## Psychiatric pharmacy practice sites: Continuously evolving to meet patients' needs

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## **KEYWORDS**

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The field of psychiatric pharmacy has continuously advanced for the past few decades with origins dating back to the 1960s and 1970s. Historically, psychiatric pharmacists practiced in traditional settings such as private or academic hospitals, Veteran's Affairs hospitals, mental health clinics, pharmaceutical industry, and academia. However, psychiatric pharmacists' training and expertise in neuropsychiatric medications make them ideally suited to work in a wide variety of clinical settings. Their pharmacotherapy knowledge regarding both medical and psychiatric medications allows them to proficiently serve in capacities unique among healthcare professionals.

At present, there are over 1500 members of the College of Psychiatric and Neurologic Pharmacists (CPNP) and over 800 pharmacists board certified in psychiatric pharmacy (BCPP).2 Outside of the typical practice sites for psychiatric pharmacists, new opportunities are frequently being developed. Various descriptions of practice sites have been published, including primary care clinics, assertive community treatment teams, clozapine clinics, and indigent care clinics.<sup>3-7</sup> Additionally, innovative opportunities for professional advancement and reimbursement such as medication management, collaborative drug therapy management, and comprehensive medication management have become more commonplace.8-9

As healthcare reform continues to impact healthcare organizations and professionals, psychiatric pharmacists should continue to look for untapped opportunities to improve clinical and economic outcomes. Finding niches, gaps in care, or other unique ways to impact patient care will continue to be crucial as the profession of psychiatric pharmacy moves into the future and works toward obtaining provider status.

The November 2014 issue of the Mental Health Clinician is devoted to highlighting a number of unique and innovative psychiatric pharmacy practice sites.

Descriptions of clinics and integral roles of psychiatric pharmacists within a Hepatitis C Clinic and an integrated behavioral health clinic will be presented. Other direct patient care practices will be highlighted including psychiatric pharmacists serving in a medical emergency department, a healthcare home, and a federally qualified health center targeting transitions in care. Pharmacists' roles in other nontraditional settings including information services/publishing and a statewide managed care organization will also be included. Last, a toolbox outlining tips for establishing psychiatric pharmacy practice sites will be presented.

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