



Policies Approved by the ASHP House of Delegates

May 12-18, 2023

ashp

The House of Delegates

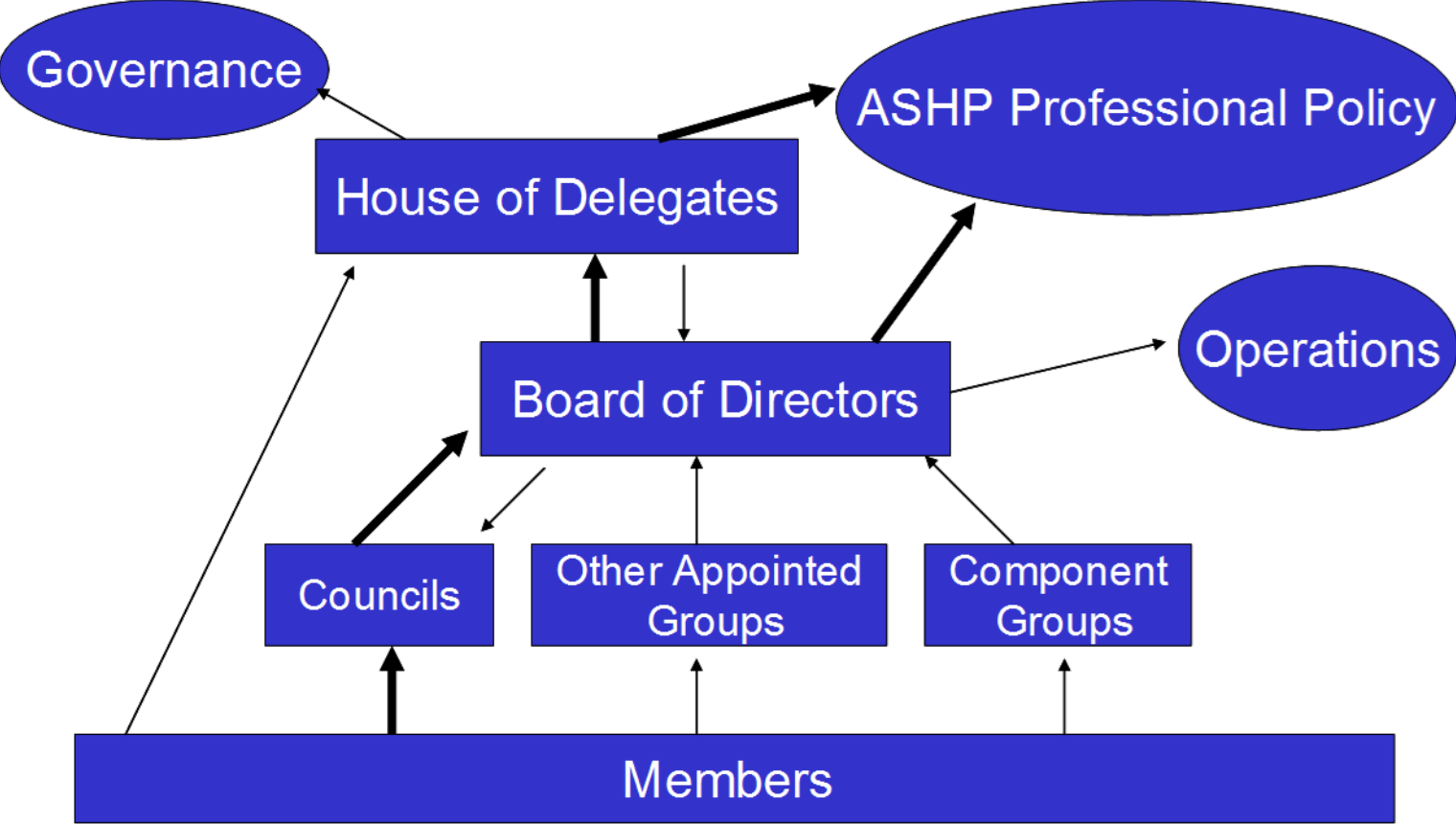


Ultimate authority over
ASHP professional policies

One annual session consisting of 2 in-person meetings at the June House of Delegates and 3 virtual meetings (March, May, and November)

- The House considers professional policy proposals that have been approved by the Board of Directors
- Most of these professional policy proposals are contained in reports from ASHP councils but may come from other component bodies, delegates, or ASHP members

ASHP Policy Process



May 2023 Virtual House of Delegates

Between May 12 and 18, the House of Delegates voted on 7 policy recommendations.

- The online voting process does not permit amendments.
- Delegates are encouraged to vote against recommendations they feel should be amended.
- $\geq 85\%$ votes needed for approval
- Policies not reaching that level of consensus will be considered by the House of Delegates in June

Results of May 2023 virtual House of Delegates

Delegates approved the following five recommendations by 85% or more, the threshold for final approval.

Two policy recommendations did not meet that threshold and will be slated for consideration at the June meeting of the House.

CPM: Payer-Directed Drug Distribution Models

To advocate that insurers and pharmacy benefit managers be prohibited from mandating drug distribution models that introduce patient safety and supply chain risks or limit patient choice.

Note: This policy supersedes ASHP policy 2248.

CPM: Use of Social Determinants of Health Data in Pharmacy Practice

To encourage the use of patient and community social determinants of health (SDoH) data in pharmacy practice to optimize patient care services, reduce healthcare disparities, and improve healthcare access and equity; further,

To educate the pharmacy workforce and learners about SDoH domains, including their impact on patient care delivery and health outcomes; further,

To encourage research to identify methods, use, and evaluation of SDoH data to positively influence key quality measures and patient outcomes.

Note: This policy supersedes ASHP policy 2249.

CPM: Pharmacy Accreditations, Certifications, and Licenses

To advocate that healthcare accreditation, certification, and licensing organizations adopt consistent standards for the medication-use process, based on established evidence-based principles of patient safety and quality of care; further,

To advocate that health-system administrators allocate the resources required to support medication-use compliance and regulatory demands.

Note: This policy supersedes ASHP policy 1810.

CPM: ASHP Statement on Leadership as a Professional Obligation

To approve the ASHP Statement on Leadership as a Professional Obligation.

Note: This statement supersedes the ASHP Statement on Leadership as a Professional Obligation dated June 12, 2011.

COT: ASHP Statement on Criteria for an Intermediate Category of Drugs

To discontinue the ASHP Statement on Criteria for an Intermediate Category of Drugs.

Results of May 2023 virtual House of Delegates

Delegates did not approve the following two recommendations by 85% or more, the threshold for final approval, and they will be slated for consideration at the June meeting of the House.

CPhP: Reducing Healthcare Sector Carbon Emissions to Promote Public Health

To promote reducing carbon emissions from the healthcare sector through collaboration with other stakeholders; further,

To encourage members of the pharmacy workforce to seek out opportunities to engage in efforts to reduce carbon emissions in their workplaces and communities.

SPE: ASHP Statement on Precepting as a Professional Obligation

To approve the ASHP Statement on Precepting as a Professional Obligation.