2012-2019 STRATEGIC PLAN
(Updated April 2019)

INTRODUCTION

The Michigan Pharmacists Association (MPA) is a nonprofit corporation organized in 1883, incorporated under the provisions of Act 327 of the Public Acts of 1931, as amended. MPA is the state professional society of pharmacists and other pharmacy professionals, representing the pharmacy profession in Michigan, united for the common good to advance public health, patient care, and the profession. The Association’s members include pharmacists from all practice settings, student pharmacists, pharmacy technicians, and associate members.

MPA is governed by a 16-member Executive Board. Its House of Delegates serves as the legislative division to interpret the objectives of the Association as stated in the Bylaws (see below) and to serve as the policy-forming body. Additionally, a unique feature of MPA’s structure is its practice sections. MPA provides its members with connections to other pharmacy professionals in their work environment through practice sections (i.e., Consultant and Specialty Pharmacists of Michigan, Michigan Society of Community Pharmacists and Michigan Society of Health-system Pharmacists) and affiliated chapters (i.e., Student Michigan Pharmacists Association and Michigan Society of Pharmacy Technicians).

According to MPA’s bylaws, the objectives of the Association shall be:

1. to advance the art and science of the profession through organizational functions associated with economics, education, governmental affairs, and professional standards.
2. to adopt and enforce a Code of Professional Ethics to provide the highest standards of professional practice in advancing quality pharmacy care of patients.
3. to support a system of professional licensure of pharmacists to advance public health and welfare.
4. to assist members of the Association or a component organization in achieving economic, educational, governmental, and professional goals.
5. to provide services to members of the Association and to pharmacies.
6. to conduct organizational activities and research in advancing public health education and professional roles of pharmacists.
7. to promote the safe, effective and rational use of medications, therapeutic agents and medical devices issued or dispensed by pharmacists for the prevention of illness, treatment of a medical condition or maintenance of health.
8. to encourage interprofessional relations.
The 2012-2019 Strategic Plan of the Michigan Pharmacists Association is presented below. It sets forth MPA’s strategic direction and priorities for the upcoming years. Specifically, this document includes:

1. MPA’s mission, values, and vision of the future;
2. implications of trends;
3. a summary of MPA’s strengths, weaknesses, opportunities, and threats;
4. MPA’s key strategic focus areas; and
5. MPA’s long-range goals and objectives in each of the key areas.

MPA also has an Operational Plan, which reflects the priority outcome measures for the year. MPA staff use the Operational Plan to track and communicate progress on the outcome measures.

MPA’s Strategic and Operational Plans are updated annually. MPA hosts a long-range strategic planning retreat in the spring. Attendees include the MPA Executive Board, Practice Section leaders, Affiliated Chapter leaders, other invited guests, and staff. The resulting Strategic and Operational Plans ensure MPA continues to: (1) anticipate future changes to the pharmacy profession; (2) respond effectively and proactively to matters of importance; and (3) focus its day-to-day work on matters of high importance to the organization, its members, and partners.

**MISSION, VALUES, & VISION**

A *mission statement* expresses the fundamental purpose of an organization. It explains why it exists. Organizational *core values* are carefully composed declarations of an organization’s beliefs, ethics, and guiding principles. A *vision statement* defines a preferred future of an organization. It describes what an association desires to become or do in the future: what it should be at its best.

Below are MPA’s mission, organizational values/guiding principles, and vision of the future.
Mission of the Michigan Pharmacists Association

The mission of the Michigan Pharmacists Association is to serve members by providing support, advocacy and resources that ultimately improve patient care, safety, health, and the practice of pharmacy.

Adopted by the MPA Executive Board, March 1992
Terminology updated by the MPA Executive Board, March 2003
Reviewed by MPA Staff December 2006
Updated by MPA Executive Board January 2007
Updated by the MPA Executive Board May 2011

Core Values/Guiding Principles

**Integrity:** Maintaining high ethical principles and fostering cohesion within the profession.

**Innovation:** Envisioning the future and seeing new opportunities in pharmacy practice.

**Collaboration:** Engaging partners to advance healthcare initiatives and improve patient and public health.

**Professionalism:** Modeling and promoting exemplary standards of conduct for pharmacy professionals.

**Excellence:** Providing superior services to members and partners.

Adopted September 2016
Vision of the Michigan Pharmacists Association

The Michigan Pharmacists Association:
• Is the trusted voice for Michigan’s pharmacy professionals.
• Delivers maximum value to members and the profession.
• Drives pharmacy practice innovations, which optimize patient care and improve patients’ health.

Adopted by the MPA Task Force on Pharmaceutical Care January 1993
Terminology updated by the MPA Executive Board, March 2003
Revised by MPA Executive Board May 2004
Revised by MPA Executive Board May 2007
Revised by MPA Executive Board May 2011
Revised by MPA Executive Board September 2017
TRENDS ANALYSIS

A trends analysis is an essential component of a strategic planning process. It helps an organization understand, anticipate, and prepare for the future. A trends analysis includes: (1) evaluating the nature, magnitude, and sources of demands likely to be placed on an organization in the future and (2) identifying the likely future consequences of the trends on the organization.

Implications
Each year relevant trends are reviewed at the strategic planning retreat. Below is a summary of the implications of trends on MPA as discussed in recent years (2012-2018)

- Need to increase focus on technicians (education, certification, recruitment) consistent with MPA’s mission.
- Need to increase focus on new practitioners to provide unique opportunities to gain experience/education outside traditional curriculum (e.g., leadership, management).
- Need to increase focus on/demonstrate relevance to changing member demographics (female, part-time, new practitioner, employee pharmacists); need to change recruitment strategies, benefits, and services to meet the specific needs of these groups as well as all practice areas.
- Will be increasingly difficult keeping members engaged at all ages, levels, gender, and practice settings.
- MPA must embrace technology to increase contact while maintaining current and past methods of communication (to communicate effectively with all generations)
- Increasing pressure on MPA to advocate for provider status.
- Lack of resources (PAC dollars, dwindling margins, membership dollars, sponsorship for CE).
- Less grassroots membership involvement at local level. MPA may become responsible for member recruitment and engagement. Also, need to be more generation-specific when working with locals. In a global world, the state MPA organization may be the “new local.”
- Pharmacists with a BS in pharmacy may need additional specialty certifications to remain current/competent as the profession evolves.
- Pharmacists must continue to lead and be focused on patient safety and error reduction.
- Informed patients require more communicative pharmacists.
- By insurance companies intruding more into clinical issues, pharmacists may become more frustrated and question career choice and that means a decrease in membership.
- MPA needs to expand resources available to members on its Web site (e.g., educational information pharmacy professionals can share with patients).
- MPA’s focus may need to shift from product distribution to clinical services to be responsive to the surplus of pharmacists/members.
- Political involvement is a necessity.
- Workplace/environment issues will have a more significant impact for tomorrow’s practitioner.
- MPA must take a leadership role and provide information for addressing the opioid epidemic.
Every couple of years the strategic planning retreat includes a comprehensive organizational assessment, or SWOT analysis (i.e., a critical review of the MPA’s strengths, weaknesses, opportunities, and threats). MPA conducted an organizational assessment in 2018. Retreat attendees identified the following strengths, weaknesses, opportunities, and (potential) threats of MPA.

<table>
<thead>
<tr>
<th>Strengths of MPA include: (updated May 2018)</th>
<th>Weaknesses/Areas for Improvement (updated May 2018)</th>
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<tbody>
<tr>
<td>1. Fiscally sound, responsible, and stable.</td>
<td>1. Revenue – need new revenue stream/source(s).</td>
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<td>2. Inclusive of all practice environments.</td>
<td>2. Membership growth – recruitment and retention of members.</td>
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<td>3. Unifying and strong voice for the Profession.</td>
<td>3. Online/social media presence and engagement targeting younger pharmacy professionals.</td>
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<td>4. Excellent reputation (within the state and nationally).</td>
<td>4. Communicating/promoting the value of benefits and membership to all pharmacy professionals.</td>
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<td>5. Representative and diverse Board/Leadership.</td>
<td>5. Communicating/sharing information with members - promoting MPA events, innovative offerings, selling impact of legislative changes.</td>
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<td>6. Strong relationships and rapport with legislators.</td>
<td>6. Increasing and maintaining engagement of leaders and members.</td>
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<td>7. Strong relationships with other partners and stakeholders.</td>
<td>7. Availability of non-conference CE.</td>
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<td>9. Working to address issues/opportunities that advance the profession.</td>
<td>9. Establishing and demonstrating a recognized/standard payment model for pharmacist services.</td>
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<td>10. Many opportunities to network and get involved.</td>
<td>10. Advocacy and fund raising/PAC donations.</td>
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<td>11. The structure of the individual entities (MPA, PSI, MPF) allows benefits to be leveraged for the whole.</td>
<td>11. Organizational agility and relevance – ability to keep current and change quickly based on member/market needs.</td>
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<td>12. Quality education (e.g., ACE, CE, innovative product offerings).</td>
<td>12. Future vision and strategic legislative focus.</td>
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<td>13. Quality products and services (e.g., Publications, Pharmacy Day, website access).</td>
<td>13. Focus on/demonstration of clinical outcomes/measurement.</td>
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<td>15. Talented, knowledgeable, and dedicated Staff.</td>
<td>15. Staff turnover/inexperience.</td>
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<td>16. Section leadership.</td>
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<tr>
<td>Opportunities (updated May 2018)</td>
<td>Potential Threats (updated May 2018)</td>
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<tr>
<td>1. Leverage MPA leaders to advocate on behalf of MPA’s initiatives – Unified voice.</td>
<td>1. Lack of succession planning.</td>
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<td>2. Capitalize on work of other state associations.</td>
<td>2. Profession resistance to change (dispensing to clinical services).</td>
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<td>3. Legislative support – reach out to the college of pharmacy Deans to testify, attend hearings,</td>
<td>3. Pharmacy market saturation.</td>
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<td>talk to legislators</td>
<td>4. Telepharmacy – legislative impact without MPA involvement.</td>
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<td>5. Telepharmacy – new revenue stream.</td>
<td>6. Free CE – resources that compete with MPA.</td>
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<td>6. Equip members to recruit with talking points/information.</td>
<td>7. More diverse Board.</td>
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<td>7. Use older members for mentorship with young pharmacists.</td>
<td>8. Other pharmacy organizations are providing the same benefits as MPA (mid-level providers are encroaching. i.e. take back day)</td>
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<td>9. Educate members/public about legislative and networking opportunities.</td>
<td>10. DEA enforcement potential.</td>
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<td>10. Celebrate MPA’s successes and influences more.</td>
<td>11. Negative consequences (pertaining to Marijuana).</td>
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<td>12. Partner with other professional organizations for unification.</td>
<td>13. Disengagement from pharmacy profession.</td>
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<td>13. Should be accredited to conduct CE’s for other health-professionals (anyone who can prescribe).</td>
<td>14. DIR fees/reimbursement stresses to independent pharmacies.</td>
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<td>14. More involved with Marijuana because it is a drug.</td>
<td>15. Employers – offerings/reimbursement/timeoff.</td>
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<td>15. Build upon old legislative/law app.</td>
<td>16. Lack of payment model for pharmacy services.</td>
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<td>16. Create CE opioid training for upcoming rule change.</td>
<td>17. Increasing regulatory pressure – DEA, CMS, FDA, USP</td>
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<td>17. Communicate value of membership.</td>
<td>18. Payment model reimbursement.</td>
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<td>20. Expand practice areas that MPA appeals to (transplant management, nuclear, emergency, informatics, etc.)</td>
<td>21. Lack of understanding of advocacy and legislative process.</td>
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<td>21. Increase communication as method of recruitment and engagement.</td>
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<td>22. New membership models (like tiered).</td>
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<td>23. Website – more user friendly.</td>
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<td>24. Live streaming ACE CE education</td>
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<tr>
<td>25. Promote value and successes to both members and non-members – better communication, better branding.</td>
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<td>26. Improve communication around security threats.</td>
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STRATEGIC FOCUS AREAS, LONG-RANGE GOALS, AND OBJECTIVES

Strategic focus areas are large, encompassing issues that are fundamentally important to the organization in the long term. They are the large, strategic areas that must be addressed in the future for the organization to fulfill its purpose and move toward its vision of the future.

In 2019, the Executive Board and MPA staff reviewed and confirmed MPA’s four strategic focus areas.

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<th>2019 Strategic Focus Areas</th>
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<td>1. Membership</td>
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<td>2. Advancement of the Profession</td>
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<td>3. Legislative</td>
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<td>4. Education</td>
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Below are brief descriptions, long-range goals, and objectives for each strategic area. See MPA’s Operational Plan for a list of outcome measures and strategic projects underway in each of these areas.
Strategic Issue #1: Membership

Issue Description: The ability to successfully recruit new and retain existing members is the lifeblood of a membership organization. Without members, MPA will cease to exist. The future success of MPA is dependent on its ability to: (1) provide and demonstrate value to all pharmacy professionals and (2) remain relevant to the profession as well as members in all practice environments. MPA must be nimble, responsive, and innovative in the future. It must continuously anticipate, change, and adapt to the changing healthcare landscape and changing needs and interests of its diverse members. Listening to and understanding the needs of pharmacy professionals, as well as using best practices to recruit and retain members, will be vitally important in the future.

MPA’s membership is diverse. It is comprised of pharmacists, pharmacy technicians, student pharmacists, student technicians and associate members representing all practice environments (e.g., independent, chain, health-system, long-term care, home infusion, ambulatory care, nuclear, academic institutions, managed care). Even so, there are many opportunities to increase membership as there are an estimated 10,000 practicing pharmacists living in the state, 15,000 pharmacy technicians and 1,500 student pharmacists in Michigan.

In 2018, characteristics and trends related to MPA’s membership are as follows.

- MPA’s total membership decreased fourteen percent from 2014 to 2018. As of December 31, 2018, MPA has 2,881 members.
- Between 2014 and 2018, the number of student pharmacist members increased nine percent and the number of new practitioner members decreased 15 percent.
- Fifty-five percent of members in 2017 are 50 years or older. Fourteen percent of members are 29 years or younger.
- The gender of members in 2018: 54 percent are female and 46 percent are male. Of pharmacist members, 52 percent are male and 48 percent are female.
- MSCP has been and continues to be the largest practice section. However, membership has steadily decreased over the past 10 years. In 2018, 51 percent of pharmacist members are in MSCP (MSHP = 33 percent; CSPM = 9 percent; and members not designating a practice section = 11 percent).
- Membership retention rates have averaged 85 percent over the past 5 years. (The ideal association retention rate is 82-90 percent according to the American Society of Association Executives.)
- Employee/staff pharmacists continue to make up the majority of MPA’s membership (55 percent of all pharmacists in 2018).
Long-range Goals and Objectives:

Goal 1.1: MPA will increase the number of paying members each year.

   Objective 1.1.a: Use innovative and effective methods of recruiting and communicating the benefits and value of membership with prospective members.

   Objective 1.1.b: Actively recruit targeted populations with opportunities for membership growth.

Goal 1.2: MPA will exceed the national average retention rates.

   Objective 1.2.a: Measure and demonstrate the value of MPA to current membership.

   Objective 1.2.b: Use innovative retention methods to retain current members.

   Objective 1.2.c: Engage members in advancing the profession of pharmacy.

   Objective 1.2.d: Recognize members and show appreciation for their valued contributions.

Goal 1.3: MPA will remain relevant and meet the varying needs of Michigan’s pharmacy professionals.

   Objective 1.3.a: Solicit feedback on existing and emerging needs of pharmacy professionals.

   Objective 1.3.b: Enhance MPA’s services, products and resources.

   Objective 1.3.c: Anticipate and respond to the changing needs of a dynamic environment.
Strategic Issue #2: Advancement of the Profession

*Issue Description:* The healthcare environment is changing dramatically and is in flux due to national and state healthcare reform and the growing focus on the delivery of patient-centered care. Access to and costs associated with healthcare continue to be pressing issues in our country. The roles of pharmacists as members of the healthcare team delivering patient-focused and/or primary care services continue to expand and evolve, yet achieving provider status and being compensated fairly for providing patient services remain elusive.

MPA is committed to advancing the pharmacy profession. According to the 2019 MPA’s annual membership survey, provider status, reimbursement, legislation and patient medication safety are frequently mentioned as the most important professional practice issues. Thus, MPA is committed to enhancing the role of the pharmacist in the delivery of patient-focused care and ensuring pharmacists and technicians are compensated fairly for their expertise, services to patients, and contributions to the healthcare system and team.

There are many opportunities to advance the profession. For example, the pharmacy profession has an opportunity to advance the role of the pharmacist as a primary care provider by working in collaboration with a physician to improve health outcomes and help contain healthcare costs. The role of the pharmacist in patient safety is also growing as strategies to reduce medical errors, improve medication adherence and establish electronic systems to exchange health information are being pursued by healthcare entities.

To further advance the profession, additional changes are needed. Examples include: (1) expanding pharmacists’ role and involvement in innovative care models; (2) increasing the use of pharmacy-based collaborative practice agreements; (3) educating others about the value and contributions of pharmacists; (4) enhancing the pharmacist’s role in the area of patient safety; (5) engaging pharmacy leaders and professionals in advocating for needed changes and testing innovative models; (6) fostering the exchange of patient health information; (7) ensuring pharmacists are recognized and compensated as healthcare providers; (8) standardizing compensation models for pharmacist-provided, patient services; (9) promoting pharmacy accreditation; (10) increasing access to patient medical information and medication error-related information; (11) increasing collaboration among the public and healthcare professionals on matters pertaining to patient safety and drug misuse/abuse; and (12) developing additional tools (e.g., resources, technology, best practices) to maximize patient safety.
Long-Range Goals and Objectives:

Goal 2.1: Pharmacy professionals are integrated into the patient care team and perform a unique role in patient care.

Objective 2.1.a: Expand pharmacist and pharmacy technician roles and involvement in innovative care models.

Objective 2.1.b: Identify, develop and engage pharmacy leaders in leadership activities and opportunities that advance the profession of pharmacy.

Objective 2.1.c: Promote appropriate pharmacist, pharmacy technician and pharmacy credentialing.

Objective 2.1.d: Increase communication and collaboration among pharmacists, other healthcare disciplines, and stakeholders/prescribers to increase efficiency and effectiveness. i.e., Expand the use of comprehensive and innovative collaborative practice agreements.

Goal 2.2: Pharmacists are held accountable for patient medication-related outcomes and are reimbursed for their services.

Objective 2.2.a: Foster the exchange of patient outcomes data and health information to improve the ability of pharmacists to provide patient care services

Objective 2.2.b: Work to ensure pharmacists are recognized and compensated as health care providers at the state and national levels.

Objective 2.2.c: Support stakeholders to implement sustainable innovative care models (including, patients and families, healthcare plans/systems etc.).
Goal 2.3: Patients and healthcare stakeholders recognize pharmacy professionals for the value they bring to the patient care team.

Objective 2.3.a: Demonstrate the value of pharmacists in improving patient outcomes and efficiency.

Objective 2.3.b: Educate and inform the patients, families, healthcare professionals about the expertise, unique role, and value of pharmacists and the health care services they provide.

Objective 2.3.c: Raise awareness and promote legislators, and other stakeholders on the value of the pharmacist as a member of the healthcare team.

Goal 2.4: Pharmacy Professionals are leading and actively engaged in patient safety and quality improvement efforts.

Objective 2.4.a: Engage patients and caregivers, the public and other health care professionals to consult pharmacists on matters pertaining to patient safety and drug misuse/abuse.

Objective 2.4.b: Enable pharmacy professionals to obtain access to patient medical information and medication error-related information.

Objective 2.4.c: Promote existing patient safety tools and educate pharmacy professionals on their appropriate use. (e.g., resources, technology, best practices, staffing models)

Objective 2.4.d: Collaborate with pharmacy and other health care professionals to develop new resources, technology, standards and best practices to maximize patient safety.

Objective 2.4.e: Share innovative pharmacy practices.

Objective 2.4.f: Raise awareness and promote patient and safety standards in the workplace.
Strategic Issue #3: Legislative

**Issue Description:** MPA’s members consistently rate legislative and advocacy issues among the most important professional practice issues. Thus, MPA will work to: (1) influence legislative and regulatory matters to promote good public policy and (2) provide up to date, reliable information about legislative and regulatory matters affecting the profession.

The profession of pharmacy is highly regulated by both the state and federal government. Increasing healthcare demands associated with rising costs have led to greater governmental influence on not only healthcare programs, but payment systems. Third party payors and healthcare purchasers are continually looking for methods to reduce patient healthcare costs. Unfortunately, the third party payors typically react slowly to changes in the pharmacy marketplace.

The Michigan Legislature establishes the laws for pharmacists and the Michigan Board of Pharmacy enforces the laws, rules, and regulations within the state. The Board of Pharmacy has only limited authority in determining the rules and regulations of how the profession is practiced. MPA has provided a common, unified voice for pharmacy in the state because of its diverse membership and organizational structure. As pharmacists continue to assume greater responsibilities in drug therapy management and direct involvement in patient care, and as new technologies evolve, it is critical that Michigan has laws, rules and regulations that allow pharmacists to provide safe and responsible care to patients.

Pharmacy professionals have an opportunity to get involved in grassroots efforts with their local, state and U.S. elected officials/legislators. Through MPA and the Pharmacy Political Action Council (PAC) pharmacy professionals are able to: (1) shape/impact legislation as it is proposed and drafted; and (2) respond to legislative issues as they emerge. Potential legislative/regulatory issues include the following:

- Opioid-related requirements on prescribers and pharmacists
- PBM transparency
- MAC pricing guidelines
- Pharmacy Audit guidelines
- Open pharmacy provider networks
- Compounding pharmacy regulations
- Collaborative practice opportunities
- Advancements in pharmacy technology
- Limited prescribing—i.e. prescriptive authority for oral contraceptives
- Drug shortages
- Transitions of care between practice settings
- Health care reform (Accountable Care Organizations, health insurance exchange)
- Access to patient information through health information exchange
- Advancement of pharmacy safety and quality measurers
- Administrative Rules for pharmacists and pharmacy technicians
**Long-Range Goals and Objectives:**

**Goal 3.1: MPA is an influential force in legislative and regulatory matters to promote good public policy.**

Objective 3.1.a: Work to have pharmacy professionals in state or national elected office.

Objective 3.1.b: Use innovative methods to involve pharmacy professionals, affiliated groups and multidisciplinary organizations in responding to legislative, regulatory and public policy matters.

Objective 3.1.c: Engage legislative and executive branches of state and federal governments to advance the pharmacy profession.

Objective 3.1.d: Collaborate with PAC to achieve common goals, and represent the bipartisan interests of pharmacy professionals at the state and national level.

Objective 3.1.e: Advocate for legislative and regulatory changes that support fair and sustainable business practices for the pharmacy profession.

Objective 3.1.f: Work to modify laws, rules, and regulations to support a non-punitive culture for reporting medication errors and promoting patient safety.

**Goal 3.2: MPA is recognized as the best source for information and resources about legislative and regulatory matters affecting the pharmacy profession.**

Objective 3.2.a: Inform and educate pharmacy professionals about current state and federal laws, rules and regulations.

Objective 3.2.b: Optimize and increase utilization of MPA resources that support its members to educate and establish meaningful relationships with key stakeholders.
**Strategic Issue #4: Education**

**Issue Description:** Every year MPA surveys members asking what is most important or valuable about membership in MPA. Of the various options, continuing education (CE) is consistently rated as most important or valuable. Thus, MPA remains committed to, and focuses on: (1) being the premier source of pharmacy continuing education and training for all pharmacy professionals in Michigan and (2) ensuring pharmacists and technicians are highly skilled and remain competent.

MPA must continually review the quality of existing programs and make improvements when necessary as well as expand offerings to meet the changing needs of pharmacy professionals and the Association’s diverse members. That is, MPA must continue to improve the quality, and/or expand the number, of live, home study and jointly-provided CE activities thereby creating better activities and providing more contact hours. Additionally, MPA must expand its educational activities to include certificate and advanced programs focusing on increasing the skills and competencies of pharmacy professionals in Michigan. Educating pharmacy professionals on best practices in the healthcare environment also brings value to the profession. Pharmacy professionals and pharmacy provider organizations need education and resources to implement evidence-based best practices. These improved and expanded activities (1) will help pharmacists and technicians meet the required number of live and required CE credits each year, pursuant to Michigan’s Board of Pharmacy Administrative Rules; and (2) help pharmacists and technicians practice at the top of their license. Finally, MPA must continue to: (1) seek additional funding to be cost competitive and (2) use existing and emerging technologies to increase access and convenience.

In summary, MPA is uniquely positioned to meet the growing need for continuing education and professional development. It has the experience, expertise and reputation to help pharmacy professionals remain skilled and competent.

**Long-Range Goals and Objectives:**

**Goal 4.1:** MPA is the premier source of pharmacy continuing education and training in Michigan.

  Objective 4.1.a: Provide meaningful educational offerings to pharmacy professionals to enhance their ability to practice.

  Objective 4.1.b: Optimize the use of technology to deliver education and training to pharmacy professionals.

  Objective 4.1.c: Monitor and respond quickly to emerging educational needs.
Goal 4.2: Pharmacy professionals in Michigan are competent, skilled and use best practices to advance the profession.

Objective 4.2.a: Provide advanced training opportunities to enhance the skills of pharmacy professionals.

Objective 4.2.b: Provide pharmacy professionals and provider organizations with access to education and information resources to assist with implementing best practices and enhancing patient safety.

Objective 4.2.c: Collaborate with other healthcare disciplines and associations to provide joint educational programs.