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| **RESOLUTION** | **POSITION STATEMENT** | **RECOMMENDATION** |
| Reviewed by Membership Committee | | |
| (07-17) | NYSCHP invites all pharmacists and technicians practicing within health-systems, including ambulatory and community settings, to join the organization and engage in Council activities and initiatives to collaborate across the continuum of care. Further, NYSCHP advocates for, represents, and educates practitioners in those settings. | Amended:  NYSCHP invites all pharmacists, student pharmacists, and pharmacy technicians practicing within health-systems, including ambulatory and community settings, as well as industry partners and faculty who serve the pharmacy profession, to join the organization and engage in Council activities and initiatives to collaborate across the continuum of care. Further, NYSCHP advocates for, represents, and educates practitioners and partners in those settings. |
| Reviewed by Pharmacy Practice Committee | | |
| (01-17) | The New York State Council of Health-system Pharmacists supports the recommendation to request of all EMR systems to provide age specific pediatric laboratory value and monitoring reference ranges. | Renew |
| (04-17) | The New York State Council of Health-system Pharmacists encourages manufacturers to conduct more research on pharmacokinetics and pharmacodynamics in patients receiving continuous renal replacement therapy (CRRT) to ensure appropriate antimicrobial dosing. The Council also encourages manufacturers to include detailed information on the characteristics of individuals who are on CRRT in drug dosing studies. | Amended:  The New York State Council of Health-system Pharmacists encourages manufacturers to conduct more research on pharmacokinetics and pharmacodynamics in patients receiving continuous renal replacement therapy (CRRT) to ensure appropriate drug dosing. |
| (06-17) | The New York State Council of Health-system Pharmacists encourages manufacturers to conduct more research on the pharmacokinetics and clinical efficacy of medications in obese population as defined by BMI. | Amended:  The New York State Council of Health-system Pharmacists encourages manufacturers to conduct more research on the pharmacokinetics and clinical efficacy of medications in underweight and overweight populations, as defined by BMI. |
| (09-17) | The New York State Council of Health-system Pharmacists supports the inclusion of infectious diseases pharmacists to serve as part of the multidisciplinary decision-making process with outpatient parenteral antimicrobial therapy (OPAT) service from the initiation of long term parenteral antimicrobials upon discharge to the continuity of outpatient care. New York State Council of Health-system Pharmacists supports the role of infectious diseases pharmacist in OPAT program to improve patient safety, clinical efficacy, optimize resource utilization, and decrease health care expenditures which align with the fundamental goals of antimicrobial stewardship as recommended by the centers for disease control. | Amended:  The New York State Council of Health-system Pharmacists supports the inclusion of Antimicrobial Stewardship pharmacists as part of the multidisciplinary decision-making process within the outpatient parenteral antimicrobial therapy (OPAT) service. |
| (10-17) | The New York State Council of Health-system Pharmacists supports the development of a suggested structured pharmacy intern role within the healthcare system setting to optimize their concurrent training and unique skillset within the pharmacy team. | Amended:  The New York State Council of Health-system Pharmacists supports the structured, well-defined, documented, active pharmacy intern role within the healthcare system setting to optimize their concurrent training and unique skillset within the pharmacy interdisciplinary team. |
| (11-17) | The New York State Council of Health-system Pharmacists supports ASHP efforts in the development of standardized adult medication concentrations and to minimize the number of available concentrations in order to reduce medication errors. Furthermore, The New York State Council of Health-system Pharmacists supports manufacturer production of standardized concentrations as listed in the aforementioned ASHP reference. | Amended:  The New York State Council of Health-system Pharmacists supports ASHP efforts in standardizing adult medication concentrations to reduce the number of medication errors. Furthermore, The New York State Council of Health-system Pharmacists supports manufacturer production of standardized medication concentrations. |
| (12-17) | The New York State Council of Health-system Pharmacists supports the continued ability of covered entities to participate in the 340b program to allow covered entities “to stretch scarce federal resources as far as possible, reaching more eligible patients and providing more comprehensive services,” as indicated in the federal register 82.3 (2017). | Renew |
| (14-17) | NYSCHP advocates for key decision making roles for pharmacists in the planning, selection, design, and implementation, and maintenance of medication-use information systems, electronic health records, computerized provider order entry systems, automated dispensing technologies and e-prescribing systems to facilitate clinical decision support, data analysis, and education of users for the purpose of ensuring the safe and effective use of medications; further, NYSCHP advocates that pharmacists must have accountability for strategic planning and direct operational aspects of the medication-use process, including the successful deployment of medication-use information systems; further, NYSCHP supports that pharmacists engaged in the design, implementation and maintenance of these systems have academic and/or experiential credentials (for example IT Certificate program, informatics residency, and EMR training certification) to help ensure process efficiencies while minimizing patient safety risk in the medication use process. | Amended:  NYSCHP advocates for key decision making roles, accountability, and academic and/or experiential credentials for pharmacists in the planning, selection, design, and implementation, and maintenance of medication-use information systems, electronic health records, computerized provider order entry systems, automated dispensing technologies and e-prescribing systems to facilitate clinical decision support, data analysis, and education of users for the purpose of ensuring the safe and effective use of medications. |
| (1-12) | The New York State Council of Health-System Pharmacists supports the requirement to include the indication, whether it be an FDA approved or off label use, on all inpatient medication orders and outpatient prescriptions. | Renew |
| (3-12) | The New York State Council of Health-System Pharmacists (NYSCHP) supports increasing the number of PGY-1 and PGY-2 residency positions within NY State, by ways of supporting educational efforts offered through ASHP and legislative activities at the State and Federal level to support funding. | Renew  Committee supports new position statement encouraging non-traditional post-graduate programs. |
| (6-12) | The New York State Council of Health-System Pharmacist’s advocates that all hospitals should encourage provisions be made for their patients upon discharge to receive a supply of all newly prescribed medications and the education that is required to ensure the optimization and safe use of their discharge medications. | Renew |
| (7-12) | NYSCHP advocates that patient specific information regarding pharmacogenomics if available and considered standard of care should be included in patient profiles. | Amended:  NYSCHP advocates that patient specific information regarding pharmacogenomics if available be included in a patient’s medical records. |
| (1-07) | The New York State Council of Health-system Pharmacists requires that health-systems in New York State establish and maintain minimum clinical and operational competencies and educational, certification, and leadership training requirements for pharmacists and pharmacy technicians pertinent to the various types of health-system practice settings within the organization and requires pharmacists and pharmacy technicians in all health-system practice settings to continually maintain leadership, clinical and operational competencies appropriate to the area of practice and expertise and requires that health-systems in New York State ensure pharmacists and pharmacy technicians demonstrate, through competency assessment and documentation, clinical, operational and leadership competencies appropriate to the area of practice and expertise and advocates the use of professionally recognized competency assessment tools to routinely assess and document, clinical, operational and leadership competency of pharmacists and pharmacy technicians in health-systems in New York State. | Amended:  The New York State Council of Health-system Pharmacists advocates that health-systems in New York State establish, continually maintain and demonstrate thorough periodic individual assessment minimum clinical, operational, educational and leadership competencies for pharmacists and pharmacy technicians pertinent to the various types of health-system practice settings. To support this, we advocate the use of professionally recognized competency assessment tools to routinely assess and document, clinical, operational and leadership competency of pharmacists and pharmacy technicians in health-systems in New York State. |
| (2-07) | The New York State Council of Health-system Pharmacists supports the utilization of safe and efficient systems and processes for remote medication order entry services that meet all local, state and federal regulations, and comply with the Joint Commission’s medication management standards and the American Society of Health-system Pharmacists’ Guidelines on Outsourcing Pharmaceutical Services. | Amended:  The New York State Council of Health-system Pharmacists supports the utilization of safe and efficient systems and processes for remote medication order entry and verification services that meet all local, state and federal regulations, and comply with the Joint Commission’s medication management standards and the American Society of Health-system Pharmacists’ Guidelines on Outsourcing Pharmaceutical Services. |
| (9-07) | The New York State Council of Health-system Pharmacists supports that health-system pharmacy leaders establish policies and procedures for health-system pharmacists responding to advanced cardiac life support and pediatric code life support situations. | Amended:  The New York State Council of Health-system Pharmacists supports pharmacy participation in responding to advanced cardiac life support, pediatric code, and neonatal life support situations. |
| (12-07) | The New York State Council of Health-system Pharmacists supports the development of a campaign to educate pharmacists serving the community in various settings and employ the cooperation of said pharmacists in promoting the medication reconciliation process across the continuum of patient care. | Amended:  The New York State Council of Health-system Pharmacists supports educating outpatient pharmacists in various settings in order to improve and enhance the medication reconciliation process across the continuum of patient care. |
| Reviewed by Public Policy Committee | | |
| (6-07) | The New York State Council of Health-system Pharmacists supports the modification of Part III of the NYS Pharmacy Board Exam to include competency assessment of the application of clinical and operational pharmacy practice knowledge and skills. | Sunset |
| (11-07) | The New York State Council of Health-system Pharmacists supports amending the New York State Education Law to create and support a private organization to engage in advertisement, outreach, and counseling of pharmacists who are, or may be, suffering from addictive disease or other problems that may result in the impairment of the ability to safely and effectively practice the profession. | Sunset |
| (5-12) | NYSCHP encourage the NYS Board of Pharmacy to replace the “one year of satisfactory experience” requirement to that of “successful completion of an ASHP accredited PGY1 program” for residents reciprocating their Pharmacist license. | Amended:  NYSCHP encourages the NYS Board of Pharmacy to replace the “one year of satisfactory experience” requirement to that of “one year of satisfactory experience or successful completion of an ASHP accredited PGY1 program” for residents reciprocating their Pharmacist license. |
| (03-17) | The New York State Council of Health-system Pharmacists opposes the establishment of a philosophical exemption from school immunization requirements in New York state. | Sunset |
| (05-17) | The New York State Council of Health-system Pharmacists believes that all Americans should have the option to have health insurance and thereby supports access to affordable, equitable, and quality healthcare for all. | Renew |