Toxic Positivity: An Anecdote for Pharmacy

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Speaker Conflicts

• None to declare.



Learning Objectives

Pharmacists:

- 1. Recognize the difference between toxic positivity and optimism.
- 2. Identify options to improve workplace culture to reduce employee's compassion fatigue and/or moral distress.
- 3. Outline the updates included in COEPA 2022 update and how that may affect the expectations of graduates entering the workforce.



Learning Objectives

Pharmacy Technicians:

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Let's compare:

Optimism⁽²⁾:

: a doctrine that this world is the best possible world;

: an inclination to put the most favorable construction upon actions and events or to anticipate the best possible outcome.

Toxic Positivity⁽³⁾: a critical term for the practice of promoting or attempting to maintain a positive mindset or attitude regardless of what circumstances and emotions are being experienced.



The nuance comes from higher-ups and administrative **expectations**:

- Mental health professionals and psychologists believe optimism is great for mental health – when it is 'self-inspired.' (4)
- Comment: I suppose the majority to all of use went into healthcare because of our optimism that we could help our patients after our education and training.
- Example: You're fully staffed, with an appropriate census, clinically manageable patients with zero drug shortages and competent colleagues in every department <hold for laughs>



Continuing with that example:

- Example: You're fully staffed, with an appropriate census, clinically manageable patients with zero drug shortages and competent colleagues in every department ... but...
 - But you are going through a physical diagnosis that is stressful.
 - Your spouse or partner are taking care of an ailing elderly parent and not available at home.
 - A child is dealing with a frustrating situation that is distressing to them.
- Are you still expected to come in and be optimistic every hour of your 8-10-12 hour shift?
- And now let's go back and assume some (or none!) of the above working conditions above are true - - and administration says you received negative feedback on a patient survey, and they would like to meet with you to discuss a performance improvement plan.



#Pizzaisnotworking; a campaign that addresses toxic positivity

Angry Customers, More Work and Longer Hours Strain Pharmacists

Pharmacists and technicians, who have played a critical role in administering Covid-19 tests and vaccines, say they are burned out nearly two years into the pandemic. (5)

People on social media have aired their concerns under the hashtag "PizzaIsNotWorking." Bled Tanoe, 35, an Oklahoma City pharmacist who left Walgreens in August to work at a hospital, started the campaign to underscore the strain that pharmacists and technicians were feeling. Dr. Tanoe now is pressing pharmacies to increase pay and provide more support to staff.



Back to administrative expectations:

Here are the results of the first informal poll delivered through LinkedIn over a period of a week last month:

"I'm researching Toxic Positivity: the assumption one should only have a positive mindset or positive vibes, despite any personal struggles."

37 votes

Option 1: This always happens at work = 27%

Option 2: This sometimes happens at work = 51%

Option 3: This rarely happens at work = 22%



Back to administrative expectations:

Here are the results of the second informal poll delivered through LinkedIn over a period of a week last month:

"If you deal with toxic positivity at work, who most commonly deploys this attitude?"

38 votes

Option 1: Management or administration = 71%

Option 2: Colleagues in a similar role = 24%

Option 3: Support staff = 5%



Compassion Fatigue and Moral Distress

- 1) "Compassion fatigue (CF) is stress resulting from exposure to a traumatized individual. CF has been described as the convergence of secondary traumatic stress (STS) and cumulative burnout (BO), a state of physical and mental exhaustion caused by a depleted ability to cope with one's everyday environment." (6)
- 2) "The concept of moral distress (MD) was introduced to nursing by Jameton who defined MD as arising, 'when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action'." (7)



What is the rate of burnout in pharmacists?

Quantifying the rate of burnout can help leadership understand the impact of toxic positivity on their collective workforce.

"Burnout prevalence data were extracted from 19 articles involving 11,306 pharmacist participants across eight countries. More than half (51%) of pharmacists were experiencing burnout. Associated risk factors included:

- longer working hours
- younger age/less professional experience
- high patient and prescription volumes
- excessive workload and poor work/life balance

The COVID-19 pandemic has negatively impacted pharmacist burnout and resilience. Involvement in education and training and access to burnout management resources were associated with lower rates of burnout, but burnout intervention effectiveness is unknown. (8)"



Impact of BO, CF and MD:

1) Burn-out (BO)

- Likely to leave the profession completely which leads staff shortages relating to compromising quality of care and increased rate of medication errors⁽⁷⁾
- "Burnout, resource shortages, and high risk for severe COVID-19 infections have unevenly impacted women and health care workers of color. This is due to preexisting inequities around social determinants of health, exacerbated by the pandemic." (8)

2) Compassion Fatigue (CF)

- ASHP reports "Exhaustion, compromised immunity, sleep disturbances, anger, absenteeism, avoidance, impaired clinical decision-making, increased use of alcohol and drugs, cynicism, depersonalization, and a feeling of helplessness are some of the signs and symptoms of compassion fatigue." (9)
- 3) Impact of Moral Distress (MD)
- American Hospital Association reports an estimated shortage of up to 3.2 million healthcare workers by 2026. (11)



Morley G, Ives J, Bradbury-Jones C, Irvine F. *Nurs Ethics*. 2019. Dee J, Dhuhaibawi N, Hayden JC. *Int J Clin Pharm*. 2023. Health and Human Services. 2024. NPR. 2024.

No easy answers, but here are a few starters:

- Addressing Social Determinants of Health (SDOH) "System improvements are needed to better support doctors and nurses, to ensure adequate staffing, well-functioning teams that include social workers and behavioral health counselors, and user-friendly electronic health records." (10) to address moral distress. (11)
- Addressing staffing shortages from BO/MD/CF: "Equitable, scalable and accessible education and training." (11)
- Implement evidence-based policies to address BO: (8)
 - Listen to your frontline staff and involve them in workflow processes.
 - Build in paid leave, sick time, family leave and rest breaks.
 - Zero-tolerance policy for workplace violence, bias, racism and discrimination.



Think - Pair - Share

- What is one step you could take to address BO/CF/MD at your institution?
- Take 5 minutes to brainstorm and share with your tablemates.
- Have any of your colleagues already implemented projects to address acute issues at your institution?
 - Can you connect with them via email and they can share more details so you don't have to reproduce it on your own?
- Share one sentence idea of a potential solution to Word Cloud





< Insert Poll Everywhere Word Cloud option here >

"American hustle culture is dying. Millennials are willing to take a 20% pay cut for a better work-life balance." (1)

About 60% of surveyed American millennials said they would take a 20% pay cut "to achieve a lifestyle that prioritizes my quality of life," which is 5% more than the global average.

US millennials were the most willing among their generational cohorts. Just 33% of Baby Boomers were willing to take that salary cut, while 43% of Gen X and 56% of Gen Z agreed.



The future of employee expectations

- AACP Curriculum Outcomes and Entrustable Professional Activities (COEPA) 2022 (13)
 - The most recent update is the 5th version of the Center for the Advancement of Pharmacy Education (CAPE) educational outcomes (EO.)
 - EO's are descriptions of what the learner should be able to perform at the end of the program.
 - EPA's initially came out with the new curricular standards in 2016. It took the research from CAPE and translated the guidance into practice activities.
 - Preceptors: EPA's are activities you should observe in experiential education.



The future of employee expectations continued...

- AACP Curriculum Outcomes and Entrustable Professional Activities (COEPA) 2022 (13)
 - The document notes the changes in pharmacists' scope of practice to meet the needs of patients during the COVID-19 pandemic along with renewed awareness to meet needs in health equity, cultural awareness and strives towards social justice.
 - It also emphasizes increased advocacy on behalf of pharmacists for patients and the profession.
 - Highlights the importance of expansion of teamwork skills.



This is not a deep dive into COEPA, but let's highlight a few items (13):

- Students will be evaluated on how well they advocate and address SDOH and will be predicted to prioritize these issues.
- As we reviewed, lack of resources to address SDOH leads to moral distress.

2.3	Cultural and Structural	Mitigate health disparities ²⁹ by considering, recognizing, and navigating ³⁰ cultural and structural factors ^{28,31} (e.g. social determinants of health ³² , diversity, equity, inclusion, and accessibility) to
	Humility ^{27,28}	improve access and health outcomes.

Additional COEPA items of note (13):

- Recent graduates may want management to address advocacy efforts and thus may encourage their employers to get involved.
- Little or no acknowledgement from leadership of awareness of legislative issues may create a culture of perceived apathy.

2.5	Advocacy ³⁸⁻⁴⁰	Advocate	Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.
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Additional COEPA items of note (13):

- Students now take multiple courses in leadership and EQ = emotional intelligence.
- Graduates may want to engage in developing culture improvements in the workplace:
 - Offer stress reduction exercises such as mindfulness meditation and yoga
 - Staff want to feel supported by leadership and colleagues
 - They want to feel part of a team

3 Attitudes	3.1	Self-awareness	Self-aware	Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, 48,49 skills, abilities, beliefs, biases, motivation, help-seeking strategies, 50 and emotional intelligence 51 that could enhance or limit growth, development, & professional identity formation. 12-14
Attitudes	3.2	Professionalism ⁵²	Professional	Exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society. ⁹

Thank you for attending, participating and considering a better workplace for everyone.



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