PHARMACIST COLLABORATIVE PRACTICE AGREEMENTS:
KEY ELEMENTS FOR LEGISLATIVE AND REGULATORY AUTHORITY

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Objectives
1) Evaluate the variables in the current legislation in each state that authorizes pharmacist collaborative practice
2) Identify elements needed for strong collaborative practice provisions
3) Write a consensus-based document detailing the workgroup’s recommendations for elements that should (and should not) be included in state laws and regulations relating to collaborative practice agreements.

Methods
Design
- National pharmacy associations were invited to appoint a member of their professional affairs staff to participate in the workgroup
- State pharmacy associations were invited to nominate a pharmacist from their state to participate in the workgroup. The NASPA Executive Board appointed state participants from the list of nominations so that there was an equal representation from the state and national level.
- Workgroup participants reviewed the elements of current laws and regulations authorizing collaborative practice agreements.
- Participants considered two key questions when approaching this work:
  - Is this recommendation in the best interest of the patient receiving care under a collaborative agreement?
  - Is this recommendation aligned with pharmacists’ education and training?
- Using a modified Delphi method and a series of surveys and conference calls, participants developed a set of consensus based recommendations for what elements of collaborative practice authority should appropriately be defined under state law and/or regulation and what elements are best left to be determined between pharmacists and other practitioners when developing their specific collaborative practice arrangements.

Conclusion
The Collaborative Practice Workgroup report was finalized in July of 2015 and is available to download at http://naspa.us/resource/cpa-report/.