



January/February 2024

The Journal

of the Pharmacy Society of Wisconsin

WORD OF THE YEAR

Serve



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2024 PSW LEGISLATIVE DAY

Wednesday, February 21, 2024

Monona Terrace Convention Center, Madison



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of the Pharmacy Society of Wisconsin

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UpFront: Oriented for Growth, Oriented to Serve

by Sarah Sorum, PharmD, CAE

I recently read an article about orienting an organization for growth during this time of increasing competition, increasing economic challenge, and general hurry. Growth-oriented associations share the following characteristics:

- Obsess about providing seamless, user-friendly experience to members
- Foster an engaged and member-centric staff
- Cultivate resilience and agility

When the speed and scale of disruptions (technology, politics, economics, and social norms) are unprecedented and pervasive, it is easy to spend your day putting out the fire in front of you. It is easy to make your email your to-do list. It is easy to get caught in a cycle of hurry.

But this is a time that calls for more strategy and a methodical approach to our work. We need to rely heavily on data-driven decision-making to create a clear plan of action and make choices. We need to embrace rapid change as transformative. Future-focused associations have a culture that supports experimentation and innovation, and staff and members need to have the bandwidth to think outside the box and pursue new opportunities aggressively.

The PSW Board of Directors is embracing this year with a growth mindset, taking a breath, and being strategic and future focused. I'm pleased to share a working draft of our strategic plan pillars.

PSW Goals: Destination 2030 – a Working Draft

Advocate for Pharmacist and Pharmacy Technician Roles in Healthcare

We support pharmacists in the

unrestricted use of professional judgement to act in the best interest of patients and act to preserve and expand pharmacists' roles in medication review and medication management. We actively engage with policymakers to remove barriers to innovation and creativity, including advocating for expanded roles for pharmacy technicians. We collaborate with community-based organizations and healthcare teams to address care gaps. We will ensure Wisconsin remains a hub for pharmacy leadership while supporting practice across state lines and across sites of care.

Elevate Care with Technology

We will catalyze discussion between members and across settings to share strong practices in technology implementation while preserving the essential human touch in patient care, leveraging technology to close equity gaps and increase access to pharmacists' services. We will provide education and resources and build partnerships to integrate technological advancements that streamline administrative processes and enhance our ability to care for patients.

Build a Sustainable, Healthy Pharmacy Workforce and Workplace

Through authentic storytelling, we will share our joy in the pharmacy profession, expanding the pipeline of students interested in STEM careers and healthcare. We will create pathways for pharmacy technicians to step into advanced roles, while bolstering a vibrant, skilled, and sufficient technician workforce. We will support the use of the Pharmacist's Fundamental Responsibilities and Rights, advocating for creating a just culture in

the workplace that emphasizes medication safety, human connection, and patients empowered to select the location they receive their pharmacy care. We will be a convener of pharmacy professionals to tackle challenges while feeling connected vs. alone and feeling safe vs. at risk for retaliation from an employer or colleagues.

Inspire Professional Growth

We will nurture and support professional identify formation and growth for pharmacists and pharmacy technicians at all career stages. We will connect with student pharmacists to prepare them for a rapidly evolving profession and the complex, culturally sensitive needs of their patients. We will amplify innovative practices, accelerate practice transformation through coaching, curate upskilling and reskilling opportunities for pharmacy technicians and pharmacists, and provide leadership development. Pharmacy technicians will be equitably included in engagement opportunities. We will strive to create an inclusive and welcoming environment that nurtures a strong sense of belonging among our members, recognizing our members are whole people that strive for work-life harmony.

With this future focus and with the support of members, I'm inspired to kick off another year of serving the Wisconsin pharmacy professionals so they can serve their patients.

Sarah Sorum is the Executive Vice President and CEO of the Pharmacy Society of Wisconsin in Madison, WI.



Letter From the Editors: Serving the Members of the Pharmacy Society of Wisconsin

by Michael W. Nagy, PharmD, Amanda Margolis PharmD, MS, BCACP

This year, *The Journal* conducted **26 peer reviews** by **54 peer reviewers**. Our peer review volunteers are committed to ensuring that high-quality articles are published in *The Journal*. Without volunteers serving PSW in this effort, *The Journal* would not be a successful publication. Please join us in thanking our 2023 peer reviewers for their time, effort, and dedication to improving the dissemination of great work being done in Wisconsin!

In addition to peer reviewers, the bimonthly publications require a significant level of other volunteer support. This includes our authors, peer review coordinators, and series coordinators, just to name a few. Lastly, we appreciate the guidance and insight the *JPSW* Editorial Advisory Committee consistently offers to improve *The Journal*. If you have an interest in joining the Editorial Advisory Committee, please submit a self-nomination during the next PSW committee cycle, as *The Journal* will be recruiting new members.

The Journal serves members of PSW through creation and maintenance of multiple resources to help writers statewide. Key resources to note are the statistic review series on JPSWI.org as well as the Emerging Writers Course. This course contains 8 modules, each 20-30 minutes long, that are designed for students, residents, and new writers interested in contributing to *JPSW* and other journals. We will be adding a new module in 2024 specifically targeting how to turn a project (e.g., residency, APPE, or quality improvement) into a publishable manuscript.

As the beginning of the year is often a time of reflection, we asked the PSW staff to share “what serve means to them” for their work for PSW. Responses from the *JPSW* editorial staff can be found on the following page.



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Thank you!

PSW Staff Reflections on the 2024 Word of the Year: *Serve*

Sarah Sorum's 2024 word of the year is **serve**. We asked PSW and *JPSW* staff to reflect on what the word serve means to them:

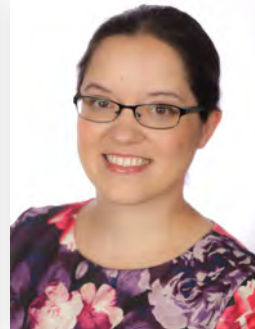
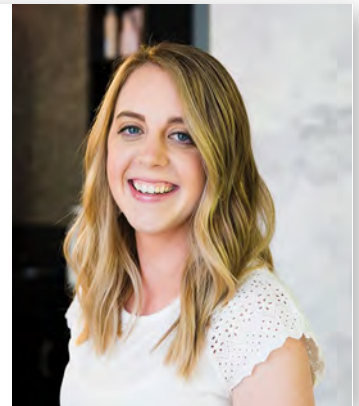


**Michael Nagy,
Associate Editor of *JPSW***

Serve means to put others first. No one gets to where they are without the support of others. In regard to PSW, my role would not exist without the members of the organization, whom it is my duty to support and serve through stewardship and advancement of *The Journal*.

Jennifer Pitterle, Copy Editor for *JPSW*

I am in total admiration of the way all contributors to *The Journal* work every single day--whether as instructors, clinical pharmacists, or researchers--to advocate for patients and for the pharmacy profession. Though I'm not a pharmacist myself, it's an honor to serve *The Journal* with colleagues who are so dedicated and passionate.

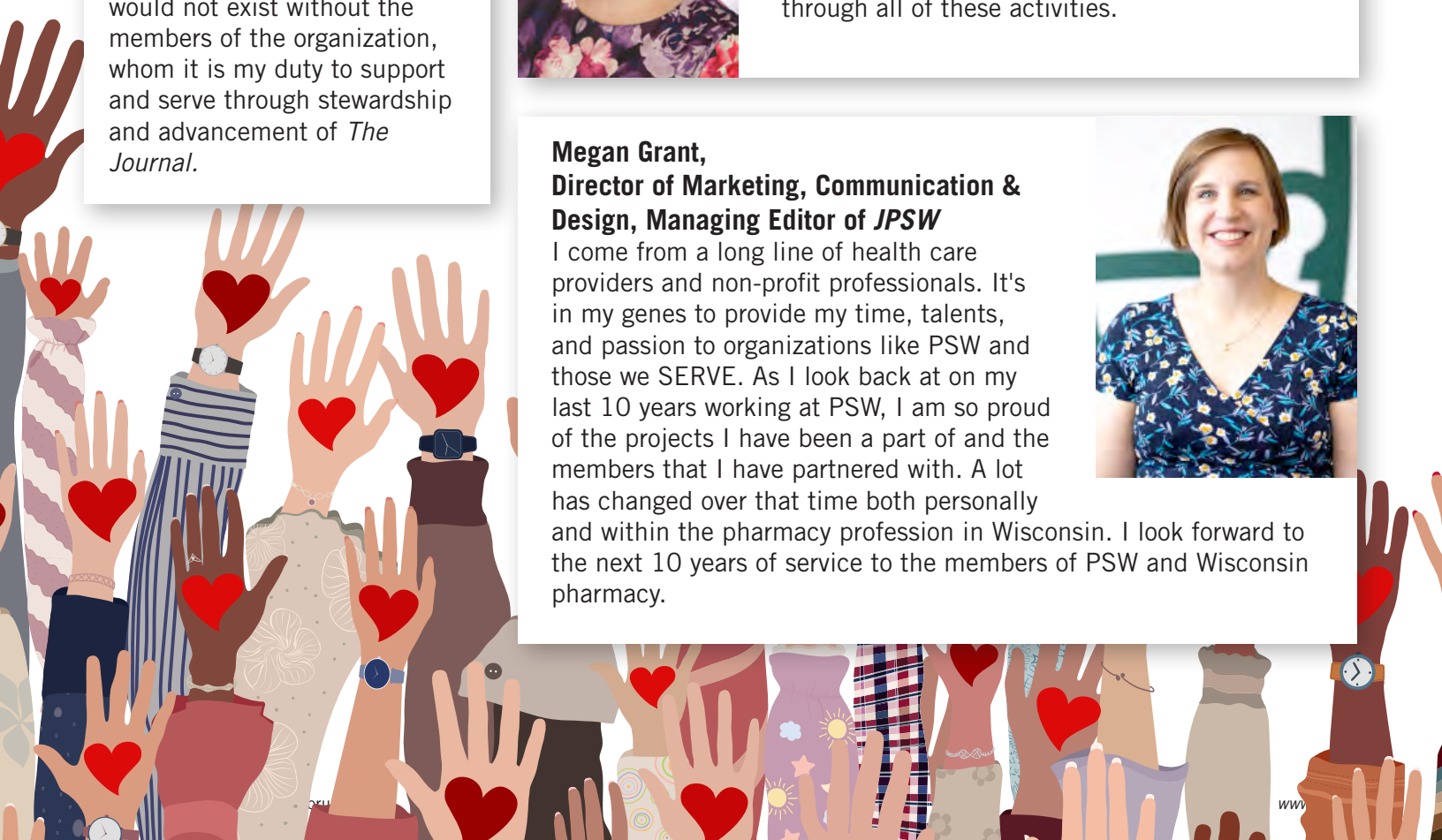


**Amanda Margolis,
Pharmacist Editor of *JPSW***

Like many of us, I have a variety of roles: pharmacist, teacher, editor, and mom. While these roles can sometimes seem disparate, service and helping others is a common thread through all of these activities.

**Megan Grant,
Director of Marketing, Communication &
Design, Managing Editor of *JPSW***

I come from a long line of health care providers and non-profit professionals. It's in my genes to provide my time, talents, and passion to organizations like PSW and those we SERVE. As I look back at on my last 10 years working at PSW, I am so proud of the projects I have been a part of and the members that I have partnered with. A lot has changed over that time both personally and within the pharmacy profession in Wisconsin. I look forward to the next 10 years of service to the members of PSW and Wisconsin pharmacy.



Kate Hartkopf,
Director of Team-based Care Strategies & Business Development
Managing Director, Wisconsin Pharmacy Foundation

The word "serve" immediately evokes in me the concept of servant leadership. A servant leader shares power, prioritizes the needs of others, and helps people develop and perform as highly as possible.¹ Since joining the PSW team this past year, one of our team norms has consistently resonated with me: our members are the purpose of our work.

I am deeply grateful for the opportunity to embrace the role of a servant leader within PSW and the Wisconsin Pharmacy Foundation. It is incredibly fulfilling to contribute to the growth and success of our fabulous volunteer members and the pharmacy profession. I'm appreciative of the trust and loyalty that emerge and develop within our motivated boards, committees, and task forces.

Furthermore, the privilege of servant leadership encourages my personal and professional growth. Continuously refining my skills and deepening my understanding of those I serve is a gift in itself. Serving alongside and for the members of PSW is a true honor.

1. Sendjaya S, Sarros JC. Servant Leadership: Its Origin, Development, and Application in Organizations. *Journal of Leadership & Organizational Studies*. 2002;9(2):57-64. doi:10.1177/107179190200900205



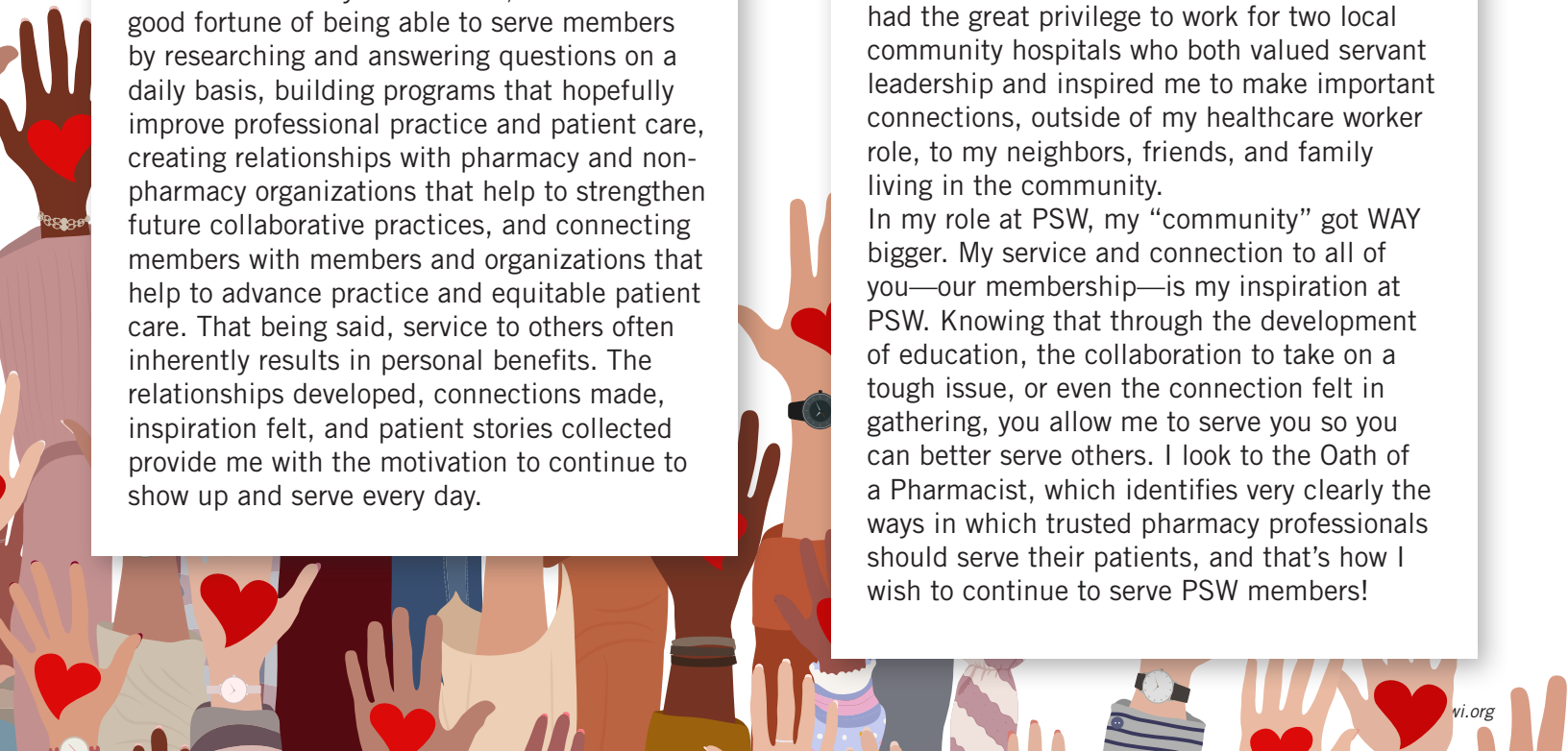
Kari Trapskin,
Senior Vice President
of Practice Transformation

To me, to serve means to provide for others without regard for the benefits that service provides oneself. As a PSW staff member, service to PSW members is the reason that we are here. In my role at PSW, I have the good fortune of being able to serve members by researching and answering questions on a daily basis, building programs that hopefully improve professional practice and patient care, creating relationships with pharmacy and non-pharmacy organizations that help to strengthen future collaborative practices, and connecting members with members and organizations that help to advance practice and equitable patient care. That being said, service to others often inherently results in personal benefits. The relationships developed, connections made, inspiration felt, and patient stories collected provide me with the motivation to continue to show up and serve every day.



Sarah Pagenkopf,
Director of Professional & Educational Services

As for many healthcare professionals, my desire to serve others led me to my current role. I actually wanted to be a teacher and started my undergraduate work with a plan to teach. I was inspired by an amazing professor who encouraged me to consider pharmacy. Before joining PSW, I had the great privilege to work for two local community hospitals who both valued servant leadership and inspired me to make important connections, outside of my healthcare worker role, to my neighbors, friends, and family living in the community. In my role at PSW, my "community" got WAY bigger. My service and connection to all of you—our membership—is my inspiration at PSW. Knowing that through the development of education, the collaboration to take on a tough issue, or even the connection felt in gathering, you allow me to serve you so you can better serve others. I look to the Oath of a Pharmacist, which identifies very clearly the ways in which trusted pharmacy professionals should serve their patients, and that's how I wish to continue to serve PSW members!





**Danielle Womack,
Vice President of Public Policy & Advocacy**

Jackie Robinson once said, “A life is not important except in the impact it has on other lives.” Serving, or being a servant to others, can seem counter to principles our society holds dear—those of freedom, liberty, and autonomy—but in my experience, serving is, in fact, the cornerstone of our community and what gives us humanity. Sometimes, serving is a deliberate willingness to do whatever is necessary to meet the needs of whomever or whatever the circumstances call for; sometimes, it’s just seeing a need, saying yes, and showing up. The impact we have on the lives of others through serving heartfelt, considerate connections and seeing a need when we care enough about those involved to take action—and doing it all while being authentic and caring in our approach—can profoundly impact those around us, our community, and our world.

**Kay Schell,
Office Manager and
Receptionist**

To serve someone to me means helping our members and making them feel confident in what they are getting out of their membership here at PSW. It has been a privilege to get to know and serve many PSW members over the years. I have the honor of being the one to answer phones and help members with membership renewals, answering questions, or directing them to other outstanding staff members who are best qualified to meet their needs. I look forward to getting to know and serve more of our members who call the office or attend PSW conferences in the coming years.



**Ellen Brummel,
Director of
Membership & Events**

In 2024, I plan to continue my focus to serve my co-workers wherever needed, to help them succeed in their roles at PSW as we all work to serve our members. Providing outstanding programming, information, support, and service takes a collaborative team as we continue to grow and improve our member offerings. We are fortunate to have a great team at PSW who serve the pharmacy community in a multitude of ways with passion and commitment.





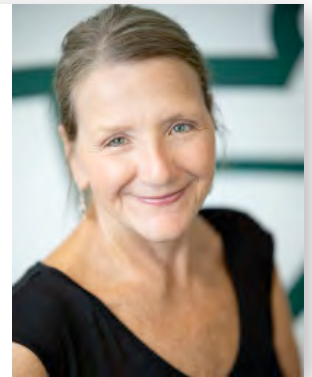
Ryan Psyck,
Manager of Grants & Member Programs

If you were to ask 100 people what “serve” or “service” means to them, chances are you’d get close to 100 different answers. Just as I’m sure all PSW staff reflections on this page will differ. To me, service falls on a spectrum of sorts. We as a society often times focus on service on a grand scale, acts performed by people that go on to define that person’s life or result in them being talked about and remembered for generations. This kind of service is good. All service is good. But it’s not always attainable.

What is always attainable, and what I like to focus on when thinking about service, is just showing up. Being there for someone or something in times of need and times of plenty. Sometimes that’s all that’s necessary. Showing that you care by simply being present can make a world of difference.

Helene McDowell,
Director, Health Equity Programs & Outreach

For me, the word serve means to be involved with the community around me. To support, nurture, and hopefully improve my community as a whole. To serve is not just action, it is a conscious awareness that there are others in this world whose lives, feelings, and concerns also matter. Through my PSW work and personal volunteering I am able to offer support and assistance whenever possible.



A New Toolkit for Wisconsin Pharmacy Teams to Combat the Opioid Epidemic

by Hope E. Schier, 2024 PharmD Candidate, Kate J. Hartkopf, PharmD, BCACP, William J. Peppard, PharmD, BCPS, FCCM



In 2022, the Wisconsin Department of Justice announced the final approval of an agreement with the nation's three major pharmaceutical distributors (Cardinal, McKesson, and AmerisourceBergen) and Johnson & Johnson relating to their role in the opioid epidemic.¹ According to 2021 Wisconsin Act 57, 70% of the settlement funding will be allocated to counties and municipalities that participated in the litigation, and the Department of Health Services (DHS) will receive the remaining funds. County governments that receive funds will be focused on core abatement strategies (Figure 1).² These core strategies integrate well with pharmacy services and within communities.

As health professionals who directly impact patient care, pharmacists are in ideal positions to collaborate with stakeholders in opioid risk mitigation and the prevention, intervention, and treatment of opioid misuse. The unique role of the pharmacist justifies involvement in public health, including planning, development, and implementation of opioid-related

services.³ This includes but is not limited to harm reduction strategies, dispensing and administering naloxone with appropriate training, de-stigmatizing opioid use disorder (OUD), and optimizing medications for opioid use disorder (MOUD).

Toolkit Overview

The Pharmacy Society of Wisconsin (PSW) Opioid Abatement Toolkit was designed to support pharmacists and their teams, including technicians, students, and volunteers, in creating meaningful changes within their communities. The toolkit, authored by 14 content experts, underwent three rounds of rigorous review with a multidisciplinary team to produce a comprehensive and practical resource for pharmacists and their teams within Wisconsin. The toolkit highlights various strategies and interventions that integrate within current pharmacy services to support local community needs. An overarching goal of the toolkit is to empower proactive identification of opportunities to facilitate conversation with county government

FIGURE 1. The Circle of Health



officials and advocate for partnership and funding support from opioid settlement dollars.

Each section of the PSW Opioid Abatement Toolkit includes a topic summary and considerations for abatement strategies, equity, and resources/funding. Some topics include personal stories related to success or service need. The inclusion of

background information, resources, and direction for practical application of opioid abatement strategies make this toolkit advantageous for busy pharmacists and their teams ready to make an impact but unsure where to start. Table 1 includes a full listing of the topics and content of the toolkit. Additionally, read a few highlights from the intervention topics below as a preview into the content of this toolkit.

Content Preview

In the section “Opioid Dashboards,” Nicole Green, RPh, BSP, DPLA, describes many benefits of utilizing an opioid dashboard in hospital settings, ambulatory care clinics, and community pharmacies. Pharmacy teams are encouraged to start with existing state and national dashboards, as these resources are publicly available and help illuminate recent state and county priorities. If choosing to create an opioid dashboard, important information to include in the dashboard is outlined.

The section authored by Dustie Zimmerman, PharmD, “Methadone and Buprenorphine,” acknowledges the shortage of opioid treatment programs (OTPs) in Wisconsin, especially in rural areas. Strategies in this section outline opportunities for advocacy related to pharmacist prescribing of medications for OUD and leveraging tools like collaborative practice agreements to improve access to treatment. In “Pharmacist-Administered Medications for Opioid Use Disorder (MOUD)” by Matt Huppert, PharmD, the toolkit highlights another area pharmacists can make an impact, through administration of non-vaccine injections like naltrexone or long-acting buprenorphine, which improve patient access to MOUD and medication-assisted treatment (MAT).

“Medication Disposal – Drop Box,” by Prati Wojtal, MS, RPH, FASHP, provides ten steps to install a medication drop box and lessons learned to improve the functionality of the intervention. This section considers health equity and suggests medication disposal box placement in neighborhoods of highest social vulnerability and in census blocks with the most opioid prescriptions per capita. The section includes additional resources and provides ideas for addressing potential barriers.

Access the Toolkit

The Opioid Abatement Toolkit can be downloaded via this [link](#) or searching “Opioid Abatement Toolkit” on the PSW website. PSW hopes the toolkit encourages meaningful interventions that support Wisconsin communities in local efforts to mitigate opioid misuse and abuse. Furthermore, we recommend the toolkit and its resources be used as a foundation for future discussions with local county health officials. The Opioid Abatement Toolkit is available at no cost through financial support from the Cardinal Health Foundation.

Pharmacy teams are encouraged to access the PSW Opioid Abatement Toolkit often as this electronic resource is dynamic and anticipates content updates with development of new information. If you have any questions related to the content of this toolkit or new information that may be a valuable addition, please contact Dr. Kate Hartkopf at khartkopf@pswi.org.

Hope Schier is a 4th Year Doctor of Pharmac Candidate at the University of Wisconsin-Madison School of Pharmacy in Madison, WI. Kate Hartkopf is the Director of Team-based Care Strategies & Business Development at the Pharmacy Society of Wisconsin in Madison, WI. William Peppard is the Pain Stewardship Coordinator, Assistant Professor of Surgery, Froedtert & the Medical College of Wisconsin, Milwaukee WI.

Corresponding Author: *Kate Hartkopf - khartkopf@pswi.org*

Acknowledgements: Portions of this toolkit have been previously presented at the 2023 PSW Annual Meeting in La Crosse, WI on August 26, 2023 and via a national webinar titled Pharmacy-Powered Solutions for Optimizing Opioid Settlement Funds hosted virtually on November 30, 2023.

Disclosure: The authors declare no real or potential conflicts or financial interest in any product or service mentioned in the manuscript, including grants, equipment, medications, employment, gifts, and honoraria.

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2. Settling States, National Association of Attorney Generals. Janssen Settlement Agreement. Exhibit E. March 30, 2022. Accessed November 20, 2023
3. Cameron G, Chandra RN, Ivey MF, et

TABLE 1. Overview of Toolkit Contents

Toolkit Contents
1. Purpose of this Toolkit
2. Background on Opioid Settlement Funds
3. How to research What's Going on in Your Community
4. The Role of Stigma Related to Opioids
5. Talking with Patients about Opioids: Motivational Interviewing
6. Racial Disparities in Pain Management
7. Harm Reduction
8. Dose of Reality and Real Talks Wisconsin
9. Using the ePDMP as a Clinical Tool
10. Opioid Dashboards
11. Electronic Health Record (EHR) Best Practice Alerts
12. Methadone and Buprenorphine
13. Pharmacist-administered Medications for Opioid Use Disorder (MOUD)
14. Opioid Antidotes: Naloxone
15. Medication Disposal and Drop Box
16. Fentanyl Test Strip Distribution
17. Syringe Service Programs (SSP)
18. Pharmacy Robbery Prevention and Response
19. Thank You to Authors and Reviewers

al. ASHP statement on the pharmacist's role in public health. *Am J Health Syst Pharm.* 2022;79(5):388-399. doi: 10.1093/ajhp/zxab338

Wisconsin Pharmacy Quality Collaborative: 2023 Year in Review

by Kari Trapskin, PharmD

As PSW staff members, we are often asked what keeps us motivated. Though days are challenging in a different way than being engaged in direct patient care, we continue to be inspired by the stories PSW members share that directly relate to programs we have helped to facilitate. For instance:

- A community pharmacist provided comprehensive medication review & assessment (CMR/A) services focused on asthma and smoking cessation, which resulted in a patient decreasing from one pack per day to one cigarette per day and advocating for themselves with their primary care provider. The patient reported feeling better and being more optimistic about their health.
- An embedded clinic pharmacist provided a CMR/A for a 26-year-old pregnant patient with worsening asthma symptoms who was using her son's inhaler after hers was empty. The pharmacist provided education about maintenance and rescue therapy and contacted her physician to recommend the addition of a maintenance inhaler and spacer. The patient thought all patients with asthma suffered as she had been. The pharmacist discussed potential environmental triggers related to clogged air filters and a rodent infestation in her apartment. After several weeks with the new maintenance inhaler, the patient's rescue inhaler use had decreased by 90%, and she reported feeling much better.

Patient Stories

This year, we have focused on capturing impactful stories about pharmacist-patient interactions that don't often get reported. PSW Advanced Practice Pharmacy Experience (APPE) students have worked hard to interview and collate these stories that are highlighted on the following pages

and more will be published in future issues of *The Journal*. Stories like these inspire us to continue our work of identifying opportunities for practice transformation, connecting the pieces and people to design programs based on previous practice-based implementation results and supporting PSW members by providing new opportunities to expand and enhance their practices.

The following article provides an overview of some of the work related to the WPQC program that PSW has been engaged in throughout 2023.

Public Health and Social Determinants of Health

For more than 5 years, PSW has had the good fortune of connecting with the Wisconsin Division of Public Health Chronic Disease Prevention Program in their collective efforts to impact hypertension, diabetes, and hyperlipidemia.¹ PSW has been a funded cooperative partner, along with public health departments and other partners across the state. Our efforts have focused on building connections with pharmacies and community-based organizations (CBOs), resulting in cardiovascular disease (CVD)-focused

CMR/A services with a particular focus on self-measurement of blood pressure (SMBP) and social determinants of health (SDoH) barriers. Through use of an SDoH assessment tool by both pharmacies and CBOs, a bidirectional referral system was piloted, resulting in CBO referrals



Above: Jeremy Laffin (Hometown Pharmacy Racine) with the asthma resource kits provided by the American Lung Association and the Division of Public Health

Below: Site visit with Casa Alba Melanie, a community-based organization in Green Bay



to participating pharmacies for needed medication services in addition to referrals to CBOs for social services support.

In late 2022, PSW received additional funding to work on a similar program focused on facilitating asthma CMR/A services with pharmacies in the southeastern portion of the state. Results of this program are pending.

This summer, we were finally able to visit several WPQC pharmacies that participated in the asthma program! These were the first visits we had provided since the start of the public health emergency in 2020. Site visits provide us an opportunity to see firsthand the unique and forward-thinking practices being used to implement these clinical programs in addition to having the time to troubleshoot barriers and answer questions.

Wisconsin Medicaid CMR/A Services

Since 2012, PSW staff have been supporting the implementation of CMR/A services for Wisconsin Medicaid recipients. This support takes many forms, and in the last five years has transformed into providing support in the areas where we are facilitating targeted clinical programs (i.e., CVD, asthma, CBO bidirectional referrals). Support involves facilitating relationships and connections, providing network updates via newsletters, FastFacts, email responses, phone conversations, virtual meetings, conference sessions and webinars, and

coaching work groups. We meet monthly with Medicaid staff to provide updates and share questions.

Wisconsin Medicaid CMR/A data from 2018-2023 show that reimbursed CMR/A services continue to steadily increase, with almost 23,000 CMR/A (initial and follow-up reviews) being provided since the

program began in 2012 (Figure 1). Notably, the number of unique pharmacies providing CMR/A services during that time frame also increased by over 70 pharmacies, indicating that PSW's work to engage additional pharmacies across the state has likely had an impact on the numbers of pharmacies providing CMR/A services (Figure 2).

FIGURE 1. Cumulative Wisconsin Medicaid CMR/A Services 2018-2023

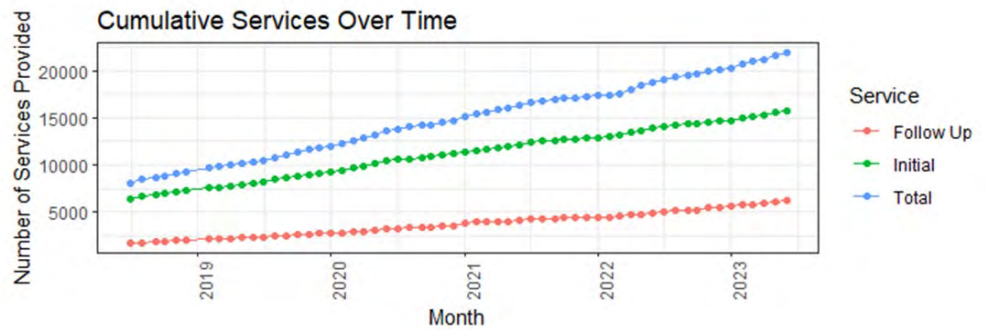
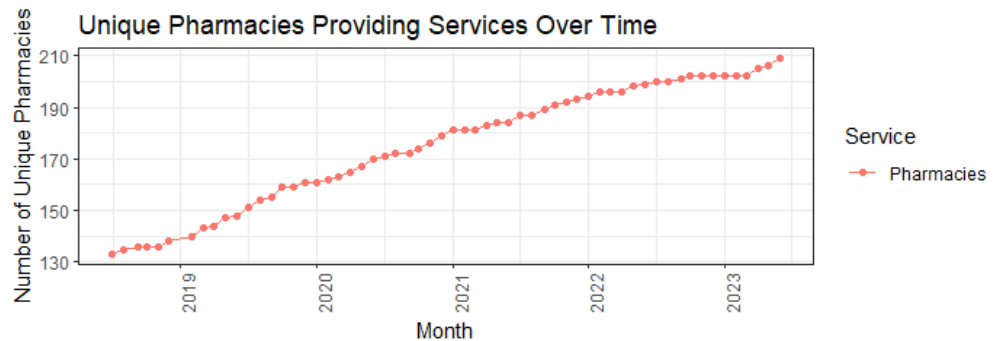


FIGURE 2. Cumulative Unique Pharmacies Providing CMR/A Services (2018-2023)



*Left: Rachel Whitesitt (Streu's Pharmacy in Green Bay), Kari Trapskin (PSW), Kate Hartkopf (PSW), Nicole Schreiner (Streu's Pharmacy)
Right: Cristina Aponte and Cassy Cichy (Lakeview Pharmacy in Racine) and Helene McDowell (PSW)*



WPQC Quality Assurance Process

Every six months, the designated WPQC Pharmacy Champion receives a request to complete the WPQC Quality Assurance survey, which consists of questions about the extent to which the pharmacy is consistently practicing each of the 7 quality-related best practices. PSW compiles these data along with several additional questions in order to determine what types of support are needed by the network pharmacies. Specifically, we use the information to update our resources and guide future education and training.

The May 2023 survey data revealed that the most frequent barrier to implementation among all 7 quality-based practices was workload. Other key points included:

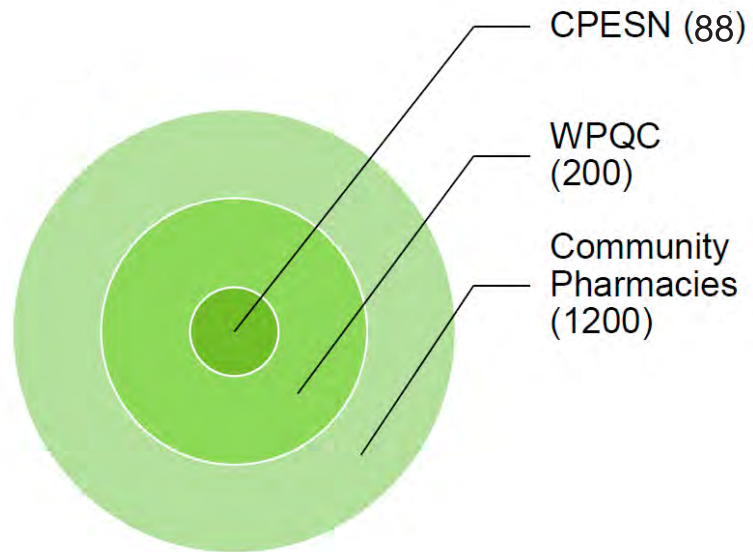
- More pharmacies reported patient resistance barriers for completing brief medication histories compared to the October 2022 survey.
- 75% of pharmacies reported no barriers to using two unique patient identifiers, which was a 15% increase from the October 2022 survey.
- More than 50% of pharmacies reported leveraging the appointment-based model method for medication synchronization, which was an increase in comparison to the October 2022 survey.
- Fewer pharmacies reported workload as a barrier to continuous quality improvement compared to the October 2022 survey.

To further enhance patient care and expand clinical services, many pharmacies reported the incorporation of Collaborative Practice Agreements (CPAs) into their practice sites. The most common CPA reported was immunizations, followed by naloxone dispensing, therapeutic substitution, and refill authorization.

CPESN and Flip the Pharmacy

WPQC and the Wisconsin Community Pharmacy Enhanced Services Network (CPESN) have shared goals. Over time, the

FIGURE 3. Numbers and Overlap of WPQC and CPESN Pharmacies



two groups have collaborated to maximize the strengths and relationships that each group possesses.² CPESN pharmacies deliver care based on minimum service sets and consistent delivery of services, and are considered a clinically integrated network, which allows a single signature contract to be signed for the whole network. CPESN Wisconsin pharmacies are required to be WPQC-accredited in order to demonstrate dedication to implementation of meaningful quality-based best practices. In addition, WPQC accreditation provides access to reimbursement through Wisconsin Medicaid for CMR/A provision along with implementation support.

CPESN Wisconsin and WPQC have been working collaboratively since 2019 on supporting three cohorts of Flip the Pharmacy (FTP) pharmacies. The funding for the FTP program is provided to help CPESN pharmacies implement services intentionally and with resources provided by CPESN USA and coaching from the local CPESN network. PSW has contributed to the Flip the Pharmacy Projects through administrative support, CMR/A implementation coaching support, conference education, and Medicaid billing support as a partner with CPESN Wisconsin, which now consists of 88

pharmacies (Figure 3). Several leaders within CPESN took on roles as clinical coaches for the participating pharmacies. This coming year, there will be continued focus on aiding CPESN/WPQC pharmacies to take advantage of the revenue-generating opportunities that already exist in Wisconsin, such as providing CMR/A services for Medicaid members through WPQC.

One of the main measures of success for the FTP cohort pharmacies has been completion of Pharmacist eCare Plans. The Pharmacist eCare Plan is a standardized documentation format embedded in pharmacy software systems that can be used to communicate with fellow providers and payers. Between January 2019 and September 2023, the FTP cohort pharmacies submitted 238,928 eCare Plans. Additionally, 3,244 blood pressure values were documented by the cohorts. 766 of these blood pressure encounters were identified as “uncontrolled.”



CPESN Wisconsin pharmacies are required to be WPQC-accredited in order to demonstrate dedication to implementation of meaningful quality-based best practices. In addition, WPQC accreditation provides access to reimbursement through Wisconsin Medicaid for CMR/A provision along with implementation support.

A Look Ahead into 2024

PSW has a solid foundation to continue to support targeted outreach work across the state and help to facilitate further practice transformation in 2024. We will continue our support of the WPQC pharmacy network in addition to collaborating with CPESN pharmacies in our efforts to advance community pharmacy practice in all settings. Our work in facilitating programs focused on asthma visits and referrals for asthma-focused home environment visits will continue with pharmacies across the state. Additionally, we have a new opportunity to create primary care provider, community-based organization and pharmacy “triads” to focus on improving bidirectional communication related to social determinants of health and medications in specific areas of the state.

2024 also promises to be an exciting year with the anticipated implementation and launch of pharmacist recognition and payment as Medicaid providers. For more information about this exciting program, please visit the PSW website under Resources (Resources for Your Practice → Wisconsin Provider Status) to read more.³

For more details about joining WPQC or CPESN, being involved in PSW practice-based grant opportunities, or more details related to implementation of pharmacist provider status, please contact karit@pswi.org.

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A Year of Storytelling: Patient Success Stories

compiled by Helene McDowell, MS, Megan Grant

Last year, PSW focused on storytelling via social media, during conferences, and amongst colleagues to raise awareness of all of the incredible care pharmacists provide to their patients. PSW dedicated one of the general sessions at the 2023 PSW Educational Conference around storytelling during "Champions of Change: Make Your Story, Own Your Story, Tell Your Story" presented by Dr. Karen Kopacek and Megan Grant (click [here](#) to view and claim CE). PSW recorded video stories at the Educational Conference and encouraged members to share their own stories on social media with the hashtag, #shareyourstoryPSW.

Additionally, and as part of our grant funded, public health work, PSW conducts pharmacist led programs designed to provide targeted comprehensive medication review & assessment (CMR/A) support and education for underserved patients with specific chronic conditions like hypertension, hyperlipidemia, prediabetes, diabetes, and uncontrolled asthma. These programs have been very beneficial to patients. Because of this success and our commitment to storytelling, PSW wanted to highlight some of these incredible stories for you to be aware of what some of your colleagues are doing. To facilitate this, PSW contacts and interviews pharmacist and technician members about remarkable patient stories where they feel pharmacy care has had a dramatic impact on the patient's health and quality of life.

The following stories were written and compiled by PSW members, PSW staff and APPE students, and members of the Wisconsin communities in which our

members serve. While this is a small sample revolving around the Wisconsin Pharmacy Quality Collaborative (WPQC) program, the work pharmacy professionals do across the state and their stories are a testament to the outstanding work being done in Wisconsin communities.

PSW Cardiovascular Programs

Submitted by Matt Huppert, PharmD

The patient is a low-income, 61-year-old, African American woman with low health literacy. She was taking 9 prescribed medications and 1 over the counter supplement to manage multiple comorbidities, including poorly controlled diabetes complicated by hypertension and hypercholesterolemia. She was previously enrolled in a diabetes education program, however at the time of the visit was not seeing a diabetes educator. The patient was identified as eligible for a CMR/A through the PSW-United Way Community Comprehensive Medication Review Program.

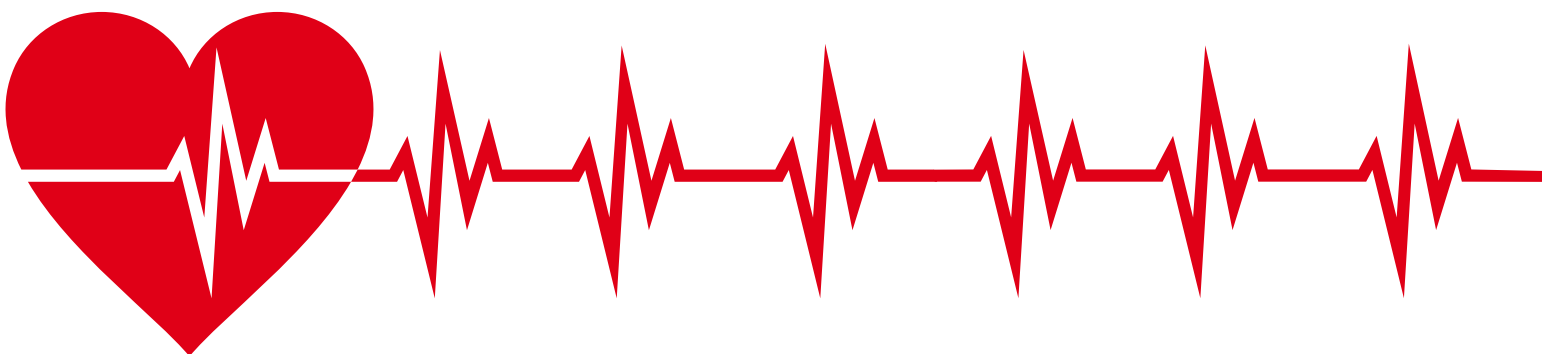
October 2020: During an October telehealth CMR/A, the patient's diabetes was uncontrolled with reported blood sugars above goal as high as 300 mg/dL. The pharmacist identified additional medications she could take with her insulin, recommended increasing the dose of one current medication, and suggested adding one medication to take with her insulin for improved diabetes management. It was discovered that the patient was unsure why her diabetes education program had stopped and had not followed up with them because she didn't know if she needed the education

anymore. The pharmacist recommended that she re-connect with the program to get back involved. During the visit, the patient's blood pressure was also above goal, so the pharmacist recommended she monitor her blood pressure at home for 2 weeks to evaluate improvements in her blood pressure while taking the new medications. The pharmacist discussed these changes with her primary care team at her community health center prior to implementation.

November 2020 Update: The pharmacist conducted a follow-up CMR/A with the patient to see how she was progressing. The patient was doing well with the recommended medication changes and was continuing to monitor her blood pressure at home. She reported needing a new blood pressure monitor. Her community health center provided her with a new monitor to support regular self-monitoring. The pharmacist planned to follow up with her in January 2021.

January 2021 Update: During her follow-up CMR/A, the patient was continuing to do well on the medication adjustments and reported frequently monitoring her blood pressure at home. The pharmacist planned to follow up with her again in March 2021.

March 2021 Update: The pharmacist last spoke with this patient in March for the third follow-up CMR/A visit. She reported doing well, with her blood glucose levels consistently in range, with the highest in last 3 months being 188 mg/dL, which was above goal but improved drastically from the initial visit. The pharmacist made further medication recommendations regarding what to do if blood sugars are high. The patient reported she was working



to follow the pharmacist recommendations.

Outcome: After speaking with the pharmacist at the initial visit, the patient was highly motivated to try other treatment options to improve her health. Per the pharmacist's recommendations, she contacted the diabetes educator who she had previously seen and became involved in the program again. She was also re-engaged with her primary health care team and community health center, which provided her with the new blood pressure monitor and provided her with a personal health coach to further manage her conditions. As a result of the new medications, improved medication adherence, increased blood pressure monitoring, and community health resources, the patient saw drastic improvements in their diabetes control and reduced their blood pressure to within goal. The patient is now being followed by the health clinic for her disease management.

Submitted by Rachel Whitesitt, PharmD

The patient is a 54-year-old white woman with a history of bipolar disorder and schizophrenia came into the pharmacy for her biweekly injection of a long-acting antipsychotic. She has been on the medication since February of 2022 and had seen drastic stabilization in her mood with depressive and manic episodes occurring far less frequently.

October 2022: While the pharmacist was getting ready to administer the long-acting antipsychotic, she noticed the patient was repetitively moving her jaw and smacking her lips, which can be signs of tardive dyskinesia (TD), a possible side effect from the medication. The pharmacist asked the patient about the movements. The patient reported that she was unaware they were happening and no one else had said anything to her about them. The pharmacist conducted a TD AIMS assessment and determined the patient's TD to be of moderate severity. Based on this assessment, the pharmacist faxed the patient's physician to get a prescription for a medication to treat TD. The pharmacist planned to follow-up with the patient at each of their next appointments.

Outcome: The patient was started on the medication and at the 2-week mark was already seeing modest improvements in her TD symptoms. Importantly, the pharmacist had caught these symptoms

early on before the condition progressed and became harder to treat. If left untreated, TD has the potential to become extremely debilitating and potentially life threatening. If left uncontrolled, patients sometimes must switch antipsychotic regimens, which could result in reduced efficacy in the management of their health. Starting the patient on a medication to treat TD early on had prevented the TD from getting worse and allowed the patient to continue receiving her antipsychotic therapy, which had proven effective in stabilizing her mood and improving her quality of life.

Submitted by Holly Altenberger, PharmD

The patient is a retired 86-year-old African American male with limited income. He has a history of left-hand paresthesia, congestive heart failure, COPD, obstructive sleep apnea, BPH, CKD stage III, type 2 diabetes, open angle glaucoma and bilateral vision loss. He presented to the community center where a pharmacist was holding their monthly comprehensive medication reviews (CMR/A). The patient has high health literacy, but appeared to have mistrust for the healthcare system and was very reluctant to enter the room for his CMR/A. After the center staff convinced him to enter to the room, the patient was still hesitant to provide any information about his background or medications.

CMR/A: The pharmacist began by

discussing all the patient's medications including dosages, directions for use, and potential side effects to watch out for. They eventually shifted the focus of the CMR/A to the patient's diabetes management and started by reviewing his diet. The patient was eating a grapefruit for breakfast, which was very normal for him because he usually sleeps in late or doesn't have much energy to eat in the morning. The pharmacist found the patient's diet to be very restricted in both calories and protein to which the patient explained he was determined to get his blood sugar and A1c under control. The pharmacist educated the patient that too much restriction can actually be harmful and reminded him that the recommended daily calorie intake for men is 2,500 calories. The pharmacist noted that while fruits and vegetables are important, carbohydrates and protein are equally essential for providing energy when used in moderation. The patient was very appreciative of this information and agreed to incorporate more carbohydrates and protein into his diet. When asked if he took his blood glucose regularly, the patient reported he did not due to the cost of the supplies.

Outcome: After the meeting, the pharmacist worked with the community center to secure funds for the patient's testing supplies, which allowed him to better manage his diabetes. The patient was motivated to improve his diet, which

Below: pharmacists and community partners helping to manage hypertension at Meadowood Health Partnership community event.



enhanced his diabetes control and gave him more energy during the day. By the end of the CMR/A, the patient had gained significantly more trust in the pharmacist and was comfortably sharing his health-related information. He asked the pharmacist when she would be back because he might have more questions. When the pharmacist told him she would be back in one month, he replied, "You should be here more than that!" The patient had gone from almost not entering the room to being interested in returning for a follow-up CMR/A and discussion with the pharmacist.

Submitted by Michelle Farrell, PharmD, BCACP

The patient is a 63-year-old, Caucasian male with a history of type 2 diabetes and hypertension. He presented to the pharmacy to pick up his Byetta, a medication for type 2 diabetes. The patient's diabetes has been largely uncontrolled with a reported A1c of 8.6%, which is above goal. The patient also struggles with low health literacy, access to reliable transportation and a diabetes educator and support. The patient was identified as eligible for a comprehensive medication review (CMR/A) by the pharmacy.

CMR/A: While conducting the CMR/A, the pharmacist noted gaps in medication pick-ups indicating the patient was non-adherent to his Byetta therapy. The high burden of injecting Byetta twice daily was identified as the main factor for the non-adherence, so the pharmacist recommended switching to Bydureon, which has the same active ingredient but in an extended-release formulation that is only required to be injected once weekly. After helping the patient and prescriber through a prior authorization process, the pharmacist taught the patient how to reconstitute and administer Bydureon. They also watched multiple diabetes education videos together to improve his baseline understanding of how to best manage his diabetes.

Outcome: The patient was started on Bydureon, which reduced the frequency of injections therefore eliminating the main barrier to the patient's non-adherence. The patient was able to adhere to the new medication regimen and the pharmacist continues to speak with him monthly to assess therapy effectiveness and coordinate

with the technician/delivery team to overcome transportation barriers. At the 3-month mark, the patient's diabetes was controlled and his A1c had decreased to within goal range at 6.9%. The patient also had lost 5% of their weight and improved their blood pressure control from 158/90 to 138/82. The pharmacy team continues to follow-up with this patient to ensure he has continued access to the medication and also serve as a diabetes educator for him.

Asthma Program

Submitted by Jonathan Koehler, PharmD

A 26-year-old pregnant patient with a history of asthma was having exacerbations that were progressively becoming worse. Her symptoms had become so persistent and severe that she had completely used up her own rescue inhaler and was now using her son's. She was nearing her 3rd trimester -- which was personally stressful because she had had multiple 3rd trimester miscarriages. Unaware of these worsening symptoms, the pharmacist contacted the patient as part of a routine medication therapy management appointment. During the discussion with the patient about her inhaler use, it became clear to the pharmacist that the patient's asthma was uncontrolled and worsening as her pregnancy advanced. This came as a surprise to the patient because she had thought that her asthma symptoms were typical for patients with asthma. The pharmacist knew and explained to the patient that she was at risk for asthma-related pregnancy complications, especially considering her history of miscarriages.

Intervention: The pharmacist began by educating the patient about the importance of preventing asthma symptoms through maintenance medication and asthma trigger avoidance. The patient was not aware of medications that could help prevent asthma symptoms and was comforted when the pharmacist requested a maintenance inhaler from her doctor. In addition to the medication specific education, the pharmacist thought that the patient would benefit from an inhaler spacer and requested one from her physician to assist her in taking her medicine correctly.

The pharmacist also discussed asthma environmental triggers with the patient. The patient stated that her symptoms would worsen when she got home from work and speculated that it could be due to clogged



air filters and the rodent infestation in her apartment. The pharmacist encouraged the patient to advocate for her health and address these issues with her landlord.

Outcome: The patient's physician agreed to the recommendations made by the pharmacist and prescribed a maintenance inhaler and spacer. The pharmacist followed-up with the patient frequently over the next couple of months. After several weeks with the new inhaler, the patient was feeling much better. She had reduced the need for her rescue inhaler by 90% and was feeling much more at ease about her pregnancy. A few months later, she gave birth to a healthy baby.

Submitted by Anthony Michalski, PharmD

A middle-aged patient with asthma went to their pharmacy to pick up an inhaler refill. The pharmacist noticed that the refill was quite late, so they reviewed notes from the patient's most recent primary care visit. The asthma test results suggested that the patient's asthma was currently uncontrolled. The pharmacist determined that the patient would benefit from asthma medication related education to help the patient better understand their condition and to ensure that the patient had been able to use their inhaler and other medications correctly. Initially, the patient was apprehensive because they did not believe the pharmacist could provide valuable insight. However, after the pharmacist gave more details about the benefits to the patient and what they would talk about, the patient agreed to schedule a visit.

Intervention: At the visit, the patient admitted that they had not been taking their maintenance inhaler as prescribed because the powder from the inhaler was irritating their throat. In response, the pharmacist suggested a non-powder maintenance inhaler which was accepted by the patient. The pharmacist also recommended the change to the patient's primary care provider

and suggested setting up automatic refills to make it easier for the patient to pick up their medications on time. At this point, the patient had become comfortable enough to bring up other health problems that they had been having which included nausea after eating, intermittent chest pain, and increasing seizure frequency. The pharmacist then communicated several possible medication related recommendations to the patient's physician to address these issues and encouraged the patient to follow-up with their physician to ensure that their health conditions were being treated appropriately and not worsening.

Outcome: The patient's primary care provider was appreciative of the recommendations made by the pharmacist – commenting that they wished all their patients would have regular check-in appointments with pharmacists. As a result of the recommendations, the patient started a new medication that was able to control their chest pain. Regarding their asthma control, the patient scheduled a follow-up visit with their physician to obtain updated asthma test results and plan for future care. The patient was able to resolve long-standing health issues to improve their

overall health. Additionally, as a result of the positive patient outcome and feedback from the PCP, the pharmacist has expanded their comprehensive medication review services so that more patients will benefit from this kind of medication education and support.

Submitted by Brian Bock, PharmD

A 39-year-old patient of mixed African American and Asian descent was referred to the pharmacy by a friend. He had been having daily headaches which were significantly affecting his quality of life. This was unusual for him since he did not have a history of persistent headaches. He had heard of a migraine medication that might be helpful so requested an appointment with his doctor to discuss treatment options. Unfortunately, due to the doctor's availability, the soonest appointment that he could schedule was several months away. Not only was timeliness a concern, but so were healthcare costs. The patient had financial difficulties and recently had a high-cost hospital admission due to extremely high blood pressure. His blood pressure medications had been adjusted but he had not yet had a follow-up appointment despite the hospitalization occurring several months ago. The patient was also

taking asthma medications and, since there were multiple other health concerns, the pharmacist determined that would benefit from a comprehensive medication review - the patient agreed.

Intervention: To begin the visit, the pharmacist took the patient's blood pressure because it had not been measured since the patient was hospitalized. The patient was found to have very high blood pressure again, which was the likely cause of his headaches. The pharmacist believed that this was due to a specific blood pressure medication being discontinued when the patient was discharged from the hospital. The pharmacist recommended to the patient's physician that the discontinued blood pressure medication be reinitiated. In addition, the pharmacist recommended an inhaler change and an additional asthma medication to help control his worsening, seasonal asthma. The patient's physician accepted the pharmacist's medication recommendations and even made a note in the patient's profile to not discontinue the blood pressure medication in the future. Following those medication changes, the pharmacist scheduled a follow-up appointment with the patient to assess

Below: Meadowood Health Partnership pharmacist-led patient education.



his symptom improvement and general wellbeing.

Outcome: At follow-up, the patient reported that his headaches had gone away, his blood pressure was under control, and his asthma symptoms had gotten better. Not only was he physically feeling better, but he was also mentally feeling better. He stated that his mood had improved, he was exercising more often, and he felt more in control of his health. At his primary care visit, his doctor echoed these sentiments as the patient's clinical exams showed significant improvement. The pharmacist continues to periodically follow-up with this patient to ensure that he continues with overall improved health and gets the pharmacy care he needs.

Submitted by Cassandra Gichy, PharmD

A 51-year-old African American patient with severe asthma visited the pharmacy to discuss his medications with a pharmacist. The patient also used tobacco regularly. When talking with the pharmacist, the patient explained that his asthma had been significantly affecting his quality of life. In fact, he had been recently hospitalized due

to extreme breathing difficulties. The patient understood the importance of controlling his asthma, but remembering to take his medications everyday was challenging. This was made more difficult because he didn't have reliable transportation to pick up his medication refills. He was worried about what might happen to him if he continued to have asthma problems.

Intervention: Realizing that asthma can worsen for a variety of reasons, the pharmacist asked the patient about lifestyle and environmental factors that may be affecting his asthma. The patient admitted he had been smoking a pack of cigarettes everyday for quite a long time. The pharmacist took this opportunity to educate the patient on the connection between smoking with his worsening asthma which helped motivate the patient to quit smoking. After this discussion, the pharmacist called the patient's doctor to request a prescription for nicotine replacement and within a day the patient had committed to smoking cessation.

During a follow-up meeting, the patient proudly stated that he had reduced his cigarette use by 16 cigarettes per day. He

explained that the nicotine replacement was really helping him achieve his goals. Congratulating the patient on his success, the pharmacist then encouraged him to schedule an appointment with his doctor to discuss other methods of asthma control and monitoring to improve his quality of life.

Outcome: At the most recent pharmacist follow-up meeting, the patient reported that he was only smoking one cigarette per day, had received asthma monitoring tools from his doctor, and had a new nebulizer to replace his broken one. Although he continues to have barriers in his managing his health, the patient states he is now more optimistic about his asthma control and health.

Stay tuned for more stories about pharmacist impact and practice transformation in future JPSW issues.

Helene McDowell is the Director of Health Equity Programs & Outreach and Megan Grant is the Director of Marketing, Communication & Design at the Pharmacy Society of Wisconsin in Madison, WI.

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Evaluation of the Usability, Engagement, and Value of *The Journal of the Pharmacy Society of Wisconsin*

by Amanda Egbert 2024 PharmD Candidate, Lukas Kelsey 2025 PharmD Candidate, Michael W. Nagy, PharmD, Megan Grant, Amanda Margolis PharmD, MS, BCACP

The *Journal of the Pharmacy Society of Wisconsin (JPSW)* is the publication of the Pharmacy Society of Wisconsin (PSW).¹ *The Journal* provides up-to-date and relevant information to pharmacists, technicians, and readers interested in the rapidly changing field of pharmacy. *The Journal* publishes articles that reflect current pharmacy practice and future advancements and captures the history of pharmacy practice in the state of Wisconsin. *The Journal* also provides instruction to engage emerging writers. *The Journal* publishes a variety of unique article types including original work, leadership and business spotlights, review articles, and continuing education. *The Journal* is published six times annually on a bimonthly basis.

In 2017, to expand access and information, *JPSW* implemented an open access strategy, making published articles available to members and non-members alike via the website.² Not all information was initially available to non-members of PSW, as selective access had been granted to the public for the “Business Spotlight” and original works; however, recent changes have been made to allow for full access to *The Journal*.³

Full open access increases readership, in addition to the positive spread of information to those in the field of pharmacy, but has some debatable disadvantages.⁴ Questions regarding the quality of open-access journals are often raised due to the presence of “predatory journals” that lack sufficient peer reviews and disregard hidden information about article processing charges.⁵ Tools such as the Directory of Open Access Journals (DOAJ) and the Open Access Scholarly Publishing Association (OASPA) can be used to assess the validity of open-access journals

Abstract

Objective: To evaluate the usability, engagement, and value of *The Journal* following the transition to a fully online open-access format by surveying *The Journal's* readership.

Methods: Based on past readership surveys, a revised readership survey was developed with questions that focused on general readability, assessed access to and ease of use of the website, assessed interest in article type, and explored the perceived value from *The Journal* becoming indexed. The survey was composed of 14 questions (10 multiple-choice questions, three open-ended questions, and one matrix table) and was created and distributed via Qualtrics Survey Software. The survey was reviewed by *The Journal's* Editorial Advisory Committee prior to its distribution. A link to the survey and its associated QR code were sent out in the weekly *FastFacts* emails to members of the Pharmacy Society of Wisconsin (PSW) and provided to attendees of the PSW Annual Meeting in August 2022.

Results: Thirty-eight PSW members responded to the survey questions, all of whom were readers of *The Journal*. The results showed that 36 (94.7%) readers were aware of the online journal, 29 (76.3%) found it easy to use, and 36 (94.7%) believed it to be a valuable part of their PSW membership. Readers emphasized their interest in articles focused on original work (84.2%), narrative reviews (76.3%), and continuing education (68.4%). Additionally, 86.5% of readers placed great importance on the content of *The Journal* becoming indexed in the future.

Conclusion: Online delivery of *The Journal* has been successful and fairly easy to navigate. While readers find the current content to be valuable, subsequent work should address the need for indexing and allocate more space to original work, narrative reviews, and continuing education in future publications.

by indexing them into a list of approved journals that are critically reviewed.⁶ Additionally, with a shift to online open access, use of the online journal may create complications with reader usability.

Gauging readership preferences is of substantial importance with the shift to full open access. The objective of this survey was to evaluate the usability, engagement, and

value of *The Journal* following the transition to a fully online, open-access format by surveying *The Journal's* readership.

Methods

A survey was developed to determine the preferences and usability for readers regarding the online open-access journal. The survey was based off of previous *JPSW*

readership surveys with the inclusion of several additional questions.^{7,8} The additional questions focused on the value readers placed on *JPSW* being part of their PSW membership, their level of engagement, the ease of use of the online, open-access journal platform, their interest in *JPSW* being indexed into article databases, and their use of *JPSW* resources.^{9,10} The survey was reviewed by *The Journal's* Editorial Advisory Committee (EAC) prior to its distribution. Updates were made for question clarity.

The final survey was composed of 14 questions, with 10 multiple choice questions, three open-ended questions, and one matrix table. The survey was created and distributed via Qualtrics Survey Software. A link to the survey and its associated quick-response (QR) code were sent out in the weekly *FastFacts* emails to members of PSW and provided to attendees of the PSW Annual Meeting in August 2022.

The survey results were analyzed using both quantitative and qualitative methods. Quantitative analysis included descriptive statistics such as means and proportions. Qualitative methods included text summaries for open-ended responses. This evaluation was certified as a quality assurance project by the University of Wisconsin-Madison Education and Social/Behavioral Science Institutional Review Board.

Results

Thirty-eight PSW members responded to the survey questions, all of whom were readers of *The Journal*. The majority of respondents were pharmacists (23, 62%), followed by directors of pharmacy (6, 16%), managers (5, 14%), as well as 1 resident and 1 technician (3% each). When asked how much of *The Journal* they read, 8 respondents read most of *The Journal* (21%), 22 reviewed the table of contents and read articles of interest (58%), and 8 respondents skimmed *The Journal* (21%). No respondents selected “I read CE articles only” or “I never read *The Journal*.”

The majority of respondents were aware of the online journal (97%). Most were fully aware (26, 70%), with some respondents being somewhat aware (10, 27%), and the remaining 1 was not aware (3%). All respondents felt that *The Journal* was a valuable part of their PSW membership: 23

FIGURE 1. Distribution of Readership Interest in the Various Types of Articles Published in *The Journal*

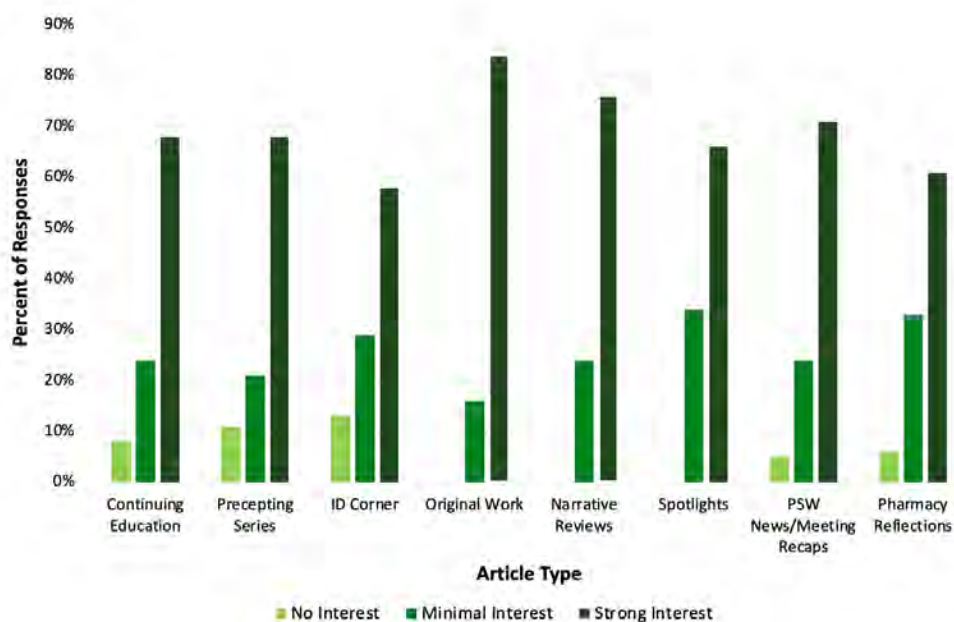
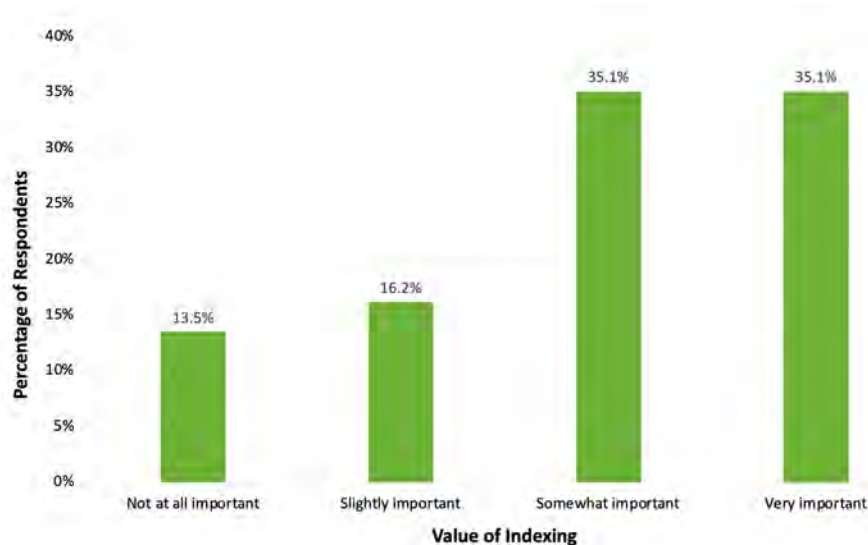


FIGURE 2. Distribution of Readers Who Find Value in the Content Published in *The Journal* Becoming Indexed



selected “completely” (61%), 13 selected “somewhat” (34%), and 2 selected “slightly” (5%).

Most respondents found the *JPSW* website relatively easy to use (79%). Overall, 10 respondents found *The Journal* “very easy” to use (27%), 7 found it “easy” to use (19%), 12 found it “neither easy nor difficult” (32%), 7 found it “difficult” to use (19%), and 1 respondent found it “very difficult” to use (3%). Open-ended feedback regarding ease of online journal use included: “return to print” (n=3) and “make

the articles easier to search” (n=1).

Respondents valued a variety of article types published in *The Journal* (Figure 1). Respondents emphasized their interest in articles focused on original work (84.2%), narrative reviews (76.3%), and continuing education (68.4%). In the open-ended portion under narrative reviews or student writing club articles, respondents suggested potential topic ideas, including summaries of guideline updates and news related to pharmacy law. Lastly, 86.5% of readers placed importance on the content of *The*

Journal becoming indexed in the future (Figure 2).

When asked about the use of *JPSW* resources, most respondents had never used any of the resources (Figure 3). The most common resource used was the preceptor series (n=15, 38%) followed by author guidance (n=12, 29%).

Discussion

This survey suggests that *JPSW* readership finds value in the online journal. Investing time and resources into furthering its development would further PSW and *JPSW*'s goal of increasing member engagement. While readers find the current content to be meaningful, subsequent work should allocate more space to original work and narrative reviews in future publications.

Prior to the COVID-19 pandemic, electronic-only publication of *The Journal* was a new endeavor occurring once a year through a "green issue."² Feedback from the 2019 readership survey demonstrated mixed reviews of the electronic publication.⁷ Since then, the pandemic led to a shift to exclusively electronic publications of *The Journal*.³ While several respondents of this survey (n=3) included open-ended comments that they would like *JPSW* to return to print, the shift to online has allowed for flexibility in publishing and cost savings, and increased the robustness of content. Because of this, *JPSW* will be unable to return to a print medium in the future. By publishing exclusively electronically, membership knows how and where to find publications.

The Journal website has been appropriately designed, as readers do not find it overly difficult to use. To search *The Journal*, readers can use the search bar located in the bottom footer of the website. Changes over the last few years, such as *The Journal* Open-Access Coordinator posting articles with the title, authors, and abstract listed on the *JPSW* webpage with a link to the PDF manuscript file, has improved the searchability of articles on [jpswi.org](https://www.jpswi.org).¹¹ Listing articles in this format allows articles to be searchable via Google and other platforms if the proper title or author is known and has improved search functionality.

The low engagement of *JPSW* resources was not overly surprising as the majority of the resources are focused on new writer

FIGURE 3. Respondent Engagement with *JPSW* Resources

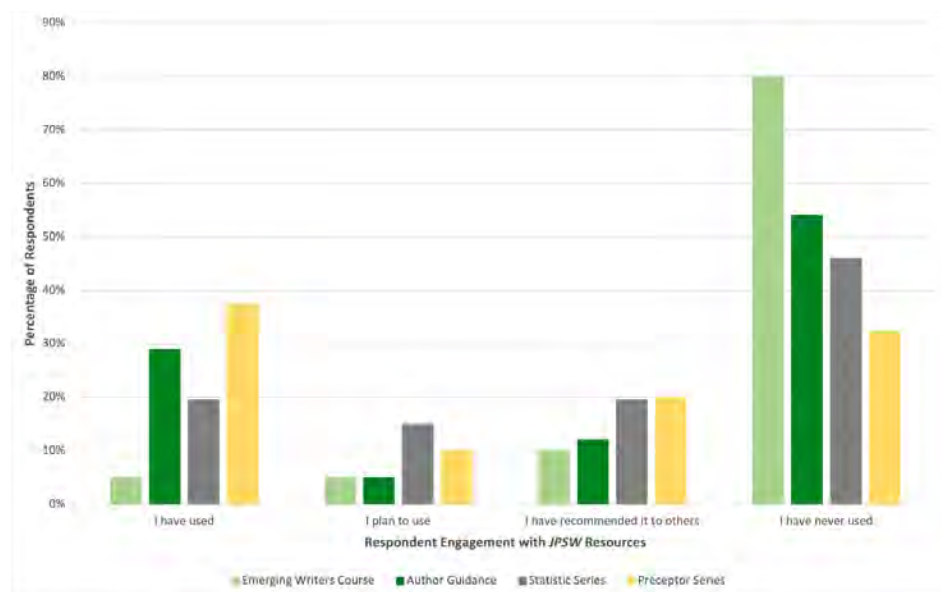


TABLE 1. Resources Offered by *The Journal*

Preceptor Development Series	Curation of articles for preceptor development	https://www.jpswi.org/preceptor-development-series.html
Statistics Series	Reviews the interpretation of fundamental measures, statistics, study designs, and research methods commonly used in medical literature	https://www.jpswi.org/statistics-review-series.html
Author Guidance	Guidance for individuals interested in submitting manuscripts to <i>JPSW</i> including article types and figure, table, and reference formatting	https://www.jpswi.org/author-guidelines.html
Peer Review Guidance	Guidance for peer reviewers including the <i>JPSW</i> peer reviewer checklist	https://www.jpswi.org/peer-review-information.html
Emerging Writers Program	20-30 minute videos covering foundational writing topics for students, residents, and others interested in publishing	https://www.pswi.org/Emerging-Writers-Course

development and manuscript submission whereas this was a readership survey. Many of the respondents were pharmacists or administrators who may not need professional development focused on writing or may not be contributing to *JPSW* as authors. This is supported by the highest engagement being the precepting series, as that was the only non-writing/research resource listed. However, it was encouraging that several respondents selected that they will start to use these resources as the survey increased awareness. The editors of *JPSW* encourage all PSW members and *JPSW* readers, including students and other trainees, to consider becoming involved in *JPSW* either as a peer reviewer or an author.

As a reminder, *JPSW* has both peer review and writing resources available as open-access resources to all who are interested (Table 1).

Limitations

The primary limitation of this survey was a small sample size. Only 38 readers completed the survey. In particular, one of the goals of *JPSW* is to foster the development of new and emerging writers. However, only 1 pharmacy resident took the survey. This suggests either additional marketing of *The Journal* to students and residents is needed, or these individuals already felt they had offered feedback through the Student Writing Club

mechanisms. Either way, a larger and more diverse sample of PSW members may have better informed this feedback to *The Journal*.

Future Direction

From this 2022 *JPSW* readership survey, a future direction of indexing *The Journal* was identified. Currently, *The Journal* manuscripts are not indexed in Google Scholar or PubMed®. The continued preference for indexing from membership shows the importance of this feature for authors and is the foremost future goal of the EAC of *The Journal*. To achieve this goal, the EAC has begun reviewing requirements for indexing and is targeting Google Scholar for the initial indexing goal and has begun to explore potential options.

Conclusion

Online delivery of *The Journal* has been successful and fairly easy to navigate. While readers find the current content to be valuable, subsequent work should address the need for indexing and allocate more space to original work, narrative reviews, and continuing education in future publications. Additional marketing of *The Journal* resources and efforts to index *JPSW* are ongoing.

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PR This article has been peer-reviewed.
The contribution in reviewing is greatly appreciated!

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PSW Annual Meeting

August 22-24, 2024

Kalahari Resort & Convention Center

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POWERING

PROGRESS

PSW Fellowship Designation

A Recognition Program for Sustained Service

by Maria Wopat, PharmD, BCACP, Jonathan R White, PharmD, BCACP



Did you know that the Pharmacy Society of Wisconsin (PSW) is only 26 years old? In 1997, when One Voice, One Vision became a reality, housing pharmacists from all settings under one umbrella, a community began to form—one that is diverse and spans not only pharmacy settings but a range of ages, geographic locations across Wisconsin, genders, and ethnicities. Communities often take decades or even centuries to build, so what PSW has created in a relatively short amount of time is truly special. Most longstanding PSW members would say that being part of this community and networking with each other is what they value most about their PSW membership. This desire to connect, paired with a sense of wanting to serve the pharmacy community, often naturally leads members to search for volunteer opportunities within PSW. Being a poster reviewer turns into committee membership, which leads to chairing a committee, which can ultimately lead to Board membership. This is an oversimplified pathway one could take, but the point is, PSW has fantastic volunteers who devote their time and talent year after year after year.

It is because of this hard work and dedication that PSW wanted to pursue the creation of a fellowship designation (FPSW). When PSW began considering this idea, 13 state pharmacy associations were maintaining fellowship programs, and 11 others were in the process of developing similar programs. Heterogeneity exists

among the state associations in determining what best defines a fellow. To explore the idea and process for fellowship to PSW, a group of members was assigned the task of evaluating the role fellowship would play within PSW and what would constitute a fellow that is specific to the organization. While early discussions focused on the goals of creating a fellowship program, conversations often revolved around distinguishing a member as a fellow based on consistent and sustained service to PSW.

As a pharmacy organization with a diverse membership practicing pharmacy across the continuum of the profession, PSW offers a multitude of ways for a member to get involved. Defining meaningful engagement within the

organization was a lengthy process and needed to encompass formal leaders who served through elected or appointed positions as well as “super volunteers” who find the time to be involved in the activities of the organization, such as writing articles for *The Journal*, presenting at meetings, participating in legislative days, and volunteering at drives and events, among other activities. Fellowship designation needs to be accessible, and fellows need to represent and serve as a goal of active membership. Eventually, the pool of fellows should be an example of the variety of ways one can serve an organization and their profession and be able to show how that involvement has helped them during their career.



I chose to pursue PSW Fellowship Status because it was an opportunity for me to give back to the organization and showcase all of the different opportunities that allowed me to grow and develop as a professional. I feel we all have a professional responsibility to serve as mentors and stewards to others regardless of what stage of career they are in. PSW Fellowship Status provides that forum and keeps me professionally connected to the organization in an entirely different way. I encourage other individuals who have been active and contributory members of PSW over the years to consider pursuing PSW Fellowship Status. It is a great opportunity to inspire future leaders and active membership in PSW as well as showing all of the different opportunities an individual has to contribute to the organization and the profession.

- Dr. Nick Olson



PSW has been a critical partner in advancing pharmacy practice in Wisconsin. As part of that, PSW has afforded me a variety of opportunities to contribute to the pharmacy profession, with our shared values of practice advancement, innovative practices, and leadership development. As PSW launched the Fellow program, I saw it not as an “award,” but more of an opportunity to contribute to PSW in new ways. Hopefully my journey with PSW will also resonate with and encourage others, who will also desire to contribute to PSW and the pharmacy profession.

- Dr. Arlene Iglar

“

Regardless of where I am in my career, my time available, and whether I am honing an existing skill or seeking to learn a new one, PSW always has opportunities that are just the right size and scope. Through these opportunities, PSW also prepared me to take on volunteer and leadership roles with national influence, particularly through the American Society of Health-System Pharmacists (ASHP). I applied to be a PSW Fellow because to me, it represents the significant influence PSW has on my journey in our profession. It is an honor to use the FPSW designation because it signifies professional excellence, and the patients we serve deserve our best!

- Dr. Julie Dagam

In addition to the aforementioned voluntary contributions, it was determined that candidates must be able to provide three letters of support, complete an application, provide supplemental material to the selection committee upon request, and maintain PSW membership throughout the application and formal recognition process. Once finalized, this process was presented to the Board of Directors in 2021, when the final touches for governance and timeline for recognition were approved. In 2022, PSW was honored to award the first FPSW designations to Drs. Julie Dagam and Julie Bartell. In 2023, PSW recognized Dr. Nick Olson and Arlene Iglar with this distinction. Additionally, PSW has proudly bestowed this recognition to all prior recipients of the PSW Distinguished Service Award; a paired recognition that will continue each year.

Recognizing members as fellows in response to long-term involvement is mutually beneficial to the designee and the organization. For the recipient, the recognition is significant and a culmination of years of service that has likely had an important effect on the member's professional growth, development, and impact. To the organization, the influence of service indicative of fellowship goes beyond the direct service by this member. In developing a fellowship program, PSW highlighted the idea that fellows often serve as role models to other pharmacy professionals, which can influence involvement and service across the state. Additionally, serving as a fellow allows long-time contributing members to re-engage in service as an advocate for the variety of paths to the fellow designation.

Initial recipients of FPSW personify

the organization's intentions to recognize members based primarily on service to PSW that has been sustained over the course of one's career. It came as no surprise that these individuals have impacted PSW as an organization, but also pharmacy practice within the state of Wisconsin and across the nation. While these may be separate endeavors for some, current FPSW designees have identified a strong link between involvement with PSW and professional fulfillment and success.

Current fellows have noted that PSW provided opportunities for engagement from their time as a student through being a seasoned member of the Wisconsin pharmacy community. Dr. Julie Dagam may have stated it most appropriately in response to documenting her most notable involvement: "Rather than making a specific list of additional contributions, it feels fitting to group together a number of smaller, more focused contributions that over a career really add up." This highlights a core belief among the developing group within PSW that active

service and involvement can look different from member to member and consistent involvement is the key to organizational success.

All fellows of PSW have been mentors and role models throughout their professional career. With FPSW recognition, they now serve as mentors and role models to individuals interested in learning what goes into meaningful service as well as individuals who have dedicated time and effort to PSW and are now exploring the opportunity to become a fellow. As the number of FPSW designees expands, this group will reflect the best of the organization and pharmacy practice in Wisconsin and will demonstrate the variety of opportunities to be involved within our community.

Self-reflection is critical for one's professional career. The decision to accept or forgo certain opportunities is an intimate decision. This allows members to create their own paths and experience PSW through a unique lens. Therefore, the time to apply for FPSW will vary, but all members are encouraged during their times of self-reflection to consider applying for FPSW and take the step as soon as they feel the time is appropriate.

Maria Wopat is the Medication Use Strategy Supervisor and PGY-1 Pharmacy Residency Program Director at the William S. Middleton VA in Madison, WI. Jonathan White is a Clinical Pharmacist and PGY2 Ambulatory Care Program Residency Program Director at Froedtert and the Medical College of Wisconsin in Milwaukee, WI.

Apply Online!

PSW Fellowship Recognition Program

“

I have dedicated much of my professional aspirations to expanding and advancing ambulatory care practice, advocating for pharmacist practice advancement, and educating and motivating young pharmacists. PSW has been integral in providing me opportunities to do all this and more and has provided me with an unquantifiable satisfaction. Being selected as a PSW Fellow is an immense honor, and I hope that I can use that honor to serve as a role model and continue to motivate and aspire young pharmacists to be involved in PSW.

- Dr. Julie Bartell

Wisconsin Pharmacy Foundation 2023 Annual Report: Honoring the Past and Embracing the Future

by Kate Hartkopf, PharmD, BCACP

It is with great pride and excitement that we introduce the [2023 Annual Report of the Wisconsin Pharmacy Foundation \(WPF\)](#). The collective efforts of our dedicated members, volunteers, and donors have once again proven the boundless potential that resides within our Wisconsin pharmacy community.

The WPF was established in 1969 by the board of the Wisconsin Pharmaceutical Association (WPhA) as a 501C(3) without stock and not-for-profit corporation. Its purpose was to receive gifts, donations, and bequests, on behalf of the then-WPhA in a tax-favorable manner. Goals for this income have evolved alongside the story of the Pharmacy Society of Wisconsin (PSW). More recently, the Foundation is expected

to act as a catalyst for practice advancement and change in support of PSW.

In this report, you will find not only a summary of our recent accomplishments but also a glimpse into our future aspirations. In 2023, the WPF Board and PSW Executive Committee had a unique opportunity to engage in dedicated strategic planning for the WPF. The result of this collaborative effort is a renewed mission and vision and a comprehensive three-year strategic plan that will guide the Foundation to make an even greater impact. We considered the ever-evolving needs of our profession, and we are eager to meet them with innovation, enthusiasm, and renewed determination.

Additionally, we wish to extend an invitation for those who are considering a

lasting impact: an opportunity for [legacy giving](#). By including our foundation in your estate planning, you can ensure that the profession you hold dear will continue to thrive for generations to come.

Thank you for your continued support. We hope that you are inspired by the items we have collaboratively achieved and the possibilities for the Foundation to positively shape and impact the future of Wisconsin pharmacy. Let this annual report be an invitation to engage with our vision to accelerate Wisconsin pharmacy innovation.

Kate Hartkopf is the Director of Team-based Care Strategies & Business Development at the Pharmacy Society of Wisconsin in Madison, WI.



Wisconsin Pharmacy
Foundation
Accelerating Pharmacy Innovation

STRATEGIC PLAN

2023



Wisconsin Pharmacy *Foundation*

2023 ANNUAL REPORT

Supported the development and release of the updated Wisconsin Pharmacy Foundation mission, vision, and [3-year strategic plan](#).



Leadership Development

- Sponsored the 2023 [Decker-Temple Leadership Pharmacy Conference](#) for 10 pharmacists from Wisconsin and 10 pharmacists from Iowa. This conference marked 30 years this year!
- Sponsored the annual joint Board Retreat between the Wisconsin Pharmacy Foundation and PSW Board of Directors to align strategic efforts between two boards; committing to a consistent, high-quality retreat venue and expert facilitator, fosters and promotes the highest-level engagement and productivity from the attendees with the limited time available.
- Hired and onboarded, Kate Hartkopf, PharmD, BCACP, Managing Director of the Wisconsin Pharmacy Foundation.
- In partnership with the Health-system Pharmacy Advisory Committee (HPAC), commissioned the Practice Advancement Leadership Team to inventory and promote pharmacy leader development resources previously prepared and distributed to PSW members.
- Invited Foundation Board members to participate in the inaugural Advisory Committee Assembly in conjunction with the 2024 PSW Annual Meeting to encourage the development and nurturing of emerging volunteer leaders within PSW.
- Developed application and scoring criteria for the Foundation-supported scholarship program intended to expand PSW member and conference attendee diversity and support aspiring future leaders with the path and pipeline to become active contributors within PSW.





DECKER-TEMPLE PHARMACY LEADERSHIP CONFERENCE

PRESENTED BY



Applications Open: 2024 Decker-Temple Leadership Pharmacy Conference

The [2024 PSW Leadership Pharmacy Conference](#) will take place August 3-5, 2023, in Galena, Illinois. The conference, combining professional and social functions over three days, provides an unequalled opportunity for pharmacists relatively new to their profession to develop skills which enable both personal and professional growth. Participants network with fellow selected pharmacists (10 from Wisconsin and 10 from Iowa) as well as the presidential officers and staff leaders of the Iowa Pharmacy Association and Pharmacy Society of Wisconsin while engaging in programming, recreational activities, and issue discussions.

Current PSW pharmacist members within their first 3-15 years of practice who reside and/or practice in Wisconsin are eligible to apply. Pharmacists who are currently a PGY1 or PGY2 resident are not eligible to apply, but are encouraged to apply at a later time. PSW welcomes applications from those who represent diversity in race, color, ethnicity, culture, national origin, sexual orientation, age, gender, gender identity, social class, physical ability/attributes, religious or ethical value systems, language, pharmacy practice area, geographic location, and other perspective shaping backgrounds.

Applicants must demonstrate clarity and vision in responses to application questions. All eligible applications received prior to the due date for submission are reviewed by a panel using a de-identified process. The review panel typically reviews over 50 applications for the conference and ultimately selects ten (10) participants from Wisconsin. Those applicants not selected are encouraged to submit an application the following year.

The [application](#) for the 2024 PSW Leadership Pharmacy Conference is due February 1, 2024.

Below: 2023 PSW Leadership Pharmacy Conference Attendees; Matt Ansay, Pauline Cass, Tara Feller, Sirr Grice, Matt Huppert, Maggie Lundholm, Jinhee Park, Jennie Piccolo, Jen Slaughter



2023 PSW Presidential Address

by Hannel Tibagwa Ambord, PharmD, MBA, MS

Thank you, Sarah. Thank you so much for the PSW welcome. Once again, thank you for joining us for the 2023 PSW Annual Meeting. I am excited to be here.

PSW Board of Directors, past presidents, my fellow pharmacists, technicians, residents, students, ladies and gentlemen. Thank you so much for the honor you have given me today. Before I go any further, I would like to thank God for the many blessings and grace he has extended to me and my family.

I was very humbled when I received the request to consider the PSW presidency, I must admit. I knew Sarah was talking to me because she called me by name, but inside my brain, I wanted to turn to see if she was speaking to somebody else. I consulted with my husband, my pharmacy team at Reedsburg Area Medical Center, along with my boss. I checked in with my mentor, Tom Thielke, and also prayed about it. They all gave me a resounding yes. So, I stand before you humbly and I accept the opportunity to serve you and our profession regardless of practice setting. I am proud to say that PSW strives to represent all practice locations, from independents to retail, hospitals, long-term care, managed care, academia, mail order, and industry, to name a few.

Let me start by thanking my husband, Joel. Thank you for always being there, for supporting me personally and professionally. We have an African saying: When you see a turtle on top of a fence post, you know that it did not get there on its own. Somebody must have put it there. Thank you for letting me stand on your shoulders.

To my beautiful daughter, Warren Asaba, congratulations on being accepted to the UW-Madison nursing program. You are tough as nails and you earned it. To my son, Holden Tibagwa, the bundle of energy that can talk to anyone, continue to channel your energies to the positive and you will surely shine bright.

Thank you to my friends and mentors. Last but not least, to my family away from home, Reedsburg Area Medical Center. Thank you for believing in me, supporting

me, and allowing me to dream bigger than my imagination. You look out for each other like a true family. Time and again you continue to show that excellence is never an accident. Without each of your contributions I would not be here, and Reedsburg Area Medical Center would not be where it is today.

Some of you have heard my story of why I practice pharmacy, but kindly allow me to revisit why I became a pharmacist. I grew up in Uganda, East Africa. When I was 6 years old, I had a severe case of chicken pox and needed daily injections. My father took me to the hospital every day to get my shots. We always waited in line for many hours. I was terrified of injections, so the wait felt like an eternity. Out of anxiety, one day I asked my father, "Why do we have to wait this long every time, just to get one shot?"

My father replied, "We have to wait for the doctor, because the doctor is also the pharmacist." As I gazed at my father disbelief, I told him that I was going to become a pharmacist so that kids did not have to wait that long. Mind you, pharmacy was not even offered at any of the universities in Uganda at that time, so how was I to become a pharmacist? It was a journey of faith. I knew that I wanted to help people but was not quite sure how I was going to get there.

While my story might be unique, many of us share a common thread in our desire to look out for and advocate for others. Pharmacists and technicians, we are in the business of taking care of people. We believe that what's right for the patient is right for the profession.

Bringing it to the present day, our mindset, framework, and practice models must evolve to allow us to soar to new heights.

We face many changes and obstacles in pharmacy practice.

The current efforts by manufacturers to disrupt the 340B program serve only to jeopardize patients, particularly those in underserved and rural areas.

PSW and pharmacy must prioritize our profession's sustainability and fair compensation for services rendered.



Amid technician shortages and workforce obstacles, a united front is crucial.

My recent participation in NASPA, the National Alliance of State Pharmacy Associations conference, revealed the pressing challenges pharmacy associations are grappling with. From the American Society of Consultant Pharmacists there is concern about proper reimbursement for immunizations and long-term care services. The National Community Pharmacist Association is apprehensive about impending payment model changes in January 2024. The unpredictability of DIR fees is very unsettling and has some independents taking out loans to survive. Meanwhile, the American Association of Colleges of Pharmacy's dire prediction of worsening pharmacist shortages, and the National Association of Chain Drug Stores' call for the continuation of pandemic authorities, highlight the need for collective action.

So how do we shift this trajectory? We need to make pharmacy the coolest profession. This will require early engagement with middle school children; waiting until high school may be too late. Initiatives such as "Club Scrub" at our medical center, which introduces various healthcare roles to students, exemplifies

this outreach effort. Let us empower our children to see their potential in pharmacy from a young age. After all, you cannot be what you do not see or do not know. I am here today because I saw this as a 6-year-old.

I urge all pharmacists, regardless of practice setting, to seize the opportunity to become recognized providers. I know that hospital pharmacists are currently not able to bill Medicaid because of how services are reimbursed, but that may change in the future. Think of medication reconciliation: Medication reconciliation birthed in hospital pharmacy has paved the way for placing pharmacists in ambulatory care clinics, emergency rooms—it is the bedrock for transitions of care and medication synchronization in the community and retail settings. The journey towards provider status has long been in motion. As the saying goes, a rising tide lifts all boats; let us align ourselves under this banner and take this opportunity to raise our image and elevate our profession. If you are not sure where to start, the PSW website offers a roadmap for ambulatory and community pharmacists to prepare for recognition as Medicaid providers.

Let us resist the temptation to think we can do it better or faster by going it alone. Having had the privilege and honor of joining ASHP state affiliate monthly meetings, I can tell you that Wisconsin, PSW, we are ahead of the pack. We are trailblazers. There is strength in one voice, one vision. PSW is very interested in listening and learning the factual context of your stories, from academia to independents to community and hospital practice settings. PSW will leverage the power of consensus, drawing from questions to understand pharmacy issues so PSW can write, tell, and legislate your stories. Let us tackle our problems collectively with PSW and together with purpose, we will go far.

The COVID-19 pandemic underscored our profession's importance as accessible healthcare providers. Utilizing innovative practices, technology, and teamwork, pharmacists and technicians had administered over 282 million COVID-19 vaccines by November 2022, alleviating pressure on conventional healthcare systems.

My friends, let us not mistake activity for results. Let me repeat that: I beg you, do not mistake activity for results. Let us take advantage of the mind space that

pharmacy currently occupies. Advocacy for our patients and our profession is pivotal. Advocacy provides another opportunity for us to catapult information to educate our legislators. We need to make sure that laws passed are actionable and are good for pharmacy; they must enable us to not only work at the top of our license, but also to be compensated for those services.

Let's talk about change. Change: Everything is changing daily. Change is inevitable. As Spencer Johnson wrote in *Who Moved My Cheese*, we must adopt a proactive mindset. Facing fears, embracing change, and envisioning success are crucial. In the age of artificial intelligence or AI, will pharmacy embrace AI, and if yes, how? Is there an opportunity for AI in pharmacy call centers, drug diversion, with operational efficiency, with improving medication safety by monitoring for drug interactions, allergies, and dosing errors, in ambulatory care clinics with patient notes, with medication synchronization or reconciliation? Will doctors or pharmacists with AI replace those without it? Is it human vs. Machine, or human and machine? I think collaboration between humans and machines should be embraced. We must prepare for its integration and explore how it can enhance our services.

Let us prioritize employee-centered strategies that foster trust by conducting regular "stay" interviews instead of "exit interviews." Stay interviews can improve retention and engagement.

You know, it's not every day that you have your kids in the audience. In fact, this is the first time I have given a speech in front of my children, so kindly allow me to speak to them directly before we close. Warren, as you go off to college, and Holden, as you start high school (Wow—where did the time go? Mom is freaking out!), I want to leave you with a message from a song that speaks to me. "Hold the door for somebody, say 'yes please,' say 'thank you,' don't steal, don't cheat, and don't lie. I know you got mountains to climb, always be humble and kind." Help others along the way and those that are less fortunate. May the good Lord put the wind behind your sails.

To our students, young pharmacists, and young leaders. Stay involved with PSW. Find a good mentor. Mentorship is important—your attitude needs to be one

of, "I need to be coached and I want to be coached." Keep people in your life that do not tell you what you want to hear, but rather what you need to hear. Those that can tell you the truth, but you must embrace constructive criticism to better yourself.

As I close, life is a manifestation of energy, guided by our vision, focus, and aspiration. Elite performers spend time visualizing their best performance or race and focus their efforts, and our profession should do the same. Amidst challenges and change, let us channel our leadership to positively impact the less fortunate, the poor, the needy, the underserved, and the underinsured, filling healthcare gaps and shaping our destiny.

Aristotle's wisdom reminds us that intention, effort, direction, execution, and a vision for challenges as opportunities drive success. With over 95% of Americans living near a pharmacy, we stand at a momentous juncture. We, pharmacy, are the front door of healthcare in our communities. The impending shortage of primary care physicians, up to 55,000 by 2033, offers pharmacy an opportunity to bridge the healthcare gap. Folks, it is a great time to be a pharmacist, and technicians you are not just technicians; God knows every pharmacist needs a hero.

So together, let us soar to new heights. Let us be intentional about being inclusive and fair, treating one another with dignity and respect. Let us find strength and value in our differences. With our collective energy, dedication, and unwavering commitment to our patients and our profession, we can and shall usher in a brighter future for pharmacy united by one voice, one vision.

Hannet Tibagwa Ambord is the President of the Pharmacy Society of Wisconsin in Madison, WI.

2023 Christopher Decker Scholarship Recipients

Chris Decker was the CEO of the Pharmacy Society of Wisconsin for almost 30 years. His legacy of developing a Wisconsin Pharmacy culture of innovation, collaboration, and mutual respect supported pharmacy practice advancement in Wisconsin and beyond. We have all been touched by his story, his positivity, and his call to us to be “Difference Makers.”

The Christopher Decker Scholarship Fund was created in 2022 by the Wisconsin Pharmacy Foundation after a generous contribution from the Decker family and the fund continues to expand with the annual Christopher Decker Golf Outing each June.

The scholarship is intended to recognize future pharmacists who emulate Chris’s legacy of innovation, collaboration, mutual respect, positivity, and his call to us to be “Difference Makers.” Using an application developed by PSW volunteer leaders, the applicants answered three questions:

- How do you intend to be a

difference-maker as both a pharmacist and a person in your community? Include a description of attributes of a difference maker and describe how you are practicing or intending to practice those attributes.

- The work of the Pharmacy Society of Wisconsin and Iowa Pharmacy Association is often accomplished with great determination over many years. Describe what perseverance or resilience means to you and provide an example of a time where you showed perseverance or resilience, either in your pharmacy career or personally.
- Christopher Decker viewed pharmacy practice with great optimism. What makes you optimistic about being a pharmacist in today’s health care environment, and how will you share that optimism with patients and the patient’s community?

Acknowledging Chris’s legacy and connections to the Pharmacy Society

of Wisconsin and the Iowa Pharmacy Association, one student from each of the schools of pharmacy in Wisconsin and Iowa will receive a scholarship of \$1,000 each in 2023. Applications were scored by volunteers using a rubric and a de-identified review process.

This year’s Wisconsin recipients are Michael Nome from UW-Madison, Dragana Vlaski from Concordia University Wisconsin, and Mariah Voigt from the Medical College of Wisconsin. Michael, Dragana, and Mariah were selected as the recipients of the 2023 Christopher Decker Scholarship after demonstrating in their applications that they emulate Chris’s legacy of innovation, collaboration, mutual respect, positivity, and his call to us to be “Difference Makers.”

Applications for the 2024 Christopher Decker Scholarship will be opening soon. Eligible student pharmacists can apply through April 1, 2024. Watch PSW Fast Facts or check the PSW website for more information.



Michael Nome
University of Wisconsin-Madison



Dragana Vlaski
Concordia University Wisconsin



Mariah Voigt
Medical College of Wisconsin

CHRISTOPHER DECKER SCHOLARSHIP GOLF OUTING



THURSDAY, JUNE 13, 2024
WILD ROCK GOLF CLUB, WISCONSIN DELLS



PSW Organizational Chart

Leadership

Board of Directors

Wisconsin Pharmacy
Foundation Board
Christopher Decker Scholarship
Golf Outing Outreach Committee

Committee On Appointments

Diversity, Equity & Inclusion

Membership Engagement

Provider Status Core Team

Sponsorship Engagement

Boards & Committees

Ambulatory Care
Advisory Committee

Community Pharmacy
Advisory Committee

Editorial
Advisory Committee

Educational Programming
Advisory Committee

Health System Pharmacy
Advisory Committee

Senior & LTC
Advisory Committee

Student Pharmacist
Advisory Committee

Technician Section
Board

Practice Advancement
Leadership Team (PALT)

ASHP House of Delegates
Representatives

Member Groups

PSW Network Groups

Member Meet-Ups

PSW Podcasts

WPRC Planning Committee



Pharmacy Society
of Wisconsin

DIVERSITY, EQUITY, AND INCLUSION

Organization Recommendations

PSW will support diversity in our membership, equity in opportunities, and inclusiveness in our organization, empowering pharmacists, technicians, and student pharmacists to address systemic racism, and have broader cultural humility in the care of patients.

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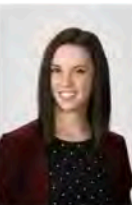


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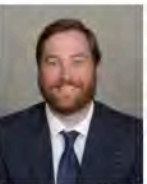


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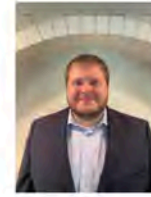
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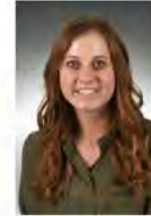
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AMBULATORY CARE PODCAST

PSW's Ambulatory Care Podcast (ACP) is a podcast brought to you by PSW's Ambulatory Care Advisory Committee. Each episode will focus on topics pertinent to ambulatory care pharmacy practice and is hosted by PSW members across the state.

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1:43

09:37

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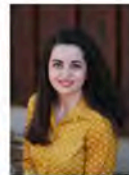
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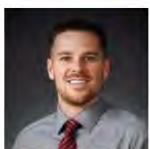
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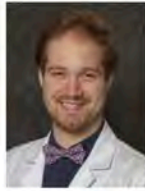


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CAREER DEVELOPMENT, EDUCATION, AND CONNECTION: TECHNICIAN FOCUS!

The PSW Educational Programming Advisory Committee (EPAC), a member-led and focused committee of PSW, set a goal in 2023 to develop and encourage more educational content directed and offered to pharmacy technicians.

In 2023, more than 75 hours of pharmacy technician continuing education was developed and deployed, including more than 30 hours of continuing education offered to pharmacy technicians live at PSW conferences.

The goal for 2024 is to help develop and encourage more pharmacy technician-based education created and presented by our pharmacy technician members! Help PSW make that a success, too! Pharmacy technicians, please consider presenting at a conference or creating a recorded on-demand educational session. Pharmacists, please encourage a fellow pharmacy technician to share their knowledge or consider co-presenting with a technician partner.

LEARN MORE







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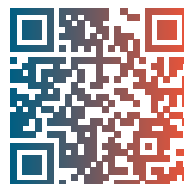
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