Welcome to the third segment of Workplace Woes in Pharmacy, and again where addressing your questions about workplace situations. This section is called Customers! You can't live with them and you can't live without them!
DISCLOSURES

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report no conflicts of interest and have nothing
to disclose with regard to the content of this
continuing education activity

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WARNING

Warning: This continuing education activity is based on pharmacy staff’s real-world experiences (which may be unsuitable for children to see); may contain unusual humor; and describes some deplorable behaviors (which may be disturbing).

Viewer discretion advised

Again, our disclosure slide. This is pretty tough stuff to listen to because it's the type of problem that we live with every day of every year in the pharmacy.
We placed our objectives here again so you can review them. Remember that you can always pause this video presentation and review if necessary.

**Objectives**

- LIST ways to deal with difficult managers who micromanage, are hostile, or lack supervisory skills
- DETERMINE approaches to deal with coworkers whose skills, competencies, and teamwork abilities need improvement
- LIST several ways to improve one’s own skill set and career plan
- RECALL strategies to deal with poor healthcare literacy; “non-customers”; angry or abusive patients; and patients whose expectations have been disappointed
Keep in mind that stress is always in the eye of the beholder. What may cause one employee stress in the workplace may not even cause a ripple of concern to another. The key to dealing with stress is knowing the specific stresses on the work environment that you are particularly sensitive to and the warning signs in your own body and mind that signal stress overload.

Once you have identified your vulnerability, you can create ongoing stress management strategies to cope with the issues. If you feel unable to manage this process yourself, or feel overwhelmed, it may be a good idea to consult an objective professional, such as a psychologist. And many large organizations have Employee Assistance programs that can help. Collaborating with a professional may go a long way in making you feel more empowered to manage stress.
In terms of managing stress on a higher level—for the group—the process is similar. Most of us think that high workload is the primary cause of stress. It can be, but other things also cause stress. Not enough work, for example! Things that can contribute to stress include long work hours, noise, the ambient temperature, unanticipated changes, stringent policies, uncertainty, disagreements about how things should be done, too many bosses, pay disparities, boring or repetitive work, heavy traffic on the way to work, unclear or conflicting expectations, unpleasant or dangerous physical conditions, ergonomic conditions, and even specific people (a coworker, supervisor, or customer). And a lack of an individual or collective sense of humor.

Track workplace stressors. Keep a journal for a week or two to identify which situations create the most stress for the group. You can even make this a group activity. Stop once an hour and make notes. Record your thoughts, feelings and information about the environment, including the people and circumstances involved, the physical setting and how everyone reacted. Taking notes can help you find patterns among stressors and how the group reacts.

Stress can be managed. If we look at the list of things that contribute to stress, some of them can be mitigated or eliminated. Management of stress involves three steps:
• Identifying the sources of stress to staff health and wellbeing
• Developing and implementing actions to minimize or eliminate
• Monitor and review the interventions to ensure continuous improvement.

If the stress involves a group of staff, some staff members should be spoken to individually, all staff should be given the option of initiating a discussion with you and the group should be given an opportunity to raise issues as a group.
Review all of the points on the slide above. Jeannette Wick indicated that taking and encouraging breaks is a sore point with her because so many pharmacies don’t allow adequate time for pharmacy staff to take a lunch break. It’s critical to ensure that people have a break during the day.

Let people express their concerns, and ask what would help. (Sometimes, employees ask for very simple items or changes that can significantly change the stress level)

Look for ways to create strong, trusting relationships—This is incredibly important pharmacies because our work is so detail oriented and we need to be able to trust the people with whom we work implicitly. When we don’t trust our coworkers we are more likely to make errors and those errors are more likely to make their way to the patient.

For the most part, make the workplace “blame-free”

Look at work schedules and see if it can be more flexible.

Introduce some rewarding work into the day. Especially in busy environments, adding something today that you really like to do can give you a sense of accomplishment. In particular, try to counsel or help at least one patient every day. This tends to be the most rewarding of our work.

Create a group project that takes care of a backlog. Many pharmacies report that their filing is in arrears or drugs are not being returned to stock probably and they have big boxes full of them. This is a great project for quilting bee type environment.

Reward good behaviors. Even a simple thank-you makes a difference, and actually rewarding other staff members with a card or a small favor can improve the workplace and decrease stress.

Diane Holmberg indicated that anyone who has a job should realize that the very nature of work is stressful and there are no stress free workplaces really. Everyone needs to adapt to a certain low level of stress and learn to manage it.

Jeannette Wick indicated that many of the items listed in the prototype section are within the employee’s control. Employees can often adjust the temperature in the pharmacy or decrease some of the noise and decrease stress.
Caller #2

- One of my coworkers is going through a divorce. No one wants to work with him. And we can't count on him to pull his weight.

- Any advice for me?
Diane Holmberg started the discussion by saying that there are two perspectives to divorce: that of the person who's experiencing the divorce and that of people who are contingent to it. That would be the individual's family, friends, children's, and coworkers.

This graphic shows divorce from the divorcing individuals perspective. It's a terrible roller coaster. Initially, they experience shock and unhappiness. Then they have fear and uncertainty about how their families will fall apart, which friends will stick with them or not, and how they'll manage their money. Eventually they'll reach a point of resignation. It's a roller coaster ride for the person is going through the divorce, and it's a roller coaster ride for people who are around the divorcing individual. You need to develop a tremendous amount of empathy. Take a step back and try to help.

It's very important to be more of a listener than a commentator when you have a coworker who's going through divorce. It's also especially important not to say anything about the divorcing individuals spouse because often, people start divorce proceedings and then they reconcile or even remarry later. It's best to hold your tongue in that respect.
Divorce

- U.S. divorce rates have fallen since 1980s
  - But they are still high

- ~36%-40% of first marriages end in divorce
  - 2nd marriages: ~60%
  - 3rd marriages: ~73%

- NOTE: Marriages between more educated, higher-income Americans are less likely to end in divorce.

K. Schultz, *Using Wrong: Adventures on the Margin of Error*

This slide shows that the number of marriages that end in divorce has fallen since the 1980s when one in every two marriages ended in divorce. Currently it's between 36% and 40%, which is really quite high when you think about it.
It's also really important to realize that divorce is a stressor but there are other traumatic situations that also cause a tremendous amount of stress for your coworkers or for you. If you look at this list, you'll see many of these are very common. You're likely to see a coworker go through one of the situations, and you're going to need to be empathetic and helpful.

Marital separation can be almost as stressful as divorce itself. The speakers had a good laugh about imprisonment, and will hope to that no one listening to this webcast will ever be stressed because they have to go to prison.

Some people take personal injury or illness in stride. And if you're a team and you've developed good team strategies you'll find a way to hang in there and help them.

The speakers note the four of the top 10 traumatic stressors have to do with marriage, and they aren't sure what that means, but it certainly is something to think about.

In any of these circumstances, you need to be a good listener. You need to bite your tongue and you need to be empathetic. Both speakers emphasize that people going through events like this may burst into tears spontaneously and often. When dealing with coworkers who are crying, it's important to ask the person, "What can I do to help you right this minute? Can I get you a tissue, would you like to step out for a little while, or how can I help?" It's not just women who have crying issues when they're dealing with these crying issues. It can be men, too.

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**Other Stressors**

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<th>Top 10 Most Traumatic Stressors</th>
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<tbody>
<tr>
<td>1. Death of a spouse or child</td>
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<td>2. Divorce</td>
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<td>3. Marital Separation</td>
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<td>4. Imprisonment</td>
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<td>5. Death of a close family member</td>
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<td>6. Personal injury or illness</td>
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<td>7. Marriage</td>
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<td>8. Dismissal from work</td>
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<td>9. Marital reconciliation</td>
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<td>10. Retirement</td>
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Caller #3

I'm pregnant and I'm planning to stay home after the baby comes for at least a year. I'm worried about re-entering the workforce.

What do I need to think about?
Preparation to Return to Work

- Maintain your professional network
- Maintain your skills by staying current with changes in pharmacy
- Plan continuing education
- Consider part-time work (volunteer or paid)
- Plan childcare
  - Include back-up childcare options

First, maintain your professional network. So many people have children and then become so consumed with being a mom or dad that they don't maintain their networks. This is a true mistake.

Maintaining your skills by staying current with changes in pharmacy and planning your continuing education go hand-in-hand. The speakers had a good laugh when they said that clearly, anyone listening to the webcast knows good continuing education. They also said that is important to find continuing education that relates to your career goals and keeps you current either in the field in which you wish to return or in the field where you wish to go later.

Part-time volunteer or paid work can keep pharmacists and pharmacy technicians up to date. It also can give individuals a break from the rigors of raising a child. People really do need to take breaks from their children from time to time.

Jeannette Wick gave a plug for always having a Plan B. She said that when she had her child, she learned how important it was to have a Plan B so that if childcare falls through, you have an immediate plan to take care of your child. She said that you also need a Plan C because Plan B can also fall through.
Family Leave

• **Federal Law:** Family and Medical Leave Act (FMLA), permits *eligible employees of covered employers* to take *unpaid* leave for specific medical and family reasons.

• Check state and local laws

**An FMLA eligible employee is one who:**
- Works for a covered employer
- Has worked for the employer for at least 12 months
- Has at least 1,250 hours of service for the employer during the 12 month period immediately preceding the leave; and
- Works at a location where the employer has at least 50 employees within 75 miles

**FMLA Covered employer:**
- Private-sector employer, with 50 or more employees in 20 or more workweeks in the current or preceding calendar year, including a joint employer or successor in interest to a covered employer;
- Public agency, including a local, state, or Federal government agency, regardless of the number of employees it employs; or
- Public or private elementary or secondary school, regardless of the number of employees it employs.

**FMLA Leave Entitlement**
Eligible employees may take up to 12 work weeks of leave in a 12-month period for one or more of the following reasons:
- The birth of a son or daughter or placement of a son or daughter with the employee for adoption or foster care;
- To care for a spouse, son, daughter, or parent who has a serious health condition;
- For a serious health condition that makes the employee unable to perform the essential functions of his or her job; or
- For any qualifying exigency arising out of the fact that a spouse, son, daughter, or parent is a military member on covered active duty or call to covered active duty status.
Caller # 4

I admit that I am a doormat. When the manager is off and I’m in charge, I am WAAAAAYYY too lenient with employees. Really, there’s plenty to do, but I can’t seem to keep everybody busy.

How can I do better?
When managers take a day off, and someone else is in charge, it's very similar to when you were in grade school and the teacher was off and you had a substitute teacher. It's human nature sometimes to try to take advantage of people who don't know or don't seem to have the authority that the previous teacher or manager had.
As you're working, keep a running list of things that need to be done. You can pull it out of your pocket during slow times and say, "Hey let's divvy up this list."

You can also do what pharmacists and pharmacy technicians do really well; you can have a huddle at the beginning of the day! At that point you can talk about the problems that are on deck from yesterday, and the things that need to be done during the day. You can also say that the boss left a list of things that need to be done. It's a little bit of hiding behind the bosses apron strings, but if it works for you, use it.

Diane Holmberg said that during periods of the year when she supervises 20 people, she's found that taking a few minutes at the beginning of the day to create a task chart with a column where people can initial that they have completed a task often is motivation enough for people to volunteer to get things done. People really like to see their initials on a task list. Jeannette Wick said it's kind of the adult version of the star chart on the refrigerator. Diane went on to say that if the day is progressing and nobody's completed as many tasks as need to be done, you can wave the list and say, "I can't help but notice that many of these tasks have not been done." People will generally jump in and get them done.
Caller #5

Can I complain about the younger generation?

New pharmacists are reluctant to take supervisory responsibilities. They don't want to supervise techs or other pharmacists. Very few are interested in middle management or becoming leaders.
The speakers were laughing, and they said that they don't tend to use the word "old," but prefer to say that they are experienced. They reported that between them, they have about 45 years of work experience and invited listeners to do the math and figure out how old they really are. They did not disclose their actual ages. They did say the generation gaps and misunderstandings between generations are common.
The Leaders Gap

- The shortage of pharmacy leaders is significant
- Void of formal leaders, so “accidental leaders” are becoming prevalent
- The ability to manage people has almost nothing to do with technical/clinical savvy
- Formal leadership is much different than freelance advocacy

Most clinical pharmacists likely did not dream of being managers

Pharmacy schools do not have the room or flexibility in their curriculums to adequately ensure management and leadership competencies. Anxiety generally sets in when the newly promoted pharmacy manager realizes that the role of formal leader is much different from the role of freelance advocate.

One of new pharmacy managers’ most important oversights is not recognizing the need for mentors. This point is often better understood by pharmacy students and residents than new managers. As noted, the skills you need to be a successful manager are different from the skills that made you successful in your previous role. Accept this and seek mentorship.

Mentoring is a personal relationship with someone who will tell you what you do not want to hear. They are not there to be your best friend. They are your compass to provide a true north. At any point in time, you should both have and be a mentor.
There’s a lot to say about mentoring. Many programs assign mentors, but the best mentoring relationships are self-selected or arise as people work on the job. Mentoring is often a type of professional friendship that can’t be forced. Many young people will not take leadership roles unless they have a mentor. They will feel uncomfortable or unprepared, and unless we more experienced individuals take the time to help them, the problem will persist.

Further, new managers often choose their mentors very poorly. They are afraid to ask for mentorship and sacrifice quality for convenience. Many—but not all—successful people enjoy sharing what they have learned. Do not artificially constrain yourself with available mentors in pharmacy only, but rather seek mentorship from a variety of sources, companies, and industries. You should have mentors for each aspect of your career or career aspirations. If your pharmacy role includes student teaching, budgeting, politics, and professional associations, seek mentors for each of these. As much as it is unrealistic for you to be an all-star in all areas, it is also unrealistic for your mentor. As a rule of thumb, you should have no fewer than 4 mentors at any point in your career, and these will change over time.

And don’t forget the concept of “reverse mentoring.” Most people think about mentors as someone older and more experienced. We older—and by that we mean very experienced—people learned in the last decade that there’s a real benefit from having a much younger person mentor us in things like technology and social media.
Caller #6

How do I keep patient counseling private?
People are crowding in to be waited on at the register.
Diane Holmberg said, “Don’t get me started on this one.” A local chain just changed its setup, and she can hear EVERY conversation at the pharmacy counter at therefore counseling booths, whereas she said she used to hear only one or none.

People do want privacy when they’re at the pharmacy counter. Jeannette Wick said that perhaps listeners have missed a point that we've made several times during this webcast. It's that people need to use their Montessori language. In Montessori kindergarten, if a child runs to the teacher and says, "Jimmy hit me!" The teacher will say, "Well then, use your words." What she means is that the child should go to Jimmy and say politely and directly, "I don't like it when you hit me." Pharmacy staff needs to learn how to use Montessori language to be direct with people. It's okay to say to a coworker, "Please put your bottles back onto the shelf when you're done with them. I don't like to have to do it for you." Or the like. In the case of people who are crowding the counseling area, say politely "Could you please step back about 4 feet?" And note that the request is very specific. If you just ask the customer to step back a little bit, he or she may step back 1 foot and then strained to hear what you’re saying to the other person.
Maintaining Patients’ Privacy

- Label where you want customers to begin standing in line behind the register
- Put up signs reminding customers to respect others’ privacy and wait in the appointed area
- Develop one or two phrases to tell customers who crowd the register
- If space allows, place chairs in the waiting area away from the register
- Play music in the waiting area (noise clutter)

These tips can help ensure privacy for your patients.

The speakers also underscored two points. People in the pharmacy who work behind the counter very rarely walk out in front of the counter and watch and listen carefully to see what their customers see or hear. Doing so will give you some insight into what people are hearing and seeing. It’s enlightening! One of the things that you’ll see is that there are often a lot of what the speaker called "stupid signs," explaining that these are signs that have no purpose, have passed the expiration date, or just detract from the ability for people to see the important signs. Clean up the area and take down unnecessary signs.

The second point was that having chairs in the waiting area is good, but better would be to have the line actually be chairs. That is, lining chairs up with the sign that indicates people seated in these chairs are in line for prescriptions will make it very clear that that is the line.
Caller # 7

I spent six years in school, and I’m working in retail. At some point, I know I’m going to need to move on and find something else. Any tips?
In the old days, people took a job and stayed with it for 30 or 35 years. That’s no longer true. You should expect to move just about every decade. And sooner if you like.

Or if you get fired. (Lots of laughter here)

These are some of the reasons people leave jobs. That fourth one—poor relationship with manager—is reported to be the most common reason for leaving a job! The speakers noted that even if this is the reason for you changing your job, it’s probably not a good idea to fill that out in the next application under "reason for leaving."
The speakers reviewed these particular skills that many pharmacists and pharmacy technicians possess because of their training. In particular they discussed clinical trials management and patient education.
Preparing to Return to Work: Changing Careers

• Maintain your professional network

• Maintain your skills by staying current with changes in pharmacy
  —Moonlight!!!

• Plan continuing education

• Consider part-time work (volunteer or paid)

• Plan childcare
  — Include back-up childcare options

So basically, we've already discussed this when we talk to the caller who is planning to stay home with her child after the baby arrives.

The only difference in the slide is that we added a small section about moonlighting. Moonlighting – taking another job for a few hours a week in the area where you hope to work full time – is so important. It's the "don't quit your day job" approach to changing careers. If you work in retail and you wish to go to the hospital environment, look for a part-time job in the hospital.
The speakers gave a push for this book, "What Color is Your Parachute?" It is a wonderful book to identify places where you might work and to look at your skill set. It is especially helpful if you've been fired because it has a chapter that discusses what to do if you've been fired. It emphasizes that most people who are fired are fired not because they're bad people are bad employees, but because their skill sets and the organizations needs don't match. It's a great comfort in that situation. And they urge listeners to consider picking this book up.
Caller #8

One of our technicians is a back-stabbing busy body who's goal in life is to be involved in everybody else's problems.

Any tips for dealing with intrusive gossips?

We've all dealt with this type of situation.
Gossip is the cancer of the workplace. It's disruptive and interferes with work. Employees feelings tend to get hurt because of gossip. Interpersonal relationships become damaged as does the trust relationship between pharmacy employees. It also reduces motivation and morale.

For individuals who gossip, it can be a lifelong habit and it can take an awful lot of effort to break the cycle. Managers who ignore gossip can destroy a department.

There's a distinction between benign gossip and malicious gossip. Benign gossip is rather simple, and often it's just something that you've heard. Malicious gossip is the one it starts with, "Do you know what I've heard?" Often it's whispered.
This helps distinguish between benign gossip and malicious gossip.

They also discussed this letter:

DEAR MISS MANNERS: My brother is in a long-term relationship with another man. A co-worker found this out from another source, and confronted me about it, asking all sorts of details about my brother and his lifestyle.

I smiled and said, "That's kind of personal, and I never asked the details anyway, his business is his business."

Then the co-worker accused me of being ashamed of my brother, not concerned for him, bigoted, uncaring, all sorts of things.

This is not true. I love my brother; we are great friends. I just don't feel it is my right to talk about his sex life to co-workers -- or anyone! What should I have said?

GENTLE READER-- Miss Manners is surprised that you don't know that unsatisfied nosy people always bring up the idea of shame as a second line of attack when the blunt inquiry fails. They must have all learned it together in group therapy.

The response is a calm but weary, "No, it's just that I'm not much of a gossip."
The speakers reviewed the points on this slide, and in addition, they indicated that there are some signs that gossip is a problem in the workplace. If an employee comes to you and says, "Could you please not schedule me with so-and-so?" It's an indicated there's a problem. The manager does have responsibility to try to get to the bottom of it. Generally just talking to the problem employee and saying I heard that you may have made a comment about such and such, it may shut down the problem early.

Bring these types of complaints to your supervisor. They can often shut gossip down very quickly and quietly. Saying that we don't gossip about the people we work with, we don't gossip about our customers or patients, and we don't gossip about people who are different than we are is really important.
The speakers indicated that no matter what happens to you, no matter how well educated you are, things happen that are beyond your control. You can plan carefully for the future, but you always need to have some flexibility and have a Plan B.

Thank you for joining us for this segment and we will see you in Part 4.