

“Hard work never killed anyone”

Pharmacist’s perceptions about workload

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Outline of presentation

- Why the issue is important
- Definitions:
 - Workload, overload, (underload)
- Evidence from CPWS studies about workload:
 - Sources of overload
 - Consequences
 - Moderators
- Other evidence about workload
- Problems with the research
- Recommendations

Workload

“...it is the amount of work assigned to or expected from a worker in a specified time period”

“...the perceived relationship between the amount of mental processing capability or resources and the amount required by the task”

Work overload

“...the degree to which employees, in the course of their job, have to deal with too high work demands, which force them to make use of reserve capacities”

“...having too much to do, in too little time, at too high a pace, with too few resources”

Why is it important?

- Nationally, work-related ill-health is a big problem for individuals:
 - 2.1 million people suffered from an illness they believed was caused or made worse by their work
 - 34 million days were lost overall
 - 13.5 million lost to work-related stress, anxiety or depression
 - 442,000 individuals believed they were experiencing work-related stress
 - High rates among teachers, nurses, some managerial groups
 - **(high) workload contributes to this...**

Why is it important?

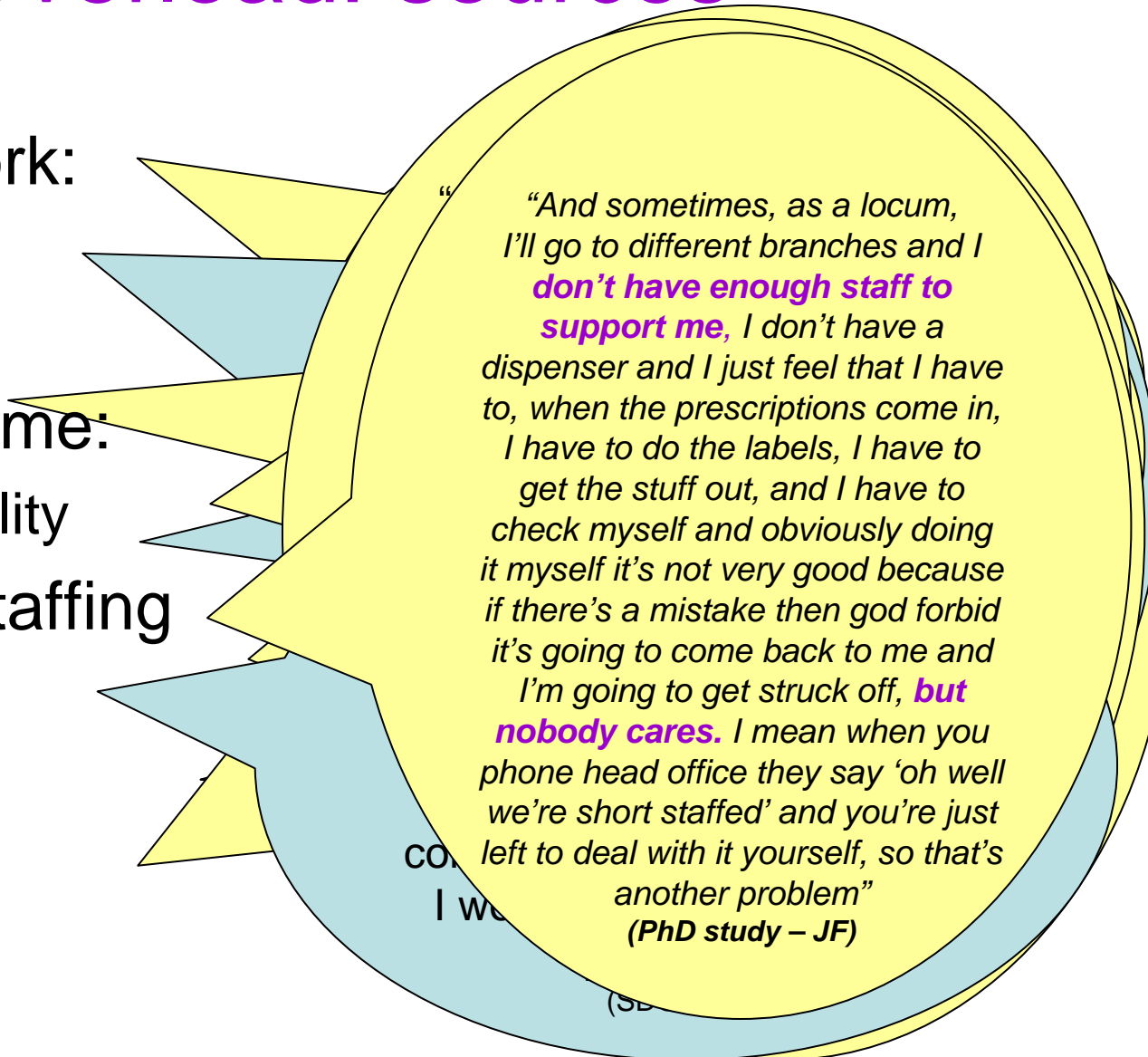
- There are organisational costs too, eg:
 - Loss of goodwill
 - A demotivated workforce
 - Loss of productivity/errors/accidents
 - Absence
 - Turnover (or exit)

Perceptions about workload: the evidence

Study	Methodology	Date
Locum study	<i>Qualitative and quantitative:</i> 2 focus groups, 34 telephone interviews and a survey of >200 locum pharmacists	2004
Work patterns of female pharmacists	<i>Qualitative:</i> 30 face to face interviews with females over 30 yrs working in community sector	2005/6
Pharmacy workforce censuses (n=4)	<i>Quantitative:</i> Job satisfaction & well-being measures, over >40,000 pharmacists	2005 & 2008
Leavers study	<i>Qualitative:</i> 12 telephone interviews with young pharmacists following 'non-traditional' career paths	2007/8
Cohort study	<i>Quantitative:</i> workload and work-life balance measures of preregistration and early career pharmacists (>500)	2007/8
SDO incentives study	<i>Qualitative:</i> 49 face to face interviews with pharmacists, all sectors	2008/9
Job satisfaction (Phd) study	<i>Qualitative:</i> 26 face to face interviews with 11 community and 15 hospital pharmacists	2008/9

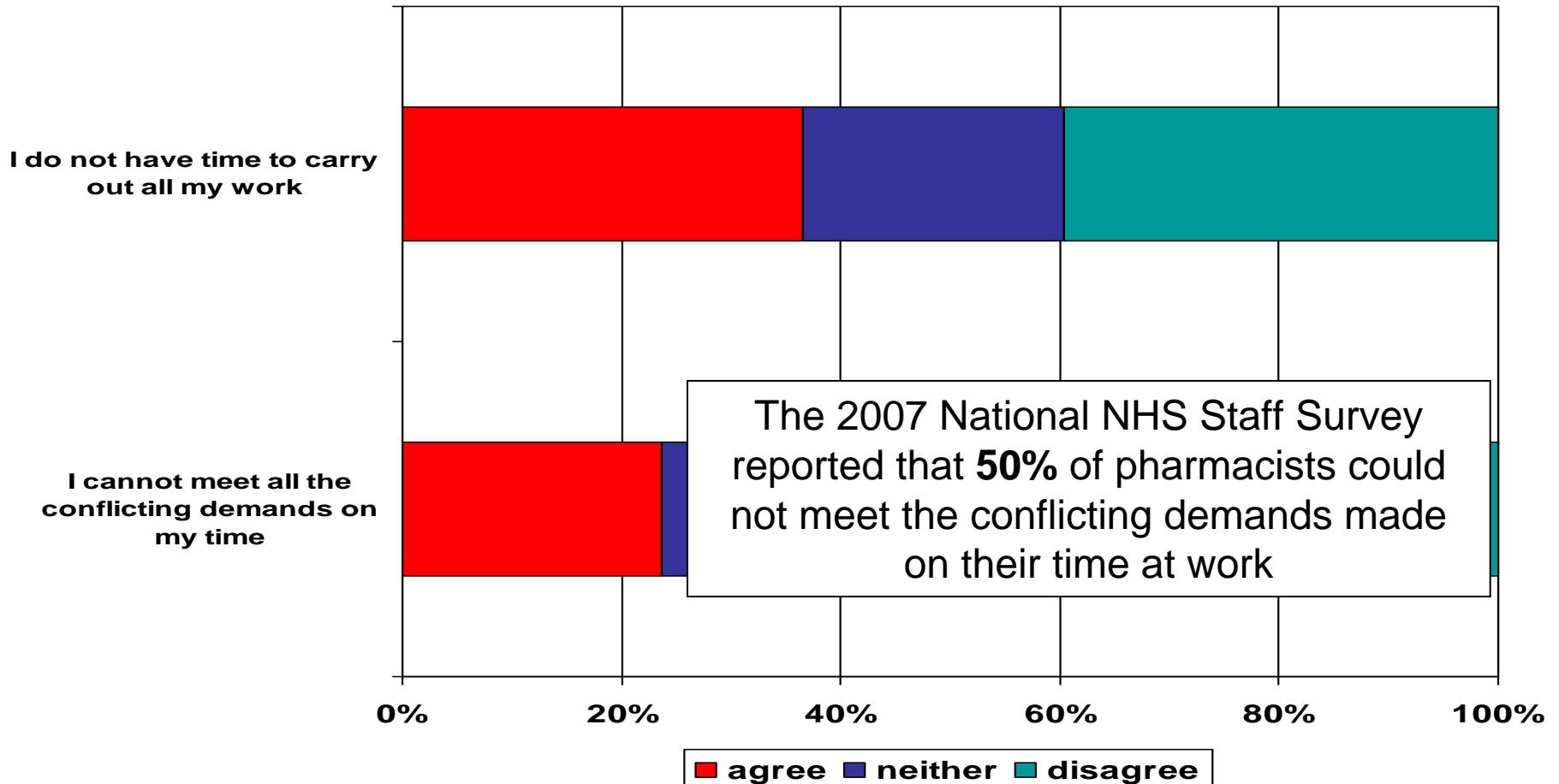
Overload: sources

- Too much work:
 - MURs
 - paperwork
- Not enough time:
 - Unpredictability
- Inadequate staffing

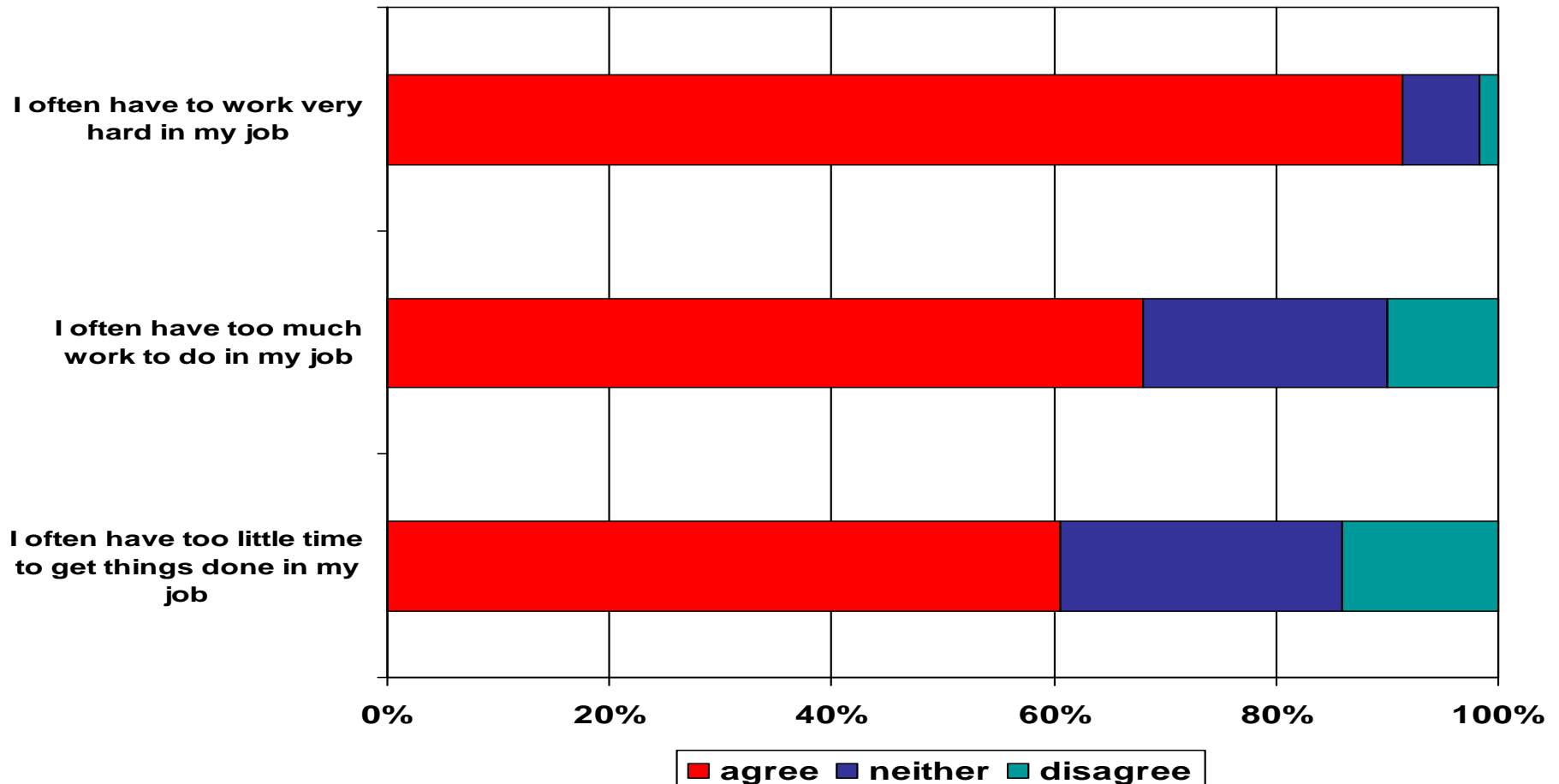


“And sometimes, as a locum, I’ll go to different branches and I **don’t have enough staff to support me**, I don’t have a dispenser and I just feel that I have to, when the prescriptions come in, I have to do the labels, I have to get the stuff out, and I have to check myself and obviously doing it myself it’s not very good because if there’s a mistake then god forbid it’s going to come back to me and I’m going to get struck off, **but nobody cares**. I mean when you phone head office they say ‘oh well we’re short staffed’ and you’re just left to deal with it yourself, so that’s another problem”
(PhD study – JF)

Quantitative findings: Pre-registration trainees and workload



Quantitative findings: Newly qualified pharmacists' workload



Quantitative findings: Locums and workload

“Can you please rate each of the following factors according to how much pressure you experience from each one in your job”.

Please circle the appropriate number for each item, where: 1 = no pressure, 5 = high pressure					
Increased demands from patients	1	2	3.34	4	5
Inappropriate demands from patients	1	2	3	4	5
Working environment	1	2	3	4	5
Disturbance of home/family life by work	1	2	3	4	5
Dividing time between work and spouse/family	1	2	3	4	5
Worrying about the finances	1	2	3	4	5
Insufficient resources	1	2	3	4	5
Insufficient time to do justice to the job	1	2	3.22	4	5
Fear of assault while at work	1	2	3	4	5
Long working hours	1	2	3	4	5
Paperwork	1	2	3	4	5
Emphasis on business ethics	1	2	3	4	5
Professional isolation	1	2	3	4	5
Workload	1	2	3.18	4	5

Consequences of too much work

- Personal:
 - Stress, pressure, dissatisfaction; anxiety, fatigue, depression, etc.
 - Affects family life
 - Distorts capacity to appraise ability
 - Inhibits learning

“..I did feel as though I was being put under more

just didn't seem time to do

“Time mostly... you don't always have a chance to look into stuff as much as you'd like to”

(Noble and Hassell 2008)

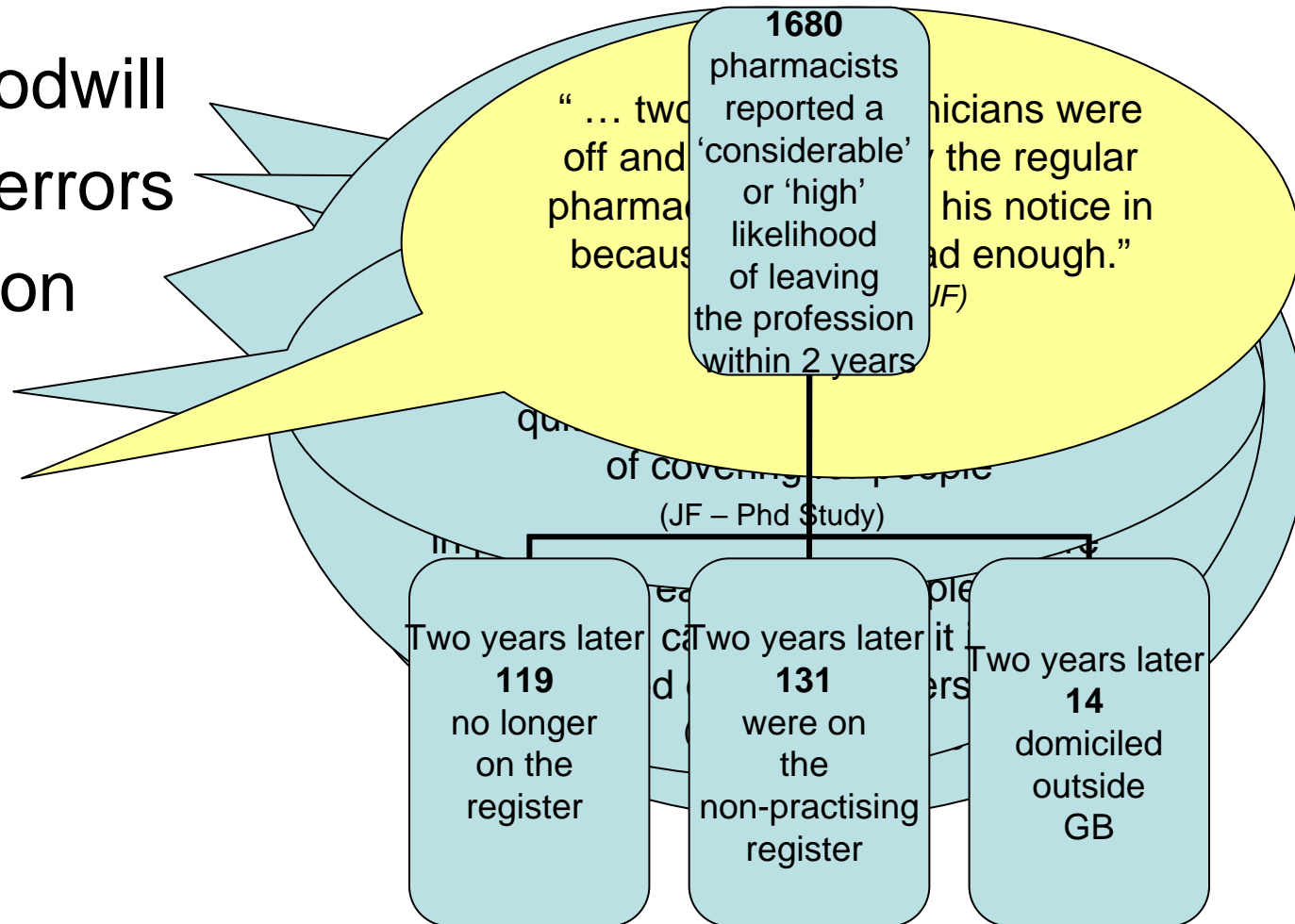
“There's no point in being the richest guy in the graveyard”

(ex owner)

(Shann and Hassell 2006)

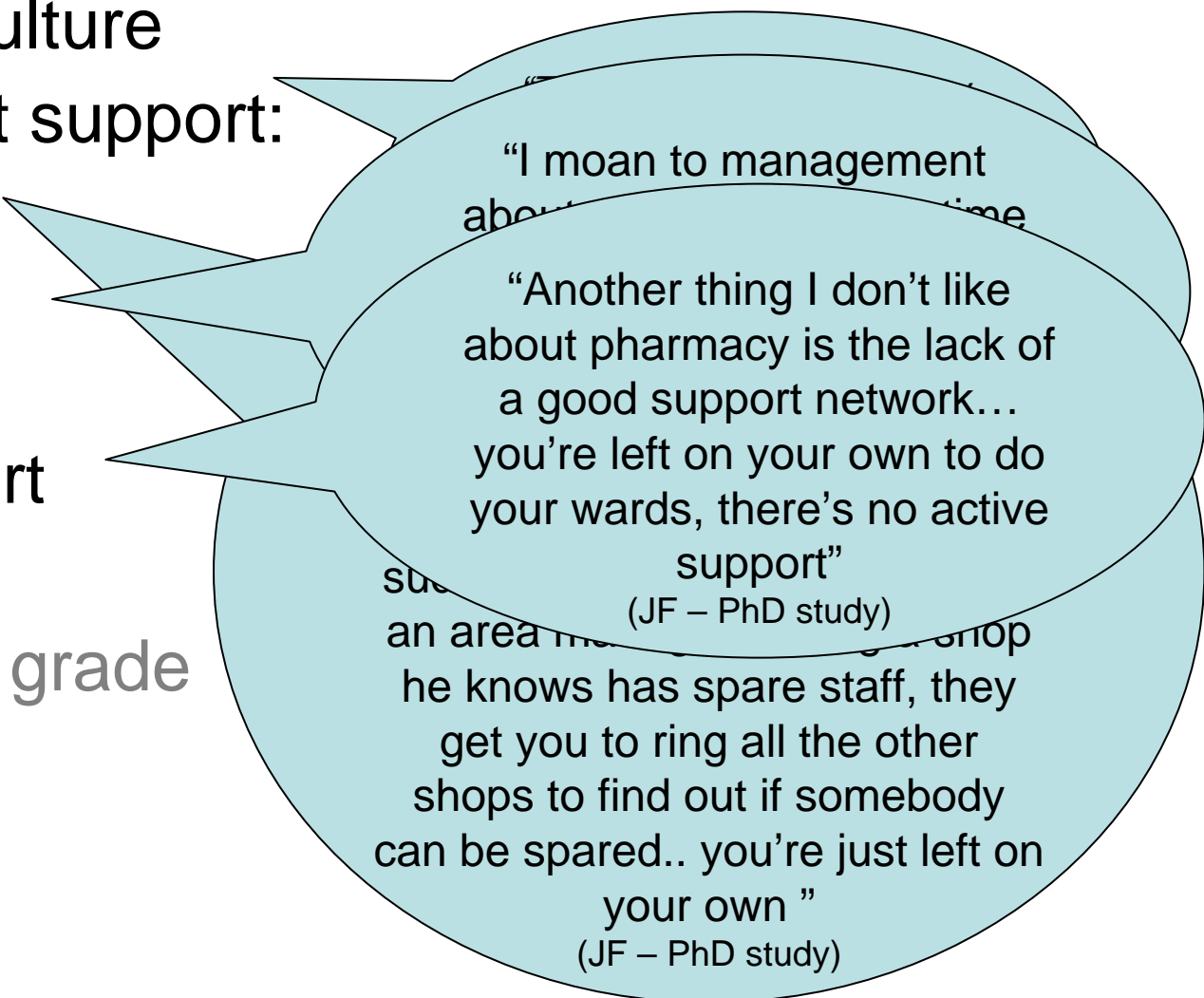
Organisational costs

- Loss of goodwill
- Accidents/errors
- Demotivation
- Absence
- Turnover
- Exit



Moderators

- Workplace culture
- Management support:
 - Instrumental
 - Informational
 - Emotional
 - appraisal
- Social support
- Personality
- Employment grade
- Gender



“I moan to management about... time

“Another thing I don't like about pharmacy is the lack of a good support network... you're left on your own to do your wards, there's no active support”

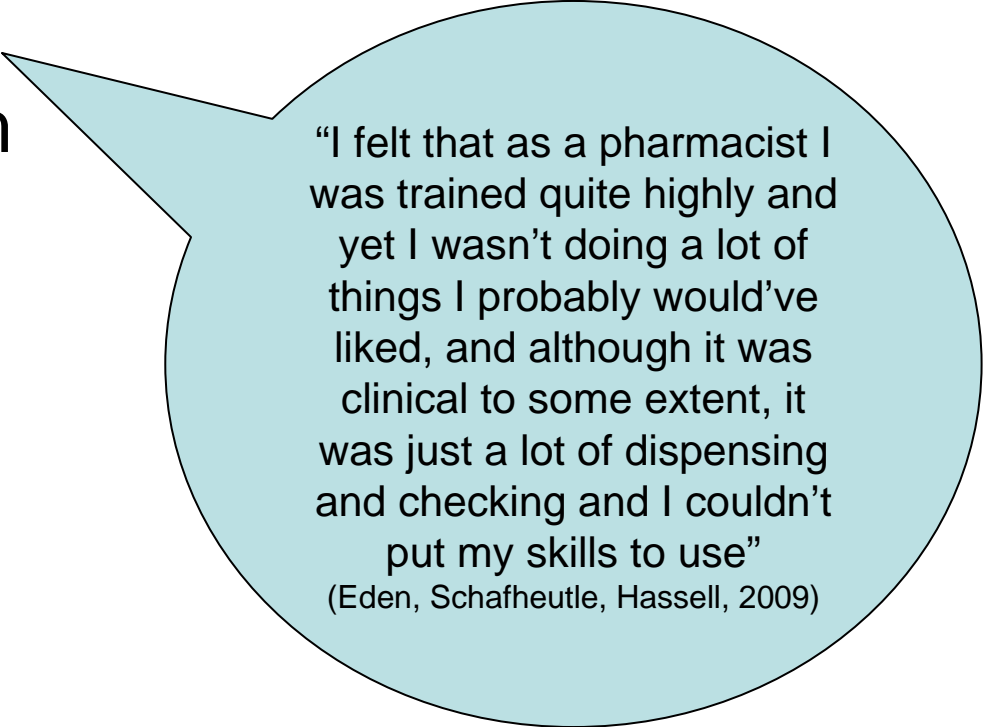
(JF – PhD study)

...an area... shop he knows has spare staff, they get you to ring all the other shops to find out if somebody can be spared.. you're just left on your own ”

(JF – PhD study)

A word about 'underload'

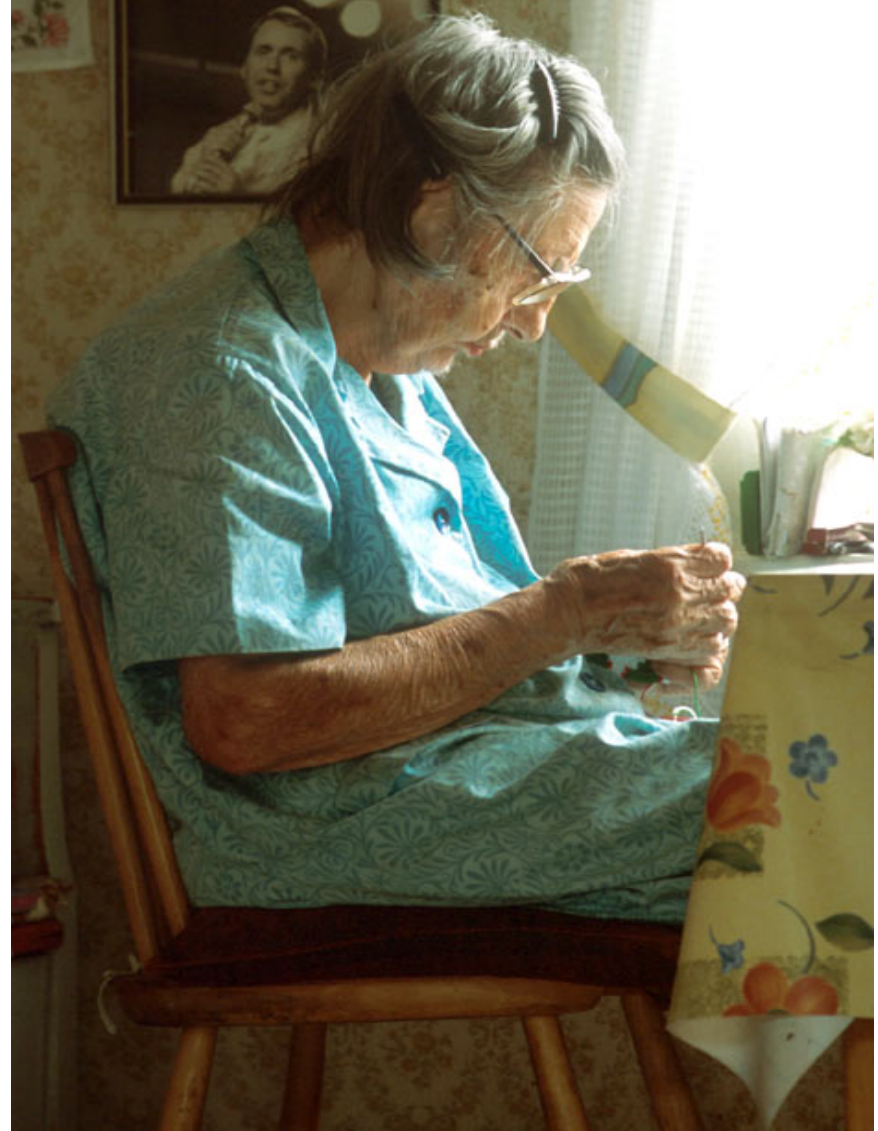
- Can be just as important a problem in terms of its consequences:
 - Under-utilisation of clinical skills
 - Mundane nature of dispensing



"I felt that as a pharmacist I was trained quite highly and yet I wasn't doing a lot of things I probably would've liked, and although it was clinical to some extent, it was just a lot of dispensing and checking and I couldn't put my skills to use"
(Eden, Schafheutle, Hassell, 2009)

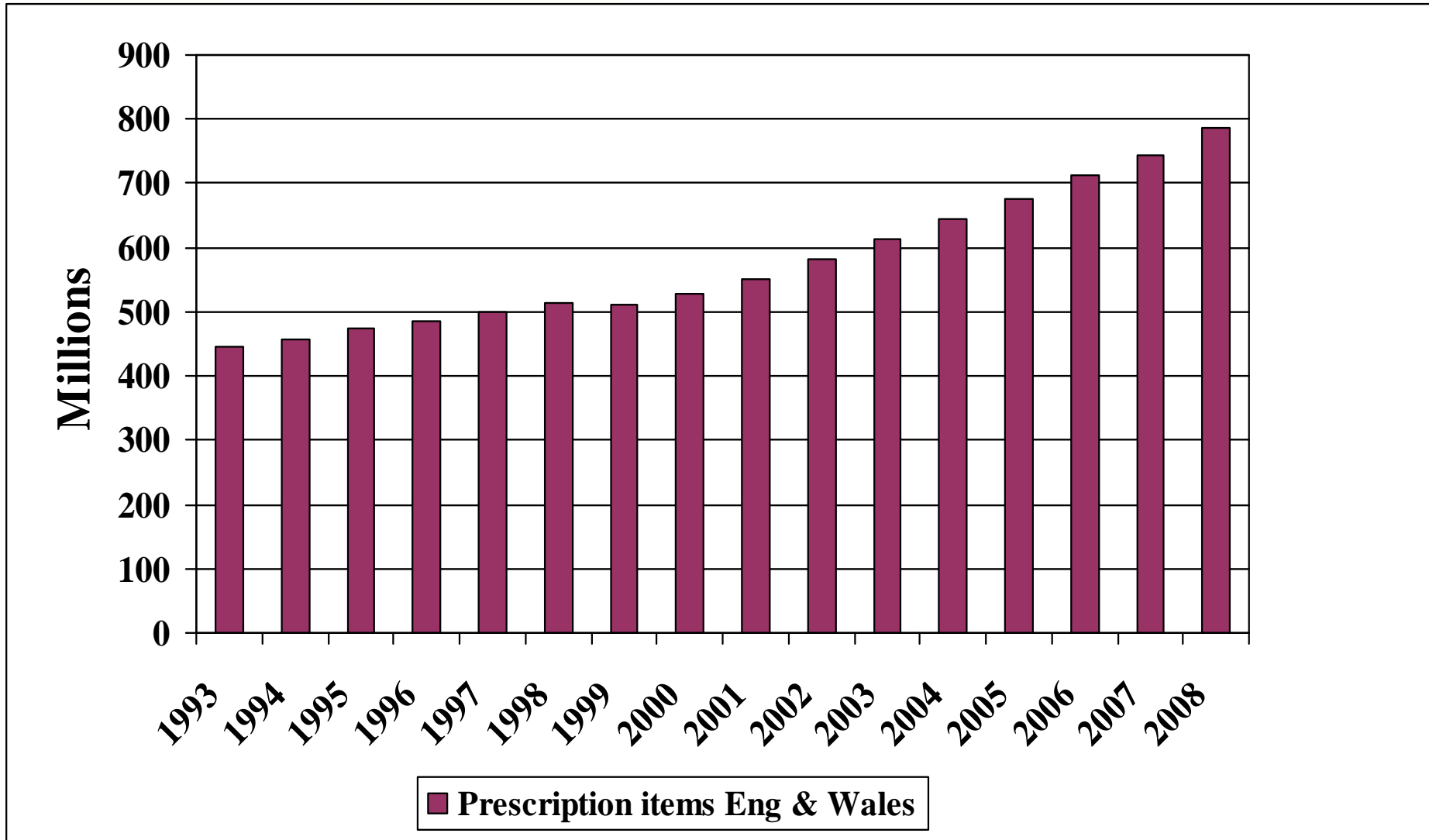
Other evidence for increased workload?

The aging population

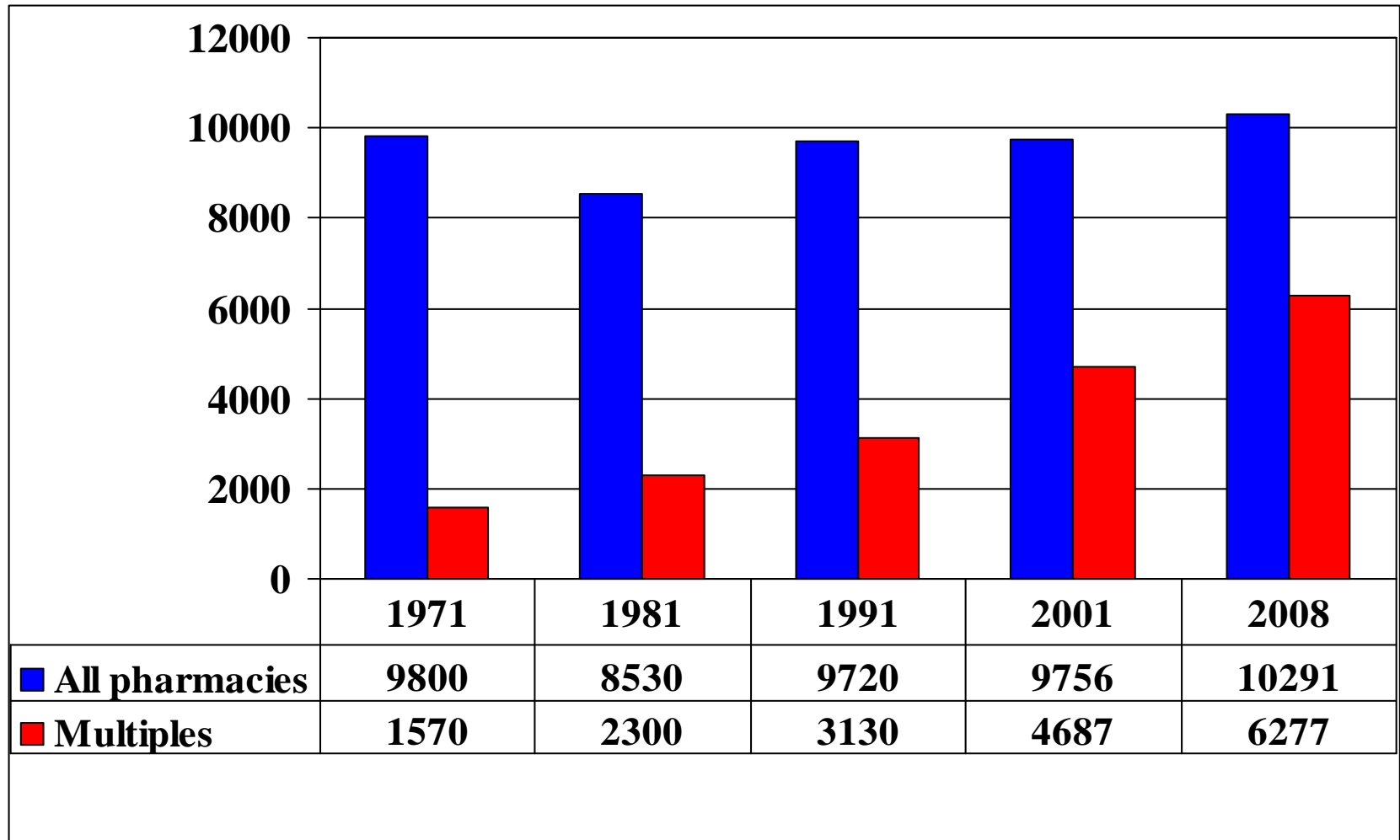


There are more pensioners than under-16s for the first time

Prescription volume

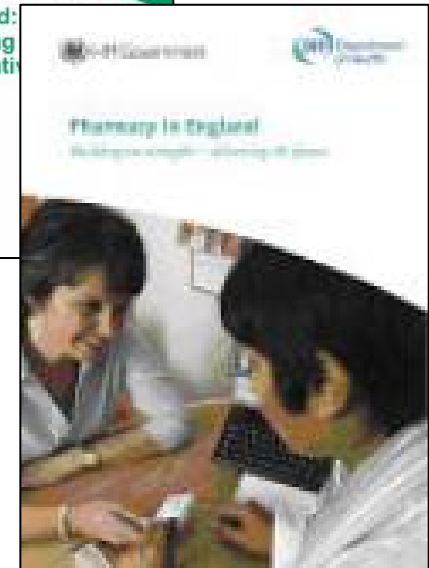


Organisational changes

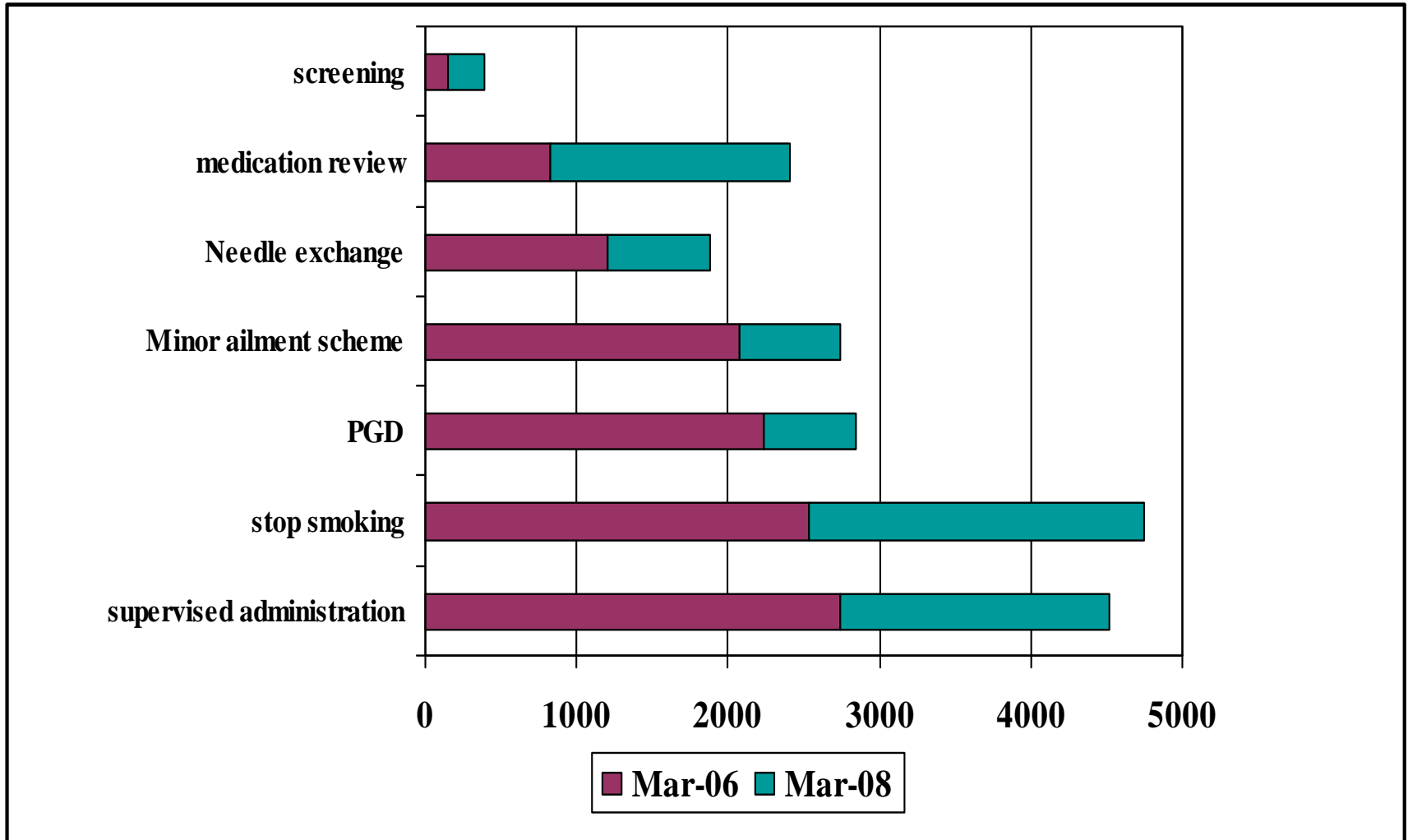


Policy

- **Pharmacy Contractual Framework (2005)**
 - Essential services
 - Advanced services
 - Enhanced services



Additional services



Workload measurement

- Problematic...
- Different methods of capturing workload
- What is amenable to data collection
- Different studies conceptualise pharmacy 'work' differently
- Important aspects of pharmacy 'work' change over time

In summary

- Based on perceptions workload *is* increasing:
 - Biased accounts?
 - Small studies
- Other evidence also suggests workload is increasing
- Strong evidence that work overload causes stress, job dissatisfaction, etc.

So what needs to be done?

- Reality check:
 - Validate ‘perceptions’
 - Use in conjunction with other measures of workload
 - Weaknesses of past research need to be understood
 - More complex studies required
- More UK evidence about the link to patient safety and quality of care is needed
- Find effective stress intervention strategies