

NEWS & VIEWS



THURSDAY EDITION

Of Note

Pure fun: Doors open at 8 pm for the Closing Party at Pure Nightclub at Caesars Palace. Only registrants who have already exchanged their

Closing Party coupon for a "VIP Admission" ticket will be admitted. Guests must be age 21 or older, show a valid photo ID card, and adhere to the following dress code: no sneakers, tennis shoes, work boots, sandals, athletic wear, or shorts and no hats on men.

Shuttle buses will run every 15-20 minutes from 7:30 pm to 11:30 pm.

AJHP online: AJHP staff will be at the ASHP Bookstore 8:30-11 today to demonstrate to authors and readers the new functionalities of AJHP online.

Farewell for now:

What an amazing week! The 2005 ASHP Midyear Clinical Meeting is one for the record books. This meeting is larger than ever before, which means that even more of you have had the opportunity to take in the latest information to strengthen your daily practice. I hope that you have enjoyed your time in Las Vegas as much as I have, and I hope to see you next year at the 2006 Summer Meeting in Orlando.



ASHP President Jill Martin

ASHP, ABHP Sign Cooperation Pact

ASHP and the Association of Black Health-System Pharmacists (ABHP) entered into a formal agreement yesterday to identify and address issues of mutual interest, including health disparities, ethnic and cultural diversity in the workplace, membership growth, and policy development and implementation.

The memorandum of understanding (MOU) was signed at a special luncheon ceremony hosted by ABHP.

The signing of the MOU takes the relationship of the two organizations to "a whole new level," said ASHP President Jill E. Martin, Pharm.D., FASHP, adding that the agreement continues a long tradition of mutual recognition and respect.

"While this piece of paper in and of itself doesn't change our relationship, it does formally signify

that we have a shared desire to move forward the profession and that we are closely aligned with our organizations and we want to work together," she said.

The signing of the MOU, said ABHP President John E. Clark, Pharm.D., is "one of the most meaningful moments in the history of our organization."

"To get to this point today has been a very monumental occasion for the organizations," he said. "It is an effort that is going to benefit all of us."

The agreement, said ASHP Executive Vice President Henri R. Manasse Jr.,



ABHP President John Clark and ASHP Executive Vice President Henri Manasse shake hands finalizing an agreement between the two groups that calls for increased collaboration.

Photo by Dallager Photography

Ph.D., Sc.D., "expresses a human commitment to each other that we all are concerned about the future of our profession."

"We have longed for such a relationship so that we can become a bit more

concrete in where we'd like to go," he said.

ASHP, Manasse said, has dedicated a "significant amount of our time in understanding the health disparities in this nation."

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Pharmacy Managers Tackle Benchmarking

A collaborative effort led by ASHP's Section of Pharmacy Practice Managers aims to improve the use of benchmarking and productivity monitoring systems and make them more reflective of current hospital pharmacy practice.

Through benchmarking, pharmacies can identify opportunities for making improvements and assess their performance over time, said Steven P. Nelson, M.S., senior associate director of pharmaceutical care at the University of Iowa Hospital and Clinics in Iowa City, during an educational session Wednesday.

But Nelson explained that from pharmacy's per-

spective, current benchmarking systems leave much to be desired.

A major issue raised by pharmacy managers has been the use of inappropriate peer groups for assessing pharmacies' workflow and productiv-



Steven Nelson

ity, Nelson said.

"Some of the frustrations were that peer groups were assigned that were not comparable," he said.

The problem, he said, is that the data used to assign peer groups have not included enough detail to capture the wide variations in work practices demanded of health-system pharmacies.

For example, Nelson explained, the degree to which pharmacists are involved in the clinical care of patients varies widely among hospitals, as does the level of adoption of computerized prescriber-order-entry systems.

To address this problem, ASHP and an advisory group from the prac-

tice managers' section are working with Solucient, a major contract provider of benchmarking services, to revise its peer-matching system.

The working group developed a 37-page "peer characteristics" survey containing 112 questions about the hospital and its pharmacy. The goal is "to truly identify peers, so that...we're really comparing similar systems and similar scopes of services and a similar intensity of services," Nelson explained.

Another project for the group is the creation of an ASHP white paper on benchmarking, expected to be available by mid-2006.

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