in their pharmacy education and training, professional practice, or volunteer service to pharmacy organizations.
- 3) APhA urges all pharmacy organizations to require individuals considered for any award, leadership position (including voluntary positions), fellowship recognition, or editorial board position, to formally confirm that they have never been involved in any instances of harassment, intimidation, or abuse of power or abuse of authority.
- 4) APhA recommends that any individual who has been engaged in, or who falsely attests that they have never been involved in, any instances of harassment, intimidation or abuse be excluded from consideration for any award, leadership position (including voluntary positions), fellowship recognition, editorial board position, faculty/preceptor, or postgraduate training faculty/director position.
- 5) APhA recommends all pharmacy organizations incorporate harassment, intimidation, and abuse training in their member professional development and education activities.



# New Business Item #3

## *Increasing Awareness and Accountability to End Harassment, Intimidation, and Abuse of Power, Position, or Authority in Pharmacy Practice*

Introduced by Jimmi Hatton Kolpek, ACCP Delegation

### Related Policy:

2004,1994 Sexual Harassment in the Workplace

### Background Summary:

The author reviews recent events that have led to the issue of harassment, within the profession of pharmacy, coming to light. Furthermore, the background information notes that current organizational harassment policies are deemed to be outdated and at the very least lack efficient reporting mechanisms. Lastly, the author shares statements from multiple National pharmacy organizations highlighting concerns for harassment in the pharmacy profession and notes the creation of a petition on [change.org](https://www.change.org).

# New Business Item #3

***Time for Discussion***

## *Increasing Awareness and Accountability to End Harassment, Intimidation, and Abuse of Power, Position, or Authority in Pharmacy Practice*

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- 3) APhA urges all pharmacy organizations to require individuals considered for any award, leadership position (including voluntary positions), fellowship recognition, or editorial board position, to formally confirm that they have never been involved in any instances of harassment, intimidation, or abuse of power or abuse of authority.
- 4) APhA recommends that any individual who has been engaged in, or who falsely attests that they have never been involved in, any instances of harassment, intimidation or abuse be excluded from consideration for any award, leadership position (including voluntary positions), fellowship recognition, editorial board position, faculty/preceptor, or postgraduate training faculty/director position.
- 5) APhA recommends all pharmacy organizations incorporate harassment, intimidation, and abuse training in their member professional development and education activities.

# New Business Item #4

## *Increasing Access to and Affordability of Naloxone*

Introduced by Rachel Barenie, APhA-APPM Delegation

**Motion:** To adopt the following new policy statements:

1. APhA supports policies and practices that increase the availability of naloxone.
2. APhA supports the availability of naloxone as both a prescription and non-prescription medication.
3. APhA encourages pharmacists and payers to ensure equitable access to and affordability of at least one naloxone formulation regardless of prescription status.
4. APhA encourages payers to provide fair reimbursement to dispensers of naloxone.

# New Business Item #4

## *Increasing Access to and Affordability of Naloxone*

Introduced by Rachel Barenie, APhA-APPM Delegation

### Related Policy:

- 2011 Potential Conflicts of Interest in Pharmacy Practice
- 2019 Patient-Centered Care of People Who Inject Non-Medically Sanctioned Psychotropic or Psychotropic Substances
- 2016 Medication-Assisted Treatment
- 2011 The Role and Contributions of the Pharmacist in Public Health
- 1983 Stocking a Complete Inventory of Pharmaceutical Product
- 2005,1977 Government-Financed Reimbursement
- 2005,1981 Third-party Reimbursement Legislation
- 2016 Opioid Overdose Prevention
- 2019,2016 Substance Use Disorder
- 2019 Referral System for the Pharmacy Profession
- 2014 Controlled Substances and Other Medications with the Potential for Abuse and Use of Opioid Reversal Agents
- 1993 Pharmacists' Services
- 2018 Direct and Indirect Remuneration Fees
- 2018 Pharmacist Workplace Environment and Patient Safety
- 2018,2013 Revisions to the Medication Classification System
- 2017,2012 Contemporary Pharmacy Practice

# New Business Item #4

## *Increasing Access to and Affordability of Naloxone*

Introduced by Rachel Barenie, APhA-APPM Delegation

### **Background Summary:**

The proposed policy aims to address the continued growth in opioid related deaths. The author notes that one key measure to addressing this epidemic is access to naloxone. The background information highlights rationale for each of the four proposed policy statements and also notes additional recommendations for consideration to clean-up existing APhA policy related to the topic.

# New Business Item #4

## *Increasing Access to and Affordability of Naloxone*

Introduced by Rachel Barenie, APhA-APPM Delegation

**Motion:** To adopt the following new policy statements:

1. APhA supports policies and practices that increase the availability of naloxone.
2. APhA supports the availability of naloxone as both a prescription and non-prescription medication.
3. APhA encourages pharmacists and payers to ensure equitable access to and affordability of at least one naloxone formulation regardless of prescription status.
4. APhA encourages payers to provide fair reimbursement to dispensers of naloxone.

***Time for Discussion***

# New Business Item #5

## *Unity and Strength of the National Pharmacy Practitioner Organizations*

Introduced by Daniel Hussar, Pennsylvania Delegation

**Motion:** Move to adopt the following policy statement:

APhA should initiate discussions/negotiations with other national pharmacy practitioner organizations (to include but not be limited to ASHP, NCPA, ASCP, ACCP and ACA) for the purpose of considering mergers, acquisitions, and/or the establishment of a collaborative/federated organizational structure to represent and promote the interests of pharmacy practitioners and the profession of pharmacy.

# New Business Item #5

## *Unity and Strength of the National Pharmacy Practitioner Organizations*

Introduced by Daniel Hussar, Pennsylvania Delegation

Related Policy: N/A

### **Background Summary:**

The author states the profession of pharmacy does not presently have an organizational structure with sufficient unity and strength to most effectively represent the profession in responding to unprecedented and threatening challenges. The author calls for a merged and unified national organizational structure to represent pharmacy be established as a goal and notes this may not be attainable in the near future, but also highlights potential next steps for implementation of this model.



# New Business Item #5

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**Motion:** Move to adopt the following policy statement:

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***Time for Discussion***

# New Business Item #6

## *Definition of Patient*

Introduced by Brenda Jensen and Gigi Davidson, ACVP Delegation

**Motion:** Move that APhA adopt the following policy statement:

1. APhA calls for the adoption, by pharmacy organizations and regulatory and professional entities, of the expanded definition for patient to include human or non-human species.

# New Business Item #6

## *Definition of Patient*

Introduced by Brenda Jensen and Gigi Davidson, ACVP Delegation

### **Related Policy:**

*2004, 1988* Pharmacists' Relationship to Veterinarians

*1989* Pharmacists as Principal Investigators in Clinical Drug Research

### **Background Summary:**

The background materials noted surveys reviewing the frequency that pharmacists reported routinely filling prescriptions for animals and also highlighted resolutions from the National Association of Boards of Pharmacy and American Veterinary Medical Association regarding the need for pharmacist education in veterinary pharmacotherapy. The author notes that this policy statement would provide a platform for future policy and initiatives that could broaden the pharmacy impact in care for animals.

# New Business Item #6

## *Definition of Patient*

Introduced by Brenda Jensen and Gigi Davidson, ACVP Delegation

**Motion:** Move that APhA adopt the following policy statement:

1. APhA calls for the adoption, by pharmacy organizations and regulatory and professional entities, of the expanded definition for patient to include human or non-human species.

***Time for Discussion***

# New Business Item #7

## *Social Determinants of Health*

Introduced by E. Michael Murphy, Ohio Delegate submitting on behalf of himself

**Motion:** Move that APhA adopts the following policy statements:

1. APhA supports the integration of social determinants of health screening as a vital component of pharmacy services.
2. APhA urges the integration of social determinants of health education within pharmacy curricula, post-graduate training, and continuing education requirements.
3. APhA supports incentivizing community engaged research, driven by meaningful partnerships and shared decision-making with community members.
4. APhA urges pharmacists to create opportunities for community engagement to best meet the needs of the patients they serve.
5. APhA encourages the integration of community health workers in pharmacy practice to provide culturally sensitive care, address health disparities, and promote health equity.

# New Business Item #7

## *Social Determinants of Health*

Introduced by E. Michael Murphy, Ohio Delegate submitting on behalf of himself

### **Related Policy:**

*2020* Providing Affordable and Comprehensive Pharmacy Services to the Underserved

*2019,1990* Federal Funding to Evaluate the Impact of Health Care Policies

*2016,2011* Pharmacists as Providers Under the Social Security Act

*2014* Care Transitions

### **Background Summary:**

The author defines social determinants of health as non-clinical factors that affect health outcomes, such as the places where people live, learn, work, and play. The background information highlights the role pharmacists, student pharmacist, and pharmacy technicians serve as integral members of the community and have many opportunities to improve patient outcomes by addressing social determinants of health across practice, education, and research.

# New Business Item #7

***Time for Discussion***

## *Social Determinants of Health*

Introduced by E. Michael Murphy, Ohio Delegate submitting on behalf of himself

**Motion:** Move that APhA adopts the following policy statements:

1. APhA supports the integration of social determinants of health screening as a vital component of pharmacy services.
2. APhA urges the integration of social determinants of health education within pharmacy curricula, post-graduate training, and continuing education requirements.
3. APhA supports incentivizing community engaged research, driven by meaningful partnerships and shared decision-making with community members.
4. APhA urges pharmacists to create opportunities for community engagement to best meet the needs of the patients they serve.
5. APhA encourages the integration of community health workers in pharmacy practice to provide culturally sensitive care, address health disparities, and promote health equity.

# New Business Item #8

## *Promoting Financial Preparedness for Student Pharmacists, Applicants, and Recent Graduates*

Introduced by the APhA-ASP National Policy Standing Committee, APhA-ASP Delegation

**Motion:** Move that APhA adopts the following policy statements:

APhA encourages schools and colleges of pharmacy to provide financial literacy resources for student pharmacists and applicants to assess the potential financial burden associated with pursuing a PharmD and entry into the profession by:

1. Offering instruction on financial literacy (including but not limited to personal finance and loan repayment) as part of a required course or elective in their curriculum; and
2. Providing student pharmacists and potential applicants the comprehensive costs of pursuing a pharmacy education at their respective institutions along with financial aid costs and options; and
3. Providing student pharmacists and potential applicants with initial and periodic updates of the professional employment outlook.



# New Business Item #8

## *Promoting Financial Preparedness for Student Pharmacists, Applicants, and Recent Graduates*

Introduced by the APhA-ASP National Policy Standing Committee, APhA-ASP Delegation

**Motion:** Move that APhA adopts the following policy statements:

### **Related Policy:**

*1991* Doctor of Pharmacy Attainment through Non-traditional Mechanisms

### **Background Summary:**

The background information notes many factors that have led to a trend in increased debt burden and complex financial decisions for new PharmD graduates. The author notes survey data on financial assistance to student pharmacists and the current pharmacy job market trends. Additionally, some current financial management courses are highlighted in the background information and noted as examples for broader implementation.

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3. Providing student pharmacists and potential applicants with initial and periodic updates of the professional employment outlook.

***Time for Discussion***

# New Business Review Committee

***Time for Discussion***

New Business Item #1 – E-Prescribing Standardization

New Business Item #2 – Community-based Pharmacists as Providers of Care

New Business Item #3 – Integrated Nationwide Prescription Drug Monitoring Program

New Business Item #4 – Coordination of the Pharmacy and Medical Benefit

New Business Item #5 – Unity and Strength of the National Pharmacy Practitioner Organizations

New Business Item #6 – Pharmacy Technicians Role in Immunization Administration

New Business Item #7 – Social Determinants of Health

New Business Item #8 – Promoting Financial Preparedness for Student Pharmacists, Applicants, and Recent Graduates

# House Keeping

## Additional NBIs

- Consideration of “urgent” NBIs must be sent to [hod@aphanet.org](mailto:hod@aphanet.org), 24 hours before the start of the House Session
  - Sunday, March 14 at 1:00pm ET
  - Evaluated by House Leadership
- Additional consideration of urgent NBIs require suspension of House Rules in final House session

## House Committee Reports

- Available at [www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)

## Delegate Reference Materials

- Electronic version available on HOD webpage and sent out via email soon

# House Keeping

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# Electronic Ballot Process

March 4,  
2021

Electronic Ballot delivered to registered delegates only in the morning on Thurs., March 4.

March 4 –  
March 10

Electronic Ballot will contain a vote on the:

- House Rules Cmt Report
- Policy Rev. Cmt Report
- Policy Cmt Report
- New Business Items

March 4 –  
March 10

No amendments will be accepted through the electronic ballot process.

Amendments are only accepted through the HOD email at [hod@aphanet.org](mailto:hod@aphanet.org)

March 10 –  
5:00pm ET

Deadline to receive ALL electronic ballot votes from delegates.

March 12,  
2021

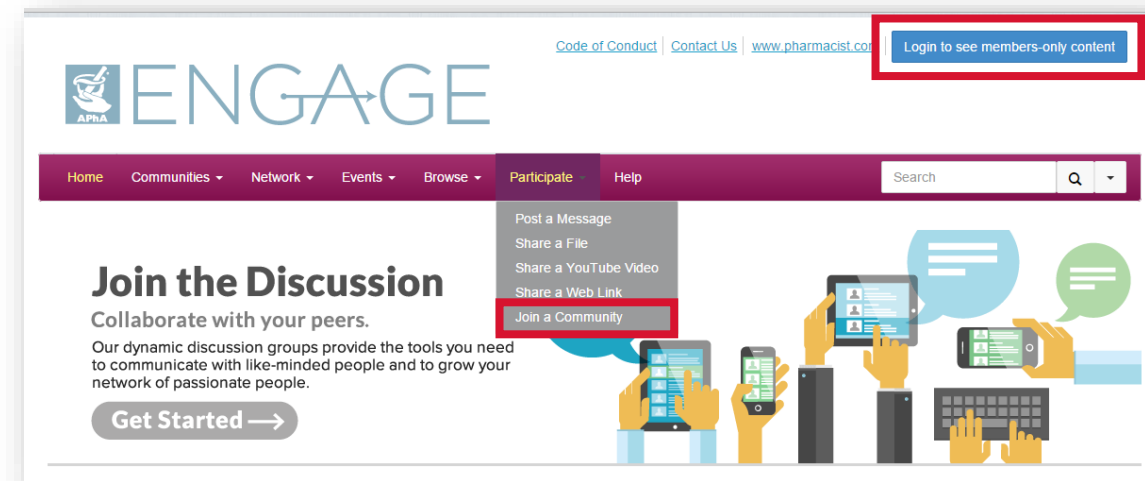
Results of the ballot and the process for handing these results will be reviewed by Speaker Mattingly during an open hearing from 3:00pm – 4:00pm ET

# Continue the Conversation

Visit APhA Engage

APhA Engage makes joining the conversation easy!

1. Visit [engage.pharmacist.com](https://engage.pharmacist.com)
2. Login using your APhA username and password
3. Click “Participate” then “Join a Community”
4. Find the “HOD” communities
5. Click “Join” and follow the prompts on your screen



# 2021 House of Delegates

**Open Hearing on Electronic Ballot  
Process & Results**

**Friday, March 12, 3:00 to 4:00pm ET**

**New Business Review Committee  
Open Hearing**

**Saturday, March 13, 1:00 to 2:30pm**

**Policy Committee Open Hearing**

**Sunday, March 14, 1:00 to 2:00pm**

**House of Delegates Final Session**

**Monday, March 15, 1:00 to 4:00pm**



# Ideas for Future Policy Topics

Are there topics we should consider for the 2022 House of Delegates?

- **These are topics needing more development than through the new business process**
- **Tell us now or send to [HOD@aphanet.org](mailto:HOD@aphanet.org)**

# Open Forum on APhA2021 New Business Items

Thank you for your time and attention!

[www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)

[HOD@aphanet.org](mailto:HOD@aphanet.org)