🙂 DOs ...

A practical topic - meaning there will be knowledge, skills, or information that can be applied **right away**. Something that has an impact directly on improving patient care.

A topic is hot, cutting-edge, or offers a new perspective.

Be specific in your plans: provide details about your session, the need for this session, and what attendees can walk away with after attending.

Be innovative and creative with active learning strategies.

8 DON'Ts ...

Be vague. A vague proposal will likely be rejected, even if the topic is "hot." Offer a topic that can be found in a textbook or doesn't contain something new or different.

Proposed Session Title: Blueprints for Success: Launching Ambulatory Care Pharmacy Services

SUBMITTER INFORMATION

Name: Daniel B. Truelove, PharmD, AAHIVP, BCACP, BCPS

Primary Position

Director of Pharmacy, University Health Network, University of Tennessee Medical Center

Educational Program Planning Experience:

I have more than 10 years of experience in planning and presenting educational programs for ASHP and other state and national organizations. Mv ASHP experience includes 1 Summer Meeting and 4 Midvear sessions: 1. Transitions of Care During COVID: Ambulatory Care Pearls. 2022 ASHP Summer, Phoenix. 2. Beyond Billing: Justification for Ambulatory Care Pharmacy, 2021 ASHP Midvear, New Orleans (Virtual), 3, Health System Strategies for Overcoming Barriers to Limited Distribution Drugs and Payer Access. 2020 ASHP Midyear, (Virtual). 4. Tracking Ambulatory & Specialty Trends: Staying Ahead of the Curve. 2019 ASHP Midyear, Las Vegas. 5. Partnering with your PBM to Reduce Employee Benefit Costs. 2018 ASHP Midyear, Anaheim. Program Planning outside of ASHP 1. Transitions of Care and Managing the Comorbidities Associated with COVID-19, 2020 Society of Critical Care Medicine, (Virtual). 2. Partnering with your PBM to Reduce Employee Benefit Costs. 2019 PBMI National Conference, Palm Springs, 3. Building Professional Collaborations in Interprofessional Healthcare Teams. 2018 TPA Emerging Leaders, Tennessee. 4. Coordinated Management & Care Retention Strategies to Transform Patient Outcomes in HIV. 2016 OH-KY Academy of Managed Care Pharmacy, Louisville.

Expertise/Qualifications in the topic area:

Daniel B. Truelove, Director of Pharmacy at the University of Tennessee Medical Center's University Health Network, is highly experienced in a variety of ambulatory care pharmacy settings. His extensive background includes

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 This topic was listed as a Hot Topic – something that members have identified as CE they need.
Check the Hot Topics list before you start.
Bonus points are given for creative, catchy session titles.

> Program Chair has expertise with the content & experience with education programs.

It's preferred that you have experience speaking at the NATIONAL level.

The Program chair is wellconnected with experts in the field.

establishing residency programs, implementing clinical pharmacy services, and contributing to research and academia, as evidenced by his publications on diverse healthcare topics. Board-certified as an Ambulatory Care Pharmacist and Pharmacotherapy Specialist, and credentialed as an American Academy of HIV Medicine Pharmacist, Truelove's leadership roles in pharmacy organizations underscore his commitment to advancing the field. His expertise covers both the practical and strategic aspects of ambulatory care pharmacy, making him a knowledgeable resource in its development and sustainability.

FINANCIAL RELATIONSHIPS

In the past 24 months, have you had a financial relationship with any kind and in any amount with an SII-defined ineligible company? No

NEEDS ASSESSMENT

Brief description and overall purpose of this educational session:

This educational session is designed to guide pharmacists in developing and implementing innovative services in the evolving landscape of ambulatory care pharmacy. It aims to provide some of the nuances of initiating, developing, and sustaining innovative services across different ambulatory care settings. This session will feature experienced speakers sharing their journeys in establishing new services, focusing on overcoming barriers, strategic planning, and ensuring sustainability. Attendees will learn about diverse ambulatory care areas, including specialty revenue generation, value-based care cost savings, and contracting in an academic faculty role. The purpose is to empower pharmacists with the knowledge and tools to transition from traditional roles to more dynamic, innovative, integrated, and financially sustainable practices. This session is crucial for advancing ambulatory care pharmacy towards a more proactive, patient-centered, and financially viable future. This session would be appropriate for a spectrum of pharmacist participants, from those interested in developing their own ambulatory care practice to pharmacy leaders who are building ambulatory pharmacy strategy for an organization.

© Pay attention to word count in each section.

The description and overall purpose are welldeveloped, providing enough information to get a good picture of the session. It is specific in describing some background to the issue as well as what the session hopes to accomplish.

Financial relationships related to content will need to be resolved but don't prohibit

participation (in most situations)

Always consider your audience. What level practitioner is the attendee: new or experienced? Are the topic and content appropriate for pharmacists and/or technicians?

Target Audience: Pharmacist

Describe the practice gap(s) that this session will address: This session aims to bridge the gap between the current reactive and restrictive service models in ambulatory care pharmacy and the ideal proactive, integrated approach. It will highlight critical areas such as the lack of comprehensive business planning, limited involvement in indirect revenue generation and costsaving strategies, and the need for more robust, sustainable, and innovative practice models. By providing practical insights and real-world examples, the session intends to equip participants with the tools to overcome these challenges.

ACPE and ACCME want education to address practice gaps and impact learners competencies. Relevant practice gaps are described.

Needs Assessment Documentation: Expert Opinion, Peer-Reviewed Literature, Needs Assessment Survey (ASHP or Other)

Name of expert, guideline, research, etc.: ASHP Section Advisory Group calls. • ASHP Connect posts. • Recommendations of the summit. Am J Health Syst Phar. 2014 Aug 15;71(16):1390-1. • ASHP Practice Advancement Initiative 2030: New recommendations for advancing pharmacy practice in health systems. Am J Health Syst Pharm. 2020 Jan 8; 77(2):113-121. • Suggested topic list includes "expansion of pharmacy services" and "billing and service development in ambulatory care"

What the expert, guideline, or research says that supports the need: Highlighting the need for innovative, cost-effective service strategies, this approach focuses on proactive development, utilizing pharmacists' expertise, fostering collaborations, and demonstrating sustainable outcomes.

SESSION DEVELOPMENT

Activity Type: Application-based: Designed primarily for participants to apply the information learned in the allotted timeframe.

Learning Objectives

1. Compare different strategies for creating new ambulatory care services Active Learning Strategy: Audience polling

Learning Assessment: Solutions with evidence and expert opinion

2. Recommend innovative new ambulatory care service ideas at your institution or practice site.

Active Learning Strategy: Think-pair-share

Learning Assessment: Solutions with evidence and expert opinion

3. Assess the sustainability of new ambulatory care services Active Learning Strategy: Interactive case study

Learning Assessment: Solutions with evidence and expert opinion

Length of Session: 1 Hour 3 _____ 0 minutes Survey results show attendees want shorter sessions, not long ones. Of Attendees want sessions that are practical with a focus on what can be applied at their practice now.

© Use higher-level objectives: "differentiate" or "analyze" compared to "identify" or "list." Use the latter objectives sparingly if the session is applicationbased.

The active learning is detailed and thorough and shows that the Program Chair has given thought to the activities for the session. The

for the session. The examples given are specific, not vague, and reflect the actual educational content that is planned.

Cases, scenarios, and practice examples are highly effective. Providing participants with feedback is essential.

Traditional Q&A and Panel Discussions do NOT qualify as active learning and reveal that the Program Chair does NOT have a grasp of effective adult learning strategies. [ASHP provides guidance on this in the proposal preparation documents.]

Educational Level of Content: Advanced: General working knowledge of the specific content area suggested, information will be provided to expand current, expertise.

Session Outline:

| TOPIC | TIME AI | LOTTED |
|--|---------|-------------------|
| Announcements | 5 min | |
| Landscape of Ambulatory Care Pharmacy | 5 min | \mathcal{N} |
| Interactive Case 1: Specialty and Other Revenue Generation | 15 min | |
| Interactive Case 2: Value-Based Care and Cost Savings | 15 min | |
| Activity 1 | 10 min | $\langle \rangle$ |
| Interactive Case 3: Faculty Involvement and Contracting Arrangements | 15 min | |
| Activity 2 | 10 min | |
| Conclusions and Key Takeaways | 5 min | |
| Panel Discussion/ Q&A | 10 min | |

Practice Interest Areas / Keywords: Clinical Service Management, Ambulatory Care

PROPOSED SPEAKERS

Will you be a speaker? yes

Proposed Speaker: Daniel B. Truelove, PharmD, AAHIVP, BCACP, BCPS

Primary Position: Director of Pharmacy, University Health Network, University of Tennessee Medical Center

Qualifications: Daniel B. Truelove, Director of Pharmacy at the University of Tennessee Medical Center's University Health Network, is a distinguished leader in ambulatory care pharmacy, with a special emphasis on population health and value-based care. His expertise in integrating pharmacists into multidisciplinary teams has significantly advanced patient-centered care models, aligning pharmacy services with the evolving demands of qualityfocused and cost-effective healthcare. Board-certified as an Ambulatory Care Pharmacist and Pharmacotherapy Specialist, and credentialed as an American Academy of HIV Medicine Pharmacist, Truelove's leadership roles in pharmacy organizations underscore his commitment to advancing the field. His contributions to population health and pharmacy extend to academia and professional discourse, including publications, presentations, and active engagement in various media platforms. Truelove's expertise covers both the practical and strategic aspects of population health, making him a knowledgeable resource in its development and sustainability.

C Attendees want a reasonable selection of advanced and intermediate levels of content. ASHP is always looking for more proposals that have advanced-level content. When surveyed, attendees prefer the content to be appropriate or more advanced than basic.

> © Short introduction with only essential background included.

> Attendees are generally not new graduates. Don't - spend too much time on background or old data. Do - spend more time on the new information and strategies for implementing.

© Geographic diversity among speakers is required. A session with speakers from one institution is almost always outright rejected.

Presenters that come from different geographical areas lend credibility to the session.

Proposed Speaker: Ashley Marie Parrott, PharmD, MBA, BCACP, BCPS

Primary Position: Manager, Ambulatory Clinical Pharmacy Services, Parkview Health

Qualifications: Ashley Marie Parrott, PharmD, MBA, BCACP, BCPS is the ambulatory clinical pharmacy manager for Parkview Health in Fort Wayne, Indiana. Dr. Parrott graduated from the University of Toledo College of Pharmacy and Pharmaceutical Sciences. She completed a PGY1 pharmacy practice residency, focused on ambulatory care, at the ProMedica Flower Hospital Family Medicine Residency. At Parkview Health, she is responsible for the oversight of ambulatory clinical pharmacy services including an anticoagulation service, primary care services, population health, and other specialty clinics. Dr. Parrott is also the residency program director for Parkview Health's PGY2 in ambulatory care. Dr. Parrott has served on ASHP's Section Advisory Group for Compensation and Practice Sustainability within the Ambulatory Care Practitioners Section for several years. She has presented regionally and nationally on ambulatory pharmacy services, including topics on service development and reimbursement. Dr. Parrott was recognized with the Glen Sperandio Health-System Pharmacist of the Year award for the state of Indiana in 2020.

Proposed Speaker: Brody J. Maack, PharmD, BCACP, CTTS

Primary Position: Associate Professor of Practice/Clinical Pharmacy Specialist, North Dakota State University School of Pharmacy

Qualifications: Brody J. Maack is an Associate Professor of Practice and current Vice Chair of Pharmacy Practice at the North Dakota State University (NDSU) School of Pharmacy, where he earned his PharmD in 2006. He then completed a PGY1 residency at Lake Region HealthCare Corporation in Fergus Falls, MN in 2007. He is also a Clinical Pharmacy Specialist at Family HealthCare clinic in Fargo, a federally qualified health center, where he sees patients and precepts APPE students in an office-based setting for comprehensive medication management, including disease state management with use of collaborative prescribing authority. He has had the opportunity to spearhead several initiatives in the clinic, recently including remote patient blood pressure monitoring, community paramedic collaboration, and implementation of various chronic disease programs such as tobacco cessation, hypertension, diabetes and depression. Maack also serves as a CAP Center Scientist in the NDSU Center for Collaboration and Advancement in Pharmacy. Maack is the current Chair of the ASHP Section of Ambulatory Care Practitioners, previously served as a member of the ASHP Section Advisory Group (SAG) on Compensation and Practice Sustainability, and has been Chair and Vice Chair of the SAG on Medication Management Services. He has served as state delegate in the ASHP House of Delegates and is Past President of the North Dakota Society of Health-System Pharmacists. He has also served on the Section of Ambulatory Care Practitioners Committee on Nominations, has co-authored several ASHP-endorsed documents, including a book chapter, the ASHP Statement on the Role of Pharmacists in Primary Care, and is faculty on the ASHP Telehealth Certificate and Pharmacy Revenue Cycle Management Certificate Programs.

C Attendees want speakers who are <u>practicing</u> (pharmacists, MDs, RNs. CEOs, etc.), are <u>experts</u> on the content, and <u>present</u> <u>effectively</u>.