

**The “University of ASHP”:
Teaching and Learning in a New World of Practice**

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Introduction

As I begin my formal remarks this morning, I’d like to take a few minutes to acknowledge some very special people who are here with us today. First, I want to recognize the ASHP staff. They are our crown jewel, and I never take them for granted. I know that our membership feels the same way.

Before I ever got into leadership positions at ASHP, I was fortunate to work with every single division. I know what an incredible group of people we have working tirelessly on our behalf. Thank you, ASHP staff, for your commitment to our Society and to the profession of pharmacy.

I’d also like to recognize and give special thanks to my colleagues at the University of Texas at Austin, some of whom are here with me today and some of whom are back home supporting me in my journey as ASHP president. I’d like to thank my students who are a constant source of energy for me and truly inspire me to do what I do on a daily basis. I’d also like to thank an individual who is not only my boss, but my mentor and very dear friend... my Dean M. Lynn Crismon.

I was fortunate to be able to serve in the Texas Society of Health-System Pharmacists, and some special people afforded me opportunities along the way. Those individuals include Roland Patry, Lois Nash, Julie Nelson, Lourdes Cuellar, and Donna Burkett.

I have also had the privilege to serve with an incredible group of people during my tenure on the ASHP Board of Directors. Thank you, not only for your personal support of me, but your commitment to our Society and to our profession.

And then to a very special group of people that I refer to as “the brain trust.” Everyone should be fortunate enough to have people in their lives who are there for them no matter what, to provide encouragement, to celebrate good times, and to be there when times are difficult. These people are a constant source of guidance for me. I would like to thank my very dear friends, leaders in their own right, who are a continuous source of inspiration and true beacons for our profession: Cindi Brennan, Jill Martin Boone, Toby Clark, Mick Hunt, Steve Sheaffer, Sara White, John Murphy, John Woon, Kathryn Schultz, my “board buddy” Lynnae Mahaney, Charles Jastram, Malcolm Broussard, Teresa Hudson, Janet Silvester, and Deb Devereaux.

Finally, I want to acknowledge my friends and family, many who have come very long distances to celebrate with me today. And I especially want to thank my husband, Dr. Jeffrey Josephs, for your love and support and understanding of my commitment to my profession.

Who Am I?

So let's start. Well, who am I? I'm a teacher. I've dedicated my professional life to teaching students and practitioners what they need to know to become passionate and competent patient care providers and leaders in our profession. I am committed to developing the future of our profession. It is my calling.

But I'm also a lifelong student. My students are constantly teaching me, showing me new ways of thinking, challenging me at all times to stay on top of my game, and fueling my passion for lifelong learning. And even now, as I've reached the halfway point of my Ph.D., I know there is always more to learn.

Indeed, all of us in this room are teachers. We mentor new practitioners. We educate and train residents. And we even reach outside of our profession to advise physicians, nurses, and administrators on the best and most effective ways to use medicine. But all of us in this room and in this profession are also lifelong students.

We come together at meetings like this one and other professional venues to share knowledge with each other and ASHP so that we can always be on the cutting edge of patient care. We are constantly learning and seeking out the best institutions through which to learn.

So, if you think about it, ASHP is really our classroom; the University of ASHP, if you will. And, really, what is a university? I know that might seem like a very basic question, but I think it is really important to define.

According to Webster's Dictionary, "a university is an institution of learning at the highest level; an institution like no other." ASHP fits that definition. We are always teaching and learning. We are always sharing and connecting, and that is truly what ASHP does best. But the heavy lifting, what happens on a daily basis, the direct patient care, the patient advocacy, the creation of practice models that work well in this new world we find ourselves in, that is up to all of us.

A Fundamental Misalignment

You know, there is something that has been on my heart for a very long time, and something that is truly worrying me with every passing day. We have a fundamental misalignment with those educated in the profession and current practice. Our colleges and schools are putting out highly educated and trained graduates, but the way our practice sites are run and how we practice pharmacy are not changing fundamentally. We promise students the chance to practice their art of patient care, but most will not get that opportunity with our current practice model.

We need to look to the next generation to see the possibilities, and the Millennials Generation is filled with possibilities. If you have done any reading about traits and characteristics common to this generation, you will find that they have always been treated as special and important. They feel that they are here to solve the world's problems, especially those problems that older generations have failed to solve. They work well in teams. They are motivated, goal-oriented, and confident not only in themselves, but in the future. And the best part of all is that they are incredibly optimistic.

But we take these unbelievable students who are motivated to make a difference, and using the current practice model, we crush their spirits within two to three years. These bright new professionals lose their passion and stop questioning the status quo. That is everyone's loss.

A Broken Practice Model

I'd like to share a story I heard from a dear friend and colleague of mine from another college of pharmacy. He was talking to an employer about why there had been a decline in student recruitment from their organization. The employer said that they like to hire students after they have been in practice for a few years and after their idealism was gone. This way these new hires would be compliant and not challenge the system.

This seriously disturbed me. It should disturb all of us. What are we going to do about this disconnect between students' expectations and the way some practice environments view the involvement of pharmacists? What are we going to do about this disparity between what we are teaching students in our curricula and what many practice sites in the real world offer them?

We clearly have a broken practice model. But the news is not all bad. We have an incredible opportunity to create a new vision for pharmacy practice. We need, in some ways, to start over. And there are some important questions that we need to ask ourselves to get back to our core mission.

What is the purpose of our profession? How can we re-imagine it? How can we reframe the future so that we better reflect the legal, ethical, and moral obligations we all have to care for patients?

One thing I know for sure is this: If we continue to do things the way we've always done them, we will continue to get what we have always gotten. We need to get back to our core mission.

One Degree of Separation

You know, one of my best teachers was my mother. She taught me never to be more than one degree of separation away from patients, to always remember that every patient is someone's parent, spouse, sibling, or child. She made sure I understood that everyone is significant to someone. It was a lesson she had learned while managing my uncle's surgery practice at the University of Pittsburgh. In my uncle's practice, clients weren't just a "gall bladder removal" or "colon resection." They were patients.

When my mother was diagnosed with pancreatic cancer 13 years ago, I came to really feel and understand how true that lesson is. The weekend that Princess Diana was killed, my mother was admitted to Seton Hospital in Austin, Texas. Shortly after we got to the hospital, the following words appeared on her chart: "PG is a 60-year-old white female presenting with severe abdominal pain, nausea, and vomiting. CT scan showed a large mass in her pancreas with mets throughout her body."

As you can imagine, these were incredibly chilling words because this was my mother. So, I did what most clinicians would do. I went back to where it was safe, my clinical knowledge. I set up a war room by her hospital bed, with references, cell phone, and other resources.

Because my mom had mets everywhere, including throughout her liver, managing her pain was becoming very difficult. One of my former students, a newly licensed pharmacist, came to me one day and said, “We figured out what’s going to work to manage your mother’s pain, Diane. Don’t worry. She’s going to get some relief. I’m going to take care of her.”

I looked up at this kid and asked, “Why are you being so kind to us?” And he replied very simply, “I know you’re not in your right mind right now because if you were, you’d realize that all I’m doing is what you told me to do that very first day of pharmacy school. Your mother is *my* ‘every patient.’ ”

I remember thinking in that moment that it would never matter what I did for the remainder of my professional life. I got through to one student who took care of my “every patient.”

Getting to the Core Mission

As pharmacists, we have to learn to be the voice for these patients. We have to teach other pharmacists how to be that voice, too. For me, ASHP was never more than one degree of separation away from my mother’s care in terms of providing me information and supporting my practice even in that most difficult time. And that is how it should be.

This lesson, understanding the very humanity of my patients, is top of mind for me at all times. It is reinforced for me on a daily basis as I watch my husband provide care for his psychiatric patients. It is one of the first things I teach to my students, and I hope it is the last thing they remember as they exit my classroom. It is part of my core mission, and it is part of ASHP’s, too.

Most of you know that I don’t practice in a hospital anymore. Although I loved being an institutional practitioner, I feel so privileged to be a professor and dean of student affairs at one of the top colleges of pharmacy in the country. I prepare the practitioners who will be coming to all of you for practice opportunities some day.

But, even though I’m in a classroom every day, I am only one degree of separation away from patients. I never forget the mission we all have for patient care. Let me give you an example of what I mean.

On the very first day of class, I often walk to the blackboard and put the following number up on the blackboard: 28011. I ask my class if they know what the number is. I offer them a free Starbucks cards, Jamba Juice, whatever. Of course, I always get that “deer in the headlights” look. And that’s when I hit them with it.

This is my pharmacist’s license number. I earned it. I own it. No one has it but me. My Board of Pharmacy does care about it, but quite frankly, it is my BFF (Best Friend Forever). I am granted the privilege and gift of practicing pharmacy. So what am I going to do with this gift? Am I going to challenge the status quo, be that squeaky wheel that pushes for change?

I’d like to share with you a quote that gets to the essence of this philosophy from a very famous pharmacist: Hubert Humphrey. “If there is dissatisfaction with the status quo, good. If there is foment, so much the better. If there is restlessness, I am pleased. Then let there be ideas and hard thought and hard work.”

You know, I've been fortunate to practice with individuals who remind me to always do the right thing and think about the people we serve no matter what our practice environment. These people always challenge the status quo and are never afraid to ask the hard questions.

One of these people is my dean, Lynn Crismon. When Lynn was interim dean at our college, he made some decisions that could have easily jeopardized his chances of being selected as our permanent dean. But people saw beyond that and realized he was serving the best interests of the college.

He leads by example. He always keeps the college, our students, faculty, and staff front and center. He is an incredible role model, somebody whom I am privileged to work with every day. Lynn has taught me that everything we do, especially as practitioners, is about the people we serve.

The University of ASHP

So what has ASHP meant to me and how does it support my personal core mission?

I got involved in ASHP early in my career because some inspirational people instilled in me the importance of supporting our profession. ASHP has been a magnificent teacher for me, and I suspect that it has been for each of you, as well. This University of ASHP, as I like to call it, is an institution of higher education like no other.

Institutions of higher education were created to educate people to be able to know the truth and to study the best that has been thought and said in the world. We know the truth. We have a relationship with those we serve. Our mission and purpose are clear... to provide the best patient care that we can to those special, significant people, to our "every patients."

And our alma mater is there for us. ASHP supports all of us in our work to provide the highest level of patient care. Through the development of practice standards, in its advocacy to enact a legislative and regulatory framework that improves both pharmacy practice and patient care, and through its work to develop cutting-edge professional education and resources, ASHP is changing practice and patient care both in this country and around the world.

But those are not the only reasons to join ASHP and get involved.

As one of my former professors, Dr. Terry Schwinghammer, department chair for pharmacy practice at the University of West Virginia, said, "Join a professional organization. It is the rent you pay on the space you take up in the profession."

Well, let me tell you, I'm paying my rent gladly.

This is Pharmacy's Time

So what is today's "lecture" about the University of ASHP and how we are all lifelong learners and teachers really about? How are we going to take the lessons we learn every day in our institutions and in our interactions with each other, and make them real in our own practice environments? One phrase captures it for me: Let's get it started.

On March 21, 2010, history was made in this country with the passage of new healthcare reform legislation. The time is now to make changes in our practice model to

better serve our patients. The planets, moons, and stars are in alignment like no other time. This is pharmacy's time.

ASHP's Pharmacy Practice Model Initiative and the summit in November 2010 will get us started toward creating this new practice model. As my residency preceptor Darrell Newcomer taught me, "There are no problems. Only opportunities." We have incredible opportunities right now.

Everyone has talents that they can contribute. And we are going to need everyone as we move forward. As pharmacists, we have knowledge that no other healthcare professional has. Never forget that we are medication experts.

When I was a kid growing up, I used to like to watch Saturday morning cartoons on the ABC network, and one of my favorite things to watch was *School House Rock*. Some of you might remember that, including songs like "Conjunction Junction, What's Your Function?," "I'm Just a Bill," "Three is a Magic Number"...

You may also remember the words to the opening song for every episode: "As your body grows bigger, your mind will flower. It's great to learn, 'cause knowledge is power."

Knowledge is power. This is what I believe. What are you doing to learn all you can to provide the best care for your patients every day? What are you doing to teach others so that they can provide the best care for *their* patients every day? What are you going to do with this amazing gift of knowledge? Are you going to use this power for good?

Conclusion

I'd like to conclude this "lecture" today with a quote from my dear friend, colleague, and mentor Billy Woodward's great Whitney Award lecture. He said, "Being a pharmacist is a privilege and blessing bestowed by society on a relative few. With such privilege also comes a responsibility...a sacred professional duty...to continually define quality by our actions and never, never be content with anything less."

We, as pharmacists, are a blessed and privileged few. We must use our power to improve pharmacy practice and better serve those who are under our care. We as members of ASHP are a radiating force, and our power to effect change is exponential. I urge you to keep learning, keep teaching, and keep advocating for your patients. I promise you that ASHP will do the same and that the University of ASHP will always be there to support you.

The time is now to "Get it started!" I look forward to working with you and ASHP to not only impact our profession, but to do the very best we can to care for our every patient.

Thank you again for this honor.