EAHP is delighted to have secured the participation of Dr. Marianne Ivey, Associate Professor in Pharmacy Practice the University of Cincinnati, Ohio, as the first of three keynote speakers at our 18th Congress in Paris, 13-15 March 2013.

Dr. Ivey teaches and consults in the areas of pharmacy leadership, strategic planning and clinical services, and operations management. A former President of the American Society of Health System Pharmacists, in 2011 Dr. Ivey was presented with the International Pharmaceutical Federation (FIP) award for distinguished practice.

Below, we speak with Dr. Ivey about the themes of her keynote speech, and why these are relevant and of note to the debates and challenges within hospital pharmacy today.

Why were you interested in speaking at the 18th Congress of the EAHP?

I am excited about speaking at the 18th Congress of EAHP because in my previous attendance at EAHP Congresses I have seen that the leaders in hospital throughout Europe attend the congresses.

The presentations lead to discussions that are highly relevant to best practices all over the world.

You will be speaking about the hospital pharmacist’s impact on patient care, and in particular the challenges of achieving inter-professional care. What brings you to this subject and why do you feel it is important?

I started my career as a pharmacist on an interdisciplinary internal medicine team. I brought information on medications to the physicians and nurses on the team and also to the patient. It was often interesting that while the patient welcomed the information we brought them about the medications they were taking in the hospital and were going to take when they were discharged back to their homes, the physicians and sometimes the nurses were reluctant to listen to me.

I took it as a personal challenge to provide the very best in pharmacy care and information that I could so that I couldn’t be ignored. I have learned that there are ways to deliver information that is more readily accepted than if delivered without thought. The ways include developing a relationship of trust and respect, being emotionally intelligent and being at the
right place at the right time with information that is truly helpful.

This is opposed to being available only during some times, and providing information in a policeman-like fashion that tells the doctor and nurse what they can't do as opposed to alternative, more beneficial ways to do something.

What have been the main changes in approaches to multi-disciplinary cooperation that you have observed in your time in practice, and can you briefly say something about where you think these trends may lead next?

Much of today's education of health care professionals recognizes the contributions made by different disciplines who have different perspectives and knowledge to apply to the problem being considered. Today's leaders of hospitals have also generally had training that includes discussing the benefits of a diverse approach to care. Many have had training that includes case studies in other disciplines such as air travel safety and space exploration. These case studies demonstrate that not listening to all the team members has had disastrous results of morbidity and mortality very similar to what can happen in health care delivery. Hospital leaders and accrediting organizations now often require teamwork in order to get full reimbursement for the services that they have provided.

There are also activities in delivering patient care where student pharmacists work with student physicians, nurses, dieticians, physical therapists and social workers as we do in the college of pharmacy where I teach. Guided discussion by faculty and students in interprofessional settings help the students to understand how to improve collaboration and how care is improved because of the collaboration among disciplines. These interprofessional activities help the disciplines understand what each can provide while they are a student. It is easier, then, to carry these behaviors into practice after the various disciplines have graduated.

Finally, as someone who has attended and participated in the EAHP Congress before, is there anything you would say to those hospital pharmacists who are perhaps considering coming for the first time?

The EAHP congresses are thoughtfully planned to be relevant to the practice of today's hospital pharmacists. The meetings provide challenges and stimulation to deliver better care through presentations of examples from leading practitioners in Europe and elsewhere.

The time spent together during breaks, looking at the exhibitors booths and in sharing social time together is a way to get new ideas in a refreshing change of pace from our everyday work life.

Finally the opportunity for experienced pharmacists to share their knowledge and enthusiasm with younger practitioners is a great way to increase involvement in hospital pharmacy organisations such as EAHP.

More information about Dr. Marianne Ivey's keynote speech is available here.[2]

3 January 2013

Links:
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