

American Society of Health-System Pharmacists

Executive Vice President/Chief Executive Officer Position Profile

June 2010

This profile provides information about the American Society of Health-System Pharmacists (ASHP) and the position of Executive Vice President/Chief Executive Officer. The profile is designed to assist individuals in assessing their interest in and qualifications for the position. Applicants should submit a cover letter and resume to:

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For the American Society of Health-System Pharmacists

Profile Methodology

The profile for the position of Executive Vice President/Chief Executive Officer of the American Society of Health-System Pharmacists (ASHP) was developed using organizational data and specific feedback from the Board of Directors and from an online survey of past presidents, staff, members of the Search and Screen Committee, international members, and members of sections and forums. The survey was conducted to identify and prioritize the skills, knowledge, experience, qualifications and qualities required and desired in an EVP/CEO. Information regarding programs and services considered most effective, organizational and cultural factors, and challenges and opportunities for ASHP was also developed from the survey responses.

About the Organization

ASHP is the 35,000-member professional association of pharmacists who practice in hospitals, health- maintenance organizations, long-term care facilities, home care and other sectors of the healthcare system. A 501(c)(6) organization located in Bethesda, MD, ASHP is the only national organization of hospital and health-system pharmacists; it is dedicated to advancing public health by promoting and furthering the professional interests of pharmacists, and to fostering the safe use of medications through advocacy, education and practice improvement.

Mission Statement: ASHP believes that the mission of *pharmacists* is to help people make the best use of medications. The mission of *ASHP* is to advance and support the professional practice of pharmacists in hospitals and health systems and serve as their collective voice on issues related to medication use and public health.

Vision Statement: ASHP is dedicated to achieving a vision for pharmacy practice in which pharmacists will:

- Significantly enhance patients' health-related quality of life by exercising leadership in improving both the use of medications by individuals and the overall process of medication use;
- Manage patient medication therapy and provide related patient care and public health services;
- Be the primary individuals responsible for medication use and drug distribution systems;
- Be recognized as patient care providers and sought out by patients to help them achieve the most benefit from their therapy;
- Take a leadership role to continuously improve and redesign the medication-use process with the goal of achieving significant advances in patient safety, health-related outcomes, prudent use of human resources, and efficiency;
- Lead evidence-based medication-use programs to implement best practices; and
- Have an image among patients, health professionals, administrators and public policymakers as caring and compassionate medication-use experts.

ASHP has its roots in the American Pharmaceutical Association (APhA) where, in the 1930s, a sub-section of hospital pharmacists was organized. In 1942, the sub-section was established as the American Society of Hospital Pharmacists. In 1995, its name was changed to the American Society of Health-System Pharmacists to reflect changes in the hospital industry, including consolidation of facilities and diversification beyond inpatient care into ambulatory and home care. Today, its core membership still comprises pharmacists who practice in hospital/health-system settings. ASHP has a professional staff of 186 and an annual operating budget of approximately \$43 million.

Associated with ASHP is the ASHP Research and Education Foundation, which was established in 1968 to conduct education and research activities that foster the coordination of interdisciplinary medication management for optimal patient outcomes. The Foundation is a 501(c)(3) organization with seven full-time staff members and an annual operating budget of \$2.5 million; the EVP/CEO serves as a voting member of both ASHP and the ASHP Foundation Boards of Directors.

Structure, Governance and Staff: ASHP is governed by a 12-member Board of Directors. Under the direction of the EVP/CEO, the professional staff administers the programs, services and

activities of the organization and supports the work of approximately 25 councils, committees, advisory boards and commissions. A network of 51 independent state affiliates advances ASHP's mission at the state level. The House of Delegates is ASHP's chief professional policy-making body and comprises 163 voting state delegates, members of the Board of Directors, past presidents, chairs of the ASHP sections and forums, and delegates representing the federal services.

The EVP/CEO also serves as president and chair of the Board of Directors of the ASHP wholly owned subsidiary, 7272 Wisconsin Avenue Building Corporation, which houses the ASHP and ASHP Foundation offices.

Key External Interactions: In addition to working closely with the Board of Directors, the leadership of the state affiliates and the ASHP Foundation, the EVP/CEO represents ASHP interests through interaction with a wide range of related healthcare organizations. These include:

- Federal regulators and agencies (e.g., Centers for Medicare and Medicaid Services, the Drug Enforcement Administration and the Food and Drug Administration);
- National quality organizations (including The Joint Commission, National Quality Forum and the Agency for Healthcare Research and Quality);
- Colleges of pharmacy and faculty;
- Pharmacy-related healthcare organizations (including the Accreditation Council for Pharmacy Education, the American Pharmacists Association, the American Association of Colleges of Pharmacy, the Pharmacy Technician Certification Board, the National Association of Boards of Pharmacy and other members of the Joint Commission of Pharmacy Practitioners);
- The International Pharmaceutical Federation (FIP), the European Society of Hospital Pharmacists and the North American Compact (an alliance of ASHP, the Mexican Association of Hospital Pharmacists and the Canadian Society of Hospital Pharmacists); and
- Other healthcare related organizations (including the United States Pharmacopeial Convention, the Institute for Safe Medication Practices, the Institute of Healthcare Improvement, the American Medical Association, the American Nurses Association, and the American Hospital Association).

Programs and Services

ASHP's primary programs and services include educational programming; an extensive library of publications and information; development of professional policy and standards for best practices; advocacy in both the public and private sectors; public policy development; and consumer education and information. It is the only organization that accredits pharmacy residency programs and has done so since 1963, with more than 1,000 programs currently in existence. ASHP is the largest accredited provider of continuing education for pharmacists. ASHP also accredits pharmacy technician training programs and is a founding member of the Pharmacy Technician Certification Board.

ASHP offers five special-interest sections that provide additional opportunities for pharmacists to communicate and interact with colleagues who share specific interests: Clinical Specialists and Scientists; Home Ambulatory and Chronic Care Practitioners; Inpatient Care Practitioners; Pharmacy Informatics and Technology; and Pharmacy Practice Managers.

ASHP also provides two vehicles for interaction among members with common interests. The New Practitioners Forum is a collaborative network that facilitates the integration of new practitioners into the pharmacy community through on-line discussion groups, e-newsletters, webinars, a listserv, a resident visit program and the opportunity for representation on ASHP policy committees. The Pharmacy Student Forum prepares the next generation of health-system pharmacists to be leaders in their schools and communities through programs and activities such as a mentor exchange; social networking; RSS feeds; blogs and discussion boards; summer internship opportunities; and participation on ASHP policy committees.

ASHP conducts two major meetings each year: the Midyear Clinical Meeting, which is held in December and, with more than 20,000 attendees, is the largest gathering of pharmacists in the world; and the Summer Meeting, which draws approximately 2,000 pharmacy professionals. The Midyear Clinical Meeting includes five full days of educational programs; its focus encompasses the following: improvement of patient care; skills and knowledge enhancement; the latest developments in products and technology; the Personnel Placement Service; programs for students; and a Residency Showcase. The Summer Meeting is the start of ASHP's fiscal and professional

policy development year, with the inauguration of a new President and selected Board members. Activities at the Summer Meeting include two meetings of the House of Delegates; meetings of state affiliate leaders; educational programs for continuing education credits; and an exhibit program.

ASHP also conducts a National Residency Preceptors Conference, a three-day event that is the only one of its kind devoted to pharmacy residency training. It encourages mentorship work by residency preceptors and program directors in the start-up of new programs and enhancement of existing programs. In addition, the two-day Conference for Leaders in Health-System Pharmacy features presentations by experts on current pharmacy practice management topics.

One of ASHP's most recent and significant initiatives is the Pharmacy Practice Model Initiative (PPMI), which is jointly sponsored by ASHP and the ASHP Foundation. The goal of this initiative is to advance the health and well being of patients by developing and disseminating a futuristic practice model that supports the most effective use of pharmacists as direct patient-care providers. In its early stages, the PPMI comprises three components: (1) a two-day summit of pharmacist participants to facilitate a comprehensive discussion of the topic; (2) an extensive social marketing campaign to disseminate proceedings and outcomes of the summit and translate recommendations into practice; and (3) demonstration projects, funded by grants from ASHP and the Foundation, to evaluate the impact of the practice model change on medication use in a variety of settings. Defining the key characteristics of the practice model will serve as the foundation for positioning ASHP in the evolving care models resulting from recent healthcare reforms.

ASHP's extensive advocacy efforts and relationships with key healthcare policy makers, Congress, state affiliate leadership and decision-makers in quality organizations ensure that pharmacy has a seat at the legislative and regulatory tables. Advocacy efforts focus primarily on (1) payment of pharmacists for patient care services; (2) quality, safety and outcome improvement; (3) expansion of funding for pharmacy residency training; (4) standardization of technician education, training, certification and registration; and (5) resolution of workforce issues of staffing, credentialing and leadership.

In 1995, ASHP launched ASHP Advantage, a division that specializes in developing customized educational activities to address identified educational gaps. With access to the vast resources of ASHP and its membership, ASHP Advantage keeps members apprised of key issues and trends shaping pharmacy practice and healthcare, and designs quality programs and projects to meet those needs.

Other significant ASHP programs, services and member benefits include the following:

1. The *American Journal of Health-System Pharmacy*, ASHP's twice-monthly scientific, peer-reviewed journal devoted to coverage of clinical, drug therapy, medication-use safety, regulatory, professional and leadership issues, as well as pharmacy department operations;
2. The on-line *ASHP InterSections* magazine, a quarterly publication about members' challenges, successes and practice improvements, with web, audio and video links to related information and resources;
3. A vast bookstore offering publications on a number of topics, including drug information, patient safety, practice management, clinical references, complementary/alternate therapy, and student and technician resources;
4. An extensive offering of on-line continuing education programs and courses;
5. Career resources for students and residents;
6. A *NewsLink* service with original articles and links to other sources dealing with health-system pharmacy practice, patient safety, pharmacy advocacy and clinical specialties;
7. *ASHP Daily Briefings*, a customized daily email briefing on medication-use issues and healthcare topics gathered from thousands of sources around the world;
8. An on-line Resource Center with web-based tools for members to connect with local officials and legislators and remain current on health policy, pending legislation and patient-safety activities of related organizations;
9. A robust awards program that recognizes contributions and excellence in numerous areas, including leadership, clinical skills, patient care and service, and innovative practices;
10. A consumer education website (www.safemedication.com) with information about safe drug use and products approved by the FDA; and

11. An on-line Learning Center with continuing education resources and self-study testing for pharmacists, pharmacy technicians, nurses, nurse practitioners, case managers, dietitians and physicians.

To learn more about ASHP and the ASHP Foundation, go to www.ashp.org and www.ashpfoundation.org.

Organizational Culture and Financial Outlook

ASHP's key stakeholders consistently describe the organization as one whose greatest strength is the passion, dedication and commitment of its leadership, members and staff to the profession. A highly respected and influential organization, ASHP is shaped by very talented, high-achieving individuals whose working relationships are collegial, mutually supportive and collaborative. The staff is universally described as energetic, engaged and responsive, with a high level of commitment to furthering ASHP's mission. The leadership of the organization is noted for being accessible and strategic, and for having the highest standards of integrity and dedication to meeting the needs of the membership. The work environment at ASHP headquarters is one that recognizes and values teamwork and the highest professional standards.

This level of commitment and talent has enabled ASHP to weather difficult financial times recently and emerge as a more efficient and streamlined organization. Due to the severe economic downturn that began approximately 18 months ago, ASHP experienced a significant decrease in the value of its investment portfolio. As a result, the leadership implemented a number of cost-cutting measures to solidify the organization's financial position. In 2009, a total of 32 staff positions were eliminated, the defined-benefit pension plan for employees was frozen, and contributions to the 401(k) plan were reduced. At the same time, staff at certain salary levels experienced a 5 to 10% salary decrease. Expansion of advocacy efforts and special drug-information projects were placed on hold or eliminated; and as the effects of the recession were felt by the membership, revenue-generating programs across the board were consolidated and streamlined to further reduce operating expenses.

These steps, combined with ASHP's historically solid infrastructure and fiscal management strategies, have served the organization well during this difficult time. As Fiscal Year 2010 draws to a close, the leadership is "cautiously optimistic" about the organization's financial position and describes it as "promising." While there are no significant new initiatives on the horizon, the 2011 budget is balanced and modest staffing increases are planned in the area of accreditation services for residency programs. Salaries were restored to their previous levels as of June 1.

The staff and leadership have been continually challenged to be more creative and innovative in order to maintain the current level of programs and services, and they have been remarkably successful in this regard. They remain committed to "doing more with less" and are proud of what they have been able to accomplish in difficult circumstances. Volunteers continue to enjoy supportive and solid working relationships with staff and are credited with being visionary and strategic stewards of the enterprise. The membership in general is described as active and engaged in ASHP activities, loyal to and supportive of the organization. At the same time, there is an acknowledgement that going forward, particular attention must be paid to restoring staff morale that has suffered during this difficult time; to articulating the optimal direction of the organization; to a more precise alignment of activities with the strategic plan and resources; and to a higher premium being placed on innovation, creativity and appropriate risk-taking.

Challenges and Opportunities

ASHP members and the profession of health-system pharmacy are facing an increasingly complex and uncertain healthcare environment, as healthcare costs and demand for quality patient-care services continue to rise and the worldwide economy experiences unprecedented contraction. These factors combine to present ASHP with both significant challenges and opportunities.

In 2010, the ASHP Board of Directors adopted a Leadership Agenda that outlines the organization's professional priorities and includes tactics for addressing each issue. This blueprint for the future is updated annually and presents a significant opportunity to ensure that ASHP's mission continues to be clearly articulated, and programs, services and activities continue to support changes in the health-system pharmacy profession. The priorities are to:

- Ensure that pharmacists are leaders in implementing all medication-related changes to the healthcare delivery system;
- Foster optimal models for team-based, patient-centered care that include the pharmacist as the expert in medication-therapy management;
- Influence the development and implementation of health information technologies and standards that help improve patient-care outcomes through the leadership of pharmacists;
- Increase the influence of pharmacy leaders in hospitals and health systems; and
- Promote pharmacists as the healthcare professionals who are accountable for the medication-therapy outcomes of patients.

The professional staff is charged with developing detailed action plans for each tactic of the Leadership Agenda, and the Board of Directors regularly reviews progress to ensure that adequate resources, creativity and assertiveness are applied to each priority.

The increasing number of colleges of pharmacy and the demand for residency programs, the resultant expansion of practice faculty, and the evolution of the pharmacy technician workforce present opportunities on several fronts: meeting the need for improved training for emerging professionals, development of additional resources and programs to target pharmacy technicians, and strengthening of relationships with faculty and academic administrators -- all of which represent potential membership growth areas.

The growing needs of state affiliates for additional ASHP support will require that ASHP continue to explore ways to meet these needs with available resources (and identification of new resources), thereby maintaining state affiliates as an integral part of ASHP. In addition staff and leaders strive to continually improve the efficiency and cost-effectiveness of all ASHP operations, programs and services.

A thoughtful and precise alignment of all activities with the organization's strategic plan and Leadership Agenda vis-à-vis its resources (both staff and financial) provides opportunity for greater attention to data-driven strategies, the identification and development of sustainable revenue streams, and the use of technology to meet members' needs. The evolution and growth of

personalized medicine and novel drug therapies will result in a new approach to how drugs are used, which in turn will heighten the need for increased member education (and, thus, additional programs and services).

Increasing globalization presents opportunities to solidify ASHP's international profession leadership and profile; it also represents a potentially expanded market for products and services. Both aspects will require the careful determination of and balance between the appropriate level of international investment of resources and responsiveness to domestic needs.

The proliferation of specialized pharmacy organizations and further fragmentation of the profession is seen by some as a major challenge to the organization. Increased specialization and further differentiation of the health-system pharmacy workforce translates into the expansion of pharmacists in interdisciplinary and medical specialty organizations. This also represents an opportunity for ASHP to take a greater leadership role in collaborating with related organizations to (1) further the pharmacy profession as an integral part of the healthcare team, and (2) strengthen coalitions for advocacy with healthcare policy makers, Congress, and regulatory and quality improvement organizations.

While the ASHP membership base remains strong and stable, meeting the needs of the student segment of ASHP (approximately one-third of the membership) will require investment of additional resources and is critical to the continued growth of the organization.

Information technology will be increasingly applied to the medication-use process. This will result in the need among health-system pharmacists for new knowledge and training in informatics, standards and best practices – as well as leadership challenges in terms of implementing and managing new technologies.

Additional challenges and opportunities include:

1. Solidifying the position of health-system pharmacists on the healthcare team through aggressive public relations and advocacy;

2. Maintaining a leadership role in defining the practice model and the role of health-system pharmacists in acute care, ambulatory care and medical-home settings;
3. Successfully implementing the results of the PPMI initiative in hospitals and health systems; and
4. Influencing quality and safety measures that will affect how patient care is delivered, including the use of medications, and compliance with performance standards and requirements.

EVP/CEO Position

Responsibilities: The EVP/CEO reports to the Board of Directors and is responsible for managing the professional staff; directing the organization's daily operations, programs and activities; overseeing the development and management of the annual operating budget and financial resources; and developing and maintaining alliances with key stakeholders and partners. The EVP/CEO also serves as the President of the ASHP Research and Education Foundation. In addition, the EVP/CEO will:

1. Represent ASHP's mission and activities to the public and key stakeholders, as directed by the Board of Directors, and enhance the visibility of the organization;
2. Encourage and build effective relationships with organizations, both public and private, pharmacy and non-pharmacy;
3. Hire, manage and develop talented professional staff to implement activities, programs and initiatives; and communicate effectively with staff to ensure their understanding of ASHP's mission, goals and objectives;
4. Maintain and manage the financial integrity of the organization, its funds and assets; and align the annual operating budget with the Board's strategic goals and objectives while maintaining the highest standards of legal and fiscal responsibility; and
5. Assist the Board of Directors in determining the long-term strategic direction of ASHP.

Education and Experience: Candidates must be licensed pharmacists with a minimum of 10 years of executive/managerial experience in and/or demonstrated knowledge and understanding of hospitals or healthcare systems. A master's or other advanced degree is strongly preferred. Previous experience as a CEO is desirable but not required.

The successful candidate will demonstrate extensive experience in the following essential areas:

1. Effectively serving as the public voice of and spokesperson for an organization;
2. Advocacy efforts and activities to influence outcomes of healthcare initiatives to advance goals and interests in both public- and private-sector organizations;
3. Developing and implementing strategic plans and initiatives, and identifying and prioritizing short- and long-term organizational needs and resources;
4. Leading and managing a complex organization with diverse constituencies through important change and growth;
5. Enhancing the visibility, reputation and prestige of a complex organization through effective public relations;
6. Understanding of global opportunities to advance an organization's leadership position internationally; to generate revenue through marketing of products and services; and to apply global dynamics to strategy development;
7. Demonstrated business acumen and fiscal management expertise to ensure short- and long-term stability of an organization's assets, including development and diversification of sustainable revenue sources;
8. Demonstrated commitment to identifying and meeting the needs of a constituency, including strengthening relations with and support of grass-roots components; and
9. On-going development of programs and resources to advance the profession through effective education and training.

In addition, the following experience is considered an asset: recognized leadership in pharmacy practice; track record of strong development of and relationship with a Board of Directors, and management of a complex and diverse governance structure.

Skills and Abilities

The following skills and abilities are essential to a candidate's success in the position of EVP/CEO:

1. Financial and business acumen;
2. Exceptional visionary leadership, in order to capitalize on opportunities and to identify challenges and the resources necessary to meet those challenges;

3. Strong written and oral communications skills, with the ability to deliver clear and effective messages to all stakeholders;
4. Ability to build consensus among diverse constituencies and competing interests in order to further common goals and objectives;
5. Ability to build effective alliances, relationships and partnerships with related industry organizations, and to create opportunities to network, collaborate and exchange information;
6. Ability to align strategic priorities, activities, programs and services with available financial and human resources; and
7. Understanding and use of technology to advance organizational goals, both in terms of the delivery of services to members and in advocacy/consumer education efforts.

Personal Characteristics and Behaviors: The EVP/CEO will possess the following personal characteristics and behaviors:

1. Unquestioned honesty, integrity and ethics;
2. Passion for and commitment to the profession of health-system pharmacy practice and for the specific mission of ASHP;
3. Inspirational and optimistic demeanor, with the ability to motivate others by effectively articulating the organization's vision and by exemplary example;
4. Politically aware and adept, with the ability to positively influence others' behavior;
5. Team-oriented, inclusive, accessible, and a strong listener; actively seeks input from a variety of arenas as part of the decision-making process but then acts decisively and confidently;
6. Effective, responsive and results-oriented in overseeing the day-to-day operations and in implementing Board decisions;
7. Able to establish and meet on-going measures of success in order to advance the organization's programs;
8. Open to working with and learning from others who have skill sets different from his/her own;
9. Attentive to operational detail and follow-through to maximize service and responsiveness to the Board and membership;
10. Organized, energetic and skillful at managing time and diverse responsibilities; and

11. Credible and respected by staff, volunteer leadership and other stakeholders.

Measures of Success

The EVP/CEO's success in the position will be measured by demonstrated progress in the following areas:

1. Improved financial strength and stability of the organization;
2. Improved alignment of programs and services with available resources, and identification of new resources;
3. Successful advancement of the Leadership Agenda, strategic plan, and PPMI initiative;
4. The trajectory of membership and continuity of programs and services during the transition to new leadership;
5. Successful integration into the culture of the organization;
6. Articulation of the organization's mission and vision to public and private sectors, partners, and related organizations;
7. Mutually supportive and positive relationship with the Board of Directors;
8. Relationships with and communications, accessibility and visibility to all segments of the membership, particularly state affiliates;
9. Quality of relationship with and leadership of staff;
10. Increasing and solidifying the profile of health-system pharmacists as an integral part of the healthcare team;
11. Maintenance and enhancement of a positive reputation among other healthcare leaders and organizations;
12. Maintenance and enhancement of ASHP's reputation and profile both nationally and internationally; and
13. Establishment of consensus and partnerships relative to key initiatives.

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