# **AACP REPORTS**

# Report of the AACP Special Committee on Substance Abuse and Pharmacy Education

Paul W. Jungnickel, Chair, <sup>a</sup> Edward M. DeSimone, <sup>b</sup> Julie C. Kissack, <sup>c</sup> Lisa A. Lawson, <sup>d</sup> Matthew M. Murawski, <sup>e</sup> Brandon J. Patterson, <sup>f</sup> Raylene M. Rospond, <sup>g</sup> David M. Scott, <sup>h</sup> and Jennifer Athay <sup>i</sup>

President-Elect Jeffrey N. Baldwin created the AACP Special Committee on Substance Abuse and Pharmacy Education as a special committee to serve during his term of office in 2009-2010. The Committee met in Alexandria, Virginia on October 4-5, 2009 and conducted the remainder of its business via electronic media.

#### CHARGE TO THE COMMITTEE

The Committee was specifically charged to examine and recommend how pharmacy colleges and schools should prepare all student pharmacists to appropriately assist those who are addicted or affected by others' addiction, and help support addiction recovery with an emphasis on public safety. The Committee was also directed to include recommendations on core curricular content and delivery, both for student pharmacists and continuing education for pharmacists, and on prevention and assistance processes within our colleges and schools.

#### **BACKGROUND**

Substance abuse and addiction continues to be a significant public health problem in the United States. Data for the year 2008 indicate that 8 percent of the population aged 12 or greater reported current illicit drug use and 6.9 percent met the criteria for heavy alcohol use. The incidence of such disorders in health professionals is believed to be higher than that of the general population; this may be related to the access that health professionals have to abusable and addictive substances. Health professionals in training, including student pharmacists are impacted as well.

Pharmacists are educated and trained to fulfill the societal role of being drug experts and to use this expertise

in the care of patients, including the prevention and management of drug related problems. Given that substance abuse and addiction are obviously disorders that are related to the inappropriate use of drugs, pharmacists clearly have a responsibility to provide appropriate care for patients so afflicted. Pharmacy colleges and schools are the educational entities that bear the primary responsibility to prepare pharmacists for their roles as health professionals that provide patient care. Given the prevalence of drug misuse in our society, it is important for colleges and schools of pharmacy to address addiction and substance abuse as components of professional curricula as well as in the continuing education of pharmacists. Furthermore, colleges and schools of pharmacy also have a responsibility to provide assistance to members of their organizations (student pharmacists, graduate students, faculty, and other employees) that may develop addiction and other substance abuse disorders.

The American Association of Colleges of Pharmacy (AACP) has in the past been significantly engaged in addressing the issue of substance abuse and addiction, both within schools and colleges of pharmacy as well as the society at large. In 1988, the House of Delegates adopted a resolution that stated individual colleges and schools of pharmacy utilize the "Guidelines for the Development of Chemical Impairment Policies for Colleges of Pharmacy" that had previously been adopted by the AACP Board of Directors, and that "individual colleges and schools of pharmacy actively participate in programs as suggested by the guidelines." The 1990-91 Academic Affairs Committee, in response to a charge presented by president John Biles, developed the following policy

<sup>&</sup>lt;sup>a</sup>Harrison School of Pharmacy, Auburn University

<sup>&</sup>lt;sup>b</sup>School of Pharmacy and Allied Health Professions, Creighton University

<sup>&</sup>lt;sup>c</sup>College of Pharmacy, Harding University

<sup>&</sup>lt;sup>d</sup>Philadelphia College of Pharmacy, University of the Sciences in Philadelphia

<sup>&</sup>lt;sup>e</sup>School of Pharmacy and Pharmaceutical Sciences, Purdue University

<sup>&</sup>lt;sup>f</sup>College of Pharmacy, The University of Iowa

<sup>&</sup>lt;sup>g</sup>College of Pharmacy and Health Sciences, Drake University

<sup>&</sup>lt;sup>h</sup>College of Pharmacy, Nursing and Allied Sciences, North Dakota State University

<sup>&</sup>lt;sup>i</sup>American Association of Colleges of Pharmacy

## American Journal of Pharmaceutical Education 2010; 74 (10) Article S11.

statement that was adopted by the House of Delegates: "Pharmaceutical education has the responsibility to prepare students to address the problems of substance abuse and chemical dependency in society."<sup>3</sup>

AACP's Special Interest Group (SIG) on Substance Abuse Education and Assistance has been very active in shaping academic pharmacy's response to these problems. The work of this SIG led to the publication of "Curricular Guidelines for Pharmacy Education: Substance Abuse and Addictive Disease." In 1999, the work of this SIG resulted in the publication of AACP's "Guidelines for the Development of Psychoactive Substance Use Disorder Policies for Colleges of Pharmacy," which updated the aforementioned 1988 document.

Members of the academic pharmacy community have conducted and published a variety of studies that have provided to some extent a scholarly basis to assist pharmacy colleges and schools in addressing substance abuse issues. These studies have:

- assessed the use of alcohol and illicit drug use in student pharmacists, as compared to general college and other health professions students, <sup>6-9</sup>
- measured student pharmacist attitudes regarding the need for university policies directed at raising awareness on alcohol and drug abuse, and university programs to identify impaired students and provide assistance,<sup>10</sup>
- assessed substance abuse course content in colleges and schools of pharmacy, 11
- described substance abuse courses and educational programs and their impact on student pharmacists' knowledge, 12,13
- evaluated alcohol and nonmedicinal drug use in pharmacy college faculty members, <sup>14</sup> and
- evaluated pharmacy college faculty members' attitudes concerning chemical dependency and substance abuse, as well as pharmacy college substance abuse education and assistance programs.

While the aforementioned body of work has contributed significantly in helping academic pharmacy address issues of addiction and substance abuse, recent work has been more limited. The last set of guidelines was published in 1999. Since that time, there have been significant changes in pharmacy education that support the need for academic pharmacy to focus greater attention on substance abuse and addiction. In the first decade of the 21st century, pharmacy education has changed in a variety of ways, which result in new implications for pharmacy's academic enterprise. The profession has adopted the Doctor of Pharmacy entry-level degree, resulting in longer and more rigorous educational programs, which often follow increased duration of pre-pharmacy work. In ad-

dition, new Accreditation Council for Pharmacy Education (ACPE) standards require practice experiences be interspersed throughout all professional years of the curriculum. <sup>16</sup> Finally, another dramatic change in pharmacy education is the opening of numerous new pharmacy colleges and schools that are often located on university campuses with few other health professions programs. These and other factors impact pharmacy schools in their need to address chemical dependency and substance abuse issues.

Thus, the Committee's work was focused on the directions that academic pharmacy needs to move in order to address the needs of the profession, its academic institutions, and society in general. Primary foci that are addressed in this report include:

- 1. better preparation of pharmacists and pharmacy faculty to facilitate improved care of patients with addiction and substance abuse disorders.
- 2. assisting pharmacy colleges and schools with the development of programs to help prevent addiction and substance abuse among students, faculty members, and other employees, and providing assistance to those individuals suffering from these disorders, and
- 3. recommending policies and procedures that will facilitate recovery of addicted students, faculty members, and other employees while limiting pharmacy school liability by preventing impaired students and faculty members from participating in practice activities.

### SUMMARY OF THE COMMITTEE'S WORK

The committee used a variety of approaches to address the various issues it identified and provides the following descriptions of actions taken, as well as the products of its work.

# Assisting Individuals with Addiction and Other Substance Use Disorders

Pharmacy colleges and schools need to be able to appropriately address substance abuse and addiction when these disorders occur in students, faculty and other employees. It is important that colleges/schools of pharmacy be able to assist impaired individuals, and the committee strongly encourages colleges and schools of pharmacy to develop appropriate policies and procedures for assisting their students, faculty members, and other employees. Programs must be designed to assure appropriate treatment as well as accountability for those individuals who are in recovery and monitoring. It is important to assure that students and pharmacist faculty members are

## American Journal of Pharmaceutical Education 2010; 74 (10) Article S11.

not allowed to participate in practice settings until released to do so by their monitoring programs.

Significant changes in pharmacy education (particularly the inclusion of practice experiences throughout all years of pharmacy school curricula) have occurred since 1999, when the AACP issued "Guidelines for the Development of Psychoactive Substance Use Disorder Policies for Colleges of Pharmacy." The Committee recognized that these Guidelines were in need of updating and has produced updated Guidelines, which accompany the Committee's report. (The updated guidelines are available at: http://www.aacp.org/governance/COMMITTEES/sape/Documents/SAPEReport\_June\_2010.pdf)

These Guidelines should be disseminated to AACP's membership as well as to other stakeholders in the profession.

Administrative leadership is essential to assure appropriate development and implementation of policies for Addiction and Related Disorders in colleges and schools of pharmacy. The dean and other appropriate administrators must assure adherence osuch polices, once they are developed. Preventing impaired individuals from participating in practice settings will limit the potential for patient harm and accompanying liability for pharmacy colleges.

#### **Best Practices**

The Committee submitted a call to colleges and schools of pharmacy to provide descriptions of their best practices related to various issues concerning substance abuse and addiction. Faculty members from 5 colleges of pharmacy provided 4 descriptions related to curricular content, policies and procedures, and communication of policies to students. These documents have been posted on AACP's Web site as resources for members. The Committee encourages AACP to solicit additional best practices descriptions from its member institutions.

# **Substance Abuse and Addiction Curricular Guidelines for Pharmacy Schools**

The Committee has updated the "Curricular Guidelines for Pharmacy Education: Substance Abuse and Addictive Disease," which were previously published in 1991. These Guidelines provide ten educational goals, while describing four major content areas including: psychosocial aspects of alcohol and other drug use; pharmacology and toxicology of abused substances; identification, intervention, and treatment of people with addictive diseases; and legal/ethical issues. The required curriculum suggested by these Guidelines addresses the anticipated and unanticipated effects of both nonprescription and legally prescribed drugs, alcohol, and other substances of abuse. Identifying characteristics of addiction and related disorders, and patterns of abuse and dependence, are

also included to allow pharmacists to assist in early identification and assistance where appropriate. Issues concerning addicted pharmacists, student pharmacists, and other health care practitioners are discussed. Methods of prevention, intervention, referral, withdrawal, treatment, and recovery support are also presented.

These Guidelines highlight the need for pharmacy colleges and schools to assure that their curricula adequately prepare pharmacists to appropriately manage addiction and related disorders that occur in patients in their practices. This extends to the context of pharmacists intervening and assisting in cases where professional colleagues become impaired and pose a danger to patients if they are allowed to practice without successful treatment and monitoring. Furthermore, as leaders and drug therapy experts, pharmacists have a responsibility to provide education and support to community and professional organizations concerned with addiction and substance abuse.

The Committee strongly recommends that all colleges and schools of pharmacy assure that their curricular outcomes and content are sufficient to prepare pharmacists to deal with addiction and substance use disorders in the course of their professional activities. Addiction and other substance abuse disorders also need to be appropriately addressed in the ACPE Accreditation Standards and the North American Pharmacy Licensure Examination (NAPLEX) competencies and examination. Various pharmacy organizations need to address these disorders in their practice standards.

# Addiction and Substance Abuse Continuing Education

Professional competence is not fully developed at the conclusion of pharmacy school and it is important that ongoing education and development of practice skills occur throughout one's professional career. Continuing education providers (colleges and schools of pharmacy, professional organizations, and other entities) should address the needs of their constituents and assure that their continuing education offerings in the area of addiction and substance abuse are sufficient to meet practitioner needs. The AACP Section on Continuing Professional Education could promote this educational need to AACP's member institutions, to other accredited continuing education providers, and to ACPE. Continuing education providers can utilize the "Curricular Guidelines for Pharmacy Education: Substance Abuse and Addictive Disease" as a resource for designing programs appropriate for the needs of practitioners.

#### **Faculty and Staff Development**

Colleges and schools of pharmacy will only be able to address addiction and substance abuse disorders among

## American Journal of Pharmaceutical Education 2010; 74 (10) Article S11.

students, faculty and staff, if all of their members are sufficiently knowledgeable in this area. As previously mentioned, the Guidelines for content of entry-level curricula have been revised and accompany the Committee's report. It is also important for colleges and schools of pharmacy to provide faculty and staff members opportunities to develop expertise related to addiction and other substance abuse disorders. These opportunities should be provided during initial orientation and on an ongoing basis. A primary goal should be to prepare faculty and staff members to be able to identify and assist students, as well as fellow faculty and staff members, who need help related to addiction and substance abuse.

#### RECOMMENDATIONS

Based on its findings and work, the Committee makes the following recommendations:

Recommendation 1. The Committee recommends that all colleges and schools of pharmacy develop and implement policies and procedures to assist student pharmacists, graduate students, faculty members and other employees with addiction and related disorders. These programs should be patterned after the Guidelines as updated by the Committee and adapted based on resources available to each college or school. Such programs must assure appropriate treatment as well as accountability to assure patient safety is not compromised. Impaired students and faculty members must not have access to practice sites until they have demonstrated initial success in a recovery and monitoring program.

**Recommendation 2.** The Committee recommends that all pharmacy colleges and schools appropriately address substance abuse and addiction in their curricula, utilizing the "Curricular Guidelines for Pharmacy: Substance Abuse and Addictive Disease" to guide their curricular development.

Recommendation 3. The Committee recommends that substance abuse and addiction issues be sufficiently addressed in the ACPE Accreditation Standards, the NAPLEX competencies and examination, and the practice standards of professional organizations. The Committee further recommends that AACP communicate these concerns to the leadership of these professional bodies. AACP should consider the development of policy statements regarding the above issues.

**Recommendation 4.** The Committee recommends that AACP communicate to member colleges and schools of pharmacy, to other accredited continuing education providers, and to ACPE, the need for increased continuing education programs that address practitioner needs in the area of addiction and substance abuse.

**Recommendation 5.** The Committee recommends that AACP member institutions consistently address the area of substance abuse and addiction in programs for faculty and staff development. Such programming should result in faculty and staff members having an understanding of addiction and other substance abuse disorders, as well as the ability to assist student pharmacists and colleagues with potential problems.

#### REFERENCES

- 1. United States Department of Health and Human Services Substance Abuse & Mental Health Services Administration. 2008 Survey on Drug Use and Health, Available at http://oas.samhsa.gov/nsduh.htm, Accessed May 26, 2010.
- 2. Eckel FM. Chair report of the Bylaws and Policy Development Committee. *Am J Pharm Educ.* 1988;52(4):411-3.
- 3. Gerald MC. Chair report of the Academic Affairs Committee. *Am J Pharm Educ.* 1991;55(Winter Suppl):12S-16S.
- 4. Baldwin JN, Light KE, Stock C, et al. Curricular guidelines for pharmacy education: substance abuse and addictive disease. *Am J Pharm Educ.* 1991;55(4):311-6.
- 5. Dole EJ, Baldwin JN, Murawski MM, et al. American Association of Colleges of Pharmacy guidelines for the development of pyschoactive substance abuse disorder policies for colleges of pharmacy. *Am J Pharm Educ*. 1999;62(Winter Suppl):28S-34S.
- 6. Kriegler KA, Baldwin JN, Scott DM. A survey of alcohol and other drug use behaviors and risk factors in health profession students. *College Health*. 1994;42(May):259-65.
- 7. Miller CJ, Banahan III BF, Borne RF. A comparison of alcohol and illicit drug use between pharmacy students and the general college population. *Am J Pharm Educ.* 1990;54(1):27-30.
- 8. Coleman EA, Honeycutt G, Ogden B, et al. Assessing substance abuse among health care students and the efficacy of educational interventions. *J Prof Nurs.* 1997;13(1):28-37.
- 9. Tucker DR, Gurnee MC, Sylvestri MF, et al. Psychoactive drug use and impairment markers in pharmacy students. *Am J Pharm Educ*. 1988;52(1):42-6.
- 10. Szeinbach SL, Banahan III BF. Pharmacy students attitudes toward the need for university implemented policies regarding alcohol and illicit drug use. *Am J Pharm Educ.* 1990;54(2):155-8.
- 11. Baldwin JN, Dole EJ, Levine PJ, et al. Survey of pharmacy abuse substance course content. *Am J Pharm Educ.* 1994;58(Winter Suppl):47S-52S.
- 12. McAuley JA, Akers AL, Mott DA. Assessing the impact of a substance abuse educational program on pharmacy students' knowledge base: a controlled study. *Am J Pharm Educ.* 1999;63(3):309-14.
- 13. Busto S, Knight K, Janecek E, et al. A problem-based learning course for pharmacy students on alcohol and pyschoactive substance abuse. *Am J Pharm Educ.* 1994;58(1):55-60.
- 14. Baldwin JN, Scott DM, Jungnickel PW, et al. Evaluation of alcohol and drug use attitutes and behaviors in pharmacy college faculty: part I. behaviors. *Am J Pharm Educ.* 1990;54(3):233-8.

  15. Baldwin JN, Scott DM, Jungnickel PW, et al. Evaluation of alcohol and drug use attitutes and behaviors in pharmacy college faculty: part II. attitudes. *Am J Pharm Educ.* 1990;54(3):239-42.

  16. *Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree.* Chicago: Accreditation Council for Pharmacy Education, adopted