LETTER TO THE EDITOR



Hematology-oncology pharmacists: We hear you, we see you, we support you

To the Editor,

We applaud the research of Rao, Gulbis and Mahmoudjafari on the hematology-oncology (HO) workforce attrition from clinical practice and their recommendations to better elicit metrics demonstrating the vital work and value pharmacists provide in the hospital and clinic setting.¹ In 2021, Golbach and colleagues published work revealing a HO pharmacist burnout rate of >60% with pharmacists suffering from burnout more likely to leave their position within 2 years.² As leadership of the Hematology Oncology Pharmacy Association (HOPA), we consider these survey results a call to action to implement change in our organization and in the workplace.

As an organization, HOPA has championed HO pharmacist well-being both at the individual and institutional level through conference programming and longitudinal action. A wellness task force has been assembled to evaluate the success of wellbeing tools and develop metrics for key indicators of pharmacist burnout.

Several HOPA committees are focused on pursuing strategies to demonstrate the value provided by HO pharmacists to patient care teams and to identify suitable pharmacist to patient ratios. Recommendations regarding HO pharmacist workforce metrics have been submitted for publication, and other multidisciplinary initiatives regarding the expertise HO pharmacists provide in delivering quality care to patients receiving oral anticancer agents are underway, which may assist in further refining the role of the HO pharmacist.

Change can only occur through strong leadership. HOPA is committed to the mentorship of future leaders and elevating HO pharmacy practice. We have created member ambassadors to increase public awareness of HO pharmacists and key policy issues to support the profession. HOPA stands poised to respond to the urgent call from Rao and colleagues and other national HO pharmacy organizations and institutions to mitigate HO pharmacist risk factors of burnout, produce needed patient care metrics, and implement realistic long-term well-being goals for HO pharmacists.

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CONFLICT OF INTEREST

The authors declare no conflicts of interest.

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