



**New Brunswick College of Pharmacists**  
**Ordre des pharmaciens du Nouveau-Brunswick**

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*To protect and promote the health and well-being of New Brunswickers by regulating pharmacy practice.  
Protéger et promouvoir la santé et le bien-être des gens du Nouveau-Brunswick en réglementant l'exercice de la pharmacie.*

**Pharmacy Workplace Wellness Task Force**  
**Recommendations**

**September 2023**



# Pharmacy Workplace Wellness Task Force

## MEMBERS OF THE PHARMACY WORKPLACE WELLNESS TASK FORCE

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## ACKNOWLEDGEMENTS

The New Brunswick College of Pharmacists (the College) is fortunate to have worked with the highly engaged members of the Pharmacy Workplace Wellness Task Force (the Task Force or TF) as part of the College's Strategic Plan focus on safe patient care and supporting the well-being of pharmacy professionals. The College would like to thank each member of the Task Force for their time and dedication to this work that will aim to create a more supportive working environment for pharmacy professionals so they may continue to provide safe and quality patient care. The College is grateful to representatives of the New Brunswick and Canadian Pharmacists Associations as well as the Nova Scotia College of Pharmacists who each shared their respective findings and progress on workplace wellness initiatives with the College.

## INTRODUCTION

As the overall health-care system adapts to better meet the needs of patients, the role of pharmacy professionals is evolving to meet primary care needs of patients. Pharmacy is considered part of the multidisciplinary model for primary care that is mentioned in the provincial health-care plan<sup>9</sup>. The educational background and knowledge of pharmacy professionals combined with the accessibility of pharmacies in numerous regions throughout the province supports, in many respects, this new direction that ultimately provides patients more options to receive care.

Reports demonstrate that a growing and changing workload has contributed to wellness issues and burnout in pharmacy professionals that were both perpetuated by the pandemic. Many regulatory bodies in Canada and the United States are focusing on pharmacy professional well-being and have begun to address it using varying approaches. As the College developed a new Strategic Plan in 2022<sup>7</sup>, discussions considered the topic of workplace wellness issues and how the College could, within its regulatory framework, support the safe delivery of patient care with a focus on pharmacy professionals' well-being.

The Council of the New Brunswick College of Pharmacists (Council) approved the formation of a Pharmacy Workplace Wellness Task Force to enable the College to, through a diverse group of individuals, identify drivers of workplace issues affecting the well-being of pharmacy professionals. The objectives of the Task Force as described in the Terms of Reference<sup>8</sup> were to provide recommendations to Council on approaches to address workplace wellness, workload and workforce related topics. Over the course of a four-month period, the Task Force met and shared their experiences and agreed by consensus to the six recommendations presented herein. The recommendations are categorized as short- and long-term and are either intended to be led by the College (within the College mandate and purview) or that the College could have some influence over and/or support (outside the direct mandate and purview).

This report provides a summary of the data and key factors that were considered by the Task Force, the process and the proposed recommendations to support safe patient care and the well-being of pharmacy professionals.

## BACKGROUND

The *New Brunswick Pharmacy Act, 2014*, sets out the mandate of the College which involves acting in the public interest and regulating the profession of pharmacy to ensure the delivery of safe and quality patient care. Workplace wellness aligns with the College's mission to protect and promote the health and well-being of patients and specifically aligns with pillar two of the Strategic Plan to address well-being as an important part of professional practice.

Literature has indicated an association between a greater workload (workload is defined as the balance between demands and resources available to meet those demands) and job stress, more medication incidents, fewer medication therapy suggestions made, and an increase in patient concerns.<sup>17-19</sup>

Additionally, patients have stated that if they observed their pharmacist to be experiencing burnout, they would be worried about the care they receive and would avoid asking the pharmacist questions.<sup>1</sup>

It is understood that the COVID-19 pandemic contributed to burnout and workload challenges experienced by pharmacy professionals.<sup>10-13</sup> However, studies have identified that both hospital and community pharmacists were experiencing burnout prior to the start of the pandemic.<sup>14-16</sup> Survey data<sup>4</sup> reveals increasing rates of workplace stress and dissatisfaction with current work environments, professional burnout as well as issues with recruiting and retaining a qualified and licensed pharmacy professional workforce.

The Regulations of the New Brunswick College of Pharmacists require that pharmacy managers must ensure that appropriate facilities, space, equipment, resources, systems, and procedures are in place to support the safe and effective provision of pharmacy services. Further, the importance of a safe work environment is one of the national Model Standards of Practice for Pharmacists and Pharmacy Technicians in Canada, which have been adopted in New Brunswick. The National Association of Pharmacy Regulatory Authorities (NAPRA) published a document on the principles of professionalism<sup>6</sup> that highlights the profession should consider patient interests as top priority, create a working environment that supports patient care, promotes a safe working environment and promotes wellness. Despite these patient-focused expectations of pharmacy professionals, pharmacy environments are conducive to optimal patient care and outcomes in varying degrees. Survey data<sup>3</sup> has indicated outside pressures such as organizationally imposed quotas and other outside influences are impacting the ability of pharmacy managers and individual pharmacy professionals alike to meet their professional requirements.

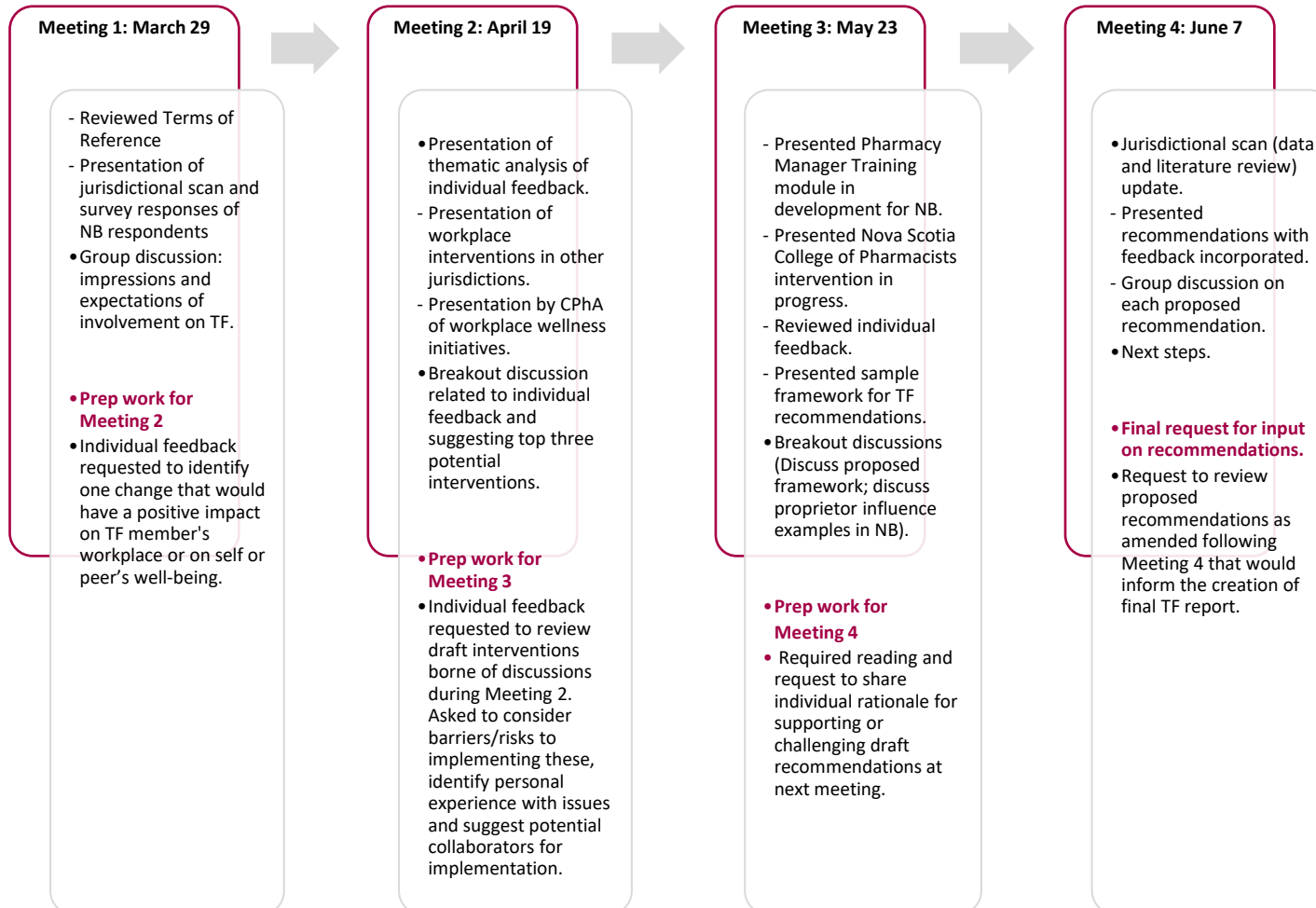
The College's Council commissioned a Pharmacy Workplace Wellness Task Force to contemplate the available data, feedback from pharmacy professionals relating to their working environment, its effects on their well-being and to examine possible solutions that are within the College's regulatory authority. An expression of interest was issued to recruit pharmacists and pharmacy technicians practicing in various settings, as well as members of the public with various experiences with pharmacy in New Brunswick. Representatives of the Canadian Pharmacists Association, New Brunswick Pharmacists Association and pharmacist and pharmacy technician educational institutions were also included.

## **2023 TASK FORCE MEETING SUMMARY**

The Task Force met four times between the months of March and June 2023 (*Table 1*) and meetings incorporated the presentation of information including a jurisdictional scan<sup>5</sup>, survey data, and presentations by the College and expert guests. Meetings also provided the opportunity for discussion through small breakout groups as well as with the larger Task Force. Between scheduled meetings, the College sought individual feedback from the Task Force members through personal reflection on meeting material and discussions as well as from additional reading. Members of the Task Force shared their own experiences and provided insightful feedback and mitigation strategies for addressing workplace wellness issues in pharmacies. The guiding principles and scope described in the Task Force Terms of Reference provided a structure to identify themes of areas of greatest concern. These were then incorporated into three iterations of potential frameworks and recommendations for consideration by the Task Force. Through the progression of that process (described in *Table 1*),

combined with thoughtful, open discussions and submitted feedback, the Task Force agreed by consensus to the final recommendations presented herein. The recommendations are categorized as short- and long-term and are either intended to be led by the College (within the College mandate and purview) or that the College could have some influence over and/or support (outside the direct mandate and purview). The Task Force recommendations also assigned accountability and identified potential partners for collaboration.

Table 1



## JURISDICTIONAL SCAN

In early 2023, the College conducted a jurisdictional scan and literature review on approaches, actions and regulatory tools employed by several jurisdictions as well as their overall learnings in those undertakings. The College provided members of the Task force with the detailed report and incorporated the information in meetings one and two specifically, however it was also significant in informing the decision making process of reaching the final recommendations. The Task Force carefully considered how these other jurisdictions have addressed concerns relating to workplace wellness to reduce pharmacy staff burnout and enhance patient safety. The information provided an overview of the approach of each jurisdiction and an in-depth explanation of the various workplace wellness related factors that have been addressed through policy, pharmacy regulatory authority guidance documents, and relevant supporting literature. Table 2 below outlines the regulatory tools used in jurisdictions in Canada, the United States and the United Kingdom. Table 3 is a high level summary of the workplace wellness interventions by jurisdiction.

Table 2: Summary of Regulatory tools used as of November 21, 2022

Regulatory Tools Used in Order of Increasing Rigor	Canada													United States					UK		
	BC	AB	SK	MB	ON	QC	NB	NS	PEI	NL	YT	NWT	NU	OH	IL	FL	TN	CA	NABP		
Guidance Documents	✓	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓
Code of Ethics	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Standards of Practice	✗	✗	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Policy	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	P	✗	✗	✗	✗	P	✗	
Regulations/ Bylaws at College Level	✓	✗	P	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	
State Legislation	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✓	✗	✓	✗	✗	



Table 3 Summary of Workplace wellness interventions by jurisdiction as of November 21, 2022

Workplace Wellness Interventions by Jurisdiction											P Proposed		D Discussed		✓ Implemented					
Canada											United States						UK			
	BC	AB	SK	MB	ON	QC	NB	NS	PEI	NL	YT	NWT	NU	OH	IL	FL	TN	CA	NABP	UK
Staffing	✓	✓	P	✓	✓	✓	X	✓	✓	✓	✓	X	X	P	✓	✓	✓	✓	P	✓
Labour Hours	X	X	P	X	X	X	X	X	X	X	X	X	X	P	✓	X	X	✓	X	X
Scope of Practice	X	X	X	X	D	X	X	X	X	X	X	X	X	P	X	X	X	X	X	X
Training and Education	X	X	✓	✓	✓	X	X	D	X	X	X	X	X	P	✓	X	X	X	X	✓
Technology	X	X	X	X	D	X	X	X	X	X	X	X	X	P	X	X	X	X	X	X
Quality Improvement	X	X	P	X	✓	X	X	X	X	X	X	X	X	P	X	X	X	X	P	X
Workplace Culture	X	X	X	X	✓	X	X	X	X	X	X	X	X	P	X	X	X	X	X	X
Metrics and Quotas	X	X	P	X	✓	X	X	X	X	X	X	X	X	P	✓	X	X	✓	X	✓
Reporting	X	X	✓	X	X	X	X	X	X	X	X	X	X	P	X	X	X	X	X	X
Conflicts of Interest	X	X	✓	X	✓	✓	✓	X	X	✓	X	X	X	X	X	X	X	X	X	X

**SURVEY FINDINGS**

The College incorporated data obtained from surveys commissioned by the Canadian Pharmacists Association (CPhA) and the New Brunswick Pharmacists Association (NBPA) into the Task Force meeting process which allowed members to review responses and feedback from pharmacy professionals in New Brunswick and across Canada. While the scope of the Task Force was to make recommendations for action that are within the College purview, the broader issues of workforce planning or staff shortages are not directly within. The feedback in those areas was nonetheless impactful in Task Force discussions.

In late 2022, the College was asked to join a Workforce Planning Task Force commissioned by the Canadian Pharmacists Association (CPhA) and the New Brunswick Pharmacists Association (NBPA). Part of this initiative was commissioning the *New Brunswick Pharmacy Workforce Planning Survey*. The College contributed questions to this 2023 survey to gain a better understanding of patient care activities being practiced within the province and to identify the barriers or challenges that may exist. Aligning scope of practice with patient care needs is a College priority as is determining if proper capacity exists.

There were 308 pharmacy professional respondents to the *New Brunswick Pharmacy Workforce Planning Survey* and the following is a summary of analysis of the responses to the questions contributed by the College that were shared with the Task Force. Overall survey results will be published by CPhA and NBPA at a later date.

The responses revealed that the majority of respondents practising in community settings are offering patient care activities such as minor ailment assessing and prescribing and injectable medication although there is some reluctance to provide vaccinations to children between two to five years of age. While there appears to be an interest in providing additional patient care activities, commonly listed barriers to doing so were heavy workload, insufficient time and staff shortage. Additionally, 52 per cent of pharmacy professional respondents said staff shortages have an impact on their well-being. Respondents identified as having management or owner responsibilities commented on current issues with recruitment and retention.

To the question where most of their time was spent in a typical day, community pharmacists selected “most of my time” in drug distribution (64 per cent) and clinical services (31 per cent). The top two responses by pharmacists in hospital settings were management or clinical services/patient care with time spent on medication reconciliation. On fulfillment, community pharmacist respondents have the most fulfillment from delivering clinical services and patient care and hospital pharmacists noted a desire for more involvement in medication reconciliation and advanced clinical practice.

To that same question, selecting “most of my time” in a typical day, pharmacy technicians in a community setting selected direct patient care/clinical support (21 per cent) and drug inventory/distribution (16 per cent). The top two responses by pharmacy technicians in a hospital setting were drug distribution (39 per cent) and compounding (11 per cent). Pharmacy technicians in both community and hospital settings have most fulfillment from drug distribution/inventory and some fulfillment with compounding. (See Table 4 for a summary.)

Table 4

Community	Hospital
<ul style="list-style-type: none"> <li>• <b>Pharmacists</b> are spending more time on <b>drug distribution</b> compared to clinical services</li> <li>• <b>Pharmacy technicians</b> are spending <b>not as much time</b> on drug distribution compared to pharmacists</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Pharmacists</b> are spending time on conducting <b>medication reconciliation</b></li> <li>• <b>Interest from pharmacy technicians</b> in assisting with medication reconciliation and other clinical tasks</li> </ul>

A thematic analysis of the comments revealed themes of staff shortages, workflow issues, burnout, clinical resources, further expansion of current scope of practice as well as compensation model/reimbursement. Further examination of the comments relating to burnout revealed common contributors as increased workload, lack of recognition and increased pressure to provide quick turnaround, pressure to reach organizationally imposed quotas and a general lack of support (e.g., staffing, equipment/space, clinical resources). Note that some topics identified are not within the purview of the College and would involve other stakeholders.

The Canadian Pharmacists Association surveyed pharmacy professionals in 2022 and 2023 with the *Canadian Pharmacy Mental Health and Workforce Wellness survey*<sup>2,3</sup>. Results of the 2023 survey from 1,136 pharmacy professional respondents revealed 79 per cent were at high risk of burnout, which is down from 92 per cent of respondents surveyed in 2022. The responses revealed the top five negative factors on mental health and well-being as workload during work hours, work-life balance, regulatory requirements, personal health and personal finances. Reviewing and considering the data from this survey further emboldened the Task Force members in their resolve that the College must act within its regulatory ability to support pharmacy professional well-being.

**RECOMMENDATIONS**

Following the fourth and final meeting of the Task Force, consensus was reached on the six recommendations presented in this report. The recommendations are accompanied by potential actions and proposed stakeholders to engage. It should be noted that stated timelines and potential actions and stakeholders are dependent on the work required (may include in-depth analysis, consultation, processes such as for legislation or regulation amendments), other identified resources and Council approval.

The proposed recommendations are categorized as follows:

**College influence:**

- Within mandate and purview; could lead
- Outside mandate and purview; can influence/support

**Projected Implementation:**

- Short term (less than 12 months\*)
- Long term (more than 12 months\*)

**WITHIN COLLEGE MANDATE AND PURVIEW; WOULD LEAD - SHORTER TERM (LESS THAN 12 MONTHS)**

**Recommendation 1.** Develop regulatory tool that positions and encourages breaks as a necessary element in the safe delivery of patient care in pharmacies.

- Pharmacies with no pharmacist overlap may close for a lunch break.
- Pharmacies with pharmacist overlap allow each team member to take a break.

Potential (how)	Stakeholders to engage (who can help)
- Through communications and policy development, clarify and promote College expectations if closing pharmacy for breaks (i.e., provide signage, lock and leave).	NB Pharmacists’ Association  Pharmacy owners
- Clarify intent of regulations that require having a pharmacist present when pharmacy is open.	WorkSafe (or owner/administrator of Occupational Health & Safety Act)

Consider in the context of current and future practice.	
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**Recommendation 2. Targeted communication to public - Clarify College expectations for pharmacists and pharmacy technicians.**

Potential (how)	Stakeholders to engage (who can help)
<ul style="list-style-type: none"> <li>- Make tools available that help explain standards and expectations that pharmacy professionals must uphold (e.g., infographic)</li> <li>- Foster interprofessional relationships and collaborate with other health-care professional regulators on common patient-focused issues and mutual learnings within the greater health system.</li> <li>- Communications strategy that considers TF (and other data sources) feedback; ongoing/incorporated into College communications annual plan.</li> <li>- Focus on areas within College mandate (e.g., what to expect/what is common or allowed/why another pharmacy team member may be qualified to answer some questions/ faxing prescriptions, etc.).</li> </ul>	<p>Government</p> <p>Regional Health Authorities</p> <p>NB Pharmacists’ Association</p> <p>Nurses Association of NB &amp; Nurse Practitioners of NB</p> <p>College of Physicians and Surgeons NB</p> <p>NB College of Family Physicians</p> <p>Community groups</p> <p>Nationally – partners addressing similar issues</p> <p>811</p> <p>Public</p> <p>Resources shared by TF</p> <ul style="list-style-type: none"> <li>- <a href="https://pans.ns.ca/help">https://pans.ns.ca/help</a></li> <li>- <a href="#">CPhA Survey Results 2023</a></li> </ul>

**Recommendation 3. Promote tools to address causes and symptoms of burnout.**

Potential (how)	Stakeholders to engage (who can help)
<ul style="list-style-type: none"> <li>- Virtual debriefing sessions related to dealing with a crisis (medication error incident, theft or robbery or staff endangerment, etc.) or, equip pharmacy managers with tools to use at their pharmacy.</li> <li>- Promote various services available within existing TELUS Health and partners’ resources.</li> <li>- Education related to current College guidance and legislation. For example, <ul style="list-style-type: none"> <li>o Pharmacy closure expectations</li> </ul> </li> </ul>	<p>NB Pharmacists’ Association</p> <p>TELUS Health/LifeWorks</p> <p>Resources shared by TF</p> <ul style="list-style-type: none"> <li>- <a href="https://www.pharmacists.ca/advocacy/pharmacy-workforce-wellness/wellness-toolkit/#teams">https://www.pharmacists.ca/advocacy/pharmacy-workforce-wellness/wellness-toolkit/#teams</a></li> <li>- <a href="https://togetherall.com/en-ca/accessing-mental-health-support/nova-scotia/">https://togetherall.com/en-ca/accessing-mental-health-support/nova-scotia/</a></li> </ul> <p>Poster: Promoting care, dignity and respect (CPhA)</p>

<ul style="list-style-type: none"> <li>○ Presence in pharmacy when closed to public – clarify Regulation first then educate.</li> <li>○ Incorporating reasonable wait times for patients.</li> </ul>	
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**Recommendation 4. Engage and support pharmacy managers and pharmacy professionals**

Potential (how)	Stakeholders to engage (who can help)
<ul style="list-style-type: none"> <li>- Add content to the pharmacy manager training module (that is currently in development) on areas to empower them to speak with decision-makers in the pharmacy (e.g., assertiveness/conflict management; blocking time for manager responsibilities).</li> <li>- College to educate/engage stakeholders about the pharmacy manager training with emphasis on College role and patient safety.</li> <li>- Monitor intervention being led by the Nova Scotia College of Pharmacists and explore application in NB.</li> <li>- Engage pharmacy managers (Facilitate forum with College for support/discussions).</li> <li>- Explore mentoring opportunities (pharmacy professionals reinvesting in profession, e.g., out of retirement to provide mentorship/guidance to pharmacy team; not become relief pharmacist to fill gaps.)</li> </ul>	<p>Regional Health Authorities</p> <p>Dalhousie University College of Pharmacy</p> <p>Nova Scotia College of Pharmacists</p> <p>Corporate representatives</p> <p>NB Pharmacists’ Association</p> <p>Canadian Pharmacists’ Association</p>

**WITHIN COLLEGE MANDATE AND PURVIEW; WOULD LEAD - LONGER TERM (GREATER THAN 12 MONTHS)**

**Recommendation 5.** Prevent activities that prioritize business or financial interests over patient care (e.g., the imposition of quotas and metrics). Dedicate resources to assess and evaluate.

Potential (how)	Stakeholders to engage (who can help)
<ul style="list-style-type: none"> <li>- Educate proprietors/owners on the expectations of pharmacy practice regulations and standards.</li> </ul> <p style="text-align: center;">AND/OR</p> <ul style="list-style-type: none"> <li>- Develop a mechanism to hold proprietors/owners accountable for the professional responsibilities and decisions that negatively impact patient care and professional well-being.</li> </ul>	<ul style="list-style-type: none"> <li>Owners and operators</li> <li>Pharmacy chain and banner organizations</li> <li>Regional Health Authorities</li> <li>Pharmacy managers</li> <li>Pharmacy professionals</li> <li>Educational institutions</li> <li>Occupational medicine and resources</li> <li>Legal counsel</li> </ul>

**OUTSIDE COLLEGE MANDATE AND PURVIEW; CAN INFLUENCE/SUPPORT**

The following recommendation is included for consideration but is outside the direct mandate of the College. The Task force recommended this be presented in the report as it is felt to be a significant contributing factor in a pharmacy professional’s ability to provide safe and effective patient care and in workplace wellness issues.

**Recommendation 6.** Recruitment and retention: Commit to collaboration with partners and contributing to work of addressing pharmacy professional shortage and retaining existing professionals.

Potential (how)	Stakeholders to engage (who can help)
<ul style="list-style-type: none"> <li>- Continue to collaborate with NBPA and CPhA on workforce planning to help address the impacts (on patient care and pharmacy professional wellness) of the forecasted shortage.</li> <li>- Registration requirements review.</li> <li>- Publish whitepaper (gather evidence and communicate concern; quantify.)</li> </ul>	<ul style="list-style-type: none"> <li>Regional Health Authorities</li> <li>NB Pharmacists’ Association</li> <li>GNB (PETL, Health, Finance)</li> <li>Educational institutions (Pharmacy technician and pharmacist programs)</li> <li>Federal (Indigenous Affairs &amp; Immigration)</li> </ul>

<ul style="list-style-type: none"> <li>- Explore mentoring opportunities (pharmacy professionals reinvesting in profession, e.g., out of retirement to provide mentorship/guidance to pharmacy team; not to become relief pharmacist to fill gaps.)</li>   <li>- Retention: examine new ways to alleviate burden such as part-time work instead of leaving profession; bringing pharmacy professionals such as retirees back in other capacities.</li>   <li>- Examine ways to further incorporate technology in processes.</li> </ul>	
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## CONCLUSION AND NEXT STEPS

The literature review, jurisdictional scan and data from multiple surveys indicate that workplace wellness issues are prevalent within New Brunswick, across Canada, the United States and other jurisdictions. Engaging individuals in the Task Force enabled robust discussions and consideration of multiple sources of information. The recommendations presented in this report will help inform Council in its decision making on the College approach to supporting workplace wellness and pharmacy professional well-being.

Through review of the literature and discussions, it is evident that issues relating to workplace wellness are multi factorial and will require a collaborative and multifaceted response with supporting and appropriate regulatory framework. Continued collaboration with the College’s partners whether regulatory, government, educational or public is paramount to informing what steps can be taken to promote patient safety and support pharmacy professional well-being.

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