2016 APhA-ASP Reference Committee Report

The APhA-ASP Reference Committee met in closed session from 9:00am – 10:30am on Saturday, March 5, 2016. The members of the 2016 APhA-ASP Reference Committee are as follows:

Chair: Lauren Bode, 2015-2016 APhA-ASP Speaker of the House

Region 1: Stacy Longo, Western New England University
Region 2: Laura Byrd, Univ. of Maryland Eastern Shore
Region 3: Rachel Brunner, Lipscomb University
Region 4: Morgan Land, Manchester University
Region 5: Elizabeth Murray, South Dakota State University
Region 6: Katrina Watson, University of Houston
Region 7: Juliet Nguyen, Washington State University
Region 8: Anna Tabutsadze, Midwestern University - Glendale

2016 Reference Committee Recommendations

The APhA-ASP Reference Committee considered the testimony presented during the APhA-ASP Open Hearing on Proposed Resolutions on the Report of the 2016 APhA-ASP Resolutions Committee.

2016.1 – Increasing the Security of Pharmacies
APhA-ASP calls upon all stakeholders to take measures that create an environment that prioritizes the safety and security of patients and pharmacy personnel. These include:
1. The development and implementation of strategies and technologies to deter pharmacy robberies, such as time-delayed safes, panic buttons, stock bottle tracking devices, physical pharmacy design, and video surveillance.
2. The development and implementation of relevant procedures and programs to train all personnel on actions to take during a pharmacy robbery.

The Reference Committee recommends to ADOPT Issue 2016.1 of the Committee Report, and I so move.

2016.2 – Pharmacist Administration of Injectable Medications
1. APhA-ASP supports pharmacists and student pharmacists administering non-vaccine injectables, including but not limited to, antipsychotics, long-acting contraceptives, and other hormone therapy pursuant to prescription, protocol, or collaborative practice agreement.

The Reference Committee recommends to ADOPT Issue 2016.2.1 of the Committee Report, and I so move.

2016.2 – Pharmacist Administration of Injectable Medications
2. APhA-ASP supports the development of programs to properly train pharmacists and student pharmacists to administer non-vaccine injectables, such as continuing education and certificate training programs.

The Reference Committee recommends to ADOPT Issue 2016.2.2 of the Committee Report, and I so move.

2016.2 – Pharmacist Administration of Injectable Medications
3. APhA-ASP encourages all stakeholders, including but not limited to, pharmacies, health-systems, and third party payors, to develop a sustainable and financially viable compensation model for pharmacist administration of non-vaccine injectables.

The Reference Committee recommends to ADOPT Issue 2016.2.3 of the Committee Report, and I so move.
2016.3 – Establishing Immunization Requirements
1. APhA-ASP affirms the valuable role immunizations play in protecting the public and strongly recommends that all persons receive immunizations currently recommended by the CDC, except when medically contraindicated.

The Reference Committee recommends to ADOPT Issue 2016.3.1 of the Committee Report, and I so move.

2016.3 – Establishing Immunization Requirements
2. APhA-ASP recommends all private and public educational or child-care institutions require enrollees and employees to receive all CDC-recommended immunizations, except when medically contraindicated.

The Reference Committee recommends to ADOPT Issue 2016.3.2 of the Committee Report, and I so move.

2016.3 – Establishing Immunization Requirements
3. APhA-ASP strongly affirms that it is the professional responsibility of all health care personnel to receive CDC-recommended immunizations and supports their employers mandating immunizations as a condition of employment, volunteering, or training, except when medically contraindicated.

The Reference Committee recommends to ADOPT Issue 2016.3.3 of the Committee Report, and I so move.

2016.4 – Increasing Patient Access to Pharmacist-Prescribed Medications
1. APhA-ASP encourages legislative and regulatory changes that would enable pharmacists, with appropriate training and working as integral members of the health care team, to assess the patient and prescribe certain medications such as those for contraception, tobacco cessation, and international travel.

The Reference Committee recommends to ADOPT Issue 2016.4.1 of the Committee Report, and I so move.

2016.4 – Increasing Patient Access to Pharmacist-Prescribed Medications
2. APhA-ASP encourages the development of sustainable and financially viable compensation models for pharmacist-prescribed medications.

The Reference Committee recommends to ADOPT Issue 2016.4.2 of the Committee Report, and I so move.

2016 APhA-ASP NEW BUSINESS REVIEW COMMITTEE REPORT

The APhA-ASP New Business Review Committee did not convene during the APhA2016 Annual Meeting & Exposition as no new business was submitted.