



*ASHPOfficial - Pharmacy Leadership: Coaching and Leading Frontline Staff  
Transcription*

*This podcast has been planned by the ASHP Section of Pharmacy Practice Leaders' Advisory Group on Frontline Leaders.*

Speaker 1:

Welcome to the *ASHPOfficial Podcast*, your guide to issues related to medication use, public health, and the profession of pharmacy.

Sean Chantarapanont:

Thank you all for joining us today for this leadership podcast, hosted by the ASHP Section of Pharmacy Practice Leaders on coaching and leading frontline staff. Our discussion for this podcast series focuses on leadership topics within pharmacy practice, including the business of pharmacy, development of leadership skills and career transitions and more. My name is Sean Chantarapanont. I currently practice at Community Healthcare System Community Hospital in Munster, Indiana and serve as the clinical pharmacy manager and PGY1 one pharmacy residency program director. I'll be your host for today for the podcast. With me today are Amber Lucas, the pharmacy operations manager, obstetrics and neonatal specialists at Olathe Medical Center in Olathe, Kansas. She has practice interests that include leadership, employee engagement, maternal mood disorders, and neonatal medication safety. And also joining us today is Stan Kent, the chief pharmacy officer at Michigan Medicine located in Ann Arbor, Michigan. Stan's professional interests include management and leadership development, training residents and students and improvement of pharmacy services.

Sean Chantarapanont:

Stan and Amber, thanks for joining us today and let's get started talking about today's topic, which is coaching and the leading of frontline staff. The first question to kick us off is for Stan and I just wanted to ask, how do you use data to improve and engage frontline staff and employee engagement efforts?

Stan Kent:

Well, thanks John. We at the University of Michigan use the Press Ganey surveys for employee engagement and when the surveys are completed, the system itself has automatic recommended actions that a manager can take based on the survey question. And I found the data however, to be directional but not really an accurate reflection of the subjective engagement level of our department. I actually attribute this to confusion in how people interpret the survey questions and the mix of the people who complete the survey. In fact, a study was published a couple of years ago out of the University of North Carolina and they improved their



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employee engagement scores simply by teaching their staff how to take the survey. To me, that's not really what it's about. It's about actually actively engaging the staff.

Stan Kent:

I've found that the numeric ratings from these surveys, which is the data part, to really be lower than what my perception of the level of staff engagement is. What I do find useful from the surveys however, are the comments that the employee submit when they complete those surveys. We have an internal employee engagement committee in our department, and historically they focused on social events and that type of thing, but in the past year we've really changed the charter of that committee to be more focused on what employees have expressed concerns about that are disengaging activities. What we've decided to focus on for our frontline leaders, because the most important relationship an employee has is with their immediate supervisor, and we have many inexperienced frontline supervisors, so we focused on problem solving skills, accountability, making sure people follow through on what they say they will do and addressing performance or behavioral issues in a constructive and timely manner.

Stan Kent:

We're in the process of using a podcast series called *Radical Candor* and it's a book and it was written by two former managers from Google. And the emphasis of the book is demonstrating to employees that you care deeply about them while also holding them accountable. The data from our employee engagement surveys is really directional, but we do get information from them that points us in this direction.

Sean Chantarapanont:

I've heard of that *Radical Candor* podcast series before but I'll definitely need to listen to it myself because yeah, it seems like a lot of other leaders have recommended that as well. Yeah, thanks for that insightful answer. I could definitely agree with the potential misinterpretation of engagement surveys and definitely like the idea of shifting leadership's focus onto root causes for employee dissatisfaction. Definitely a unique and interesting approach.

Stan Kent:

Clearly the managers in our department, the division managers that have the highest employee engagement scores are those that have the best relationships with their employees.

Sean Chantarapanont:

All right, well thank you, Stan. Shifting gears to the next question and topic, wanted to ask a question about feedback. Specifically, what are some strategies that you've used for providing



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constructive feedback to others? And how have you coached staff to provide peer feedback to one another? Amber, what experiences have you had with this?

Amber Lucas:

Thank you, Sean. Well, I'll have to say that even in a lot of years of providing feedback, both positive and constructive, that providing constructive feedback has always been harder. I think most people find that it is challenging at times to be able to provide that maybe more negative feedback to others. You don't always know how the individuals will respond to that. What I've learned over time is probably two different strategies that I use. One of the first is to actually ask the person that I'm providing that feedback to self assess and maybe reflect themselves. For example, I will ask an individual or one of my direct reports, "Tell me what you think this process should look like?" And see if they actually even understand the expectations, to as far as how they should handle something or how they should be doing something. Or if there's just a situation that happens that I want to get their perspective of, I want them to describe it in their own word.

Amber Lucas:

The other thing that I employ when I provide this type of feedback to others is I learned not to use the word constructive or negative when I give the feedback. In the past that I have found, when I say, "I'm going to provide some constructive feedback," or, "I have some constructive thought," for whatever reason, those words, I get the reasons but those words really sometimes put people on the defensive. And even when I've heard those words, and you definitely know that your adrenaline kicks in a little bit, your heart rate goes up a little bit and it's stressful to know that someone's going to tell you something bad. I really learned that using phrases such as, "Let's talk about an opportunity for growth that's been identified," or, "let's set some goals to try to change what your process or the expectations look like."

Amber Lucas:

Because most people want to do a good job and they want to grow. And so by giving them the opportunity to see a change in their behavior or their process as a goal, then they get more invested in their own improvement. One of the things though that I find is that peers really still struggle providing other feedback though. And so we've worked a lot at Olathe Medical Center on peer feedback and we've done development sessions and educational sessions with the pharmacists, with the technicians and with our student employees, working on various strategies on how to provide peer to peer feedback. And we focus really on the use of facts and how different individuals are perceiving a situation. And we encourage communication between individuals that isn't laced with accusation or blame from one person to the other. And I'm a big believer in *Crucial Conversations*. This is something that we've gone through with our staff.



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Amber Lucas:

I do a few sessions with our residents on *Crucial Conversations*. We really use some of those strategies within that book, especially because people typically would want feedback shared with them so by using some of these *Crucial Conversation* strategies and the idea that if it was you, you would want to know, you would want that information shared with you, so please provide that information to others as well. Plus it gives them a little bit more accountability, which is one of the things we've been talking about in making sure that things are working towards something better and both individuals become accountable in that situation.

Sean Chantarapanont:

Thanks for those strategies, Amber. I can definitely take those with me to my workplace and ensuring that staff understand expectations and then also in helping to ensure that staff don't get defensive when they receive feedback. Definitely good points taken there. I want to now talk about how we identify potential strengths in frontline staff and determine what to delegate in alignment with their skillsets. Stan, do you want to take this one?

Stan Kent:

Sure. When you talk about delegation, again it's similar to what Amber said about talking to staff about constructive feedback. When you tell someone you want to delegate something to them, it has sort of a similar connotation. I don't really use that terminology and I actually don't think about it that way. I'm much more about engaging people in decision making because when you do that, they have a lot more ownership of whatever decision was made if they have a say in what was ultimately decided. And so I think of it more of empowering staff to make decisions and helping to teach them good decision making skills. The benefit of that is that people are also saving their manager from having to be involved in every decision and them having to run to their manager for every decision. We also involve our staff in many process improvement projects and that actually reinforces decision making and empowerment.

Stan Kent:

And when people don't make the best decisions, then we just simply use that as a coaching opportunity to talk about what could have done better so that the next time maybe there's a more effective outcome. This is a big topic. Of course there's a lot to it, but in a nutshell, that would sum it up.

Sean Chantarapanont:

Yeah, definitely. Well put. I could definitely appreciate the link and significance between empowering and engaging staff by letting them make their own decisions because yeah, as a



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manager, I've definitely been stuck in the middle in terms of having staff come to me with every decision point. And yeah, feel like that's little counterproductive. Yeah, thanks for sharing.

Stan Kent:

Something to add to that that I've learned is that when a staff member comes to me with a question or a decision that I'm pretty sure they know the answer to, I simply just ask them, "Well, what do you think we should do?" And 99% of the time they know and all I have to do is to say, "Well then do that."

Sean Chantarapanont:

Yeah, I think that segues well into kind of what I want to get into next. What are some examples of projects or informal leadership roles that have provided frontline pharmacy staff and technician staff with opportunities to grow as a leader? Amber?

Amber Lucas:

You asked about technicians and I have several technicians that report directly to me, but what Stan described as a management philosophy and leadership philosophy is absolutely what I utilize with the technicians as well. And we've empowered them to problem solve and make decisions related to their work, especially related to operational workflows. When we developed our very first department career ladder that we started it about two years ago and we finally were able to get it approved and in place about one year ago. But I engaged the technicians directly into helping build it and helping create it. And there's a lot of different leadership responsibilities and expectations within that career ladder, especially for the level two and the level three technicians. It's three level ladder. All technicians that are hired generally start at level one and they can advance to level two after a year, but it's a self application process, it's not anything that pharmacy leadership just grants a technician to be able to advance.

Amber Lucas:

The technicians themselves have to meet criteria that they themselves have set as well as put in an application and describe how they feel they have met the criteria to advance. There's other criteria involved, but that was something that they were integrally involved in in developing. Some other examples of specific roles and projects that our technicians have worked on, include things like reconfiguration of our automated dispensing machine. We've got two in particular that are involved in controlled substances management and discrepancy resolution. I just recently have turned over all of the technician and employed student scheduling who are two new lead technicians. We also have high school students from around the area that volunteer at our hospital. They're not doing that currently, but typically we usually have one or



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two volunteers students every single day. And our leadership opportunities for our technicians include coordinating what their activities and schedule look like.

Amber Lucas:

They also are integral in training and educating some of our newer staff members, including the pharmacists. We find that that helps build those relationships between our technician staff and our pharmacist staff. And then anything that has to do with their workflow and what I challenge them to do and Stan, you said perfectly when you said, when they come to you with a problem or they think something needs changed, I ask them, I tell them, I say, "Hey, you're the one who's doing this every day. What do you think it needs look like? Or what do you think the process should be?" And tell them that, "You're the best person to make that call right now. You take it and you run with it and tell me what you've done."

Amber Lucas:

We also support our technicians in participating in other types of educational opportunities in order for them to develop their leadership skills. And that includes some professional meeting attendance. And we also have internal continuing education sessions. And actually interestingly enough, just about a few weeks ago, we enrolled all of our technicians staff in the ASHP competency assessment center. And there's some leadership opportunities built within that too. Great question, Sean. Thanks.

Sean Chantarapanont:

Yeah, I appreciate the examples that you provided as I definitely believe it's of utmost importance to engage our technicians as they are truly a key element to the success of any pharmacy department. And I know personally I've appreciated it in the past when leaders provide me with opportunities to learn, grow and advance my practice. With that being said, I think whenever people look to advance their practice, I think accountability is a important concept that I wanted to touch upon. How do you hold your frontline staff accountable to deliver on tasks? Stan?

Stan Kent:

Thanks Sean. When you use the word, holding people accountable, that also has a negative connotation. Our philosophy is that accountability starts with setting clear expectations and then providing consistent coaching and follow through by the managers. If ask someone to make a commitment to do something, then as a manager you need to be pretty specific about what's expected and what outcome you're seeking and when you need it done. And then if it isn't done as expected or when it was expected, then you just revert to basic coaching and discuss specifically what was expected, why it matters, why it's important or why it's a concern, what



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impact did not getting it done in time or the right way have on operations or other people? Ask the employee about the reasons for the difference.

Stan Kent:

It might often be that they really didn't understand what was expected and then just discuss what needs to be done differently. Ask them for ideas or maybe they need some training or equipment or a little more time. And then you just agree on the next steps and really important to set a followup date. If it was important enough for you to have a discussion with an employee about it, then you want to check back with them in a week or a month and then make sure you follow up. Because that also tells people that, hey, this was important enough that the manager's paying attention to it.

Stan Kent:

And having said all that, how you go about having these conversations with employees is really critical. I have tools that I use and guides for managers to have conversations with staff that they're coaching or working on a performance improvement plan with, and we emphasize some key principles as you have these conversations. And one of them is to always maintain a person's self esteem and be respectful. That tells them that you're focusing on the problem and not them as a person. It's not that they're a bad person or want to do a bad job. I often tell my staff that I don't think ever have known someone that comes to work every day and says, "I want to do a bad job and make everybody mad." I'll ask them, "How many of you came to work today and said, I want to do a bad job?" And of course nobody raises their hand because you have to assume positive intent on everybody's part. They're trying to do a good job.

Stan Kent:

And so by being sincere and listening to them and being empathetic, that really makes a big difference. It shows them that you care about them, you just want to solve the problem. Just have to be careful as you go through this, to not have the monkey put on your back. You want to be supportive and help point them in the direction or help remove some barriers, but ultimately they still need to be responsible for the outcome.

Sean Chantarapanont:

I definitely like those strategies and I know holding people accountable can be challenging at times, but thank you. Definitely bring up a lot of good points with being sincere and being respectful. Definitely think those strategies can go a long way to helping leaders hold their staff accountable for outcomes while maintaining their self esteem and integrity of the relationship. With that, shifting gears a little bit, I know there's been a lot of management literature published on Lean management and Lean Six Sigma. Could both of you share how you utilize Lean daily



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management in day to day management, coach or lead frontline staff? We could start with Stan on this one.

Stan Kent:

Well, performance improvement is a big deal at the University of Michigan. We're always trying to think of ways to be innovative, be more efficient in our operations. Part of that is that many areas of the organization, we've implemented what's called a daily management system or a DMS system. Some departments have had it in place for a few years. We're just starting to roll it out more Formal in the pharmacy department and it involves having at least daily huddles in whatever operational area of the department you are working in, with the team that's working that day. Just talk about the state of the pharmacy, anything unusual that might be happening that day or that might affect their work and then ask the staff for any concerns or questions that they have.

Stan Kent:

These huddles typically take only five to 10 minutes. They're sort of guided by a whiteboard that we have up in the work area that has some metrics about maybe number of chemotherapy doses we have that day or if there are any staff vacancies or how many admissions we're expecting in or postops, that type of thing. And then goes to talk about other operational issues. It only takes five or 10 minutes. It's a good way to surface processes that aren't working right. And then from there we can form a process improvement team. That's our strategy at Michigan.

Sean Chantarapanont:

All right, thanks Stan. And Amber, do you have anything else to add or to share?

Amber Lucas:

We actually utilize what's called a Gemba huddle and a Gemba board. And Gemba is I guess a company's strategy for going to where the work is, but we use the Gemba board as a key performance indicator. And right now our board is a big whiteboard. It's got a lot of documents on it, but these boards that we have currently evaluate two different metrics. We change these metrics once we've met our goals for at least 70% of the time over a month. But currently some metrics that we are tracking, include order verification turnaround time by the pharmacist. And then non-exempt staff late ins with primarily captures our technician and employed student staff. These were goals that the staff posed. For example with the non-exempt staff late ins, we were having some consistent issues with technicians and students especially showing up somewhere between 10 and 15 minutes late for their shifts. And based on the hospital policies, several of them were running into attendance challenges.





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Amber Lucas:

We set the goal at one point a few months ago to, that everybody needed to be in within 10 minutes. And then we shortened it to within five minutes. And to make it even more interesting, the technicians and students themselves said, "If anybody exceeds that five minutes, their name is going to get written in the tracking document," which is also on the board. And so everyone can see who's been late, if anybody is. And over the course of three months, since we've been tracking this particular metric, the late ins has reduced itself down to near zero most of the time. In the month of March, we were only at 50% of the time. We have literally one person across all of the different shifts throughout the day, one person would be in more than five minutes, that all of the other staff were in the door within the five minutes of shift start time. We're getting close to that goal of 70% and then we'll change to a new metric once that goal has been met.

Amber Lucas:

But I would say some other strategies that have been used by peers include some different Kaizen events around formulary management as well as having some locations that use peer boards for some Lean improvement processes and they really engage the frontline staff to do the specific problem solving on these issues. I know that one hospital shared with me that they use what's called improvement cards that serve as a type of a suggestion box. Staff use these and they fill out their card and they put it on a bulletin board and they're encouraged to use the PDCA plan, do, check, act cycle. These cards get put basically anonymously up on this board and then the board is reviewed by the rest of the staff as well as the managers. And then as a group the different improvement opportunities are selected to then track and move forward with. I thought that was an interesting strategy that I know at least a couple different people in our section advisory group had shared that they've used with success.

Sean Chantarapanont:

Thank you, Stan. Amber, I definitely think utilizing hard data in the form of dashboards is a great way to track and improve upon those key performance indicators for the department. And think those are great examples that hopefully the listeners can look to take back to their respective institutions. Stan and Amber, are there any other tools and strategies that you've used to promote leadership amongst your frontline staff?

Amber Lucas:

One of the things that I did not long ago in some of the meetings we have with our staff, and this was something that my co-manager and I did as we met with our separate direct reports. But I asked my direct reports this one question and this was something that was shared with me in my own leadership coaching and training, but that was that I asked all of them and actually filled it out on a piece of paper with a question and a blank and it says, "What is our main thing?" And



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then they were supposed to answer that question and then I had them all just do it individually and then turn them in and I read through them. And fortunately, they were fairly consistent with each other. But I would challenge the listeners to ask your staff, "What is our main thing?" Because if they can't answer that question or if you get many different answers from different staff members, then know that it's going to be difficult for them to lead with a shared purpose.

Amber Lucas:

And so it's important that as a leader that your frontline staff and your department purpose is understood by all. When opportunities for change or improvement are identified, we really look to the frontline staff for their input and we may not always like the ideas that get shared personally, but I've definitely learned over time that having diverse perspective really helped us see a lot of different opportunities to move forward with some of the best decisions. I think those are some of the two strategies that we've used that I feel like our frontline staff feels like they have an opportunity to really contribute to the leadership of the department and pharmacy's presence across the hospital.

Stan Kent:

As I think about promoting leadership among frontline staff, I feel pretty strongly that they learn about leadership from existing leaders in the organization, so you have to set good examples. And a few things that I emphasize are that leaders are people who demonstrate that they care passionately about their work and the people that work for them. They make good decisions and choose to do the right things. They treat other people with respect. I have a list of expectations that I go over with new employees that will help them be successful in the pharmacy department. I tell them that it's not really necessarily what they know. We assume that employees have the knowledge and skills to do the job, but it's the teamwork that they demonstrate and the work ethic that they have that will make them successful. But I think by observing, I've seen frontline staff step up when the situation or the opportunity arises and in fact mimic their supervisors in some ways.

Stan Kent:

It's very apparent right now during this COVID crisis, where we really need all hands on deck and everybody to be a leader and help out. And I also realized in this past month, the power of effective communication. I typically send out a monthly update to our entire department and we have over 600 people. Sometimes I'll get comments back from people that how they liked hearing about what we were doing at some offsite facility or whatnot. For this COVID crisis, I've been sending out updates every single day on what's going on because right now there's so much uncertainty and people are afraid about coming to work. They're afraid of taking care of patients and they're just afraid for their families. And so people are afraid when they don't know



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what's going on or they don't have information. I decided I needed to send something out to them every day.

Stan Kent:

And I could tell you I've been doing it for, I started doing it at the beginning of March and every single day I get five or 10 emails from different staff members telling me how much they appreciate getting this information. And I think it's a combination of them knowing that I care about them and their fears and just helping to keep them informed. But it's also great to hear that it's inspiring them. And so it's very reinforcing to me that setting that example has inspired many of them to step up and volunteer to do things that they wouldn't normally do. Those are the main things. And just like every other hospital or health system, our human resources department and the university offer many classes on leadership development and management development. But I feel very strongly that the frontline managers needs to have as many of those skills as possible.

Sean Chantarapanont:

Great overview and answers. And yeah, I think a common theme that both of you touched on was kind of ensuring that there is a common goal for everyone to work towards. To quote one of Stephen Covey's *Seven Habits*, beginning with end in mind, if you will. Thank you, Stan and Amber. And as our podcast comes to a close, could you each provide our listeners with a key takeaway that they could use to bolster their efforts to coach and lead their frontline staff?

Amber Lucas:

I think leadership skills can be developed and should be developed in all staff members, especially the frontline staff, and they may be actually the group of individuals that have less access to some of the formal leadership training that a lot of the more formal leaders have. But they happen to be the people in your department and in your workplace that have the most face time with other members of the healthcare team, so it's so important for them to have that development and have those leadership skills and access to some of that training and education. It's important as a leader, you provide these types of opportunities, empower them to make decisions as representatives of the department. A lot of that was discussed by Stan earlier. And then finally I would say, always thank them for their effort because they're the face of the department. They're the face of the profession and if they feel appreciated, they'll convey that in their communication and leadership style with others.

Stan Kent:

What I would add to that is really I think important for a department to be high performing and effective, that people work well together, especially when it comes to solving problems. I think



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that having a constructive discussion in a mature manner is extremely important. The topic of emotional intelligence and emotional maturity, has been a hot topic for a while. Again, it's not so much what people know or what their skills are, that will make them be successful. It's how they get along with others. How they treat others and what their work ethic is.

Stan Kent:

When I started at Michigan, I decided I would have a theme that I could always kind of go to. And I tell my employees that almost all the problems that I deal with that are the most challenging don't have to do with operations or what someone knows or what their skill set is. It's usually related to work ethic or teamwork or just not treating each other well. And so I decided to go with work hard and be nice because almost everything that it takes to be successful falls into that. I end a lot of my updates to the staff, with work hard and be nice, to the point that they bought me a poster that I have up in my office that says, "Work hard and be nice."

Sean Chantarapanont:

Excellent. Thank you for both those key takeaways. And to echo what was just stated and throughout today's podcast, I think a common theme that I heard was treating others with respect and just trying to empower staff to do their best every day, goes a long way to developing others as leaders. With that being said, that's all the time that we have for today, and I wanted to thank Amber and Stan for joining us today to share their experiences with coaching and leading frontline staff. Thank you, Amber and Stan.

Sean Chantarapanont:

Please continue to join us here on Tuesdays where we'll be continuing to talk with ASHP members about leadership topics within pharmacy practice. Thank you again.

Stan Kent:

Thanks, Sean.

Amber Lucas:

Thanks, Sean.

Speaker 1:

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