

earth where there will be no more pain, for the old order of things will pass away.

The fact that we each continue to write our own contributions to the lower story is cause for great hope, in that we have an opportunity to bring our lives into greater alignment with God's upper story. We all have a role to play in the unfolding of God's story. What a wonderful hope we have in Jesus Christ that we should want to share that Good News with others. I heard it said that Charlie Kirk's passion was to make Heaven crowded. What a beautiful sentiment. I will do whatever I can to expand the number of believers who will be with us in paradise. Let's agree to help make heaven jam-packed!

I live near Disney World and love to visit the parks. During one of our trips to Hollywood Studios, as we were entering the park a Cast Member with a microphone announced: "This is the way!" (It's a famous catchphrase from the *Mandalorian* series). I answered back, "**Jesus is the only way!**" His response surprised me. He threw his hands in the air and yelled into his microphone: "**Yes, Hallelujah, Jesus is the way!**" In one short moment, we just witnessed to thousands. Praise the Lord!

Divinely Prescribed: Interprofessional Collaboration was Part of God's Design

By Mariette Sourial

Interprofessional Education Collaborative (IPEC) first published the IPEC Core Competencies in 2011. The competencies were updated in 2016 and again more recently in 2023. These competencies include Roles and Responsibilities, Communication, Values and Ethics, and Teams and Teamwork, and are the foundation for collaborative practice in healthcare.¹ Many health professional schools incorporated these competencies as part of their curriculum and are now part of most accreditation standards.

Before interprofessional education and collaborative practice became recognized concepts, God had already envisioned this model and woven collaboration intricately into our design. Each of us was meant to connect and collaborate; we are designed to work in relationship – both with Him and with one another. The IPEC Core Competencies share biblical underpinnings and principles of collaboration for Christian healthcare professionals. Drawing on God's Word and the IPEC Core Competencies, pharmacists and student pharmacists should view interprofessional collaboration not only as a professional requirement, but also as fulfilling our divine calling.

Roles and Responsibilities

Understanding one's role and the roles of other healthcare professionals involved in the provision of person-centered care allows us to function more effectively and to reduce harm. In God's design, the body has many parts that function together. Similarly, healthcare has many

disciplines with different functions. Each profession offers unique gifts and abilities which complement those of others. Pharmacists are the medication specialists on the healthcare team and provide that lens when caring for people. Although our independent contributions are greatly valued, we are all interdependent with other healthcare members. Together we can provide holistic care – caring for the physical, social, emotional, mental, and spiritual needs of our patients. In 1 Corinthians 12, Paul describes the Church as one body made up of many different parts:

"There are different kinds of gifts, but the same Spirit distributes them... Now if the foot should say, "Because I am not a hand, I do not belong to the body," it would not for that reason stop being part of the body. And if the ear should say, "Because I am not an eye, I do not belong to the body," it would not for that reason stop being part of the body. If the whole body were an eye, where would the sense of hearing be? If the whole body were an ear, where would the sense of smell be? But in fact God has placed the parts in the body, every one of them, just as he wanted them to be. If they were all one part, where would the body be? As it is, there are many parts, but one body. The eye cannot say to the hand, "I don't need you!" And the head cannot say to the feet, "I don't need you!" On the contrary, those parts of the body that seem to be weaker are indispensable, and the parts that we think are less honorable we

treat with special honor. And the parts that are unpresentable are treated with special modesty, while our presentable parts need no special treatment. But God has put the body together, giving greater honor to the parts that lacked it, so that there should be no division in the body, but that its parts should have equal concern for each other. If one part suffers, every part suffers with it; if one part is honored, every part rejoices with it.” (1 Corinthians 12:4,15-26, NIV).

Each profession serves a unique and different role, bringing its distinct expertise on the care team while also demonstrating interconnectedness and interdependence in sharing the same mission of improving patient care.

Communication

Communication between healthcare team members and patients is necessary for the provision of high quality, safe care. The Joint Commission cites poor communication as one of the most frequent contributors of sentinel events. Ineffective communication, whether between providers or between providers and patients, is a significant cause of patient harm and death.² Effective communication between all those involved in patient care builds trust and enhances patient outcomes. Clear and concise interprofessional communication is the means or process by which healthcare providers share or exchange information with other professionals and patients. As pharmacists, we should be in constant communication with patients or with other healthcare professionals in order to optimize patient care.

The Bible emphasizes the importance of communication in relationships with God and with one another, highlighting the need for respectful, truthful, and compassionate communication. Scripture calls us to *“speak the truth in love”* (Ephesians 4:15) and to *“be quick to listen and slow to speak”* (James 1:19), both of which are essential traits of effective communication when dealing with providers and patients. It is important to actively listen to and respect the different opinions from other members. The tongue is a powerful muscle that should be exercised with caution. Words can build up and tear down, and we are to use them wisely and with intentionality. We should be reminded not to *“let any unwholesome talk come out of your mouths, but only what is helpful for building others up according to their needs, that it may benefit those who listen.”* (Ephesians 4:29 NIV)

Teams and Teamwork

Teamwork and unity among team members can lead to greater success and fulfillment. When professions come together, they bring their expertise and perspective to provide holistic care, as well as ensure checks and balances. Not a single profession is meant to carry the burden of care alone.

Teams are God’s answer to our own human limitations. When a pharmacist reviews a patient’s medications and identifies medication-related problems, they reach out and collaborate with the patient’s providers to resolve them. Pharmacists review and contribute to the diagnostic process with other healthcare team members. Without technicians, nurses, physicians and other members, the care provided may not lead to the desired health outcome. Each team member must allow the others to fully function, and by bringing each of our areas of focus, we contribute to a more comprehensive approach to care. In the Bible, Jesus never sent anyone out alone. Instead, He consistently emphasized collaboration, sending His disciples in pairs (Mark 6:7) and surrounding Himself with His twelve disciples (Mark 3:13-19). Especially in difficult times, we are reminded that *“Two are better than one, because they have a good return for their labor. If either of them falls down, one can help the other up.”* (Ecclesiastes 4:9-10, NIV).

Values and Ethics

As healthcare professionals, we are called to honor the dignity of every member, whether they are a patient or fellow provider. The Values and Ethics competency calls us to uphold mutual respect and integrity and reminds us to prioritize patient care over our own preferences or professional pride. As Christians, we recognize that every individual is unique, made in the image of God, and worthy of our best care and respect. Pharmacists are often known as the gatekeepers of critical information and safety checks. Operating from a place of ethical framework and humility ensures that our practice honors both our patients and God, who first called us to serve them.

As we practice pharmacy, may we always remember this is not just a job or a discipline, but it is part of God’s plan to work together and heal patients. As pharmacists, we are medication experts, advocates, and stewards of what God has entrusted to us. When we collaborate with others in healthcare, we reflect unity and shared responsibility. Interprofessional education is not merely a curricular outcome we strive to achieve in our graduates, but rather a calling to fulfill God’s work through collective effort.

References:

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From White Coat to Calling: A Pharmacist's Journey Through Loss, Burnout, and Obedience

By Melissa Turner

On the morning of November 30, 2018, while I was preparing to open the pharmacy where I worked for the last five years, I received a phone call that changed my life forever. My sister Katie and her boyfriend Keith had been shot and killed by my uncle in my grandmother's home. I collapsed onto the pharmacy floor as reality set in. Of course, I was unable to work that day and returned home to be with my family as quickly as I could. Then we began processing this unimaginable loss. I would never hear Katie's voice again. I would never hear her laughter or her singing. I would never get the opportunity to hug her or tell her how much I loved her. I didn't get to say goodbye.

A few days later, I stood in front of my closet and asked myself a question I never imagined asking: *what should I wear to my sister's funeral?* Five days after her death—on what should have been her 26th birthday—we said goodbye. I was mad at God for allowing this to happen. I was frustrated at the people who tried to comfort me by saying, *"She's in a better place now."* I was angry at myself for not repairing our relationship, because, at the time of her death, there were unresolved tensions and unspoken words between us. I carried deep regret that I had not repaired our relationship or sought reconciliation before her life was taken. That regret became a significant source of guilt in my grief journey.

A week after her death, I was right back at work filling prescriptions and administering vaccines. Resuming the same routines as if nothing had happened. Then, my downward spiral began. I was numb and in disbelief. A became a shell of the woman I used to be. I stopped

smiling. I didn't want to live anymore, and I thought about different ways I could end my life. No matter what action I took, it had to be effective—and quick—because life felt meaningless to me without Katie. I tried to numb my pain with alcohol and stay busy so I wouldn't have to feel the pain. I refused to let anyone help me or talk to a therapist or counselor because I convinced myself I was "ok" and I could figure it out on my own. I didn't care about being a pharmacist anymore. I hated my job and regretted going to pharmacy school. I begged my husband to please let me stay home so I wouldn't have to go to work. What was the point of eight years of education? The six-figure salary? The new car, the home, the fancy vacations? None of it mattered anymore.

Losing Katie marked the beginning of a profound season of grief, trauma, and transformation that would ultimately reshape my faith, my identity, and my understanding of calling. The moment I knew something had to change came quietly. I was sitting in the darkness of my bedroom after Christmas 2020 and my husband and dogs were snoring. The tears were flowing again as I listened to a podcast on pharmacist burnout. At that moment, something shifted. I had never heard of burnout and finally, I knew I wasn't alone.

I wasn't a bad pharmacist or a bad person. I knew I needed help and I also realized that while Christ is our Savior, I still had to choose to respond to His invitation for healing. No one else could do that work for me or make that decision on my behalf. I had to actively seek help, step into obedience, and participate in the healing God was offering