

ISHP Newsletter

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Idaho Society of
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President's Message

Rob Wills

Why ISHP?

Sometimes it is easy to become distracted by changing dynamics of pharmacy practice. Whether it's the changing laws, medication shortages, and the reshaping of health care for this new century, for us, it was always about the people -- those pharmacists and pharmacy technicians practicing all across Idaho, making a difference in the lives of so many in their care. From the beginning, ISHP has been an organization created by and run by the people of Idaho. From Bob Endo and Don Ness, to Jim Jurgens, Robin Kinsey, Dorothy Galloway and Leo Nickasch, ISHP has a long history of service to the pharmacy profession and to the growth and diversity in health care.

I was first introduced to ISHP as a Pharmacy Resident, attending my first fall conference in Sun Valley. From that first day I was just amazed at what ISHP was producing and pulling together in terms of first rate pharmacy education that was easily comparable, if not better than other larger state organizations. What I learned over that fall weekend was not just that fall in Sun Valley is awesome, but even more so, that what made this conference special was the people. Unlike other conferences, everyone knew each other by first name, often spending a great deal of time catching up on families and work life. From that point on I was sold and really wanted to help in whatever way I could.

(Continued on page 3)



Rob (in the vest back row left)
and ISHP Past Presidents in
Sun Valley

**2017 – 2018 ISHP
Officers and Directors:**

President:	Rob Wills
President-elect:	John Sullivan
Past President:	Lindsay Kaster
Secretary/Treasurer:	Jessie Litke
Executive Director:	Caroline Merritt
Administrative Affairs:	Debbi Burr
Education:	Kasidy McKay
Programs:	Tyler Osgood
Legal & Public:	Katie Erickson
Professional Affairs:	Andrea Winterswyk
Student Representatives:	Meridian – Lindsey Catlin Pocatello – Naomi Veloso
Technician Representative:	Kathleen O’Dell
ISU College of Pharmacy Representative:	John Holmes
Northern Idaho regional Representative:	Steve Crenshaw
Central Idaho regional Representative:	Elizabeth Duncan
Information Technology Committee:	Clark Brenisoltz
Newsletter Editor:	Kent Quickstad
ASHP Liaison:	Kimberlee Berry

EZ contact information:

All of these Officers and Directors can now be reached at one place!

ishpcontact@gmail.com



*The mission of ISHP
is to promote the highest levels
of pharmacy practice by our
members*



ISHP Fall Meeting

Sun Valley

September 28, 29 & 30 2018

(President's message – continued from page 1)

As I step away from this office and happily take up more of a support role for ISHP, what I'll remember most is learning and sharing stories with truly great pharmacists and people like Barb Mason and Kent Quickstad, Doug Schoonover and Mark Phillips, Sue Heineman and CT Taylor. I'll also remember most how this ISHP team have worked tirelessly to advocate for pharmacy practice. From Kasidy McKay and Tyler Osgood with Education/Programs, to Andrea Winterswyk and Katie Erickson in Professional/Legislative affairs, to Lindsey Hunt, Paul Driver, and Mike Dickens (ASHP Delegates), to Kathleen O'Dell, Clark Brenisholtz and Kent Quickstad (technician rep and Website/Newsletter chairs) to Debbie Burr and Jessie Litke (Admin Affairs and Secretary/Treasurer) and finally to the Exec Team of John.

Rob

Rob Wills
ISHP President

ASHP House of Delegates (ASHP HOD)



Lindsey Hunt and Paul Driver attended the ASHP Summer meeting in Denver as your Idaho delegates last June. This year the House had over 30 new policies to consider. In past years this process would take several hours to accomplish. This year however, all the policies were presented, amended by the delegates and approved in record time. There was even time to spare at the end of the first session which allowed us to adjourn early. This was truly an amazing feat. The House of Delegates has changed some of its processes and this has allowed for a much quicker and timely review and approval of potential policy items. The delegates are now part of a virtual house in March and November of each year. Policies that either need timely approval or appear to be more of a house keeping nature, are presented at these meetings. It does require a super majority (> 80%) to approve the policy and amendments are not allowed. If a policy is not approved by this process, it is forwarded to the full House in June. This year there were 10 policies considered in March and 9 passed. The remaining policy was referred to the June meeting. (the policy had to do with Pharmacy Training Models). After much discussion and amendments in the Regional Delegate Conferences, Caucuses and the HOD it was passed.

Lindsey Hunt, Delegate 2017-2018 Lindsey.Hunt@VA.gov
Paul Driver, Delegate 2018-2019 pdriver@cableone.net

For more information on the ASHP House of Delegates, the role of the delegate, the policy making process, or other activities, please go to the ASHP Delegate Webpage:

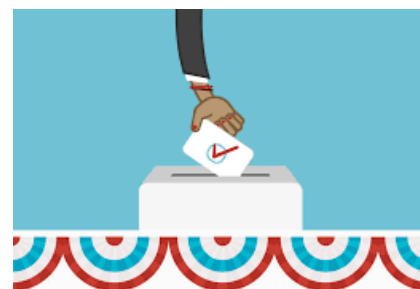
<https://www.ashp.org/house-of-delegates>



New ISHP Board Members

The votes are in and ISHP is pleased to announce the new Board Members that will be inducted during the Business Meeting in Sun Valley.

- **President-Elect:** Chris Oswald
- **Secretary/Treasurer:** Elaine Nguyen
- **Education Chair:** Lindsay Crawford
- **Administrative Affairs Chair:** Cassie Perdeu



Please thank our new Board Members for their commitment to both ISHP and pharmacy practice in Idaho!

Planning to Present a Poster at the 2018 ISHP Annual Fall Meeting?



Submit Your Abstracts Now!

Awards are given in each of the following categories:

Student/Resident, Technician, Pharmacist.

Please complete the poster application and attach it to your abstract before submitting it to the ISHP Professional Affairs Chair by September 14, 2018 at 11:59pm.

[Download the Guidelines & Application here:](#)

<https://ishp.wildapricot.org/resources/Documents/2018%20Fall%20Conference/Poster%20Guidelines%20Fall%202018%20-%20Fillable%20Form.pdf>

Website Update



ISHP has recently refreshed its website and consolidated the information available for current and prospective members. Check out www.ishp.wildapricot.org to see the latest look and provide your feedback. Don't forget to like us on Facebook, as well!

We also have a new continuing education platform. ISHP recently transitioned from Learning Express to World Continuing Education Alliance (WCEA). WCEA will allow us to expand our online CE opportunities that we offer our members. If you haven't already, please visit <http://www.wcea.education/lps/pharmacy-ishp-assoc-p50> to register for the new platform.



Meet a Member: Charles Jensen, PharmD., BCPS

So, what does a 100 miles race and pharmacy have in common?

Meet ISHP member Charles Jensen, Pharmacy Antimicrobial Stewardship Coordinator at St. Luke's in Boise and find out.

Pharmacy-Related: Scout Mountain 100 Race Report

Beyond mountains, there are mountains. -Haitian Proverb

On Friday, June 1st at noon I stood at the starting line with 40 other runners anxiously awaiting the start of The Scout Mountain Ultra Trail, a 100-mile foot race through the Bannock Range South of Pocatello. There was a familiar feeling in the air: one that was there on my first day of pharmacy school, my first day of residency, my first day of being a new father. It's the feeling of not knowing exactly what you're in for and that there's a good chance it's more than you can handle. The task at hand definitely met those criteria. To be considered a finisher, we would need to traverse the 100 miles of technical trails and 24,000 feet of vertical climbing in 36 hours or less. Along the way, there would be 11 aid stations where runners had access to crew and carefully-packed drop bags filled with gear. Depending on the zeal of the aid station captains, there was also freshly prepared-food, campfires, blasting music, and manic enthusiasm. It was a lot to think about. So, I tried not to. They finished the countdown and yelled "GO!"



As a non-runner for most of my life, how did I end up toeing the line for a 100-mile ultramarathon? Summer 2012, after finishing my PGY1, on a whim I decided to volunteer with my local boy scout troop and embark on a week-long 50-mile section hike of the Appalachian Trail along the Tennessee/North Carolina border. Residency was a tough year obviously, and I was ready for a break from around-the-clock stress. So, a week of nothing but the outdoors seemed a good way to unwind. Despite the rigors on my atrophied post-residency body, I enjoyed every second. The irony of using a physically demanding activity as an outlet to unwind from day-to-day stressors is not lost on me. In fact, it strikes me as very telling of the pharmacist's personality; always working on something even when we're not *working*.

Fast forward to 2015; I moved my family back to my home state of Idaho and joined the team at St. Luke's. When I wasn't wringing my hands over inappropriate antibiotic use, I could be found traversing the endless single-track around the state, following leads and encouragement provided by ISHP veterans Rob Wills, Mike Dickens, and Kent Quickstad. I hiked whenever I could and began running trails so I could cover more ground with the limited amount of free time that I had. Notoriously, while attending the 2016 ISHP fall meeting in Sun Valley, I opted not to book a hotel room, instead pitching a tent as close as I could to trailheads. I ran between CE sessions, and bathed in a freezing cold creek prior to the session I was presenting at. After several years of these vagrant tendencies, running a 100 miler (something that had been on my radar) seemed less crazy.



So how did the race go? The first 20 miles of the race were fairly uneventful. I focused on keeping a sustainable pace and only stopped briefly in the aid stations. The first major challenge was an absurdly steep climb up Old Tom Mountain. Wind was whipping on the way up, sucking the life out of me as I came to terms with what the next 24+ hours would entail. I continued on through the next aid stations still moving at a reasonable clip. At mile 35, I met up with my nephew Seth, who would be my pacer for the subsequent 13-mile section going into Friday night. It was a good change of pace (literally) as we picked away at more miles and more vertical climb while nighttime advanced. We talked about anything and everything; a

mental strategy to divert attention away from pain and mounting fatigue. Around midnight, we rolled into the mile 48 aid station and upon sitting down, I immediately started to get cold. A warm plate of pancakes helped, but the wind was cutting through my current attire, so I changed into my overnight warm gear and my spirits improved. I bid farewell to my crew and headed off into the night. Things slowed down significantly from that point on. I pressed on through the night and eventually the sun came back up and any concerns about getting cold were put at ease. With a mix of walking, shuffling, hiking, & “running” I eventually stumbled into the mile 80 aid station feeling understandably wrecked. From my chair, I could see the last big climb of the race, Scout Mountain, looming in the distance. It was an obstacle I tried to ignore, given my current state of fatigue and the knowledge that those last 20 miles would be excruciatingly slow. I refueled and headed off down the trail, starting to feel the finish was within reach.



Nothing could have prepared me for what happened during the final push. My mental status changed to what I'd describe as a dissociative state where I felt like I was hovering outside my body observing myself. I wasn't sure if this was early heatstroke or simply sleep deprivation coupled with extreme fatigue. I settled on the latter because I was sweating well and not overly hot. At this point I had been awake for ~31 hours and running for 28. A series of vivid hallucinations ensued; some of the more notable being:

- A man with popcorn cart waving at me
- Snakes
- A rusty bike
- Random people & spectators
- Cars
- Giant bugs
- Non-existent roads & trails

Everything was trying to shut down on me. My legs, my brain, my motivation, my hope. I contemplated dropping at the mile 94 aid station, which seems insane now, but I was coming unglued and wasn't sure I could stumble another 6 miles to the finish. After a long descent, I made it to the last aid station where my wife had a chair and a tuna salad bagel waiting. I had roughly 5 hours to get to the finish line before the 36-hour cutoff. I knew things would have to get really bad to not make that happen. The question was, would they? My ankles and feet were starting to swell; I knew I had to get out of there fast and finish this dang thing. So, I got up and kept moving, fueled now by anger. I was angry that I wasn't done yet and took out my aggression on the last of two *relatively* short climbs before the finish. I power hiked at a pace that felt like I was flying. I wasn't, but it was faster than I'd climbed for many, many hours. Despite an all-day war with asthma, I was breathing relatively well, snorting and frothing at the mouth like some rabid hobo. For the first time I felt like I had the race in the bag. I was going to finish and nothing was going to stop me. Finally, after cycling through every type of pain, emotion, and fatigue, I dropped onto the road to the finish pavilion and crossed the finish line where the race director congratulated me with a big hug. Content and entirely exhausted, I plopped down and fell asleep mid-sentence rambling nonsense to my wife, commencing a long bout of mouth-breathing/snoring.



Neat story, Charles but what does this have to do with pharmacy? I've learned a lot from ultrarunning that I think applies to our work as health-system pharmacists. Our efforts to improve patient care and advance the profession require endurance, skill, ability, patience, and persistence, just like a long race so I leave you with a few thoughts:

Mindset matters

- I repeated to myself that I was 100% committed to finishing this race, no matter what it took. Throughout the race, up until I left the last aid station, I had real doubts about whether I could physically keep up with what my

mind had decided, but I also knew the math. I knew if I ran fairly consistent the front half of the race and kept moving in the second half, I would make the time cut-offs. So, I trusted my logical brain and just forced my body to fall in line with the plan, although it did protest nearly the entire time.

- In our different practice settings, we have long-term objectives where I think the same rules apply: be 100% committed to seeing things through and then execute the plan.

Have realistic expectations

- I knew I wasn't the most trained individual at the race and had no illusions about a competitive finish. My A goal was sub 30 hours if I could move well most of the day. B goal was finish under the time cutoff. C goal was to stay positive if A & B didn't work out. I met goal B and finished second to last (five runners finished last together). It was extremely helpful to be mentally OK with the outcome and not undermine my whole race chasing something I didn't earn in training.
- As pharmacists, that may mean flexibility in how we define success in our work. It could mean having a backup plan for when our ideals don't immediately come to fruition. We tend to be perfectionists, and in matters of patient safety, that is definitely appropriate. But aiming for perfection also has the potential to derail our loftiest goals. Instead, we can focus on the overall trend. If we are consistently putting in the work, eventually we'll get there.

Learn to love the process

- The finish line is great, but if I didn't love year-round training, there would be no end-of-race celebration. I've come to value and thrive on what's been described as "Type 2 fun" by adventurer Andrew Skurka. On the surface, that may sound like a clever euphemism for torture, but in my experience it's much more. It's hard work with a component of traditional fun followed by enduring memories and fulfillment.
- We can likewise value the hard work required to implement patient care initiatives and advance pharmacy practice as much as we value the actual outcomes we are working toward. Prioritizing "worthwhile" and "fulfilling" instead of "fun" or "enjoyable" creates a pharmacy practice environment that we can be proud even when the work is tough.

Find your meaning

- "Man is ready and willing to shoulder any suffering as soon and as long as he can see a meaning in it." -Viktor Frankl

I run ultras because I love exploring the outdoors. I relish long hours of training on trails. I value the friendships I've forged with other runners. There's no feeling like seeing my kids experience a secret backcountry spot for the first time. The challenge of pushing beyond my perceived limitations intrigues me. There's a lot about it that I enjoy, but I also feel a duty to embrace a certain amount of self-imposed struggle in my life knowing there are many who don't have the luxury of opting-out of their suffering.



- While finding meaning in our work is personal and multi-faceted, we all share a desire to improve outcomes in the patients we care for. The challenges in our work become easier to face knowing the burdens of our patients and their families: chronic illness, disability, grief, unexpected death, and the list goes on. All things that are a lot harder than running 100 miles. Assuring safe, appropriate use of medications to alleviate suffering of patients and their families is work worth doing day after day, year after year.

I-LEAD: ISHP's New Leadership Certification Program



A group of ISHP members have been working since January 2018 to create the **I-LEAD (Idaho Pharmacy Leadership Education, Advancement and Development)** program. The I-LEAD curriculum includes required guest speaker seminars, article and book discussions, projects, and rotations completed through ISHP committees. The completion of all required activities will result in a **leadership certificate** sponsored by ISHP. The inaugural class will kick-off the program at the upcoming ISHP Fall Meeting in Sun Valley.

The 2018-2019 I-LEAD Fellows include Lindsay Crawford, Heather Evans, Lindsey Hunt, Leslie LaMontagne, and Kris Lark. The I-LEAD inaugural class is comprised of individuals who are also currently serving on the I-LEAD Committee for development of the program. Also serving on the I-LEAD Committee are Rob Wills and Matt Dickinson, who will continue involvement in further development of this program throughout the next year.

Goals of the I-LEAD Program include:

- Provide cost-effective programming for pharmacy staff expressing interest in growing as a leader within their organization and within ISHP
- Encourage and provide resources for more pharmacists/technicians in Idaho to pursue local, regional, and national leadership opportunities
- Utilize novel technology platforms to encourage state-wide involvement in this leadership curriculum
- Promote diversity of applicant (community, hospital, managed care, academia, technicians, etc.) and seminar leaders (within and outside of pharmacy) to encourage unique learning and networking opportunities
- Establish a conduit for the development of knowledge base and consequential innovation to promote positive pharmacy organizational growth

Thank you!

Lindsay D. Crawford, PharmD, BCPS

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Legal and Public Affairs Update

Katie Erickson



The new Board of Pharmacy rules are in place as of July 1, 2018. The 6 short chapters make navigating pharmacy law a lot more straightforward. The Board's [website](#) is updated with each individual chapter along with links to statute chapters. Additionally, there is a searchable PDF of select state laws available for download: https://bop.idaho.gov/code_rules/2018-07-02_2018_IDBOP_LawBook.pdf.

You may have noticed the new licensure fee schedule and lack of controlled substance registration with this year's renewal cycle. The Board will transition most licenses to a birth month renewal model starting in April 2019. With the new laws in place, pharmacist CE requirements have changed to 15 hours of CE annually between January 1 and December 31. At least 12 of those hours must be from an ACPE accredited provider with up to 3 allowed from continuing medical education (CME). However, there are no requirements regarding number of live, law, or immunization credits. Keep an eye out for e-mails from the Board of Pharmacy as 2019 comes closer for important information on how your licensure will be transitioned.

The expanded pharmacist prescribing laws also went into effect July 1, 2018. Some of the community pharmacies who have spearheaded the delivery of these services are Broulim's, Albertsons and Rite-Aid. The new rules have generated a lot of positive press commending these pharmacies for increasing access to patient care. At the same time, there remains concern for the broader scope of practice. For those concerned, The Board reminds licensees that if an act is not expressly prohibited consider whether the act is within the licensee's education, training, experience and whether the act is within the accepted standard of care that would be provided in a similar setting by a pharmacist with similar education, training, and experience.

Lastly, the Idaho Board of Pharmacy was presented the Fred T. Mahaffey Award by the National Association of Boards of Pharmacy (NABP) for their work in transitioning the state practice rules to a standard of care model as well as expanding the roles of both pharmacists and pharmacy technicians. ISHP offers its congratulations to Alex Adams and the Board for their work and in receiving this award! Certainly, this is an exciting time to be a part of Idaho pharmacy practice.

Katie

From the ISHP Office - Executive Director's Message

Caroline Merritt

As summer draws to a close, we are focused on preparing for our **annual Fall meeting in Sun Valley**. The ISHP Education Committee has put together a great program with tracks for both pharmacists and technicians. Pharmacist programs include an Expanded Pharmacist Prescribing Workshop, Building a Well-Functioning Pharmacy Team, Suicide Prevention, and Preventing Burnout, among others. Technician programs include Opioid Crisis Update, Acute Pain Management, Advancing Technician Roles, Challenges of Naturopathic and Herbs, Preventing Burnout Workshop and others.





Registration is still open, so register today to ensure your spot. With the switch to our new continuing education platform, the World Continuing Education Alliance (WCEA), registration will be done through ISHP's website for the first time. Attendees will also need to register with WCEA to upload their CE to CPE Monitor after the meeting.

Don't forget to **reserve your room in ISHP's room block at the Sun Valley Resort.** Visit the ISHP website for the link to the room block.

It's also **membership renewal time** for the majority of our members. When you receive the reminder email, please make sure to log on to your membership profile on the ISHP website and renew. Renewing now will give you a full year of membership and provide you with discounted registration for the ISHP Fall Meeting, which will more than pay for your membership. You'll also receive additional discounts on drop-in education as well as other activities throughout the year.

Thanks for being a member of ISHP!

Caroline

And on the lighter side of pharmacy.....



A front-end clerk in a pharmacy has just been admonished by the owner for missing too many sales. "I'm sorry" the boss says "But one more missed sale and your fired"

The next customer that comes in has a terrible cough and asks the problem clerk for help. Unable to recall where the cough remedies are, the nervous clerk points to a box of Ex-Lax and says "Here, buy this then go over to our cooler and take all of it with plenty of water".

The customer thanks him and obliges. Finishing his last glass of water, the customer exits the pharmacy. Once outside he stops, takes a few faltering steps, then hugs a telephone pole. The boss, having witnessed the entire scene, approaches the clerk and asks him what he recommended.

"Ex-Lax," says the clerk hesitantly.

"Ex-Lax !" yells the boss. "That won't help a cough!"

"Sure it does," says the clerk. "Look,.. he's afraid to cough."

ISHP Annual Fall Meeting – September 28, 29 & 30, 2018

Don't miss out

Looking forward to seeing you in Sun Valley!



Pharmacist Track

Implementing Expanded Pharmacist Prescribing
Building a Well-Functioning Pharmacy Team
Suicide Prevention
Addressing Clinician Burnout
Acute Kidney Injury and Drug-Induced Renal Disease
Clostridium Difficile Update
COPD Update
New Drug Update
Idaho Pharmacy Law

Technician Track

Opioid Crisis Update
Acute Pain Management
Expansion of Pharmacy Technician Roles
Challenges of Naturopathic and Herbals
Infectious Disease Review
Preventing Burnout
Role in Preventing Drug Interactions
Pharmacy Calculations in Drug Preparation
Idaho Pharmacy Law

12 hours ACPE/Welcome **& MORE** Reception & Poster Session
Trivia Night/Networking/Exhibitor's Spotlight
A weekend away from work/Sun Valley activities
Fun and more fun!

