

GOAL	DESCRIPTION OF GOAL	OBJ	DESCRIPTION OF OBJ	12 MONTH GOAL	ACTION ITEMS	CONTACT	Quarters			
							1 ST	2 ND	3 RD	4 TH
1	Increase the extent to which pharmacist help individual hospital inpatients achieve the best use of medications.	1.1	Pharmacists will be involved in managing the acquisition, upon admission, of medication histories for 75% of hospital inpatients with complex and high-risk medication regimens.	Identify/create a process for obtaining medical histories and conduct pilot program to measure success.	Action 1: Define High Risk Disease State including Post-op cardiac, transplant, COPD, chronic renal failure, pediatric asthma, adult asthma, and diabetes.	R. Stiltner	X			
					Action 2: Email general membership to identify an institution that has developed a successful process for obtaining medical histories.	B. Guanci	X			
					Action 3: Define process and develop template for obtaining medical history (if we are unable to identify a current process).	K. Hofer G. Slifka	X			
					Action 4: Define metrics of success including financial and quality indicators.	K. Hofer G. Slifka	X			
					Action 5: Offer grants to initiate pilot program based on hospital size. Grants will be distributed on the following basis: Hospital Size >100 Beds 2 Grants 100-300 Beds 2 Grants 300-500 Beds 1 Grant < 500 Beds 1 Grant	B. Guanci M. Brackbill			X	
					Action 6: Measure results of pilot program.	B. Guanci M. Brackbill				X
					Action 7: Communicate progress to membership thru means of newsletter, website and Spring Seminar 2005 (offer	B. Guanci M. Brackbill				X

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					continuing education program based on identified success process).					
3	Increase the extent to which health-system pharmacists actively apply evidence-based methods to the improvement of medication therapy.	3.2	In 80% of health systems, pharmacists will be actively involved in the development and implementation of all evidence-based therapeutic protocols involving medication use.	Identify specialists within VSHP for various disease states to participate on the Professional Practice Committee who can collate information on protocols, update and educate the membership.	Action 1: Develop the Professional Practice Committee including representatives from all three schools of pharmacy.	M. Johnson	X			
					Action 2: Identify disease states/areas for which there are evidenced-based medicine protocols.	M. Johnson		X		
					Action 3: Communicate via website, monthly continuing education meetings and Fall and Spring Seminars.	M. Johnson			X	X
				Generate a VSHP Statement to give guidance to individual institutions in identifying and implementing evidence-based medicine protocols.	Action 1: Identify a point of contact for the following institutional types to advise on protocol development: Veterans Administration F. Farnsworth Small Hospital (< 200 beds) J. Silvester Medium Hospital (200-400) B. Stoneburner Large Hospital (> 400 Beds) L. Hammond Long Term Care Facility G. Slifka Home Care Facility A. Stoneman will identify a point of contact		X			

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					Action 2: Point of contact will provide a detailed description of how the process works in their institution.	F. Farnsworth J. Silvester B. Stoneburner L. Hammond GSlifka A. Stoneman	X			
4	Increase the extent to which pharmacy departments in health systems have a significant role in improving the safety of medication use.	4.1	80% of health systems will have an organizational program, with appropriate pharmacy involvement, to achieve significant annual, documented improvement in the safety of all steps in medication use.	Measure the extent to which pharmacy is participating in the medication use safety process.	Action 1: Develop survey to determine how pharmacy is involved in the medication use safety process including but not limited to Patient Safety Officer, Patient Safety Committee, Medication Safety Committee, Adverse Drug Reaction Management, Failure Mode and Effects Analysis, and Root Cause Analysis.	R. Stiltner	X			
					Action 2: Survey the VSHP Board of Directors.	R. Stiltner	X			
					Action 3: Survey various institutions within the State of Virginia.	R. Stiltner			X	
4	Increase the extent to which pharmacy departments in health systems have a significant role in improving the safety of medication use.	4.2	80% of pharmacies in health systems will conduct an annual assessment of the processes used throughout the health system for compounding sterile medications, consistent with established standards and best practices.	Educate pharmacists throughout the state about the USP 797 standards.	Action 1: Update the VSHP Hospital spreadsheet with current contact information.	B. Stoneburner	X			
					Action 2: Contact ASHP to obtain the assessment tool and baseline data for the State of Virginia. If not available, create an assessment tool to collect the data and establish the	J. Silvester	X			

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					means to contact the local hospitals to determine the current baseline					
					Action 3: Develop a packet of information to include educational materials and resources to educate pharmacists on USP 797 Standards.	B. Ison	X			
					Action 4: Create a link on the VSHP website to the ASHP website for information on the USP 797 Standard.	B. Stoneburner	X			
					Action 5: Contact with Directors of Pharmacy throughout the state to educate and offer assistance in meeting the USP 797 standards.	B. Stoneburner B. Ison		X		
					Action 6: Conduct seminars and local programs to educate and offer assistance in meeting the USP 797 Standards.	J. Silvester				X
5	Increase the extent to which health systems apply technology effectively in improve the safety of medication use.	5.1	75% of medication doses dispensed by hospital pharmacies will be verified by machine-readable coding.	Develop a plan to assist the health systems to implement a bar coding system.	Action 1: Develop a relationship with the Virginia Nurses Association and the Virginia Organization of Nursing Execs to develop a plan to address the issue of implementing bar code systems.	A.Stoneman M. McDearmon		X		
		5.2	75% of hospitals will use machine-readable coding to verify all medications before administration to the a patient.		Action 2: Establish a link on the VSHP website to the ISMP website for readiness assessment.	B. Stoneburner	X			
					Action 3: Recommend the	J. Silvester			X	

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					Education Committee offer an educational program at the Spring Seminar on the implementation and success bar coding system (possibly University of Wisconsin, Steve Rough).					
					Action 4: Provide an annual report at the Fall Seminar on progress	B. Stoneburner				X
6	Increase the extent to which pharmacy department in health systems engage in public health initiatives on behalf of their communities	6.3	85% of hospital pharmacies will participate in ensuring that eligible patients in health systems receive vaccinations for influenza and pneumococcus.	Identify criteria for patients to be eligible for influenza and pneumococcal vaccines.	Action 1: Educate the membership by providing a link on the website for the Center for Disease Control and providing educational materials or educational sessions at the Fall Seminar.	M. Madagan	X		X	
				Identify the process by which institutions obtain this information.	<p>Action 1: Identify a point of contact for the following institutional types to advise on how their institution obtains this information.</p> <p>Veterans Administration F. Farnsworth</p> <p>Small Hospital (< 200 beds) J. Silvester</p> <p>Medium Hospital (200-400) B. Stoneburner</p> <p>Large Hospital (> 400 Beds) L. Hammond</p> <p>Long Term Care Facility G. Slifka</p> <p>Home Care Facility A. Stoneman will identify a point</p>	F. Farnsworth J. Silvester B. Stoneburner L. Hammond G. Slifka A. Stoneman	X			

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					of contact					
					Action 2: Identify industry representatives to exhibit at the Fall Seminar and provide educational materials to the membership regarding vaccines.	L. Hammond	X			

Group 1
G. Harris
M. McDearmon
B. Ison
J. Silvester
B. Stoneburner

Group 2
M. Bentley
F. Farnsworth
L. Hammond
M. Johnson
M. Lauer
M. Madagan

Group 3
M. Brackbill
J. Connor
B. Guanci
K. Hofer
J. Stallings
R. Stiltner