Director's Forum

Profiles in Leadership: Donald E. Francke, MSc, DSc (Hon)

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The *Director's Forum* series is designed to guide pharmacy leaders in establishing patient-centered services in hospitals and health systems. August 2013 marked the 50th anniversary of the publication of the *Mirror to Hospital Pharmacy*, the results of a federally funded comprehensive study of pharmacy services in the United States. The late Don E. Francke, MS, DSc, was the lead author of the *Mirror* and the principal investigator for the US Public Health Service grant W-45. To celebrate the anniversary of the *Mirror*, the *Director's Forum* is profiling the leadership styles of Drs. Latiolais and Francke. September's article highlighted Dr. Clifton J. Latiolais; this month's *Director's Forum* reviews Dr. Francke's biography and key career accomplishments, describes his leadership philosophy, and translates that philosophy to today's health care challenges. Don's influence on health system pharmacy serves as an example of effective leadership. This historical perspective provides directors of pharmacy a valuable leadership view as they develop strategies to enhance patient-centered pharmacy services.

August 2013 marks the 50th anniversary of the publication of the *Mirror to Hospital Pharmacy*.¹ The genesis and importance of this iconic text was reviewed in the September 2013 article of the *Director's Forum*. In summary, the *Mirror* recommended sweeping changes to hospital pharmacy in the following areas: direct professional functions; advisory and teaching functions; space, equipment, and manpower; administrative services; and the role of professional societies. The *Mirror* also had a strong message for hospital pharmacy in 1963: Both the philosophy and actual practice of hospital pharmacy must change. Drs. Francke and Latiolais, two of the co-authors of the *Mirror*, also stressed unity among hospital pharmacists as to the long-term vision of hospital (now health system) pharmacy practice.

Leader, educator, advocate, pharmacist, editor, idealist, creative thinker, innovator – these are all words that have been used to describe Donald Eugene Francke. Francke is widely recognized as one of the most influential figures in the practice of pharmacy in the United States and the world. He has been lauded with such distinguished terms as “pharmacy's Man of the Century,” and the “Conscience of Pharmacy.”^{2,3}

His legacy in pharmacy lives on 35 years after his death through his passion, his work, and his groundbreaking ideas, which still resonate throughout the pharmacy community. Dr. Francke once said, “Anniversaries are vantage peaks on the eternity of time – peaks from which we can look backward, view the present and perceive the future.”¹ Now, in the 50th anniversary of the groundbreaking book that he co-authored, *Mirror to Hospital Pharmacy*, we reflect on the man behind those words.

The goal of this article is to profile the leadership of Don Francke by reviewing his biography and key career accomplishments, describing his leadership philosophy, and translating that philosophy to today's health care challenges. This historical perspective on Dr. Francke's leadership provides current pharmacy leaders a valuable viewpoint as they develop strategies to enhance patient-centered pharmacy services.

BIOGRAPHY AND PROFESSIONAL CAREER

Biography

Donald E. Francke immersed himself in the pharmacy profession at an early age. Born in Athens, Pennsylvania, in 1910, he spent many hours at the pharmacy owned by his father.⁴ Francke left home to

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attend the University of Michigan (UM) in Ann Arbor, graduating in 1936 with a Bachelor of Science in pharmacy. While studying at the University of Michigan, Francke worked at the UM Medical Center under another legendary figure in pharmacy, Harvey A.K. Whitney, Sr. Dr. Whitney trained and enabled Francke to achieve one of the most prolific and influential pharmacy careers in the last century. After completing his degree at UM, Francke enrolled in graduate school at Purdue University; he returned to Michigan and earned a Master of Science in Pharmaceutical Science at UM. Don was awarded honorary doctorate degrees (DSc) at Purdue University (1951) and The University of Michigan (1967).⁴

Professional and International Career

In 1942, Dr. Francke provided significant input in the formation of the American Society of Health-System Pharmacists (ASHP; first called the American Society of Hospital Pharmacists). He served as president of ASHP from 1942 to 1946.⁵ In 1944, Dr. Francke succeeded Harvey Whitney, Sr. as the Director of Pharmacy at UM and served in that role until 1963.⁴ During that time, Don was actively involved in a variety of important professional activities. He became the secretary of the Pharmacy & Therapeutics Committee at the UM Medical Center in 1944, served as the 98th President of the American Pharmaceutical Association, and assumed editorship of the *Bulletin of the American Society of Hospital Pharmacists* (now called the *American Journal of Health-System Pharmacy*). He served as a member of several pharmacy organizations including the Michigan Board of Pharmacy, the Revision Committee of the *United States Pharmacopeia*, the US Public Health Service, the American Hospital Association, the American Association of Colleges of Pharmacy, and the American Association for the Advancement of Science, along with many others.² He served as a consultant to the Veterans Administration, the Surgeon General of the Army, and the World Health Organization. He was also a lecturer at the University of Michigan School of Nursing and an esteemed professor at the Michigan College of Pharmacy.^{2,5}

In 1963, Francke left Ann Arbor to become the head of the Department of Scientific Services of ASHP in Washington, DC. He remained in this role for 3 years, at which time he left for the University of Cincinnati where he became a professor at the College of Pharmacy and head of the Department of Hospital Pharmacy. He also served as the Director of Pharmacy Services at the Cincinnati General Hospital.^{5,6} Francke

returned to Washington, DC, in 1971 to serve as Special Assistant to the Chief Medical Director of the Veterans Administration. He left this position after only a year to start his own company, Drug Intelligence Publications, where he acted as president, publisher, and editor of the *Drug Intelligence and Clinical Pharmacy Journal*. Francke remained in this role until his death in 1978.⁵

One of Francke's goals was to create a unified, "worldwide community of pharmacists."¹ He achieved this goal by serving as the "spokesman for American pharmacy" on the Council of International Pharmaceutical Federation (FIP) as well as the founding editor of the *International Pharmacy Abstracts* in 1964.^{2,7} He also served as co-chair for the American Pharmaceutical Association's Committee on International Relations. He was a delegate at over 25 FIP Congresses and, in 1958, became its first American Vice President. Due to his nearly 3 decades of work in international pharmacy relations, he was granted honorary membership into the national pharmacy associations of 7 countries. Clifton J. Latiolais put it best when he said, "[Francke] fostered more international collegiality between American and foreign pharmacists than all the other leaders in American pharmacy combined."²

Scholarship Activities

In addition to serving as editor of the *Drug Intelligence and Clinical Pharmacy Journal*, Francke was an editor and author of a number of other publications throughout his career. In fact, Francke has been deemed "one of the most capable and widely influential pharmaceutical editors of [the 20th] century" by William Zellmer in his editorial on Francke shortly after his death.³ Many know Dr. Francke for his role in the *Mirror to Hospital Pharmacy*, which was published in 1963.¹ He was also involved in the creation of the first hospital formulary at the University of Michigan. He was editor of numerous other publications, including *International Pharmaceutical Abstracts*, the *Bulletin of the American Society of Hospital Pharmacists* (which evolved to AJHP), the *Drug Information Bulletin*, and the *American Hospital Formulary Service*.²

Awards and Recognitions

In 1953, Francke was awarded ASHP's Harvey A.K. Whitney Lecture Award, health system pharmacy's most prestigious honor. In his address, Francke called for increased recognition of the role of hospital pharmacists, enhanced roles for pharmacists in ensuring

the appropriate selection and use of drugs in patients, development of training programs for pharmacy interns and residents, increased and more practical education of pharmacy students, and a greater role for pharmacists in the hospital – goals we still strive for today. He also stressed the importance of coordination between pharmacy organizations in helping to advance our profession.⁸ Francke also received the Remington Honor Medal in 1970, which is the highest honor in American pharmacy as presented by the American Pharmacists Association (APhA).² Finally, ASHP established the Donald E. Francke Medal in 1971, and he was its inaugural recipient in 1973; this medal recognizes and honors those in the pharmacy community who have made a significant impact in the area of international pharmacy.⁹

FRANCKE'S HYPOTHETICAL LEADERSHIP PERSPECTIVE IN 2013

Don Francke was clearly a visionary in our profession. In the *Mirror*, other publications, and addresses, he spoke of the need for advancement of the profession and recognized opportunities for pharmacists to provide value to patients and health systems. It is interesting to reflect on the philosophy of Don Francke and how he would have viewed today's challenges in health care and the profession.

Don would clearly have been very involved in health care reform and aware of the challenges and opportunities that it presents for pharmacists. He would have worked to advance the pharmacy practice model to improve patient outcomes and safety and to enhance the value that pharmacists provide in society. He would be very interested and involved in how our pharmacy organizations are functioning and collaborating on critical issues of the day. He would be visionary regarding the possibilities of pharmacy informatics and technology and its potential to increase the availability of information, improve quality and safety, and to enhance the practice roles of pharmacists. He would have been an active advocate in helping to transform pharmacy education and to strengthen residency programs.

In a previous article of the *Director's Forum*, the 5 issues facing pharmacy leaders were reviewed.¹⁰ Here we imagine how Don Francke would have viewed and managed these issues, including health care reform and the Accountable Care Act (ACA), ASHP's Pharmacy Practice Model Initiative (PPMI), health care workforce changes, patients' perceptions of pharmacists, and the changing landscape of pharmacy education and student training.

Affordable Care Act

- Francke would have been an outspoken advocate for pharmacy involvement and leadership in developing specific roles for pharmacists in team-based care, including accountable care organizations, patient-centered medical homes (PCMH), and value-based purchasing programs. He would have recognized that medication issues and optimal medication use are critical to the success of these initiatives (cost, quality, access). He would have recognized the tremendous opportunity that exists for pharmacists to influence the outcomes for patients and the success of our health systems. He would have urged pharmacy leaders and organizations to collaborate to improve the impact of pharmacists in this area and to advance their role in team-based care.
- In transitions of care, Francke would have advocated for the role of pharmacists in working with patients and consulting with other team members to ensure consistent and appropriate medication use. He would have been a proponent of identifying technological means to improve the access and flow of information to enable the success of these transitions, such as portable health records or health information exchanges. He also would have identified ways of making information on medications more accessible to patients and providers alike.
- Francke would have written extensively on the need for a change in the paradigm of pharmacists as practicing in an "inpatient" or "outpatient" setting to one that requires pharmacists to view their practice within the context of a complete continuum of care. He would have urged pharmacists to take responsibility to ensure that optimal medication outcomes occur across this continuum.
- Francke would have been a strong advocate of pharmacists functioning as critical members of team-based care and working interdependently to manage drug therapy. He would have been a vocal proponent for pharmacists being recognized with provider status by the Centers for Medicare & Medicaid Services (CMS), and he would have participated in conducting studies and in publishing data to demonstrate the value that pharmacists provide when they are utilized to the fullest extent in a team-based care model.

Pharmacy Practice Model Initiative

- Francke would have been frustrated with the fact that many of the key initiatives in the current PPMI

were issues that he had raised decades ago. He would ask why progress has not been made on some of these issues that seem so obvious.^{11,12}

- Francke would have been interested in experimenting with new models of care and in publishing the results so that pharmacists could more rapidly adopt best practices across the country.
- Francke would have been a strong proponent for advancing the role of the pharmacy technician in the drug use process in order to allow pharmacists to develop more direct patient care responsibilities. Even decades ago, Don Francke called for formalizing the education and training of pharmacy technicians. He would have been a strong advocate for requiring that pharmacy technicians graduate from an accredited training program and pass a national certification exam.
- Francke would have urged that we aggressively integrate students and residents into the pharmacy practice model. He believed that pharmacy education was optimized when educators were active in practice and that students benefited most from faculty and preceptors who were actively engaged in a progressive practice.
- Francke would have been supportive of the concept of enhanced cooperation between pharmacy organizations to increase their effectiveness in advocacy on important issues. He would have been a strong proponent for the work of the Joint Commission of Pharmacy Practitioners (JCPP) and the Vision of Pharmacy Practice in 2015. His Whitney address emphasized the need for cooperation and collaboration between pharmacy organizations.
- Francke would have made sure that pharmacists were actively involved in drug use policy decisions at the health system and the national levels to ensure the best outcomes of medication therapy.

Health Care Workforce Changes

- Francke would have continued to expand residency programs and implemented new residencies in informatics and medication safety. He would have been a proponent of residencies in community pharmacy and managed care pharmacy. He likely would have developed programs in medication use policy and drug information as well.
- Francke would have advocated for the strong integration of faculty of colleges of pharmacy with academic medical centers. He felt that the best education and the best practice existed when the two were fully integrated.¹¹

Patients' Perceptions of Pharmacists

- Francke would have insisted that, as standard practice, every patient who entered the health system would have personal contact with a pharmacist. This pharmacist would provide them with contact information if they had any issues with medication.
- Francke would advocate for the need for every patient to have a pharmacist who could work with him or her as a partner to ensure that all of his or her medication needs were addressed appropriately.

Pharmacy Education's Changing Role in Student Training

- Francke would have advocated for an increase in experiential education in the pharmacy curriculum and would have been very supportive of the current changes in introductory and advanced pharmacy practice experiences (IPPEs and APPEs). He would have emphasized that these experiences should be real "hands-on" practice and not just observation or discussion.
- Francke would have supported and promoted board certification in specialized areas of practice as a credential to demonstrate excellence. At the same time, he would have advocated for the principle that every pharmacist should be capable of providing direct patient care services effectively to most patients.
- Francke would have advocated for changes to the pharmacy curriculum that would train pharmacists to be proficient in technology and automation. He would have a strong interest in the concept of the "learning health system" and "big data" as a means to improve the quality and safety of medication use and enhance patient outcomes. He would be a strong advocate for the development of more sophisticated techniques and tools to enhance medication safety. He would be urging pharmacists to educate themselves on the emerging area of pharmacogenomics and would be advocating for pharmacists to begin developing pharmacogenetics programs to translate this knowledge into practice.

CONCLUSION

This historical perspective on Donald Francke's leadership, as conceptualized through his previous remarks and writings, provides directors of pharmacy a valuable leadership viewpoint. Francke's philosophy is remarkably consistent in addressing the issues that we face as pharmacy leaders. Francke may have been

a world-renowned author, educator, pharmacist, and leader, but, above all else, he was an innovator. He paved the way for generations of health system pharmacists throughout the world to challenge the status quo. He was dedicated to developing the role of pharmacists, to improving pharmacy education, to ensuring quality and safety in medication use, and to providing more information to practitioners and patients. Pharmacy has advanced significantly over the past century, in part due to the vision and contributions of Don Francke. His idealistic view of the possibilities for pharmacy has served as the driving force behind many of our initiatives to advance practice, education, and the profession. Simply put by Clifton Latiolais, "We and our future generations of hospital pharmacists are better off because Donald Eugene Francke was one of us."² Applying Francke's leadership philosophy in today's health care environment will serve us well in advancing patient-centered care and pharmacy services.

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