Thank you so much. Thank you to the committee for this recognition, thank you to the Texas Tech Administrators, and many thanks to my peer and friend who nominated me – Jennifer Barnett. When Jennifer told me that she nominated me, I was astounded. Me? Really? And then I got used to the idea… When I was told that I was being granted the award, I immediately felt humbled. Me? Really? Don’t get me wrong, I’m not giving it back. But reading the nomination and receiving this award is humbling, a privilege, and the biggest honor I’ve ever received. It also serves to remind me what I love about being a pharmacist.

As long as there have been societies and physicians to treat them, there have been specialists whose sole purpose was to prepare and administer medicinal treatments. No matter the ancient civilization one studies, there will be evidence of organized and skillful application of pharmaceuticals. Although we have seen much development of the profession of pharmacy, the profession’s core continues to remains the same – to treat those who are ill and act in the service of our community.

I’ve read studies conducted by the Association of American Medical Colleges that show us that America is producing a consistently stagnant number of doctors each year relative to our continually growing population. Since 1980, the U.S. population has grown by 70 million, and the number of U.S. graduates with M.D. degrees has remained flat at about 16,000 per year.

Experts have warned that there won’t be enough doctors to treat the millions of newly insured people under healthcare reform laws. At the current graduation and training rates, the nation could face a shortage of as many as 150,000 doctors in the next 15 years; 45,000 physicians short by 2020. With this data, we see a clear consequence – a shortage of primary-care and other physicians could mean even more limited access to health care, especially to those who may need care the most.

In acting in the best service to our community, who is accessible and trained to provide needed preventative services, health risk assessments, and consultations? Who is a trusted member of their community? Who is available to work in collaboration with physicians and other health professionals towards the best patient outcomes? I think you see the answer coming into focus, but give me a few more minutes…
Over the past 10 years or so, we have seen the role of pharmacist develop from a product focused – or medication focused – profession into a patient-care focused profession. The medication is no longer your product – your patient is: your patient and your patient’s outcome. This is a brand new shell we’re breaking out of. It’s a little new to us and we’re still walking on wobbly legs, but we’re getting more confident and gaining momentum.

Regardless of the setting in which a pharmacist may choose to practice, the evolution from being a medication expert into pharmacists becoming a vital part of total healthcare, is, as I said, gaining momentum and building energy. For the first time in the U.S. healthcare system as we know it, pharmacists have the education, the training, and the forum to affect real, valued change.

In our mind’s eye, we see pharmacists practicing at their most valuable level. Name the setting – community, hospital, clinical, consultant, ambulatory care – the focus remains the same as it always was… to relieve suffering and treat those who are ill. The degree to which we can “treat” is the exciting progression that we are lucky enough to experience during our careers. The progression may be coming in stops and starts, but we are moving forward like never before.

Yes, some parts of the industry are further along than others; some pharmacy based companies are more aggressive than others; some states are recognizing the importance of pharmacists more quickly than others. But I truly believe that we are all headed down the same path. In many ways our pharmacy career choices are in their infancy. The potential for patient care services provided by pharmacists has barely been tapped.

The end result of this tapped pharmacist potential is easy to envision: better patient outcomes, the prevention of hospitalizations, better coordination of patient care, savings for patients, employers, insurers, and – as a whole – the healthcare industry. We also see the pharmacist practicing at the top of their license.

But how do we achieve those results? We have seen some changes begin; we have witnessed long standing policies being re-written; and we have heard rumors of things to come. If we let ourselves, we can even see the finish line. But how do we become a part of the healthcare solution? Where is the blueprint for this change? Where is my iphone and nav system telling us to go? Specifically what do I do tomorrow, and the next day?

A U.S. Public Health Service report released earlier this year, titled Improving Patient and Health System Outcomes through Advanced Pharmacy Practice, calls for pharmacists to be recognized as providers. Significantly, the report was endorsed by the U.S. Surgeon General. This isn’t a false start off the blocks – we are well and truly in the race.

The report supports health reform through pharmacists delivering expanded patient care services. Through testing in the federal sector, several practices have been implemented and embraced, including a health care delivery model through physician-pharmacist collaboration. This model has demonstrated that patient care services delivered by pharmacists can improve
patient outcomes, promote patient involvement, increase cost efficiency, and reduce demands affecting the health care system.

The U.S. Surgeon General is quoted as saying, “This report provides the evidence health leaders and policy makers need to support evidence-based models of cost-effective patient care that utilize the expertise and contribution of our nation’s pharmacists as an essential part of the health care team.”

The report identified three demands within the health system that pharmacist-delivered patient care can help meet:

1. Providing care for chronic diseases, which are “the leading causes of death and disability in the United States”

2. Increasing access to care to address “insufficient time for focused or comprehensive disease or medication management and other related healthcare issues”

3. Supplementing the primary care provider workforce, which has declined by 50% since 1997 among newly graduated U.S medical students.

When pharmacists become full members of the health care team, the value they bring will be immeasurable. AND, an important part of the solution to the rapidly escalating healthcare costs. Through collaborative practice agreements, pharmacists can:

- perform patient assessments
- have prescriptive authority – to initiate, adjust, or discontinue treatment; to manage disease through medication use; and deliver collaborative drug therapy or medication management
- order, interpret, and monitor laboratory tests
- provide care coordination and other health services for wellness and prevention of disease
- develop partnerships with patients for ongoing care

The Surgeon General encourages legislators and policymakers to “advance beyond discussion … of the expanded roles of pharmacist-delivered patient care and move toward health system implementation.”

The report specifically calls for lawmakers to “enact legislation to recognize and compensate pharmacists—reflecting a change in the pharmacy practice that has already occurred.”

The American Pharmacy Association responded by saying they are thrilled at the amazing
recognition of pharmacists as healthcare providers throughout the medical community. As quoted by APhA, “The time has come for pharmacists to be recognized as health care providers and essential members of the health care team.”

What an exciting time to be graduating! The potential for career growth is unlimited. Every element of pharmacy is broadening; every element is important; every element is a chance for us – as pharmacists – to prove that we can get the job done. To prove that we’re up to the task and that we can execute these industry changes efficiently and effectively. We are no longer only “dispensers” or “verifiers”. We are conduits of health; we are providers of education; we are builders of relationships and trust; and we are the rising professionals who will affect change in the healthcare industry.

Again, different sectors of the pharmacy industry are moving forward at varying paces. I can’t speak to all sectors because I’m not aware of everything they are implementing. I can’t even speak to all of community pharmacy, because different retailers have different pharmacy goals. With authority, I can really only speak to Walgreens pharmacy changes.

Here are a few examples of basic changes that patients have seen in our pharmacies in the last couple of years.

- Pharmacist-administered immunizations – not just flu and pneumonia, but meningitis, varicella, Tdap, the hepatitis series, MMR, zostavax; and not just here and there, but at every Walgreens store in North and West Texas. Every one of Walgreens pharmacists – at over 8000 locations - is a certified immunizer. These services are not only provided at the stores, but we provide immunizations on campuses, at community centers, at assisted living facilities, to employer groups.

- Medication Therapy Management – all of our pharmacists are fully trained in providing MTM. It is essential that pharmacists provide this service. There is not another professional equally qualified to perform MTM.

- Compounding and infusion therapy

- Disease state certified pharmacists – we assist pharmacists in becoming certified in diabetes, HIV, hepatitis, asthma

- Pharmacists and pharmacies in hospital medical buildings – we are working directly with physicians, nurses; providing meds that are not on the hospital formulary; providing specialty meds; we have a hospital pharmacy at Harris Texas Health Resources in downtown Fort Worth that not only services Harris’ patients, but also assists with surrounding hospitals. It’s not unusual to see a tech running down the street to the Children’s Hospital to deliver a needed medication.
Some of our newer pharmacist advancements include:

- **Disease state management** – although not yet in Texas, pharmacists in many states are piloting this program and testing reimbursement rates.

- **Health risk assessments** – our pharmacists are providing blood pressure readings, full lipid panel testing, glucose testing, A1C checks, BMI. We not only discuss the results with the patient, but we send the results over to their physician for full collaboration. We are now getting a lot of calls from employer groups – they want every employee to have a HRA so they can use the results to negotiate better insurance rates.

- **Bedside delivery and discharge counseling**

- **Delivery services and counseling services** to assisted living facilities, to the Ronald McDonald House, to nursing homes, to HIV community assistance facilities, to hospice patients.

- A newly released, extremely coordinated adherence counseling program; the rates of non-adherence to prescription therapy have remained stagnant for the past three decades. Although these topics have been discussed, these problems have generally been overlooked as a serious public health issue. As a consequence, Americans have inadequate knowledge about the significance of medication adherence as a critical element of their improved health. In the words of *The New York Times*, it is the “world’s other drug problem.” We’re here to solve the problem.

- A newly launched “Find Your Pharmacist” program: an online tool that allows patients to match their healthcare needs with the areas of expertise, specialties, languages, and clinical background of more than 20,000 of Walgreens pharmacists. This tool is the first of its kind for the industry. The patient is choosing who they want their pharmacist to be; they don’t just talk to the floater covering a vacation, they make an active, conscientious decision about a professional relationship.

We have known for years that establishing a personal relationship with your pharmacist can help improve health outcomes by helping patients feel comfortable and confident in working with their pharmacist for information, advice and support. The pharmacist-patient relationship is instrumental to improving patient health outcomes. With the basics that have become second nature to us, and with the enormous opportunities to evolve community pharmacy as an industry, we can change the face of healthcare in this country. Pharmacists as providers can only be a win-win.

I’m excited to be part of this healthcare revolution. I hope you are as well, because we all have the skills and abilities to be a part of this revolution.
One last thought: regardless of where we have chosen to practice the profession – hospital, community, retail, consulting, ambulatory care, clinical – we are one profession. Our core values and purpose have not changed – to treat those who are ill and act in the service of our community. If pharmacists can learn to speak with one unified voice, the power we will hold will be unchallenged. If we can learn to represent one profession – instead of fragmented sectors – the power will remain unchallenged.

It’s fun, isn’t it? Being on the periphery of significant, professional, long-awaited change? I promise you this… We’ve kicked up a whole lot of dust behind us, but there’s a whole lot of trail left in front of us. Hold steady the course. We’ll not only make it, but we’ll be that much better for it.

GOOD LUCK, GRADUATES!

About This Project

Raj Chhadua, Winner of the Pharmacist Alumni of the Year Award from Texas Tech University and commencement ceremony guest speaker:

“After receiving an invitation to provide a commencement speech at my alma mater, I reached out to Kate to help draft a message that could inspire the next generation of graduates for my profession. She exceeded my expectations – she not only created a speech that was motivational, but her research of the material served to enhance the message and provided meaningful links between the graduates and the future of their profession. I will be utilizing her gift of language for future letters, resumes and references. Thank you, Kate.”