Good morning. Thank you all for being here today. I feel like I’m with 1,000 of my closest friends!

As many of you know, ASHP has always meant a lot to me. Thirty years ago, I was a new pharmacist and Dave Zilz was president of ASHP. At that point, I couldn’t even imagine being in this position, but you never know where life will lead you.

I’d like to thank the many people who have helped me in my career and in my life. First, since I can’t mention everyone by name, I would like to offer a generic acknowledgment to all of the friends I’ve made in the pharmacy world—you know who you are! Your opinions, accomplishments, friendship, and support have truly been an inspiration.

I also want to give special thanks to the staff at NorthShore, at the Milwaukee County Medical Complex, and at the University of Wisconsin. In particular, I want to acknowledge Pam Ploetz, who always made me think, and Lynn Boecler and George Carro, who have both helped me carry the heaviest loads. You’ve given me the freedom to pursue my activities with ASHP, and I thank you very much.

To all of my past residents (and very soon-to-be past residents), I want you to know that I’ve learned a lot more from you than you ever learned from me.

To the staff of ASHP and fellow Board members, thank you for all that you do every day. You make this organization hum!

And to Henri Manasse, a special thanks for your leadership and mentoring. I will try to make your last year as our executive vice president one of your best.

To Debbie Devereaux, Janet Silvester, and Diane Ginsburg, I want you to know that your encouragement and support have made a tremendous difference in my life.

To my mom and sisters (who could not be here today), thank you for your unconditional love and support. Mom has a saying, “Small minds think small thoughts.” It has

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helped me stick to my principles and set high standards when others were challenging me.

And finally, to my daughters—Julie, Kathy, and Molly—simply, you are what makes life worth living. I could not be more proud of how you’ve grown to be intelligent, successful, and independent women. Thank you for being here, and thank you for sitting through my talk. Come to think of it, I don’t think any of you ever heard me give a speech—other than at 2:30 in the morning!

The value of teamwork

You know, I have been influenced in practice by many pharmacists, but perhaps none as much as by Curt Johnson. Many of you knew Curt. Sadly, he passed away earlier this year from melanoma at too early an age. He was only 63.

Curt was one of my preceptors when I was a resident at the University of Wisconsin. He was one of the first clinical faculty members to establish a practice at University Hospital.

Curt excelled at teamwork. By taking the time to understand and respect others, he was able to have a very effective practice. He respected the relationships that the pharmacists had developed with physicians and nurses and often positioned them to be the heroes when it came to solving drug therapy problems. Because of his keen understanding of the importance of relationships, he went on to become one of the most effective and respected pharmacists in Wisconsin history.

Curt helped me realize how important those relationships are to one’s success in both practice and life. The lessons I learned from Curt are the major reasons behind my career success.

In the months since I was elected, I have been reading inaugural addresses of ASHP presidents and Whitney award lectures from the past 20 years. There is a definite commonality among all of this writing: They all point to the urgent need for leadership and reprofessionalization and for pharmacists to have a passion for what they do. They have inspired me to believe that we all must become more proactive in our health systems.

We must communicate the value of pharmacists to decision-makers, constantly seek new avenues for pharmacy involvement, assert our knowledge and experience, and be leaders when it comes to medication use.

As pharmacists, we tend to be task oriented. In addition to having something to which we can aspire, we like to have something tangible that we can do to make a difference for patients. So, I’m hoping today to offer some steps we can all take to get practice to the next level.

10,000 Hours

I recently read Malcolm Gladwell’s book Outliers: The Story of Success. You may remember him as the author who wrote The Tipping Point: How Little Things Can Make a Big Difference, which is about how little things can result in transformation.

In Outliers, Gladwell examines the genesis of success, and what he found may surprise you. In studying why some people succeed, leading remarkably productive and influential lives, he discovered that it’s not necessarily genius or talent that tips the balance; rather, it’s a combination of time and opportunity.

You may not know this, but studies have found that there is a commonality among top hockey players. The best players tend to have been born in the first three months of the year—January through March. Now you may ask, what does that matter?

Well, if you think about it, as kids, they just miss the cutoff deadline for December hockey leagues. So, they join next year’s teams. As a result, at age six, they are bigger, faster, and stronger than their younger teammates. And because they are bigger, faster, and stronger, they get more time on the ice and more opportunities to play. Gladwell points out that something as random as your birth month can make the difference between stardom and second string.

Fortunately, as pharmacists, it doesn’t matter what month we are born in! We can use our time to become experts, and then we can take advantage of the opportunities that present themselves.

For every great success, Gladwell estimates that 10,000 hours of dedicated work preceded it. Think about that: 10,000 hours. That’s a lot of time. But this labor prepares a person to jump in and take advantage of opportunities that arise.

The following ASHP Reports and information on 2011 ASHP award recipients appear in the online version of this issue (www.ajhp.org):

- “ASHP: Continually in pursuit of truth” by ASHP Executive Vice President and Chief Executive Officer Henri R. Manasse, Jr., Ph.D., Sc.D.
- “Getting it started: A year to remember” by Immediate Past-President Diane B. Ginsburg, B.S.Pharm, M.S., FASHP
- “A Strong and Vibrant Organization”: 2011 Report of the Treasurer by ASHP Treasurer Philip J. Schneider, Pharm.D.
- Professional Policies Approved by the 2011 ASHP House of Delegates
- ASHP Board of Directors, 2011–2012
- ASHP Honorary Membership
- ASHP Award of Excellence
Likewise, pharmacy superstars don’t just come from nowhere . . . they are trained and spend countless hours in the pharmacy trenches helping one patient at a time, and sometimes doors open for them to expand their practice and careers.

This concept of 10,000 hours hit home for me recently. Around the first of the year, our chief quality officer asked me to put together a cost-effective proposal to have pharmacists more involved in the medication reconciliation process. After some brainstorming, I proposed adding 3 times as many pharmacy residents rather than the full-time pharmacist positions I had proposed in the past. With Medicare reimbursement, the addition of 14 resident positions would cost less than half of my previous proposals.

At the beginning of March, just before the ASHP Residency Match, I learned that these positions had been approved to be allocated across our four hospitals. While the purpose of these positions is to improve medication reconciliation, in reality they will do much more than that. These residents will extend all of our clinical services and elevate our practice to improve patient care by ensuring that drug therapy is appropriate for every patient.

Adding these positions is perhaps one of the greatest achievements of my career. It demonstrates that when you put in the hours and think creatively, you really can make a difference. But in retrospect, this was not accomplished just between New Year’s Day and March 7. It began 18 years ago when I started my job at NorthShore. It was successful because of the years I spent talking with physicians and administrators about the value of pharmacy services. It was successful because of the years spent changing our practice model, hiring the right people, and setting expectations. It was also successful because the opportunity presented itself and because the leaders in our department had put in the hours.

It is my belief that the pharmacy profession is on the verge of a similar success, because pharmacists collectively put in our 10,000 hours . . . and the opportunities are now presenting themselves. We’ve done the blocking and tackling—we’ve renovated our educational system, we are growing our residency programs, and we are now focusing on pharmacy’s future.

I feel it with ASHP’s Pharmacy Practice Model Initiative (PPMI).

I feel it with our nation’s health care reform efforts.

And I feel it with the rise of so many ambitious new practitioners who are ready to go the extra mile for their patients.

I know you have all been following the national health care reform debate. We are starting to see just how this new focus on patient outcomes, error reduction, and fiscal efficiency is playing out. Medical homes, which provide a foundation for accountable care organizations, allow pharmacists to manage chronic diseases, improve compliance, reduce hospital readmissions, and improve safety. Medical homes that incorporate pharmacists provide a new opportunity for those trained in ambulatory care.

All of this is happening at a time when ambulatory care has become a recognized specialty. Our ability to provide integrated care while practicing within our communities is an exciting development that can change our collective future.

A great example can be found in Group Health Cooperative (GHC) in Seattle. GHC employs about 40 pharmacists who work directly with patients and physicians. At GHC, they clearly “get it”—they understand that their pharmacists have spent the 10,000 hours to become experts in medication use, and they are now providing the opportunity for their pharmacists to shine.
strained by archaic work rules and practices. They won’t be stopped by entrenched pharmacy managers, perceived state board limitations, or hourly wages.

These are the pharmacists who will go the extra mile to talk to patients, monitor drug therapy more thoroughly, develop themselves professionally, and provide all of the services that they know they should be providing. I strongly urge managers and residency directors to have high expectations of your pharmacists and residents and to look for the traits I’ve just described in your hiring.

We may find that this oversupply of pharmacists is actually one of the best things to happen to our profession. These new practitioners will push us to do things we have not been able, or willing, to do before.

Searching for the ideal pharmacy practice

No talk about the future of pharmacy would be complete without mentioning ASHP’s PPMI. At the Pharmacy Practice Model Summit this past November, leaders from across the country started to hone in on what makes an ideal pharmacy practice.

Recommendations ranged from the need for pharmacists to assume accountability for patient outcomes to advancing the roles of properly trained pharmacy technicians.

We know that some hospital pharmacies are practicing at this level already. What is it about them that makes them different? Why can’t all pharmacies provide this level of service? This is not a question of luck or even of having an administration that provides substantial support.

I believe that ideal practice sites have a sufficient number of pharmacy leaders (both big “L” and little “l”) who have the will and ability to do the planning, marketing, and extensive work required to achieve this level. These leaders have invested their 10,000 hours. They have made significant personal sacrifices with an unparalleled commitment to patient care.

In his Webb lecture, Burnis Breland said, “If we are to achieve all we can for patients, then we must believe in what we know to be true.” This has stuck with me ever since I heard it.

So, what do we know to be true? We know that pharmacists are the health care professionals best qualified to manage medication use. We must believe this to make it true. For some of us, that may mean changing jobs and choosing to work in an organization that values our role. At the end of the day, we need to conclude that what we do is more important than anything else.

How to act differently

As a profession, pharmacy has clearly put in its 10,000 hours. We are now poised to take advantage of the incredible opportunities that are available through health reform and the PPMI. The question now comes down to each of us on a personal level. How are we going to start acting differently so that we’re ready for the next opportunity to improve patient care? I have a few thoughts about that, things that drive the work I do every day.

First, be passionate about what you do—find a job that makes you love getting up and going to work. The wonderful thing about passion is that it’s contagious. When you’re passionate, it makes others around you care more about what they do (and never forget that apathy is also contagious).

Second, be dedicated. We are professionals, and as such, we do what it takes to take care of our patients. Let me give you an example. Janet Lee is one of my pharmacists at Evanston Hospital. She is relatively new, having only worked there for about two years. One day, a patient who was hospitalized as part of a clinical trial was distraught because she had forgotten to bring her study medications with her. After much discussion with the patient, her nurse, and her social worker, Janet decided that she would simply drive to the patient’s home, get the medication, and bring it back to the hospital.

I know that many of you have done something similar for your patients, something that is above and beyond the call of duty. According to Janet’s patient, her act of kindness made a real difference in the way she thought about pharmacists. Janet demonstrates on a daily basis what it means to be dedicated to her patients. No one told her what to do in the situation I have described. She knew what to do intuitively. This is the professional covenant that society expects and deserves from us. I am so proud that Janet works for me.

Third, be engaged. Participate in initiatives within your own organization outside the walls of the pharmacy. Help your boss and organization achieve their goals. And get involved and stay involved in professional organizations. Being engaged is part of your 10,000 hours. I guarantee that you will see a payback.

Fourth, be willing to change and to make the sacrifices needed to practice at the highest level possible. We must begin to demand better from our institutions and from ourselves. Seek work in an environment that values your expertise and ideas.

Fifth, for those of you who are new practitioners, have courage. I know that the job market is uncertain right now, but please know that we need pharmacists with the will, attitude, and work ethic to push progress into places where it has been stagnant. It is time to get your game on and show us what you’ve got!

Finally, for experienced pharmacists, it’s time to step up. We must lose any complacency we have. We have to be ready for this new world—
ready to use the years we have spent building our careers to become experts. As part of that effort, I challenge pharmacy managers to begin creating practice environments that make pharmacists accountable for medication-related outcomes and in which pharmacists can fully use their clinical knowledge.

Conclusion

Chip Heath wrote a book entitled *Switch: How to Change Things When Change Is Hard*. In it, he said that “For anything to change, someone has to start acting differently.”

We must start acting differently. I believe that every one of us must look in the mirror and ask how personally committed we are to achieving the most we can.

Ladies and gentlemen, pharmacy has come a long way. We’ve done a good job with pharmacy in health systems, but we can do better, and there are opportunities right now to make it happen.

Our mission as an organization and a profession is to help patients make the best use of their medications, but the continued advancement toward that goal depends on all of us, as individuals, putting in our 10,000 hours.

Thank you.