It is a great honor for me to be here today to accept this award for at least two reasons:

- Win Durant has been, and continues to be, an important hero of mine.
- The UW graduate program has been an integral part of my life and my career.

I am very proud to be associated with both.

I was a little puzzled to learn I was your award recipient this year. But I suspect it may be because I have managed my career a little differently than many UW grads. Rightly or wrongly, it doesn’t much matter at this point. I am too far down the path to change. I think the remarkable thing about my career is that it is not a career at all, but nine different careers in pharmacy. I went back and counted each of the positions I have held in the profession since graduate school, and I have counted nine with sufficiently different sets of job skills to justify each as a career. This included 19 different job titles, 8 different employers and 6 cross-country moves.

Statistics bear out that we can expect about 6 job changes in our lifetime. I have been the exception to that average. My Dad might have foretold this. He was very worried about me entering the work force, because he knew I had a temper and considerable difficulty in controlling it. He also said I was too much of an idealist. He was right, as he was about most things. More than once I turned in a resignation when I didn’t think everything was “kosher,” or I was unimpressed with the quality of management.

Win Durant also had a lot to do with this. I have always placed this man on a very high pedestal. That is probably unrealistic. Nobody is as good as I remember Win being. It is said, “all managers have a flat side.” That is to say they may have many valued facets and talents, but no one can do it all. I never saw Win Durant’s flat side. He had the full package.

Among other things, I credit Win with teaching me how to control my temper. I still lose it once in a while, but I learned from Win that one’s temper can be a very valuable tool when it is focused, and timed appropriately for maximum impact. It can’t be abused or used too often, but when done right, it will receive a lot of attention. And if you are ever on the receiving end of it, as I once was from “Mr. Durant”, it is a lesson not quickly forgotten.

I came away from the residency program (1968 to 1970) with several key impressions:
The residency was an opportunity to better understand myself – what I am capable of and what is difficult; how I stand up to pressure, both mental and physical.

If I were to become a clinician, I would have to compete with the likes of people like Dave Angaran, my resident counterpart. I was a distant second in a class of two when it came to clinical matters.

Win counseled me: "You are a generalist." I could do a lot of things well. I may not be a standout in any one area, but I could learn to use this as strength.

I had a preference for management roles. It was less repetitive and more interesting to me.

After a short stint in the US Public Health Service, I got my first "real job" at Yale-New Haven Hospital in 1972. The director there was Don Beste and Don was known for his strong sales ability. He could sell sand to the Arabs. But he also said something that made a lot of sense to me. He was recruiting a clinical pharmacist and I wanted to be a manager. He convinced me I had a unique opportunity to integrate the clinical skills recently acquired, with administrative skills. "You can always pick up a management position later, but once a manager, its tough to regain the clinical skills." Don persuaded me that experience gained as a clinical pharmacist would make me a better manager in the long run. I bought it.

A few weeks later, I began my first rotation with the chief resident on the general surgical service. I was led to believe that the surgeons desired my services and were anxiously awaiting my arrival. I marched up and introduced myself to the chief resident in front of the full rounding team of perhaps 8 to 10 physicians and students. His response was, "What the hell is a clinical pharmacist and how many of you are there?"

Today, I marvel at the rapport and respect that exists between pharmacists and physicians when I sit with both at a seminar or other scientific gathering. But you students need to know it was not always this way. We pioneers had to bleed first.

Between the internalized messages from my residency and these early years at Yale-New Haven, I decided how I would position myself in the healthcare marketplace. I would not limit myself to a single job type. I would develop a competitive advantage compared to my fellow pharmacists through this differentiation: a manager with a clinical background.

My first Director's job came along in 1976 at United and Children's Hospitals in St. Paul. The Wisconsin program had prepared me to know exactly what to do. I assembled a team of exceptional people and we implemented the best combination of clinical services and distribution system seen in any private hospital. I was very proud of what we accomplished. Eleven years later, I handed it off to Bruce Scott who improved substantially on that model that continues to serve patients today.

St. Paul was the most satisfying episode of both my career and personal life. I met Sara there; we married in 1980 and had our three children there. I started a residency program
at United and it has produced some fine leaders and contributing professionals. It was my “Camelot” – a very rewarding, productive and happy time.

But after eight years as director, I felt I had done it all, and I was becoming frustrated that I could not take my department any further. The job had become repetitive and I was becoming stale. The prospect of breaking in and training a long succession of green and ignorant hospital administrators was not very attractive....So I became one.

In 1985, I assumed additional responsibilities as Assistant Vice President with the same hospital, and a year later, transitioned to the corporate parent with a newly formed materials management company. I became a vice president of marketing and learned to write a business plan and learn more about the economics of healthcare. I knew I was taking a substantial risk with a company that was just a “start-up”, but the new circles I was moving within would provide additional opportunities should the company fail. And fail it did.

Fortunately, the new contacts did, in fact, provide new opportunities. In 1987, I followed those opportunities, and moved my family to San Diego, taking up responsibilities as Vice President of Pharmacy Services for American Healthcare Systems (AmHS), a hospital group purchasing organization. AmHS represented the purchasing power of 1000 hospitals across the country and quickly became a force with which the pharmaceutical industry must recon. Group purchasing organizations (GPO’s) were a new force on the national level and we were feeling our oats. AmHS gave me three new skill sets and insights that continue to be valuable:

- Big Pharma - how it works and who the people are.
- How the business of healthcare works
- How to negotiate contracts

I took these new skill sets and joined the pharmaceutical industry for a short time, as Senior Director for National Contracts with Fujisawa in Chicago. Unfortunately, I joined them at a time of unusually heightened intrigue and political uncertainty. I had expected to learn new management insights from the Japanese, who at the time were regarded as the world masters of business in the 1980’s. But the experience gave me insight as to why the Japanese model crashed in the 1990’s.

Meanwhile, my heart was still with the provider side. So when the call came, I joined managed care, the country’s largest PBM: PCS Health Systems. As Vice President of Strategic Contracting, it was my responsibility to define and develop the relationships PCS had with the pharmaceutical industry, and extract discounts, in the form of rebates, for our clients. This was business on a vast scale:

- $20 billion in drug sales
- 50 to 75million lives covered
- Processing more than a million prescriptions daily
- Processing 56 prescriptions per second
It has been an exciting and challenging job and draws us into the vortex of a national debate on the cost of drugs: how to keep the cost under control when the demand continues to rise.

Now a large retail drug chain has purchased our company. I may be on my way to a whole new career. Few of us ever aspire to work for a retail drug chain, but some exciting things are happening in this environment

- Automated dispensing
- Highly sophisticated electronic tracking systems
- Potential to integrate the PBMs formulary with the pharmacist who meets the public every day.

Rite Aid continues to have a challenge pushing the pharmacist out in front of the public, as do most all retail stores. But they are making that a priority, and are committing dollars to making it happen.

This lecture gives me the opportunity to give the young students and residents some advice, so I am going to take full advantage of it. I hope the last thirty years of my experiences lends some credence to it:

1. *Don’t limit yourself to being labeled as a “hospital pharmacist.”* You are a health care professional. Labels have a way of confining you and make you less than you can be. If you need a label, be sure it is broad enough to give you latitude for personal growth and development.

2. *Give yourself permission to take some risks.* This is especially difficult as we become older and shoulder more responsibilities as spouse and parent. But life is short. Make the most of it.

3. *Think big.* Hospitals are always under financial pressure and we find ourselves focused on making do with minimal resources. Sometimes, to do a first-rate job, you need some big money. Know when that is and don’t be afraid to go after it.

4. *Keep learning.* We are purveyors of information. If you stop learning, you are no longer employable.

5. *It’s a small world.* You never know who your next boss will be. When I was with AmHS, I tried unsuccessfully three times over six years, to secure a major corporate agreement with Lilly. During the last, and most intense negotiation, the Lilly team included a man who today, is my boss. Fortunately, we both conducted ourselves in a professional manner those several years ago, that has allowed our new relationship to flourish and grow.

Thank you again for the honor of accepting the Winston J. Durant Lecture Award.