These remarks stem from experience in implementing pharmacy practice model change at an academic medical center.

Prerequisites. Any successful pharmacy practice model is based on a sound drug distribution system that safely and efficiently gets medications to patients. Automation and highly trained technicians must be leveraged to optimize medication delivery to allow pharmacists to practice at the “top of their license.” All drug distribution activities should be performed by technicians in accordance with state law. A successful model aligns all departmental staff around the core strategies of the department, including medication distribution and order verification, clinical care, guideline and order-set development, quality and cost savings initiatives, and accreditation issues.

Staff engagement. Engaging the staff early in the process is essential to establish “buy in.” If the practice model is seen as a top-down decision, it will likely be met with more resistance. To ensure staff engagement, the leader should create a practice model task force to drive the process. This task force must consist of representative members from all departmental jobs, including but not limited to staff pharmacists, specialists, technicians, and managers. In larger departments, task force members should be determined through voting by members of each job code. If a health system has trained facilitators available through the performance-improvement department, they should be engaged to help structure the process. The leader must be open to incorporating the staff’s ideas into the model. The leader should recognize that he or she does not know everything about successful patient care.

A successful practice model initiative capitalizes on the organization’s strengths and takes into account its weaknesses. Harnessing the desire of staff to practice at a higher level is a key driver of success.

Communications. Communication is one of the most important tools that a leader must utilize to successfully implement a practice model change. The path toward change in an institution’s pharmacy practice model is wrought with political obstacles. The ability to communicate with all members of the organization is the key to successfully implementing any major change initiative. The effective leader must communicate to the corporate suite, medical staff, nursing leadership, and all members of his or her department.

Conclusion. Changing a practice model to optimize patient care and ensure that all staff practice at the “top of their license” is hard work. In today’s world of health care reform, it is essential that pharmacy leaders find ways to optimize patient care without increasing costs. The benefits of a successful model far outweigh the risks of inaction. Implementing a successful practice model change requires a sound operational strategy, excellent communication skills, and the ability to navigate complex political issues.

References