

APhA-ASP

Proposed Resolutions for Region 6

Policy Proposal Forum



PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: University of Louisiana Monroe College of Pharmacy

Proposed Resolution Title/Topic: *Professional Identity Formation of Student Pharmacist*

Proposed wording (desired action(s)):

- *APhA-ASP urges colleges and schools of pharmacy to identify and develop programs and activities that intentionally promote student pharmacist professional identity formation, consistent with the current and future direction of the pharmacy profession.*
- *APhA-ASP urges colleges and schools of pharmacy faculty and educators to intentionally develop and design “non-traditional” learning experiences that promote and facilitate student pharmacist identity formation.*
- *APhA-ASP should continue to work with AACP to advance identity formation in student pharmacists and pharmacy academia.*

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

Professional identity dissociates into two main philosophies: the person-dependent perception of their roles within their profession and the belief of how others perceive them regarding role, focus, and responsibility. The second ideology pertains to the internalized emotions a person experiences, connecting and belonging to a broader community: how individuals think, feel, and act within the profession. Formation of the student pharmacist identity is vital in how students perceive their future roles and responsibilities within the workforce. Student pharmacist identity formation often begins simultaneously with professional pharmacy training, affected by various avenues: curriculum, educators, mentors, and role models. Pharmacists, once regarded as compounders or dispensers, are recognized now as clinicians or counselors due to the rising need for accessible healthcare providers. With the pharmacy profession everchanging, the diversity amongst practice fields, and the unintentional curriculum effects on students, the professional identity formations remain ununified, unrealistic, and non-consistent with the current pharmacy field. When student pharmacists transition into the workforce, their professional identity places them in a predisposing position to experience being undervalued and underutilized. The effects seen with students transitioning into residency education where, specifically, the unintentional curriculum effects on students are associating factors with higher rates of burnout and cynicism. APhA-ASP should urge colleges and schools of pharmacy to identify and develop programs, activities, and nontraditional curriculum learning experiences intentionally promoting professional identity formation. For example, nontraditional learning exercises designed for students to reflect on the pharmacist role would intentionally promote student pharmacist professional identity formation. Programs and activities developed with this intention can assist student pharmacist in finding and developing a professional identity that is consistent with the current and future direction of the pharmacy profession. By doing this, colleges and schools of pharmacy will cultivate a culture of career readiness amongst their graduates by inherently fostering the necessary tools to acknowledge and buffer commonly encountered workplace stressors facing the next generation of pharmacists.

Resources:

Jonathan C., David A., Janet C. Student pharmacists' perceptions of their professional identity. *Currents in Pharmacy Teaching and Learning*. 2022;14: 6: 712-719 <https://doi.org/10.1016/j.cptl.2022.06.001>.

Noble C., McKauge L., Clavarino A. Pharmacy student professional identity formation: a scoping review. *Integr Pharm Res Pract.* 2019;8:15-34 <https://doi.org/10.2147/IPRP.S162799>.

Are there any adopted resolutions currently on the books related to this Proposed Resolution?

Yes ☒ No ☐

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

1994.10 – Professionalization of Student Pharmacists

“APhA-ASP encourages schools and colleges of pharmacy to develop policies and programs that assist in the development of professionalism. APhA-ASP should continue to work with AACP to advance professionalism in student pharmacists and academia.”

Although the latter part should remain, the pharmacy profession, in its breakthrough expansions, has evolved beyond students requiring professionalism development. Most colleges and schools of pharmacy promote the individual aspects of professionalism with the curriculum and co-curricular; however, a student with a professional mindset still lacks the needed resources when transitioning into the workforce or a residency. Just because a student might be able to “look and speak” the role of a pharmacist, much of what professionalism is bound to, students should transition into the profession with an identity formulated through their pharmacy school curriculum. Professional identity formation encompasses professionalism by taking the “look and speak” narrative and evolving this concept into “think, feel, and act.”

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APhA Academy of Student Pharmacists

Midyear Regional Meeting:

Proposed Policy Resolution Form

Region #: 6

Proposing APhA-ASP Chapter: University of Kansas
School of Pharmacy

Proposed Resolution Title/Topic:

Fentanyl Test Strips Decriminalization

Proposed wording (*desired action(s)*):

APhA-ASP supports legislation to decriminalize fentanyl test strips and exclude fentanyl test strips under the definition of drug paraphernalia.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

Harm reduction strategies have been a major focus of both the University of Kansas School of Pharmacy and the Kansas Pharmacist Association. Fentanyl test strips (FTS) are one such part of harm reduction strategies. At the state level, both our state pharmacist organization and school have worked to help pass legislation to decriminalize fentanyl test strips. Additionally, this legislation excludes fentanyl test strips from the definition of “drug paraphernalia”. This was passed and signed into law on April 28th, 2023 inside Senate Bill 174.

One of the current presidential administration’s focuses is drug policy priorities including evidence-based harm reduction efforts. Fentanyl test strips were mentioned with the push for increased usage of drug safety checking support services. Within the currently adopted resolutions of APhA-ASP, drug test strips have not been covered. Fentanyl test strips provide a method to prevent opioid overdoses. This can be done via the identification of fentanyl in legal substances, illicit drugs, and counterfeit drugs.

Multiple states other than Kansas have already decriminalized FTS with noticeable results. A study involving a community-based FTS distribution program in North Carolina found that 81% of those with access to FTS routinely tested their drugs before use.

Nicholas C. Peiper, Sarah Duhart Clarke, Louise B. Vincent, Dan Ciccarone, Alex H. Kral, Jon E. Zibbell. Fentanyl test strips as an opioid overdose prevention strategy: Findings from a syringe services program in the Southeastern United States. Int J Drug Policy. Sep 28, 2018.

Those with a positive test result were five times more likely to change their drug use behavior to reduce the risk of overdose. In a Rhode Island study of young adults who reported using heroin, cocaine, or illicitly obtained prescription pills, “Receiving a positive [fentanyl] result was significantly associated with reporting a positive change in overdose risk behavior.”

Please use only one form for each proposed resolution. Forms must be submitted by the Chapter via email to the APhA-ASP Regional Delegate 4 weeks prior to the start of the Midyear Regional Meeting.



Krieger MS, Goedel WC, Buxton JA, et. al. (2018). *Use of rapid fentanyl test strips among young adults who use drugs. Int J Drug Policy, In Press Oct. 2018.* 7 Ciccarone D, Ondocsin J, Mars SG. (2017). *Heroin uncertainties: Exploring users' perceptions of fentanyl-adulterated and - substituted 'heroin.'* *Int J Drug Policy*, 46: 146-155

Identification of fentanyl can help users avoid the drug and prevent a potentially deadly overdose. In 2021 there were 106,699 drug overdose deaths within the United States with opioids being the 75.4% of the deaths. Increasing access to harm prevention strategies such as fentanyl test strips will decrease patient harm, decrease mortality, and decrease healthcare costs due to drug overdoses.

Pros:

- Increasing access to FTS can reduce potential opioid overdoses.
- Providing additional harm reduction strategies such as FTS helps reduce the healthcare burden by lowering the number of opioid overdoses. This would lead to cost savings in both healthcare, emergency, and police services.
- FTS are deemed as a low-cost, high-impact tool for opioid users. Because of their low cost, many opioid users see this as a way to safely use opioids due to their accuracy with small amounts.
- The usage of FTS can alter user's substance use behaviors to help reduce overdose risk.
- With the decriminalization of FTS there will be an avenue of being able to disburse the test strips at pharmacies throughout the nation. This would provide a major access point for people to get FTS. This would provide a twofold benefit of being both a revenue stream while also improving the safety of the local community.

Cons:

- The decriminalization of FTS could be incorrectly misconstrued as supporting illicit substances usage.
- Decriminalizing FTS could be argued as causing an increase in substance use due to increased safety in using illicit substances or counterfeit drugs.
- FTS decriminalization can be viewed as choosing to enable continued use of opioids over pushing for complete recovery. This could lead to an increase in addiction for users leading to increased healthcare costs with rehabilitation services.
- Currently, FTS are not FDA approved. In addition, these devices only test for the presence of fentanyl and cannot identify the amount of fentanyl present in a substance.
- Cost, supply, and access to FTS can be a barrier to patient safety. If these products are not readily available, at a reasonable price in convenient locations, people will not use them.

Centers for Disease Control and Prevention. (2023, August 22). *Drug overdose deaths*. Centers for Disease Control and Prevention.
<https://www.cdc.gov/drugoverdose/deaths/index.html>

Please use only one form for each proposed resolution. Forms must be submitted by the Chapter via email to the APhA-ASP Regional Delegate 4 weeks prior to the start of the Midyear Regional Meeting.

Kansas Legislative Session. (2023). *The Kansas Department of Health and Environment and the Kansas ...* Joint Testimony from KDHE and KDADS.
http://www.kslegislature.org/li/b2023_24/committees/ctte_h_hhs_1/misc_documents/download_testimony/ctte_h_hhs_1_20230215_01_testimony.html

Kansas State Legislature. (2023). *SB 174*. Bills and Resolutions |.
https://www.kslegislature.org/li/b2023_24/measures/sb174/

Kohli, Anisha. Time Magazine. (2023, May 5). *How Conservatives Are Changing Their Mind on Legalizing Fentanyl Test Strips*. <https://time.com/6277480/legalizing-fentanyl-test-strips/>

The White House. (2022). *National Drug Control Strategy - The White House*. National Drug Control Strategy.
<https://www.whitehouse.gov/wp-content/uploads/2022/04/National-Drug-Control-2022Strategy.pdf>

Are there any adopted resolutions currently on the books related to this

Proposed Resolution? Yes ☐ No ☒

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

N/A

Author of Proposed Resolution: Quinton Burger P3 Student at KU School of Pharmacy

Author Phone Number: 785-829-1267

Author Email Address: quinton_nb@hotmail.com

Please use only one form for each proposed resolution. Forms must be submitted by the Chapter via email to the APhA-ASP Regional Delegate 4 weeks prior to the start of the Midyear Regional Meeting.





PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: University of Oklahoma Health Sciences Center College of Pharmacy

Proposed Resolution Title/Topic: Translation Services Education (APhA-ASP Resolution 2023)

Proposed wording (*desired action(s)*):

1. APhA-ASP recommends the formation of multi-language medical terminology elective courses for those interested in serving patients with limited English proficiency.
2. APhA-ASP calls on APhA to develop a medical terminology translation resource and provide education on its use.
3. APhA-ASP urges colleges of pharmacy to include education for students on how to work with a translator in a health-care setting.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

This policy was designed to bring attention to the prevalence of language barriers that exist among pharmacists and patients^{1,2}. During one's career as a pharmacist, they will likely serve patients with limited English proficiency. In these cases, a language translation service must be accessed². This is essential to the patients' understanding of their prescriptions and ability to participate in informed consent³. Informed consent of medical treatment and services is a human right³. It is the responsibility of the pharmacist to utilize the services necessary to inform the patient^{3,4}. Translation services may be in the form of a certified translator, an internet translator, or a terminology databank. Proper training and repetitive use of these services will promote efficiency and comfortability, which will improve patient experience and quality of care⁴.

There are bi-lingual students in pharmacy who may not know medical terminology in their second language. The formation of an elective course with a focus in medical terminology for that language could be beneficial to these students and others^{2,4}. This course could be formed by individual colleges/schools of pharmacy at their discretion. It could potentially be developed and offered through APhA as well, with the possibility to grow into a CE opportunity for licensed pharmacists. This is the motivation behind part one of this action.

Many large chain pharmacies have their own translation services and protocol for use^{5,6}. Some smaller pharmacies may also have designated resources as a part of their standard operating procedures. In these cases, early education on existing programs could be beneficial to students. In many pharmacy environments, generic internet translators (i.e., google translate), are the default resource⁷. Development of a universal translation resource and education on its functions would benefit patient care by creating a standardized practice among the profession. This resource could be as simple as a database or as complex as an AI system. APhA was called upon to fund this development because they possess the resources to accomplish this action. It could be offered to APhA members as another wonderful benefit encouraging APhA membership. This is the rationale behind part two of this action.

There are numerous resources with information regarding proper technique and etiquette for working with a certified translator^{8,9}. Introduction to these techniques early in pharmacy training will assure proper use is uniformly demonstrated in the field². This does not require the addition of a course. It could be an additional lecture/s within an existing class (i.e., Clinical Communications or Drug Information Systems). These points led to the development of part three of this action.

References

1. United States Census Bureau. (2020, April 8). *People that Speak English Less Than “Very Well” in the United States*. Website. <https://www.census.gov/library/visualizations/interactive/people-that-speak-english-less-than-very-well.html>
2. Mueller, R., (August 25, 2023). *Importance of Language Skills as a Pharmacist*. Website. <https://blog.cuw.edu/language-skills-pharmacist-2163-3/>
3. Wick, J.Y., Zanni, G. R., (2001, July/August). Informed Consent: What Every Pharmacist Should Know. *Journal of American Pharmaceutical Association*, 41(4), 523-527. <https://www.japha.org/action/showPdf?pii=S0003-0465%2815%2933089-5>
4. Arora, D. S., Mey, A., Maganlal, S., & Khan, S., (2015). Provision of pharmaceutical care in patients with limited English proficiency: Preliminary findings. *Journal of research in pharmacy practice*, 4(3), 123-128. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4548430/pdf/JRPP-4-123.pdf>
5. Walgreens. (2023, January 25). *Access to Services*. Website. <https://www.walgreens.com/topic/information/access-to-services.jsp>
6. CVS. (2023). *CVS Pharmacy Spoken Rx Labels*. Website. <https://www.cvs.com/content/pharmacy/spoken-rx#:~:text=%E2%80%99CHI!,CVS%20Pharmacy%C2%AE%20mobile%20app>.
7. Hwang, K., Williams, S., Zucchi, E., Chong, T. W. H., Mascitti-Meuter, M., LoGiudice, D., Goh, A. M. Y., Panayiotou, A., & Batchelor, F. (2022). Testing the use of translation apps to overcome everyday healthcare communication in Australian aged-care hospital wards-An exploratory study. *Nursing open*, 9(1), 578–585. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8685780/pdf/NOP2-9-578.pdf>
8. The National Council on Interpreting in Health Care. (November 2003). *Guide to Interpreter positioning in Health Care Settings*. Website. <https://www.ncihc.org/assets/documents/workingpapers/NCIHC%20Working%20Paper%20-%20Guide%20to%20Interpreter%20Positioning%20in%20Health%20Care%20Settings.pdf>
9. Association of American Medical Colleges. (2023). *Guidelines for Use of Medical Interpreter Services*. Website. <https://www.aamc.org/media/24801/download>

Are there any adopted resolutions currently on the books related to this Proposed Resolution? Yes ___ No X

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

Author of Proposed Resolution: Hunterlyn Alderson

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Author Email Address: hunterlyn-alderson@ouhsc.edu

PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter:

Southwestern Oklahoma State University College of Pharmacy

Proposed Resolution Title/Topic:

Implementation of Dispensing At-Home Medication Disposal Packets at Every Opioid Point of Sale. (APhA-ASP Resolution 2023.1)

Proposed wording (desired action(s)):

APhA-ASP calls on all open-door pharmacies to dispense at-home medication disposal packets and disposal counselling for all opioid point-of-sales.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

Opioid medications, both prescription and illicit, have contributed to a widespread public health issue characterized by addiction, overdose, and environmental contamination. At-home medication disposal kits have emerged as essential tools in addressing the opioid crisis and promoting responsible opioid use. Flushing or tossing opioids in the trash can lead to environmental hazards, potentially contaminating water sources and harming aquatic ecosystems. Medication disposal kits such as "DisposeRx" and "Deterra" offer a safer alternative to flushing opioids down the drain.

DisposeRx¹ has medication disposal education material to assist with counselling while having English, Spanish, and French product instructions². The powder inside of the packet is listed on the FDA list of ingredients safe to use in medications.

Deterra³ employs organic activated carbon within a plant-based disposal packet, along with medication disposal education materials available in both English and Spanish⁴. According to OSHA regulatory standards, Deterra is categorized as nonhazardous.

At-home disposal packets are convenient and promote prompt disposal of unused opioids, decreasing the likelihood of these medications being left in medicine cabinets where they might be misused. Providing at-home disposal packets offers an educational opportunity for healthcare providers to instruct patients on proper disposal and raise awareness about the risks of opioid misuse and the importance of safe disposal.

References:

1. Supporting research. DisposeRx, Inc. (2023, August 9). <https://www.disposerx.com/supporting-research/>
2. All materials. DisposeRx, Inc. (2023a, October 4). https://www.disposerx.com/all_materials/
3. Safe at-home medication disposal: Detera Drug Disposal System. DeteraSystem.com. (2023, October 3). <https://deterasystem.com/>
4. At-home medication disposal resources: Detera system. DeteraSystem.com. (2023a, July 21). <https://deterasystem.com/resources/>

**Are there any adopted resolutions currently on the books related to this
Proposed Resolution?
Yes___ No_X_**

**If yes, please provide the number and title of the adopted resolution(s) as well as
your rationale for the addition of this Proposed Resolution:**

Author of Proposed Resolution: Melinda Setzer

Author Phone Number: (580) 512-1230

Author Email Address: Setzerm@student.swosu.edu

PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: University of Missouri – Kansas City

Proposed Resolution Title/Topic: Improving Pharmacy Student Education on Third-Party Rejection Resolution

Proposed wording (*desired action(s)*):

APhA-ASP encourages Schools/Colleges of Pharmacy to increase education of third-party rejection resolution during the didactic learning section of the curriculum.

Background Statement:

Every year, pharmacy students throughout their education are sent into experiential learning opportunities where they may get to experience dreaded third-party rejections (TPRs), more casually known as insurance rejections. Some students may get the opportunity to be educated by their preceptor on what these rejections are and how to effectively resolve them. However, with the current state of pharmacy, taking into consideration the time limitations of Pharmacists between medication verification, point-of-care testing, and immunizations, there is often no time left over for this education to happen. Unfortunately, this same pattern is apparent throughout the entirety of the American healthcare system, which leads to every healthcare practitioner passing off these responsibilities to another until it eventually falls on the shoulders of the patient. This is both unfair and irresponsible of the healthcare system as the patients often have no understanding of how insurance coverage works, nor education on how to go about resolving them. Once graduated and in the workforce, pharmacists are often tasked with resolving TPRs or knowing how to effectively delegate them as a last resort before those responsibilities are placed on the patient. This is why it is of the utmost importance that we educate pharmacy students on how to efficiently resolve TPRs, we can be proactive in the next generation of pharmacists as there will likely not be an end to TPRs. The National Institute of Medicine has an article titled “Prescription Drug Claim Rejections for Nursing Home Residents Under Medicare Part D” that details the extent to which TPR’s of many kinds, but particularly Medicare Part D are increasing and thus emphasizing the rate at which this kind of education is necessary for pharmacy students. A study that was conducted by the American Journal of Pharmaceutical Education was published that assessed the confidence and understanding of students P1-P3 surrounding the resolution of TPRs. They implemented a virtual education program as their independent variable, and their findings suggested that all classes of students (P1-P3) showed significant improvement in their understanding and confidence regarding TPR resolutions, with P1s showing the most improvement. Overall, anyone within the realm of Pharmacy will tell you, and the literature supports that increased education on TPRs, and their resolutions can increase our impact on patient care and improve patient relationships throughout our communities. This can be implemented in a variety of ways, I think even assigning the virtual training as stated in the aforementioned study as a homework assignment that progresses for a few weeks would be manageable and would not require information to be cut out to make room. It is for these reasons that APhA-ASP at UMKC urges Schools/Colleges of Pharmacy to increase educational content of third-party rejection resolution for pharmacy students during the didactic learning section of their education.

Please use only one form for each proposed resolution. Forms must be submitted by the Chapter via email to the APhA-ASP Regional Delegate the Friday prior to the start of the Midyear Regional Meeting. Contact your Regional Delegate for questions.

Resources:

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2714733/>
- Insurance Adjudication Simulation Across Multiple Institutions and Levels of Learners
Heidi N. Eukel, Chelsey Llayton, Apryl N. Anderson, Jordan M. Ballou, Krista L. Donohoe, Aaron T. Hunt, Brittney A. Meyer, Lauren M. Caldas
American Journal of Pharmaceutical Education Oct 2022, 86 (7) 8766; DOI: 10.5688/ajpe8766

Are there any adopted resolutions currently on the books related to this Proposed Resolution?
Yes___ No_X__

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

Author of Proposed Resolution: Daphne Boggs, PharmD Candidate - 2025

Author Phone Number: 417-655-6772

Author Email Address: dmbdf4@umsystem.edu

PROPOSED RESOLUTION FORM - FINAL

Region #: 6

Proposing APhA-ASP Chapter: University of Arkansas for Medical Sciences

Proposed Resolution Title/Topic:

Addition of Financial Literacy Courses in Pharmacy Curriculum

Proposed wording (*desired action(s)*):

APhA-ASP supports the addition of an elective personal financial literacy course to the didactic coursework for schools and colleges of pharmacy.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

The American Association of Colleges of Pharmacy performed a survey released in 2018 that found that 85% of pharmacy students use student loans to pay for school. The same survey found that the national average of borrowed money at the time of graduation totaled \$217,542. With such high borrowing and interest rates, particularly a 7.05% federal loan rate, learning to budget loans and avoid over-borrowing while attending pharmacy school can significantly benefit our student pharmacists. The importance for students to be prepared to handle the financial stress of repaying loans and the impact that has on an individual or family, and even more, is imperative.

The need for effective money management skills goes far beyond student loan debt for many pharmacists, especially those who are interested in independent ownership. Understanding 401(k)s and IRAs, along with other investment or retirement options, is vital to ensure that future pharmacists remain financially stable. With a median salary in the US of \$124,170, pharmacists are in the top 5% of earners in the country, and without basic knowledge of financial literacy, significant money-handling mistakes could occur. Therefore every pharmacy school should, at a minimum, have an elective financial literacy course offered during the didactic portion of their curriculum.

Pros:

- **Lack of MBA Dual Degree Programs**
 - Pharmacy colleges that do not offer an MBA as a dual degree are especially in need of a financial literacy course as an elective. This proposal would allow schools to expand their student's preparedness to enter the workforce.

Cons:

- **Faculty Requirements**
 - Implementing a financial literacy course is futile without a competent professor to teach the course. Colleges of pharmacy would need to hire a faculty member with the capacity to teach a course of this beneficial caliber.
- **Programs with dual-degree MBA options**
 - An MBA is great for students looking to buy/run their own pharmacy. However, most students need more funds for this dual degree, often perpetuating the problem of increasing student debt. If a financial literacy course was offered as a part of the curriculum, all students could have access to learning how to make informed financial decisions personally and professionally.

Sources:

<https://www.studentloanplanner.com/pharmacy-school-debt/>

<https://graphics.wsj.com/what-percent/>

<https://money.usnews.com/careers/best-jobs/pharmacist/salary>

<https://studentaid.gov/understand-aid/types/loans/interest-rates>

PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: St. Louis College of Pharmacy at the University of Health Sciences and Pharmacy in St. Louis

Proposed Resolution Title/Topic: Over-The-Counter Birth Control Education & Access

Proposed wording (*desired action(s)*): APhA-ASP supports pharmacist and student pharmacist involvement in over-the-counter (OTC) birth control education to increase knowledge and awareness of the product's availability. This education may include, but is not limited to, proper use, misuse, contraindications, and potential side effects. APhA-ASP also supports efforts to increase OTC birth control access.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):
Opill, an oral norgestrel tablet, was FDA approved in July of 2023 as an OTC product. However, norgestrel has been approved as a prescription drug for the use of birth control since 1973. The presence of norgestrel on the market for fifty years has allowed for sufficient studies regarding safety and efficacy, leading to its new designation as an OTC product. Because of this new designation, it is imperative that patients receive proper education and access to health-information resources before use. Pharmacists are one of the most accessible healthcare professionals in the nation who are experts at providing patient counseling. Pharmacists, and student pharmacists, should utilize this established platform to promote education and eventual access to the newly FDA-approved OTC birth control pill.

Pros:

- Education about OTC access to birth control can reduce barriers to access millions of patients may have.
- Pharmacists already counsel on prescription birth control, so it would be an easy transition to counsel on OTC birth control.
- Consumer information suggests reading the Drug Facts and Consumer Information Leaflet before taking the product and each purchase thereafter. Education can improve adherence and knowledge about the medication.
- Proper patient education and counseling on an OTC product can potentially lead to reduction in healthcare costs related to family planning.
- Creating rapport through patient counseling builds a foundation for a trustworthy patient-provider relationship.

Cons:

- Additional responsibility and increased workload for community pharmacists in an already busy and fast-paced environment.
- Time consuming for the patient.
- Initial barriers in patient understanding might be present, as a drug like norgestrel for birth control has never been approved OTC.

References:

1. Opill (0.075 mg Oral Norgestrel Tablet) Information. FDA. Accessed 10/02/23.
<https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/opill-0075mg-oral-norgestrel-tablet-information>
2. American Society of Health-System Pharmacists. ASHP guidelines on pharmacist-conducted patient education and counseling. *Am J Health-Syst Pharm*. 1997; 54:431–4
3. Fisher R. C. (1992). Patient education and compliance: a pharmacist's perspective. *Patient education and counseling*, 19(3), 261–271. [https://doi.org/10.1016/0738-3991\(92\)90145-9](https://doi.org/10.1016/0738-3991(92)90145-9)
4. FDA Approves First Nonprescription Daily Oral Contraceptives. *FDA*. Published 13 July 2023.
<https://www.fda.gov/news-events/press-announcements/fda-approves-first-nonprescription-daily-oral-contraceptive>

Are there any adopted resolutions currently on the books related to this Proposed Resolution?

Yes___ No__X_

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

Author of Proposed Resolution: Holly Johnston and Emily Row

Author Phone Number: (217) 520-3337 & (217) 781-1258

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PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: University of Houston College of Pharmacy

Proposed Resolution Title/Topic: Developing Entrepreneurial Skills in Rural Pharmacy

Proposed wording (*desired action(s)*):

APhA-ASP encourages colleges of pharmacy to incorporate entrepreneurship with an emphasis in skills associated with rural pharmacy practice across curriculums to address health disparities.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

There has been much evolution in pharmacy practice since its inception many years ago. With this evolution came a change in curricula, with degrees becoming more advanced and highly specialized. Many institutions are largely urban or tied to academic medical centers. While the benefits from this advancement in education are clear, there is one aspect of the profession often overlooked. While it may be unglamorous to some, the importance of rural based practice sites should not go unnoticed. There has been a shortage of healthcare providers in rural communities and many Americans have limited access to healthcare. In the past, rural community pharmacies have played an important role in healthcare delivery and health education for their communities. About 1 in 5 Americans live in rural areas and since 2010, there have been 136 rural hospital closures around the country¹. With this glaring rural pharmacy workforce shortage, it is the duty of the pharmacist to try and bridge this gap.

Pharmacists can provide much needed services to rural communities with little access to healthcare. To effectively combat this issue, the pharmacy profession needs to reinvent itself and make strides in the associated curriculum, as only 3 accredited institutions provide programs associated with rural health². It is crucial that student pharmacists are equipped with the requisite skills to better serve their respective communities, regardless of size. There are many challenges associated with working in sparsely populated areas, such as limited reimbursement, large overhead, and higher drug costs associated with low volume. While troublesome, these challenges can be remedied with the proper preparation and strategies provided by the proposed training.

The proposal aims to prepare student pharmacists with baseline understanding on how to operate in rural areas as both business owners and healthcare providers. Students will have the opportunity to develop skills in entrepreneurship, management, and marketing. Educational activities will aim at expanding students' understanding in entrepreneurial competencies such as understanding financial statements and building confidence in financial decision-making. Student pharmacists will examine the 340B Drug pricing Program and learn how pharmacies can claim reimbursement for their varied clinical services, including managing and treating chronic diseases, providing health screenings, tobacco cessation, patient education, immunization, and offering medical equipment.

As an interdisciplinary topic, collaboration with the business school will offer students with education in financial literacy and connections with small business development centers. It is highly encouraged to offer students the opportunity to engage with pharmacy entrepreneurs and hear about their career development and pathways and the tools needed to succeed in this setting. The curriculum fosters creativity and innovation of a business plan that moves the profession forward. At the end of the semester, students can work on a final project to develop a sustainable business plan offering a service and/or product. Incorporating this proposal into the curricular will equip student pharmacists with the knowledge, skills, and abilities needed to support the development and growth of new rural business ventures and addressing the nation's health disparities by promoting rural pharmacy practice.

Please use only one form for each proposed resolution. Forms must be submitted by the Chapter via email to the APhA-ASP Regional Delegate the Friday prior to the start of the Midyear Regional Meeting. Contact your Regional Delegate for questions.

[1] ctorres drupal. AHA report: Rural hospital closures threaten patient access to care | AHA News. Accessed October 17, 2023. <https://www.aha.org/news/headline/2022-09-08-aha-report-rural-hospital-closures-threaten-patient-access-care>

[2] Joyner PU, O'Connor SK, Thrasher KA, Blouin RA. Addressing Rural Health Disparities Through Pharmacy Curricula. *Am J Pharm Educ*. 2012;76(10):188. doi:[10.5688/ajpe7610188](https://doi.org/10.5688/ajpe7610188)

Are there any adopted resolutions currently on the books related to this Proposed Resolution?
Yes___ No_X__

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

Author of Proposed Resolution: _____Annie Man_____

Author Phone Number: _____832-298-8928_____

Author Email Address: _____aman@cougarnet.uh.edu_____



PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: Harding University College of Pharmacy

Proposed Resolution Title/Topic: Pharmacogenomics (APhA-ASP Resolution 2014.1)

Proposed wording (*desired action(s)*):

APhA-ASP supports the development of pharmacy programs to properly train student pharmacists in pharmacogenomics by offering optional certificate training programs.

Background Statement (defend your proposed resolution including the reasons for the action(s) / pros and cons / references or resources / supplementary research):

According to 2014.1.2, "APhA-ASP promotes pharmacists as the primary member of the health care team responsible for pharmacogenomic services, including but not limited to, interpreting and applying test results, developing individualized medication treatment plans in collaboration with prescribers, and serving as a resource to prescribers, patients, and other members of the health care team." A Pharmacogenomics Certificate Program integrated into pharmacy school curriculums would allow student pharmacists to fulfill this role as the primary member of the health care team responsible for pharmacogenomic services. Certificate programs in pharmacogenomics teach not only the principles of pharmacogenomics but also its practical application to optimize medication regimens and to promote "precision" or "personalized" medicine. In many diseases, such as cancer and depression, drug response among patients is variable, and therapy failure is common (U.S. Food & Drug Administration, 2018). "Going forward, there is a growing body of evidence that pharmacogenomics will be an expanding component of evidence-based precision medicine" (Relling & Evans, 2015). Pharmacogenomics is the future of pharmacy, and it is vital that student pharmacists are educated in this area upon graduation through a Pharmacogenomics Certificate Program.

References

Relling M.V., & Evans W.E. (2015). Pharmacogenomics in the Clinic. *Nature*, 526(7573), 343-50.
[10.1038/nature15817](https://doi.org/10.1038/nature15817)

U.S. Food & Drug Administration. (2018, September 27). *Precision Medicine*. <https://www.fda.gov/medical-devices/in-vitro-diagnostics/precision-medicine>

Are there any adopted resolutions currently on the books related to this Proposed Resolution? Yes ☒ No ☐

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

2014.1.5 states, "APhA-ASP encourages all schools and colleges of pharmacy to incorporate pharmacogenomics throughout the curriculum." I believe that this adopted resolution is vague as it does not describe how schools and colleges of pharmacy should incorporate pharmacogenomics throughout the curriculum. Promoting a Pharmacogenomics Certificate Program would ensure that all graduating student pharmacists are knowledgeable and well educated in this area of pharmacy that is valued by APhA-ASP.

Author of Proposed Resolution: Kylie Huckaba

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**POLICY PROPOSAL FORUM
SUMMARY REPORT**

APhA Academy of Student Pharmacists
Midyear Regional Meetings

APhA-ASP
AMERICAN PHARMACISTS ASSOCIATION
ACADEMY OF STUDENT PHARMACISTS



PROPOSED RESOLUTION FORM

Region #: 6

Proposing APhA-ASP Chapter: Texas Tech University Jerry H. Hodge School of Pharmacy

Proposed Resolution Title/Topic: *Opioid Reversal Agents Training*

Proposed wording (*desired action(s)*): *APhA-ASP urges that all pharmacy personnel be trained on the use of opioid reversal agents.*

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

The opioid epidemic in the United States has been an ongoing challenge and opioid overdose-related deaths are at an all-time high, creating the need to mitigate this public health crisis. One way to combat this issue is to ensure that individuals at the frontline of healthcare, specifically pharmacy personnel, are equipped to effectively respond to opioid overdoses. If even a brief education of bystanders was seen to improve public recognition of an opioid overdose², then training pharmacy staff in recognition and use of opioid reversal agents could lead to a notable increase in the number of overdose reversals. There could be barriers in the way, such as financial burdens on pharmacies, having to standardize training strategies nationwide & perhaps some initial resistance and opposition. However, it is vital to invest in & implement opioid reversal agent training programs for all pharmacy personnel to contribute to reducing the devastating impact of the opioid epidemic nationwide.

References:

1. Lyden, J., & Binswanger, I. A. (2019, April). The United States opioid epidemic. In *Seminars in perinatology* (Vol. 43, No. 3, pp. 123-131). wb saunders.
2. Jones, J. D., Roux, P., Stancliff, S., Matthews, W., & Comer, S. D. (2014). Brief overdose education can significantly increase accurate recognition of opioid overdose among heroin users. *International Journal of Drug Policy*, 25(1), 166-170

Are there any adopted resolutions currently on the books related to this Proposed Resolution? Yes X No

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

2019.2 - Increased Access to Opioid Reversal Agents

3. APhA-ASP encourages all schools and colleges of pharmacy to incorporate opioid reversal agent training as a requirement prior to completion of the pharmacy program. APhA-ASP recommends this training includes a live, hands-on component, identification of high-risk patients, and recognition of the stigma surrounding opioid use disorder.

Rationale: The current resolution encourages that Student Pharmacists be trained, but it is important that all pharmacy personnel, not just the pharmacist, be trained on this matter, to be able to identify, treat, and educate patients appropriately.

Author of Proposed Resolution: Zainab Hamid

Author Phone Number: (682)582-4893

Author Email Address: zaihamid@ttuhsc.edu

Region #: 6

Proposing APhA-ASP Chapter: University of the Incarnate Word – Feik School of Pharmacy

Proposed Resolution Title/Topic: Advocate for the implementation of routine communication from manufacturers on the status of medications on backorder in pharmacies.

Proposed Wording (desired action(s)):

APhA-ASP encourages manufacturing companies to implement regular communication to pharmacies on the status of medications on backorder.

Background Statement (list reasons for the action(s) / pros and cons / references or resources):

Enhancing communication between drug manufacturers and pharmacies regarding medications facing backorders is essential for ensuring patient safety and healthcare system efficiency. Such collaboration can help prevent treatment interruptions, improve transparency in the supply chain, and enable timely alternatives or solutions to mitigate the impact of drug shortages. It is crucial to establish protocols and platforms that facilitate real-time information exchange and cooperative problem-solving to address this pressing issue in the pharmaceutical industry.

This will allow for patients to receive regular updates on the status of their medications on backorder.

Are there any adopted resolutions currently on the books related to this Proposed Resolution? Yes___ No_x__

If yes, please provide the number and title of the adopted resolution(s) as well as your rationale for the addition of this Proposed Resolution:

Author of Proposed Resolution: Victoria Lambert

Author Phone Number: (210)-373-6327

Author Email Address: vlambert@student.uiwtx.edu