

1. Please rate your level of agreement or disagreement with the following statements concerning TSHP, with "1" meaning STRONGLY DISAGREE and "5" meaning STRONGLY AGREE.

	1	2	3	4	5	N/A	Response Average
a. TSHP understands and meets my needs.	3% (2)	6% (4)	38% (27)	32% (23)	21% (15)	1% (1)	3.63
b. TSHP provides relevant and timely information.	1% (1)	4% (3)	29% (21)	43% (31)	21% (15)	1% (1)	3.79
c. TSHP communicates information effectively.	1% (1)	10% (7)	21% (15)	46% (33)	21% (15)	1% (1)	3.76
d. TSHP affords ample leadership opportunities.	3% (2)	6% (4)	25% (18)	26% (19)	36% (26)	4% (3)	3.91
e. TSHP meets my CE needs.	7% (5)	10% (7)	29% (21)	26% (19)	25% (18)	3% (2)	3.54
f. TSHP effectively advances pharmacy practice.	6% (4)	6% (4)	24% (17)	39% (28)	25% (18)	1% (1)	3.73
g. TSHP successfully disseminates information about pharmacy to the public.	3% (2)	17% (12)	49% (35)	18% (13)	12% (9)	1% (1)	3.21
h. TSHP provides networking opportunities that meet my needs.	4% (3)	14% (10)	29% (21)	31% (22)	21% (15)	1% (1)	3.51
i. TSHP provides me ample opportunities for involvement.	3% (2)	6% (4)	26% (19)	29% (21)	32% (23)	4% (3)	3.86
						Total Respondents	72
						(skipped this question)	2

2. Comments regarding your responses above:

Total Respondents **13**
(skipped this question) **61**



3. What do you think should be the top two priorities for TSHP this next year?

Total Respondents **34**
(skipped this question) **40**

4. What roundtable topic would you like to see covered at the upcoming Annual Meeting?

Total Respondents **24**
(skipped this question) **50**

5. Would you be willing to lead a roundtable group for this topic?

	Response Percent	Response Total
Yes 	5.1%	2
No 	94.9%	37
Total Respondents		39
(skipped this question)		35







6. Please rate your overall satisfaction with TSHP, with "1" meaning VERY DISSATISFIED and "5" meaning VERY SATISFIED.

	1	2	3	4	5	N/A	Response Average
Overall Satisfaction:	2% (1)	4% (2)	32% (16)	28% (14)	32% (16)	2% (1)	3.86
Total Respondents							50
(skipped this question)							24




7. In what ways can TSHP better meet your professional and educational needs?

Total Respondents	14
(skipped this question)	60

8. What other pharmacy associations do you belong to?

	Response Percent	Response Total
APhA 	22.7%	10
ASHP 	79.5%	35
ACCP 	18.2%	8
AMCP 	4.5%	2
Local District or Society 	43.2%	19
Other (please do not list TSHP or TPA) 	15.9%	7
Total Respondents		44
(skipped this question)		30



9. Who is generally responsible for paying your membership dues?

	Response Percent	Response Total
You only 	58.5%	31
Your employer only 	22.6%	12
		

You and your employer 18.9% 10

Total Respondents 53
 (skipped this question) 21

10. Are you a current (2005 or 2006) member of TSHP?

	Response Percent	Response Total
Yes 	80%	44
No 	20%	11
Total Respondents		55
(skipped this question)		19

11. How long have you been a TSHP member?

Total Respondents 40
 (skipped this question) 34



12. How likely are you to renew your membership? ("1" means VERY UNLIKELY and "5" means VERY LIKELY.)

	1	2	3	4	5	Response Average
Likelihood:	2% (1)	2% (1)	12% (5)	10% (4)	73% (30)	4.49
Total Respondents						41
(skipped this question)						33

13. Please explain.

Total Respondents 7
 (skipped this question) 67

14. Have you ever been a member of TSHP?

	Response Percent	Response Total
Yes 	54.5%	6
No 	45.5%	5
Total Respondents		11
(skipped this question)		63

15. How likely are you to join TSHP? ("1" means VERY UNLIKELY and "5" means VERY LIKELY.)

1	2	3	4	5	Response Average
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Likelihood:	18% (2)	45% (5)	27% (3)	9% (1)	0% (0)	2.27
	Total Respondents					11
	(skipped this question)					63











16. If you are not currently a member of TSHP and are not planning to join, please explain why not.

Total Respondents	7
(skipped this question)	67

17. Through which method(s) do you have access to receive information at work and at home? (Check all that apply.)







	Work Access	Home Access	Respondent Total
Fax	92% (34)	22% (8)	37
CD-ROM	94% (30)	91% (29)	32
Email	82% (42)	88% (45)	51
Internet	88% (42)	92% (44)	48
	Total Respondents		51
	(skipped this question)		23

18. Which of the following best describes your work setting? (Check one.)







	Response Percent	Response Total
Community (not for-profit) hospital 	37.3%	19
Nursing home, skilled care, sub-acute or long-term care facility 	3.9%	2
University hospital 	3.9%	2
For-profit hospital 	15.7%	8
Government hospital 	7.8%	4
Home care organization 	2%	1
Teaching hospital 	11.8%	6
College or university	0%	0
Integrated health system 	3.9%	2
Pharmaceutical industry 	2%	1
HMO	0%	0
Community pharmacy 	2%	1
Pharmacy benefit management firm	0%	0

Government agency	0%	0
Other (please specify) 	9.8%	5
Total Respondents		51
(skipped this question)		23




19. How long have you been a practicing pharmacist?



	Response Percent	Response Total
2 years or less 	2%	1
Between 2 and 5 years 	2%	1
Between 5 and 10 years 	7.8%	4
Between 10 and 20 years 	19.6%	10
Between 20 and 30 years 	41.2%	21
More than 30 years 	27.5%	14
Total Respondents		51
(skipped this question)		23

20. What is your primary position? (Please select the one most descriptive.)



	Response Percent	Response Total
Administrator 	3.9%	2
Director/Assistant Director 	43.1%	22
Manager/Supervisor 	9.8%	5
Clinical Pharmacist 	7.8%	4
Staff Pharmacist 	25.5%	13
Faculty	0%	0
Resident	0%	0
Student	0%	0
Other (please specify) 	9.8%	5
Total Respondents		51
(skipped this question)		23

21. Contact Information (OPTIONAL):

	Response Percent	Response Total
Name 	100%	10
Employer 	100%	10
Work Phone 	90%	9

Work Fax		70%	7
E-mail		90%	9
Total Respondents			10
(skipped this question)			64

22. Are you willing to serve on a committee? (If so, please be sure your contact information is included above, OR contact Jeanne Ezell at jezell@bmnet.com or 865-977-5536.)

		Response Percent	Response Total
Yes		40.6%	13
No		59.4%	19
Total Respondents			32
(skipped this question)			42

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2. Comments regarding your responses above [Comments regarding question 1, "Please rate your level of agreement or disagreement with the following statements concerning TSHP"]:

1. n/a
2. I don't know the benefits of TSHP because I have not ever been told about it. I have heard extensively about the benefits of being a TPA member but being a Federal Hospital Pharmacist, none of it applies to me. I don't see value represented in membership dues I would have to pay to effectively join two organizations. I might have interest in TSHP if it were promoted more heavily because not everyone is a chain pharmacist (no disrespect as I have done that as well). I do realize there are important aspects to TPA such as lobbying but the general attitude of the representatives of the organization has been very discouraging to my membership.
3. I donot see any information to the public in local newspapers from TSHP. If ample leadeship opportunities are made availabe,
4. The seperate TSHP meetings from the TPA annual meetings seem to work better for me.
5. I think tshp could do more to advance the practice of pharmacy in the state.
6. If there is a better, more effective state pharmacist association, I would like to know where! I do not see how Baeteena does everything she does. Every member should express his/her appreciation to her for the job that she does.
7. The networking opportunities decreased for me when the meetings were moved to areas outside the state. I think the meetings in Nashville were centrally located and allowed folks from many areas to attend. Having it in Memphis was great for me, but someone in Knoxville has a long way to travel for the meeting.
8. TSHP should hold CE programs in different parts of State. THSP Should consider forming Leadership group in different segments of the state. Opportunities are available for involement but they are not publicised to all practioners in the state unless they attend the meeting or look at meeting registration form
9. I miss the TSHP annual meeting that we used to have. It was replaced by the current "Mid-year" meeting, but this one does not have the same format as our old TSHP mtgs. used to & does not interest me. As far as TSHP/TPA committees go, I rarely if ever hear from any chairpersons of the committees I'm placed on. In fact, I usually only find out that I'm on a committee by seeing my name on a list in the TN Pharmacist magazine/ e-newsletter.
10. I live in Ohio.
11. I would still like to see a one day seminar in the spring that is not scheduled around the mid year meeting.
12. TSHP has not been able to meet CE needs as well as we did before we combined our annual meetings TSHP could foster and encourage more communications to the public
13. My CE needs are met by ASHP Midyear Clinical Meeting and also the FSHP annual meeting where I get my AIDS and MED ERRORS requirement for Florida.

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3. What do you think should be the top two priorities for TSHP this next year?

1. Continuing advancement of Pharmacy Membership in the organization
2. 1. Publish the results of this survey to verify with members that it is complete. then, 2. Begin the first step in implementing the changes you propose from the survey.
3. membership continued networking efforts
4. 1. professional tax 2. Pharmacy automation in hospitals
5. Tenn Care USP 797
6. Not actively involved currently.
7. 1. Increasing Membership 2. Providing timely information on safe medication use in health system
8. ALWAYS NEW DRUGS. IT IS VERY HARD TO KEEP UP WITH THE BOMBARDMENT OF NEW DRUGS.. HOW CAN YOU KNOW EVERYTHING?
9. Finding value added activities for pharmacists to want to join
10. helping hospital pharmacists with medication reconciliation; getting more health system pharmacists involved in the organization and working together on issues of interest/importance
11. active recruitment of current retail pharmacist into possible opportunities into hospital pharmacy jobs. A greater opportunity for live CEU which is related to hospital pharmacy & tech fields.
12. TennCare Legislative Issues
13. Medication Therapy Management Medication Reconciliation
14. 1. establish relevancy to hospital/health-system practitioners. 2. communicate more effectively with members.
15. 1. Medication Safety - Medication Reconciliation processes 2. Work with pharmacy schools to establish training, rotations, preceptors,...
16. 1. Membership recruitment and retention 2. Continue pharmacists education and requisite funding issues.
17. Communication and practice advancement
18. To work with Glen Farr & the UT C.E. office to figure out ways of communicating to pharmaceutical companies on how they are misinterpreting the new PHARMA CE guidelines. To work with the local districts to find more sponsors for local LIVE-CE programs for those who cannot or do not have the time or resources to attend TPA meetings far away.
19. Increasing membership
20. JCAHO surveys Reconciling medication issues & solutions
21. TNCare changes.
22. I am not sure if I receive any messages from TSHP. I primarily receive them from TPA.
23. Implementation of Medicare Part D Continued surveillance of TennCare Rx drug benefit
24. JCAHO updates and guidelines.
25. CPOE and bedside scanning implementation
26. JCAHO, Part D, CMS

- 27.** Explaining the new Medicare Rx programs. Influence with TennCare formulary.
- 28.** What can we do to help TennCare patients that are no longer covered when they have exhausted their program resources. As an example, some psych patients need their meds adjusted more than 5 times within the same month-- some need changing to different drugs or different doses making them go over their limit of 5 medications/month.
- 29.** Improve the image of Pharmacist as valuable members of the health care team.
- 30.** USP 797 Medication Therapy Management
- 31.** 1. Incorporate information that would attract more persons to attend the annual meeting. 2. Analyze and react to the information obtained from this survey.
- 32.** #1 networking with other pharmacies about JCAHO issues such as Medication reconciliation and national patient safety goals. #2 would be technology such as barcoding, E-mar and CPOE and issues involving unit dose packaging of drugs/
- 33.** Idea implementation to help us meet JCAHO patient safety standards regarding Medication Reconciliation. We need to work with the retail sector to accomplish this.
- 34.** Education and updates

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4. What roundtable topic would you like to see covered at the upcoming Annual Meeting?

1. Medicare Part D testimonial from someone performing patient encounters.
2. new drugs, therapies
3. hospital responses to higher salaries and automation in the pharmacy
4. USP 797
5. Unaware
6. 1. JCAHO initiatives 2. Medication Reconciliation 3. Board Update 4. Barcode Technology 5. Look-alike, Sound-alike drugs
7. SURGERY PHARMACIES: HANDLING NARCOTICS WITH CRNA'S, USE OF DISPENSING MACHINES, AFTER HOURS MEDICATIONS, COMPOUNDING ON SITE FOR NEEDS IN THE SURGERY SUITES, LUNCH/DINNER RELIEF FOR THE ONLY PHARMACIST ON DUTY IN SURGERY...
8. improving reimbursement for expensive medications used for inpatients and outpatients
9. Possible ways to attract pharmacy students to hospital sector for future job opportunities. Show possible PRO's of hospital job as they leave school and possible CON'S to retail.
10. Medication Reconciliation Medication Therapy Management and Medicare Part D USP 797 DVT Prophylaxis Pharmacist Involvement in meeting CMS indicators - AMI, CHF, Surgical Infection Prevention,...
11. 1. Medication Reconciliation 2. Recent JCAHO inspections
12. Medication reconciliation (How to accomplish this in the most efficient and effective way for all areas of the hospital)
13. More clinical/patient-therapy based topics
14. USP 797...from somebody who has renovated their IV room.
15. USP 797 impact on pharmacy
16. Med reconciliaion in problematic areas ie radiology
17. Bedside medication verification Implementing USP 797
18. Impact of TennCare changes and prevention of TennCare fraud.
19. Is there an organized way to help indigent patients or those without any insurance and limited resources? We have some pharmaceutical industry assistance but are additional methods needed and "thinking out of the box" what might they be?
20. Medication Therapy Management
21. Best palm pilot for the money for pharmacists and best software to use.
22. Technology
23. Best practices that are doable for small facilities.
24. JCAHO standards and NPSGs

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7. In what ways can TSHP better meet your professional and educational needs?

- 1.** Find and use ways to let the organization be run even more by the members, and to have someone in the TPA office who is engaged with this practice type and is our sponsor.
- 2.** continue to provide relevant educational needs develop system for job opportunity networking
- 3.** Stated previously
- 4.** Many Pharmacists I talked to don't know that the website is available. It is important that the site is publicised.
- 5.** get more people sharing info at meetings and on the listserv
- 6.** KEEP THIS QUESTION OUT THERE ENOUGH TO GET GOOD INPUT FROM OUR MEMBERSHIP. thanks.
- 7.** See #3 & #4 above.
- 8.** By having the convention somewhere in the state. The trips to Florida just aren't possible for most hospital Pharmacists. When it is in the state then our hospital can justify sending 5 - 10 Pharmacists vs 0 when it is out of state.
- 9.** Not sure.
- 10.** Has a listserv been considered?
- 11.** More hospital programs at the annual meeting
- 12.** Send out newsletter to all pharmacists in TN, member or not to show them State pharmacy events, information on timely issues and even CE meetings at overnight destinations that could be tax deductible. Only include the first few lines of articles or issues so that the reader, if not a member, would be disappointed at not being able to read the issues if not accessible to non-members.
- 13.** Use venues other than in Nashville
- 14.** Have more opportunities locally because it is so hard to take time off to go to Nashville.

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11. How long have you been a TSHP member?

1. 20 plus years
2. 19 yrs
3. over 15 years - don't know
4. 20 years
5. since 1976
6. 13 years
7. OVER 25 YEARS
8. *10 years
9. 8 years
10. 15 years
11. 5 tears
12. 5 years
13. 5 years
14. five years
15. 1977
16. 4 years
17. 15 years
18. currently 3+ yrs/previously 10+ yrs.
19. off and on for 22 yrs
20. 16 yr
21. Not sure
22. since graduation (25yrs)
23. 12 yrs or more (15 yrs as TPA member)
24. years and years
25. at least 10 years
26. 11 yrs
27. 7 years
28. 20 yrs
29. 31 years
30. 25 years

- 31.** *15 yrs
- 32.** 25+ years
- 33.** 20 years
- 34.** 1 year
- 35.** 30 years
- 36.** 10 yrs or more
- 37.** 10+ years
- 38.** 16y
- 39.** 3 years
- 40.** 4 months

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13. Please explain [comments regarding question 12, "How likely are you to renew your membership?"]:

1. TPA has always been very helpful & very informative- thanks!
2. I want to support the work of the organization and so does my employer.
3. I believe all professionals should participate in their professional organizations
4. I will always joy TPA in the area which currently working. Occasionally will join other Pharmacy groups.
5. For better or worse, I believe as practitioners we should be members of at least our state association and, when provided, a member of the group of that association that represents our current practice area.
6. I understand the importance of representation in the legislature. If I can't be in Nashville to have my voice "heard", I know that by supporting the association, it will be "heard".
7. TPA/TSHP dues are high -- higher than any of the national organizations

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16. If you are not currently a member of TSHP and are not planning to join, please explain why not.

1. my schedule does not allow me to go to tshp events.
2. Stated previously as well
3. TIGHT BUDGET
4. Expense
5. Do not feel we get any representation as a whole for in the medical community for our dues etc . Why are we still paying professional dues when nurses are not plus it was doubled , or on the hand why are they not paying them when cosmeticians are ? What real service has the TPA or TSHP given to the TN pharmacist in the past 10 years ?
6. Mostly time --just having a conference call every month in addition to other on-site meetings would be helpful.
7. Expense with little perceived benefit