

February 16, 2023

Chairpersons Perry, Bailey, and members of the Health Coverage, Insurance, and Financial Services Committee, thank you for allowing this bill to be discussed today.

My name is Leslie M. Ohmart III. I am a resident of Brewer, Maine and a registered pharmacist with 42 years of experience.

I would like to thank Rep. O'Connell for presenting LD 275 to the legislature.

In late 2019 I officially resigned my position with my last place of employment and retired from the practice of pharmacy. Initially, my intent was to remain working until age 70 but the changes I had seen in the profession over the last ten years, and probably further back, convinced me that continued employment would be injurious to my health both physically and mentally.

Shortly after my retirement I had several candid conversations with colleagues and it became clear that I was not alone. During these encounters I heard repeatedly about the sufferings of pharmacists and their staff as a result of the business practices of their employers. I heard stories about working long hours completely alone in a pharmacy, ever increasing expectations (quotas) from management on prescriptions filled or immunizations provided, ever increasing duties placed on staff to recruit business, and lack of support by management especially in Human Resources functions. Requests by these employees for additional staff and/or reduced hours went unanswered or ignored. Instead they were offered platitudes and free pizza. It would be easy to blame this on the current economic conditions resulting from the COVID-19 epidemic but these problems started long before the virus emerged.

A continuing theme was their fear of being burned out and thus becoming a danger to their patients. The common feeling was that they were being pushed so hard to achieve financial targets from management that the services they were supposed to be providing, either legally and morally, to patients were being short changed or even entirely ignored. Another common subject in these conversations was the fear of speaking up to management or the Maine Board of Pharmacy in an effort to find a solution. Being an "at will employment" state and the surplus of pharmacists, my colleagues felt that they were at risk for termination with no means of remediation. Thus their burnout was in fact Moral Injury, a form of PTSD, resulting from their being pushed to practice in such a manner that they broached their moral integrity and professional covenant to their patients with no collective means of solving the problem.

These conversations led me to conduct my own research into this issue. I found that this was a nationwide phenomenon and had been addressed by the Boards of Pharmacy in several states. (1-6) There were also several articles discussing this problem reported in various publications. (8-34) This is not an unknown problem. It is well known, established and being addressed by national organizations. (7) In social media pharmacists are sharing their frustration and taking steps to have their voices heard. (35, 36)

The NABP passed resolution 117-4-21 Task Force on Workplace Safety and Well-Being (37) I am requesting that the Maine Board of Pharmacy create a group to research this issue and to create regulations to protect the public from harm. In the creation of this study group, it is paramount that any testimony provided by individual pharmacists or pharmacy techs be shielded

from retaliation by employers by ironclad protections. In doing so it is my opinion that the Board is fulfilling its directive to protect the citizens of Maine from harm resulting from errors made by overworked and Morally Injured pharmacy staff.

The problems facing pharmacists regarding stress and Moral Injury have been studied, reported on, and discussed on many levels for many years. At least 12 other states have addressed this issue either through their Boards of Pharmacy, state Pharmacy Associations, or Legislatures. The National Alliance of State Pharmacy Association (NASPA) and the American Pharmacists Association (APhA) developed the Pharmacy Workplace and Well-being Reporting (PWWR) tool for pharmacists to allow a safe space for pharmacy personnel to submit positive and negative experiences in a confidential manner in October 2021. Since then several reports of the compiled experiences have been published and paint a picture of a profession in crisis.

The Maine Board of Pharmacy (MEBOP) sent two delegates to the 118th annual meeting of the National Association of Boards of Pharmacy District 1 and 2 in Newport, RI on October 5-7, 2022. In the minutes of the Maine Board of Pharmacy meeting, the experiences of those delegates were reported and no mention was made of the panel discussion, Well-being: A Prescription for Solutions Panel Discussion moderated by Virginia LeMay, PhD. (38) Clearly, the MEBOP is aware of the issue but, has done nothing and, in remarks made by their representative to Rep. Kevin O'Connell, they do not see it as their responsibility. I find this view disingenuous as their Statement of Purpose (39) states "The Board of Pharmacy was established to protect the public through the regulation of Pharmacies and pharmacists in Maine." It further states that "The Board also investigates complaints against licensees and takes appropriate disciplinary actions."

Thus, the Board licenses the pharmacies whose policies have at least partially resulted in the stress and Moral Injury pharmacy staff experience.

The Maine Pharmacy Association (MPA) has recognized and addressed this issue. They have attempted to gather information by urging participation in the PWWR but, as they state on their Facebook page, "We know pharmacists are feeling more stress and facing real burnout during COVID-19. The Pharmacist Well-Being Index, provided by APhA, tool is a free 9-question survey based upon validated research conducted by the Mayo Clinic. The purpose is to provide an estimate of your current well-being level and provide useful resources. Maine's participation in the survey has traditionally been too small to be evaluated in all areas." My contention is that the MEBOP could, through their authority over licensed pharmacists in Maine, urge participation by communicating with all licensees and use that data to create a study group and find solutions.

Sincerely,

Leslie M. Ohmart III, RPh.
73 Sunset Strip
Brewer, ME 04412
Tel: 207-951-0721
Email: ohmalee@aol.com

Footnotes

1. [2020 Pharmacist Workload Survey.pdf \(ohio.gov\)](#)
2. [Collaborative Pharmaceutical Task Force Report 10 11 2019.pdf \(idfpr.com\)](#)
3. [WorkingConditions\(FINAL\).pdf \(mo.gov\)](#)
4. [Working Conditions Survey Results.pdf \(oregonlive.com\)](#)
5. [Pharmacist Survey Results \(vermont.gov\)](#)
6. [SB 1442 - California Senate \(20172018\) - Open States](#)
7. [Pharmacy Organizations Launch Confidential Portal for Pharmacy Personnel to Report Their Experiences in the Workplace \(pharmacist.com\)](#)
8. [‘I’m terrified’: Maine pharmacists struggle under growing workload - Lewiston Sun Journal](#)
9. [As COVID pressures rise, pharmacists suffer burnout | Crain's Chicago Business](#)
10. [Chicago Acts to Address Pharmacist Workload and Patient Safety \(pharmacytimes.com\)](#)
11. <https://www.nytimes.com/2020/01/31/health/pharmacists-medication-errors.html>
12. [Overworked and Understaffed Pharmacists Place Patients at Risk - Salvi, Schostok & Pritchard P.C. \(salvilaw.com\)](#)
13. [Overworked, understaffed: Pharmacists say industry in crisis puts patient safety at risk \(nbcnews.com\)](#)
14. [Pharmacist Burnout and Stress \(uspharmacist.com\)](#)
15. [Pharmacist Workload.pdf \(nhpharmacists.net\)](#)
16. [Survey by Ohio regulator shows stress, fatigue among pharmacists at chain stores \(nbcnews.com\)](#)
17. [Understaffing at some CVS pharmacies in Virginia has put patients at risk, former employees say - Virginia Mercury](#)
18. [Understaffing Leads to Mistakes, Burnout in the Pharmacy \(pharmacytimes.com\)](#)
19. [When Medicine Makes You Sick: Rising Levels of Stress Found Among Pharmacists \(pharmapodhq.com\)](#)
20. [Workload of pharmacists and the performance of pharmacy services \(plos.org\)](#)
21. [‘Stressful Across the Board’: Pharmacists Contend With Omicron Surge, Increased Demand – NBC Connecticut](#)
22. [Facing Long Hours and Exhaustion, Pharmacists Ask for Help, Resources | CoverMyMeds](#)
23. [Pharmacists feel the stress as pressure on industry grows \(themaine.com\)](#)
24. [Feeling the pressure: Pharmacies face many challenges amid COVID-19 pandemic | Indiana News | tribstar.com](#)
25. [Front-line fatigue: Pharmacists hit with overwhelming workload, shortages and sometimes an angry public | KSL.com](#)
26. [How Chaos at Chain Pharmacies Is Putting Patients at Risk - The New York Times \(nytimes.com\)](#)
27. [The latest worker shortage may affect your health: Pharmacies don't have enough staff to keep up with prescriptions \(nbcnews.com\)](#)
28. [Pharmacist error rate rises as workload climbs \(drugtopics.com\)](#)
29. [Pharmacists' Workloads Earn Attention of Legislators \(medscape.com\)](#)
30. [Pharmacists face pandemic burnout, too \(bostonherald.com\)](#)
31. [pharmacistworkload-errorsstudy.pdf \(ncbop.org\)](#)
32. [Burnout & Resiliency | Iowa Pharmacy Association \(iarx.org\)](#)
33. [Pharmacy Technician Burnout: Address the Causes, Increase Retention | Ultimate Medical Academy](#)
34. [Pharmacy | Free Full-Text | Pharmacy Workplace Wellbeing and Resilience: Themes Identified from a Hermeneutic Phenomenological Analysis with Future Recommendations \(mdpi.com\)](#)
35. [Facebook Pharmacy Staff for COVID-19 Support](#)
36. [#PizzalsNotWorking campaign calls for greater support for overworked pharmacists \(beckershospitalreview.com\)](#)
37. [Task Force on Workplace Safety and Well-Being \(Resolution 117-4-21\) - National Association of Boards of Pharmacy \(nabp.pharmacy\)](#)
38. [Microsoft Word - Draft Minutes November 3, 2022.doc \(maine.gov\)](#)
39. [Board of Pharmacy | Office of Professional and Occupational Regulation \(maine.gov\)](#)

My Survey

Questions

1. I am expected to perform too many duties in addition to safely filling prescriptions.

Strongly Agree	74%
Agree	16.9%
Neutral, Disagree, Strongly Disagree	9.1%

2. I frequently leave work feeling mental or physical tension or strain from the pressures of my job.

Strongly Agree	77.9%
Agree	13%
Neutral, Disagree, Strongly Disagree	9.1%

3. Staffing is adequate to cover the workload.

Strongly Disagree	54.5%
Disagree	32.5%
Neutral, Agree, Strongly Agree	13%

4. I am given the support I need in order to meet business targets or quotas.

Strongly Disagree	53.2%
Disagree	31.2%
Neutral, Agree, Strongly Agree	15.6%

5. The amount of overtime I work is having a negative effect on my personal life.

Strongly Agree	37.7%
Agree	29.9%
Neutral	19.5%
Disagree	9.1%
Strongly Disagree	3.8%

6. Management seems more concerned with the amount of work that is performed than the stress the workload causes staff.

Strongly Disagree	62.3%
Disagree	20.8%
Neutral, Agree, Strongly Agree	16.9%

7. I am treated professionally by my supervisor.

Strongly Agree	18.2%
Agree	29.9%
Neutral	19.5%
Disagree	13%
Strongly Disagree	19.5%

8. I am treated professionally by upper management.

Strongly Agree	9.1%
Agree	23.4%
Neutral	19.5%
Disagree	22.1%
Strongly Disagree	26%

9. I am paid satisfactorily for the work that I do.	
Strongly Agree	6.4%
Agree	29.9%
Neutral	19.5%
Disagree	28.6%
Strongly Disagree	15.6%
10. I am satisfied with my job.	
Strongly Disagree	63.6%
Disagree	27.3%
Neutral, Agree, Strongly Agree	9.1%

Demographics from 77 responses

Gender	Male – 39%	Female – 51.9%	Prefer not to say – 9.1%
Age Group	<25 – 2.5%		
	26-35 – 35.1%		
	36-45 – 24.75%		
	46-55 - 19.5%		
	56-68 – 18.2%		
	>69 – 2.5%		
Years Experience	1-5 19.5%		
	6-10 20.8%		
	11-20 29.9%		
	21-40 22.1%		
	>41 7.8%		

Discussion

Questions 1 through 6 clearly demonstrate the pressure that the majority of pharmacists feel that they are under is very stressful.

- Question 1 overwhelmingly demonstrates the vulnerability respondents feel towards patient safety with 90.9% agreeing and strongly agreeing that they have too much on their plate to conduct their profession safely.
- The response to questions 2 and 5 show that they feel this stress is negatively affecting their health and home life.
- In questions 3 and 4 it can be seen that the respondents feel this stress, lack of safety, and negative effects on their health and home life are due to lack of staffing and support from management.
- Questions 7 reveals that the respondents feel their supervisors, who work more closely with them and are most likely other pharmacists who advanced through the ranks are more supportive while upper management, who are more likely to be business people are unsupportive.
- Job satisfaction is addressed by questions 9 and 10 and the responses tease out an interesting dichotomy. Clearly in the response to question 9 the issue of wages has a weak negative correlation to job dissatisfaction while in the responses to question 10 it is shown that the vast majority of respondents are not satisfied with their job.

Admittedly, 77 responses out of the survey being sent to every licensed pharmacist in Maine was underwhelming and disappointing. It represented just fewer than 2% of the workforce. In many conversations I had with colleagues, it was made clear to me that the underlying cause of this was fear. Whereas Maine is an “at will employment” state, it was expressed to me that pharmacists fear they will be harassed or outright dismissed should management ever find out they had participated in any way.