

Albert Einstein said: The world as we have created, it is a process of our thinking. It cannot be changed without changing our thinking. I leave you with this quote to think!

I love the theme of this AGM, because it reminds me of how our profession has evolved and continues to evolve in the next few years, it reminds me of the great strides, we would have made to fulfil our dreams and goals. It is not going to be an easy journey, but I see a bright future if the passion is there and our young pharmacy professionals with their zest for change is maintained, we will get there. Sustaining this momentum will translate into pharmacy professionals heading disease programs in the ministry of health and sanitation, that is the change we want and need to see, we have the knowledge and expertise to do so, all we need to do, is to show the magnitude of the impact we are making by striving for excellence, nothing less. Colleagues, ladies and gentle, good morning to you all, thank you for choosing me to be a keynote speaker today, I hope with my speech I will be able to inspire younger colleagues.

Over the last decade, there has been a significant increase in the number of clinical trials worldwide and this has opened a range of new opportunities for those wishing to work in the research industry. The design, coordination and analysis of a clinical trial requires a multidisciplinary team which includes mainly the principal and sub-investigators, clinical research coordinators (CRC), research pharmacists, and clinical research associates (CRA), among others.

The research pharmacist can play a fundamental role in the way clinical trials are conducted and contribute in different ways to the research process. The pharmacist can use his or her expertise and collaborate directly on pharmaceutical aspects such as drug composition, supervising indications, dosage administration, contraindications, adverse effects, and interactions of investigational drugs (IDs). In addition, pharmacists can help to ensure the safety of human subjects and their rights, which are mainly protected by local Institutional Review Boards (IRBs). For any of these functions, the pharmacist must be familiar with the research protocol, informed consent forms, investigator's brochure, and standard operational procedures of the research center, which include regulatory, ethical, and legal requirements. Pharmacists can also play a varied role by working as clinical research coordinators or clinical research associates and thus streamline all the activities of the clinical trial, ensuring that all the trial procedures are followed

according to International Council for Harmonization, GCP guidelines and regulatory requirements. It indeed makes me happy to see colleagues, aiming for the sky in the field of research, I must say I am proud of them and honored to have worked with them.

I will not bore you with what you and I know, that is, the roles of pharmacists in the health care system, but I will be a bit biased by emphasizing on community pharmacy practice, since it is one area many of us tend to shy away from. From a public health standpoint, community pharmacies can offer services across a range of relevant and underutilized areas of health needs. We can all work to identify those unmet health needs and create our niche to improve the health of our community! What are we waiting for? Pharmacists are equipped with the knowledge and skills needed to meet the health-seeking behaviors of the society served, especially in relation to early disease prevention, health protection and health improvement. The role of community pharmacists is more towards a public health approach, as well as a patient centered approach. Imagine, how many lives are saved with our clinical interventions, medication reviews, health promotion, screening, and management of chronic diseases. Pharmacists' interventions at community level, has immensely contributed to improved asthma control, detection of diabetes and cardiovascular risk factors, reduction in weight, and identification of drug-related problems. The availability of vaccination services in pharmacies have contributed to increased vaccination rates more so in the covid-19 pandemic. I ask again, what are we waiting for?

Why not work as a team, establish your own community pharmacy outlets, and create the impact you wish and crave to feel and see? Why are we allowing non-pharmacy professionals take over the pharmacy business in SL, why allowing non-pharmacy professionals being the major players in community pharmacy practice? The question is, are they practicing pharmaceutical care? I will rather say, absolutely not, they are just there to destroy the image of our beloved profession by encouraging drug peddling and irrational medication dispensing to our poor people! Citiglobe has become one pharmacy that could be regarded as a turn off to some people because we refuse to dispense anti-microbial agents when it's absolutely unnecessary! Sometimes it is like we are speaking Greek when we "ask why do you need a certain drug". They are like, "why do you ask, other pharmacies don't"! We all know the answer to that! It is because of you! Yes, pharmacy

professionals, either you are not available at your places of work to educate the public about misuse and overuse of antimicrobial agents, or you do not have the mandate to do so, because you will become the enemy of your own workplace. Our regulatory bodies must fine all proprietors that operate without pharmacy professionals, so also pharmacy professionals that are not present at their community pharmacy practice. This can only be achieved through monitoring and evaluation by the pharmacy board.

Allow me to remind you, if we do not wake up, innovative foreign pharmacy professionals will grab readily available opportunities to establish their own community pharmacy practice in your own country? Right now, we sit in our corners and complain that certain professions are stealing our profession, do not blame anyone but yourself. We need to move as a force to change community pharmacy practice in Sierra Leone. UHC can be achieved when community pharmacy practice is integrated into primary health care system, which is already occurring in other countries like NHS in the UK, Canada, Scotland, Europe etc. The UK health care system for e.g. is changing dramatically to meet the health challenges of the 21st century. Their aims are to improve 'out-of-hospital' care, and finally dissolve the historic divide between primary and community health service. There is good evidence which highlights the contribution of community pharmacists as a substantial health care element in primary care practice. Key changes envisaged for the future of our pharmacists whether in hospital or community pharmacy, are their integration in primary care, comprising the development and establishment of clinical pharmacy as a specialization area, peer clinician recognition and better integration in primary care teams, including full access to clinical records. These key changes would enable pharmacists, to apply their competence in medicines optimization for improved patient outcomes. Let us be realistic, will that come to pass if we allow, community pharmacy practice to continue like this? The answer is a big NO!

Primary care services continue to face unprecedented and growing demand. This reflects widely recognised system pressures associated with an ageing population, multimorbidity and inappropriate polypharmacy. There are many underutilized services that community pharmacists in Sierra Leone could provide to aid in the successful implementation of UHC. In our country,

inadequate reimbursement policies, health system structuring, and legislature are some of the contributing factors hampering us.

The unsung role of the pharmacist as an integral healthcare team member will come to realization. As practitioners trained to assess the whole-patient picture, pharmacists connect the dots between prescribers and impact the clinical and economic effects of drug therapy in an ever-changing healthcare system. Professional medical and pharmacy organizations remain instrumental in advocating for the underutilized resource of pharmacists, in any healthcare setting. PSSSL being a pivotal pharmacy professional body must advocate for the expansion of the role of pharmacists, particularly in relation to the provision of services that contribute to disease prevention and health improvement. On this note, I hope and pray the upcoming president of the PSSSL will make significant strides towards building the pharmacy profession we aspire and crave to see. We wish to see a PSSSL that will selflessly serve and be responsive to our needs and reflect our unique priorities. We wish to have all our pharmacy professional bodies embrace multilateral cooperation with great minds, great thinkers, entrepreneurs, visionaries, and experts to achieve our goals. We need a create a place where politics, rivalry and envy is left at the door of our beloved and loyal profession. I thank you all for your time, have a dignified and successful deliberation.