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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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INTRODUCE PHARMACY LEADERS TO THE 13 PSYCHOSOCIAL FACTORS THAT INFLUENCE LEVELS OF PSYCHOLOGICAL HEALTH AND SAFETY IN THE WORKPLACE

INTRODUCE AND ELABORATE ON THE UNIQUE FACTORS IMPACTING HEALTHCARE ENVIRONMENTS

PROVIDE A COACHING FRAMEWORK FOR PHARMACY LEADERS TO THINK THROUGH THE VARIOUS FACTORS AND THEIR RELEVANCE IN THEIR PHARMACY PRACTICES.

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GRAB A PENCIL AND PAPER TO HELP YOU REFLECT AND JOT DOWN IDEAS AND THOUGHTS ABOUT YOUR PHARMACY PRACTICE AS WE NAVIGATE THE REST OF THE PRESENTATION

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PSYCHOSOCIAL FACTORS

WHAT ARE PSYCHOSOCIAL FACTORS?

The work we do and the contexts in which we do it.

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13 KEY FACTORS FOR ALL WORKPLACES AND 2 EXTRA, JUST FOR HEALTHCARE ENVIRONMENTS

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

SPECIFIC TO HEALTHCARE:

1. Protection from moral distress
2. Support for psychological self-care

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#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?

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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?

Why is psychological support important to my practice?

HOW TO INCREASE PSYCHOLOGICAL SUPPORT IN YOUR PRACTICE?

» Talk about mental health to reduce fear of discrimination

» Provide access to resources on mental health

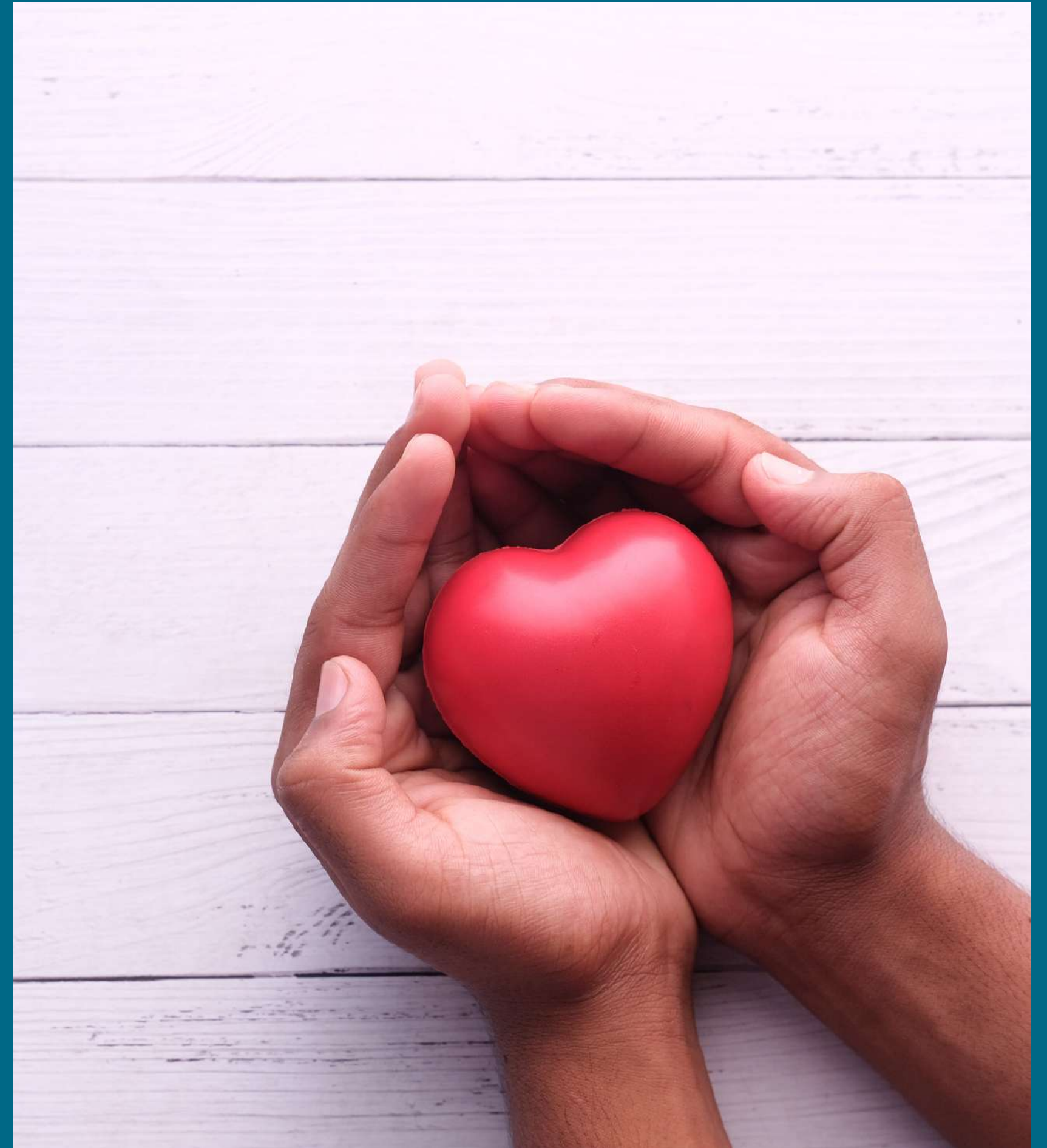» Consider the value of training people on "power" skills

» Encourage peer-support

» Accommodations for people struggling with mental health.

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WELLNESS IS
NOT ONLY
ABOUT PHYSICAL
HEALTH

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REFLECTION

FACTOR 1: PSYCHOSOCIAL 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?

#2 ORGANIZATIONAL CULTURE

WHAT IS YOUR PHARMACY'S CULTURE?

VISIBLE AND OBSERVABLE

Objects, Practices, Routines

STATED AND CONCIOUS

Beliefs, principles, values, directly or indirectly stated

TAKEN FOR GRANTED

Unconscious assumptions, perceived as universal, rarely stated

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- Organizations have cultures

- Organizations are culture

- Taken for granted values

- Underlying assumptions, expectations and definitions

- Social glue binding an organization together

- "How things are done around here"

- Affects the way members think, feel and behave.

FOUR PRACTICES THAT LEAD TO SUCCESSFUL CULTURE CHANGE

Groysberg, Lee, Price. The Leader's Guide to Corporate Culture: How to manage the eight critical elements of organizational life. Harvard Business Review (2018) January – February Issue (pp. 44-52).

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1. ARTICULATE ASPIRATION

- Analyze the current culture

- Use a framework openly discussed throughout the organization

- What outcomes does the culture produce?

- How do the outcomes align with current and anticipated market and business conditions?

2. SELECT AND DEVELOP LEADERS WHO ALIGN WITH THE TARGET CULTURE

- Leaders as catalyst for change

- Creating safe climate

- Built into recruitment to align with target

- Training and education

- Relevance, benefits and impact of leader to move toward aspiration

- Culture change can lead to turnover

3. SPREAD THE WORD THROUGH CONVERSATION AND NETWORKS

- Employees start to recognize that their leaders are talking about new business outcomes.

- Begin to behave differently themselves, creating a positive feedback loop.

- Various kinds of organizational conversations, such as road shows, listening tours, and structured group discussion, can support change.

- Social media platforms encourage conversations between senior managers and frontline employees

4. REINFORCE THE CULTURE CHANGE THROUGH ORGANIZATIONAL DESIGN

- Structures, systems, and processes are aligned
- Performance management can be used to encourage employees to embody aspirational cultural attributes.
- Training practices can reinforce the target culture as the organization grows and adds new people.
- The degree of centralization and the number of hierarchical levels in the organizational structure can be adjusted to reinforce behaviors inherent to the aspirational culture.

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Adam Grant ✓
@AdamMGrant

In cutthroat cultures, people kiss up and kick down. They protect themselves by currying favor with people in power and exploiting those without it.

In supportive cultures, people speak up and support down. They protect people without power by raising problems to those with it.

A HEALTHY CULTURE IS BETTER FOR PATIENTS TOO

REFLECTION

FACTOR 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?

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#3 CLEAR LEADERSHIP AND EXPECTATIONS

HAVING A POSITION OF AUTHORITY DOES NOT MAKE YOU A LEADER

BIG POTENTIAL

Shawn Achor's idea of 'Big Potential'

Meaning that by helping others achieve their highest potential, you are more likely to reach yours.

"IT'S NO LONGER ABOUT BEING FASTER ALONE, IT'S NOW ABOUT BEING STRONGER TOGETHER."

- ACHOR

"

ACHOR SAYS...

WE **USED** TO ASK QUESTIONS LIKE:

"HOW SMART ARE YOU?"

"HOW CREATIVE ARE YOU?"

OR "HOW HARD DO YOU WORK?"

Now....

the better questions for leaders focus on others...

and the ability to achieve "exponential success"

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BETTER QUESTIONS

>> 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?

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BEST PRACTICES TO LIVE BY:
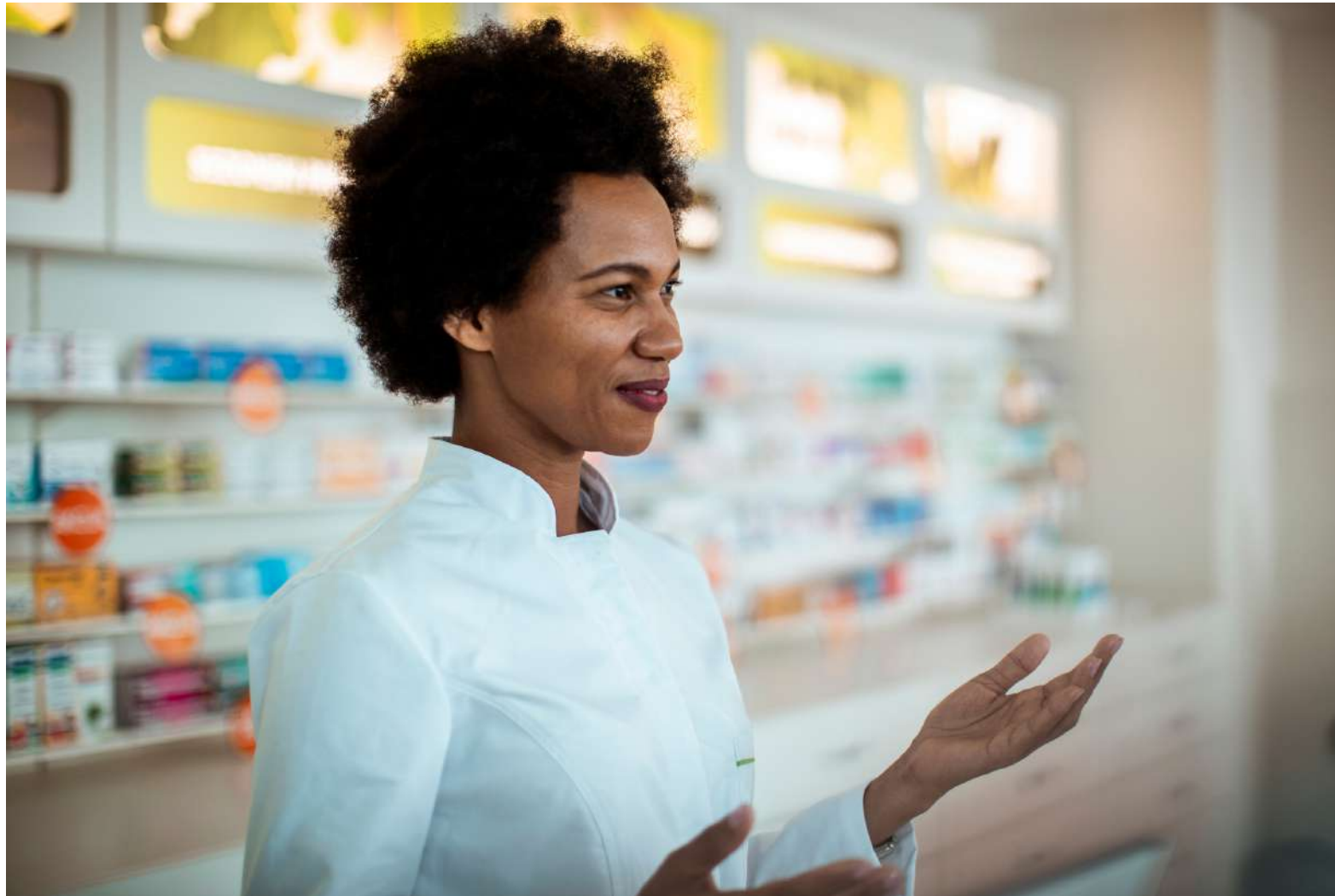
- Have ground rules and boundaries

- Avoid arguing your position without listening to others

- Ask others to explain their positions. ask questions and paraphrase

- Don't take the easy way out

- Discuss your assumptions (framing matters)

Remember, there doesn't have to be a winner and a loser...

- Marginalization

- Power and influence

- Common info effect

- Groupthink

- Escalation of commitment

REFLECTION

FACTOR 3: CLEAR LEADERSHIP AND EXPECTATIONS

- 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

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#4 CIVILITY AND RESPECT

- Would your pharmacy team say that 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?

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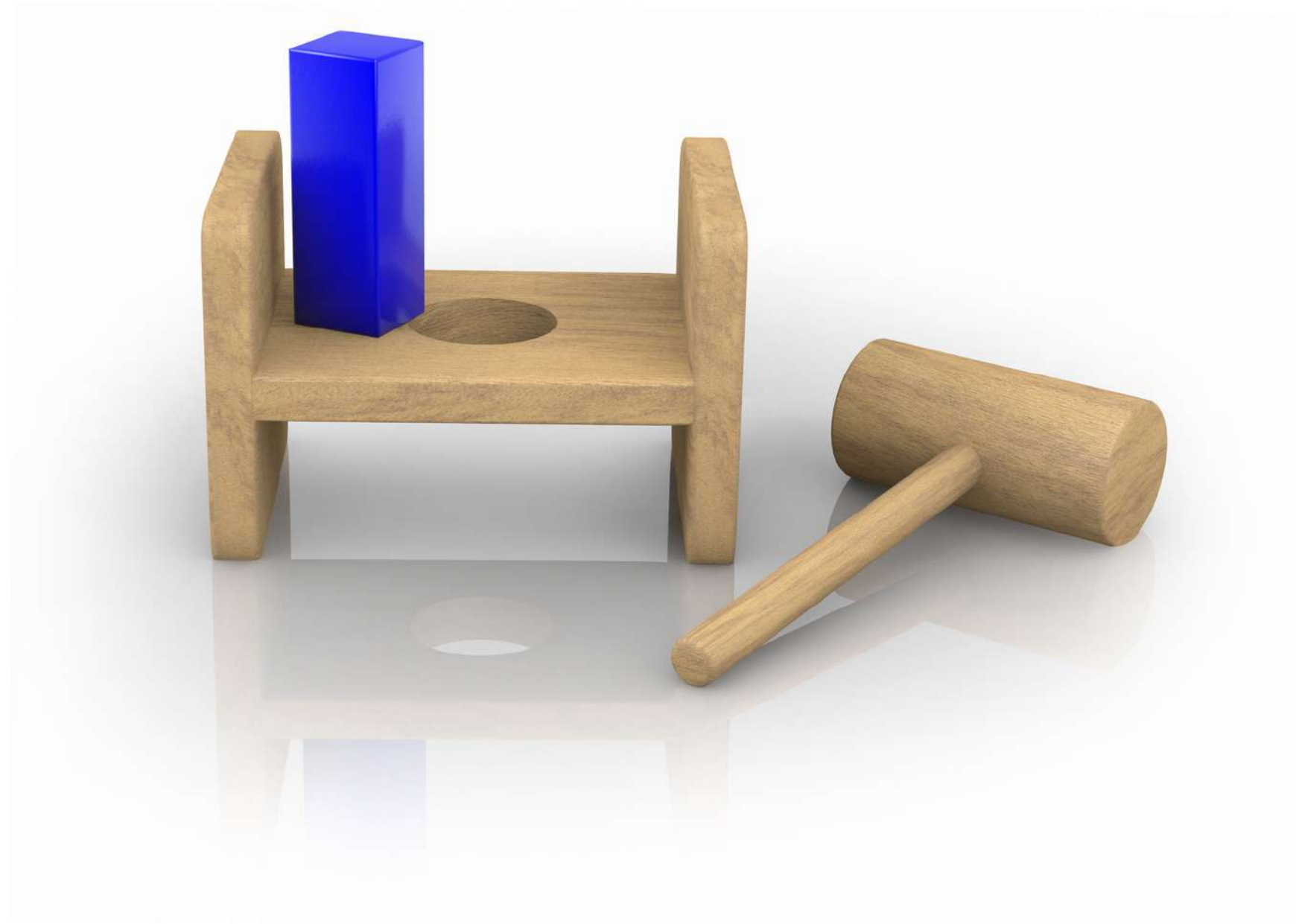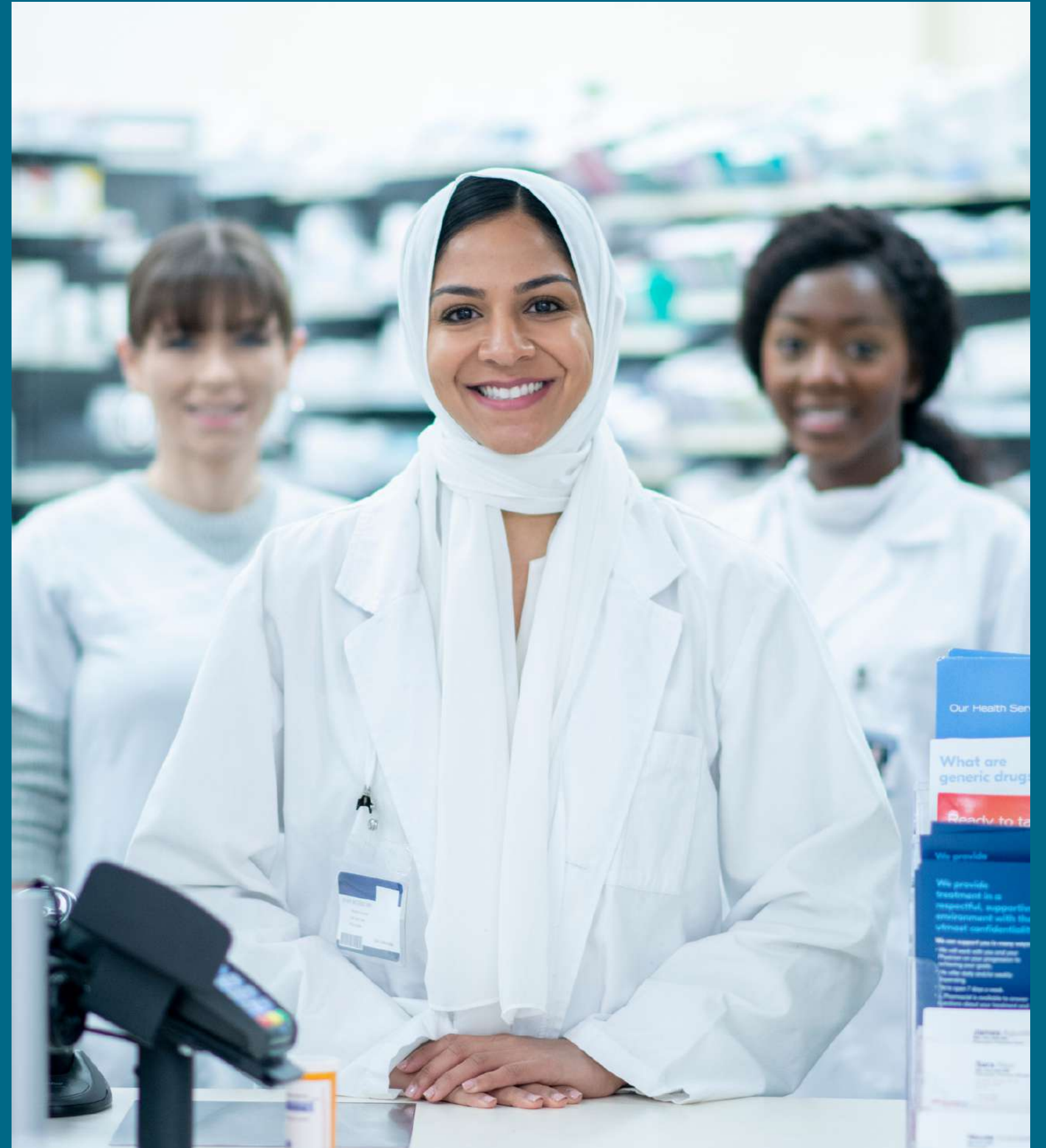AmyOliver+co
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REFLECTION

FACTOR 4: CIVILITY AND RESPECT

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  - Everyday colleagues?
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  - 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?

#5 PSYCHOLOGICAL JOB FIT

DOES YOUR
PHARMACY TEAM
FIND MEANING
IN THEIR WORK?

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REFLECTION

FACTOR 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?

#6 GROWTH AND DEVELOPMENT

Growing in a pharmacy organization

PHARMACY IS ON THE BRINK OF DISRUPTION

PILLARS FOR GROWTH

» Continuous improvement mindset

» Build curiosity

» Start small

» More positive feedback

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PILLARS FOR GROWTH

>> Praise effort

>> Safety to make mistakes

>> Responsibility and accountability

>> Stay focused on the outcomes

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REFLECTION
FACTOR 6: GROWTH AND DEVELOPMENT

- 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?

#7 RECOGNITION AND REWARD

How can you start to incorporate genuine and purposeful appreciative feedback into the daily and weekly routines in your pharmacy?

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ON WAGES...

Are pharmacy professionals being asked to do more, for less?

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REFLECTION

FACTOR 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?"

#8 INVOLVEMENT AND INFLUENCE

Goal Setting Theory

If people are involved in making the plans, they are more likely to work hard to deliver on the plans.

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HOW INVOLVED ARE YOUR STAFF IN THE DECISIONS ABOUT THE PRACTICE?

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REFLECTION

FACTOR 8: INVOLVEMENT AND INFLUENCE

- 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?

#9 WORKLOAD MANAGEMENT

KEY QUESTIONS ON 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?

ONE STEP FURTHER ON WORKLOAD

ADDITIONAL POINTS TO CONSIDER:

- NUMBER OF RESPONSIBILITIES ASSOCIATED WITH THE ROLE

- POSITION IN THE HIERARCHY OF THE ORGANIZATION

- CONDITIONS OF EMPLOYMENT

- LEVEL OF PERCEIVED SAFETY TO BRING UP CONCERNS RELATED TO WORKLOAD

REFLECTION

FACTOR 9: WORKLOAD MANAGEMENT

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

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- Do the staff believe their workload is reasonable?

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#10 ENGAGEMENT

WHAT IS ENGAGEMENT

ENERGY AND RESILIENCE
Enthusiasm to keep trying when work is challenging

PRIDE
Dedication, involvement, sense of meaning and significance

ABSORPTION
Enjoying work so much you lose track of time

"

"EMPLOYEE ENGAGEMENT IS THE ART AND SCIENCE OF ENGAGING PEOPLE IN AUTHENTIC AND RECOGNIZED CONNECTIONS TO STRATEGY, ROLES, PERFORMANCE, ORGANIZATION, COMMUNITY, RELATIONSHIP, CUSTOMERS, DEVELOPMENT, ENERGY, AND WELL-BEING AS WE LEVERAGE, SUSTAIN, AND TRANSFORM OUR WORK CONNECTIONS INTO RESULTS"

- DAVID ZINGER

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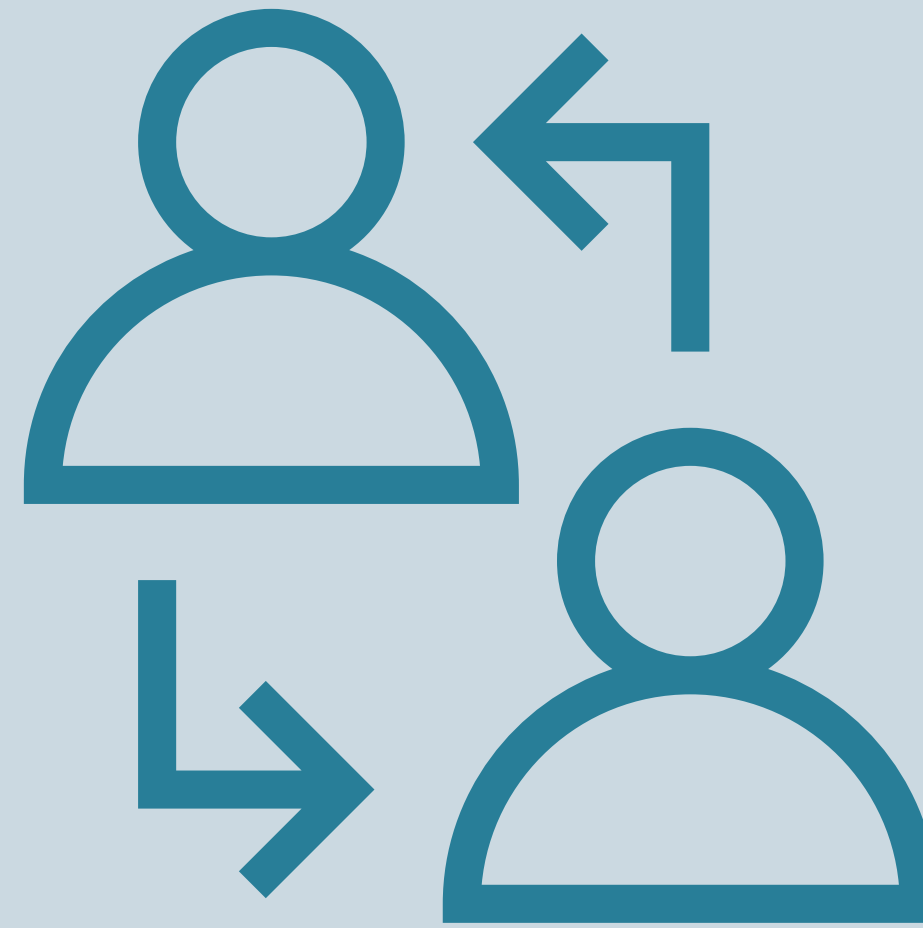Advocating Excellence in Practice and Care

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WHY IS EMPLOYEE ENGAGEMENT IMPORTANT?

- Increased engagement drives results

- 20% or better boost to productivity and profitability for companies with high engagement.

- 30% of American workers, and 13% of global workers, are engaged in their jobs.

Fuller, Ryan. A Primer on Measuring Employee Engagement. Harvard Business Review (November 17, 2014).

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TYPICAL APPROACH TO EMPLOYEE ENGAGEMENT:

- Engagement surveys to rate level of engagement

- This is about employees attitudes and perceptions

- Lacking objective data that measures employees actions

Fuller, Ryan. A Primer on Measuring Employee Engagement. Harvard Business Review (November 17, 2014).

BUILDING BLOCKS FOR EMPLOYEE ENGAGEMENT:

»» ALIGN RESULTS

»» TRACK SMALL WINS WITH PROGRESS

»» CONNECT WITH PEOPLE TO BUILD RELATIONSHIPS

»» PURPOSE DRIVEN

»» CAPABLE AND COMPETENT

»» ENHANCE WELL-BEING

»» MEASURING ENGAGEMENT

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REFLECTION

FACTOR 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?

#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?

PEOPLE DON'T HAVE TO LIKE YOUR BOUNDARIES, THEY ONLY HAVE TO RESPECT THEM.

REFLECTION

FACTOR 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?)

#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?

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REFLECTION

FACTOR 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?

#13 PROTECTION OF PHYSICAL SAFETY

ARE YOUR PHARMACY EMPLOYEES PHYSICALLY SAFE?

This can look like:

- Availability of PPE during a pandemic

- Appropriate support systems in place to protect staff from violence (from patients, co-workers, family)

- Can your team do their jobs in a physically safe way? (Ex. Ergonomics)

- Does your pharmacy respond effectively when physical risks are identified? (Or only when physical accidents present...)

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REFLECTION

FACTOR 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 occured?

EXTRA FACTORS EXCLUSIVE TO HEALTHCARE ENVIRONMENTS

PROTECTION FROM MORAL DISTRESS

WHEN PRACTICE IS NOT ALIGNED WITH PERSONAL AND PROFESSIONAL VALUE SYSTEMS

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THE PATIENT SAFETY PERSPECTIVE

Pay attention to the second victim.

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THE ETHICAL PERSPECTIVE

Moral injury can occur when the belief of how to care for a patient is not aligned with institutional or regulatory constraints.

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ETHICS EXAMPLES THAT CAN CAUSE MORAL DISTRESS:

- Medication shortages are rampant, and you have to make an active decision to prioritize one patient over another when they both need a certain drug.

- You truly believe a patient is in severe pain and their partner sold their hydromorphone for money. Your moral decision may be to treat their pain but your moral behaviour does not follow through as it is against the rules to release narcotics early without approval.

- A patient you believe should have been prioritized for the COVID vaccine is not yet eligible, and so you have to turn them away and ask them to come back when they are eligible.

- A patient cannot afford a medication that they truly need. You do not have decision making authority to give it away for free, for less, or allow them to pay later. You do not dispense the medication as they cannot pay.

- A prescription is incomplete, and you cannot reach the prescriber. You do not fill it as you are at risk of insurance audits with incomplete prescriptions and the patient must wait a few days for access to a medication they need.

REFLECTION

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?

SUPPORT FOR PSYCHOLOGICAL SELF-CARE

A professional workplace and industry environment that actively supports pharmacy professionals need to care for their own psychological health and safety.

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EXAMPLES OF HOW THIS CAN LOOK IN PHARMACY PRACTICES:

- Support and systems in place to help mitigate feelings of professional isolation.

- The pharmacy leadership provides access to supports for psychological self-care. This can look like benefits (for all staff, not just some staff), employee assistance programs, or permission/support to take time to focus on one's mental health.

- Employee development includes content related to self-care.

- Leadership leads by example and cares for their psychological well-being instead of promoting a culture of overwork (walk the walk, not just talk the talk).

- Feelings of safety around disclosing mental health and the state of psychological well-being without fear of consequences.

REFLECTION
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?

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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