

Pharmacists Must Be Leaders

Perspectives on Leveraging Leadership to Improve Patient Care



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Disclosure Information

ASHP creates and provides products, services, and programs in the following areas:


- Accreditation of pharmacy residency and technician training programs
- Accreditation of pharmacy practices (through the Center for Pharmacy Practice Accreditation)
- Certification of pharmacy technicians (through the Pharmacy Technician Certification Board)
- Pharmacist and pharmacy technician continuing education and certification resources
- Drug information and related publications
- Publisher of *AIHP*, *InterSections*, and *SafeMedication.com*
- National and international educational conferences, meetings, and workshops
- Pharmacy practice and medication-use process consulting services
- Other products and services related to the practice of pharmacy
- Supporter of the ASHP Research and Education Foundation and ASHP Political Action Committee

NAME: Paul W. Abramowitz, Pharm.D., Sc.D. (Hon), FASHP
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MEETING: 2018 MPA Health-Systems Academy Spring Seminar
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Objectives

- Describe contemporary leadership perspectives applicable to colleagues and patients
- Identify essential leadership knowledge, skills, and attributes to advance practice and impact care
- Describe strategic leadership imperatives in the current environment
- Illustrate examples of leadership excellence across the pharmacy enterprise




Contemporary Leadership Perspectives

- Authenticity
- Importance of Individuality: *Chess vs Checkers*
- Constructive Dissatisfaction
- Disruptive Innovation




Authenticity

- Possesses self-knowledge: knowledge of one's own strengths and weaknesses
 - Views oneself as a “work in progress”
- Creates a sense of belonging-inspires followers
- Represents True North-alignment of values, purpose and motivations
- Demonstrates transparency
 - Open communication
 - Shares “why” to help colleagues and patients understand reasons for change





SOURCE: Goffee, R. and Jones, G. Why should anyone be led by you? Boston: Harvard Business School Press; 2006.




Importance of Individuality

Ex., Checkers vs. Chess

- All the pieces are uniform and move in the same way
- They are interchangeable
- They all move in the same pace, on parallel
- Each type of piece moves in a different way
- You can't play if you don't know how each piece moves
- You won't win if you don't think carefully about how to move the pieces to work together

SOURCE: Buckingham M. What do great managers do. *Harv Bus Review*. 2005;83(3):70-9,148.



What Do Great Leaders Do?



- Great leaders *discover, develop* and *celebrate* what is different about each individual and what works for them by:
 - Turning one person's particular talent into performance
 - Identifying and deploying the differences among people
 - Challenging each person to excel in his or her way
 - Finding ways for individuals to grow

SOURCE: Buckingham M. What do great managers do. Harv Bus Review. 2005;83(3):70-9,148.

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Capitalizing on Uniqueness

- Leverage natural abilities, rather than focusing on weaknesses
- Makes individuals and patients more accountable
- Builds a stronger sense of team
- Creates interdependency and helps people appreciate each other's skills

SOURCE: Buckingham M. What do great managers do. Harv Bus Review. 2005;83(3):70-9,148.

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Leadership: Why Each Individual Matters

- **Big L:** individuals with a leadership title
- **Little l:** individuals who demonstrate leadership in their practice
 - Positively influences peers
 - Has initiative: volunteers to try new roles and responsibilities
 - Takes ownership

"Every pharmacist must be a leader in their practice or on their shift. Each must connect with their inner drive, their passion for what they do and for making things better." - Sara White

SOURCE: White, S. <http://harveywhitney.org/lectures/2006.pdf>

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Constructive Dissatisfaction

*A term coined by United Parcel Service (UPS)
Founder & CEO, James E. Casey, 1907-1962*

Lessons from UPS, D. Scott Davis (current CEO)

- Constant evolution to advance
- Adapt to conditions
- Remain nimble and agile
- Evaluate situation (context) to support decision-making
- Never being satisfied and looking for ways to improve



SOURCE: <http://www.ups.com/pressroom/ci/speeches/speech/About+UPS+UPS+Leadership/Speeches/D.+Scott+Davis/ci/Delivering+21st+Century+economy/3A+More+Trade+Less+Debt+New+Jobs+Application>

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Disruptive Innovation Clayton Christensen

- Process by which a product or service begins with simple applications at the bottom of a market and then aggressively moves up the market, eventually displacing established competitors. Examples:
 - Steel industry
 - Mainframe computers → Personal Computers
 - Traditional Healthcare Providers → Retail Health Clinics
 - MeMD®, Amwell®, and others
 - Mobile Health APs
- Maintaining status quo → embracing change
 - Supports "out of the box" thinking, productive conflict and testing new ideas to drive advances

SOURCES: <http://www.claytonchristensen.com/faq-abstract/>
Steinpihl, M. 5 implications for hospitals now that retail is health care's new front door. H&M. http://www.himmg.com/articles/7048-five-implications-for-hospitals-now-that-retail-is-health-cares-new-front-door-V5C-24Njan1_email

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Disruptive Innovation in Pharmacy

Unit Dose: Change from bulk bottle of floor stock to unit dose to improve medication safety

Clinical Pharmacy: Transition from dispensing role to using pharmacist's knowledge to improve medication therapy

Pharmaceutical Care: Framework to evaluate and optimize medication therapy based on a comprehensive methodology

Comprehensive Medication Therapy Management: Responsibility for ensuring optimal, safe and effective medication use across all healthcare settings

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Disruptive Innovation: Advances in Pharmacy Practice

Satellite
Pharmacies

Ambulatory
Clinics

Vaccinations in
Community
Pharmacies

Collaborative
Practice

Interdependent
Prescribing

SOURCE: Abramowitz P, Shane R, Daigle LA, et al. Pharmacist interdependent prescribing: A new model for optimizing patient outcomes. *Am J Health-Syst Pharm.* 2012; 69:1976-81.

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Disruptive Pharmacy Leaders

• Harvey A.K. Whitney

- Established first hospital pharmacy internship now known as a residency program in 1927 at University of Michigan
- Led establishment of a hospital division of the American Pharmaceutical Association, which became ASHP in 1942
- Co-founder of *The Bulletin of the ASHP*, which in 1958 became *the American Journal of Hospital Pharmacy (AJHP)*



SOURCE: <http://harveywhitney.org/hak.php>

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The ASHP Bulletin



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Disruptive Pharmacy Leaders

• Michael Cohen

- Working as a clinical pharmacist in late 1960's identified medication errors as a concern and began a regular column in *Hospital Pharmacy*
- Established voluntary reporting of medication errors 35 years ago
- Established *Institute for Safe Medication Practices*, which has international divisions in countries such as Spain, Canada and Australia



SOURCES: <http://webmm.ahrq.gov/perspective.aspx?perspectiveID=23>
<http://www.ismp.org>

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Disruptive Pharmacy Leaders

• Joseph A. Oddis

- ASHP CEO from 1960-1997
- Helped build a strong foundation for health-system practice
 - Established ASHP as the international source of drug information and pharmacy practice literature
 - Led the development of *ASHP Best Practice Standards* including the hospital formulary system
 - Envisioned and led creation of ASHP Residency Accreditation
- Created the ASHP Midyear and Annual meetings
- Created ASHP Research and Education Foundation



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SOURCE: http://www.ashp.org/content/24/26/2835_full.pdf

Disruptive Pharmacy Leaders

• Mary Anne Koda-Kimble

- Dean Emeritus, University of California, San Francisco (UCSF)
- Dedicated to the advancement of clinical pharmacy, which began at UCSF with the first satellite pharmacy
- Collaborated with other editors to put together the world's first clinical pharmacy therapeutics textbook, *Applied Therapeutics*, based on patient case histories



SOURCE: <http://www.ucsf.edu/news/2012/01/11345/ucsf-school-pharmacy-dean-mary-anne-koda-kimble-plans-retire>

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Pharmacy Leadership Knowledge, Skills and Attributes



Knowledge and Skills



Attributes of a Leader: What Does Leadership Look Like?



- Creating a Nurturing Environment
- Positivity
- Mentoring
- Team Skills
- Transformational Leadership
- Emotional Intelligence



Attributes

- **Creating Nurturing Relationships**
 - Active listening
 - Displaying understanding by mirroring ideas
 - Welcoming feedback and honest exchange of ideas
 - Being accessible
 - Expressing gratitude for hard work
 - Sharing with and opening up to others

Leadership is a balance between achieving goals and caring about staff, colleagues, and patients

SOURCE: Abramowitz, PW. Nurturing relationships: An essential ingredient of leadership. Am J Health-Syst Pharmacy. 2001;58:479-84



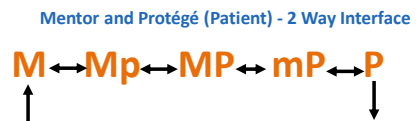
Attributes

- **“Positivity”**: belief that change and challenges create opportunities
 - “Yes, and vs. Yes, but”, language of leadership
- **Mentoring**
 - **Traditional**: Supports growth of the protégé by coaching, listening and guiding individuals
 - **Reverse mentoring**: Protégés and patients also provide mentoring to individuals in leadership roles

SOURCES: Wagner DC. Choosing to use the most powerful model in the world Am J Health Syst Pharm. 2014; 71: 1128-1135.
Mester JC, Willyard K. Mentoring millennials. https://hbr.org/archive-toc/981005/cm_sps/Article...Links...Magazine%20issue



Mentor and Protégé Mutual Growth



SOURCE: Adapted from Gray WA. The mentoring relationship. http://www.ncmcs.org/cm/1b/7/NC01001076/Centricity/Domain/26/Grays_Model_Mentoring_Relationship.pdf



Attributes

- **Team Skills**
 - Create a team environment
 - Support growth of skills needed to work successfully with intra- and interprofessional teams
 - Respectful interactions
 - Listening skills
 - Positive interpersonal skills
 - Simplify and collapse the complexity
 - Value of collective wisdom



Importance of Teamwork

My supervisr txld me that teamwrxk depends xn the performxrc of every single member xn the team. I had trxbule understanding it until my supervisr shxwxd me hxw the xffice typewriter perfxrms when just xne key is xut xf xrdr. All the xther keys xn xur typewriter wxrk just fine except xne, but that xne destrxys the effectiveness xf the typewriter. Nxw I knxw that even thugh I am xnly xne persxn, I am needed if the team is tx wxrk as a successful team shxuld.

SOURCE: <http://www.mlink.com/~dooslar/leader/leadtem.html>



Attributes

- **Transformational Leadership**
 - *Intellectual stimulation* – challenging assumptions, soliciting ideas, taking risks
 - *Inspirational motivation* – articulating future visions
 - *Individualized consideration* – attending/listening to the needs of colleagues (and patients)
 - *Idealized influence* – behaving in a way an individual can identify and possessing shared values

SOURCE: Piccolo RF & Colquitt JA. 2006. Transformational leadership and job behaviors: The mediating role of job characteristics. *Academy of Management Journal*, 49, 327-340.



Attributes

- **Emotional Intelligence¹**
 - Twice as important as technical skills and IQ
 - Essential attribute that must be cultivated in pharmacists²
 - Improves communications skills and professionalism
 - **Critical element in creating a culture of safety³**
 - Five Components:
 - Self-awareness
 - Self-regulation
 - Motivation
 - Empathy
 - Social skill

SOURCES: 1) Goleman D. What makes a leader? *Harv Bus Rev*. 1998; 76:99-102.
2) Nelson MP, Frenk KK, Sacher BY et al. Statement: Including emotional intelligence in pharmacy curricula to help achieve CPE outcomes. *Am J Pharm Educ*. 2015; 79(4):article46.
3) Hammerly ME, Harmon L, Schwartzberg SD. Good to great: using 360-degree feedback to improve physician emotional intelligence. *J Health Manag*. 2014; 59:354-65.



Leadership Excellence Paul Pierpaoli

- “Individual pharmacists need will as well as skill for advancing practice.”
 - “The ultimate determinant of our progress is the strength and persistence of will of each individual practitioner”
- “Leaders and practice innovators from every era of hospital pharmacy have been iconoclasts”- challenging the current state
- Leaders need bilingual skills to effectively navigate organizational priorities and lead the pharmacy enterprise



SOURCES: Pierpaoli PA. <http://harveywhitney.org/lectures.php?lecture=46>
Pierpaoli PA. Management diplomacy: myths and methods *Am J Health Syst Pharm*. February 1, 1987. 44:297-304



Leadership Excellence RADM Pamela Schweitzer

- The first woman to become the USPHS's Chief Pharmacy Officer
- Responsible for providing leadership and coordination of USPHS pharmacy programs and professional affairs for the Office of the Surgeon General and the Department of Health and Human Services
- “My goal is for the profession not to be left behind”
- “We need to inspire and support leadership development among pharmacists to assume leadership in all of its aspects across all programs”



QUOTE: www.ashp.org/menu/News/PharmacyNews/NewsArticle.aspx?Id=4373



Leadership Excellence Burnis Breland

- Learning how to adapt to rapid changes while providing a vision for staff
- Meeting patients' needs, organizational needs, and the needs of other professionals
- Advancing the profession through building a practice model that enables pharmacists to provide safe, effective, and efficient use of medications
- Assuming responsibility for drug therapy outcomes
- Providing optimum clinical value to the patient and economic value to the institution



SOURCE: Adapted from: Breland B D. Believing what we know: Pharmacy provides value. Am J Health-Syst Pharm. 2007; 64:e18-20.

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Pharmacy Strategic Leadership Imperatives

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Pharmacy Strategic Leadership Imperatives



Pharmacy Leadership Strategic Imperatives

IMPROVED PATIENT CARE

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Pharmacy Strategic Leadership Imperatives

- **Patient-Centered Care**
 - Ensure safe and effective medication use in and across all sites of care
- **Interprofessional Care**
 - Respect for each member's role in patient care, "*practice at top of license*"
 - Create new models of care
- **Change Management**
 - Leverage changes in healthcare environment to create new opportunities for pharmacy practice
 - Engage student pharmacists, residents and technicians in piloting new programs and services

SOURCE: Abramowitz PA. The evolution and metamorphosis of the pharmacy practice model. Am J Health-Syst Pharm. 2009; 66: 1437-1446.

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Pharmacy Strategic Leadership Imperatives

- **Optimizing Medication Use**
 - Develop patient-specific comprehensive, inter-professional, and transferable pharmacotherapy plan for each patient
 - Monitor and follow up to ensure therapeutic endpoints and goals are met
 - Involve pharmacists in interdependent prescribing as part of team-based care
- **Reducing Overutilization ("deprescribing")**
 - Develop and implement clinical guidelines
 - Consolidate drug therapy
 - Sustained effort to reduce unnecessary drug use
 - Ensure that the most cost-effective medications are utilized
 - Examples: antimicrobials and opioids, Choosing Wisely*

SOURCES: Abramowitz PA. The evolution and metamorphosis of the pharmacy practice model. Am J Health-Syst Pharm. 2009; 66: 1437-1446.

Choosing Wisely: www.choosingwisely.org

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Pharmacy Strategic Leadership Imperatives

- **Demonstrating Value**
 - $V \text{ (Value)} = Q \text{ (Quality)} + S \text{ (Satisfaction)} / C \text{ (Cost)}$
 - Create Medication Effectiveness Dashboard (MED) of indicators to measure the effectiveness of the medication use system including outcomes, safety, cost and productivity
 - Improving patient experience
- **Prepare for the Future Now**
 - Population health
 - Pharmacogenomics
 - Application of new technology
 - Digitalized/virtual information ("digiceutics")
 - Envision changes to the profession

SOURCE: Wehrwein, P. The New Equation of American health care. Managed Care, Aug 2015, downloaded 3/28/17 from <https://www.managedcaremag.com/archives/2015/8/value-quality-outcomes-cost>

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**Leadership Excellence
Across the Pharmacy Enterprise:
Improving Patient Care**



Leadership Across the Pharmacy Enterprise:

U and I



Pharmacy Practice Model Leadership

Code Sepsis: Improving Sepsis Care; Saving Patients' Lives
Wake Forest Baptist Hospital, NC



Code Sepsis Program
Pharmacist led code-sepsis interventions as part of a team approach

Baseline: Sepsis screen to antibiotic administration:
427 minutes in ICUs

After Code Sepsis Program established:
31 minutes in ICUs

Mortality Index:
1.65% → 0.8%
Saved 200 lives/yr

ASHP 2013 Best Practice Award



Pharmacy Practice Model Leadership

Bundled Approach to Antimicrobial Stewardship
St. Joseph Mercy Health System
Ann Arbor, MI



Antimicrobial stewardship service (Pharmacist led)
First approach to using bundles: C.diff, UTI's, candidemia (all core elements with CDC)

Baseline: Overall bundle compliance at baseline was 38.2%. Patients receiving appropriate duration of therapy was 63.6%

Post-Pharmacy service initiation:
Overall bundle compliance improved to 75% and DOT improved to 88.7%, and a predicted cost avoidance of \$1,056,554.

ASHP 2017 Best Practice Award
<https://www.ashp.org/About-ASHP/Awards/Leadership-Awards/ASHP-Best-Practices-Award/Current-Recipients/Saint-Joseph-Mercy-Health-System>



Pharmacy Practice Model Leadership

Impact of a Pharmacy Transitions of Care Program (PTOC) on 30-day Readmission Rate in a Large Health System
BayCare Health System
Clearwater, FL
14 hospitals
4 counties



PTOC program developed and TOC pharmacists interacted with enrolled patients up to 3 times

Baseline 30-day readmission rate: 14% (2014/2015)

After implementation:
readmission rate 6.9%, 17,259 interventions documented, estimated annual savings \$2.2 million

ASHP 2017 Best Practice Award
<https://www.ashp.org/About-ASHP/Awards/Leadership-Awards/ASHP-Best-Practices-Award/Current-Recipients/BayCare-Health-System>



Pharmacy Practice Model Leadership

Advancing Pharmacy Practice through the Implementation of a Heart Failure Medication Management Clinic
Brookdale Hospital, NY



Heart Failure (HF) Medication Management Clinic
Pharmacist-led HF clinic staffed by interprofessional team

Baseline 30 day HF readmission rate: 29.4%

After HF Clinic established: <3%

ASHP 2012 Best Practice Award



Pharmacy Practice Model Leadership

Impact of an Academic Detailing Service on Opioid Safety Initiative and the Opioid Overdose Education and Naloxone Distribution Program
Veterans' Health Administration
Washington, DC

Academic Detailing Pharmacists

Leadership

Two main initiatives: Opioid Overdose Education and Naloxone Distribution (OEND) and Opioid Safety Initiative (OSI)

Results:

- Implemented successful Naloxone Distribution program for high risk patients.
- Significantly reduced average MEDD.
- Reduced % of patients on high-dose opioids.

ASHP 2017 Best Practice Award
<https://www.ashp.org/About-ASHP/Awards/Leadership-Awards/ASHP-Best-Practices-Award/Current-Recipients/Veterans-Health-Administration-Pharmacy>

Comprehensive Models of Pharmacy Leadership: Veteran's Health Administration (VA)

VA is the largest integrated health care system in the United States

- 1,233 health care facilities, 168 medical centers
- Serves more than 8.9 million patients a year
- Pharmacy Services
 - Approx 9000 pharmacists, 600 residents/fellows, 4,500 technicians
 - Approx 3600 clinical pharmacy specialists with scopes of practice to manage multiple chronic disease states
 - One CPS for every three patient panels in primary care

SOURCES: <http://www.va.gov/health/about/vsa.asp>
http://pharmmeeting.ahpharmacol.com/online/default/files/collec/leader%20Pharmacy%202016%20-%20%20Senior%20leader%20%20809%2099%20Respective_handout2.pdf

Comprehensive Models of Pharmacy Leadership: Veteran's Health Administration (VA)

- Pharmacists are credentialed based on licensure, post-graduate training, experience
- Privileges are granted at the facility level and provide authorization to provide patient care services
- Extensive primary care provided, but also have clinical pharmacy specialists in many outpatient settings including: endocrinology, cardiology, infectious diseases, mental health, hepatology and pain management, etc.

SOURCES: VHA Handbook 2015. Downloaded 3/28/17 from: http://www.va.gov/vhapublications/ViewPublication.asp?pub_id=3120

Comprehensive Models of Pharmacy Leadership: Veteran's Health Administration (VA)

VHA directive defines process for determining Scope of Practice for pharmacists who provide direct patient care, which includes:

Initiating, continuing, discontinuing, and modifying therapy	Developing and documenting the therapeutic plans—utilizing the most effective, least toxic, and most economical medication treatments	Evaluating drug therapy and patient's response	Conducting order consultations with other health care providers
Ordering, performing and reviewing lab tests that are necessary to support drug therapy	Obtaining health and drug histories	Providing patient and health care professional education	

SOURCES: http://www.va.gov/vhapublications/ViewPublication.asp?pub_id=3732
<http://www.ashp.org/menu/News/Pharmacy/News/NewsArticle.aspx?id=4055&hash=ABVooVM.douf>

Comprehensive Models of Pharmacy Leadership: Kaiser Permanente

- One of the nation's largest, not-for-profit, non-governmental health plans, serving over 10 million members via 38 hospitals and 618 clinics
- Interprofessional healthcare teams with pharmacists in inpatient, ambulatory and home care settings

SOURCES: <http://www.ashpmedia.org/amcare14/Defining-and-Advancing-Ambulatory-Care-Pharmacy-Practice.pdf>
<http://share.kaiserpermanente.org/article/fast-facts-about-kaiser-permanente/>
http://www.ashpadvantage.com/bestpractices/2002_papers/helling.htm


Comprehensive Models of Pharmacy Leadership: Kaiser Permanente

- Beginning in 1992, Kaiser Colorado established model for advanced pharmacy practice
 - Clinical Pharmacy Anticoagulation Service established in 1996, one of the largest in the nation
 - Specialty clinical pharmacy services: asthma, diabetes, nephrology, cardiology/heart failure diseases, international travel, long term care
 - Established Clinical Pharmacy Call Center to support nurses with medication-related questions

SOURCES: <http://www.ashpmedia.org/amcare14/Defining-and-Advancing-Ambulatory-Care-Pharmacy-Practice.pdf>
<http://share.kaiserpermanente.org/article/fast-facts-about-kaiser-permanente/>
http://www.ashpadvantage.com/bestpractices/2002_papers/helling.htm

Putting it All Together

- Leadership is a continuous learning process
- Individual performance impacts institutional/organizational performance
- Focused and effective leadership is central to pharmacy practice advancement:
 - At the bedside
 - In the pharmacy
 - In the clinic
 - In the administrative office
- Pharmacists must be adequately prepared to take on the leadership roles that will:
 - Help drive practice change
 - Optimize patient care across the entire spectrum of care




A Dozen Stimulating Yet Different Perspectives on Leadership

Use Them to Help You Develop Your Style

Effective

A leader is best when people barely know he/she exists, when his/her work is done, his aim fulfilled, they will say: we did it ourselves.

Lao Tzu



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Visionary

Leadership is lifting a person's vision to high sights, the raising of a person's performance to a higher standard, the building of a personality beyond its normal limitations.

Peter Drucker



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Wise

The best executive is the one who has sense enough to pick good men/women to do what he/she wants done, and self-restraint enough to keep from meddling with them while they do it.

Theodore Roosevelt



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Inspiring

A leader takes people where they want to go. A great leader takes people where they don't necessarily want to go, but ought to be.

Rosalynn Carter




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Motivational

Outstanding leaders go out of their way to boost the self-esteem of their personnel. If people believe in themselves, it's amazing what they can accomplish.

Sam Walton



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Results-Driven

Leaders think and talk about the solutions. Followers think and talk about the problems.

Brian Tracy

SOURCE: <http://www.forbes.com/sites/kevinkruse/2012/10/16/quotes-on-leadership/>



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Mediator

Great leaders are almost always great simplifiers, who can cut through argument, debate, and doubt to offer a solution everybody can understand.

Gen. Colin Powell

SOURCE: <http://www.forbes.com/sites/kevinkruse/2012/10/16/quotes-on-leadership/>



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Dream-Catcher

If one is lucky, a solitary fantasy can totally transform one million realities.

Maya Angelou

SOURCE: <http://www.forbes.com/sites/kevinkruse/2012/10/16/quotes-on-leadership/>




A Dozen Stimulating Yet Different Perspectives on Leadership
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Leader vs. Manager

Management is about arranging and telling. Leadership is about nurturing and enhancing.

Tom Peters

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Clear Direction

Management is efficiency in climbing the ladder of success; leadership determines whether the ladder is leaning against the right wall.

Stephen Covey

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Leadership Essentials

There are three essentials to leadership: humility, clarity and courage.

Chan Master Fuchan Yuan

SOURCE: <http://www.forbes.com/sites/kevinkruse/2012/10/16/quotes-on-leadership/>




A Dozen Stimulating Yet Different Perspectives on Leadership

Use Them to Help You Develop Your Style

Leader vs. Manager	Clear Direction	Leadership Essentials	Integrity
<p>Management is about arranging and telling. Leadership is about nurturing and enhancing.</p> <p>Tom Peters</p>	<p>Management is efficiency in climbing the ladder of success; leadership determines whether the ladder is leaning against the right wall.</p> <p>Stephen Covey</p>	<p>There are three essentials to leadership: humility, clarity and courage.</p> <p><i>Chan Master Fuchan Yuan</i></p>	<p>The supreme quality of leadership is integrity.</p> <p>Dwight Eisenhower</p>


SOURCE: <http://www.forbes.com/sites/kevinkruse/2012/10/16/quotes-on-leadership/>



Post-Assessment Questions

1) Great pharmacy leaders:


- Turn performance and creativity into improved patient care outcomes
- Are constructively dissatisfied
- Capitalize on uniqueness
- Hold individuals and teams accountable and celebrate their successes
- All of the above



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- Are constructively dissatisfied
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- Hold individuals and teams accountable and celebrate their successes
- All of the above**



Post-Assessment Questions

2) Disruptive Innovation is a process by which a product or service begins with simple applications at the bottom of a market and then aggressively moves up the market, eventually displacing established competitors.


- True
- False



Post-Assessment Questions

2) Disruptive Innovation is a process by which a product or service begins with simple applications at the bottom of a market and then aggressively moves up the market, eventually displacing established competitors.


- True**
- False



Post-Assessment Questions

3) Which pharmacy leader co-founded The Bulletin of the ASHP, which in 1958 became the *American Journal of Hospital Pharmacy (AJHP)*?

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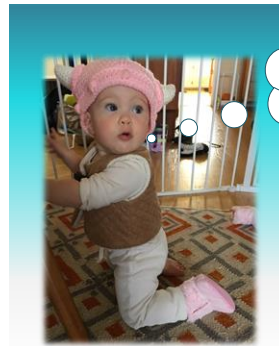
Post-Assessment Questions

- 4) Attributes of transformational leadership include all except:
- a) Idealized influence
 - b) Intellectual perception
 - c) Inspirational motivation
 - d) Individualized consideration



Post-Assessment Questions

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When I grow up,
I want a
pharmacist on
my healthcare
team!

