

PRECEPTOR SERIES:

Considerations Associated with Preceptor Burnout

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Professional burnout, although not a new concept, continues to be a hot topic of conversation among health care workers. While most research has been focused on burnout in physicians and nurses, more attention is being placed on this syndrome within the practice of pharmacy. A study conducted by the American Pharmacists Association (APhA) in 2010 found that more than fifty percent of pharmacists were burned out, including pharmacists across different practice settings and in various stages of their careers.¹ Increased workload and responsibilities, coupled with less support and time, are significant factors leading to pharmacist burnout.² In addition, lack of control in the workplace, as well as inconsistencies between skill sets and actual day-to-day tasks are contributing factors to burnout.^{1,2} The consequences of burned out practitioners are substantial and include feelings of indifference towards quality of work and increased medication errors, both of which can lead to decreased patient safety.³ Not often considered, is the additional energy and work associated with being a pharmacy preceptor and how mental fatigue in this role may factor into burnout overall.

Why Do Preceptors Experience Burnout?

For many pharmacy practices, students and residents are an essential part of being able to maintain an efficient workflow and provide progressive clinical services. We depend on their contributions as much as they rely on us to teach them new knowledge and skills that will prepare them for a successful future. Unfortunately, the daily demands of practicing pharmacy are increasingly high and complex, can take priority over our learners, and may overshadow our intentions and abilities to provide meaningful educational experiences. In addition, the role of pharmacy preceptor is becoming more involved. As our health care system continues to evolve, schools of pharmacy and residency training programs are forced to adjust their curriculums and expectations to meet the educational standards put in place by accrediting organizations. Learners are being evaluated on several different

requirements, all of which demand significant time and planning by preceptors to create quality activities and experiences during rotations. Evaluations for learners have also become quite lengthy, occur frequently, and take a lot of thought and effort to provide constructive feedback.

Furthermore, precepting is not a one size fits all model. Balancing multiple learners, at different levels of education and experience, and from several institutions can be overwhelming. There can be vast differences among students regarding their interpersonal skills, learning styles, baseline knowledge, professional experiences, and level of motivation, just to name a few. These differences can be challenging to juggle and often force us to adjust our precepting style to accommodate each individual learner. In addition, learners are coming into their rotations more knowledgeable than ever. They are fresh from training about the latest guidelines and the newest of therapies. As time passes and it becomes more difficult to keep up with new developments in practice, preceptors may find themselves doubting or questioning their ability to teach the next generation of pharmacists. However, we should never underestimate the value of our experiences as a professional. Some may argue that being rich in experience goes much further than being rich in knowledge. In the end, we should view these hurdles as opportunities for professional and personal growth.

How Do I know if I am Experiencing Burnout?

An objective way to determine if you are on the path to burnout is by taking a validated survey. The Maslach Burnout Inventory (MBI) has been used since the 1980s to evaluate the severity of burnout syndrome.^{3,4} There are multiple versions of the MBI, including the MBI-Human Services Survey for Medical Personnel and the MBI-Educators Survey (MBI-ES).^{3,4} Given that pharmacy preceptors are an extension of the pharmacy school curriculum and post-graduate residency training, it may be appropriate to apply the MBI-ES survey and its results to these pharmacists. The MBI asks participants to respond using a frequency rating scale (never, a few times a year or less, once

a month or less, a few times a month, once a week, a few times a week, every day) to measure emotional exhaustion, depersonalization, and sense of personal accomplishment.⁴ There is a cost associated with all of the MBI assessments, but they are generally considered to be the gold standard for measuring burnout.^{3,4} In 2017, the National Academy of Medicine launched the Action Collaborative on Clinician Well-Being and Resilience.⁵ This network of more than 180 organizations, including APhA and American Society of Health-System Pharmacists (ASHP), is working to improve awareness of and solutions for burnout for all clinicians, including doctors, nurses, pharmacists, dentists, trainees, and others.⁵ The Clinician Well-Being Knowledge Hub provides a wealth of research, resources, and tools for clinician use.⁵

How Can Preceptors Manage Burnout?

Like many things, the best solution for burnout is to prevent it from occurring in the first place. There are several things we can do as preceptors to offload some of the pressures and challenges we face, while mitigating the symptoms of burnout. Developing your own rotation syllabus can help give structure to each day and facilitate learners' activities to meet rotation requirements. Delegating responsibilities to fellow pharmacists and technician staff gets others engaged in the practice and also allows the learner to consider things from different perspectives. One of the keys to a productive rotation is open and strong communication with your learner starting from day one. Asking learners what their individual goals are can guide their rotation and make it easier to find teachable moments. Set reasonable yet challenging expectations that will align your learners' abilities within your limitations as a preceptor and a pharmacy site. Balancing the focus between offering clinical knowledge and developing life-long skills essential to being a pharmacist will provide a well-rounded experience. Learners don't have to be glued to your side all day long. Building in downtime for the learner will give you time to complete daily tasks.⁶ Finally, take advantage of learning opportunities provided through

journal articles, professional organization involvement, and continuing education or conference programming focused on preceptors and preceptor development.

Even the most motivated among us are susceptible to burnout. Priorities change, which force us to shift our time and attention to other areas in life. Preceptor burnout can influence our ability to train students effectively. Emotional detachment from precepting responsibilities may lead to setting lower goals and expectations and ultimately depriving learners of potential learning opportunities.³ Bringing this issue to light will increase our abilities to recognize burnout in ourselves or others and make interventions early. The interdependence between pharmacy sites and learners is not going away and continues to be an opportunity to advance pharmacy practice. We owe it to our students, residents, ourselves, and our profession to address preceptor burnout and take necessary action to correct it.

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References

1. Bridgeman PJ, Bridgeman MB, Barone J. Burnout syndrome among healthcare professionals. *Am J Health-Syst Pharm.* 2018;75(3):147-152.
2. Barker A. 5 external reasons pharmacists feel burned out, and what they can do about it. *Pharmacy Times.* 2018
3. El-Ibiary SY, Lee KC, Yam L. Assessment of burnout and associated risk factors among pharmacy practice faculty in the United States. *Am J Pharm Educ.* 2017;81(4):75.
4. Mind Garden: tools for positive transformation. Maslach Burnout inventory. <https://www.mindgarden.com/117-maslach-burnout-inventory>. Published May 20, 2015. Updated 2019. Accessed January 21, 2019.
5. National Academy of Medicine. Action collaborative on clinician well-being and resilience. <https://nam.edu/clinicianwellbeing/>. Published January 5, 2017. Accessed January 21, 2019.
6. Mospan CM, Olenik A. Empowering pharmacists to address burnout and resiliency. *J Am Pharm Assoc.* 2018;58(5):473-475.