

Communication across the continuum – building effective relationships with the C-Suite and your peers

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Disclosures

- I have no financial disclosures related to this presentation
- I serve as the Treasurer and member of the ASHP Board of Directors

Learning objectives

- List and describe resources available to improve interactions with senior health system executives
- Develop strategies for improving strategic planning processes
- Describe tools for improving the financial management of the pharmacy department
- List tactics for working effectively with healthcare consultants

The Pharmacy Enterprise: Providing Organizational Value Across the Continuum



Critical Oversight of Medication Use

“Complex hospitals and health systems benefit from having a pharmacy executive who is responsible for the strategic planning, design, operation, and improvement of their organization’s medication management system” (1)

Core Areas of Influence

- **Clinical Services and Support**
- **Transitions of Care**
- **Compliance and Regulatory**
- **Revenue Cycle Management**
- **Formulary Management**
- **Interprofessional Collaboration and Optimization of Manpower**
- **Multi-sites of Care Coordination**



C-Suite Resources

▲ Making the most of Engaging the C-Suite to Advance Pharmacy Practice Toolkit

What is in each tab?

Engaging the C-Suite: Starting the Dialog

Materials designed to provide background on how to get started on successfully communicating with senior leadership. Learn what is important to the C-Suite so that your presentations and communications are framed for success.

Strategic Planning

Tools to assist you in developing and fine-tuning strategic planning activities.

Communicating Results

Materials to refine your communications with senior leaders to produce positive results.

Managing your Business

Materials and resources to expand the pharmacy enterprise and optimize patient care.

Working with Consultants

Tips and resources to assist in effectively working with consultants.

Health Care Reform and Pharmacy Practice

Tools that specifically focus on pharmacy practice and health care reform.

General Resources

Additional useful materials.

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ACHE resources

- **American College of Healthcare Executives**
 - Professional organization for healthcare leaders
 - <http://www.ache.org/newclub/resource/competencies.cfm>
- **FACHE exam**
 - Develops and ensures competency in healthcare administrative skills

Engaging the C-Suite

How many in the audience have presented to or worked directly with their CEO/CFO/COO?

Audience discussion

In the next 5-7 minutes, introduce yourself to the folks around you, and discuss the following:

Briefly describe an interaction with your C-suite executives.

- What went well?
- What didn't go so well?

Keys to success – engaging the C-suite

- **Understand their point of view**
- **Provide clear and concise information**
 - Have details available if necessary
 - Consider providing any handouts one page at a time
- **Address financial impact**
- **Address quality impact**
- **Describe how to monitor results**

Strategic planning

- **Focusing goals is important for everyone**
 - Your boss knows where you're going and what you are doing
 - Your department knows where you're going and what you are doing
 - Your peers know where you're going and what you are doing
- **Communication and keeping the plan front and center is key**

Strategic planning

- Who has a formal written strategic plan for their pharmacy department?
- Who has seen it since it was written?

Again – form your groups and discuss the following:

- Is it the actual plan that's important, or is it the planning process?

Keys to success – Strategic planning

- Be clear what you are trying to accomplish
- Try to keep strategic goals separated from operational tactics
- Keep the plan fresh and front and center
- Use the plan to help prioritize

Improved Patient Outcomes

- Centrally based and patient-specific clinical pharmacy services are associated with reduced hospital mortality rates.(3)
- As hospitals increased the number of pharmacists providing patient care services, medication errors have decreased by over 65%. (4)
- Among studies reporting data necessary to determine a benefit-to-cost ratio (n=15), the pooled median value was 4.81:1—meaning that for every \$1 invested in clinical pharmacy services (CPS), \$4.81 was achieved in reduced costs or other economic benefits.(5)

Impact on Transitions of Care – Value of Pharmacist Leadership

- Statistically significant decrease in 30-day readmission risk with pharmacist intervention group. (8)
- 30-day all-cause readmissions were significantly reduced in the intervention group vs. control (17% vs. 38%, respectively; $p=0.02$). 30-day heart-failure-related readmissions were not significantly different between (pharmacist) intervention and control (6% vs 18%;, respectively; $p=0.11$) (9)
- Hospital readmission within 30 days of discharge was significantly less in (pharmacist) intervention group (55/370 vs 76/368; $p=0.009$) (10)

Impact on Critical Care

- Pharmacists on ICU Rounding Teams have shown prescribing errors decreased by 66% with projected \$270,000 cost savings. (6)
- Critical care pharmacist-led interventions were associated with decreases in ICU and hospital length of stays and ICU drug costs.(7)
- Pharmacist involvement in management of pain, agitation and delirium (PAD) demonstrated improvements in several outcomes, including mean ventilator days per patient, ICU LOS, and mortality. (7)

Impact of High Risk Patient Populations

- Anticoagulation Monitoring by pharmacists decreased bleeds decreased by 27% and hospitalization decreased by 14% (11)
- Early notification of an infectious diseases pharmacist about positive blood cultures using the RAIDS protocol led to increased appropriateness of empirical drug selection and a dramatic reduction in the administration of antibiotics and was associated with decreased infection-related mortality (12)

Communicating results

- Who uses a dashboard with specific metrics to demonstrate progress/success?
- Who has trouble getting data to fill that dashboard?

Form your groups again and discuss the following:

- How do you overcome those data gaps?
- How do you keep it simple enough to be manageable but provide enough information to be helpful?

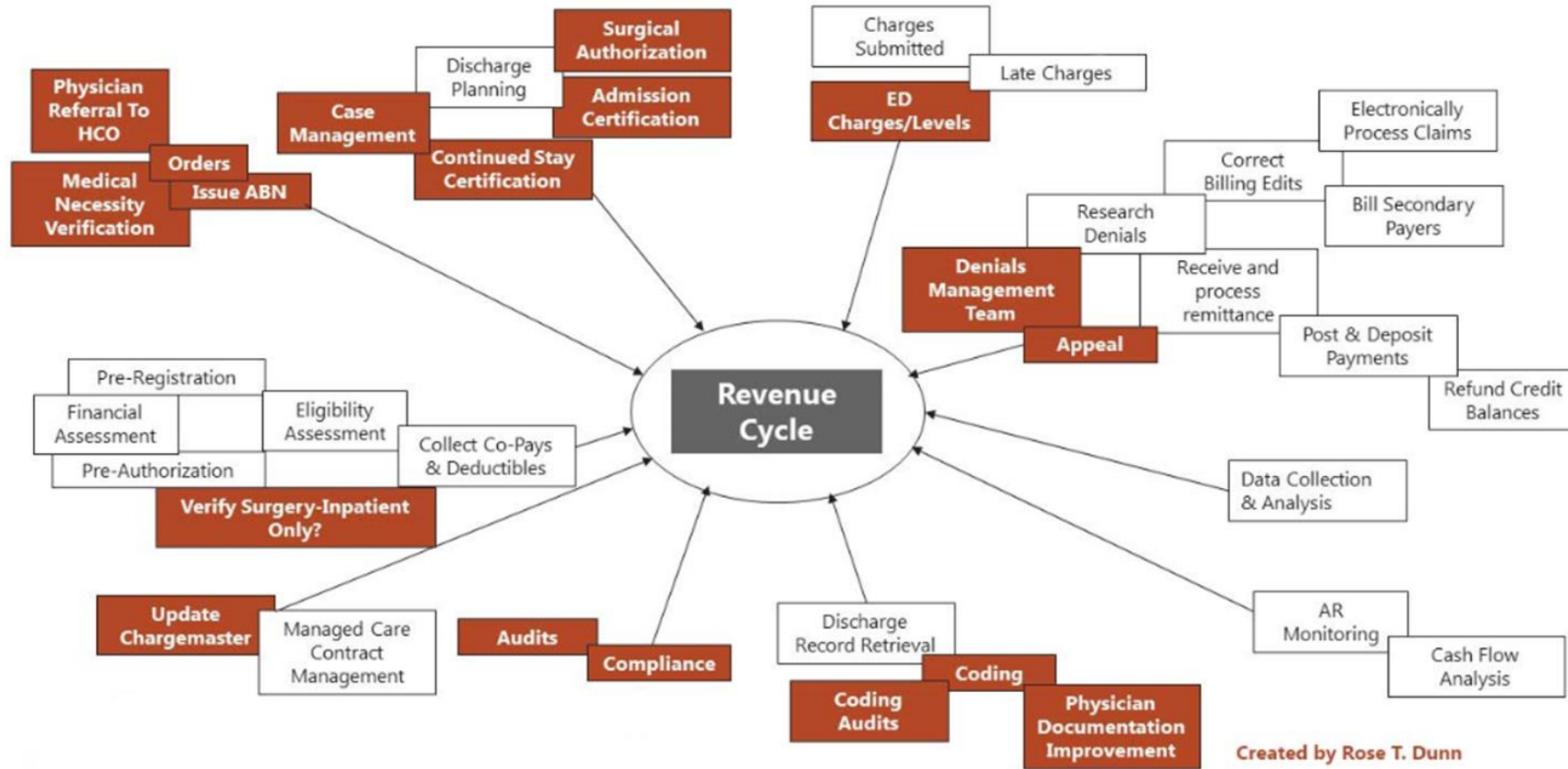
Keys to success – communicating results

- Understand your audience
- Spend time developing and then maintaining dashboards
- Don't change your metrics - - unless you really have to
- Match your dashboard to your strategic plan and operational priorities

Multi-hospital Models

- **Multiple hospitals with individual budgets, compliance and regulatory demands, and local organizational structure require pharmacy enterprise leadership to directly report to C-suite. (2)**
 - 26% of multi-hospital pharmacy executives/directors reported to system level CMO
 - 55% of multi-hospital pharmacy executives/directors reported to system level non-CMO system executive
 - 19% of multi-hospital pharmacy executives/directors reported to CEO or COO of a system hospital

Revenue Cycle Management – Oversight and Pharmacy Connections



Managing your business

- How many in the audience are responsible for developing budgets for their department/departments?
- Does anyone have any issues/concerns about the “pre-populated budget worksheet”? Or do you start from a blank workbook - -and then what are your concerns with that process?

Again in your groups – discuss the following:

- What other budget challenges do you face and how do you deal with them?

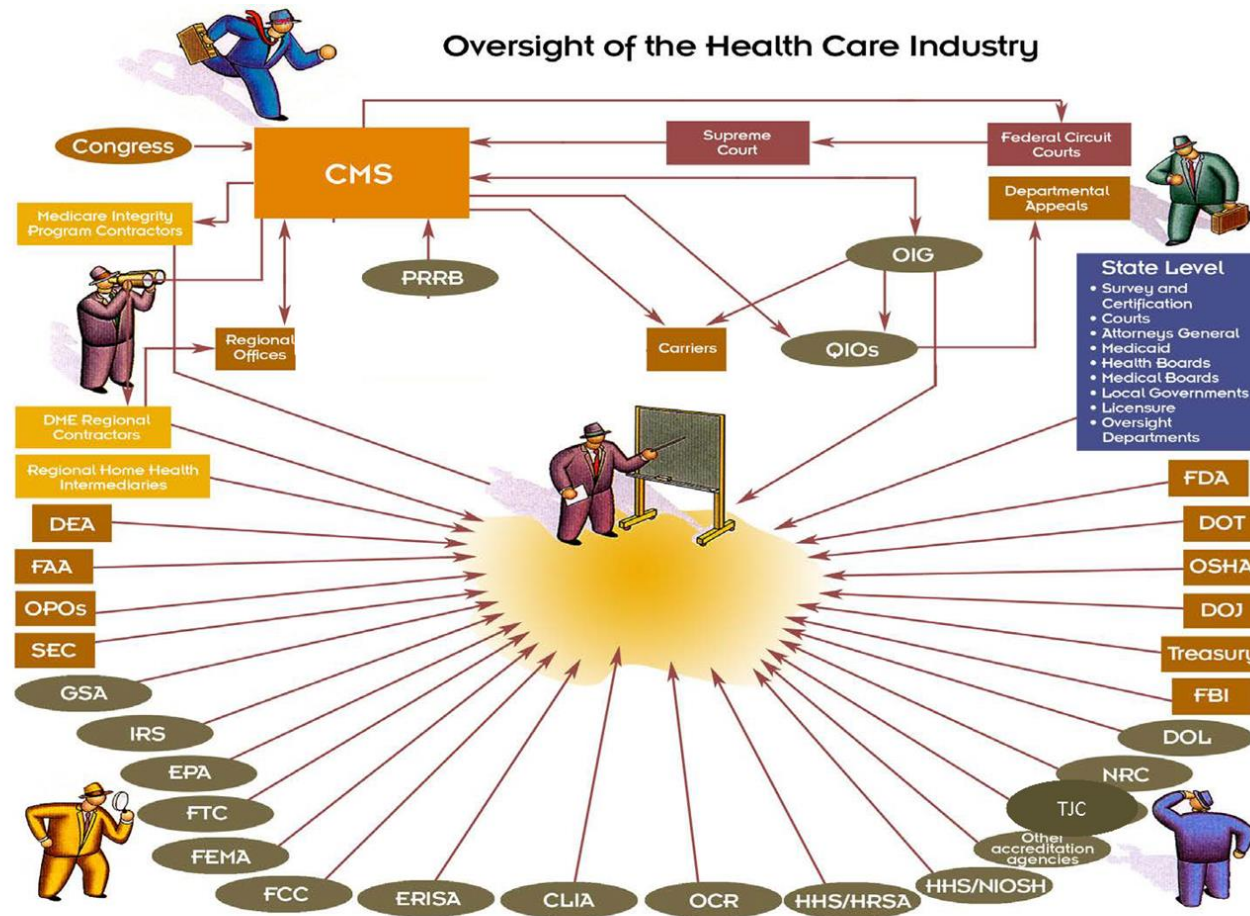
Keys to success – managing your business

- Develop credibility with your finance colleagues
- Know where the money goes and from where the money flows
- Ask informed questions
- Provide decision points for your finance colleagues

Compliance and Regulatory for Health System

- USP 797 & 800 oversight for health system
- Controlled substance management
- TJC Medication Management
- ISMP
- Board of Pharmacy
- DEA
- Pharmacy is responsible for or directly contributes to all medication related regulatory and accreditation organizations compliance requirements across the organization

Compliance and Regulatory for Health System



Working with consultants

- Have you ever worked with a consultant to review pharmacy services?
- Did you invite them or did someone else?
- Who has been a consultant?

Discussion

- Briefly describe the most successful interaction you've had with a consultant.

Keys to success – working with consultants

- Work to understand the context / goals of the organization
- Provide clear data upon request
- Be nice
- Be clear and firm if necessary
- Don't be intimidated
- Find areas where consultants might be helpful and then proactively ask administration if there is a role before one is “assigned to you”

Summary

- Understand motivations of the leaders in your organization
- Learn what drives organizational success
- Deliver results in a measurable way
- Demonstrate and continually communicate the value of pharmacy services
- Finances are important – understand the drivers
- Engage in ensuring that the organization is successful

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