

ASCP FOUNDATION

AMERICAN SOCIETY OF CONSULTANT PHARMACISTS



25th Anniversary



2007 Annual Report



MISSION

The mission of the ASCP Foundation is to foster appropriate, effective, and safe medication use in older persons.

Message from the Chair of the Board of Trustees

I am honored to have served the first year of my term as chair of the ASCP Foundation Board of Trustees during 2007, the Foundation's 25th anniversary year. On April 2, 1982, the articles of incorporation creating the ASCP Foundation were signed. I was pleased to be affiliated with the Foundation in those early years and to work with a number of my colleagues to secure a generous grant from Sandoz Pharmaceuticals in 1989. It was a transformational event for the Foundation.

Over the years, the strategic direction of the Foundation has shifted with the evolving needs of its constituents. In 2007, we again re-examined our current and long-term strategy and role. Early in the year, members of the Board of Trustees, select ASCP members, and a number of leaders from several national aging organizations came together to formulate a new strategic plan for the Foundation. That two-day meeting laid the groundwork for a plan that will provide specific direction for the next three to five years. The Board officially adopted the new strategic plan in September.

The projections of a population explosion in the senior demographics over the next two decades urged us to examine the Foundation's role in educating consumers and caregivers about medication manage-

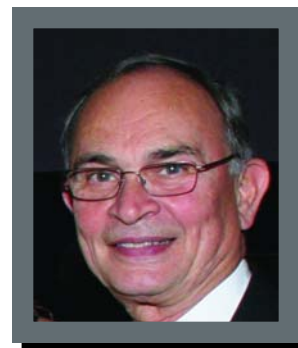
ment issues. To help with the development of this expanded program emphasis, Tom Clark agreed to join the Foundation's staff as Director of Clinical Affairs. Tom has extensive knowledge of many aspects of consultant pharmacy — as a clinician, as a policy expert, and as an advocate. In 2005, ASCP presented Tom with the George F. Archambault Award, its highest honor, as a result of his expertise on issues surrounding the Medicare Modernization Act of 2003 and Medicare Part D. One of his important tasks will be to help the Foundation cultivate its new strategic focus of bringing good medication management information and tools to older adults, caregivers, and the general public.

It is our pleasure to recognize and thank the generous individuals, organizations, and corporations that supported the ASCP Foundation during 2007 in this annual report. Your gifts are vital to our ability to continue to develop new programs and initiatives. We are most grateful for your support.

Twenty-five years after its inception, I am proud to still be so closely associated with the ASCP Foundation. I celebrate its many past achievements, and I am excited about the future.

Frank Cirillo

Frank Cirillo, RPh, FASCP
Chair, Board of Trustees



Report from the Executive Director

Our Values: Healthy Aging ~ Quality of Life & Care for Older Persons

For the ASCP Foundation, 2007 was a year for reflection and change. We recognized our silver anniversary and spent some time thinking about the past, how far we've come, and our direction for the future.

Early in 2007, a group of thought leaders from the ASCP Foundation, ASCP, and other aging organizations assembled to develop a three-year strategic plan. We began by asking ourselves difficult questions:

- What lessons have been learned from the past?
- How do we operate successfully in a changing environment?
- Is our current mission economically viable?
- What is our impact on our stakeholders and those we serve?

Interestingly enough, the consensus from the group was that our mission should not change. It would remain: **to foster appropriate, effective, and safe medication use in older persons**. However, during our deliberations it became apparent that our goals and strategies should take on a more "outward" focus in an effort to meet the needs in the community.

"The aging of the U.S. population is one of the major public health challenges we face in the 21st century."

Julie Louise Gerberding, MD, MPH
Director, Centers for Disease Control & Prevention
U.S. Department of Health & Human Services

The Perfect Storm

In the coming days, all signs point toward a convergence of factors that will forever change the way healthcare in this country is delivered.

Increasing Demand

According to the American Hospital Association, by 2030:

- More than six of every 10 older people will be managing more than one chronic condition.
- More than one out of every three older people — over 21 million — will be considered obese.
- One of every four older people — 14 million — will be living with diabetes.
- Nearly one out of every two older people — more than 26 million — will be living with arthritis.

Supply Shortage

In 2001, the Pharmacy Manpower Project convened a conference to project the workforce needs of pharmacy services. Their findings included some staggering predictions:

- While today there are 3.1 billion prescriptions filled per year, that number is anticipated to be 7.2 billion by 2020, with older adults filling three times as many prescriptions as the rest of the population.
- By 2020, a shortage of 157,000 pharmacists is predicted.

The increasing need for services and the shortage in the pharmacist supply, combined

with a very complex health care system, make senior care pharmacists an invaluable part of quality care delivery.

Addressing the Need

Can the ASCP Foundation play a part in meeting the needs of our changing world? What impact can we really have?

The Foundation's Board of Trustees affirmed these goals:

- Research — results that enhance geriatric pharmacotherapy and advance senior care pharmacy practice
- Education — programs, tools and resources that generate better medication management and improved health outcomes for older persons
- Visibility — leading authority providing reliable and unbiased information on appropriate, effective and safe medication use in older persons
- Capacity Building — robust, viable, self-sustaining organization

Now, how do we translate these goals into meaningful actions with measurable outcomes? Strategic planning alone is not sufficient. We must engage in strategic "positioning" and engage in a systematic process to create brand identity. By analyzing the gap between need and opportunity, we could emerge as the leading authority for geriatric pharmacotherapy.

Dramatic Results

According to the Kaiser Family Foundation, the top ten drugs prescribed range in annual price from \$690 to \$1,542. The average copayment for these drugs is \$20. Currently, 40% of community-dwelling seniors take five or more medications a week.

What would happen if a senior care pharmacist got involved with older people and could

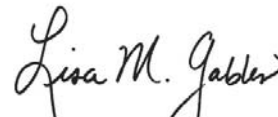
work with the care team to reduce the number of medications prescribed by just ONE?

Result — a \$280 million reduction in annual copayments; \$9.7 - \$21.6 billion in annual drug cost savings.

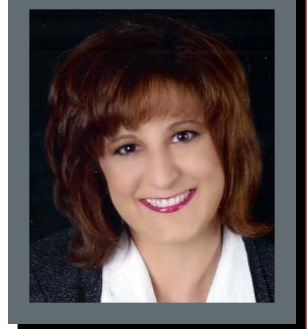
On the health outcome side of the equation, what would happen if quality of life increased for seniors as well as longevity? Rather than adding three to four years per generation, what if three to four GOOD and healthful years were added?

The ASCP Foundation's vision is optimal medication management and improved health outcomes for older persons.

The helpful and healing value of medications for seniors is well established. But fragmentation in the delivery of care is also well known. Finding ways to provide impeccable information at the time of critical need is one of our challenges for the future. The Foundation has experience and skill in providing information to consultant pharmacists to help with the care of older adults. A next step is likely to be translating that knowledge for consumer audiences and communicating directly with them. It's not hard to see that there is an urgent need for public awareness and outreach about medications and how they affect older people. The ASCP Foundation seeks to help lead the way to bring ASCP and its network of over 6,000 consultant pharmacists to the forefront of our aging population. Perhaps, that is the best tribute to the last 25 years.



Lisa M. Gables, CPA
Executive Director



Board of Trustees

The ASCP Foundation is proud to recognize the distinguished members of its 2007 Board of Trustees. Nine elected trustees bring to the Board expertise and perspective from a variety of disciplines, including geriatric medicine, gerontology, health policy, research, health communications, community-based services, and long-term care. Seven designated trustees from the ASCP leadership also serve on the Board of Trustees — the ASCP President, President-elect, Immediate Past President, Treasurer, and Executive Director; and a representative from the Board of Directors and the Council of Presidents.

Elected Trustees

Frank Cirillo, RPh, FASCP, *Chair*
Pharmacy Affairs, Inc.
Whitehouse Station, New Jersey

John F. Derr, RPh
Chief Information Officer
Golden Living
Fort Smith, Arkansas

Joan Hyde, PhD
Chief Executive Officer
Ivy Hall Senior Living
Boston, Massachusetts

Sandra Rawlins Johnson, LCSW
Executive Director
North Shore Senior Center
Northfield, Illinois

Nancy L. Losben, RPh, CCP, FASCP, CG, *Vice Chair*
Chief Quality Officer
Omnicare, Inc.
Cherry Hill, New Jersey

Edward McMahon, PhD
National Director of Alzheimer's Care
and Quality of Life
Golden Living
Cedar Crest, New Mexico

Sandra L. Panther, CFRE
Former Executive Director
American Academy of Family
Physicians Foundation
Shawnee, Kansas

Albert Riddle, MD, CMD
President & CEO
Riddle Medical Group, PLLC
Haworth, New Jersey

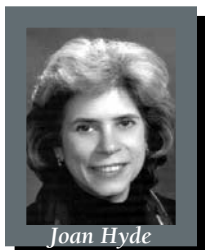
Goldie W. Rivkin
Principal Consultant
Rivkin Associates
Bethesda, Maryland



Frank Cirillo



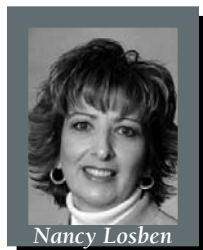
John Derr



Joan Hyde



Sandra Johnson



Nancy Losben



Edward McMahon



Sandra Panther



Goldie Rivkin

Designated Trustees

John Feather, PhD
Executive Director and CEO
American Society of Consultant Pharmacists
Alexandria, Virginia



Joseph J. Gruber, RPh, FASCP, CGP
Director, Medication Therapy
Management Services
Omnicare, Inc.
Edwardsville, Illinois



David W. Kazarian, RPh, FASCP
Infuserve America
St. Petersburg, Florida



Michael B. List, PharmD, FASCP, CGP
Director of Pharmacy Services
Neil Medical Group
Huntersville, North Carolina



Lee Meyer, PharmD, FASCP, CGP
Director of Pharmacy Services
Golden Living
Irvine, California

Robert J. Miller, RPh, FASCP
RJM Consultants
Youngstown, New York



Robert R. Warnock, DPh, FASCP, CGP, *Treasurer*
Senior Director of Pharmacy Services
Golden Living
Conyers, Georgia

Michael List, Robert Miller, and Robert Warnock completed their terms on the Board of Trustees in November 2007. The following individuals from the ASCP leadership joined the Board at that time.

Albert Barber, PharmD, CGP, FASCP
Golden Living
Stow, Ohio

Judith L. Beizer, PharmD, CGP
St. John's University
Jamaica, New York

Ross Brickley, RPh, CGP, FASCP
Continuing Care Rx
Raleigh, North Carolina

Pharmacotherapy Traineeships

The ASCP Foundation's new strategic plan includes the following educational objectives:

- Create educational resources that foster the advancement of consultant and senior care pharmacy practice
- Design, coordinate, and conduct educational programs and initiatives that enhance appropriate, effective, and safe medication use in the senior population



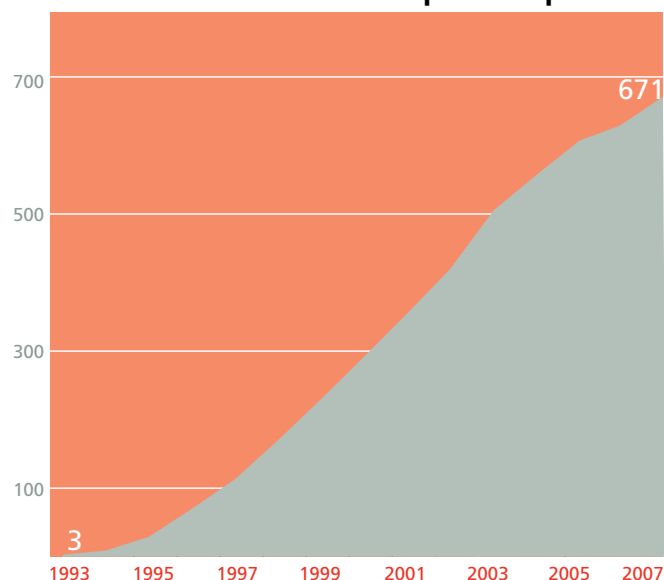
To help meet its educational goals, the ASCP Foundation conducts post-graduate pharmacotherapy traineeships to create experts in specific therapeutic areas and prepare them to provide a high level of pharmaceutical care to their patients.

The ASCP Foundation's pharmacotherapy traineeships are five-day, experiential, patient-focused educational programs at clinical practice sites. They are designed to empower participants to change the way they perceive their role in patient care and create advocates for appropriate care and treatment of their patients. Participants typically describe the week spent at a traineeship session as inspiring, practice altering, and the best investment of time in their entire career.

During a pharmacotherapy traineeship, participants work with interdisciplinary teams of physicians, nurses, pharmacists, other allied health professionals, caregivers, and patients and their family members. During a traineeship session, participants are involved in direct patient care, contribute to the development of treatment plans, and provide input into problem identification and resolution.

Since 1993, the Foundation has conducted more than 110 traineeship sessions focusing on a variety of diseases and conditions. During 2007, 42 participants successfully completed one of four traineeships offered. The cumulative total of pharmacists and other healthcare professionals trained now exceeds 670.

Cumulative Traineeship Participants



2007 Annual Report					
		Alzheimer's/Dementia Traineeship	Interdisciplinary GeroPsych/Behavioral Disorders Traineeship	Pain Management Traineeship	Parkinson's Disease Traineeship
Sponsors	Forest Laboratories New York, New York	Forest Laboratories New York, New York Ortho-McNeil Janssen Scientific Affairs, LLC Raritan, New Jersey	Mallinckrodt Pharmaceuticals/ Covidien St. Louis, Missouri	Teva Neuroscience Kansas City, Missouri	
Sites	Mood and Memory Clinic of Michigan Ann Arbor, Michigan Oakwood Nursing Homes Dearborn, Michigan	McLean Hospital Boston, Massachusetts	Heartland of Mentor Mentor, Ohio Hospice of the Western Reserve Cleveland, Ohio	Parkinson's Disease and Movement Disorders Center, Northwestern University Chicago, Illinois	
Preceptors	Stephen Aronson, MD Richard Berchou, PharmD Manuel Dumlao, MD	Donald Davidoff, PhD Stephen Feldman, RPh	Albert Barber, PharmD, CGP Janice Scheufler, PharmD	Diane Breslow, MSW, LCSW Tanya Simuni, MD	
Participants	4 in 2007 64 since 1998	17 in 2007 36 since 2003	13 in 2007 77 since 2001	8 in 2007 97 since 1993	
	<i>"I left the traineeship knowing so much more about Alzheimer's and dementia than I ever thought possible." 2007 Alzheimer's/ Dementia Traineeship Participant</i>	<i>"The ASCP Foundation and the sponsors of the Interdisciplinary GeroPsych/Behavioral Disorders Traineeship should be commended for providing one of the few in-depth opportunities for instruction in this field." 2007 Interdisciplinary GeroPsych/Behavioral Disorders Traineeship Participant</i>	<i>"I highly recommend this program to any pharmacist who has the opportunity to influence how chronic pain is managed in any practice setting." 2007 Pain Management Traineeship Participant</i>	<i>"The week spent at the Parkinson's Disease Traineeship was a fabulous learning experience. Every pharmacist should aspire to achieve this level of competency." 2007 Parkinson's Disease Traineeship Participant</i>	

2007 ASCP Foundation Pharmacotherapy Traineeship Participants

Alzheimer's/Dementia Traineeship

Lori M. Cowart, RPh, CGP
Kroger Health Solutions Pharmacy
Cumming, Georgia

Jutta C. Joseph, PharmD
VA Medical Center - Seattle Division
Renton, Washington

Ann Garnett, BPharm, RPh, RPEBC
Medical Pharmacies Group Inc.
Don Mills, Ontario, Canada

Charlie Waters, PharmD
VA Connecticut Healthcare System
New Haven, Connecticut



Parkinson's Disease Traineeship

Katherine J. Anderson, PharmD
PharMerica
Salt Lake City, Utah

Wayne A. Dutch, PharmD
RxCare Professional Services, LLC
Merrimack, New Hampshire

June A. Griffith, PharmD, CGP
Shands Jacksonville Medical Center
Jacksonville, Florida

William D. Meyers, RPh
Federal Correctional Institute, Memphis
U.S. Bureau of Prisons
Cordova, Tennessee



Joy H. Higa, PharmD, CGP
Long Term Care Research Center
Kaneohe, Hawaii

Olga Hilas, PharmD, BCPS, CGP
St. John's University
Brooklyn, New York

John G. McGilvray, PharmD, CGP, BCPS
Alaska Native Medical Center
Palmer, Alaska

Stephanie J. Spence, PharmD
2007-08 ASCP Executive Resident
Alexandria, Virginia



Pain Management Traineeship

Zemzem Adem, PharmD
Inova Alexandria Hospital
Annandale, Virginia

Gail Bosch, RPh, CGP
Hospice of Kitsap County
Bremerton, Washington

Julie Caler, PharmD
University of Maryland
School of Pharmacy
Cockeysville, Maryland

Ursula Hahn, PharmD
Bay Pines VA Healthcare System
St. Petersburg, Florida

Keylow King, PharmD
Tampa General Hospital
Tampa, Florida

Jonalan D. Smith, PharmD
2006-07 ASCP Executive Resident
Alexandria, Virginia

Andreja Zebic, PharmD
Hotel-Dieu Grace Hospital
Windsor, Ontario, Canada



Thomas Gregory, PharmD, BCPS, CGP
Truman Medical Center - Hospital Hill
Independence, Missouri

Jill Johnson, PharmD, CGP, BCPS
VA Medical Center
Lexington, Kentucky

Ron Kozak, BScPharm
Brandon Regional Health Authority
Brandon, Manitoba, Canada

Ning-Tsu Kuo, PharmD, PhD
Cleveland Clinic Homecare Infusion Pharmacy
Moreland Hills, Ohio



Cathy Ramey, RPh, CGP
Freedom Pharmacy
Indianapolis, Indiana

Rob Shulman, RPh
Health One Pharmacy
Mentor, Ohio

2007 ASCP Foundation Pharmacotherapy Traineeship Participants

Interdisciplinary GeroPsych/Behavioral Disorders Traineeship

Charlotte Breeden, RPh
and
Sharon Gee, RN, CNP
Total Community Care
Albuquerque, New Mexico

Rick Foley, PharmD, CPh, CGP
American Pharmaceutical Services,
an Omnicare Company
Sorrento, Florida
and
Marsha K. Rauch, PhD, ARNP-BC
Florida Facilitists, LLC
Longwood, Florida

Samantha P. Jellinek, PharmD, BCPS
and
Debra Barnett, MSN, GNP
Maimonides Medical Center
Brooklyn, New York

Sara Lummus, PharmD, CGP, FASCP
and
Tonia L. Marine, MN, RN, FNP
Baptist Memorials Health Care Services
San Angelo, Texas

Amy Tarnowski, PharmD
and
Rhonda Maurer, RN, MSN, FNP
Kerrville VA Medical Center
Kerrville, Texas



Sue Bikkie, MSN, APRN, BC
Allina Hospitals & Clinics
Fridley, Minnesota

Carrie Burke, RPh
Omnicare, Inc.
Boxford, Massachusetts
and
Ronald Rosen, MD
North Shore Medical Center
Salem, Massachusetts

Lee W. Gerber, RPh, CGP
and
Suzanne Meeker, MA, ARNP-PMH
Senior Care Pharmacy
Wichita, Kansas

Brian O'Neil, RPh, FASCP
Kindred Pharmacy Services/PharMerica
Chicopee, Massachusetts
and
Kathryn E. Harden, RN, ANP, GNP, BC
Fallon Spencer Internal Medicine
Spencer, Massachusetts

Advanced Workshop on Parkinson's Disease Pharmacotherapy

The ASCP Foundation developed an advanced workshop on Parkinson's disease exclusively for alumni of the Foundation's Parkinson's Disease Pharmacotherapy Traineeship. The three-hour workshop — conducted November 13, immediately preceding ASCP's 38th Annual Meeting in Philadelphia, Pennsylvania — provided an update on pharmacotherapy for Parkinson's disease, including medications in development, discussion of cases provided by the faculty and the workshop attendees, and a dialogue on collaborative working relationships between pharmacists and physicians for the care of patients with Parkinson's disease.

In addition to the program materials, attendees received the latest reading materials and resources from the Parkinson's Disease Pharmacotherapy Traineeship. The workshop was supported by an educational grant from

Comments from Workshop Participants

“The workshop helped re-energize my interest in community commitment and provided an opportunity to interact with others with similar experience in the field.”

“The program was outstanding.”

“Thank you for providing this educational opportunity and the support needed to provide a service that is often not accepted well in the medical community, but is needed so very much.”

Workshop Faculty

Jack J. Chen, PharmD, BCPS, CGP
Associate Professor (Neurology)
Loma Linda University School of Pharmacy
Clinical Pharmacologist/Faculty in Residence
Movement Disorders Center, Department of Neurology
Loma Linda University School of Medicine
Loma Linda, California

David M. Swope, MD
Associate Professor of Neurology
Director, Neurology Research Center
Loma Linda University School of Medicine
Loma Linda, California

Prescription Labeling Guidelines for People with Vision Loss

To help the 20 million people with vision loss properly identify prescription medications, the ASCP Foundation joined forces with the American Foundation for the Blind (AFB) to develop "Guidelines for Prescription Labeling and Consumer Medication Information for Persons with Vision Loss." The guidelines will provide pharmacists and pharmacies with specific recommendations for making important medication information accessible to patients with vision loss and will serve as a resource for persons with vision loss and organizations serving this population.

Access to prescription information, including drug labels and usage instructions, is essential for the correct taking of medication. For individuals with vision loss, not being able to read this information is a particularly dangerous problem. Currently, people with vision loss must rely on memory, use compensatory strategies or devices, or depend on someone else for help. As a result, many people with vision loss and older adults with reduced visual acuity are unable to access important instructions for use and safety information from prescription labels and consumer medication information (CMI).

"The lack of accessible prescription and over-the-counter medication label information

poses a serious public health threat due to the potential misidentification and misuse of drugs," said Judy Scott, Director of the AFB Center on Vision Loss. "These guidelines will allow consumers with vision loss ready access to the vital information on medication labeling, enabling them to take medications safely, effectively, and independently."

There are currently no requirements for the format of information on prescription labels, and existing formatting requirements for CMI are inadequate for persons with vision loss. To address this problem, the ASCP Foundation and AFB convened an advisory board — comprised of individuals from vision loss organizations, government, pharmacy, and pharmacy system vendors — to identify components of the guidelines and specific format recommendations.

"These guidelines will allow consumers with vision loss ready access to the vital information on medication labeling, enabling them to take medications safely, effectively, and independently."

Judy Scott
Director, Center on Vision Loss
American Foundation for the Blind

Pharmacists and pharmacies have an important role to play in directing their patients with vision loss to rehabilitation services, assistive technology, and other resources. In addition to specific format recommendations

for prescription labeling and CMI, the guidelines will contain general recommendations for prescription labels, consumer medication information, and distinguishing among prescription containers; and descriptions of assistive technology and modalities and links to

companies that provide these products. The guidelines also will provide suggestions for making information accessible to people for whom larger print is not useful and general information on resources and services that pharmacists and pharmacies can share with their patients with vision loss. The guidelines will be available on the ASCP Foundation's Web site (www.ascpfoundation.org) in early 2008.

The Prescription Labeling Guidelines project was funded by the American Foundation for the Blind, American Society of Consultant Pharmacists Foundation, and a vendor contract from Pfizer Inc.

In March 2007, ASCP Foundation Research Director Janice L. Feinberg, PharmD, JD, presented the draft guidelines at AFB's Josephine L. Taylor Leadership Institute in Dallas, Texas. The purpose of the Josephine L. Taylor Leadership Institute (JTLTI) is to improve the quality of programming and services to blind and visually impaired children, adults, and their families; and provide a forum in which leadership personnel and emerging leaders from the blindness field can come together to increase and share their knowledge and expertise.

Dr. Feinberg also was invited to participate on an expert panel concerning accessibility of prescription drug information to the blind and visually impaired. The meeting, convened by the National Institute on Disability and Rehabilitation Research (NIDRR) and the U.S. Department of Health and Human Services, was held September 19, 2007, in Alexandria, Virginia. Dr. Feinberg's participation on the expert panel grew out of the ASCP Foundation's collaboration with AFB to develop the prescription labeling guidelines, which were part of the background information provided to the panel participants.

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) required that the Secretary of Health and Human Services undertake a study on how to make prescription pharmaceutical information, including drug labels and usage instructions, accessible to blind and visually impaired individuals. The legislation required that the study "include a review of existing and emerging technologies, including assistive technology, that makes essential information on the content and prescribed use of pharmaceutical medicines available in a usable format for blind and visually impaired individuals." This task was given to the Food and Drug Administration (FDA). The 2004 FDA study — which included a review of the published literature, call for comments from a 30-day public docket, and consultation with other federal agencies and technology manufacturers — found that a significant number of blind and visually impaired individuals were not using assistive technology to access prescription drug label and usage information because they were unaware of its availability, or it was not effective or practical to meet their particular needs.

NIDRR was asked to convene a meeting of experts and key stakeholders in eye health, assistive technology, and pharmacology to address the issues raised in the FDA study; the meeting was held March 22, 2006. The September 19, 2007, expert panel was convened to develop a federal research agenda that addresses the use of assistive technologies and modalities to make prescription drug information accessible to individuals who are blind or visually impaired.

The American Foundation for the Blind is a national nonprofit organization that expands possibilities for people with vision loss. AFB's priorities include broadening access to technology, elevating the quality of information

and tools for the professionals who serve people with vision loss, and promoting independent and healthy living for people with vision loss by providing them and their families with relevant and timely resources. AFB's Web site for seniors (<http://www.afb.org/seniorsitehome.asp>) provides information on vision loss, videos, personal stories, an online community, and links to helpful resources that can be searched by category and state.

In 2007, AFB embarked on the Rx Label Enable campaign (www.afb.org/labels) to

ensure that people with vision loss have ready access to the vital information available to all consumers via prescription labeling and consumer medication information, enabling them to take medications safely, effectively, and independently. AFB is reaching out to all stakeholders — including consumers experiencing vision loss, policymakers, federal regulators, physicians, the pharmaceutical industry, retailers, assistive technology providers, and public and private insurers — to promote solutions, build consensus, and take action.

Guidelines for Prescription Labeling and Consumer Medication Information for Persons with Vision Loss Advisory Board

Sherrie Borden
Columbia Lighthouse for the Blind
Washington, DC

John Crews, DPA
Centers for Disease Control and Prevention
Atlanta, Georgia

Janice L. Feinberg, PharmD, JD
ASCP Foundation
Chicago, Illinois

Arlene Flynn, RPh, PhD
American Association of Colleges of
Pharmacy
Alexandria, Virginia

Bruce Gaynes, OD, PharmD
Department of Ophthalmology
Rush Medical College
Chicago, Illinois

James Hancock, RPh
QS/1 Data Systems
Indianapolis, Indiana

Rosemary Janiszewski, MS, CHES
National Eye Institute
Bethesda, Maryland

Priscilla Rogers
American Foundation for the Blind
Dallas, Texas

Gary J. Schoettmer, RPh
RNA Health Information Systems
Englewood, Ohio

Judy Scott
American Foundation for the Blind
Dallas, Texas

April M. Shaughnessy, RPh, CAE
American Pharmacists Association
Washington, DC

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Janice L. Feinberg, PharmD, JD
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James Hancock, RPh
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Gary J. Schoettmer, RPh
RNA Health Information Systems
Englewood, Ohio

Judy Scott
American Foundation for the Blind
Dallas, Texas

April M. Shaughnessy, RPh, CAE
American Pharmacists Association
Washington, DC

2007 Practice Innovation Award

In an effort to promote excellence in senior care pharmacy, the ASCP Foundation developed the Practice Innovation Award in 2007. The award recognizes the accomplishments of individuals and organizations that demonstrate innovation in senior care pharmacy. The goals of the Practice Innovation Award are to:

- Highlight successful innovative practice models that demonstrate improvements in patient safety, quality of care, medication therapy management, collaborative practice, or service delivery
- Disseminate the results of these innovative practice models in order to foster replication or adaptation in other settings

Katherine J. Anderson, PharmD, CGP, was the recipient of the 2007 Practice Innovation Award for development of "Medi-Cog," an assessment tool that identifies patients at risk for medication mismanagement by evaluating for cognitive decline and skills in filling a pillbox.

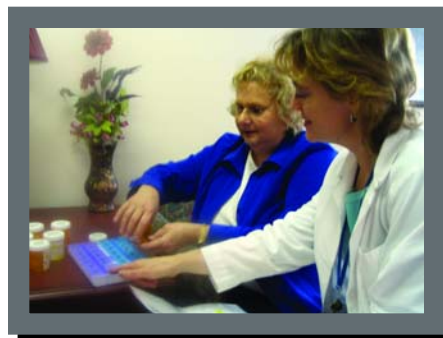


Katherine Anderson

In order to address the problem of unidentified cognitive deficit and provide measurable outcomes on accuracy in filling a pillbox, the Medi-Cog was developed and evaluated in a pilot study under the preceptorship of Sandra Jue, PharmD, at the Boise Veteran's Administration Medical Center. The Medi-Cog combines two instruments:

- The Mini-Cog, a three-minute instrument — developed by Soo Borson, MD, and colleagues at the Alzheimer's Disease Research Center, University of Washington, Seattle — to screen for cognitive impairment in older adults
- The Medication Transfer Screen (MTS), which was developed for the pilot study and designed to determine a person's ability to read prescription labels and decipher how medication should be loaded in a pillbox

The ASCP Foundation Practice Innovation Award, which includes a recognition plaque and \$5,000 cash prize, was presented to Dr. Anderson during the opening general session of *Senior Care Pharmacy '07*, ASCP's 38th Annual Meeting and Exhibition, in Philadelphia, Pennsylvania. Dr. Anderson also presented a poster and contributed paper at the annual meeting on the development and implementation of the Medi-Cog and participated in the "This Works for Me" roundtable session. A complete description of the program will be published on the ASCP Foundation Web site. The Practice Innovation Award is sponsored by sanofi-aventis.



**Practice Innovation Award
Planning Committee**

Andrea C. Bussey, PharmD, CGP
Pharmacotherapy for Seniors, Inc.
North Augusta, South Carolina

Marie Gardner Zoellner, PharmD, BCPP, CGP
Oconee Memorial Hospital
Seneca, South Carolina

Joanne Hirshfield
Pharmacy Solutions, Inc.
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2007 Presentations

February 15, 2007

Health Disparities Week

Northwestern University Feinberg School of Medicine
Chicago, Illinois

Aging as an Obstacle to Care: Disparities in Geriatrics

Janice L. Feinberg, PharmD, JD

March 8, 2007

American Society on Aging/National Council on Aging Joint Conference
Chicago, Illinois

Critical Issues in Aging Program

Medicines & Aging: New Thinking, Not Rethinking

Janice L. Feinberg, PharmD, JD, Coordinator and Moderator

March 8, 2007

American Society on Aging/National Council on Aging Joint Conference
Chicago, Illinois

Medicines & Aging Core Curriculum

Identifying and Preventing Medication-Related Problems in Older Adults

Janice L. Feinberg, PharmD, JD

March 9, 2007

American Society on Aging/National Council on Aging Joint Conference
Chicago, Illinois

Adult Medication: Improving Medication Adherence in Older Adults

Janice L. Feinberg, PharmD, JD

March 24, 2007

American Foundation for the Blind
Josephine L. Taylor Leadership Institute
Dallas, Texas

*Guidelines for Prescription Labeling and Consumer Medication Information
for Persons with Vision Loss*

Janice L. Feinberg, PharmD, JD

October 5, 2007

Illinois Pharmacists Association Annual Conference
St. Charles, Illinois

Adult Medication: Improving Medication Adherence in Older Adults

Janice L. Feinberg, PharmD, JD

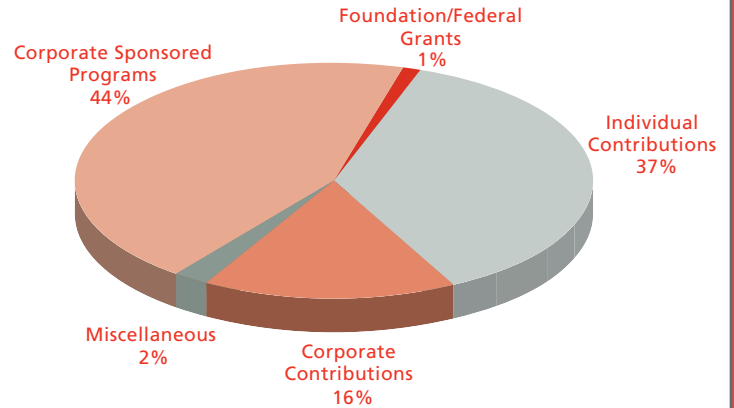


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Operating revenue for the ASCP Foundation totaled \$799,988 in 2007. The ASCP Foundation's net assets over the past several years has shown a steady increase. The net asset balance at the end of 2007 is \$1,994,156.

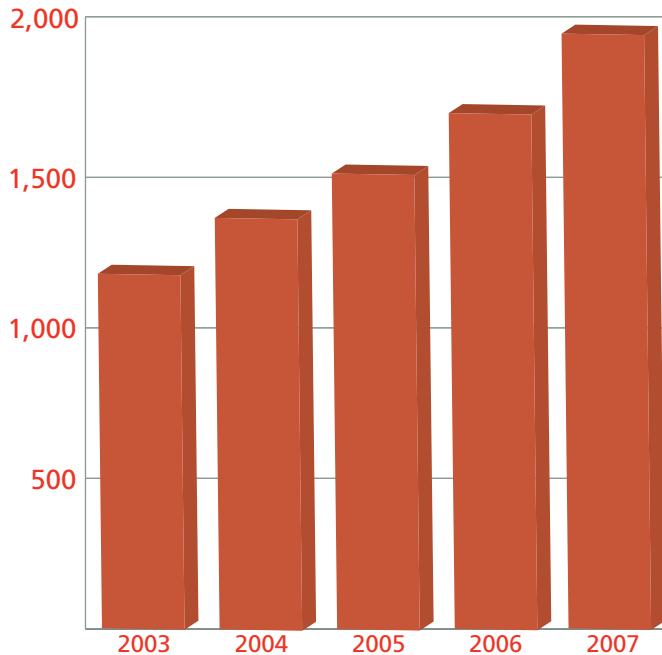
The operating revenue includes contributions from ASCP, its chapters and affiliated organizations, ASCP members, other individuals, and corporations; grants from private foundations and corporate partners; and product sales. It does not include gifts to the Tim Webster Endowment.

2007 Sources of Revenue



Individual contributions accounted for 37% of the operating revenue. Corporate contributions accounted for 16%, and corporate grants to support ASCP Foundation programs accounted for 44% of the total. Grants from private foundations and federal programs provided 1% of the total revenue. An additional 2% was derived from other miscellaneous sources.

Net Assets
(in thousands)



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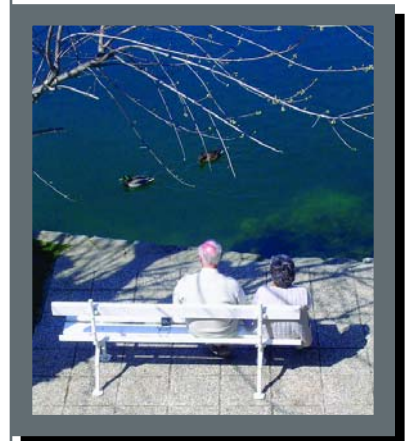
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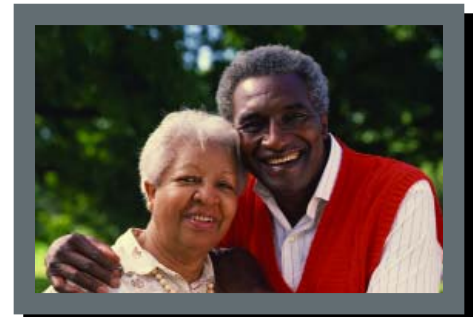
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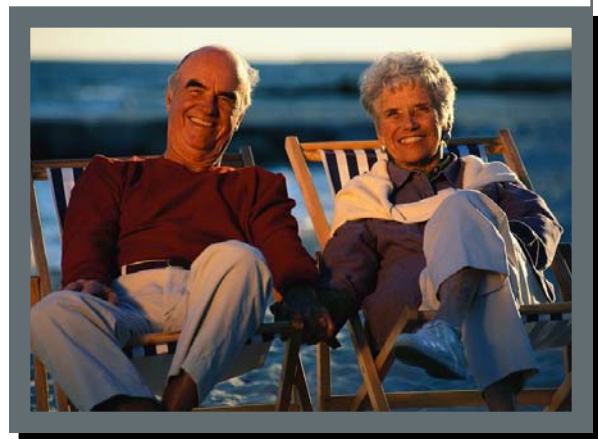
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The Tim Webster Endowment

The Goal: \$3,000,000 . . . The Value: Priceless

The ASCP Foundation's endowment is named in honor of Tim Webster, who served as ASCP's Executive Director for more than two decades. Tim provided the vision and leadership that guided the Society from its formative years into the 21st century and established ASCP as the preeminent organization in senior care pharmacy.

Tim was instrumental in creating the ASCP Foundation. He recognized the real need for its RESEARCH initiatives, unique EDUCATIONAL programs, PRACTICE development activities, and VISIBILITY efforts to ensure it can continue to meet the evolving needs of senior care and consultant pharmacists and the demands of the growing aging population they serve.

The Need is Real . . . The Time is Now . . . Invest in Your Future

To create a future for senior care and consultant pharmacists, the ASCP Foundation has begun a systematic, comprehensive campaign to acquire the gift support needed to build an endowment. The Tim Webster Endowment will provide the continued stability, financial security, strength, and flexibility the Foundation needs to remain on the leading edge of innovation.

Your investment in the Endowment will:

- Fund research
- Develop new educational programs
- Promote the value of senior care and consultant pharmacy services
- Enable continued innovation

The Endowment funds are wisely invested to guard the principal while generating an annual revenue stream to support these important initiatives.

Your Gift . . . You Choose

The ASCP Foundation will accept gifts of any amount in the form of cash, securities, and a number of planned giving options. Gifts of \$25,000 or more offer donors special recognition and naming opportunities.

Please contact the ASCP Foundation at foundation@ascp.com or 703-739-1316, extension 107, so we may work with you and your attorney or financial advisor to identify the method of giving that works best for you.

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