

WYOMING STATE BOARD OF PHARMACY

Board Meeting June 23, 2011

UW Outreach Building

Casper, Wyoming

Present/Absent	Board Member	Title
<i>Present</i>	Terry L. Carr, R.Ph.	Board President
<i>Present</i>	Randolph A. (Randy) Harrop, R.Ph.	Board Vice President
<i>Absent</i>	John R. McPherson, D.D.S.	Board Secretary/Treasurer
<i>Present</i>	Robert J. (Rick) Davis, M.D.	Board Member
<i>Present</i>	Alison Kay McManus, R.Ph.	Board Member
<i>Present</i>	Bessie S. McGirr, R.Ph.	Board Member
<i>Absent</i>	Charles W. Smith	Board Member
<i>Present</i>	Stephanie McAntee, R.P.T.	Board Member, <i>ex-officio</i>

Guests/Observers:

Ken F. Nelson, J.D.	Senior Assistant Attorney General
Mary K. Walker, R.Ph.	Executive Director, Wyoming State Board of Pharmacy
H. Richard Burton, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Henry A. "Hank" York, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Alan Hill	Align

Call to Order: President Carr called the meeting to order at 9:30 a.m.

The align Planning Meeting Report is attached for meeting minutes.

President Carr adjourned the meeting at 12:15 p.m.

WYOMING STATE BOARD OF PHARMACY

Board Meeting June 24, 2011

UW Outreach Building

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Present/Absent	Board Member	Title
<i>Present</i>	Terry L. Carr, R.Ph.	Board President
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<i>Present</i>	Alison Kay McManus, R.Ph.	Board Member

<i>Present</i>	Bessie S. McGirr, R.Ph.	Board Member
<i>Present</i>	Charles W. Smith	Board Member
<i>Present</i>	Stephanie McAntee, R.P.T.	Board Member, <i>ex-officio</i>

Guests/Observers:

Ken F. Nelson, J.D.	Senior Assistant Attorney General
Mary K. Walker, R.Ph.	Executive Director, Wyoming State Board of Pharmacy
Phyllis A. Chapman	Senior Office Support Specialist, Wyoming State Board of Pharmacy
H. Richard Burton, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Henry A. "Hank" York, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Lynn Birleffi	Wyoming Retail Association
Brandy Johnson, PharmD, R.Ph.	Safeway
Anglea Wilde	Emissary Pharmacy
Lane Williams	Wal-Mart
Christina Andrade, AS CPhT.	Wyoming Pharmacy Association
Sarah Ruppert	University of Wyoming, School of Pharmacy student
Omo Oisamoje	University of Wyoming
Lanae Salveson, PharmD, R.Ph.	Community Health Center
Stevi Buck	Safeway
Brude McGirr, R.Ph.	Emissary Pharmacy
Monique Peterson Baun	Wyoming Professional Assistance Program
Rodger Wilson	Walgreens
Linda Gore Martin	University of Wyoming, School of Pharmacy faculty
Janelle Krueger	University of Wyoming, School of Pharmacy faculty

Call to Order: President Carr called the meeting to order at 8:02 a.m.

Randy Harrop made a motion to go to executive session to discuss disciplinary matters at 8:03 and Kay McManus seconded the motion.

President Carr called the public meeting back to order at 9:46 a.m.

Docket No: 10-16 Sandra Leveque: Randy Harrop moved to accept the Settlement Agreement. Bessie McGirr seconded the motion which passed with a 5-0 vote.

Docket No: 10-32 Wade Morrow: Rick Davis moved to accept the Settlement Agreement. Charlie Smith seconded the motion which passed with a 4-1 vote.

Docket No: 10-36 Wyoming Kroger Pharmacies: Randy Harrop moved to accept the Settlement Agreement. Kay McManus seconded the motion which passed with a 5-0 vote.

Docket No: 10-37 Jeffrey Williams: Charlie Smith moved to accept the Settlement Agreement. Kay McManus seconded the motion which passed with a 4-0 vote. Randy Harrop recused himself from voting.

Docket No: 10-40 Ridley's Pharmacy: Rick Davis moved to accept the Settlement Agreement. Bessie McGirr seconded the motion which passed with a 5-0 vote.

Docket No: 11-09 Karen Medow: Bessie McGirr moved to accept the Settlement Agreement. Rick Davis seconded the motion which passed with a 5-0 vote.

The Board commented that staff should review pharmacy practices which lead to diversion or loss.

Review and approval of the March 23-24, 2011 and April 15, 2011 Board Meeting minutes: Both sets of minutes had a few minor changes needed. Kay McManus moved to accept both sets of minutes with the changes. Rick Davis seconded the motion which passed with a 5-0 vote.

Wyoming Professional Assistance Program quarterly report: Monique Peterson introduced herself and gave the quarterly report. In all there are 33 participants that are all compliant at this time. 5 are pharmacists and 2 are students. Mary Walker has recently sent 6 applicants to be reviewed and evaluated. Monique also announced they are planning to fill the open position real soon.

Wyoming Retail Association: Lynn Birleffi spoke about the workplace rules. Her organization has not contacted the governor's office. There was a meeting in Cheyenne to discuss what different places were doing as far as lunches and breaks. Five of the nine chain companies represented by the National Association of Chain Drug Stores (NACDS) currently provide a minimum of a one hour lunch break. NACDS represents 66 store fronts in Wyoming and 68% of them already provide meal/rest breaks. Ms. Birleffi asked if there would be a grace period if Chapter 2, Section 35 is approved by the governor.

License Renewal Update: Phyllis Chapman reported the following:

License Type	Mailed out	Still need to renew (expired June 30, 2011)
Controlled substance	2865	1157
Resident Pharmacies	140	4
Non-resident Pharmacies	446	48
Institutional Pharmacies	31	2
Wholesale Distributors	614	86
Emergency Drug Permits	27	2

Compliance Officers Report: Richard Burton reported he is two-thirds of the way done with his inspections. He said about 50% are using the self inspection form. Some are saying they never received the form. It was decided to put it on the website. Richard indicated that invoice signing was getting better and technicians are posting their licenses now. Richard performs random controlled substance audits. All in all he is seeing a better job across the board.

Hank York reported that about 50% of his are also using the self inspection report. Hank stated he has taken the time to sit down and fill out the self inspection form with them so they understand it. He announced that all inventories have been received in the office and he only had to call for about 7 that were missing. Our current intern Sarah Ruppert is working on a paper for pharmacists-in-charge to refer to for their responsibilities.

Collaborative Practice Sub-Committee: Bessie McGirr reported on the June 10, 2011 meeting which introduced two new members; Bessie McGirr and Jane Robinett. The committee received an application from Rock Springs and Wheatland. The Rock Springs application was submitted with great detail, while the Wheatland application had minimal information. Neither application was approved at the committee meeting pending more information.

Rick Davis moved to accept the sub-committee report and Charlie Smith seconded the motion. This motion passed with a 5-0 vote.

MPJE Item-Writing: Terry Carr and Mary Walker spoke about the question writing experience. They explained the intenseness of the two day meeting. Mary Walker explained how easy it is to come up with questions but it is extremely difficult to come up with answers. Kay and Mary are attending the August 17th and 18th meeting. Terry, Bessie, Randy, Richard and Hank expressed interest in attending.

NABP Annual Meeting: Kay McManus and Hank York attended this meeting. USP was addressing labeling and what is important on the label. NABP is also making headway on the Prescription Drug Monitoring Program. They will cover the cost to interconnect for the first five (5) years. They will not store the information but will follow each states law and provide the information. NABP recommends all Boards get a facebook page before someone else gets their domain. We will also need to write social media policies for our office. The next annual meeting is scheduled for May 19-22, 2012, in Philadelphia. Compliance officer training will be at NABP in December 2011. NABP will pay for one person, and the Board requested both compliance officers attend.

Rules Revisions: Mary Walker announced we had not heard anything from the Governor's office about the rules as of yet. She stated that July 5, 2011 will be the 75th day for him to sign or reject the proposed rules.

Acronym and Log for PDMP: There was a discussion about likes and dislikes of the ones already presented to the board members. At this time there is not an agreement as to which one everyone liked best. Mary Walker let them know that this must go to print soon, as the grant dollars must be used by February 2012.

Collaborative Practice Discussion: Rick Davis started a lengthy conversation regarding collaborative practice and the Board Rules and Regulations. Dr. Davis suggested the board make a separate chapter for collaborative practice to make the information more explanatory. Prior to this meeting Dr. Davis sent a letter to all the board members with his thoughts, concerns and suggestions. A copy of this letter is on file with the June 24, 2011 Board meeting agenda items. Jaime Hornecker from WPhA commended the Board for revising collaborative practice.

Roger Wilson, Rph., from Walgreens discussed how CLIA-waived testing is done in his practice

Brandi Johnson, RPh., from Safeway discussed her experience with CLIA-waived testing. In both corporations patients make appointments, extra pharmacists are available and the results are sent to

the practitioner (if the patients have one) and people are being sent to the ER with high blood sugars or AIC. Cash is the method of payment.

50 Year Pharmacists: Terry read the list of pharmacists to receive their 50 year certificates. They are Sally Vandenberg, John Hickman, Donald Griss, James Shawver, Barry Horn and Iris Harnagel. Pharmacist Richard Wilder was honored with a plaque for 60 years of service. The certificates and the plaque will be presented at the WPhA convention the following day.

Memorandum of Understanding with NABP: The purpose of this MOU is to describe the terms in which NABP will provide the NAPLEX and MPJE to candidates.

Kay McManus moved to accept the MOU which was seconded by Randy Harrop. This passed with a 5-0 vote.

NABP/AACP District 6, 7 & 8, October 4-6, 2011, Seattle, Washington: Kay McManus is going for sure. Stephanie McAntee, Randy Harrop and Bessie McGirr expressed interest in attending.


Ken Nelson announced new board member training on August 4, 2011 in Casper.

Kay McManus moved to adjourn the meeting at 12:32 p.m. and Randy Harrop seconded the motion.

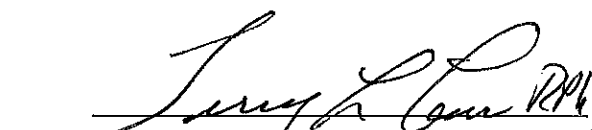
Respectfully submitted on July 21, 2011

Notes by Phyllis Chapman, Senior Office Support Specialist

Respectfully submitted and reviewed:


Mary Walker, R.Ph.
Executive Director

Minutes approved and entered into record:


Terry Carr, R.Ph.
Board President

ALIGN[®]

Planning | Consulting | Training
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Planning Meeting Report

Wyoming Board of Pharmacy
June 23, 2011

One goal.

One team.[®]

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11/11/11

Executive Summary

On June 23, 2011, the Wyoming Board of Pharmacy met in Casper for a planning meeting. At this meeting, current issues facing the practice of pharmacy in the state were discussed. The board identified several issues facing pharmacists that directly impact the safety of the public.

The board examined the impact of these issues and began the process of developing goals to address them. Several goals were developed and will be expanded upon in future planning meetings.

Comprehensive Analysis

History:

Mary Walker, Executive Director of the Wyoming Board of Pharmacy, contacted Align in May of 2011 regarding facilitation of a planning and teambuilding session at their July board meeting. Align consultant T. Alan Hill met with Walker to discuss the desired outcomes for the meeting. Walker indicated that she would like to include planning, teambuilding, and communication.

Hill facilitated the session at the UW Outreach Building in Casper on June 23, 2011. The meeting was attended by members of the Board of Pharmacy, its staff, and guests. Prior to the meeting, a pre-event questionnaire was distributed to the entire board and staff. Nine responses to the survey were received (responses can be found in the Appendix). These responses were shared at the June 23rd meeting to initiate discussion about the present and the future of the board.

All board members and staff in attendance participated actively and provided significant feedback about what issues they believe are facing the board and the practice of pharmacy in Wyoming today and in the future (see meeting notes section). The discussion centered on several major issues including: the ability of pharmacists to assume the role of Pharmacist In Charge (PIC), the impact of additional services (testing, immunization, etc.) on the workload of the pharmacist and their ability to provide quality service, abuse of prescription medications, and education of pharmacy technicians.

The board then began the process of developing goals to address the most significant issues. Several goals were identified by the board before the allotted time for the meeting elapsed. These goals are located in the Action Items section of this report.

In closing, it was discussed that Align would provide a report and recommendations from this meeting and that the board would continue the goal setting and planning process in a future meeting.

Comprehensive Analysis

Observations and Recommendations:

Based on the facilitation at the planning meeting as well as the responses from the pre-event questionnaire, Align has made the following observations and recommendations:

Observation:

The board is very dedicated to protecting the safety of the public. This was identified as the primary purpose for the existence of the board and every other issue discussed during the day was demonstrated to directly impact public safety. The members of the board take this duty very seriously and they are passionate about it.

Recommendation:

As recommended by Mary Walker, it will be helpful to the board to rewrite its mission statement. The statement does mention public safety, but neglects the board's relationship with its constituent pharmacists and their role. Development of a new mission statement was discussed as a possibility for the June meeting, but the planning process did not leave enough time. The board may choose to begin the process of developing a new mission statement at a future meeting. Align can help facilitate this.

Observation:

The board identified multiple issues related to the addition of retail services that, if not managed properly, could negatively impact the role of the pharmacist, the service they provide, and the relationship with their patients. In most cases, the addition of these services would appear to be geared to generating additional revenue at the potential expense of pharmacist time and productivity.

Recommendation:

The board should consider identifying stakeholders that represent the retail perspective and determine how best to include them in planning and decision making. This would serve the board by allowing them to express concerns regarding services, PIC, working conditions, and other concerns to the retail representatives. It would also allow the retail representatives the opportunity to have a voice in the development of rules and regulations that affect their business.

It was mentioned in the planning meeting that representatives from several retail establishments would be present at the Thursday morning meeting to make presentations. Align was not part of this meeting and is not aware of the outcome so it is possible this process may have already begun.

Comprehensive Analysis

Observation:

The board expressed a strong desire to play a guiding role in the development of collaborative practice models and agreements involving pharmacists. This was expressed as a central concern to maintaining quality in delivery of pharmacy services. The group discussed the possibility of development of new rules and regulation to define collaborative practice.

Recommendation:

The board could consider the formation of a subcommittee for this purpose. A designated subcommittee would allow for direct focus on this issue and the opportunity to invite more stakeholders to the table as subcommittee members. Formation of subcommittees may also be a consideration for the topics of PIC and technician education.

Action Items

At the June 23rd meeting, the board identified the following goals:

- The Wyoming Board of Pharmacy will work to clarify the role of the pharmacist in regards to Collaborative Practice.
- The Board will work to solidify the role of Pharmacist In Charge (PIC).
- The Board will explore the opportunity to enhance the professional role of pharmacy technicians through additional qualifications and education.
- The Board will continue to support the physician-pharmacist-patient relationship.

The first action item is to modify these goals if necessary and to identify any additional goals that were not added based on the limited timeframe.

Next, identify a “Plan for Action” for each goal. These action items should include:

- A description of the action item
- Responsible party (who will make sure it’s done)
- Timeframe (when it will be done)
- What other parties will be involved (stakeholders)

A “Plan for Action” template that can be used to facilitate this process is provided in Appendix B.

Meeting Notes

The group met in the UW Outreach Center in Casper, Wyoming at 9am on June 23, 2011. In attendance were:

Board Members:

- Terry L. Carr, R.Ph., President
- Randolph A. (Randy) Harrop, R.Ph., Vice President
- Alison K. (Kay) McManus, R.Ph., Member
- Bessie S. McGirr, R.Ph., Member
- Robert J. (Rick) Davis, M.D., Member
- Stephanie McAntee, R.P.T., Member, Ex-Officio

Board of Pharmacy Staff:

- Mary K. Walker, R.Ph., Executive Director, Wyoming Board of Pharmacy
- H. Richard Burton, R.Ph., Inspector/Compliance Officer
- Henry A. (Hank) York, R.Ph., Inspector/Compliance Officer

Others:

- Sarah, UW Pharmacy Student/Observer
- Omo, UW Pharmacy Student/Observer

Hill opened the meeting with a fun icebreaker activity where participants were asked to tell the group three fun facts about themselves. After this activity, Terry Carr called the meeting to order and official opened the session.

Meeting Notes

Survey Review:

Participants reviewed the responses to a pre-event survey sent out by Align in advance of the meeting. The responses were used to facilitate discussion.

After reviewing the survey answers for the question “What do you believe is the most important function of the Board of Pharmacy?” the group expressed the consensus that the most important function of the board is “**Protecting the Public.**” Board members were very clear on this and throughout the day, all other issues that were discussed were related directly to this function.

When asked how they protect the public, the board responded:

- Assure accreditation standards are met
- Disciplinary actions when necessary
- Protecting the public from things they don't know about
- Rulemaking
- Oversight
- Licensing
 - Practitioners
 - Suppliers
 - Distributors
- PDMP
- Rules and regulations
- Advice and guidance

After reviewing the responses to the question “What is your role as a board member?” the group acknowledged the value of the “**Diversified Perspective**” of the group. They value the strength they gain by having input from pharmacists and other concerned stakeholders such as technicians, physicians, community members and others. When asked what the benefits of the diversified perspective are, the group responded:

- Non-pharmacist consumer perspective
- Helps avoid tunnel vision
- Helps with introspection
- Public opinion
- Physician, dentist, veterinary perspective (Controlled Substances Act covers their participation)
- Technician perspective

Meeting Notes

When discussing the responses to the question “How comfortable are you with your role as a board member?” the group discussed some things that could be done for new board members:

- Orientation with existing board member
- Continue to participate in statewide board orientation program
- Board of Pharmacy office orientation
- Continue to attend Attorney General training
- Provide more information on the rulemaking process

After reviewing the responses to the question “What positive changes have you seen as a board member in the past year?” I asked the group to tell me what success of the past year they could celebrate. They responded:

- New legislation and the prescription drug abuse taskforce
- Unsolicited drug monitoring is down, solicited is up
- The group is ready to celebrate when the mandatory breaks rule is implemented

Meeting Notes

The question “What is the most pressing issue facing the Wyoming Board of Pharmacy?” resulted in discussion of the following issues:

- Prescription drug abuse
 - Legitimate channels – Rx shopping
 - Internet
 - Deaths from Rx abuse are up
 - Pharmaceutical “parties”
 - Need for education on the danger of Rx medications
 - Assisting Living/Long Term Care diversion
 - “Hospice packs” resulting in little/no control over controlled substances
 - Prescription Drug Monitoring Program (PDMP) needs to be online
 - Need to quantify potential for abuse
 - Need to develop awareness of the issues with
 - Public
 - Other health professionals
 - Could have a summit with
 - Board of Medicine
 - Board of Nursing
- Education for pharmacy technicians
 - Increase professionalism of the role
 - Ability to serve as designated agent
 - Increase responsibility for tech to help patient make contact with pharmacist
 - Address pharmacist liability for tech actions
 - Any changes to this may need to wait for a short time as new administration is getting up to speed
- Pharmacist In Charge (PIC) and pharmacist responsibilities
 - CLIA waver testing
 - Chapter 2
 - Collaborative pharmacy care
 - Additional services take time from primary pharmacy role
 - Need for clear definition of pharmacist role in collaborative practice
 - Pressure from retail outlets to increase services
 - Clear definition for requirements to be PIC
 - Office dispensing

Meeting Notes

Responses to the survey questions regarding future important issues and changes the group would like to see resulted in the following feedback:

- Control of Pharmacy Benefit Managers (PBMs)
 - They are the “middle person” between the pharmacist and reimbursement
 - Board could regulate or license them
 - Patients are afraid to or unaware they can push back against mail order
 - Can \$\$ parity be obtained with the mail order programs for local pharmacies
 - Drives other revenue issues which pushes need for alternate revenue sources
 - Pushing for temporary licensing is an issue
 - Loss of revenue endangers pharmacies that are critical to local patients
- Patient counseling
 - Need to be more proactive on this
 - Require confirmation of patient understanding
 - Workload is preventing this from happening

During the discussion of the survey question, some items were discussed that fall into the category of “Public Awareness.”

- Inspection/compliance process can have a negative connotation “They’re just up there making rules.”
- Public lack of knowledge about
 - The danger of prescription drugs
 - Prevalence of diversion
 - Right to receive Rx counseling
 - Right to be assertive about understanding Rx medications they are given
- Need to better educate consumers

Developing Goals:

After discussion of the current and future issues facing the board, members were asked to begin developing goals for the board in the near future. The board suggested the following goals:

- The Wyoming Board of Pharmacy will work to clarify the role of the pharmacist in regards to Collaborative Practice.
- The Board will work to solidify the role of Physician In Charge (PIC).
- The Board will explore the opportunity to enhance the professional role of pharmacy technicians through additional qualifications and education.
- The Board will continue to support the physician-pharmacist-patient relationship.

Meeting Notes

Closing:

The meeting closed at noon with the understanding that the results of the meeting would be reported by Align and that the planning process would continue in future meetings.

Appendix A

Pre-event Questionnaire Responses:

What do you believe is the most important function of the Board of Pharmacy?

- Safeguarding the public
- Protecting the public
- To Protect the public
- To ensure the safety of the public in regards to pharmacy or pharmacy related issues
- Assuring that Wyoming citizens receive excellent pharmacy services by qualified individuals
- As the public member, my role is to try to protect consumer interests and "stir the pot"
- To up hold laws of the state
- Protect the citizens of Wyoming by providing rules/regulations for safe pharmacies
- The Board has several important functions. We review and update the Wyoming Pharmacy Act, the Wyoming Controlled Substances Act, and the Rules and regulations of each of these acts as necessary, keeping up with changes in the delivery of medical care and the practice of Pharmacy. Thru the work of our investigators and their reports to the Board we see that the practice of pharmacy is accomplished under these rules and regulations for the benefit and protection of the patients in their care. The Prescription Drug Monitoring Program has expanded our responsibilities. All that we do is to see that the patients receive appropriate pharmacy care within a landscape of the delivery of medical care which seems to be an ever-changing venue

What is your role as a board member?

- making sure to protect the public and updating rules to ensure this
- to provide a voice for technicians in regards to public safety
- Listen, then share my observations
- Being the only dentist on the board, I feel my job is to provide a different perspective on issues than a pharmacist may have. I also give opinions regarding anything affecting my profession
- The Pharmacy Act requires a licensed physician to serve on the Board. I fill that position and am in the 1st year of my second six year term. There has been an increasingly close relationship between our Board and the Board of Medicine and I play a role in that relationship. I also find that as I am retired and getting older that I also have the perspective of a patient and although we have a lay member of the Board for that purpose I would like to believe that we in some ways share that important responsibility
- Public member

Appendix A

How comfortable are you with your role as a board member? What resources or information would help you with this role?

- I'm comfortable as a member, and rely heavily on my fellow members opinions.
- I am in my 10th year and feel quite comfortable. NABP provides good resources for board members.
- I am comfortable being part of the board.
- Yes. when first appointed it would have been helpful to know what i could and could not do before the first meeting
- I am very comfortable. That said I am not a pharmacist and my ideas may have little practical application in their work place. I believe that I have to be careful about that and listen to the rest of the Board.
- I am becoming more comfortable as a non pharmacist in my role as the public member
- Never completely comfortable since I am not a pharmacist, and there is no substitute for "experience in the field". The remedy would be more time/experience as a board member, and learning more about pharmacy.

What positive changes have you seen as a board member in the past year?

- The Board being seen as an positive influence throughout the State
- The prescription drug monitoring program keeps growing/expanding. Having meetings in different locations to include a variety of guests.
- Interesting. I am not sure that I have been aware of positive changes. I have been impressed from the start that this is a dedicated group of individuals who care a lot about their profession and the patients they deal with. I have also been struck with the responsibilities pharmacists have in the chain of medical care. It is positive that the character has remained the same.
- If signed by the new governor, the mandatory breaks and meals for pharmacists, also the updating of many rules and regulations
- none if the governor does not sign the new rules mandating breaks for pharmacists
- Our rule changes have made the practice of pharmacy safer for the patient by requiring rest periods for long shifts.
- interns can immunize
- many improvements to processes for licensing, rules, and legislation

Appendix A

What is the most pressing issue facing the Wyoming Board of Pharmacy?

- widespread drug abuse of prescription meds
- Keeping up with the ever changing profession of Pharmacy
- Rules, mandatory breaks, disciplinary actions.....many issues to address
- Prescription drug monitoring program needs full compliance, and hopefully real time data
- getting the prescription drug monitoring program online
- It is difficult to pick a single issue. The prescription Drug Monitoring is not one of them, but must be maintained due to its important function. The practice of Pharmacy is one that is in evolution and one that has at least 3 different involvements with patients and their care: retail, institutional and most recently, what is currently called collaborative practice. Each can be practiced by any pharmacist with a Pharm D degree, but they are quite different from a day to day practical standpoint. We have just attempted to rewrite Chapter 2 of the Rules and Regulations of the Pharmacy Act which is to define the general practice of Pharmacy. I have expressed some concerns about trying to cover each of these types of practice in a single chapter. Relative to retail practice which seems to take a majority of the Boards time, there are changes in the practice which are driven by changes in the delivery of medical care, the arcane relationship between pharmacies, insurance companies and the pharmaceutical industry, but there are also changes that have occurred by the addition of new responsibilities which do not fall into the category of traditional pharmacy care which in my concept is the filling of prescriptions, the maintenance of patient profiles, in order to assure patient safety and to counsel patients with regards to the use of their medications, prescribed as well as over the counter drugs. The consolidation of retail practice increasingly into "Big Box" outlets complicates this issue as the pharmacist may have less and less independence to see that pharmacy care is best delivered to the patient. We are currently wrestling with the position of "pharmacist in charge who has especial responsibilities to the practice and the patients which may be at variance to Corporate Practice. Such issues are not necessarily in the pervue of the Board but they might affect patient care.
- I would like to get a more formal education requirement for techs.

Appendix A

What do you think is the most important issue facing pharmacy professionals in Wyoming in the next year? The next 5 years?

- being able to do what they have been trained to do and be given the time and tools to do this
- Stress, Work Load
- workload balance between shrinking profits and higher expectations for service and numbers of prescriptions or orders filled. Same for 1 yr and 5 yr
- Defining the role of a pharmacist. We hear about collaborative practices and expanding the role of the pharmacist. We then hear how overworked the pharmacist is, and how they need mandatory breaks. More work load and less time will ultimately lead to more regulation to protect the patient. This will definitely challenge all of us
- Discount on line pharmacies linked to insurance programs are limiting the human interaction between pharmacist and patient, to the patient's detriment
- We need to regain control of pharmacy operations, at the chain store level. And in 5 years we need control over PBMs
- year- tech education requirements, office dispensing, working out the kinks that will come up with eprescribing controls 5 years- advancing pharmacy roles
- I have covered most of them above. There is going to be a sea change in the delivery of medical care and the Board needs to be proactive in responding to the changes

What changes would you like to see in the next year? The next 5 years?

- education for techs control over PBM's
- the same one i have been trying to get for 8 years more technician education to free up the pharmacist for more clinical duties in retail
- real time data for PDMP is important. Also, I would like to see a better educated consumer who can make better use of the counseling and other health care opportunities provided by pharmacists
- 1-year technician can vote on issues 5-years new board members to get a new perspective
- online PDMP. In five years will need to have at least one new investigator and upgrade computer systems
- It may be helpful to have the members use laptops during the meetings. All information would be readily available, and a web search may decrease the "we will look into it, and get back at next meeting".
- I would like to resolve the issues that I mentioned. If others agree, I would like to address the general practice aspect by addressing specific natures of practice. I would like to see some clear parameters set that allow pharmacists have clear supervisory power over the work done in the pharmacy. I am confident that the remainder of the Board will stay on top of the necessary changes that must be considered

Appendix B

Action Planning

Plan for Action

Reproduce this page for each action item identified.

Name of Strategic Direction:

Prioritized Goal:

Intended Outcome:

Person or Group Responsible: _____

Measure of Success

Projected Completion Date: _____

Cost:

<i>ACTION</i>	<i>Person Responsible</i>	<i>Due Date</i>	<i>People Involved</i>

Date Completed: _____

Updates:

CONTACT

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