Perseverance will lead to a stronger tomorrow

Our Association is strong and is positioned to make a huge impact on the delivery of health care in America.

Marialice S. Bennett

Delivered by Marialice S. Bennett, BSPharm, FAPhA, incoming President of the American Pharmacists Association, at APhA2011, the Association’s Annual Meeting and Exposition, March 27, 2011, Seattle, WA.

Good morning. It is with honor and humility that I stand before you today, ready to serve as the 156th president of the American Pharmacists Association (APhA).

I have been a pharmacist since 1969 and a member of the Association for almost as long. Some of my dearest friends are my former students and residents and current pharmacist colleagues. My most treasured professional accomplishments have come from creating innovative practices such as University Health Connection, an interprofessional health care practice, and developing our community and ambulatory care pharmacy residency programs. I have been coming to APhA Annual Meetings for over 20 years and made so many friends across our profession and around our country. We are all blessed to be a part of the great family of pharmacy. It is a privilege to speak with you today and to serve as your president. I thank you for the opportunity.

Thank you also to my family and colleagues, many of whom are here today. I want to thank my supportive husband, Jon, who is so enthusiastic about becoming the first gentleman. I am so blessed to have our three wonderful sons, Jay, Vince, and Bryan, here with us today along with their special mates, Jess, Rebecca, and Michelle, and our three precious grandchildren, Josie, Lulu, and Hudson. I am honored to have my two big brothers Ed and Howard, my sister-in-law Karen, and five of my nieces here as well. I want to thank my colleagues at Ohio State University (OSU) for their support—especially my dean, Robert Brueggemeier, my chair, Milap Nahata, and my practice family from University Health Connection. Last, but not least, thanks to my many friends and colleagues in both my personal and professional life who continue so generously to support me on this journey.

Let us also take a moment to thank our president, Harold Godwin. Harold has been a wonderful president of our Association and leader of our profession at a difficult time for our country, our patients, and our peers. Harold is a mentor of mine dating back to my days as a student at OSU and as an intern at the OSU Medical Center. He made a huge impact on my career, and it is an honor to follow in his footsteps as president of APhA. Building on his own strong legacy in pharmacy, Harold helped set the vision for our profession and the mission for our Association: to create demand for pharmacist-provided medication therapy management (MTM) services and their implementation.

A tomorrow with this sort of demand would indeed be a stronger one for our profession, for our patients, and for our nation. But how will we get there from here?

Getting there

One thing Harold didn’t teach me was how to make charcoal powder papers. My first experience with these resulted in my being covered head to toe with charcoal, failing the lab, and meeting my husband-to-be with tears running down my cheek. We realized that we were trying to package too
much for one dose. Sometimes it takes approaching situations in pieces versus trying to accomplish the task all at once. Thank goodness my mentors taught me perseverance and how to learn from mistakes. Little did I know I would have to make powder papers on my board exam and continually use my perseverance skills in creating practice change.

I believe sharing our stories and serving as mentors to one another will help move us forward. A turning point in my career came from my experience as one of the 30 practice sites chosen for the APhA Foundation’s Project ImpACT: Hyperlipidemia. The staff and colleagues involved in this project mentored and supported me to be a change agent to create a brighter tomorrow for pharmacy. This project gave us the infrastructure to advance pharmacist-provided patient care services at OSU and to develop residency programs in community settings, which are still growing today. Paying it forward is a great philosophy! One of the joys of my career has been to serve as a mentor to pharmacists, residents, and student pharmacists who also are seeking to make a difference.

As many of you know, mentoring is a lot like working as an MTM pharmacist: We help our patients and mentees review their history and set their goals; we work with them to develop and enact an action plan to meet their objectives; and we support, intervene, follow-up, and find additional help when they need it. More often than not, as I am sure many of you have found, setting goals is not the hardest part of providing MTM to patients or mentorship to young pharmacists. Most patients and mentees know where they want to go. Nor is it effectively following up, because most people want help when they are struggling. Instead, the most difficult challenge in mentoring and practicing MTM is developing a realistic action plan for getting there. I am sure many of you found your way here because of good mentors. I am sure you have patients relying on you to help them achieve better medication therapy outcomes. As a profession in transition, our associations can likewise mentor us to enact a realistic plan for the tomorrow we envision.

As President Godwin discussed yesterday, the Association has helped us get where we are today by being active, taking control, and championing our cause. The Association’s short- and long-term financial health is strong due to smart decisions, our focus on the right issues, careful planning, and strategic budgeting. The Association’s beautiful new home on the National Mall in Washington, DC, continues to serve as a beacon for pharmacy in our country’s capital. We are confident we can reach a stronger tomorrow because our Association is recognized within and outside the profession as the pharmacist organization as the pharmacist organization of good mentors. I am sure you have heard from you that the following characteristics are the strengths of APhA: long history of tradition and prestige, the umbrella organization for pharmacy, the face and voice of pharmacy, the builder of pharmacy’s future, the convener for collaboration across the profession, the advocate for the profession, and the go-to resource. I see today’s pharmacists and our Association’s staff working hard to lead from our strengths and to make a difference in the lives of the individuals we serve.

As I enter my presidential year, I have been engaged in facilitating the Association’s adoption of its multi-year strategic plan. I have interacted personally with hundreds of APhA members, leaders, and staff to listen to your needs and to define the future focus of APhA. I have consistently heard from you that the following characteristics are the strengths of APhA: long history of tradition and prestige, the umbrella organization for pharmacy, the face and voice of pharmacy, the builder of pharmacy’s future, the convener for collaboration across the profession, the advocate for the profession, and the go-to resource. I see today’s pharmacists and our Association’s staff working hard to lead from our strengths and to make a difference in the lives of the individuals we serve.

APhA’s strategic focus is on advancing the practice model and recognizing the pharmacist as an essential member of the health care team, empowering members to engage in expanded patient care roles, advocating for the profession and patients, and growing leaders for APhA and pharmacy practice. Combined, these efforts will advance progress toward achieving the Joint Commission of Pharmacy Practitioners 2015 Vision for Pharmacy Practice, where “Pharmacists will be the health care professionals responsible for providing patient care that ensures optimal medication therapy outcomes,” and for helping pharmacists improve medication use and advance patient care.

Marialice S. Bennett, BSPharm, FAPhA

Marialice S. Bennett, BSPharm, FAPhA, is Professor of Clinical Pharmacy and Residency Director for the Ambulatory and Community Care Residency Programs at the Ohio State University (OSU) College of Pharmacy. She also serves as a cofounder and pharmacy director for University Health Connection. She earned her bachelor’s degree in pharmacy from OSU College of Pharmacy. She is a coeditor of Building a Successful Collaborative Pharmacy Practice: Guidelines and Tools, published by the American Pharmacists Association (APhA), and regularly speaks on medication therapy management (MTM) and implementation of patient care services in community practice. She has been involved with several practice-based research projects, including the APhA Foundation’s Project ImpACT: Hyperlipidemia and Patient Self-Management Program: Diabetes. She has received pharmacy teaching awards at OSU and the 2000 OSU College of Pharmacy Distinguished Alumnus Award. Her APhA service includes 2007–09 President of the Academy of Pharmacy Practice & Management and member of the APhA Board of Trustees, member of the APhA Community Residency Advisory committee (2002–07), and member of numerous MTM advisory panels and task forces. She received the 1999 Daniel B. Smith Practice Excellence Award, the first APhA Community Pharmacy Residency Excellence in Precepting Award in 2004, the 2009 Gloria Niemeyer Francke Leadership Mentoring Award, and is an APhA Fellow.
Snapshots of our journey

While today's economic environment has challenged many of us professionally and personally, our members and staff continue to take great pride in the strategic focus of the Association. I am proud to share with you snapshots of a few of APhA's major accomplishments over the past year.

We are focused on advancing the practice model. I am proud to say that our Association is “walking the walk” by providing MTM benefits to APhA employees. APhA worked with its health care plan provider, Kaiser Permanente, to develop a pilot program to provide participating employees and their eligible dependents with a comprehensive medication review and follow-up visits. I challenge each of you to reach out to your employer and health benefit manager to implement an MTM program in your health plan as well. It may not happen overnight, but persistence will pay off. For my part, I have been working with colleagues and our employer, OSU, to implement such a program for all of its employees. This is where my learning to persevere is helping us seek the end goal.

The APhA Foundation has been hard at work on innovative programs that build evidence for advancing the return on investment in pharmacists’ services. The programs and projects conducted by the Foundation have stimulated practice advancement and provided evidence that the Health Care Reform Pharmacy Stakeholders Coalition can use in advancing the profession’s agenda. The APhA Foundation’s newly published study on pharmacists’ role in helping patients manage depression is an additional tool in our armament. You heard yesterday about the APhA Foundation’s Project IMPACT: Diabetes, which focuses on the creation of local interdisciplinary care models that include pharmacists, an area of interest by many actively working on health care reform implementation.

In addition, the APhA Foundation, in collaboration with the Coriell Institute, has initiated the Council of Applied Pharmacogenomics. This volunteer group of 13 pharmacists will begin providing pharmacogenomic counseling services to participants in the Coriell Personalized Medicine Collaborative next month. In addition to the pharmacogenomics work of the Foundation, APhA is developing a major initiative that will support pharmacists’ role in this growing area within health care. Watch for a major announcement this coming year.

To empower and support the efforts of our members to transform pharmacy practice, APhA utilizes various communications to promote the profession to patients, facilitate networking opportunities for pharmacists, and provide valuable resources. Ranging from American Pharmacists Month to developing our Internet, social network, and traditional media presence, the Association “talks the talk” as well as any professional association. Furthermore, those pioneering pharmacists who are performing immunizations and providing MTM services have found—and continue to find—supporters, advocates, and champions at the Association.

As pharmacy professionals, we rely on digital communication more than ever to get important drug information, interact with colleagues, and stay attuned to our profession. To satisfy these needs, APhA launched PharmacyLibrary, an online library and data subscription service featuring the Handbook of Nonprescription Drugs, practice questions for the NAPLEX examination, more than 200 case studies, pharmacy news, and other indispensable resources. This library is powered by a dynamic search engine that affords users tremendous flexibility and depth. Momentum is growing in this unbridled digital age and many pharmacy schools have subscribed to this service for students and faculty. You will see further enhancements to PharmacyLibrary during the coming year.

Our advocacy and leadership work in health care reform continues to bring the pharmacist’s patient care role and value to the table. The challenge to obtain and maintain recognition for pharmacists in health care reform requires collaboration and innovation. Collectively, several pharmacy professional associations are coordinating advocacy efforts through the formation of the Health Care Reform Pharmacy Stakeholders Coalition. This collaboration has prioritized and divided the work needed to advance pharmacy's agenda among the stakeholder organizations. APhA takes its role in overall coordination of the group seriously and is leading activities to promote pharmacy within the Center for Medicare and Medicaid Innovation.

APhA is working to further develop our advocacy capacity by enhancing partnerships such as our collaboration with the National Alliance of State Pharmacy Associations (NASPA). Many health care reform activities will occur at the local level, and a strong partnership with our state affiliates provides two-way sharing of information and collaboration in tracking and responding to opportunities for our profession in a reformed health care system. APhA is also reaching out to partner with Beacon Communities, government agencies, and others to support delivery models that include the pharmacist as an essential member of the team.

APhA joined with NASPA to create state-specific MTM guides to support advocacy efforts in each state and Washington, D.C., to expand pharmacist-provided patient care. Key points include expanding MTM services, collaborative drug therapy management programs, scope of immunization authority, pharmacists’ public health extender role, and ensuring pharmacist inclusion in state and regional health information technology initiatives. The MTM guides, which are available on the MTM Central page at Pharmacist.com, feature successful state strategies and state-specific data.

Americans trust their pharmacists because they know we put their needs first. In June, the Association partnered with Cephalon on a public education program, When Good Medicines Become Bad Drugs, that resulted in...
more than 400 stories about medication misuse. These stories noted the positive contributions of pharmacists and the Association. Utilizing social networking tools, we partnered with WebMD on the popular Ask the Pharmacist series. These engaging, interactive sessions have put the advice pharmacists provide—and the value we add to patient health care—at center stage. Collectively, through our public relations efforts, we potentially have reached over 725 million consumers in 2010!

In partnership with the Academy of Managed Care Pharmacy, APhA launched the MTM Connections website to provide a link between health plans and pharmacists providing MTM services. MTM Connections features two components: the MTM Resource Library, which is a searchable database with more than 650 annotated bibliographies of published articles and reports on MTM, and the MTM Locator, which is a self-reported and searchable directory of MTM provider and payer program profiles. APhA is committed to driving connections that will provide its members with access to opportunities, needed information, and support that will gain recognition and engagement of pharmacists in transforming patient care.

Conclusion

Our Association is strong and is positioned to make a huge impact on the delivery of health care in America. Despite passage of health care reform, we each know there is a medication use crisis in this country. Our patients continue to achieve suboptimal outcomes from their medications, and in some horrible cases they get sicker or even die because of them. Studies have found that up to 30% of hospital admissions of elderly patients are linked to toxic drug effects. In addition, prescription drug abuse, a growing problem, has reached epidemic proportions. In many states, unintentional drug overdose is now the leading cause of accidental death, exceeding those caused by motor vehicle accidents!

If we buy into the 2015 Vision for Pharmacy Practice, then we acknowledge these challenges are our responsibility and our opportunity. We have done remarkable work to build a globally recognized Association and to ensure our profession’s future. But we can never rest when so many of our patients are struggling or when the miracles these medications can represent go unrealized. It is our responsibility to persevere in achieving our transition from making and providing medications for our patients to making medications work for our patients. As a profession, we must serve as the MTM pharmacist for the American public and be willing to assume responsibility for working in emerging health care delivery models to help patients make the best use of their medications.

As we advance the practice model, empower our members, and advocate for the pharmacy in a new world of health care, the need to develop new leaders for APhA and the profession is greater than ever. It is time for each and every pharmacist to stop waiting for someone else to solve our problems and find a way to lead from where we stand. We need to find ways to support and empower pharmacists to become personal leaders in their practice environments. We need to provide the tools and the mentoring to allow them to grow while balancing their personal and professional lives—and then be able to facilitate their evolution into leadership of our Association and our profession when the time is right for them. As Vince Lombardi said, “Leaders are made, they are not born; and they are made just like anything else has ever been made in this country—by hard work.”

A stronger tomorrow for us and for our nation is one in which people are healthy and productive. I believe pharmacists are key to a healthier tomorrow for all of us. To achieve this stronger tomorrow, each of us must be active, take control, and be champions until we reach that goal for our patients, for our profession, and for our country.

Thank you for listening, and thank you again for the opportunity to serve.

doi: 10.1331/JAPhA.2011.11527