PAI in Brief

The ASHP/ASHP Foundation PAI website provides comprehensive information about this critically important initiative, which aims to advance pharmacy practice in hospitals and health systems.

In November of 2010 over 150 hospital and health system pharmacist leaders convened in Dallas, TX at the PPMI (this initiative is now known as PAI) Summit to determine what they collectively believed were the key areas of focus needed for positioning pharmacy practice in hospitals and health systems for the future. The summit attendees reached consensus on assumptions, beliefs, and recommendations to advance pharmacy practice. The overarching PAI vision is that pharmacists will be the members of the interdisciplinary health care team who are responsible and accountable for patients’ medication outcome.

In order to enable an actionable agenda from the summit recommendations, ASHP and the ASHP Foundation created a 106 question hospital self-assessment web-based tool from the summit recommendations. Every hospital should complete the individual self-assessment. Coupled with the self-assessment is an action plan created for each individual hospital. Not only is the action plan individualized, it also includes articles and resources correlated with each recommendation. Additionally, because the survey is a web-based tool, pharmacists at each hospital can compare their hospital to others in the state or others of similar sizes across the country.

A similar process was undertaken to determine best practice recommendations for ambulatory care. The Ambulatory Care Conference and Summit was held in Dallas, TX in March of 2014. Unlike the first conference the Ambulatory Care Conference and Summit was open to all who registered and more than 400 pharmacists convened to prepare and vote on recommendations. 25 recommendations for ambulatory care practice were determine. A self-assessment web-based tool was prepared based on the summit recommendations. A system self-assessment and practitioner self-assessment are available. An action plan can be created based on the self-assessment and the action plan also includes articles and resources correlated with each recommendation. When the data base reaches adequate size comparative reports will be available to compare practice in similar practice sites.

The survey data also have value to ASHP state affiliates. Each state society can access the aggregate data from the hospitals and ambulatory care practice sites in their respective state. Predetermined reports will enable state society leaders to assess where the most significant gaps exist (current status vs. PAI recommendations) and the characteristics of hospitals or ambulatory care practice sites that have successfully implemented the PAI recommendations. This information has the potential to drive state-based educational programming, sharing of
best practice examples, and the development of tools and materials that will drive practice forward in an organized manner.

For more information, please visit the PAI website http://www.ashpmedia.org/pai.