

## **The Importance of Committing to Pursuit of Your Clinical Activities Through Collaborative Practice Agreements**

Many clinical pharmacists who practice in clinic settings have decided to ignore the collaborative practice laws and regulations. They practiced clinically in a sheltered outpatient environments before the passage of the collaborative practice legislation. The Attorney General offered an opinion that this was probably okay. So, they pursue business as usual. After all, why should they spend the time and energy to “jump” through the collaborative agreement and protocol “hoops.”

I’m not a lawyer, but I served eight years on the Board of Pharmacy and have worked with assistant attorneys general both there and within state government. What I’ve learned from these experiences worries me. It tells me that if collaborative practice is not supported, the law that permits it will be taken away. If a law is taken away, it is interpreted differently than if the law never existed. Those of you who practice in an institutional environment and ignore the collaborative practice laws and regulations are practicing in a context that no longer exists.

The Office of the Attorney General and the Board of Pharmacy realize that the Legislature never made a rule about collaborative practice in an outpatient institutional environment. So, the Attorney General’s office said, “There is no law against it and there are safeguards so we’re going to let it go.” However, now there are laws and regulations.

So what happens if the Legislature takes away collaborative practice? In that case, the Legislature is actively saying, “Pharmacists cannot practice collaboratively in an outpatient environment.” Since the Legislature has then expressed an opinion, the only way the Board of Pharmacy and its legal counsel can interpret this is to say no collaborative practice can take place in any environment. This means that institutionally based outpatient collaborative practice in the form of anticoagulation/diabetes/lipid/smoking cessation/et cetera clinics that were ignored by the Board under the institutional umbrella, might then be viewed as illegal.

How do we stop this from happening? Pharmacists in Maryland who practice collaboratively in an outpatient environment must embrace the requirements of collaborative practice, collect the data required by the Board of Pharmacy and demonstrate the success of the legislation to the Legislature. There are protocols and leaders and resources in place to assist you.

If you don’t embrace collaborative practice according to the laws and regulations of the State and Board of Pharmacy, your long term ability to practice clinically in an outpatient setting could be endangered.

The Board of Pharmacy is charged with presenting data to the Legislature in November 2007, but is seeking an extension. Join these efforts now. Both your practice and future opportunities for you and other pharmacists are at stake.