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.

PARTICIPANTS WILL GAIN AN UNDERSTANDING OF WHAT PSYCHOLOGICAL HEALTH AND SAFETY IN THE WORKPLACE IS AND UNIQUE CONSIDERATIONS IN PHARMACY PRACTICE

REVIEW THE ECOLOGICAL CHANGES REQUIRED TO CREATE PSYCHOLOGICALLY SAFE ENVIRONMENTS
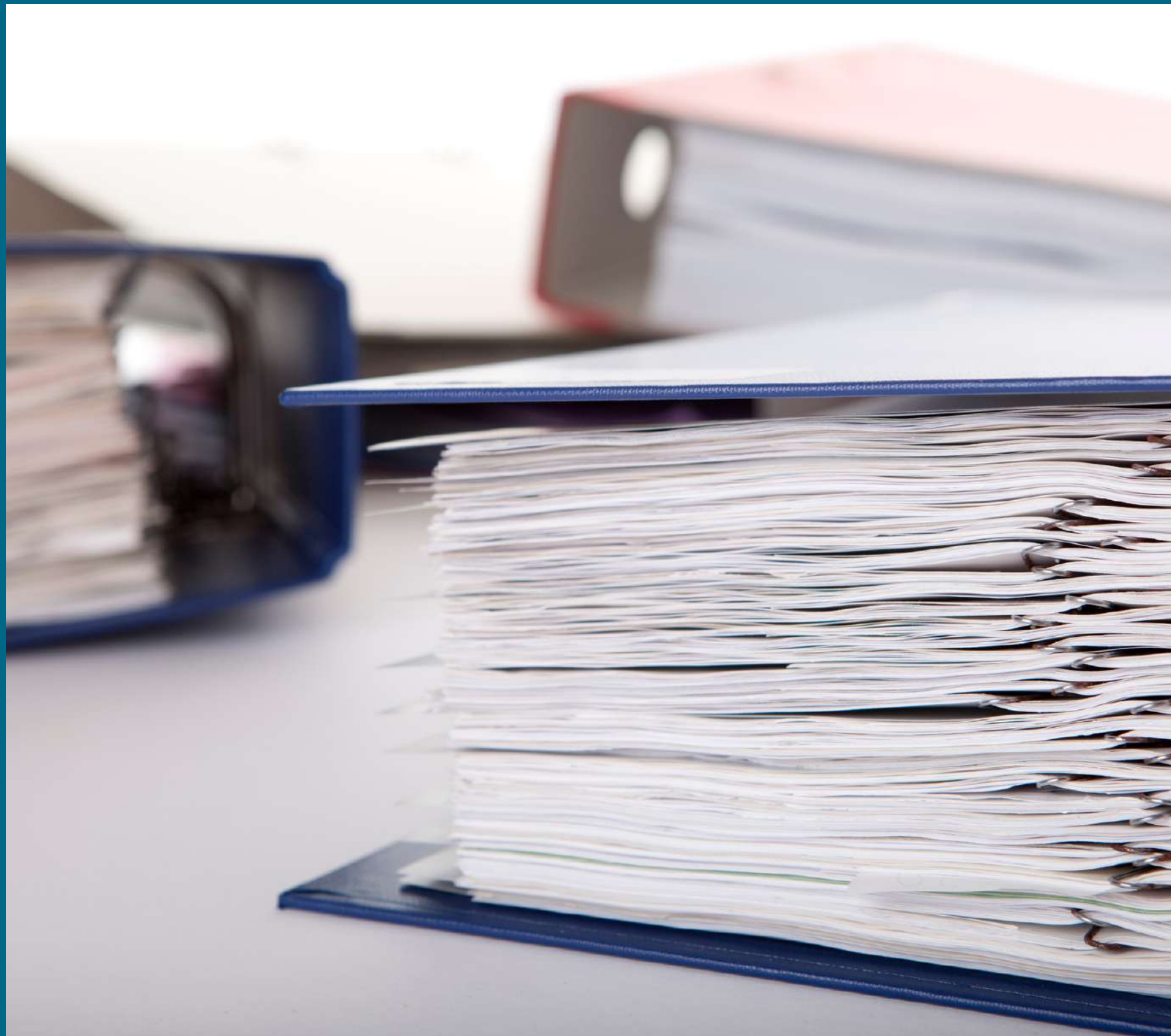
INTRODUCE THE PSYCHOLOGICALLY SAFE LEADER ASSESSMENT

GAIN AWARENESS AROUND THE NATIONAL STANDARD OF CANADA FOR PSYCHOLOGICAL HEALTH AND SAFETY IN THE WORKPLACE

TIPS ON ASSESSING YOU WORKPLACE

BEST PRACTICES ON CHANGE MANAGEMENT AND PLANNING TO MOVE FORWARD IN YOUR PHARMACIES

OBJECTIVES FOR THIS SESSION:

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ASSOCIATION
Advocating Excellence
in Practice and Care

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SO MUCH INFORMATION!

WATCH FOR TOKENSIM

A psychologically healthy and safe workplace:

- Promotes positive culture and staff well-being
- Prevents stigma and discrimination
- Contributes to a productive and positive working environment

Healthy and safe workplaces result in:

- Improved morale
- Improved staff and patient satisfaction
- Reduced costs
- Reduced medical errors

Mental Health Commission of Canada Commission de la santé mentale du Canada

> Without psychological safety, people hide mistakes and withhold ideas. They aim to prove themselves and protect their image.
>
> With psychological safety, people admit errors and voice suggestions. They strive to improve themselves and protect their team.
>
> — Adam Grant @AdamMGrant

PSYCHOLOGICAL SAFETY

WHEN YOU HAVE IT:

- See mistakes as opportunities to learn
- Willing to take risks and fail
- Speaking your mind in meetings
- Openly sharing your struggles
- Trust in your teammates and supervisors
- Sticking your neck out
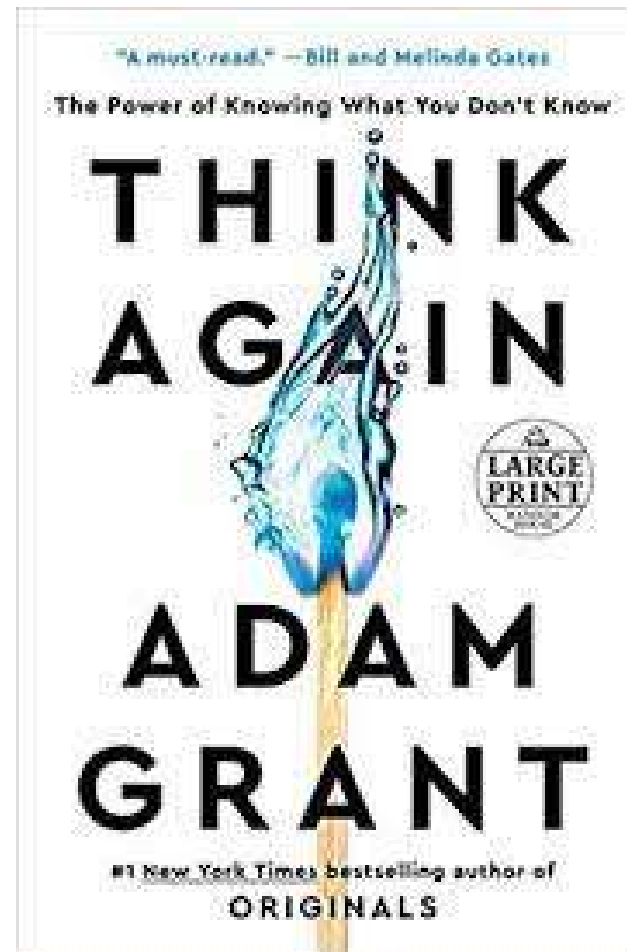
WHEN YOU DON'T:

- See mistakes as threats to your career
- Unwilling to rock the boat
- Keeping your ideas to yourself
- Only touting your strengths
- Fear of your teammates and supervisors
- Having it chopped off

"A must-read." —Bill and Melinda Gates

The Power of Knowing What You Don't Know

THINK AGAIN

LARGE PRINT

ADAM GRANT

#1 New York Times bestselling author of ORIGINALS

DECLARATION OF COMMITMENT TO PSYCHOLOGICAL HEALTH AND SAFETY

PSYCHOLOGICAL HEALTH AND SAFETY IN PHARMACY PRACTICE

- Thoughts and feelings

- Actively promoting well-being

- Actively working to prevent psychological harm

- Psychosocial factors

UNIQUE PHARMACY PRACTICE EXAMPLES

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PHARMACY CONSIDERATION #1

Community pharmacies operate through a "push" workflow.

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PHARMACY
CONSIDERATION #2

Constant distractions

PHARMACY CONSIDERATION #3

Physically demanding

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PHARMACY CONSIDERATION #4

Harassment

PHARMACY CONSIDERATION #5

Increasing scope of practice

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PAUSE FOR REFLECTION

What are some other unique considerations about the pharmacy practice environment that you are part of?

ORGANIZATIONAL EXAMPLES INCLUDE:

- Reasonable schedules
- Autonomy
- Role clarity
- Team support / labour
- Clarity around what success is
- Collaboration and consultation

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PAUSE FOR REFLECTION

What are other ORGANIZATIONAL factors that you can think of that could help promote psychological health and safety in your pharmacy?

THE SOCIETAL PERSPECTIVE

- Public awareness of pharmacy professional roles and value

- Government acknowledgement of the value of pharmacy professionals

- Reasonable expectations by the public in line with other health providers

- Willingness for interprofessional collaboration by other HCPs

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THE POINT...

The solutions and work must be system based

SAMPLE OF WHAT YOU'LL SEE

	Self-Assessment	Benchmark Sample
Communication & Collaboration	76%	81.1%

Communication and Collaboration involves the clear exchange of information and transparent discussion of what a worker needs to do their job successfully. This involves collaborative efforts to support each worker's success at work.

	Self-Assessment	Benchmark Sample
Communication & Collaboration	76%	81.1%

Communication and Collaboration involves the clear exchange of information and transparent discussion of what a worker needs to do their job successfully. This involves collaborative efforts to support each worker's success at work.

Why It Matters

Leaders with high Communication and Collaboration scores are in touch with their teams. They take time to ensure that roles, responsibilities, and priorities are communicated clearly. These leaders don't simply assign tasks, they engage in two-way communication with employees including collaborative discussions of goals, priorities, and expectations. They encourage and recognize employees for their efforts as well as for their outcomes. Furthermore, leaders high in Communication and Collaboration take interest in the growth and development of their entire team, and provide opportunities to develop skills and maximize potential. Such leaders are good at supporting the success of their entire team.

Leaders with low Communication and Collaboration scores can be out of touch with their teams. They may create confusion and stress through miscommunication or a lack of communication about expectations, deadlines, resources available, deliverables, or project goals. These leaders may not seek or welcome feedback about challenges faced by employees. They may miss opportunities to leverage strengths of individual employees or be unaware of what those strengths actually are and fail to recognize the efforts of employees or encourage growth and development. Leaders low in Communication and Collaboration scores may find their team to be low in morale and motivation.

Why strengthening skills in Communication and Collaboration matters:

- Employees know what they need to do
- Tasks are executed correctly
- There is clarity about team and individual priorities
- Miscommunication and errors are reduced
- Employee potential is optimized
- Challenges are identified and resolved earlier

Your responses to each PSLA item are presented below (1 = low score; 5 = high score)

Leadership strategies	Self-Assessment	Benchmark Sample
1.I know how and when to adapt my communication style to facilitate effective interaction with different employee personalities, emotional states, or learning styles.	4	4.1

Leadership strategies	Self-Assessment	Benchmark Sample
2.I regularly ensure that all employees who report to me have clarity in terms of job expectations and task priorities.	4	4.1
3.I have regular, confidential meetings with each team member to discuss issues that affect their work, including how their work links to organizational goals and objectives.	3	3.8
4.I ensure employees are kept up-to-date when there are proposed or actual changes in processes, policies or priorities that could impact their work.	4	4.3
5.Even when I am not authorized to share information, I communicate effectively with my employees to address any unnecessary fear or concern.	4	3.9
6.I conduct regular check-ins to help each employee maximize their capabilities and potential on the job.	3	4
7.I regularly seek feedback from employees about what might be currently challenging or frustrating them at work.	3	4
8.I seek regular input about each employee's professional development goals.	5	3.7
9.I regularly provide positive, constructive feedback to employees with the intent of helping them grow and develop.	5	4.1
10.I actively encourage employees to suggest ideas for new workplace experiences that they may value or benefit from (e.g., committee work, mentoring, job shadowing).	4	4.1
11.I provide employees with opportunities (formal or informal) to develop their interpersonal skills at work.	4	3.9
12.I regularly discuss with my team how we can all work better together.	3	3.9
13.I regularly verbalize my appreciation to employees for their individual tasks and efforts at work.	4	4.3

LIMITATIONS AND IMPORTANT NOTES ON SELF ASSESSMENTS

IMPORTANT TAKEAWAYS:

CAN/CSA-Z1003-13/BNQ 9700-803/2013
National Standard of Canada
(reaffirmed 2018)
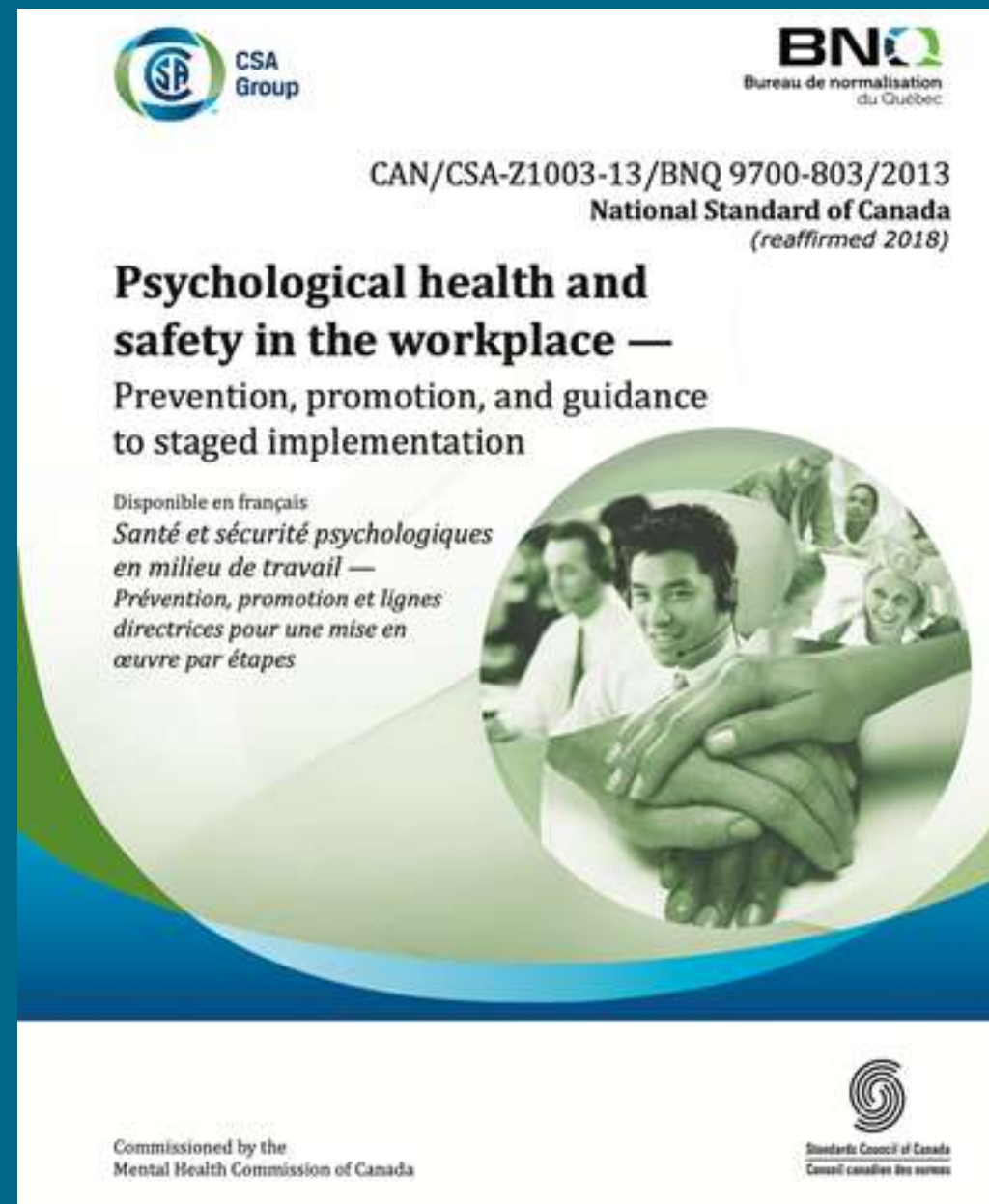
Psychological health and safety in the workplace —

Prevention, promotion, and guidance to staged implementation

Disponible en français
*Santé et sécurité psychologiques en milieu de travail —
Prévention, promotion et lignes directrices pour une mise en œuvre par étapes*

Commissioned by the
Mental Health Commission of Canada

» Loaded with info and tools to help you identify and mitigate factors that pose a risk of psychological harm to your team
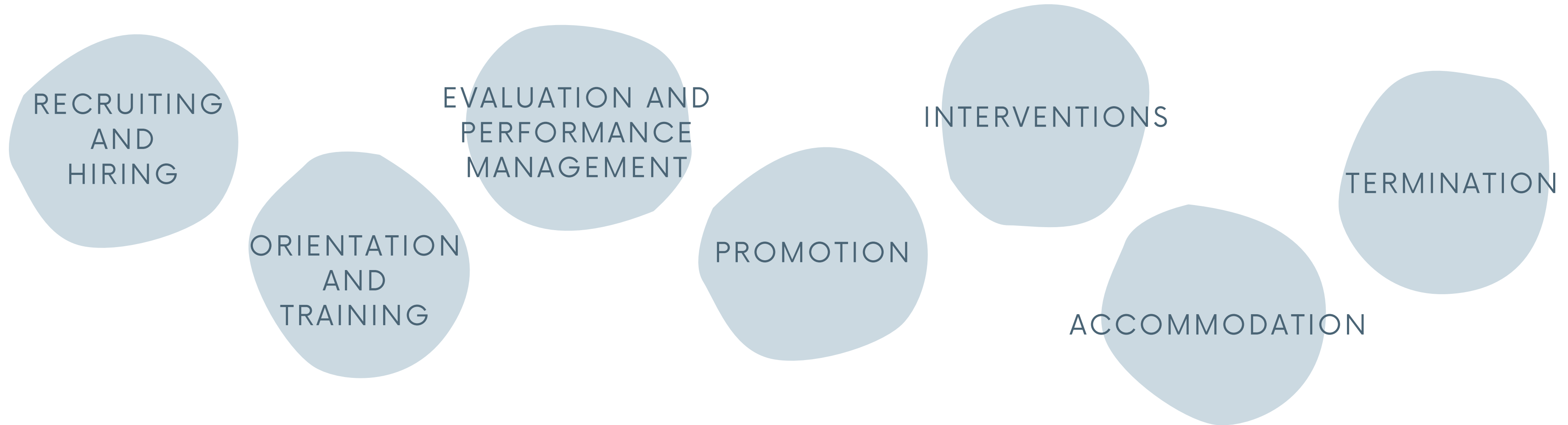
» Tips on implementation

» Tips on culture

» Includes and audit tool that pulls in different components of the Standard.

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ADDRESS YOUR GAPS AND NEEDS FIRST

YES or NO

- Our pharmacy has a policy statement outlining its commitment to psychological health and safety
- Our pharmacy leaders "walk the talk" and "lead by example"
- The psychological health and safety of our pharmacy team is part of the decision-making criteria when making changes or rolling out new initiatives
- Pharmacy employees at all levels are encouraged to share perspective and collaborate on plans for a psychologically safe environment
- We have some best practices in our pharmacy worth sharing with others that support the psychological well-being of our team.
- Our pharmacy has worked to identify risks that can harm the psychological health of pharmacy employees
- Psychosocial factors have been assessed in our pharmacy
- Our pharmacy has measurable objectives and targets related to the psychological health and safety of our team
- Our pharmacy team can make available the resources needed to work towards implementing best practices in psychological health and safety
- Our pharmacy has processes to reduce psychological harm of pharmacy teams.

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WHAT

SO WHAT

NOW WHAT

_____

CHANGE MANAGEMENT

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?

2. Do I believe changes are necessary?

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

4. Am I feeling positive about the needed changes?

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

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

CHANGE MANAGEMENT
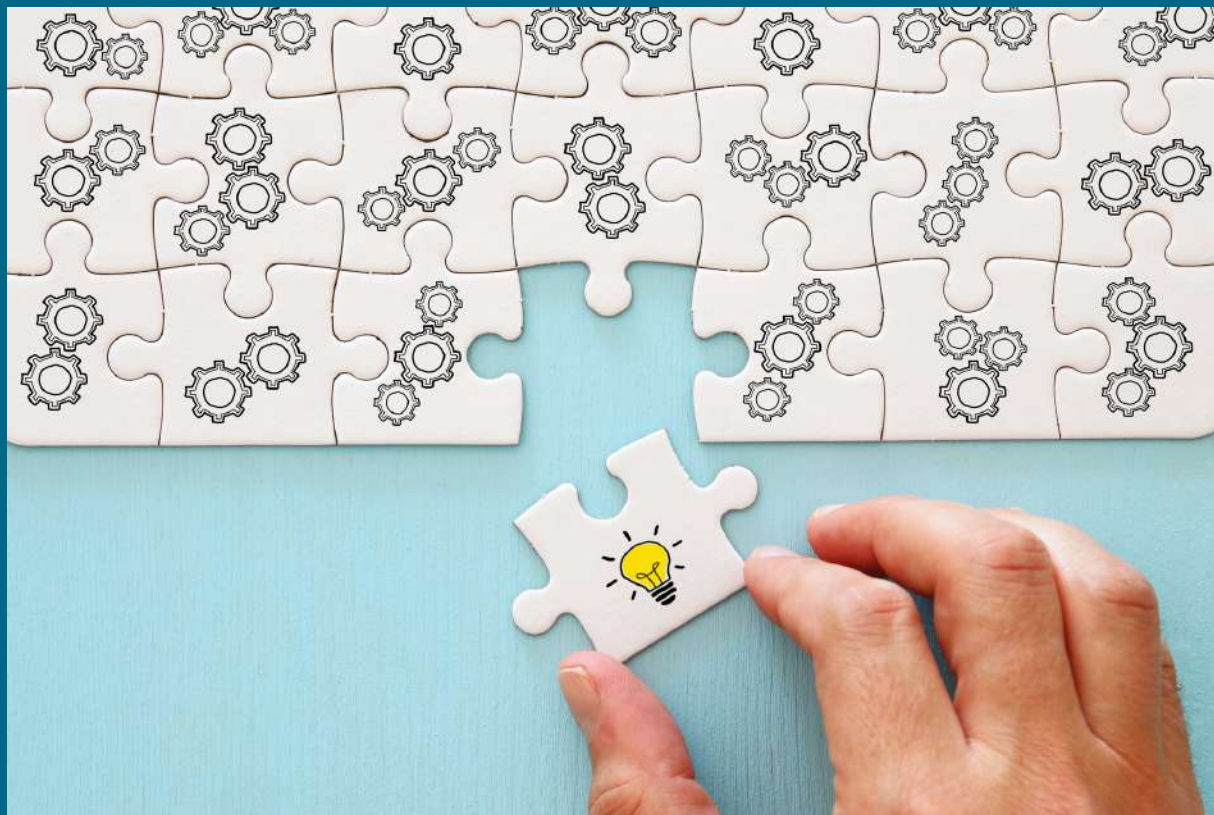
PREPARING FOR CHANGE

1. Have you established the WHY?
2. Can you articulate what is going to change?
3. Do you have the necessary sponsorship (leadership support)?
4. Have you identified who will be impacted?
5. Will there be resource impacts?
6. Will people need training?
7. Have you identified risks, barriers, and enablers?
8. Have you, as a pharmacy leader, prepared for leading the change?
9. Have you created an effective communication plan?
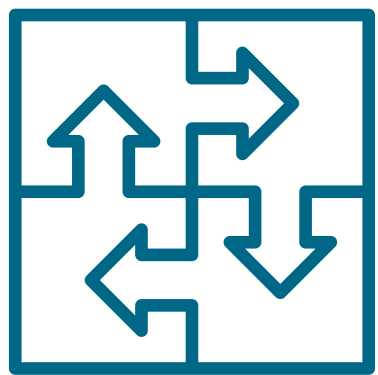10. Do you have ways to gather feedback and measure success?

CHANGE MANAGEMENT

If you're ready, create a 'Case for Change'

» What are we doing?

» Why are we doing it?

» What will change?

» Benefits to pharmacy team?

» Who does this impact?

» When will it happen?
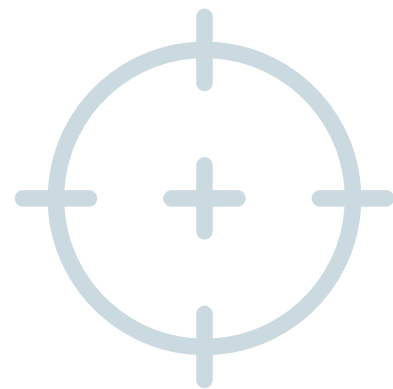
PLANNING BEST PRACTICES

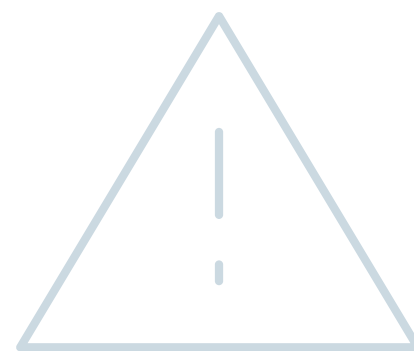# 10 KEY KNOWLEDGE AREAS

INTEGRATION

SCOPE

SCHEDULE

COST

QUALITY

RESOURCE

COMMUNICATION

RISK

PROCUREMENT
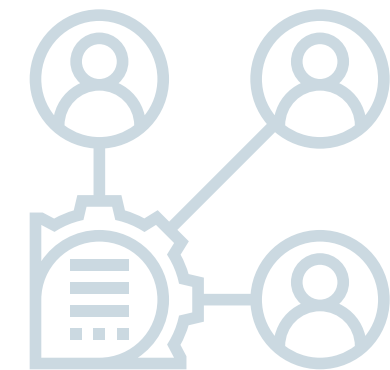
STAKEHOLDER

What activities (be specific) are part of this shift in your pharmacy? Define it.

What activities are NOT part of this (know what your project is NOT)

SCOPE

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?

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KEY THOUGHTS

SCOPE

SCHEDULE

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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?

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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?

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PAUSE FOR REFLECTION

QUALITY?

SUCCESS?

COSTS?

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?

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

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

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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)?

KEY THOUGHTS

COMMUNICATION

RESOURCES

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RISKS

>> What are some of the risks to your work?

>> How probable 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?

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OPPORTUNITIES!

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

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

>> How impactful could those opportunities be?

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

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KEY THOUGHTS

RISKS

OPPORTUNITIES

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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

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» 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?

PAUSE FOR REFLECTION

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?

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?

OTHER IMPORTANT POINTS

- 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.

- 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).

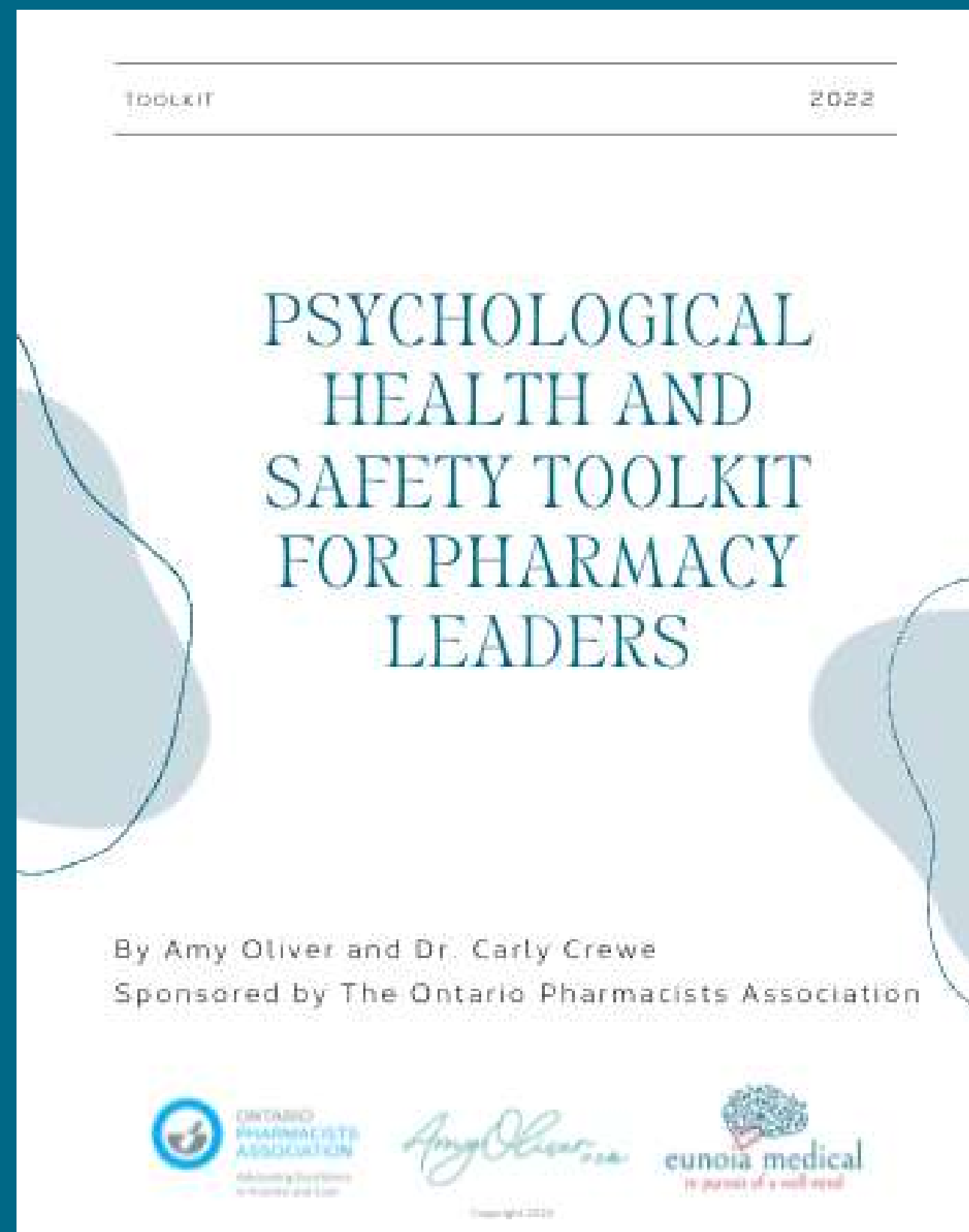# EVALUATE OVER TIME

This will always be important.

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PSYCHOSOCIAL FACTORS

Pick **YOUR** focus areas, start small.

You can do this!

PHARMACY TOOLKIT

PSYCHOLOGICAL HEALTH AND SAFETY TOOLKIT FOR PHARMACY LEADERS

By Amy Oliver and Dr. Carly Crewe
Sponsored by The Ontario Pharmacists Association

SECTION 1:

TALKING TO YOUR
EMPLOYEES ABOUT
MENTAL HEALTH

SECTION 2:

OPERATIONALIZING
PSYCHOLOGICAL
HEALTH AND SAFETY IN
PHARMACY PRACTICE

SECTION 3:

PSYCHOSOCIAL FACTORS
AND PHARMACY
PRACTICE

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QUICK TIPS AND KEY TAKEAWAYS

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

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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.

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SUMMARIES OF TOOLS TAILORED FOR PHARMACY ENVIRONMENTS

ADDRESS YOUR PHARMACY'S GAPS AND NEEDS

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

Yes   No

Our pharmacy has a clear vision of what a psychologically safe pharmacy should look like.

Our pharmacy has a policy statement outlining its commitment to psychological health and safety.

Our pharmacy leaders "walk the talk" and "lead by example".

The psychological health and safety of our pharmacy team is part of the decision-making criteria when making changes or rolling out new initiatives.

Pharmacy employees at all levels are encouraged to share perspective and collaborate on plans for a psychologically safe environment.

We have some best practices in our pharmacy worth sharing with others that support the psychological well-being of our team.

Our pharmacy has worked to identify risks that can harm the psychological health of pharmacy employees.

The 13 psychosocial factors have been (formally or informally) assessed in our pharmacy.

We have collaboratively discussed and addressed the risks and strategies of moral distress in our pharmacy.

Our pharmacy leadership have proactively worked to ensure and support the rights to psychological self-care for our pharmacy professionals.

Our pharmacy has measurable objectives and targets related to the psychological health and safety of our team.

Our pharmacy team can make available the resources needed to work towards implementing best practices in psychological health and safety.

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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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?

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?

Description (The What)

GOAL 1

Tactics (The How)

Measurements of Success

Timelines

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MORE RESOURCES

www.workplacestrategiesformentalhealth.com

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

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

https://www.caringforhealthcareworkers.com/

www.mentalhealthcommission.ca/English/caring-healthcare-toolkit

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

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

https://mooddisorders.ca/programs/in-the-workplace/working-through-it

THANK YOU!

THANK YOU

Thank you to OPA for sponsoring this session and for your commitment to the professional wellness of the pharmacy community.

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