Workplace Woes in Pharmacy

A 4-part video presentation addressing your questions about workplace problems

DISCLOSURES
C. Michael White, PharmD
Diane Y. Holmberg, MS
Jeannette Y. Wick, RPh, MBA, FASCP

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

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

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

AGENDA

• Part 1: The Boss
• Part 2: Your coworkers
• Part 3: You
• Part 4: Patients

• To receive credit for this activity, you must complete the four 30 minute sessions, take the posttest, and evaluate the program

Workplace Woes in Pharmacy

Everybody Loves to Complain about the Boss!
Faculty Slide
C. Michael White, Pharm.D., FCP, FCCP
• Professor and Chair UConn School of Pharmacy
• Co-Director, UConn/Hartford Hospital HOPES Collaborative Group.
Jeannette Y. Wick, R.Ph. MBA, FASCP
• Assistant Director, Office of Pharmacy Professional Development, Uconn School of Pharmacy

Question #1
I work in a pharmacy where micro-managing directors/supervisors are the rule, not the exception. If we suggest new ways of doing this, they treat us like rabble-rousers rather than innovators. Morale is really bad.

Any tips for dealing with this kind of management style?

Micromanaging Basics
Micromanagers tend to
• Resist delegating work
• Immerse themselves in the work assigned to others
• Look at the detail instead of the big picture
• Discourage others from making decisions
• Get involved in others’ work of without asking them
• Monitor what’s least important and expect regular reports on miscellany
• Discount colleagues’ experience and knowledge
• Discourage loyalty and commitment
• Focus on the wrong priorities
• De-motivate teams

Question #2
At my pharmacy chain, my supervisor has trouble communicating to the entire staff uniformly (some people get updates, some don’t if they weren’t scheduled at time of change). It’s really annoying to be scolded for doing something “wrong” when no one told you that the policy changed.

How can I handle this? It makes me really angry!!!
Managing Up!

Identify reasons for your boss’s behavior
Manage your own negative emotions
Communicate issues/concerns in a helpful, positive manner

Think: PAST be CANDID

PAST
• Proactive
• Accountable
• Supportive
• Transparent

CANDID
• Compartmentalize
• Ask questions (curious, not furious)
• Normalize
• Discuss
• Incentive
• Disengage

Question #3
That last question struck a chord with me. My boss is chronically hostile and really abusive. For example:

• If I bring any kind of work problem to him, he glares at me and sneers, “That seems like a personal problem. What do you want me to do about it?”

• He’s a big fan of NCIS, and he constantly calls me “Probie.” He tried to slap the back of my head once like Gibbs slaps DiNozzo, but I’m sure my look of horror and recoil stopped that.

• When he points out an error or a problem and I try to talk, he says, “My job is to talk. Your job is to shut up and listen.” Is this just the way some people communicate?

Harassment vs. Bullying

• Discuss your concerns in a non-adversarial way

• Consider whether this is harassment

• Speak to a trusted mentor or human resources professional

Workplace Bullying

• Bullying is perpetuated by insecure people against people they see as a threat
  71% of employer reactions are harmful to targets
  60% of coworker reactions are harmful to targets
  To stop it, 65% of targets lose their original jobs

• Continue to work to maintain a friendly work environment

PRO TIP

• The Workplace Bullying Institute offers research, coaching and other resources for identifying and combating such bullying.

Question #4
I have the opposite problem. My supervisor was promoted from within, mainly because he was easy to work with and everyone liked him I think. Really, my coworker Sarah should have gotten the job. But he still wants to be everyone’s friend. He’s always bringing in little gifts for everyone, wants everyone to go out for drinks after work, invites people to parties at his house, and he never wants to correct anyone for anything. All the stuff that people don’t want or like to do is piling up, the pharmacy is a pigsty, and everyone’s unhappy. He hasn’t filled the position he vacated, so we’re all doing more work. And he’s talking about hiring one of his friends from school who has a bad reputation. We’ve cut back on our social events because we just don’t want to deal with him outside of work.

Peer Promotions
Discuss the following with your new boss:
- New, clear boundaries for everyone
- Chatting and gossiping after hours is off limits now
- Establish work priorities and rules
- Set expectation that are SMART (specific, measurable, achievable, realistic, and time-tagged) for everyone
- Admit his current approach is not working
- Develop a new and different social circle

What are performance metrics?
- System used by employers to measure pharmacist duties:
  - # of prescriptions filled
  - how fast prescriptions are filled

- Data used to measure pharmacists’ performance
- 83% of 700 pharmacists surveyed said they believe performance metrics contribute to dispensing errors

ISMP hears you!
- Large study (N=673)
- 49% of the pharmacists said they are penalized if they don’t meet advertised time guarantee expectations
- Often is due to conflicting duties including
  - Adjudicating insurance issues (87%)
  - Encountering prescription volumes that exceed resources (77%)
  - Clarifying the prescription with the prescriber (77%)
  - Providing patients with information or other services such as immunizations (61%)
- Twenty-three percent said they were incentivized through salary bonuses for meeting the time guarantees
**Directly from ISMP**

- Incentives for perfect performance and punishment for imperfect performance results in underreporting of errors, practice barriers, and risks.
- This is a significant threat to patient safety because unreported errors, barriers, and risks perpetuate the conditions that lead to adverse patient outcomes.
- If patients are rewarded when time guarantees are not met, it sets the tone for an adversarial relationship between the pharmacist and the patient; when a collaborative relationship is needed to promote safety.

**NABP Concurs**

- The Board of Pharmacy may refuse to issue or renew, or may Revoke, Summarily Suspend, Suspend, place on Probation, Censure, Reprimand, issue a Warning against, or issue a Cease and Desist order against, the licenses or the registration of, or assess a Fine/Civil Penalty or Costs/Administrative Costs against any Person Pursuant to the procedures set forth in Section 403 herein below, upon one or more of the following grounds:
  - requiring Pharmacy personnel to meet production and/or performance metrics and/or quotas that negatively impact patient safety.

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**Metrics**

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
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<tr>
<td>Help you focus on certain aspects of your practice; may help you improve service, streamline workflow, or decrease waste.</td>
<td>May direct your focus to certain aspects of your practice to the exclusion of all others.</td>
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<tr>
<td>Indicate when you are doing well, when you need to improve</td>
<td>May factor in unanticipated events (bad weather, government shutdowns) inappropriately</td>
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<td>Help you benchmark</td>
<td>May have you comparing apples and oranges</td>
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<tr>
<td>Provide some measure of performance</td>
<td>May rely too heavily on subjective data (surveys)</td>
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Albert Einstein said, “Not everything that can be counted counts, and not everything that counts can be counted.” Collect only what you need, and share only what’s relevant.

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**Question #6**

Everyone is pressing us to add clinical services. It’s a joke! How can we add clinical tasks into our workflow? We have all kinds of preexisting issues with workflow, including many different platforms to login to complete clinical claims.

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**Question #7**

What’s the best way to deal with non-pharmacist managers?

*and*

A tech owns the pharmacy and is therefore my boss. She will not stand up to another pharmacist who gets away with a lot, but she’s very critical of my work. In all honesty, I’m more detailed oriented that the other pharmacist, and catch more safety issues.
Kumbaya

• Owners, be they pharmacists or not, want the same things

• Context for why pharmacists do what they do could be skewed in non-pharmacists

• Only inquisitive questioning and positive discussion will break this paradigm

CONCLUSION

• Bosses are people, too

• They have strengths and limitations

“He was a good boss, but a little strict. I think he broke a few hearts, too.”

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