Comment on paper by Rao et al on oncology workforce

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Dear Editor,

The authors should be commended for their herculean efforts to create, analyze, and publish the most comprehensive study to date assessing the oncology pharmacy workforce. Their study highlights the need for administrative action to address "Great Resignation". 1-2 It's interesting they found involvement with patient care was correlated both with improved job satisfaction, as well as an increased risk of attrition. This finding, that job satisfaction is a poor predictor of attrition, correlates well with survey data of oncologists.³ Of particular concern to us is the risk for attrition in those respondents with greater than 5 years of work experience in patient care. We would be interested in knowing the trends in this cohort, specifically whether or not the quantitative/qualitative results differed from other cohorts. This would confirm our suspicion that there exists a generation differences in attrition risks.⁴ The impact of losing an experienced and well-trained oncology pharmacist cannot be overstated, and likely contributes toward more attrition/turnover in the same department. These individuals the ones responsible for educating and precepting the next generation of pharmacists. Pharmacists with >5 years of experience are also more likely to take on administrative and leadership roles, decreasing their clinical commitment, and the authors found respondents with <75% clinical commitment had increased risk of attrition, potentially due to lack of support for non-clinical activities. Therefore, it is especially important for employers and administrators to recognize the impact of losing their most senior employees and take a pro-active approach to understanding why they might leave, including support for leadership, administrative, and teaching commitments. Survey suggests employers often have an incomplete understanding of why their employees are leaving. and tended to overlook the relational factors of employment as a reason for attrition.⁵ We feel this cohort might be particularly at risk for the phenomenon.

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