

KEYNOTE ADDRESS

Delivered by Dean Mark Richardson
Physician Assistant Graduation Ceremony
OHSU Auditorium
August 14, 2010

Ted: thank you for that kind introduction and for the honor of addressing your graduates.

Good afternoon to all of you, welcome.

To the OHSU Physician Assistant Class of 2010: Congratulations!

This is a great day to celebrate a wonderful accomplishment.

Today, you are surrounded by family, friends and teachers – all of whom helped you arrive at this particular time and place.

This is an accomplishment for them too. I know they are very proud of you as we all are.

A month or so ago, I happened to read an article in the East Oregonian Newspaper about a recent graduate of the OHSU Physician Assistant Program, Kristin Dunlap, who now practices in Pendleton – for our guests today who may not be familiar with that town, it's on the eastern side of the state, a focal point in a rural area. It's also home of the Pendleton Round-Up rodeo.

The reporter asked her:

“What is your proudest accomplishment?”

Do you know what Kristin said? She responded:

“I would have to say graduating from the OHSU physician assistant program along with my 35 classmates. We started with 36 in the class and everyone worked hard to support each other throughout the process.”



School of Medicine
Oregon Health & Science University

But the interview was about more than that. It was also about how she had ended up practicing in Pendleton. That again had to do with her education. Here is what she said:

“I came to Pendleton on a medical rotation during my physician assistant training at OHSU. One week after setting foot in the town I fell in love with the people, the clinic and all the town had to offer, so I changed all my plans and found a house!”

I admire her spirit of being open to opportunity and a change in plan.

In addition to your knowledge, experience and dedication – it is this willingness to be open to new opportunities, and new ways of providing health services, that will be essential to your future career.

While it is convenient to think that health care reform is “done” now that new federal legislation was passed – nothing could be further from the truth.

We have much work ahead of us if we are truly going to transform our health care system from what it is now to what it has the potential to become.

I believe we are at the very beginning of fundamental change that I have no doubt will sweep across our system of healthcare.

Perhaps sweep is not the right word, perhaps crawl is a better descriptor, but change will happen, and it will eventually permeate as our patients see the value of these changes to their own health and well-being.

What does this change look like? It’s not fully clear yet.

But we know that the health care community – in which you are now fully vested members – must work together and take responsibility for reinventing health care so that it is both lower cost *and* higher quality.

Meeting this goal is both our biggest opportunity and one of our biggest challenges.

When you look back 20 or 30 years from now, in the year 2040, as you hopefully are pondering retirement, I am optimistic that the health care world you recall from this day will be very different from that future time. Not just because of technology advances and new cures, but because you will be practicing in a world in which high quality health care will be accessible to all.



School of Medicine
Oregon Health & Science University

In your role as a physician assistant, you can be an important catalyst and leader to accelerate the transformation of our system.

Indeed, that role of catalyst – of doing things differently and re-inventing health care – is rooted in the history of your profession.

The profession of Physician Assistant came into being in the 1960s linked, in part, to two events:

First, even then we had access issues and an uneven distribution of primary care physicians. People were increasingly unable to get even the most basic health care.

Second, at that same time in the mid-1960s, many medically-trained veterans were being discharged from service after the Vietnam War and related military settings with significant frontline health care experience. Not the ideal way to receive health care training, but it was an education nevertheless.

Health care leaders of that era asked: how can we use this depth of experience to help meet physician shortages?

And the concept of a Physician Assistant was born.

The first class of Physician Assistants was at Duke University in North Carolina in 1965. The curriculum was based on what had been learned, ironically, during another war-time era – World War II – when this country needed as many physicians as quickly as possible and the MD curriculum was temporarily shortened to three years.

After Duke, similar physician assistant programs sprang up all over the country. The OHSU program was established in 1992 with start up funds from the Oregon Legislature.

Ted Ruback founded the program and helped develop the curriculum. The program has flourished under his leadership. An essential aspect of the founding mission was to contribute to meeting the health care workforce needs of Oregon. It has certainly done so.

As of 2008, there were about 75,000 physician assistants practicing in this country. An amazing trajectory from just a few decades ago!

But I believe the full potential of your profession is still to come.



School of Medicine
Oregon Health & Science University

Consider that after four decades, the physician shortage that helped catalyze the birth of your profession is still with us.

The most recent estimates from the Association of American Medical Colleges states that the nation will face a shortage of 90,000 physicians over just the next decade. And the specialty where this shortage is most pronounced is primary care.

Why? We have not yet broken free of the outdated health care delivery models of the past and the financial incentives that encourage their continued existence.

We are all used to a certain way of delivering health care – historically this has focused on the physician-patient relationship. And the primacy of this relationship is reflected in the way insurers pay for health care.

As we look toward the future to transform health care, we also need to look beyond these old ways.

The evidence is clear. If the traditional ways were still working, we would not be facing a physician shortage, our rural areas would not be starving for providers, costs would not be so high and our health care system would not be in need of transformation.

As I noted earlier, the health care community must take responsibility for reinventing health care so it is both lower cost *and* higher quality.

That's where the spirit of openness comes into play.

One new model that would support these goals is to refocus the patient experience to revolve around a team of health care professionals, rather than solely around a physician.

Here is a straightforward example: I have patients who come to see me in my office just to get a prescription refilled. They cannot get the prescription any other way. This is a burden on my patient and an unnecessary cost to the system. In a team-based approach to health care, other providers would always be able to refill that prescription and get reimbursed for that care.

The physician assistant is essential part of that team.



School of Medicine
Oregon Health & Science University

You are already trained to practice this way – many of you are preparing to join a physician practice, to work in a hospital, or some other clinical setting.

Already, this group has been responsible for so much health care. As part of your education, the 34 of you graduating today have together helped provide health care in 5 states and 43 towns and cities.

You have been involved in 57,567 total patient encounters which included:

- 14,413 rural visits
- 6,551 emergency room cases
- 2,507 surgeries
- And you helped delivery 261 babies!

Wonderful contributions and now as you graduate, each of you is poised to do so much more.

But our system as it is currently configured – the physician supervision required and the billing constraints, for example – is not fully and completely set up to take advantage of the breadth of your talents and education.

We must all work together to change that.

Consider this scenario: a physician assistant – perhaps one of you – may want to live and work in a rural setting to provide desperately needed primary care services to people who now must travel 50 miles or more to see a physician for anything at all, even routine primary care.

But because there is no supervising physician in that small rural town, paradoxically, other providers, such as a physician assistant, cannot practice independently there either.

Our current models of delivery and reimbursement require a type of physician supervision that limits access to care delivery.

Our system results in that small rural town being deprived of your expertise.

New ways of thinking could help that town in any number of ways. Changes in payment and scope of practice come to mind but there are other ways too.



School of Medicine
Oregon Health & Science University

The creative use of telemedicine for example and digital information transfer. Does everyone on a health care team need to be in the same physical location?

As we look into the future, let's be open to new ways of organizing our community of health care professionals so that together, as a team, we can deliver health care in ways that best meet the needs of our patients – wherever they live.

It is a truly exciting time to enter the health care profession as a physician assistant.

Our health care system is changing. But what is actually changing is each one of us as we look for new ways to provide care.

Working together, we will become the new health care system.

In closing, would like to share some words from W. Edwards Deming – process manager....now back in vogue.

“It is not necessary to change. Survival is not mandatory.”

And one more related thought, often attributed to Darwin, but that is not well documented.

“It is not the strongest of the species that survives, or the most intelligent that survives. It is the one that is the most adaptable to change.”

Congratulations Class of 2010!

You have a very exciting future ahead of you!



School of Medicine
Oregon Health & Science University