

# ... Have Been to the Dark Side and Have Seen the Light!

*Richard Jones*

In reflecting upon how I might introduce myself to you, the CSHP membership, I kept stumbling across the phrase “you’ve been to the dark side and have now returned to the light”.

So what is the “dark side”? In theological terms, it is often considered to mean the company of demons, whereas in other circles it is a figurative description of death (and, when linked with the concept of light, rebirth); in yet other circles, it refers to a journey into an environment we know very little about and to some extent prefer to keep at a distance.

“Returning to the light” is often interpreted as a return to the starting place, but once you have taken such a journey your perspectives are permanently changed. Thus, a return to the light is more accurately interpreted as a life experience imparting a new perspective on all your future decisions (although such a journey does not necessarily mean losing the core of who you are). Anakin Skywalker, the character from the Star Wars movie series, illustrates how travelling through the dark side and returning to the light changes a person.

But enough with the philosophy! Why are these concepts important? Having had the good fortune to work in virtually all segments of the medication-based health care system—supplier, group purchasing, consolidated logistics, community practice, hospital, and both community and hospital associations—I have had the benefit of travelling to many “dark sides” of our profession. In each of these sectors, I have found that pharmacists are always highly dedicated to the ultimate reason for our profession, the patient’s welfare. However, each of us offers discrete forms of care, and we typically do not consider the value of the other segments or the synergy of values from collaborating to deliver the safest and most efficacious medication therapy.

Through my experiences I have come to believe that the dark side of our profession is typically an environment where full comprehension is absent, where few are

willing to venture, or where people do not see patients in the same way and may thus be working at odds with one another. However, shedding light on the value of each player across the continuum of patient care would be in the patient’s best interest. We now under-

stand the roles of physicians and nurses better than ever because we have taken the time to learn how they approach their patients. At the patient’s bedside, we have achieved mutual recognition for the value of our respective tool sets. We are also learning to fully leverage our respective expertise for the patient’s benefit.

We know even less about organizations and processes external to the hospital setting and have largely chosen to avoid taking the time to better understand their potential value in our success with patients. These external groups include not only the entire science and logistics networks but also regulatory bodies and health care disciplines now being granted prescriptive authority.

It is now more important than ever for hospital pharmacists to more accurately and effectively establish our place and our profile as leaders in medication therapy management and to use the full resources available across all services and disciplines to leverage the best care for the patient. Perhaps it is time to bring light to the dark sides that we have avoided for so long.

Thank you for the opportunity to serve as your President Elect this year.



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