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**To:** Andrea Hussey <AHussey@leg.state.vt.us>  
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Thank you for the opportunity to share with you and the committee my experience. I will try to keep this as brief and to the point as possible.

I have been working in the Pharmacy industry since I was 15 years old and have been a practicing Rph since 1997. Through these years we have seen a lot of changes and growth within our industry and many more I'm sure to come. One thing has been constant throughout. The Pharmacist wears many hats within our community. In many cases, we are the first exposure to the healthcare system for people and become a trusted access point. On a daily basis, you can expect dozens of inquiries to affirm a doctor's diagnosis, questions about one's preventative healthcare, discussions ranging from bug repellent and sunscreen to oral and skin care. We are consulted regularly by patients and practitioners about the best therapeutic approaches available, drug-drug interactions, drug-disease contraindications, and side effects. The list goes on and on. One consistent has always been that we have been the most accessible and approachable highly educated healthcare resource for our communities. On any given day I could expect to spend 1/4 of my time "on the floor" consulting with patients providing a non-reimbursable but highly effective and much-needed service.

Over the past decade, we have seen our professional services expand into specialty medicine, MTMs, and vaccines adding yet another great access point for the public to better health. Unfortunately, as our demands have risen reimbursement rates have dropped and budgets have been cut leading to overworked and overstressed pharmacy work environments as we strain to keep ourselves just as accessible and approachable as before.

I have practiced in the same small Vermont town for almost 2 decades and had expected that I would continue to do so until my retirement. I was proud of the work I did and the lives that I had changed. While it was never easy it was fulfilling and enjoyable to see my patients day in and day out. I made a difference.

A few years ago the merger of Walgreens and RiteAid was announced. We were told that we had nothing to worry about, you will have more support than you have ever had before, etc. Of course, I couldn't believe the horror stories that I had always heard about working for Walgreens. I had to believe what I was told and experience it myself. I was committed to my community and my future there.

We transitioned over to Walgreens in July of 2019. In 1 calendar year, while still providing the same amount of services as before, with even more expectations added on, my technician budget had dropped by over half, staff pharmacist hours cut, manager hours were expanded while salaries were frozen in effect a decrease in pay. This created a work environment that was unmanageable. Customer service and wait times took a hit. My accessibility and ability to interact with the community were greatly affected. On any given day I may have had the time to spend 10 to 20 minutes "on the floor" helping patients with their needs. It was unfortunate and disturbing. I figured that it was just a transitional issue and things would get better as I became more fluent with the computer systems. They only got worse.

I can understand metrics, expectations, and goals but there is a breaking point to being able to provide these services with the reasonable amount of care, compassion, and research needed to provide them accurately and honestly. One gets pushed so far that some may choose to cut corners in order to keep up with the metric demand. DURs are missed, patient interaction is

almost non-existent, lunch breaks are worked through, paperwork is pushed off or breezed through. It becomes dangerous for our community and our pharmacy staff.

In the one year that I worked under the Walgreens banner, I logged 324 hours off the clock to keep things within a reasonable corporate metric level. I was unable to take time off because there were no covering pharmacists available. I had to cancel almost all of my vacations and community involvement outside of work. I had racked up over 6 weeks of unused personal time. Days off were taken up by inquiries to fill-in at other locations or do flu clinics of which you only got paid for 1 hour of time for every 30 injections. It was an absolute nightmare. My health and my family were suffering. One of my last interactions with management was a sit down to go over our metrics on the day before my vacation started. When I returned our budget was being cut again to 81 hours of tech time to fill 1850rxs/week and as they put it "the honeymoon was over". I took my vacation time to do some soul searching. I resigned as the Pharmacy manager and turned my back on the community that I loved and served for almost 2 decades. I had no prospects for employment but anything was better than continuing to work under those expectations. I was doing my community a disservice by continuing.

My story is not unique. In fact, I have spoken to many pharmacists about their experiences. Every one of them shares almost an identical struggle except they couldn't get out. We have seen our profession turned from one of pride and helpfulness to one of distress and inaccessibility. I have urged my colleagues to report these injustices to the Office of Professional Regulation and to have their stories heard. They are afraid of retribution and loss of employment. They have families and responsibilities that outway their own health concerns.

We as Pharmacists play a very important role in our community's healthcare. Unfortunately, it has been strained so much by profit and the race to provide billable services that it has become physically unsustainable. When asked about a solution Pharmacists overwhelmingly reply that they need more help. More tech hours. This would free them up to provide these great services. Services that the industry has provided the tools and technology for us to use to better aid our communities. But we can't do it safely and effectively within the parameters that are currently in place. Lives are being negatively affected now and people's healthcare is at stake.

I don't know the solution but speaking up about the conditions that our profession works under is maybe one step in the right direction.

Thank you for your time.

Gregor Outslay RPh

