

# HOPA Town Hall Well-Being for Members

January 17, 2023





# Welcome & Introductions

Heidi Finnes, PharmD, BCOP, FHOPA  
HOPA President

# Objectives

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Acknowledge	Acknowledge key national survey results related to hematology/oncology pharmacist burnout
Introduce	Introduce the HOPA Wellness and Burnout Task Force
Gather	Gather feedback from members on initiatives and collaborations

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# Speakers

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Jeryl Villadolid, PharmD, BCPS, BCOP

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Kate Reichert, PharmD, BCPPS

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Allison Golbach, PharmD, BCPS, BCOP

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Alison Gulbis, PharmD, BCOP



# Poll #1 Question

**What is your current practice setting?**

- Hospital/Inpatient
- Ambulatory Clinic/Infusion
- Industry
- Academia
- Managed Care
- Other



## Poll #2 Question

**How many years have you been in practice?**

- 0-2 years
- 3-5 years
- 5-10 years
- $\geq 10$  years

# Poll #3 Question

**What is your current role?**

- Staff Pharmacist
- Clinical Pharmacist
- Manager/Supervisor/Director
- Professor
- Other

# Hematology/Oncology Pharmacy National Survey Results

HOPA Evaluation of Burnout 2021

Allison Golbach, PharmD, BCPS, BCOP

Oncology Pharmacy Workforce Survey 2021

Alison Gulbis, PharmD, BCOP



# HOPA Burnout Survey 2021



Burnout is associated with detrimental effects including physical and mental conditions, increased job turnover, and medication errors



61.8% of hematology-oncology pharmacists (n=550) reported high levels of burnout in 2020

Check for updates

STATE OF CANCER CARE IN AMERICA ReCAP Full-length article is available online at [ascopubs.org](https://ascopubs.org)

original contributions

## Evaluation of Burnout in a National Sample of Hematology-Oncology Pharmacists

Allison P. Golbach, PharmD<sup>1</sup>; Kristen B. McCullough, PharmD<sup>2</sup>; Scott A. Soefje, PharmD, MBA<sup>2</sup>; Kristin C. Mara, MS<sup>2</sup>; Tait D. Shanafelt, MD<sup>4</sup>; and Julianna A. Merten, PharmD<sup>2</sup>

**QUESTION ASKED:** What is the prevalence of burnout among hematology-oncology pharmacists and what factors are associated with an increased rate of burnout?

**SUMMARY ANSWER:** Of the 614 pharmacists who responded to the survey, 61.8% reported high burnout. Multivariable analysis revealed several factors associated with an increased risk of high burnout including increasing age, more hours worked per week, more administrative hours worked per week, being unaware of available wellness programs, and decreased wellness because of the COVID-19 pandemic.

**WHAT WE DID:** Between October and November 2020, members of the Hematology/Oncology Pharmacy Association were invited to complete a cross-sectional, anonymous, online survey. The survey included 58 questions composed of the Maslach Burnout Inventory, Well-Being Index, and sociodemographic and occupational factors linked with burnout.

**WHAT WE FOUND:** The majority (61.8%) of hematology-oncology pharmacists were experiencing symptoms of burnout based on their Maslach Burnout Inventory subscale scores. Pharmacists were at greater risk for experiencing burnout as they aged, worked more hours per week, spent more time on administrative hours per week, reported decreased wellness secondary to the COVID-19 pandemic, and were unaware of wellness programs available to them. Pharmacists with burnout were four times as likely to report they had made a major medication error in the past 3 months and were more likely to report an intent to leave their current position within 2 years.

**BIAS, CONFOUNDING FACTOR(S):** The survey was completed amid the global COVID-19 pandemic, which could have affected some of the findings. Additionally, responder bias should be considered since the response rate to the survey was 20.3% and there were differences in the demographics found between those who responded and the overall Hematology/Oncology Pharmacy Association membership.

**REAL-LIFE IMPLICATIONS:** Burnout is highly prevalent among hematology-oncology pharmacists and may have detrimental effects on individual pharmacists and their institutions, as well as affect patient safety. This study identified several risk factors that may be targets for burnout mitigation and prevention strategies to reduce the impact of burnout on hematology-oncology pharmacists, maintain our current workforce, and improve cancer care for patients.

**CORRESPONDING AUTHOR**  
Kristen B. McCullough, PharmD, Department of Pharmacy, Mayo Clinic Cancer Center, 200 First St SW, Rochester, MN 55905; e-mail: [mccullough.kristen@mayo.edu](mailto:mccullough.kristen@mayo.edu).

# HOPA Burnout Survey 2021

- 550/3071 HOPA members responded
  - 65% (357/550) Direct Patient Care
  - 47.9% (262/547) Hospital or inpatient
  - 55.2% (302/547) Ambulatory clinic
  - 18.7% (102/546) Hematology
  - 23.4% (128/546) Oncology
  - 68.8% (372/541) BCOP Certification
- Level of burnout was associated with an increased risk that a pharmacist would leave their position within the next 2 years

**TABLE A1.** Baseline Demographics of Survey Participants and HOPA Membership

Characteristic	HOPA (N = 3,071)	Responders (N = 550)	P
Age, years, mean (SD)	40.7 (11.0)	37.7 (9.8)	.42
Years in practice, No. (%)	N = 190	N = 544	.092
0-2	34 (17.9)	110 (20.2)	
3-5	37 (19.5)	138 (25.4)	
5-10	39 (20.5)	120 (22.1)	
≥ 10	80 (42.1)	176 (32.4)	

# HOPA Burnout Survey 2021

- Several risk factors were identified for burnout
  - Increasing age
  - Working hours
  - Admin hours
- Survey results led to a HOPA collaboration with consultants to develop and create well-being initiatives and the HOPA Wellness and Burnout Task Force

**TABLE 2.** Multivariable Analysis of Factors Associated With Burnout

Variable	OR (95% CI)	P
Are concerned they made a major medication error in the past 3 months (yes v no)	4.07 (2.25 to 7.35)	< .001
With respect to programs to improve your wellness		
I know how to access a wellness program	Reference	
I have accessed a wellness program	1.11 (0.70 to 1.76)	.67
I am not aware of any wellness programs	2.40 (1.46 to 3.96)	< .001

# Poll #4 Question

**I am feeling burned out**

- Yes
- No

## Poll #5 Question

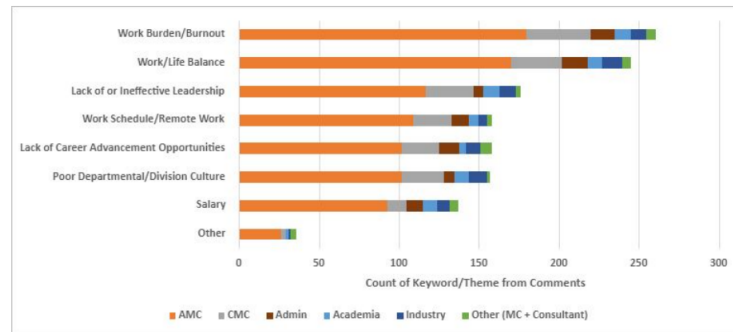
**I use resources from \_\_\_\_ to learn about well-being in pharmacy (check all that apply):**

- ASHP
- APhA
- My organization
- Other

# Oncology Pharmacy Workforce Survey 2021

- Of 573 respondents
  - 78% were satisfied or very satisfied in their current role
  - 60% indicated that they were either actively considering or open to alternate careers

## Results: Reasons for Attrition Risk



Top reasons for attrition risk varied amongst work environments

No sector cited pay as the primary reason for attrition

Burnout and balance prevailed as top contributors



*"We need...better working hours working in a respectful culture, adequate resources for administrative tasks, managers that work clinically to see what is happening"*

MC = managed care

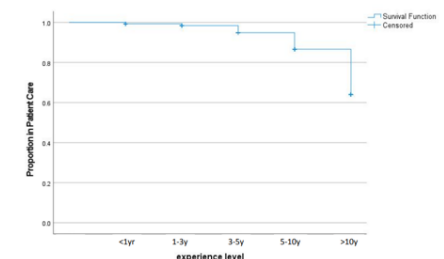
35

	Satisfaction	Attrition
Patient Care vs. Non-Patient Care	P=0.02	P=0.026
% Dedication to Patient care	P=0.006	P=0.097
Environment	P=0.48	P=0.045

## Plotting the Survival of Oncology Clinical Pharmacists

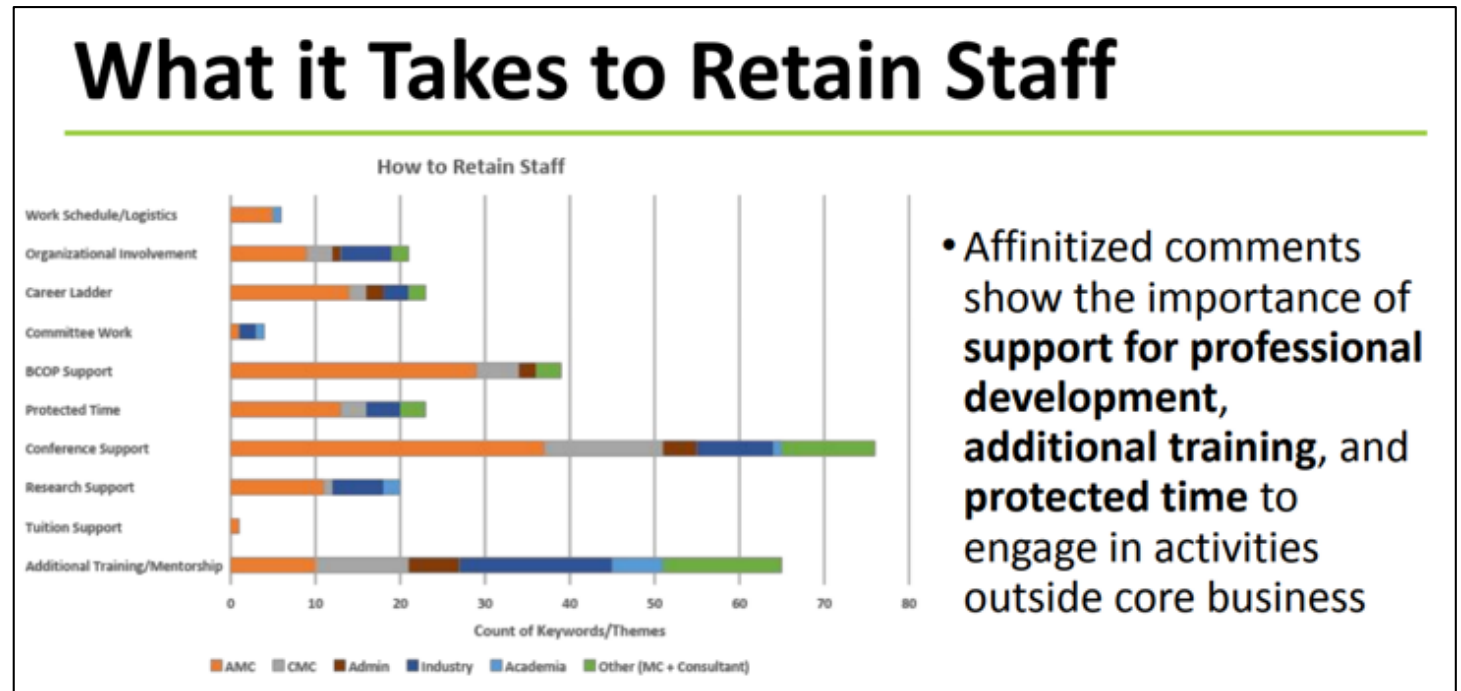
• Mapping the trend shows that

- Risk begins to emerge at 3 years
- Picks up steam at 5 years
- Falls off the cliff at 10 years



# Oncology Pharmacy Workforce Survey 2021

We need to **Advocate**, **Recognize** and **Support** our pharmacists from an institutional and organizational level to engage and retain the workforce



# Wellness and Burnout Task Force

Chair: Jeryl Villadolid, PharmD, BCPS, BCOP

Vice Chair: Kate Reichert, PharmD, BCPPS

Board Liaison: Heidi Finnes, PharmD, BCOP, FHOPA



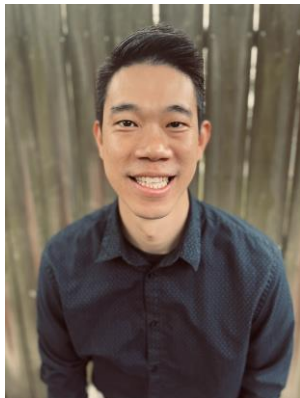
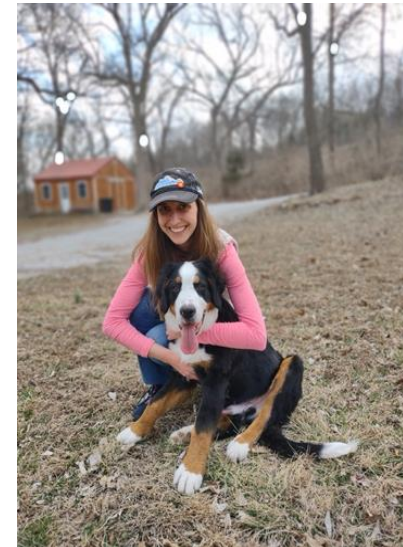
# Wellness and Burnout Task Force Members

Member	Pharmacy Practice	Key Roles
Anna Brown, PharmD, BCOP	Humana	Practice Management Workgroup Lead
Laura Darland, PharmD, BCOP	University of Kansas Medical Center	Community Oncology
Heidi Finnes, PharmD, BCOP, FHOA	Mayo Clinic	HOPA President
Allison Golbach, PharmD, BCOP, BCPS	University of Kansas Medical Center	Burnout and Wellness Discussion Preceptor (within institution)
Derek Gyori, PharmD	VA Ann Arbor Health System	ASHP New Practitioner Pharmacists Leadership Development Grant: Evaluation of Burnout Among Pharmacy Residents in the United States
Nicole Lubcke, PharmD, BCOP	UW Health	Toolkit Workgroup Lead
Lauren McBride, PharmD, BCOP	FDA	
Kate Reichert, PharmD, BCPPS	Memorial Sloan Kettering Cancer Center	Work Life Balance Task Group Member PGY2 Pediatric Oncology Residency Program Coordinator
Carissa Treptow, PharmD, BCOP	University of Rochester Medical Center	Pharmacy Resident Well-being Chair (within institution)
Jeryl Villadolid, PharmD, BCOP, BCPS	Bristol Myers Squibb	BMS Wellbeing Champion MSL-CO National Wellness Point
Laura Whited, PharmD, BCOP	Incyte	MSL-TX
Bethany Withycombe, PharmD, BCOP	Moffit Cancer Center	Wellness Champion (within institution) ASHP Well-Being Ambassador
Jason Yeh, PharmD, BCOP	MD Anderson Cancer Center	Collaborations Workgroup Lead PGY2 Oncology Residency Director

HOPA Staff	Role
Anne Krolkowski, CAE	Executive Director
Michelle Sieg	Director of Communications
Rosanne Stelpflug, MS, CAE	Director of Administration, Staff Liaison
Nicole Watts, PharmD, BCOP	Director of Strategic Partnerships
Allison Winkler	Administrative Manager

Collaborative Representatives	Organization
Anthony Cirincione, PharmD, BCOP	NCODA
Evelyn Handel, PharmD, BCOP, BCPS Jennifer Jupp, BSPHarm, BCOP	ISOPP
Ryan Shaw, PharmD	ASTCT
Zahra Mahmoudjafari, PharmD, BCOP, DPLA	ATOPP
TBD	ACCP

# Wellness and Burnout Task Force Members





# Task Force Charges

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Create a statement to members acknowledging feelings of burnout and HOPA's commitment to bettering the well-being of our members

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Evaluate well-being and resilience topics and framework to be integrated within HOPA committees and programs

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Develop and implement wellness communication campaigns and recognition of wellness champions

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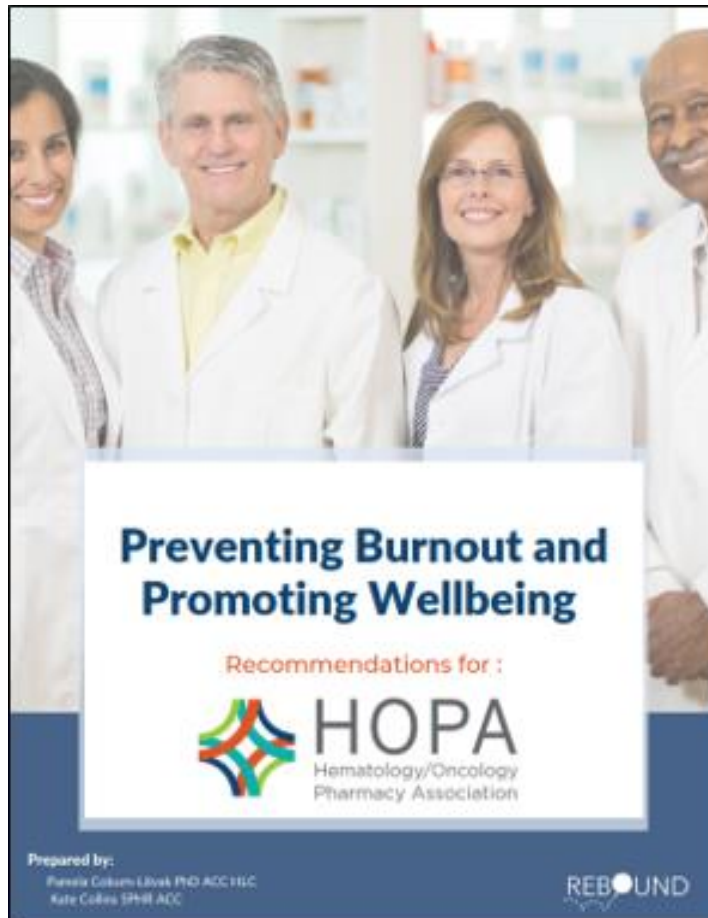
Build and disseminate toolkits to HOPA members with practical, easy to use tools to mitigate and approach burnout in membership

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Identify and collaborate with other hematology/oncology pharmacy organizations to identify key metrics associated with reducing workload and job demand, improve work-life integration, and allow for social support and community amongst hematology oncology pharmacists

# Recommendations for HOPA

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After completing an extensive literature review and interviews of the HOPA Board members, we offer the following recommendations for consideration:



**Create statements**



**Integrate into existing work**



**Create communication campaigns**



**Develop new programs**



**Build toolkits**

# Reasons for Burnout

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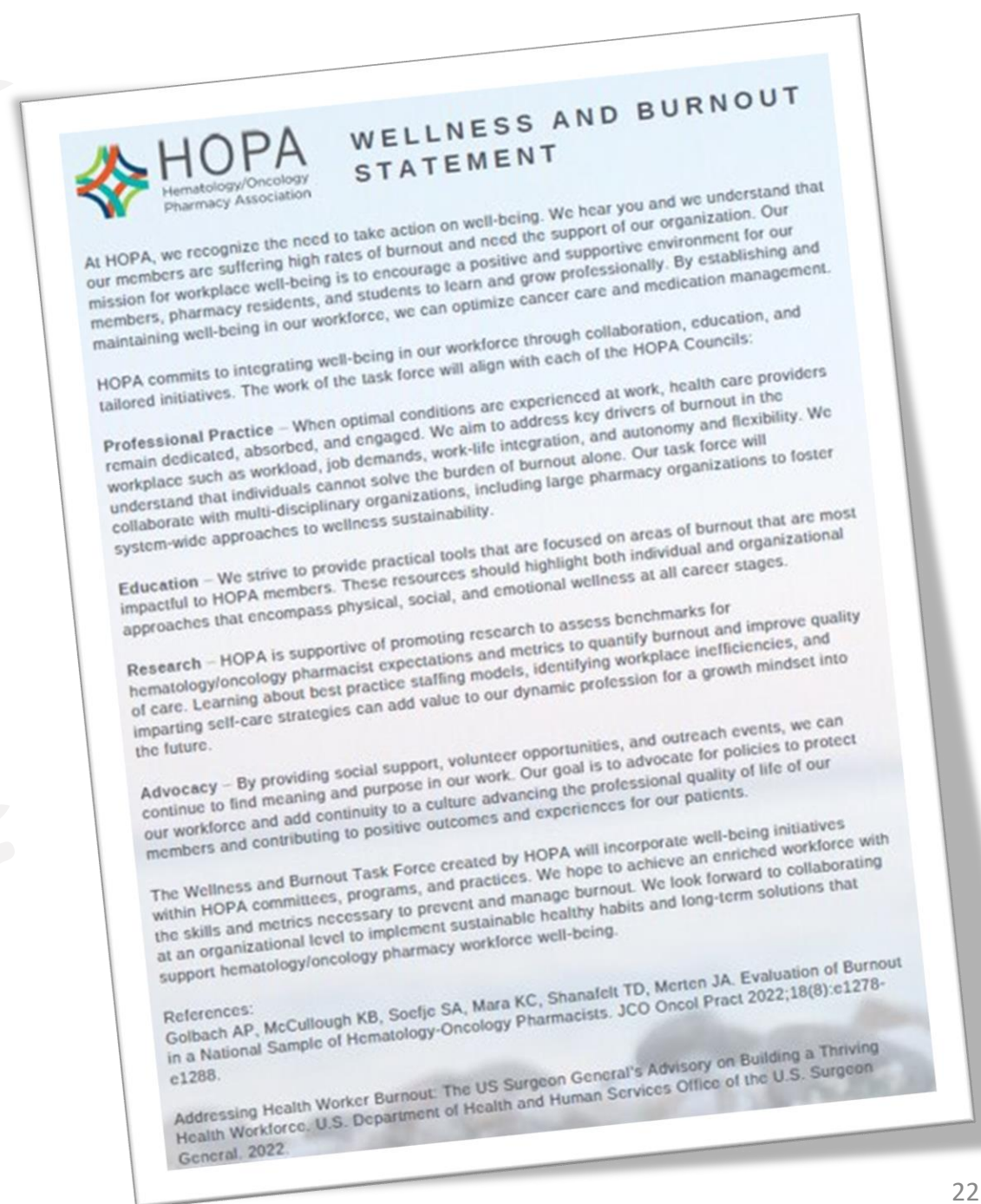
These core areas were identified by consultants to be the top reasons for burnout.

## **POLL #6 QUESTION**

Which area do you feel should be our top priority?

# HOPA Well-Being Statement

This statement from the task force is to acknowledge the critical need and commitment from HOPA to mitigate risk factors of burnout and support well-being initiatives with interventions aimed at individual wellness and organizational efforts to optimize cancer care.







# Task Force Workgroups



Practice Management



Collaborations

ISOPP Symposium



Toolkit



Campaign

Wellness recognition  
Activities around the  
Annual Conference



# Projects on the Horizon

## Well-Being for HOPA Members web page

- *Well-Being Statement Press Release*
- *Statement posted to web page*
- *Infographic*

## Wellness Toolkit

## Wellness Roadmap

## Collaborations White Paper



# Toolkit Ideas

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Resources  
based on  
stage of  
career

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Residency

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Early Career

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Established Career

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Leadership/Management

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Real-Time Wellness Forum

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# Toolkit Ideas

## ORGANIZATIONAL TOOLKIT to fight HOPA Member Burnout

### Create an overview including:

- HOPA's statement on wellbeing
- Relevant research statistics specific to HOPA membership
- Why you are providing this toolkit; purpose of toolkit

*\*Each tool on the following pages should include a brief description, any needed instructions for use and a template or tool.*

#### 1. Root Cause Analysis Tool

Perform a root cause analysis by department to ensure custom and targeted solutions for burnout. Look at key metrics including:

- turnover
- engagement scores
- promotion rates
- absenteeism
- disability/leave data
- exit interviews
- key production scores
- quality and safety metrics, etc.

#### 2. Staffing Model & Budget Review Support

Redesign budget and staffing models using organizational design principles:

- Build in time off, sick days, training/continuing education, project work hours, etc. into the FTE equation
- Create new roles to manage more tactical administrative duties (if done well, this can help create more of a career ladder in the profession)
- Role clarity exercises
- Plan to work with lower income for 2-4 years to accommodate the staffing and technology needed; diversify income streams

#### 3. Work Norms Plan

Develop organizational norms for:

- Personal time, breaks, and vacations
- Email and other communication outside of work hours
- Email-free and meeting-free days
- Family leaves

#### 4. Outlines for Wellbeing & Leadership programs

- Develop or outsource wellness programs for physical, mental and social well-being

#### 5. Communication Planning Templates

Create an integrated well-being communication plan:

- Focusing on positivity
- Awareness and direction to well-being resources
- Highlighting examples
- two-way communication and gathering regular input on decisions from employees at all levels

#### 6. Peer Support Program Template

## Related Resources

### Data Gathering

- [Qualtrics](#)
- [SurveySparrow](#)
- [Truvelop](#)

### Consulting/Customized Support

- [McKinsey](#)
- [Accenture](#)
- [Advisory Board](#)
- Independent Consultants, e.g. Rebound (see [Appendix C](#))

### AMA StepsForward Modules for Organizational Well-being

- [Saving Time Playbook](#)
- [Creating the Organizational Foundation for Joy in Medicine](#)

### Ready-made Training & Tools for Well-being

- [FREE well-being programs \(see \[Appendix D\]\(#\)\)](#)
- [PAID well-being programs \(see \[Appendix D\]\(#\)\)](#)
- Customized support, e.g. Rebound program from Brightpoint/Litvak Executive Solutions (see [Appendix C](#))

### AMA StepsForward Modules for Peer Support

- [Peer Support for Physicians](#)
- [Physician Suicide & Support](#)

## INDIVIDUAL TOOLKIT to fight HOPA Member Burnout

### Create an overview including:

- HOPA's statement on wellbeing
- Relevant research statistics specific to HOPA membership
- Why you are providing this toolkit; purpose of toolkit

*\*Each tool on the following pages should include a brief description, any needed instructions for use and a template or tool.*

#### 1. Personal Retention Plan

Create a personal retention/stay plan and discuss it with your leadership:

- Your passion/purpose statement (why are you a H/O Pharmacist?)
- List 3-5 areas that you feel are driving you toward burnout
- Discuss with your leadership and agree to an action plan with S.M.A.R.T. steps (decrease hours per week by x; plans for redistributing, delaying, or removing work from your load, etc.)
- Stick to the plan (it WILL feel uncomfortable at first)
- Re-evaluate your engagement in your work and your feelings of stress and burnout monthly

#### 2. Physical Wellness Plan

Create a physical wellness plan that includes:

- Personal policy regarding communication (e.g., email) and working outside of work hours and
- S.M.A.R.T. goals for self-care (nutrition, rest, exercise, time management, etc.)
- Put vacations and other leaves on your calendar
- Anticipate challenges to the plan & how to deal with them
- Identify and reach out to accountability partners

#### 3. Social Wellness Plan

Create a social wellness plan that includes:

- S.M.A.R.T. goals for strengthening professional and personal relationships (e.g., networking, courses, mentoring, etc.)
- Put steps for each goal on your calendar

#### 4. Professional Development Plan

Create a social wellness plan that includes:

- Your passion/purpose statement
- S.M.A.R.T. goals for professional development over next 12 months
- Identify mentors and coaches to support you

#### 5. Mental Wellness Plan

Self-assess your mental health right now. Then, create a mental wellness plan with S.M.A.R.T. goals that use research-based strategies such as:

- Gratitude exercises (e.g. gratitude journal)
- Positive psychology [9]
- Growth mindset
- Thought reframing
- Self-compassion
- Mindfulness

## Related Resources

### Assessments for Burnout/Well-being:

- [FREE Professional Quality of Life Measure](#) (Compassion fatigue, secondary trauma, burnout)
- [PAID Well-being Index](#)
- [PAID Maslach Burnout Inventory](#)

### Ready-made Training & Tools for Well-being

- American College of Physicians: [Individual Physician Wellness and Burnout Tools](#)
- FREE well-being programs (see [Appendix D](#); Duke University resources may be especially useful for mental wellness plan)
- PAID well-being programs (see [Appendix D](#))
- Customized support, e.g. Rebound program from Brightpoint/Litvak Executive Solutions (see [Appendix C](#))

### AMA StepsForward Modules for Well-being

- [Physician Well-being](#)
- [Resident and Fellow Burnout](#)
- [What to look for in your first or next practice](#)



## Poll #7 Question

**What percentage of our Toolkit would you like to see for personal well-being vs. organizational tools?**

# Example Practice Ideas

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## Personal

Utilizing tech tips to increase work efficiencies

Sharing/celebrating wins

Gratitude

Journaling

Meditation

## Organizational

Innovative practice models

Quiet Time/Digital Detox

Shorter default meeting times

App support (Calm, Headspace)

Funds for optimizing workspace

Pet therapy

Wellness Leave

# Useful Links for Implementation

Well-Being Index	<a href="#">Well-Being Index</a>
	<a href="#">Pharmacy Department Well-Being Programs</a>
Cost of Burnout	<a href="#">Organizational Cost of Physician Burnout</a>
	<a href="#">The Business Case for Investing in Physician Well-Being</a>
	<a href="#">Nine Organizational Strategies to Promote Engagement and Reduce Burnout</a>
Workforce Stay Interview	<a href="#">ASHP Sample Workforce Stay Interview</a>
Career Coaching	<a href="#">IPhO Coaching   Industry Pharmacists Organization</a>
Dedicated staff	<a href="#">Baptist Health First in Nation to Add Clinical Wellness Pharmacists to Staff</a>

## Poll #8 Question

**What other hematology/oncology organizations are you involved with (check all that apply)?**

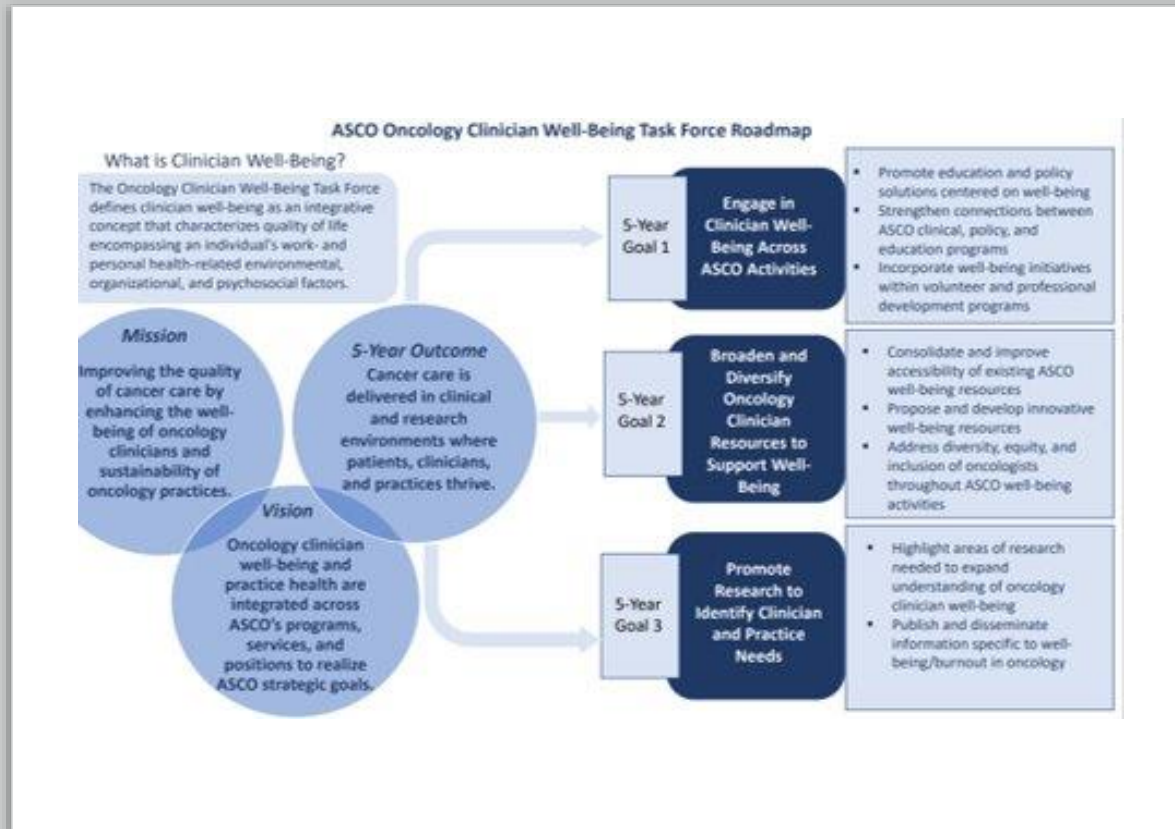
- ISOPP
- NCODA
- ASTCT
- ATOPP



# Example Road Maps

Hlubocky FJ, et al. JCO Oncol Pract 2020;16(4):191-199.

Collins K and Coburn-Litvak P. Preventing Burnout and Promoting Wellbeing. Recommendations for: HOPA. Rebound 2021.





Questions?



# Resources

[ASCO - Recognizing Burnout & Promoting Well-Being](#)

[ASCO Resilience Skills Training Program](#)

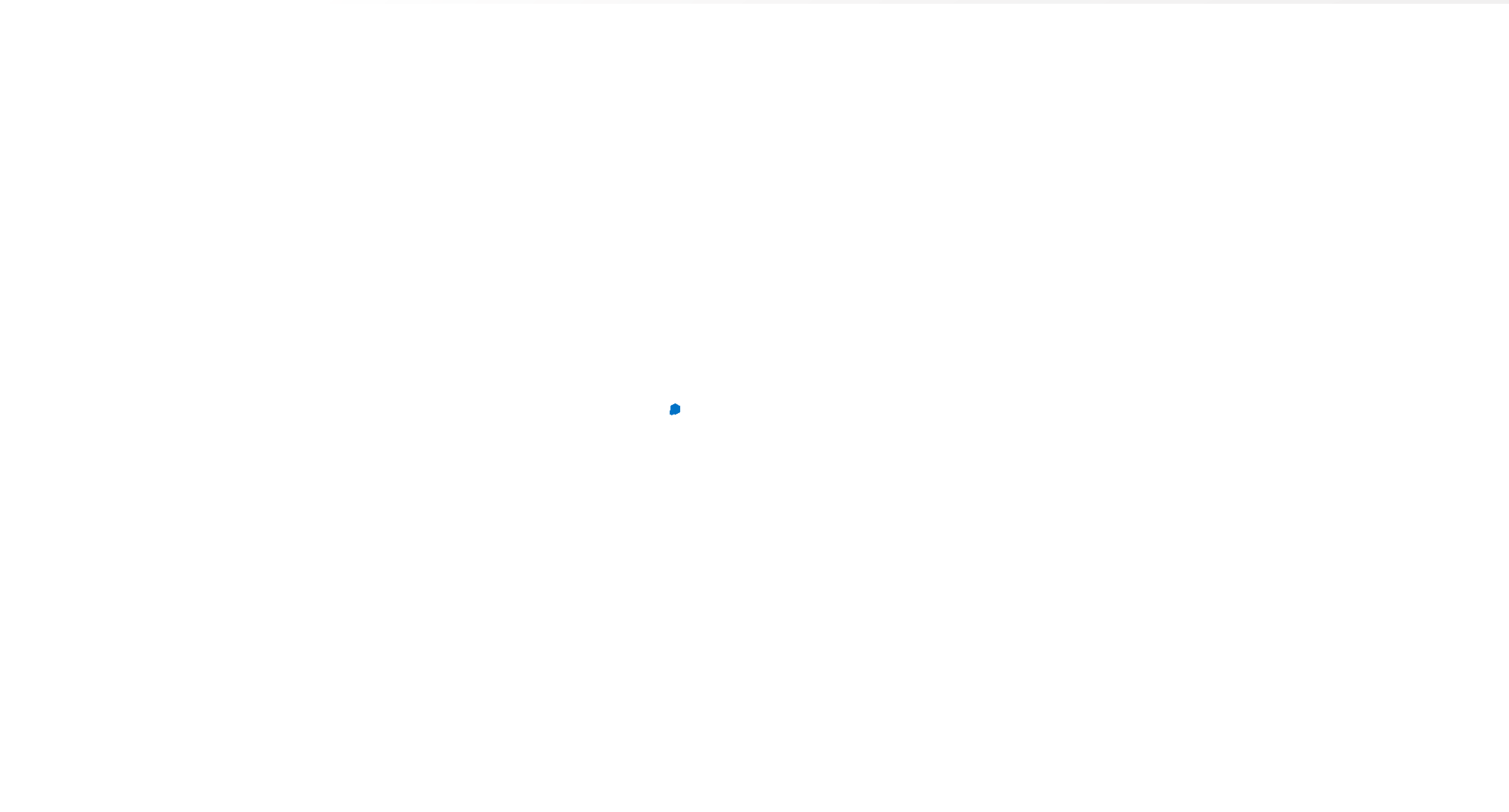
[APhA - Well-Being Resilience Report](#)

[ASHP - Well-Being Resources](#)

[AMA - How to Address Physician Burnout and Well-Being](#)

[ACP - Individual Physician Wellness and Burnout Tools](#)

[NAM - Clinician Well-Being Knowledge Hub](#)





A close-up photograph of a textured, light-colored surface, likely sand. A dark, smooth, oval-shaped object is positioned in the upper right quadrant. A white circular overlay is located in the lower right quadrant, containing the text "Thank You!" and a horizontal line.

Thank You!

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