Those of you who know me will not be surprised by the statement that I often have been called “visionary”! Our dear colleague Dr. Ken Miller, now retired a full year from AACP and loving it, said to me not very long into my tenure as CEO, “Lucinda, I love your vision. I just wish there was less of it to keep up with!” What I have never felt that I was quite as good at is planning. You know, I get that great idea, share it with others and say “Let’s just get it done... by Tuesday!”

Last year the House adopted a new AACP strategic plan and I shared that we also were embarking on a new process of planning that was both strategic and operational. The plan itself did not generate very much debate. The 6 critical issues that framed it covered pretty much all that someone in academic pharmacy, or perhaps academia of just about any genre, would have expected. Resources, quality, alliances, advocacy, research, and core operations – if someone’s priority or need did not fit under this umbrella, we did not hear from them, though there were clear calls for more programmatic detail on future initiatives and priorities. The 2010 delegates adopted the strategic plan and then we returned to Alexandria and prepared an operational plan with input from both leaders and staff members. It is the operational planning step that represents our new commitment to use planning differently. Each critical issue has a staff lead and we review the progress against the plan thoroughly as we begin the budgeting and reporting process in the spring and will do so again as we prepare for the October meeting of the board’s strategic planning committee. This is not a SPOTS as our consultant John Deadwyler coined it: Strategic Plan on Top Shelf!

Three other important elements of planning were undertaken in the last 12 months as well. Our planning consultants led us through a process of developing criteria and a scoring system to evaluate emerging opportunities. These criteria allow us to evaluate our current portfolio of programs as well. The third element is a fairly significant member needs analysis that is ongoing and will continue into the fall. This complements relatively recent needs analyses completed over the past year by the Council of Faculties and the Council of Deans, which examined development needs of department chairs and deans, respectively.

Utilizing the criterion-based needs analysis process, leaders and staff members reviewed 15 candidates for new projects over the last several months. The criteria examined value to members and costs and the projects were arrayed on a 4-quadrant matrix. Six of the 15 projects clearly reached the top of the rest. These were:

- Expansion of department chair programming
- Reinvigoration of the Academic Practice Partnership Initiative focused on increasing the quality and capacity for experiential education
- Development of milestone assessment resources
- Development of a consistent national framework and tools for student evaluation in experiential education
- Initiation of an Academic Research Fellows Academy built in a manner analogous to our highly successful leadership fellows program
- Building a consulting service to assist members with issues of curriculum, planning, faculty development, and other priorities

I hope you agree that our planning yielded a pretty impressive and timely list of new or renewed priorities for action by the Association. You might be asking, “How in the world are they (we) going to do all of that?!” The first answer is by allocating our resources in accordance with our plans! The second is through alliances and partnerships with members and leaders inside and outside the profession. That’s powerful!

Last year this House did debate the important question of raising dues for the first time in a decade. We had the framework of a new plan but lacked some of the necessary details for delegates to approve what the Board had initially sought, but the important decision was to approve a $3,000 per school increase for the fiscal year that began 2 weeks ago tomorrow. Those new dollars plus the benefits of your continued strong support of all our other programs permits us to make the investments to build significant new programs to serve you and your peers even better.

Our planning extended to a serious examination of our staffing and whether current staffing levels would allow us to embark on new initiatives. Not surprisingly we realized we could not and so we planned accordingly. One of our longest tenured staff members, Jennifer
Patton, who has proven herself to be an outstanding team leader for building significant new programs like the Assessment and Accreditation Management System launched last November, will take on a new role beginning this month. Her title is now Director of New Program Development. She will continue the development of and training for the Assessment and Accreditation Management System (AAMS) as a key part of this role, but she also will shepherd development of these additional programs over a period of 12 to 24 months.

The hiring of Dr. Vincent Lau represents another significant expansion in resources in the area of research and graduate education. Whereas Dr. Miller had maintained responsibility for this critical area of AACP activity for 15 years, he also carried significant responsibility for leadership programs and administration. One hundred percent of Dr. Lau’s time is now directed to research and graduate education. He will work on faculty development programs and outreach to schools but also will engage actively with all the relevant funding agencies supporting scholarship in the Academy to build the strongest case for their support of your work.

Our programmatic success has resulted in AACP’s strongest financial position ever as Dan Cassidy described on Sunday. Solid operations, fiscal discipline, and good investment practices combine to allow us to now invest in the new programs I mentioned, and there will be others identified through continued member needs assessment and planning in the months ahead.

But in these times, you all know that rarely can a single person or organization function independently and find maximum success. It takes effective partnerships. AAMS could have happened but not easily without the partnership with the Accreditation Council for Pharmacy Education (ACPE). Health reform progress and effective positioning of pharmacy and pharmacists in the era of health information technology certainly could not have happened with the efforts of any one organization in pharmacy.

Virtually all of AACP’s significant work is done through alliances, partnerships, and coalitions. The core competencies for interprofessional education came to fruition through partnering with 4 other disciplines and will continue under the banner of Interprofessional Partners in Action. Our work in the global arena also will expand markedly in the year ahead through the maturation of the Global Alliance for Pharmacy Education, with partners currently on 5 continents. (We have high hopes that the European Association of Faculties of Pharmacy will soon join as well.) The aim of our efforts in global pharmacy education is to support our faculty members and students as they embark upon or expand their global outreach to build experiential exchanges in education, practice, and research. After more than a decade hiatus, AACP will rejoin the International Pharmaceutical Association (FIP) and help it celebrate its 100th anniversary in 2012.

I am even more excited by a domestic partnership that should come to fruition this year. This is a working alliance with the Veterans Administration Health Services. Working closely with Lori Golterman and colleagues in the DC office and with regional VA leaders across the United States, AACP will work to fulfill Past President Raehl’s dream that every doctor of pharmacy (PharmD) graduate will leave school having at least one VA experience in their curriculum. Helping the VA to expand residency sites and expanding a productive practice-based research agenda are 2 other top priorities for this partnership.

AACP has been involved for decades in the planning work of the profession itself through leadership and engagement in several collaboratives. The Joint Commission for Pharmacy Practitioners, now more than 30 years old, has a bold vision for pharmacy in 2015. I also serve as president of the Pharmacy Manpower Project, soon to be renamed to do business as the Pharmacy Workforce Center. These are turbulent times with respect to changes in healthcare and this certainly impacts the fulfillment of our aim to fully engage pharmacists’ ability to deliver patient care services and medication management consistently to the public that needs them so badly. We will be embarking on a careful reexamination of the assumptions and projections for the pharmacy workforce, including pharmacy technicians, through the PMP this year. I foresee dedicating some of the earliest pages of the new AACP blog, to launch in just a few weeks, to issues of workforce and professional role expansion in a reformed health delivery and financing system.

Planning and partnerships – a powerful combination. Add resources sufficient to permit the development and expansion of important programs and it is a recipe for a healthy and productive AACP whose sole focus is helping our members be successful.