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www.ncpa.org/20

It's a question that's been asked often in the last 15-20 years – how does independent pharmacy not only survive but thrive in a fiercely competitive environment? In the face of big-box chains, mail order, and constantly shape-shifting PBM tactics, what does community pharmacy have in its arsenal to assert its strength?

The answer is multi-faceted. Independent pharmacy certainly hasn't stood still, as pharmacies recognize that simply dispensing prescriptions, while an important role, is not the path for long-term sustainability. With that in mind, many pharmacists have steadily expanded clinical services and offerings to help educate and provide patient treatment in a multitude of areas.

NCPA is always looking to build on those clinical green shoots. A key step in that direction occurred in 2016 when NCPA partnered with Community Care of North Carolina to form CPESN® USA, seeing it as the profession's best hope for the future. This network of pharmacies is built on the tenets of practice transformation, with the ability to open opportunities for contracts unavailable to the current billing model. It has grown to more than 3,500 pharmacies in 44 states and the District of Columbia and is engaged in more than 70 payer relationships based on service instead of product.



Dean Stone, owner of IHS Pharmacy and Gifts, and pharmacist Jessica Latham (at left and above), are both participating in the fellowship program.

Transforming pharmacy

NCPA Innovation Center/CPESN Community Pharmacy Fellowship – another step toward practice transformation

by Chris Linville and Carlie Traylor, PharmD

BUILDING ON THE CLINICAL MODEL

The latest step in reinforcing practice transformation was the launch last September of the NCPA Innovation Center/CPESN Community Pharmacy Fellowship, sponsored by Good Neighbor Pharmacy, a training program to give members the resources they need to transform their practice. The fellowship is an intensive 12-month online educational program, focused on implementation of enhanced services, for an individual pharmacist practicing in a CPESN pharmacy. The fellowship instructors are industry-leading owners and pharmacists who are sharing their practical experience in growing profitable clinical services, providing the background, guidance, and encouragement to make transforming pharmacy practices a reality.

“The NCPA Innovation Center/CPESN Community Pharmacy Fellowship program has introduced a new model of post-graduate training where you don’t have to be a recent pharmacy graduate to learn the latest in innovative patient care,” says NCPA Innovation Center President Kurt Proctor. “We have the most pioneering minds

CPESN USA Executive Director Troy Trygstad says the profession has its share of pharmacy superstars, but the goal is to have thousands more like them.

“Payers like their innovations, but they need scale,” Trygstad says. “This fellowship program is a key component to our collective lifelong education opportunities. Fellows get a backstage tour of the best pharmacies in the country at a cultural, operational and strategic level. They get to see how they tick and share resources to bring their pharmacies along for the ride. This is a game-changer going forward for how we train pharmacists to provide optimal patient care and express their value in the marketplace.”

Dean Stone, who with wife Krista owns IHS Pharmacy and Gifts in Metter, Ga., and is participating as a fellow, sees the program as a natural extension of where he sees independent pharmacy going.

“Over the past three to five years, the pharmacy profession has moved even closer to being recognized as a valuable provider in a patient’s health,” he says. “I believe our pharmacy team is at a tipping point and this is an awesome opportunity to help us advance to the next level in patient care. The NCPA Innovation Center/CPESN Community Pharmacy Fellowship is bringing together all

Stone believes the fellowship program is a natural extension in promoting clinical patient care. Stone bought his pharmacy in 1998 and has long been an advocate for enhanced patient services. The fellowship program appeals to him because it is a long-term process and provides the tools he believes can help transform his practice.

those that have made a difference in patient care over the years.”

Jessica Latham, also a fellow, was hired by Stone at IHS as a clinical pharmacist before he was aware of the fellowship program. Stone said it was perfect timing as he was moving in that direction already.

“I thought it would be a great opportunity for Jessica and I to go through it together,” he says. “I was glad to see this come out. We thought it was a no brainer.”

in our industry to mentor fellows through the process of building enhanced services over the course of their fellowship year. These mentors give the fellow unprecedented access to how they’ve achieved success by going beyond dispensing to open up new revenue streams for their own community pharmacies, so that the fellows can do the same at their pharmacies.”

Top-flight instructors provide expertise

The NCPA Innovation Center/CPESN Community Pharmacy Fellowship has brought in some of the best of the best as instructors from different perspectives (see faculty list below).

The core curriculum is divided into three groups:

- Practice transformation
- Management
- Patient care

Instructor Randy McDonough, co-owner of Towncrest and Towncrest Compounding Pharmacies in Iowa City, Iowa, and Solon Towncrest Pharmacy in Solon, Iowa, says that health care is changing rapidly and pharmacy needs to do the same, with an emphasis on value and not volume.

“Independent community pharmacy must continue to evolve to meet the demands/needs of our patients and payers of health care,” he says. “I have frequently indicated that the NCPA Innovation Center/CPESN Community Pharmacy Fellowship helps to develop change agents to lead the practice transformation process that needs to occur to support enhanced patient care services. I am excited to see that initiatives such as this fellowship and programs such as Flip the Pharmacy (www.flipthepharmacy.com) are moving independent community pharmacy in the right direction — as a major player in health care evolution.”

Megan Smith, PharmD, assistant professor, pharmacy practice at the University of Arkansas College of Pharmacy, says the fellowship program has highlighted the energy and commitment of pharmacies building a foundation now for the future.

“Their desire to gain knowledge and most importantly implement advancements in their practice displays the momentum of the community pharmacy profession,” she says.

And for anyone who might be on the fence about becoming a future fellow, Smith has some advice.

“Absolutely, go for it and participate!” she says. “It will not only be a career changer for yourself, but also helps turn the tide of the profession toward patient-focused services and outcomes.”



MCDONOUGH

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FACULTY MEMBERS

CPESN LUMINARIES

Amina Abubakar
Tripp Logan
Bob Lomenick
Randy McDonough
Joe Moose
Matt Osterhaus
Travis Wolff

PHARMACIST IMPLEMENTORS

Tammy Bullock
Cheri Schmit
Jessica Sinclair
Kelci Trahms

ACT CHAMPIONS

Jordan Ballou
Shanna O'Connor
Nicole Pezzino
Megan Smith

Latham, who had a health care background as a nurse before becoming a pharmacist, says she appreciated the opportunity to participate.

"The fellowship has introduced me to a community of pharmacists striving toward the same goal," she says. "Through collaboration and cooperation, we are driving the industry forward by advancing clinical services in the field of community pharmacy."

EDUCATION STRUCTURE

The NCPA Innovation Center produces recorded and live webinars on NCPA's Learning Management System. Education is delivered in a flipped classroom format with recorded lectures viewed by the fellows on their own time and then followed by a live webinar to discuss the content covered in the lecture. These dyads (a recorded lecture paired with a live discussion) address three main topic areas: practice transformation, management, and patient care. Topics covered during the educational sessions include implementation science, the appointment-based model, immunizations, behavioral health, opioid use disorder, asthma/COPD updates, and collaborative practice agreements.

PROGRAM TIMELINE

The initial fellowship began last Sept. 1 and runs through Aug. 30. A pre-program orientation covered topics such as project expectations, elective opportunities, discussion group functions, care planning, flu clinics, and social

research, precepting, and more. There are 27 participating pharmacies and 27 fellows in the 2020-21 program.

LONG-TERM BENEFITS

Stone has owned IHS Pharmacy and Gifts since 1998, so he's seen a lot in his career.

"When I graduated from the University of Georgia College of Pharmacy in 1993, I imagined a business model that incorporated patient care services," he says. "I have strived over the past 28 years to move toward this goal."

Stone says the fellowship program's long-term approach appealed to him.

"For me this differs from other training programs I've taken part in by providing not just a one-time learning experience," he says. "This fellowship provides a wealth of information and advice, not just for three or four days, but for an entire year. You have support to help you move forward, not to mention the new friendships you make for life. I believe that I have a couple of qualities that help me in this fellowship: listening, and a willingness to change."

Stone also says, "My perspective of the future of pharmacy has not really changed, but what has changed is that the entire profession is on the cusp of being recognized as clinical providers."

Latham says the fellowship has helped provide a toolkit

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determinants of health. Two educational dyads were discussed during orientation, including a practice transformation dyad covering augmented dispensing, and a patient care dyad with clinical refreshers on diabetes, high cholesterol, and high blood pressure. After orientation, the fellows met weekly throughout September to participate in additional educational dyads. After September, the regular meetings moved to twice monthly until March, and are now once a month for the remainder of the year. Fellows can also engage in elective learnings such as the Payer Engagement Learning Series from CPESN USA,

for identifying new opportunities.

"Our capstone project is to build our diabetes self-management education program (DSME)," she says. "We now have a clearer picture on how to utilize our medication synchronization program to identify patients in need of this service."

Hannah Mitchell, a fellow at Banner Drug in Statesville, N.C., says the program has made a difference in getting more patients adherent with their medications.

What fellows are saying about the program



BRANDON BEAVER
McBain Family Pharmacy,
McBain, Mich.

"The NCPA/CPESN fellowship is essentially the leading experts and game changers from community pharmacy practice coming together to share what works and what doesn't. It's

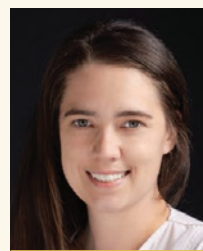
unlike anything I've been a part of before. It has been eye-opening for me in many ways and has helped me to more fully understand some of the current issues surrounding community pharmacy, and how best to address them."



ALLYSON COOLEY
Boscobel Pharmacy,
Boscobel, Wis.

"I know I have gained confidence, and this has helped a lot, especially being a brand-new pharmacist. We have increased our sync patients, and I have helped implement a better

workflow within the new pharmacy we bought. I'm so excited and want to implement all of it, right now. But we have to take it one step at a time."



JESSICA LATHAM
IHS Pharmacy, Metter, Ga.

"Listening to the experiences of my peers gave me greater insight into the dynamics of clinical care services. A critical analysis based on these concepts enhances the implementation of these services. For example,

we have incorporated learned best practices for enhancing our technician-led medication synchronization program."



HANNAH MITCHELL
Banner Drug, Statesville, N.C.

"This fellowship has allowed me to learn about other services to help our patients and our profits moving forward. I see the need for clinical services and want to provide those to our community. It has broadened my horizons

as to what is possible, and we plan to shoot for the stars."



ALYSSA TURNER
Jensen's Community
Pharmacy, Saline, Mich.

"My boss believes that my thought process has changed. That I have gained confidence in my role of leader in the pharmacy. Which is great because he has stepped back

some to open another location."



DAYNA WONG-OTIS
KTA Puainako Pharmacy,
Hilo, Hawaii

"I definitely believe my skill level has improved. We have increased the number of patients on med sync and we have gone back to the appointment-based model where we

contact the patients before we fill their medications. This has helped with workflow and my pharmacy manager has more time to meet with me since starting this fellowship too."

Want to be a 2021-22 fellow? Here's how

Enrollment for the 2021-22 NCPA Innovation Center/CPESN Community Pharmacy Fellowship, sponsored by Good Neighbor Pharmacy, is now underway, and continues through July 31. The tuition for this program is a one-time payment of \$7,500. More information is available at ncpa.org/fellowship, and by email at fellowship@ncpa.org.

“Watching our medication synchronization program grow is a huge success,” she says. “I believe that medication synchronization is the key to having healthy patients, building those relationships, and lowering our DIR exposure. It’s a win-win for our pharmacy.”

Brandon Beaver, a fellow at McBain Family Pharmacy in McBain, Mich., has also seen positive results.

“I’ve learned to navigate the med sync process more efficiently, and as a result we are making more calls, reaching more patients, and having improved will-call pick-up numbers,” he says. “Also, our patients have expressed gratitude for what we are trying to do and most are very open to talking with us.”

TAKEAWAYS

Beaver says his perspective on the pharmacy’s future has “definitely brightened” since starting the fellowship.

“If these are the kind of leaders and innovators we have on our side; advocating for us and pushing us to be better, I think the profession has a great chance of future growth and success,” he says.

Beaver says he went into the fellowship with an open mind and an eagerness to learn, which he says has been beneficial.

“I’m fairly new to community practice, having been a

hospital pharmacist for most of my career,” he says. “A lot of what we’re learning is new information for me. I just enjoy soaking it up and trying to implement small changes in my own practice.”

Launching an ambitious program such as the fellowship initiative in the middle of a pandemic has certainly presented its share of challenges. Pharmacies have had to adapt on the fly and adjust their businesses based on COVID-19.

“Dealing with COVID-19 has been difficult,” Mitchell says. “But being a part of the fellowship has given me confidence to pivot when needed and implement new things as information changes almost daily.”

When asked if others should consider applying for the next fellowship for 2021-22, Mitchell is emphatic.

“Do it!” she says. “I have loved this opportunity to learn from our amazing luminaries as well as my fellow classmates. This program has lit a fire under me to be the best pharmacist I can be and serve my patients with the best care possible. This program has given me the tools to reach my goals and implement new programs successfully.” ■

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Program requirements

The NCPA Innovation Center/CPESN Community Pharmacy Fellowship has several requirements for both pharmacies and fellows. The pharmacy must provide a letter of recommendation from its local CPESN network that attests to the pharmacy being in good standing. It must provide its employee access to a Pharmacist eCare Plan-capable system (list available at www.ecareplaninitiative.com/software-solutions) for pharmacy-based patient care. The fellow is an employee of the pharmacy, so his or her salary and benefits are covered by the pharmacy itself. The pharmacy is serving as a laboratory for the fellow, so that person must be given no less than 12 hours a week to dedicate to fellowship-directed activities, such as webinar attendance and implementation of clinical services.

Pharmacies can give the fellow more time for fellowship-directed work activities but not less. Feedback between the fellow and pharmacy is paramount, so the pharmacy must engage in frequent touchpoints with the fellow including quarterly evaluations based on the pharmacy’s quarterly progress report from CPESN to review progress and set new goals for the next quarter. The fellow must be licensed and participate in all required virtual educational offerings. The fellow must engage with staff to update workflows and train for new job responsibilities.

Capstone projects

Participants are required to create a capstone project, presented at the end of the fellowship year. The project should entail creating a new service or improving an existing clinical service at the pharmacy and be implemented by the fellow. Examples include starting a PrEP/PEP clinic or enhancing the pharmacy’s clinical medication synchronization program. The project is decided by the pharmacy and fellow in the first month of the program. The fellow submits a report at the end of the fellowship year in the form of an instruction manual, which will be added to the fellowship resources for future classes.

Capstone projects for 2020-21 fellows

Capstones were determined in the first month of the program. The capstones were created using the wildly important goal, or WIG, concept using lead and lag measures from the book *The 4 Disciplines of Execution*. Here is a sampling of some of the fellowship capstone projects for the current class.

PAULA BOETTLER
Mitchell’s Drug Stores on the Boulevard, Neosho, Mo.
“We want to utilize technicians trained as community health workers to add 600 patients to med sync over the next 12 months.”

LARRY BRIGGS
Carmichael’s of Covington, Covington, Ga.
“Our WIG is to become the destination and expertise center in wound care by adding an extensive wound care segment with collaboration with the local wound care clinic/hospital. This is an extensive project with research, pharmacy redesign, collaboration, staff education — implementation to take place over 12 months.”

AUDREY BUTLER
Alwan Pharmacy, Peoria, Ill.
“We want to add 100 new patients to our diabetic care club and use our CLIA waiver to monitor their blood sugars in-store and be more proactive in their diabetic care.”

BRAD JOHNSON
Eastern Carolina Medical Center Pharmacy, Benson, N.C.
“My WIG is to start a medication-assisted treatment program for opioid use disorder (OUD) patients. The plan is to implement the startup and then maintain its growth all the way to this being a permanent feature that the clinic can offer to the public even after the project is complete.”

MARTIKA MARTIN
Danhauer Drug Co., Inc., Owensboro, Ky.
“We want to maintain 950 patients in med sync and custom packaging by Sept. 30, 2021.”

HANNAH MITCHELL
Banner Drug, Statesville, N.C.
“My capstone is increasing our med sync program and my WIG is to have 50 percent of our active patients be enrolled over the next 12 months.”

ZENUB PARUPIA
Main Street Pharmacy, Bridgeport, Conn.
“We want to obtain up to 20 participants in our DSME/T program in the span of 12 months.”

ALYSSA TURNER
Jensen’s Community Pharmacy-Saline Saline, Mich.
“Over the next 12 months, our aim is to add 250 patients to our med sync program. We also want to tie in clinical services to med sync. This includes immunization offerings, MTM, and Dispill adherence packaging.”

DAYNA WONG-OTIS
KTA Puainako Pharmacy, Hilo, Hawaii
“We want to implement point-of-care testing for KTA Puainako Pharmacy in the next 12 months.”