

as a series of related tiles – and pharmacists are the grout that keeps all the tiles all together. Coordinating discharge summaries, making sure things don't fall off a prescription list, and improving the standard of practice generally – that's the opportunity that we're taking to enhance the services we offer. Obviously, reimbursement is better with long-term care."

PHARMACY: Streu's Pharmacy Bay Natural, Green Bay, Wis.

EDUCATION: University of Wisconsin – Madison School of Pharmacy

SERVING OUR COMMUNITY: "We're both a community pharmacy and a long-term care pharmacy in one building, and we've been in business for more than 70 years, and I just took over as CEO in June of last year. We specialize in services that our retail competitors don't do, like delivery and being part of a care team instead of just dispensing a prescription, and we like to say we try to optimize wellness. We have a nursing staff, as well, and we do a lot of durable medical equipment and point of care testing."

INCREASING DIVERSITY: "Our community is increasing in diversity, and that's been wonderful. We have a large Hmong-speaking population and a huge Spanish-speaking population in our area. We are proud to have bilingual staff and we have strong ties to low-income and Spanish-only clinics in our area, and we try to meet the needs of our communities. We have a low-income population in our area, too, and transportation and health literacy and housing security are barriers along with other social determinants of health. We also have working professionals, we have retirees, and we have students who come here. We also are one of the top pharmacies for patients coming for mental health treatment."

LTC PAST AND FUTURE: "LTC has been going on in our pharmacy for over 20 years – whenever Medicare Part D went into effect. In terms of operationalizing LTC, regulatory aspects have to be overcome, as well as different standards of practice. Sometimes we get staff who come with 20 years of experience, but in an LTC setting, they are really challenged. We really try to make sure medication therapy management is working well – keeping people on an appropriate schedule and making sure med sync is working. Health care has become very siloed lately, and you have all these different providers who are usually focused on one thing, and a patient's issues don't cross-over very well. I look at patient health

WORKING TO HELP OTHERS 7,600 MILES AWAY:

"I just got back from a trip to Uganda – and it was my 10th trip there. I'm part of a nonprofit called Medical Aid to Uganda, and we support a hospital there. I utilize my pharmacy skills every day – setting up clinics in rural areas, working with local providers, seeing patients, dispensing medications, and then I do education about medication for patients. I love giving back to my local community, but also my global community – and I get to combine that with my passion for traveling. Seeing the development that has occurred in the last decade has been unbelievable – it's so different today than during my first trip 13 years ago, and it's better. We take for granted the things we have all the time, and we're expanding the maternity unit in that hospital now because you have women laying on the concrete floor because there are no beds. You have patients with IVs hung on a nail on the wall because they don't have proper equipment. You have a developing country like Uganda where the average income is \$70 a month and they have to make real decisions about whether or not they'll feed themselves or purchase medication. Our organization was able to get a CT scanner in the hospital and it's the only one within a four-hour drive. While I was there, they had a fire and their generator was damaged – which affects the CT scanner, so they had to go without scans for five days, and there was a real urgency there."

BEYOND DISPENSING: "We're thrilled, as pharmacists, when we interact with patients in a meaningful way beyond dispensing. The only barrier for us is that we're not getting paid for our services sometimes, and it's not about greed. We have to keep the lights on and pay the rent. So, as I see those things – like point of care testing – get reimbursed, I get excited about the future of pharmacy. I'm excited about where pharmacy is going in the next five years, too. I'm in Wisconsin, and we just got provider status last year, and we're in the process of figuring that out. It'll allow us to do the things we're passionate about. I don't want to say we're not passionate about dispensing, but this profession is more than that. When we can put our knowledge to greater use and be a member of a health care team, patients will benefit from that."



Photos by Mark Hawkins

NICOLE
CEO, RPH



Nicole Schreiner, PharmD

an interview with William Richards