

PSYCHOLOGICAL HEALTH AND SAFETY TOOLKIT FOR PHARMACY LEADERS

By Amy Oliver and Dr. Carly Crewe

Sponsored by The Ontario Pharmacists Association



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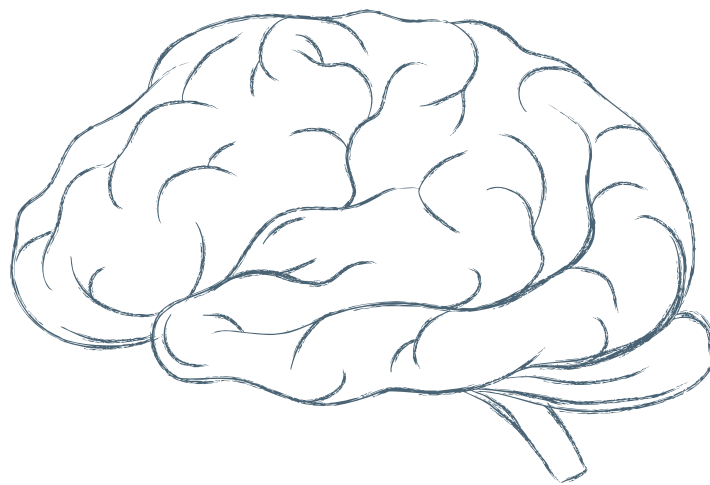
Amy Oliver
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eunoia medical
in pursuit of a well mind

SECTION 1:

TALKING TO YOUR EMPLOYEES ABOUT MENTAL HEALTH



WHY WE DON'T ADDRESS MENTAL HEALTH AT WORK AND WHAT TO DO ABOUT IT

OBSTACLE:

We feel uncomfortable about
addressing mental health stigma

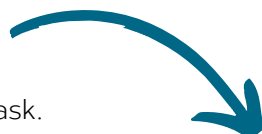


STRATEGIES:

- Work on our own biases first
- Mental health as a challenge, rather than a weakness
- See mental illness as the same as physical illness
- Encourage open conversation and non-judgement as the norm
- Share your own experiences

OBSTACLE:

We don't know when to ask.



STRATEGIES:

- Changes in work habits
- Changes in appearance
- Changes in mood, affect or demeanor
- Changes in attendance/absenteeism

OBSTACLE:

Not knowing what to do after the
disclosure is made.



STRATEGIES:

- Be mindful of your roles and responsibilities
- Do research and know what resources are available to suggest
- Have crisis resources on hand
- Confidentiality and safety

SOME PHRASES TO START THE CONVERSATION

“I’VE NOTICED X LATELY. I’M NOT SURE IF THIS IS SOMETHING YOU’VE NOTICED, BUT I JUST WANTED TO CHECK IN THAT YOU’RE DOING ALRIGHT?”

“IS THERE ANYTHING HERE THAT IS REALLY MAKING YOUR LIFE CHALLENGING LATELY?”

“WHAT WOULD BE MOST HELPFUL TO YOU RIGHT NOW?”

“WHAT CAN I TAKE OFF YOUR PLATE?”

“HOW CAN I SUPPORT YOU WITHOUT OVERSTEPPING?”

“LET’S DISCUSS THE RESOURCES WE HAVE AVAILABLE HERE, AND WHAT ELSE YOU MIGHT NEED.”

“I’VE BEEN THROUGH SOMETHING SIMILAR. AND WHILE I DON’T WANT TO MAKE THIS ABOUT ME, I’M OPEN TO SHARING MY EXPERIENCE WITH YOU IF AND WHEN IT WOULD BE HELPFUL.

Reflecting on your personal barriers:

Use this space to journal your reflections around mental health in your own personal and professional life:

Do you have negative beliefs about mental illness that are old and stigmatized?

How does it serve you and your organization to continue to carry those beliefs?

What benefits could be experienced around building new beliefs around mental health and mental illness, for yourself, your employees, and your business?

MENTAL HEALTH RESOURCES FOR OUR PHARMACY TEAM

HUMAN RESOURCES



HEALTH BENEFIT PROVIDER



EMPLOYEE ASSISTANCE PROGRAM (EAP)



PHARMACY MANAGER



MENTAL HEALTH RESOURCES FOR OUR PHARMACY TEAM

PHARMACY ASSOCIATION RESOURCES

<https://opatoday.com/covid19-mental-health-resources/>



LOCAL MOOD DISORDERS ASSOCIATION



LOCAL ADDICTION SERVICES PROVIDER



CRISIS LINE



MENTAL HEALTH RESOURCES FOR OUR PHARMACY TEAM

CHILD AND FAMILY SERVICES



PEER SUPPORT PROGRAM



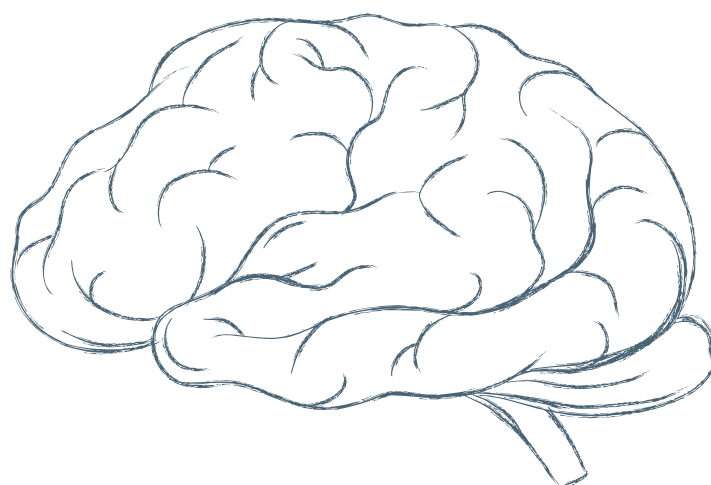
OTHER



OTHER



SECTION 2: OPERATIONALIZING PSYCHOLOGICAL HEALTH AND SAFETY IN PHARMACY PRACTICE



IS YOUR PHARMACY A PSYCHOLOGICALLY SAFE WORKPLACE?

ADAPTED FROM



Is employee psychological health and safety a stated priority in our pharmacy's organizational policy statement?

Do people in our pharmacy have a common understanding of a psychologically safe workplace?

Is our pharmacy management team familiar with the legal and regulatory requirements and expectations related to workplace mental health and psychological safety including the National Standard on Psychological Health and Safety CSA Z1003?

What is the cost of stress-related illnesses - both physical and mental - to our pharmacy?

Is there a system in place to measure the rates of both absenteeism and presenteeism (being unproductive while present at work) in our pharmacy and what percentage of these may be related to psychological health and safety issues?

What percentage of your disability claims do you believe are related in whole or in part to mental health issues or workplace conflict issues?

Do our policies align with occupational health and safety, labour law, tort law, contract law and employment standards with respect to psychological health and safety?

[Empty response box]

Is there a process in place to encourage pharmacy managers to provide a psychologically safe workplace through such measures as performance indicators and evaluation methods?

[Empty response box]

Are those whose position includes managing, supervising or supporting employees, adequately trained, skilled or competent to make sound decisions?

[Empty response box]

Do the leaders and management in our pharmacy recognize and respond to conflict in a timely and effective manner?

[Empty response box]

Are the leaders and management in our pharmacy trained to identify the difference between a mental health problem and a performance issue?

Does our pharmacy have a policy on work-life balance?

Does our pharmacy work to prevent physical, relational or emotional harassment, bullying or aggression?

Does our pharmacy help prevent discrimination by providing all employees with a basic level of knowledge about mental health issues?

Do we have crisis response policies and processes in place for issues such as suicide, violence, threats of violence or emotional breakdowns at work?

Does our pharmacy have a process allowing for open communications between managers, supervisors and employees that assist us to address the needs of co-workers who are traumatized by personal or workplace issues?

Do we have a return to work policy that takes into account the emotional, psychological and interpersonal challenges and allows employee representatives a role to play in the return to work process including having the opportunity to provide input on the return to work process?

Do we know how to reasonably accommodate those with a mental health disability at work?

What resources in our pharmacy and/or community exist for employees struggling with mental health issues?

Is our pharmacy exposed to complaints concerning the duty to reasonably accommodate persons with mental disabilities, which may include depression or anxiety-related disorders?

Addressing psychological health and safety in the pharmacy workplace requires a holistic approach to change.

Use this space to brainstorm what is within your control and the various ways YOU can contribute and influence in the following categories.

INDIVIDUAL

ORGANIZATIONAL

SOCIETAL

ARE YOU A PSYCHOLOGICALLY SAFE LEADER?

Complete the Psychologically Safe Leader Assessment available here:

<https://www.psychologicallysafeleader.com/>

REMEMBER! Self-assessments are acontextual and asituational and should only be used to foster reflection with regards to growth opportunities.

Based on your personal assessment and individualized report, consider the following questions...

What areas are you strong in?

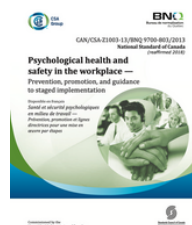
How can you use these strengths to further create a psychologically safe environment in your pharmacy practice?

What areas your areas of opportunity and how can you further develop them?

ADDRESS YOUR PHARMACY'S GAPS AND NEEDS

ADAPTED FROM THE NATIONAL STANDARD OF CANADA TO MEET PHARMACY PRACTICE CONTEXT.

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy has a clear vision of what a psychologically safe pharmacy should look like.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy has a policy statement outlining its commitment to psychological health and safety.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy leaders “walk the talk” and “lead by example”.
<input type="checkbox"/>	<input type="checkbox"/>	The psychological health and safety of our pharmacy team is part of the decision-making criteria when making changes or rolling out new initiatives.
<input type="checkbox"/>	<input type="checkbox"/>	Pharmacy employees at all levels are encouraged to share perspective and collaborate on plans for a psychologically safe environment.
<input type="checkbox"/>	<input type="checkbox"/>	We have some best practices in our pharmacy worth sharing with others that support the psychological well-being of our team.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy has worked to identify risks that can harm the psychological health of pharmacy employees.
<input type="checkbox"/>	<input type="checkbox"/>	The 13 psychosocial factors have been (formally or informally) assessed in our pharmacy.
<input type="checkbox"/>	<input type="checkbox"/>	We have collaboratively discussed and addressed the risks and strategies of moral distress in our pharmacy.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy leadership have proactively worked to ensure and support the rights to psychological self-care for our pharmacy professionals.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy has measurable objectives and targets related to the psychological health and safety of our team.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy team can make available the resources needed to work towards implementing best practices in psychological health and safety.
<input type="checkbox"/>	<input type="checkbox"/>	Our pharmacy has processes to reduce psychological harm of pharmacy teams.



For further elaboration and in-depth audit tools, see Appendix E in the National Standard of Canada for Psychological Health and Safety in the Workplace.

<https://mentalhealthcommission.ca/national-standard/>



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Reflection Questions

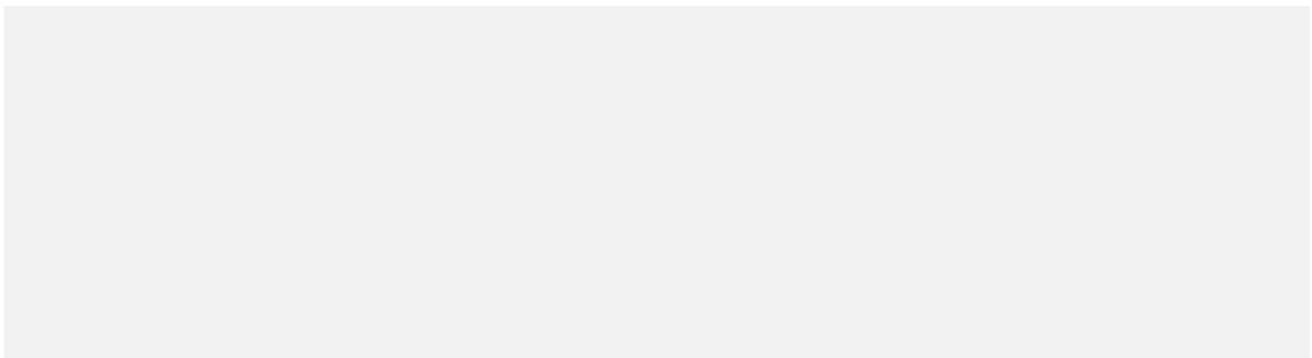
Now that you have identified gaps and needs in your pharmacy, which 3 gaps / needs are realistic for you to focus on in the next 3 months with your pharmacy team?

What additional goals can you strive for over the next year?

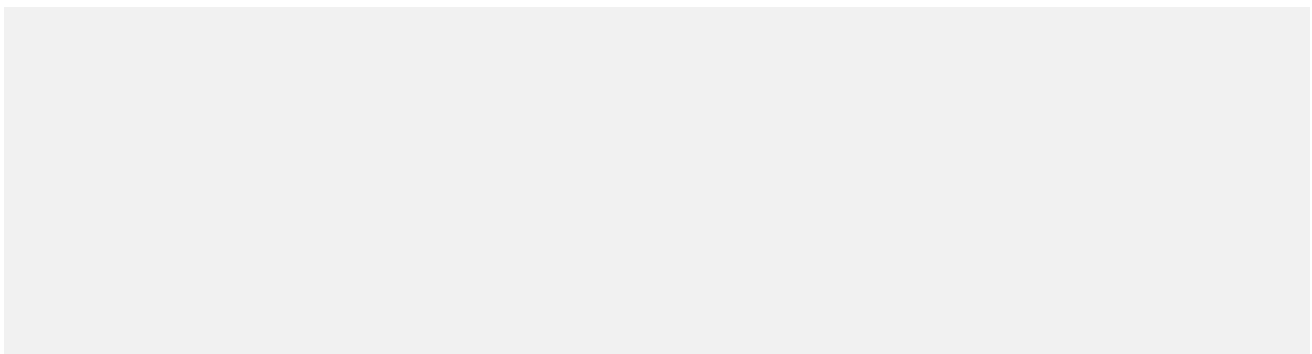
PSYCHOLOGICAL HEALTH AND SAFETY ACROSS THE EMPLOYEE LIFE CYCLE

Consider the following areas in the employee life cycle. What are some ideas as to how you can promote and ensure psychological health and safety in each stage in your pharmacy?

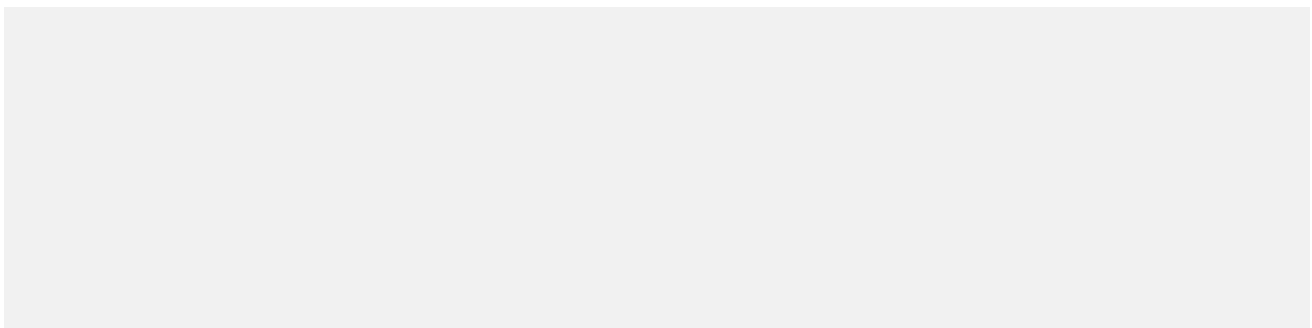
Recruiting and Hiring



Orientation and Training



Evaluation and Performance Management



Promotion

[Empty text area for Promotion]

Interventions

[Empty text area for Interventions]

Accommodation

[Empty text area for Accommodation]

Termination

[Empty text area for Termination]

SUPPORTING CHANGE MANAGEMENT IN PURSUIT OF A PSYCHOLOGICALLY SAFE PHARMACY PRACTICE

Take the Lead!

Leadership Change Readiness Self-Assessment

1. Do I feel confident that I can explain to employees why we need a more psychologically safe pharmacy environment?

Yes No

2. Do I believe changes are necessary?

Yes No

3. Do I understand how I contribute to implementing changes to create more psychological safety?

Yes No

4. Am I feeling positive about the needed changes?

Yes No

5. Am I confident that I will be successful in implementing change?

Yes No

6. How credible will I be at this point in time in communicating changes to my pharmacy team?

Yes No

Based on your answers above, what do you believe the next step is in your pharmacy?

Preparing for Change

1. Have you established the WHY? Yes No
2. Can you articulate what is going to change? Yes No
3. Do you have the necessary sponsorship (leadership support)? Yes No
4. Have you identified who will be impacted? Yes No
5. Will there be resource impacts? Yes No
6. Will people need training? Yes No
7. Have you identified risks, barriers, and enablers? Yes No
8. Have you, as a pharmacy leader, prepared for leading the change? Yes No
9. Have you created an effective communication plan? Yes No
10. Do you have ways to gather feedback and measure success? Yes No

Based on your answers above, what action items can you add to your task list?

OUR PHARMACY'S 'CASE FOR CHANGE'

What are we doing?

Why are we doing it?

What will change?

What are the benefits to our pharmacy team?

Who does this impact?

When will it happen?

PLANNING FRAMEWORK FOR THE LAUNCH OF OUR PSYCHOLOGICAL HEALTH AND SAFETY INITIATIVE

SCOPE



What activities (be specific) are part of this shift in your pharmacy? Define this project. Leave room to answer

What activities are NOT part of this project and movement (know what your project is NOT) Leave room to answer

SCHEDULE



How long will the different activities take you and your pharmacy team?

What order do they need to take place in?

When will each activity in this shift / launch start and end? Be realistic, pharmacy professionals are very busy.

How will you schedule the tasks based on your availability?

How will you know if you remain on track?

COST



What parts of this launch and your priority areas come with a financial cost?

How can you estimate the costs that are required?

What is your budget? Are there funds available?

How will you control the costs throughout the life of this initiative and culture shift?

QUALITY



What would success look like for YOUR pharmacy?

How will you determine that the effort you are putting in is resulting in positive outcomes with your pharmacy team?

What can you measure to help validate this?

What other information can you collect to help you know you are on track and your work is meaningful and valued in your pharmacy?

RESOURCES



Who is championing this psychologically safety launch in your pharmacy?

What other human resources do you have access to to help you?

How will you divide up the work that needs to be done?

How will you manage your time effectively so you can continue to make progress in your pharmacy?

What non-human resources are available to you?



Empty response area for non-human resources.

What tools and templates are there out there that can help you?

Empty response area for tools and templates.

What platforms or programs can you use to assist in staying on task?

Empty response area for platforms or programs.

COMMUNICATION



How will you communicate with your internal pharmacy team around psychological health and safety?

How will you communicate with those outside your immediate pharmacy team?

How often will you communicate about this?

How will you monitor and track key communications?

How will you ensure the communication is collaborative and everyone is heard (not just top-down info dump)?

RISKS



What are some of the risks to your work?

How probably is it that the risks will happen?

How significant would the impact of the risks be?

How can you get ahead of the risks, instead of waiting for them to happen?

OPPORTUNITIES



What are all the extra opportunities or benefits that could come out of this?

For each opportunity you can identify, how probably is it that it could happen?

How impactful could those opportunities be?

What can you do specifically to take advantage of those opportunities?

PROCUREMENT



Is there anything that you need to source to make this come to life? (Goods or services?)

How will these items impact your cost and schedule?

How will you find them?

How will you control them?

STAKEHOLDERS



Who are your internal stakeholders? (team, advisors)

Who are your external stakeholders? (patients, community)

Who are your influential stakeholders? (connections, influences, networks, peers)

Who should be informed but may not contribute?

Who are your negative stakeholders that could derail your efforts?

THEN ASK:



How will we engage with the different stakeholders above?

Who will engage with them and when?

How will you know how all your stakeholders are feeling throughout this shift?

How will you consider the needs and preferences of the different stakeholders?

INTEGRATION



Once you create your plan, how will you manage the work that is required?

Where will you store the knowledge? (documents, communications, etc)

How will you control the work?

What happens if someone wants to change the plan? What is the process to change?

How will you know when your launch is complete?

IMPORTANT TIPS

ENSURE IT IS COLLABORATIVE, EVERYONE'S
PERSPECTIVE MATTERS HERE



YOU DON'T HAVE TO BE AN EXPERT TO START CREATING
SAFER, MORE ENGAGING SPACES FOR YOUR TEAM.

SCHEDULE CHECK INS AND MILESTONES AND
CELEBRATE WITH YOUR TEAM WHEN YOU REACH THEM



PICK A SMALL NUMBER OF PRIORITIES TO
WORK THROUGH EACH QUARTER



MAKE SURE YOUR EFFORTS ARE GENUINE,
AUTHENTIC, AND NOT TOKENISTIC

IT IS A WORK IN PROGRESS, IT
DOESN'T NEED TO BE PERFECT ON DAY 1

Loading...



HIGHLIGHT THE THINGS YOU DO WELL NOW,
THEN SHARE BEST PRACTICES

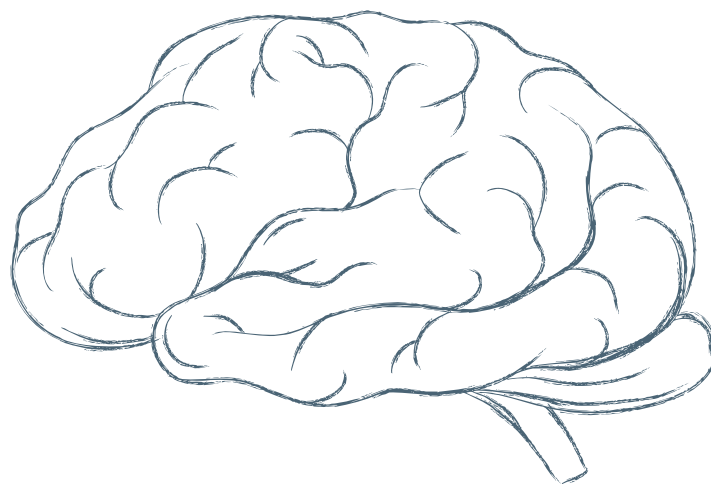


FIGURE OUT WHAT WORKS WELL NOW,
FEEDFORWARD (DO MORE OF THAT!)

FOCUS ON PRACTICES, PROCESSES,
AND PROBLEMS (NOT ON PEOPLE)



SECTION 3: PSYCHOSOCIAL FACTORS AND PHARMACY PRACTICE



PSYCHOSOCIAL FACTORS THAT IMPACT AN EMPLOYEE'S PSYCHOLOGICAL RESPONSE TO WORK CONDITIONS



1. PSYCHOLOGICAL SUPPORT
2. ORGANIZATIONAL CULTURE
3. CLEAR LEADERSHIP AND EXPECTATIONS
4. CIVILITY AND RESPECT
5. PSYCHOLOGICAL JOB FIT
6. GROWTH AND DEVELOPMENT
7. RECOGNITION AND REWARD
8. INVOLVEMENT AND INFLUENCE
9. WORKLOAD MANAGEMENT
10. ENGAGEMENT
11. BALANCE
12. PSYCHOLOGICAL PROTECTION
13. PROTECTION OF PHYSICAL SAFETY



TWO MORE SPECIFIC TO HEALTHCARE:

- Protection from moral distress
- Support for psychological self care

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#1 PSYCHOLOGICAL SUPPORT

When pharmacy team members are struggling with mental health, how likely is it that they will get the help they need?

If we asked your employees if they felt supported at work when dealing with personally distressing issues at home or work, what would they say?

What level of understanding do your pharmacy employees have about mental health?

What can you do, as a pharmacy leader, to increase awareness and understanding of mental health in your pharmacy environment?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#2 ORGANIZATIONAL CULTURE

How would you describe your pharmacy's organizational culture?

What is taken for granted in your organization?

How would your team describe "the way things are done here"?

How aligned are the leaders in your pharmacy and pharmacy environment with the desired organizational culture?

Is there a strong emphasis on pharmacy employees and concern for their well-being?

Is pharmacy teamwork encouraged and rewarded?

What targets and objectives guide your pharmacy leaders' performance?

Is the quality of work is emphasized and explained to pharmacy employees?

Is communication from pharmacy management clear, transparent and frequent? Or is communication from pharmacy management infrequent and on a “need to know” basis.

How much time is spent (yearly, monthly, weekly) on forward planning and strategy in your pharmacy?

How are decisions made in your pharmacy? (Through consensus or small-group decisions?)

How adaptable are your pharmacy employees to change? Are pharmacy employees encouraged to try new ideas and take risks to improve the practice?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#3 CLEAR LEADERSHIP AND EXPECTATIONS

Questions inspired by Shawn Achor's 'Big Potential'

How smart do you make others around you?

How much creativity do you inspire in others?

How much does your drive become contagious to your team?

How resilient do you make others?

How does your pharmacy team mitigate the risks of marginalization, power and influence, common information effect, group think and escalation of commitment?

MARGINALIZATION

- Some team members are hesitant to contribute or may feel their answers are discounted.
- Causes include stereotyping, personalities, similarity-attraction impact

POWER AND INFLUENCE

- Some team members (may include you) have more than their fair share of influence
- Causes include personal power (expertise or knowledge) or positional power (positions of authority, rewards, or coercion)

COMMON INFORMATION EFFECT

- Teams have a tendency to “state the obvious” by dwelling on information they all share.
- Causes include comfort and ease.
- Remember... communication is most valuable in its ability to transfer useful knowledge/information

GROUPTHINK

- Teams accept a conclusion or come to consensus without effective evaluation regardless of whether the individual members agree or disagree

ESCALATION OF COMMITMENT

- When a team's behaviour or choices begin to lead towards negative outcomes but the group or team does not realign/adjust and instead continues on because of prior investments of time/resources

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#4 CIVILITY AND RESPECT

How does your pharmacy team describe how they are treated with civility and respect by:

Everyday colleagues?

Senior leadership in your pharmacy organizations?

Patients?

Does your team feel that conflict is handled in a constructive way? If not, how can you improve?

Does your pharmacy have guidance and an effective process to handle inappropriate or abusive behaviour by patients? If not, what can be done here?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#5 PSYCHOLOGICAL JOB FIT

What opportunities exist in your pharmacy for pharmacy employees to work in a way that is aligned with their strengths, capabilities, and interest levels?

Do your pharmacy team members find meaning in the work they do?

How can you find out what meaningful work means to them?

Do you, as a pharmacy leader, create opportunities for your team to practice in a way that is aligned with their values?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#6 GROWTH AND DEVELOPMENT

PILLARS FOR GROWTH

Continuous improvement mindset

Build curiosity

Start small

More positive feedback

Praise effort

Safety to make mistakes

Responsibility and accountability

Stay focused on the outcomes

How can you support pharmacy employees to continue to advance their role in your pharmacy?

What opportunities exist for them to champion certain services or own a portfolio or an initiative?

What are some of the non-clinical skills that your team would benefit from in order to keep up with a changing practice environment?

How can you incorporate a positive feedback culture in your pharmacy?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#7 RECOGNITION AND REWARD

Does your pharmacy team receive explicit expressions of appreciation from leadership? From other staff members?

How can you start to incorporate genuine and purposeful appreciative feedback into your daily and weekly routines as a pharmacy leader?

Are pharmacy professionals being constantly asked to do more without a clear answer to "What's in it for me?"

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#8 involvement and influence

How well do different people/departments work together across the organization?

How do you know this to be true? What feedback indicates that teamwork is effective in your organization?

How involved are the front line pharmacy professionals in your pharmacy in setting goals and plans for the pharmacy?

What are additional ways you can gather the perspective of your team members before making changes to the practice?

How can you further connect people across the organization, the profession?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#9 WORKLOAD MANAGEMENT

Are your pharmacy team members able to complete their responsibilities and tasks before the end of their shift?

Does leadership believe the workload of staff is reasonable?

Do the staff believe their workload is reasonable?

Are pharmacy teams able to complete cognitively demanding work without interruptions?

Does your pharmacy have documented strategies to deal with exhaustion, fatigue, and burnout in staff members?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#10 ENGAGEMENT

Does your team have enthusiasm to keep trying, even when things are challenging?

Beyond employee engagement surveys, what ways can you find out how your pharmacy team is feeling about working there?

What are some additional ways that you can foster relationships and networking for your pharmacy employees?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#11 BALANCE

Does your pharmacy team have enough control over their schedule that they are able to meet the demands of their work life and their home life?

Does the leadership teams in your pharmacy environment lead by example by shutting off periodically, taking vacation, etc?

In what ways, as a leader, do you encourage your pharmacy team to set boundaries?

To what degree are the boundaries of your team respected? (Ex, are they texted/phoned when not at work outside of emergency situations?)

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#12 PSYCHOLOGICAL PROTECTION

Is the psychological safety of your pharmacy team ensured?

Are there systems in place to prevent harm and threats to staff?

Do the staff have clear processes and authority when it comes to “firing” a patient?

Are pharmacy leaders and pharmacy staff trained and skilled in handling difficult conversations and conflict?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

#13 PROTECTION OF PHYSICAL SAFETY

What steps and supports do you have in place to support a pharmacy employee if they were at physical risk at work?

What if they were at risk of physical harm at home?

Are there opportunities for small wins by improving the ergonomics in your pharmacy?

Are there pro-active measures taken to reduce physical harm or are measures only taken after incidents have occurred?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

PROTECTION FROM MORAL DISTRESS

In what ways do you support your pharmacy team to protect them from moral distress?

Do your medication error or incident management policies and processes include steps, attention, and care for the "second victim"?

Reflecting on your own experiences in your pharmacy, what ethical examples may have contributed to moral distress in the past? What could you do moving forward should the experience repeat itself?

PSYCHOSOCIAL FACTORS AND YOUR PHARMACY

SUPPORT FOR PSYCHOLOGICAL SELF-CARE

Would your pharmacy employees describe your pharmacy culture and leadership as one that encourages them to care for their own psychological self care?

How safe do your pharmacy employees feel around reporting / discussing personal struggles with their psychological health?

Now that you have considered and started thinking about psychological health and safety in your practice, what are 3 specific goals that you can work on in the next quarter to take a step forward towards furthering psychological health and safety in your pharmacy?

GOAL 1

Description (The What):

Tactics (The How):

Measurements of Success:

Timelines:

GOAL 2

Description (The What):

Tactics (The How):

Measurements of Success:

Timelines:

GOAL 3

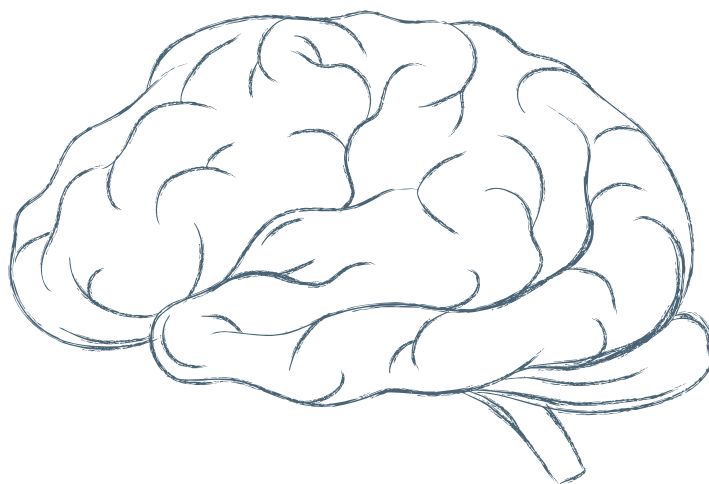
Description (The What):

Tactics (The How):

Measurements of Success:

Timelines:

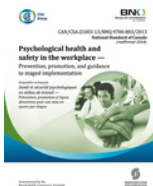
SECTION 4: ADDITIONAL TOOLS AND RESOURCES





www.workplacestrategiesformentalhealth.com

<https://www.workplacestrategiesformentalhealth.com/resources/on-the-agenda-workshop-series>



<https://mentalhealthcommission.ca/national-standard/>



<https://www.caringforhealthcareworkers.com/>



<https://mentalhealthcommission.ca/resource/caring-for-healthcare-a-toolkit-for-psychological-health-and-safety-in-healthcare-workplaces/>



<https://www.camh.ca/-/media/files/workplace-mental-health/workplacementmentalhealth-a-review-and-recommendations-pdf.pdf>



<https://www.sfu.ca/carmha.html>



<https://moordisorders.ca/programs/in-the-workplace/working-through-it>



Bios

AMY OLIVER

MBA, BSCPH, RPH, PMP, CLC

Amy Oliver is an experienced healthcare executive. She is president of Amy Oliver + Co, offering trusted advisory services and professional coaching to practice owners, leaders, academics, and organizations in health and social sectors.

Amy holds an MBA with a dual concentration in Organizational Leadership and Health Administration. She is a pharmacist, a Certified Leadership Coach, and a globally certified Project Management Professional. Amy holds certificates in Emotional Intelligence and Advanced Strategic Management and Leadership.

Amy has won multiple health sector and leadership awards and most recently has been selected as a member of the prestigious 2020 Governor General Canadian Leadership Conference.



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Bios

DR. CARLY CREWE MD, PSYCHOTHERAPIST



Dr. Carly Crewe, MD is a mom to twin toddlers, modern day nomad and MD Psychotherapist specializing in women’s mental health. Dr. Crewe is the Founder and Owner of Eunoia Medical Clinic, an innovative and dynamic virtual microclinic that provides comprehensive treatment of mental health disorders in women. Carly believes that when women are well, they have the power to heal and change the world. Her mission is to revolutionize women’s mental health care, from fragmented and haphazard to a holistic, comprehensive and integrated approach that meets every woman where she is and addresses the multidimensional reality of mental health.

Dr. Crewe combines her knowledge of eclectic psychotherapeutic modalities (including CBT, DBT, holding and coaching techniques) with experience in both integrative modalities, nutritional psychiatry and psychotherapeutics (medications for mental illness) to provide a unique and comprehensive approach to the treatment of mental illness in women. Unlike traditional psychotherapists, Dr. Crewe is a trained physician which expands her therapeutic toolbox to the use of medication and nutritional supplementation to support the healing process in her patient

Carly is an Amazon best-selling author and her viral poem “The Sled” has been shared over one hundred thousand times on social media. Her book, *You Are Not Your Anxiety* launched on Amazon in July, 2021.