

## CPNP Announcements

### GROW CPNP: PROVIDE YOUR NOMINATIONS TO THE CPNP BOARD

Rex Lott, PharmD, BCPP  
Nominating Committee Chair

Thanks to the contributions of time and talent, members have helped CPNP to make great strides in its short 17 years of existence. CPNP is truly a membership-driven organization. This is especially true in selecting future leaders of the organization. Another of the many ways you can contribute is to nominate your peers and colleagues with the dedication and time to take CPNP even further. On or before **Tuesday, September 10**, you have the opportunity to [nominate](#) leaders for 3 positions on the CPNP Board of Directors (President-Elect, Secretary and Member-At-Large). You can log in as well to learn more about the [requirements for each position](#). As the immediate past-president of the Board, I can attest to the value of this experience and encourage you to recommend those you respect as well as consider nominating yourself for this excellent opportunity.

Once an individual has been nominated, they will be asked to complete a form detailing their current position, professional experience, prior CPNP volunteer work, other professional activities they are involved in, and board positions he/she is willing to serve in. This information is then shared with the Nominating Committee consisting of me as Immediate Past President and Chair, Past Presidents Jerry McKee and Steve Stoner, and at-large members Mary Borovicka and Mark Wantanabe. This information is merged with a historical profile of CPNP involvement all of which assists the nominating committee in evaluating the skill sets and leadership experience of those nominated as they consider the needs of the Board. The final slate of six nominees (2 for each position) will be based on the future skill sets and leadership needs of the board matched with the qualifications of those nominated as detailed on their nomination profiles. This slate will be offered to the membership for voting in late October through mid-November.

Nominations for the prestigious [Judith J. Saklad Memorial Award](#) are also being accepted through September 10. This award is presented annually to a senior psychiatric pharmacy practitioner who has achieved a level of professional distinction and demonstrates a continuing dedication to the practice of psychiatric pharmacy. Like Dr. Saklad, this practitioner will represent the qualities

and ideals of professional enthusiasm, in addition to possessing a passion for optimizing patient care. You are encouraged to review the [Saklad award criteria](#) and provide a substantive, thoughtful nomination for the colleagues you believe are most deserving of this recognition.

Each and every one of us can make our contributions to CPNP and this is one of the significant ways you can make a difference to an organization so important to our profession.

### GAINING DIVIDENDS PROFESSIONALLY AND PERSONALLY WITH SERVICE ON THE CPNP BOARD

Jerry McKee PharmD, MS, BCPP  
Regional Dean, Wingate University- Hendersonville

Jerry McKee's volunteer testimonial will motivate you to volunteer your time and talents within CPNP. With nominations now open for the CPNP Board, we encourage you to consider nominating others and even yourself to serve in this important role.

*Current Work:* Board of Directors

*Current Hours:* 20 per month

*I Gain:* Volunteering with CPNP is a great way to develop leadership skills and to initiate relationships with peers that will pay dividends to you both professionally and personally. The contacts and skills that you gain can, in the long run, make you a stronger, more efficient and more effective practitioner. Based upon my experience with CPNP, I can guarantee this to be true.

*CPNP Gains:* CPNP depends upon member efforts to make the organization successful.

*Advice:* So once again, we find ourselves "at the crossroads" and as an organization, we must choose to lead, follow, or get out of the way. If we are indecisive, the future will be decided for us. CPNP has considered the question of "what's it going to take?" to get us where we want to go. Consistent with the Psychiatric Pharmacist Manifesto and the behavioral health integration white paper which have been crafted in the last year, it is the goal of CPNP to achieve pharmacist recognition as a clinical practitioner along with a reimbursement mechanism for comprehensive medication management services. So in my opinion, the X factor in "what's it going to take" is member involvement. I promise that, based on my own experience, you will be amply and richly rewarded for jumping in the fray with us.

## COMPLIMENTARY CMM WEBINAR SERIES STARTS IN OCTOBER

[Register Now for Part 1: Comprehensive Medication Management: The Path to Payment for Patient-Care Services](#)

In September of 2012, CPNP adopted [Comprehensive Medication Management \(CMM\)](#) as the gold standard of practice for clinical pharmacists. Additionally, CPNP has joined the American College of Clinical Pharmacy (ACCP) in an initiative pursuing legislative and regulatory changes to the Medicare program and relevant sections of the Social Security Act (42 USC and relevant sections, primarily Section 1861) to recognize the direct patient care services of qualified clinical pharmacists as a covered benefit under the Medicare program.

But what is CMM and how does one go about implementing it? Additionally, how do we document and prove our value within this model? Lastly, can we get paid for these services? These are the questions we plan to answer through a four-part webinar series starting in October. [Register now for Webinar 1](#) focused on defining CMM and the reasons for implementing this practice model. Notifications for future webinars will continue to be provided. Additionally, each webinar will be archived on the CPNP website for future reference. Register early as space is limited for the live webinar with Q&A.

[Webinar 1: Establishing a Consistent Patient Care Practice: Comprehensive Medication Management](#)

Carla Cobb, PharmD, BCPP

Live Presentation **October 9, 2013**, 11 AM Central Time (9 AM Pacific, 10 AM Mountain, 12 PM Eastern)

### Learning Objectives:

1. Define CMM, MTM and other important terminology related to practice transformation
2. Describe the essential elements of CMM
3. Explain the value of a having a consistent pharmacy practice mode
4. Identify patients who would benefit from CMM

**Webinar 2: Getting Started with Patient Care and Practice Transformation**

**Webinar 3: Documenting Outcomes to Prove Value**

**Webinar 4: Payment Models and Options**

## RESEARCH COLLABORATION ACROSS THE COUNTRY

What started as a discussion and idea with CPNP Research Committee blossomed into a multi-site research

project conducted by residents and clinical pharmacy specialists in psychiatry. The abstract below details the success of this effort and the lessons learned.

**Title:** Collaborating across the Country: Lessons learned from a multi-site, pharmacy resident research project

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Research has become increasingly collaborative, allowing individuals from multiple institutions or academic disciplines to pool together knowledge and experience from individual contributors. Collaboration may allow for an increase in the sample size and diversity of a study population and facilitate studies that may not be feasible at a single site. To capitalize on the benefits of collaboration, a multi-site research project was conducted by residents and clinical pharmacy specialists in psychiatry to determine consumer and provider satisfaction with medication fact sheets prepared for the National Alliance on Mental Illness (NAMI) by members of the College of Psychiatric and Neurologic Pharmacists (CPNP).

We prospectively aimed to describe the collaborative process of this prospective survey study by discussing experiences and resources at individual sites as a part of each telephone conference call, via email communications and via an internet-based workspace; we also evaluated aspects of using the workspace as it related to collaboration. An anonymous electronic survey was created to solicit investigator feedback on various aspects of the collaboration. We presented a poster at the 2013 Annual Meeting describing the collaboration and the potential benefits, obstacles, and feasibility of such an effort.

The investigators successfully coordinated research protocol approvals across a variety of healthcare

institutions. We learned that completing a collaborative project during the pharmacy residency year is a viable and feasible endeavor. The primary benefits of this collaborative effort included: increased sample size and diversity in the study population, sharing of responsibilities and resources among multiple investigators, potential professional benefits to participants, and providing added value to the residency research experience. The benefits realized with this collaboration were consistent with previously published descriptions.<sup>1-3</sup> Factors to consider when embarking on a collaborative effort include project feasibility, investigator group composition, primary authorship, communication tools and frequency, potential benefits to participants, strategies for task delegation, and maintaining uniformity across sites.

The project centered on medication sheets for selective serotonin reuptake inhibitors, and we obtained survey responses from over 150 consumers and providers. Results from this effort allowed us to evaluate satisfaction with the information sheets and identify potential opportunities to help meet consumer needs through revision of the fact sheets. This information will be presented to the CPNP committee who revises these resources. It is anticipated that the robust results obtained through this process will allow investigators to seek future collaboration with NAMI on a more inclusive survey project on medication fact sheets.

## References

1. Hellwig T, Laible B, Remund K, Fjeldheim C. Institutional collaboration on a residency research project. *Am J Health Syst Pharm*. 2013;70(6):484-5. DOI: [10.2146/ajhp120619](https://doi.org/10.2146/ajhp120619). PubMed PMID: [23456400](https://pubmed.ncbi.nlm.nih.gov/23456400/).
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3. Huggett KN, Gusic ME, Greenberg R, Ketterer JM. Twelve tips for conducting collaborative research in medical education. *Med Teach*. 2011;33(9):713-8. DOI: [10.3109/0142159X.2010.547956](https://doi.org/10.3109/0142159X.2010.547956). PubMed PMID: [21854148](https://pubmed.ncbi.nlm.nih.gov/21854148/).

## SAVVY PSYCHOPHARMACOLOGY FEATURE: RECOMMENDATIONS FOR LAB MONITORING OF ATYPICAL ANTIPSYCHOTICS

Thanks to our partnership with [Current Psychiatry \(CP\)](#) published through Quadrant Healthcom Inc., another CPNP *Savvy Psychopharmacology* article was featured in the September 2013 edition of *Current Psychiatry*. The goal of this section is to present an evidence-based discussion to guide safe, effective prescribing of psychotropic medications. Kathryn Zeier, Robert Connell, William Resch and Christopher Thomas authored this month's article on [Recommendations for Lab Monitoring of Atypical Antipsychotics](#).

A reminder that a [special subscription price](#) is available to *Current Psychiatry*, a monthly peer-reviewed publication, and the leading source of practical, evidence-based information for healthcare professionals treating psychiatric patients. Thanks to the CPNP partnership with *Current Psychiatry*, CPNP members can receive a year of *Current Psychiatry* at a cost of \$38.

## SEPTEMBER 2013 MEMBER NEWS

Congratulations!

**Ben Chavez, PharmD, BCPP, BCACP**, has accepted a new position as Associate Professor at Pacific University Oregon School Pharmacy.

### How to cite this news article

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