



NABP 108th Annual Meeting
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Report of the Executive Director/Secretary

Presented by:

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Thank you, Malcolm, and good morning, again, to everyone. It is a pleasure to stand before you, once again, as your executive director. As you heard from yesterday's reports, it has been an exceptionally busy year for NABP, and I know it has been a busy year for all of you. Philadelphia is kind of an interesting marker for me because it was the site of the first Annual Meeting that I attended in 1986. At that time, the theme of the meeting was, "With Liberty Goes Responsibility." And Marty Golden, executive director of the Delaware State Board of Pharmacy, was president of NABP. But what is also interesting is some of the items on the agenda at that time. There was a call for increased communication between the boards of pharmacy and NABP, and an effort to educate consumers and patients about what the pharmacist does, and how the pharmacist can help patients. There was a call for NABP to establish a health law officers' conference, and an

executive officers' conference, to increase the interaction with the board, and talk about internship, and standardizing internship requirements, and setting up a national registry of interns, and for NABP facilitating these activities through central databases, and through multistate recognition. The total assets of the Association in 1986 were \$1 million. As you can see, there was some significant overlap and some of those same topics from 26 years ago, are on our agenda today. They are in some of the resolutions that you are going to be debating tomorrow. And they are items that the profession of pharmacy is still trying to resolve and move forward to. Now for some, that may be a kind of disappointing agenda, disappointing time. But I think you should also remember from yesterday, and Chairman Winsley and President Broussard's remarks how far we have come on some of these other items, and the aggressive agenda which NABP, based upon your direction, has set in some of the initiatives that I want to share with you this morning. You heard about the NABP PMP InterConnect[®] program that NABP is working out with the states. You heard

about CPE Monitor[™] and how important that is to helping the states with continuing education (CE) and how important it is to helping pharmacists. You also heard about pharmacy practice accreditation. These items and some of the other items I will talk to you about, are what the Executive Committee is hoping will help shape the future with you and for you, and to assist the profession and where the practice and regulation of pharmacy would like to be.

I want to give you one update on a business matter before I talk about two of those items, and that involves some of the litigation the Association has been involved in. And I think you are all aware of that litigation. We have sent out information to you. And the first litigation I want to talk about was a lawsuit that was filed against NABP and me personally when NABP determined that it was appropriate to invalidate a candidate's score. And based upon the information analysis we conducted, we invalidated that person's score, provided that information to the boards of pharmacy, and that individual

turned around and sued NABP and myself for libel and slander. Now at that point, the Executive Committee had a decision to make. They could have settled this lawsuit, probably paid some sort of settlement to that individual, and the matter could have moved on very easily, in a less expensive, less costly, less timely, less resource-intensive manner. But the Executive Committee said, "No. We're not going to set that precedent. We're not going to open that door. And we believe that the action we've taken is the appropriate action. And it's the action that's needed to protect the integrity of the examination and the integrity of the licensure process that the state boards of pharmacy utilize and that the public depends upon." And so we fought that lawsuit, and we fought it for three years. And as you saw on the Secretary's Mailbag and other information, we were successful. We won on all accounts. The only avenue remaining for the plaintiff in the case is to submit a petition to the Supreme Court and ask for reconsideration. And quite honestly, the likelihood of that happening is probably near impossible. So again, just testament to the Executive Committee saying, "We're going to fight for what's right, even if the path that's easier to take would be the course that others would choose. We believe in you. We believe that protection, and we're going to continue to defend that protection." Regarding the other litigation, you received information in the mailbag, there is information in your packet, and we are going to show it up on the

screen. There was a statement that was provided in your information packet, and that is a public statement that all the parties have agreed to. NABP settled the litigation against the Board of Regents of the University System of Georgia and Flynn Warren Junior. The lawsuits have been dismissed. The attached public statement has been provided to you. And NABP is unable to provide any additional details beyond the attached statement. I wanted to update you on these matters, so that the Association could see firsthand and hear firsthand what has happened to them, and the Association knows that we are moving forward, and we are trying to pursue an aggressive agenda in other areas.

Let me jump, now, to community pharmacy accreditation, or what is now known as pharmacy practice accreditation. As with some of the items that NABP has been involved with, there is controversy. Some people said, "Why are you in this space? It is not something we should be doing. It is not something the profession needs or patient needs." And so we have tried to work through those issues. In fact, we have been working through those issues for some time. In 2008, when then-President Rich Palombo presented the concept and the Executive Committee endorsed it, we have been moving forward since then, looking at every concern, analyzing every question, and trying to put together a program that meets the needs of the boards of pharmacy, the profession, and ultimately the patients. And I am pleased to report, as we have mentioned throughout the

meeting, that we have been able to partner with the American Pharmacists Association (APhA). And in a 50-50 equal partnership, we formed a new organization called The Center for Pharmacy Practice Accreditation. And that new organization will oversee the development of the standards and the accreditation process, and will help bring Rich's dream, the desires of the boards of pharmacy that have been expressed to us, to fruition. And how it will be organized is there is a board of directors to which NABP has appointed three individuals, and APhA has appointed three individuals. And Tom Menighan, the executive vice president of APhA has been named the first historic chair of this organization. And we will rotate chairs, so that next year, NABP will chair that organization. And so we have two components of the new corporation and new initiative. The first is standards development. There are seven people on the Standards Oversight Committee, four of whom have been appointed by APhA – one of which will chair that committee – and three who have been appointed by NABP. And the Standards Oversight Committee has taken the work that we have done, and has now taken those standards and moved forward to try and refine those standards and to develop a final document that will be used in the accreditation process. And assisting in that process, they have commissioned 18 individuals – experts in pharmacy practice from all settings, experts that represent a demographic read, and experts from all of the major pharmacy associations in some

way or another. They reached out deliberately to all of the pharmacy associations and said, “We want you involved. We want your input.” And many of the associations stepped forward and appointed individuals, experts, to that committee. And other associations that could not, we have members from those associations, so that we have the broadest input as possible into that process. Now those standards are soon going to be released for general comment, and APhA’s plans are to seek comment as broad as possible, so that the consensus that can be developed around these standards is as broad as possible as well. And so there will be meetings, there will be releases, there will be more information to you about the standards. The standards then will go back to that seven-person Standards Oversight Committee for finalization and review, and then ultimately to that board of directors – of which three people sit from NABP, and three individuals from APhA. So NABP is extremely involved in the process, and we will continue to involve all of you in the process, as the program and the organization move forward.

Now, once the standards are developed, it moves to the other side, which is the accreditation process side of the organization. On this side, NABP appoints four individuals – one who serves as chair – and APhA will appoint three individuals. And the charge of the Accreditation Process Committee will be to review the standards. And working in collaboration with the standards group and the board

of directors, determine which standards are applicable for accreditation, how to measure those standards, and then how to work with the pharmacies and pharmacists involved in this process to make sure that accreditation is an ongoing dynamic process that continues to move forward. The Accreditation Oversight Committee will also then make determinations as to which pharmacies meet that accreditation standard. And all of those recommendations, all of those processes, all of those directions will be approved again by the six-person board of directors, so that both APhA and NABP are involved throughout the process. And if NABP is involved throughout the process, then you are involved in the process. So please, when the standards come out, we want your input. We need your input. And if any of you are interested in serving in any of those committees or participating in that process, please do not hesitate to contact us because we want the boards very much involved.

Finally, I want to talk to you about the NABP e-Profile. Again, there has been controversy with the NABP e-Profile. Some pharmacists, for a good reason, are concerned about releasing their Social Security number. Some pharmacists are concerned that the new standards for accrediting continued education providers say, “You can’t receive CE unless you have a profile.” And we recognize that. We understand those concerns, and we are trying to work through them. But this is one of those decisions that we had to make, to say, “Either we

continue to argue about this, or we move forward.” And in moving forward, we realize there will be some people who are not going to be happy, some concerns we need to address. And we work with those concerns and those individuals to make the system the best possible. One of the rationale for us building the system is that there were reports of at least 25% of the pharmacists who are audited, committing fraud in reporting their CE. Now I do not know, as boards of pharmacy, how you can stay with a 25% fraud rate and expect the current system to improve that. And the boards came to us and said, “We need something better. Can you help us with this?” And so in collaboration with the Accreditation Council for Pharmacy Education, we built this new system of CPE Monitor that is based on NABP e-Profile. But what is exciting about the NABP e-Profile, it is going to eliminate licensure transfer. It is going to eliminate electronic applications and paper applications. And it is hopefully going to move much of what you do and we do, to real time. And let me explain how that may work. I think we have over 277,000 profiles that have been created already within the NABP system. Now, that includes technicians and pharmacists. But every day we move forward to reaching those magic numbers of having every pharmacist and every technician in this system, one way or another. There are about 300,000 licensed pharmacists in the United States, and probably about 350,000 registered technicians in the country that we have some accurate data on. So as you can see, we are moving very

close to approaching those ends of pharmacists and technicians. Every time we touch someone – and we should be able to touch that person from the minute they enter pharmacy throughout their career – that profile is going to be the basis for that touching and the basis for interaction with them. So as a pharmacy student, if I enroll in a pharmacy program, and I have to seek licensure as an internship, I will be receiving, I can receive an NABP e-Profile. If we can get the students to register at that point and create an NABP e-Profile, then there is certain information that is not going to change on that profile no matter what happens. Their date of birth is not going to change, as an example of demographic information. And when they graduate, the program they graduated from will not change. What will change is probably licensure information, disciplinary information, maybe some practice information that we may be collecting. But once we have that profile, we do not need to go back and verify and validate that information like we currently do because it is not going to change. It has been verified, it has been validated, it is secured. And instead of sitting back, the way we presently do, waiting for reports to come in, we are going to actively solicit those reports and actively update those profiles. Instead of waiting for an application to come to us, and then say, “I’ve got this application for this pharmacist moving

from Delaware to New York. Let me now contact the states. Let me collect that disciplinary information. Let me pull the data from the Clearinghouse, place it on an application, and mail it to the pharmacist, then send it to the board.” Instead, that profile is going to be activated, updated on a continuous basis. And if that individual contacts us via their smartphone – on an application we are building for smartphones – and says, “I want to transfer from Delaware to New York,” we check the profile. The profile was updated two days ago, no new information. In real time, we transmit that profile or that information to New York, and say, “Profile’s ready. We validated the information. The candidate is good to go. Please do what you need to do within that state to review that information and make that determination.” Hopefully this will cut down the administrative burden of the states. You will have more information more quickly, that is more reliable. You will not have to be involved as much in the validations and verifications on a piecemeal basis. But you will still be the determinants of that information and the determinants of who becomes licensed in your state. And in some of the states that we are working with, we are able to utilize that profile to help the states populate their databases, eliminating the need of those dates to actually perform data entry in their offices. So that the information that we collect and

validate can simply be dumped into their computer files. And the states can look at that, verify the information, and avoid all of the expense and resources needed to physically enter those data. We are doing everything we can to make your jobs easier and to allow you to free up resources to engage in the activities that state boards of pharmacy must engage in, and only state boards of pharmacy should engage in – not NABP, not any other department, not any other organization – just the state boards of pharmacy. Some of you may say, “That’s a great dream. It’s probably going to take you five years, 10 years.” We are going to be operational on some of these aspects within the year. We are going to have some applications for smartphones for students to perhaps record their internship hours and to do other things within the year. And in two years, we are hoping that the whole system will be ready for implementation for those states that are ready to do so. And we are going to continue to work with you and provide as much of that service as you want, as much as we can help you, and continue to move forward with you to support you. Because the Executive Committee is committed to you, committed to supporting you, and committed to protecting the public health. We are excited. We are charged. And if I was in West Virginia with Lydia, I would say, “We’re packing and ready to go.” So thank you.