Workplace Woes in Pharmacy

Working for a Living: It’s Personal

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

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

Caller #1
I tell everybody that I love pharmacy. I don’t. Working at my community pharmacy is so stressful, I can’t stand it. I need to work here for at least another year. Do you have any tips to decrease stress?

Managing Stress in the Workplace

Identify source of stress
Develop and implement actions to minimize or eliminate stress
Monitor and review interventions to ensure continuous improvement

Reducing Stress

Try, as much as possible, to:
- Lead by example: be positive, constructive
- Take and encourage breaks
- Create strong, trusting relationships
- Make workplace “blame-free”
- Take your leave!!!
- Introduce some rewarding work into the day
- Create a group project that takes care of a backlog
- Acknowledge coworkers’ good behaviors

PRO TIP
Stress sources vary by person, possible stressors:
- Long work hours
- Unclear/conflicting expectations
- Noise, ambient temperature
- Unanticipated changes

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?

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.

Other Stressors

Top 10 Most Traumatic Stressors

1. Death of a spouse or child
2. Divorce
3. Marital Separation
4. Imprisonment
5. Death of a close family member
6. Personal injury or illness
7. Marriage
8. Dismissal from work
9. Marital reconciliation
10. Retirement

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?
Preparing 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

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

PRO TIP
Research your employer’s parental leave policy now (before you need it).

Caller #4

I admit that I am a doormat. When the manager is off and I’m in charge, I am WAAAAYYY 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 the Boss is Away

• Plan Ahead
  – Keep a running list of things that need to be done
  – Assign each task early in the day

PRO TIP
Ask your boss for a list of tasks that need to be completed while s/he’s away.

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.
DISCLOSURE AMENDMENT:
WE ARE OLD EXPERIENCED

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

Assuming Management Responsibilities
• As of 2013, 70%-80% of pharmacy leaders expected to retire by 2023
• Pharmacist ≠ Manager
• Pharmacy schools don’t prepare students to manage and lead

PRO TIP: Look for opportunities to both have and be a mentor.

Caller #6
How do I keep patient counseling private?
People are crowding in to be waited on at the register.

Eavesdroppers
• Set expectations early (discussed on next slide)
• Use the Montessori approach! (Use your words!)
  — Be blunt but be polite

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)
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?

Switching Jobs

• Common reasons employees change jobs:
  – Forced to because of downsizing or restructuring
  – Seeking new challenges or opportunities
  – Ineffective leadership
  – Poor relationship with manager
  – To improve work/life balance
  – Contributions were not valued
  – Better compensation and benefits
  – Better alignment of personal and organizational values
  – Personal strengths and capabilities weren’t a good fit
  – Company was financially unstable
  – Company or job relocated

• In other words… it’s common to switch canoes mid-stream

Pharmacy Employees’ Common Skills

• Attention to detail
• Business management
• Clinical trials management
• Conflict management
• Computer literacy
• Financial Management
• Forecasting
• Information management
• Insurance processing
• Inventory control
• Medical record review
• Medical writing
• Negotiation
• Organization
• Research
• Patient education
• Personnel management
• Sales
• Specialty knowledge (diabetes, pediatrics, etc.)
• Statistical analysis
• Teaching and training
• Other

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

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?
Gossip

- Cancer of the workplace
- Gossip
  - disrupts the workplace and interferes with work
  - hurts employees’ feelings
  - damages interpersonal relationships
  - reduces motivation and morale
- Gossip is often a life-long habit; breaking it can take a great deal of effort.
- Managers who ignore gossip can destroy a department.

The Litmus Test

- Is it kind?
- Is it true?
- Is it necessary?

Gossip

- Refuse to participate in malicious gossip
  - Gently suggest that we all show more respect for each other
- Specific Suggestions:
  - Before talking to HR collect evidence showing how her behavior affects the workplace
  - Indicators of poor morale: Workplace absences, increase in number of errors, longer waiting times, employee complaints

PRO TIP
Take serious complaints straight to your supervisor or human resources.
Engaging in gossip → loss of credibility

Conclusion

"Sorry, I can’t help you, I’m going to be an electrical engineer and that’s a fact! I’ve got to go and test some wires. I’ll be right back..."