Research Agenda

Core Principles and Priority Research Areas

As the philanthropic arm of ASHP, the Foundation shares ASHP’s vision that medication use will be optimal, safe, and effective for all people all of the time. The ASHP Foundation will support ASHP by advancing the professional practice of the pharmacy workforce by funding research that changes the paradigm of care.

The Core Principles and Priority Research Areas is a framework to guide the Foundation’s support of research. The framework was developed by the Research Advisory Council and approved by the ASHP Foundation Board following stakeholder engagement. Core Principles are meant to be at a strategic level while Priority Research Areas will evolve.

Core Principles

Optimize medication-related processes and outcomes to improve patient and population health.

- Contributes to value-based care, including promoting equity and access to quality care and improves outcomes (e.g., patient-centered, efficiency, sustainability).
- Aligns with and has the potential to influence healthcare policies and priorities of government, payers, and organizations.

Demonstrate the impact of pharmacy practice innovation.

- Evaluates innovations that impact safe and effective medication-related care and outcomes for patients or enhance the efficiency and/or sustainability of healthcare.
- Assesses established or new models of patient centered, team-based care that optimally deploy all members of the pharmacy workforce.

Accelerate implementation in practice and policy.

- Contributes to practice expansion, standardization and optimization in models that are generalizable and sustainable.

Enhance the capacity to engage in outcomes-focused research.

- Contributes to the development of metrics and measures that demonstrate pharmacy’s impact on patients, populations and organizations/systems.
- Builds the infrastructure or supports the training and development of pharmacy researchers and other stakeholders.
Priority Research Areas

**Continuum of Care** (e.g., community pharmacy triage, home infusion, hospital-at-home, in-home care, post-acute, telepharmacy, transitions of care, transition to home, urgent care, virtual care)

**Diversity, equity and inclusion** (e.g., patient care access and delivery, pharmacy education and training, pharmacy leadership)

**Emergency preparedness** (e.g., natural disasters, pandemics)

**Environmental/climate impacts** (e.g., drug disposal, drug quality/stability, impact of regulations)

**Healthcare Disruptors** (e.g., mergers/acquisitions, fiscal/coverage/policy changes, hospital/pharmacy closures, non-traditional delivery, vertical/horizontal integration)

**Infectious Diseases** (e.g., antimicrobial stewardship, antimicrobial and antiviral safety and optimization, non-infectious outcomes, resistance prevention, vaccines and immunization)

**Medication Stewardship** (e.g., antimicrobials, opioids, pharmacogenomics, preserving supply during drug shortages)

**Operations, Procurement and Payment Models** (e.g., 340B, access to essential medicines, biosimilars, extending expiration dates, drug pricing and affordability, drug shortages, formulary management, provider status and payment, specialty pharmacy, site of care, supply chain resilience)

**Patient-Centered Care** (e.g., adult and pediatric patients, comprehensive medication management, medication adherence, patient education and engagement, personalized medicine, shared decision-making)

**Pharmacy Workforce and Environment** (e.g., building the interprofessional team, cultural competency, impact of regulations, new educational models, pharmacy technician training and career opportunities, residency training, research and leadership skill enhancement, workforce burnout and well-being, workforce shortages)

**Primary Care and Community Engagement** (e.g., community/public education, mental health, vaccination clinics, vaccine hesitancy, wellness)

**Scope of Practice** (e.g., credentialing and privileging, prescribing)

**Social Determinants of Health and Health Equity** (e.g., environmental influences, access to transportation/food/housing, underserved areas, vulnerable populations)

**Substance Use Disorders and Treatment**

**Technology Solutions and Informatics** (e.g., artificial intelligence, cybersecurity, data analytics, digital solutions, diversion monitoring, interoperability, privacy, telehealth, telepharmacy, virtual care)