Creating a Culture of Well-Being: A Resource Guide for Colleges and Schools of Pharmacy

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Executive Summary

In response to the growing prevalence of burnout, disengagement, and other forms of work-related ill-being across the health professions, organizations have been increasingly shifting their focus to the most common source of the problem—the environment in which people work and learn. To that end, the 2021-2022 AACP Student Affairs Committee was charged with developing a resource guide to aid colleges and schools of pharmacy in their endeavors to support the well-being of faculty, staff, and students. Recognizing that the threats to well-being are often unique to each organization, this guide details a process by which schools can explore their specific needs related to well-being and then address these challenges through a continuous cycle of organizational change, with a focus on changes to policies and practices and a redesign of the work environment. Following an overview of the committee's approach to well-being and its focus on organizational culture, the guide addresses the following steps for promoting culture change: mobilizing for change, exploration, action planning, implementation, and evaluation. Although we encourage schools to identify a champion to lead well-being efforts, a recurring theme throughout the guide is that well-being should be an organizational priority supported by school leaders in both social and material terms (e.g., personnel, funding). By integrating well-being into the organization's culture, schools can extend the benefits beyond an isolated program and ensure that well-being becomes an important part of daily organizational life.

Section 1. Introduction

Burnout is a state of ill-being characterized by feelings of exhaustion and disengagement resulting from chronic exposure to work-related stressors.[1] The prevalence of burnout appears to be growing across the pharmacy profession and the Academy is no exception.[2,3] Similar trends have been observed in other health professionals, prompting professional associations, including the American Association of Colleges of Pharmacy (AACP), to launch efforts aimed at addressing this problem. In 2021, the AACP Strategic Planning Committee made well-being a strategic priority for the association and set goals to promote well-being across the Academy and the pharmacy profession. In alignment with these goals, AACP President Stuart T. Haines charged the 2021-2022 Student Affairs Committee (SAC) with developing a resource guide to support member institutions in their efforts to address faculty, staff, and student well-being.

The purpose of this guide is to aid colleges and schools of pharmacy in creating a culture of well-being—working and learning environments in which faculty, staff, and students can thrive. We took this approach for two reasons. First, we acknowledge that each school is unique, and specific strategies at one institution may not work at another. Consequently, a recurring theme in this guide is that each school should individualize their approach to well-being based on the voices of faculty, staff, and students. Second, we believe that the Academy is full of dedicated, hardworking, and resilient people who—when given the appropriate resources and support—can overcome considerable adversity in school and at work. For this latter reason, our guide focuses primarily on changes to improve well-being at the organizational level rather than steps that individuals can take to promote their own personal well-being (i.e., self-care).

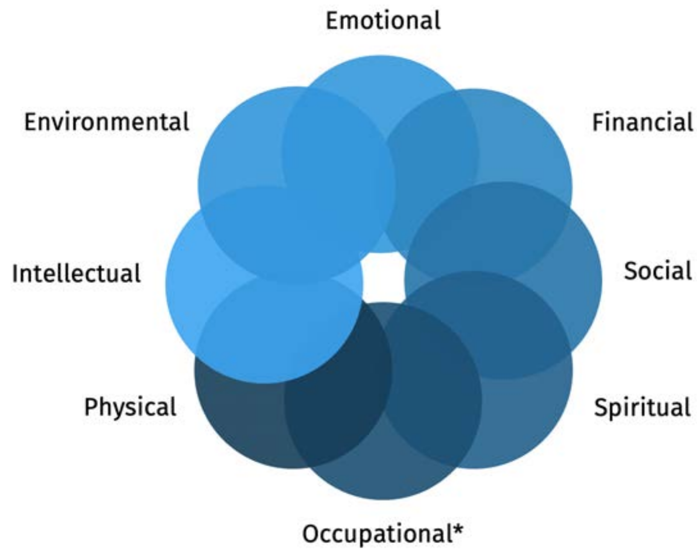
Although we hope that anyone interested in promoting well-being at their school will find this guide helpful, our intended audience is school leaders (e.g., deans, department chairs, well-being champions), because their support is essential for making meaningful changes to organizational culture.[4–6]

A Workplace Approach to Well-Being

Well-being refers to a positive state of existence and satisfaction with one's life across multiple domains (Figure 1.1).[7] Although opinions differ regarding the extent to which organizations can positively influence well-being, the workplace domain (or academic domain, if referring to students) is the one over which schools of pharmacy have the most control. Excess demands originating from work impact well-being in other domains, such as when the pressure to meet a deadline disrupts sleep (physical well-being) or detracts from time spent with family and friends (social well-being). These demands can also have long-term consequences, such as when the loan debt incurred by students affects their financial well-being years into the future.[8] As these examples illustrate, even when well-being is limited to the working or learning environment, schools of pharmacy have numerous levers at their disposal to improve the well-being of faculty, staff, and students.

Figure 1.1. Dimensions of Well-Being

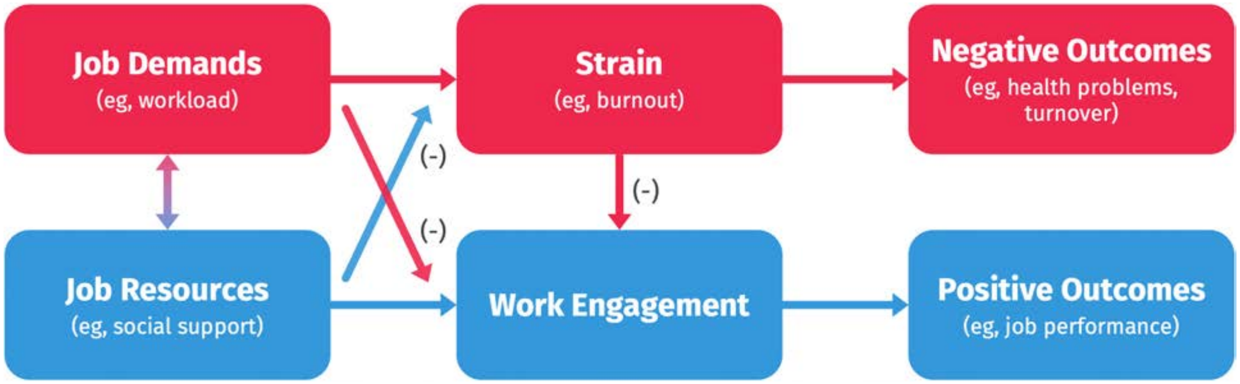
Adapted from the U.S. Substance Abuse and Mental Health Services Administration's wellness domains.



*Academic domain, if referring to students.

Of the frameworks used to explain workplace well-being, the approach that has received the most attention in the health professions is the job demands-resources (JDR) model (Figure 1.2).[9,10] According to the JDR, excess demands at work or at school can lead to burnout and other strains, which in turn can lead to negative outcomes for both individuals (e.g., mental and physical health problems) and organizations (e.g., absenteeism, turnover).[9] Job resources help people meet these demands and include both social resources (e.g., mentorship, respect for after-work boundaries) and instrumental resources (e.g., increased autonomy). When job resources are optimized relative to demands, a second pathway leads to engagement—an energizing and fulfilling work-related state of mind—suggesting that when people are surrounded by a supportive environment, they can avoid burnout and experience positive outcomes at work and in school.[11,12] Although personal resources (e.g., optimism, self-efficacy, and other positive phenomena often referred to informally as *resilience*) are also helpful, research has shown that they are insufficient for countering the detrimental effects of excess work demands when job resources are also lacking.[13]

Figure 1.2. Job Demands-Resources Model of Occupational Well-Being

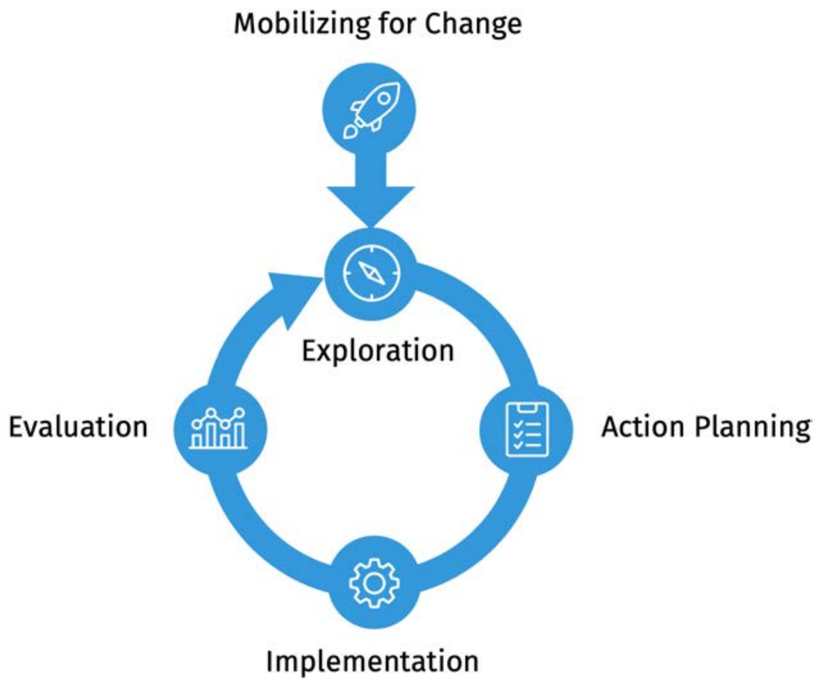


Organization of this Guide
Because organizational culture is an abstract phenomenon, this guide is organized into a series of actionable steps grounded in the science of organizational change (Figure 1.3):

- Mobilizing for change: Establishing well-being as an organizational priority and acknowledging support from organizational leadership as being critical for success
- Exploration: Understanding each school's unique needs related to well-being and identifying opportunities for action
- Action planning: Developing actionable goals, identifying resources, and anticipating potential barriers to organizational change
- Implementation: Putting plans into action by empowering people and aligning specific tactics with the organization's needs and goals
- Evaluation: Assessing the implementation and effectiveness of efforts to promote well-being and identifying opportunities for improvement

A more detailed version of Figure 1.3 can be found in Appendix 1. Because this process is cyclical and often interdependent, we encourage readers to review the resource guide in its entirety before beginning the organizational change process.

Figure 1.3. A Process for Creating a Culture of Well-Being



Methodology
To prepare for this work, SAC members reviewed literature on workplace well-being and organizational development, including guidance from recognized authorities, such as the National Institute for Occupational Safety and Health (NIOSH) and the World Health Organization (WHO). The committee also conducted an environmental scan for existing tools and resources to further inform our work, and we used the AACP Connect platform to solicit examples from the AACP Well-Being Community. The committee then commenced an iterative process of outlining, drafting, and peer reviewing each section of the guide.

Section 2. Mobilizing for Change

Burnout and other threats to well-being were already a subject of growing concern across the health professions before being accelerated by the COVID-19 pandemic.[14,15] Similar trends have been observed in pharmacy education, and the growing prevalence of burnout among students suggests these problems may begin early in one's career.[3,16–18] Burnout has far-reaching consequences, as people who are experiencing this form of workplace ill-being are more likely to make mistakes, miss work, or leave their organization entirely.[15] These latter effects enhance the demands faced by those who remain and increase the financial strain on organizations. These and the corresponding impact they have on patients, peers, and students illustrate why well-being is not just an individual priority but an organizational one.

The recognition that schools of pharmacy have an important role to play in ensuring the well-being of faculty, staff, and students is reflected in the Accreditation Council for Pharmacy Education (ACPE) Standards (Table 2.1) and in several AACP policies and SAC recommendations (Appendix 2). Taken altogether, these documents charge school leaders with creating working and learning environments in which faculty, staff, and students can thrive. The purpose of this section is to build a foundation for change by defining organizational culture, describing how it can be used to promote well-being throughout an organization, and discussing important elements for making culture change successful.

Table 2.1. ACPE Standards Pertaining to Well-Being

Standard 2: Essentials for Practice and Care: The program imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary to provide patient-centered care, manage medication use systems, promote health and wellness, and describe the influence of population-based care on patient-centered care.

> **(Key Element) 2.3.** Health and wellness: The graduate is able to design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

Standard 14: Student Services: The college or school has an appropriately staffed and resourced organizational element dedicated to providing a comprehensive range of services that promote student success and well-being.

Standard 15: Academic Environment: The college or school develops, implements, and assesses its policies and procedures that promote student success and well-being.

Creating a Culture of Well-Being

Many of the efforts to promote well-being in pharmacy have focused on the role of individuals in building and sustaining resilience in the face of excess demands. Although techniques for building personal resources (e.g., stress management techniques such as mindful meditation) can relieve strain in the short-term, these benefits do not last in the face of ongoing, unmitigated demands.[4] Therefore, this guide aims to complement these individual efforts by supporting schools in creating an *organizational culture* of well-being. Organizational culture refers to a set of shared beliefs and values that help shape the thoughts, feelings, and actions of people within an organization.[19] An organization's culture can be described as having three layers: the *artifacts* that people inside and outside of the organization can easily see or hear (e.g., symbols, language, stories), the espoused *values* that the organization cites as guiding its actions, and the underlying *assumptions*, or the unseen thoughts and feelings that people experience in their day-to-day lives. These three layers should align, but often people's everyday experiences are inconsistent with the organization's espoused values, or the artifacts it chooses to uphold as reflections of its culture.

In the context of pharmacy education, a culture of well-being means that—rather than the implementation of an isolated strategy, such as an annual wellness retreat or a wellness elective course (i.e., artifacts)—the well-being of faculty, staff, and students should be integrated throughout the work of the school and manifest in daily organizational life. As a few examples, a culture of well-being is likely evident when:

- Leaders acknowledge their own challenges and visibly role-model desired behaviors
- Achievements related to well-being are recognized and celebrated alongside other strategic goals
- Stories of well-being are highlighted in organizational communications
- Opportunities are provided to build community (e.g., social gatherings, common lunch times) and facilitate a sense of belonging
- Guidelines are developed that empower faculty, staff, and students to establish clear boundaries around work/school
- Recovery activities (e.g., work breaks, vacations) are respected and encouraged
- Support is provided for self-care and other healthy routines (e.g., dedicated space for mindfulness, healthy food options on-site, access to exercise facilities)

Securing Leader Support

Creating a culture of well-being is a long-term, cyclical process and resembles other forms of organizational change, such as revising a curriculum or preparing for an accreditation visit. As is the case with these other major change processes, commitment from school leaders is critical.[10,20–22] Although executive leaders (e.g., provosts, deans) are key to organizational change, accountability for well-being should be shared by leaders throughout the organization, including department chairs and student leaders.

School leaders can support the creation of a culture of well-being in numerous ways (Figure 2.1). For example, school leaders should communicate an inspiring vision for change related to well-being and enshrine this commitment in the school's mission and values. School values typically include statements pertaining to performance, excellence, and integrity, but often overlook the well-being of those responsible for living out these values every day. Instilling well-being as an organizational value can be further supported by providing examples of how faculty, staff, and students can embody it in their daily work life.

Figure 2.1. Example Actions by Organizational Leaders to Support Well-Being Efforts

Citing well-being as an organizational value is only beneficial if it is also accompanied by changes in the everyday experiences of faculty, staff, and students. Leaders can therefore support a change in culture by ensuring that well-being is integrated into the strategic planning process, the policies and practices that guide organizational decision-making, and the ways in which people work and learn (see Figure 4.1 in *Action Planning* for details). Leaders are best positioned to leverage voices throughout the organization in the design and implementation of these changes—a strategy that increases the likelihood that change efforts will be successful long-term.[23] For example, leaders at the Mayo Clinic solicited input using a series of surveys and focus groups and incorporated this feedback into a revised set of principles to guide organizational decisions and processes (e.g., recruitment, onboarding, quality improvement).[21] In a follow-up survey, over 95% of respondents endorsed these changes.

To help school leaders think about how to translate a vision for well-being into action, an example framework known as the 5Ps is provided in Table 2.2.[24]

Table 2.2. The 5Ps: An Example Framework for Translating Values into Action
Adapted from Leape et al.

Element	Questions for Organizational Leaders
Purpose	How can faculty, staff, and student well-being support the school in achieving its mission? How has a vision for well-being been communicated?
People	Has a well-being champion been identified and empowered with the resources necessary for success? Is the champion supported by people throughout the school?
Processes	How will the school live out its values pertaining to well-being? To what extent are policies, procedures, and practices aligned with the vision for change?
Performance	How will success be defined? How will progress be measured?
Positions	How is the school's commitment to well-being communicated to external stakeholders (e.g., applicants, alumni, preceptors)?

Organizational change is difficult, but the arduous nature of this process can be eased by aligning well-being efforts with existing initiatives. Again, leaders are uniquely positioned to ensure such synergy occurs. For example, health professional curricula and clinical training experiences (e.g., advanced pharmacy practice experiences, residencies) have been highlighted as an opportunity to improve learner well-being.[10,25] Curriculum committees could be charged with incorporating learner well-being into their review processes and explore changes associated with improved well-being (e.g., reductions in the number of contact hours, use of pass/fail grading). Calls for schools to address well-being also coincide with increased attention on diversity, equity, and inclusion (DEI). Members of historically minoritized groups are disproportionately affected by work stressors, providing an opportunity to align the school's well-being and DEI efforts.[26,27] We provide an example of this in *Implementation* (Section 5).

Empowering a Well-Being Champion

A recognized best practice for promoting well-being is to hire a well-being champion—someone whose effort is dedicated to leading an organization's well-being initiatives.[28] In non-academic settings (e.g., businesses, nonprofits), these people typically hold executive-level positions (e.g., Chief Wellness Officer). As we detail in *Action Planning*, efforts to address well-being are most effective when they involve changes to the environment, policies and practices, or the ways in which people work and learn—approaches that often require someone with executive-level power. A growing number of schools have created full-time positions or allocated part-time effort to an existing position to serve this role (see Appendix 3 for examples). Alternatively, schools could establish a task force whose members each have a smaller amount of effort dedicated to well-being initiatives. In either case, numerous professional organizations offer training and certificate courses to support people working in these roles.

Keys to Success

Throughout this guide, we emphasize several recurring themes pertaining to the organizational change process. Below we highlight these for the first time as being key to mobilizing for change.

Table 2.3. Mobilizing for Change: Keys to Success

Obtain support from leaders throughout the organization (e.g., university-level leadership, deans, department chairs, staff managers, student leaders) by involving them in the planning process and sharing lessons learned along the way. Leader support includes funding and other tangible resources as well as efforts to facilitate participation in well-being initiatives (e.g., effort allocation, flexible work arrangements).

Collaborate with organizational members by soliciting their input (e.g., surveys, focus groups) and involving them throughout the change process. Efforts can be extended by identifying a well-being champion and creating a task force to aid in the design and implementation of well-being initiatives. The task force should be diverse (e.g., age, gender, race/ethnicity, family status) to understand the many factors affecting well-being. Efforts should align with other organizational initiatives when possible (e.g., efforts to promote diversity, equity, and inclusion).

Communicate regularly and transparently with school leaders and organizational members throughout the change process (e.g., planning, implementation, evaluating program implementation and success). Updates should be provided via organizational communication platforms (e.g., electronic newsletters) and in special venues (e.g., faculty assemblies, student town halls).

Ensure accountability by collecting and reporting on data pertaining to well-being. These data should be integrated into measures of organizational performance (e.g., absenteeism, turnover, productivity), faculty and staff performance reviews, and student professional development plans.

A Source of Support: The AACP Well-Being and Resilience Community

Finally, we recognize that many people reading this guide may be embarking on this process alone or as part of a small group of interested faculty, staff, or students—often in the face of significant resistance. Fortunately, a vibrant community of people are available for advice and support. The AACP Well-Being and Resilience Community consists of faculty, staff, and students who are all at different stages in their journey to promote well-being at their schools and across the profession. We encourage everyone reading this guide to become a member of the community and seek out the additional resources located there.

Section 3: Exploration

Although the drivers of burnout and other forms of ill-being share some similarities across schools, the specific causes are likely unique to each institution.[10] For example, many practice faculty face role conflict (e.g., when patient care duties conflict with teaching obligations), but this could result from several factors, such as unclear guidance regarding faculty effort or unrealistic expectations at the practice site. Likewise, most students will experience some degree of test anxiety, but excess levels of distress could result if a school relies too heavily on high-stakes exams or fails to coordinate exam scheduling.

As these examples illustrate, school leaders should attempt to identify the underlying causes of strain prior to launching well-being efforts. This step is often referred to as *problem identification* (or *diagnosis*) in the organizational change literature and resembles a needs assessment.[29] Its primary purpose is to identify gaps and ensure that well-being initiatives are designed to address specific challenges, thereby avoiding investments of time and resources into interventions that may appear beneficial on the surface but fail to resolve underlying problems.[20] Problem identification also helps to ensure accountability by identifying some of the measures upon which the intervention will ultimately be evaluated.

We use the term *Exploration* to acknowledge the reality that the factors affecting well-being are not always obvious or may be too numerous to tie together into a few key themes. Organizational change is an ongoing process and lessons learned from the first iteration will likely inform future work. As a result, exploration will likely occur as a part of *Evaluation* (Section 6) in subsequent cycles. However, because many people will be embarking on this process for the first time, we begin by discussing the exploration process, including strategies for getting started, its major components, and common themes that are likely to emerge.

Preparing for the Exploration Process

Because many of the downstream planning decisions will depend on the unique challenges facing the school, exploration may be one of the most important steps of the change process. For this reason, we highlight a few important preparation strategies.

- **Gain an understanding of organizational context**, including factors that may affect the design of the initiative or its success. Example internal factors may include the instructional environment (e.g., traditional versus accelerated program, multiple campuses) and existing practices (e.g., flexible work arrangements) whereas external factors may include university- or campus-level policies or expectations of other stakeholder groups (e.g., affiliated medical centers).
- **Ground the effort in an evidence-based, organizing framework**.[30] Important decisions include the definition of well-being to be used and which domain(s) the effort will address (see Figure 1.1). The job demands-resources (JDR) model is provided as an example based on its use in existing well-being efforts and its specificity in identifying common sources of work-related ill-being and opportunities for intervention.[10]
- **Secure support for the exploration process**, including personnel and resources. Assessing the organization's needs can be a time- and labor-intensive process and is often the first time a material commitment from leadership is required. The process can be resourced internally (i.e., performed by a well-being champion and/or task force) or

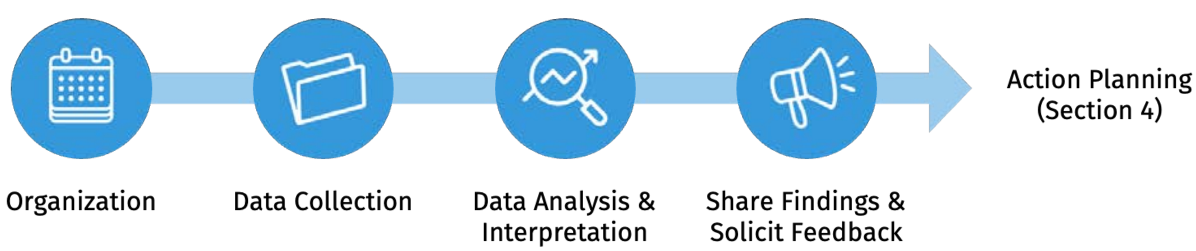
via the use of external consultants. A growing number of individuals have gained expertise in this area by completing additional education (e.g., certificate training programs offered by professional pharmacy organizations, graduate degrees in relevant disciplines, such as industrial/organizational psychology). Organizational culture is also a major focus of many consulting firms.

- **Identify and engage a diverse set of stakeholders** to collaboratively identify the organization's needs. Key stakeholders will differ by school but may include leadership (e.g., university-level leaders, deans, chairs, student leaders), faculty with varying roles and experience (e.g., full-time, adjunct, preceptors), staff (e.g., administrative services, facilities, information technology), learners (e.g., students, residents, fellows, other graduate students), alumni, and former employees. Aside from role diversity, stakeholders should also be diverse in other ways, such as gender, race/ethnicity, sexual orientation, parental status, and disability status.
- **Use rigorous data collection and analysis** to build a data-informed case for change, including the potential consequences if problems are ignored. Findings should be shared with school leaders and faculty, staff, and students to secure their support. Data collected during this phase may also be useful for evaluating the program (i.e., baseline measures against which measurements of change can be made) or informing the most appropriate data to collect in the future.

The Exploration Process

The exploration process can be divided into a series of key steps (Figure 3.1).

Figure 3.1. Phases of the Exploration Process



Organizing the Exploration Process

The purpose of this step is to determine the guiding questions for the exploration process and create a plan for remaining steps (e.g., data sources, responsible parties, timelines). Example questions include "What are the drivers of burnout at our school?" and "What resources already exist to support faculty, staff, and student well-being?" A list of additional examples, including questions pertaining to specific work demands and resources, is provided in Appendix 4. If school leaders have made well-being an organizational priority, some guidance may already exist on how to organize this process. However, those who are interested in addressing well-being at their school for the first time may need to conduct this exploration specifically for the purpose of securing leader support. In the latter case, time should be spent considering some of the items in *Mobilizing for Change* to ensure the process aligns with the school's mission and values.

Collecting Data
Multiple sources of data should be used during the exploration process. Data may be obtained directly via self-report tools (e.g., surveys) or indirect approaches, such as reviewing personnel data (e.g., turnover) or organizational documents (Table 3.2). Self-report tools should be piloted prior to distribution to ensure the intended data are captured appropriately. Consideration should also be paid to the time and resources necessary for data collection, as some methods are more labor-intensive than others.

Table 3.2. Data Sources

People	Other Sources
Surveys Interviews Focus groups Direct observation Open forums Suggestion boxes	Personnel data Academic data Documents (e.g., policies, strategic plans) Published research reports Normative data (e.g., national statistics)

Although quantitative data may reveal some information about the challenges facing the school (e.g., the prevalence of burnout), the goal of exploration is to uncover the underlying *causes* of ill-being—not just the consequences. As a result, much of the data collected during the exploration process will be qualitative in nature. In Table 3.3, we provide examples of the types of data to be collected based on the JDR framework. *Demands* reflect the causes of ill-being and will likely be the primary focus of the exploration process. However, existing *resources* for supporting well-being should also be noted. *Outcomes* reflect the imbalance between demands and resources and include strains (e.g., burnout) and organizational consequences thought to reflect ill-being (e.g., academic performance, absenteeism, turnover). Of the measures collected during the exploration process, outcomes will likely be the only quantitative data. However, personal narratives can provide a powerful supplement to these data, such as how burnout feels to an individual faculty member or why a staff member feels the need to withdraw from work because of its effects on their well-being. Finally, *context* refers to other factors that may affect the design, implementation, or success of well-being efforts. For example, interventions may need to be tailored to the needs of specific groups (e.g., gender, race/ethnicity, sexual orientation, parental status, disability status, job type) or account for factors outside of the school (e.g., contemporary events).

Table 3.3 Types of Data with Examples

Domain	Examples
Demands	Responses to open-ended questions in surveys Comments in interviews, focus groups, or in open forums Complaints, grievances, or safety reports
Resources	Access to employee assistance programs and student counseling services Availability of training and development programs Audit of physical space Funding and other resources for well-being efforts
Outcomes	Prior assessments of well-being*

	Student grades, pass/fail rates, standardized exam scores, co-curricular involvement, residency match rate, and employment success Employee absenteeism and turnover
Context	Contemporary societal or geopolitical issues external to the school Intersectionality of demographics and other factors that may affect well-being (e.g., relationships, caregiving responsibilities, physical health)[31–33]

*For a list of validated instruments, please see *Evaluation* (Section 6).

Analyzing and Interpreting Data

Given the complex nature of the data described above, attempts should be made to triangulate information across multiple data sources when possible (e.g., aligning evidence of psychological distress in student surveys with an increase in the use of student counseling services). Multiple stakeholders should be involved in the interpretation of data to promote accountability and consensus regarding key themes. Iterative cycles of data analysis and interpretation should begin to reveal some of the underlying causes of ill-being among faculty, staff, and students. In Table 3.4, we provide a list of common types of demands and examples of how they might manifest in these groups.

Table 3.4 Common Demands Facing Faculty Staff and Students

Demand	Faculty and Staff Examples	Student Examples
Workload Quantitative work demands, such as the number of tasks or hours required for tasks; includes workload inequity	Courses taught or managed Clinic appointments, hours spent on team rounds Projects managed Direct reports supervised	Course credit hours Assigned readings or homework assignments in an individual course
Work scope or complexity Qualitative work demands, such as the cognitive or emotional nature of work	Emotionally demanding work (e.g., patient care, advising) Cognitively demanding work (e.g., scholarship)	Emotionally demanding work (e.g., patient care) Cognitively demanding work (e.g., high-stakes exams)
Time pressure Perceptions about the time available for completing tasks	Teaching deadlines (e.g., posting materials, grading) Grant submission deadlines	Assignment deadlines Examination schedules
Role ambiguity or conflict Ambiguous or conflicting information about one's roles	Commitments to practice site versus school Allocation of effort to practice, teaching, research, and service responsibilities	Allocation of effort to studies versus co-curricular and extracurricular activities Conflicts between personal and professional identities
Social or interpersonal conflict Conflict that arises between people or groups of people	Incivility Bullying Sexual harassment Discrimination	Incivility Bullying Sexual harassment Discrimination
Organizational politics Extent to which people engage in self-serving	Opportunities or rewards limited to a small group of influential people	Opportunities or rewards limited to a select group of involved students

behavior, often at the expense of others	Colleagues only helping if they can get something in return (e.g., co-authorship) Limited discourse out of fear of retaliation from leaders	Competitive environments (e.g., student elections, use of class rankings) Limited voice in decisions affecting students (e.g., committees)
Bureaucracy Extent to which work activities are controlled through policies, procedures, or other forms of "red tape"	Policies or procedures that limit autonomy or creativity Difficulty navigating grants and contracts process Difficulty navigating the Institutional Review Board	Difficulty navigating the financial aid system and other administrative processes
Information and communication technology (ICT) demands Demands arising from one's interactions with ICT, such as hardware, software, and media platforms	Managing multiple work technologies, such as various meeting platforms Availability expectations (e.g., responding to email outside typical work hours) Interruptions (e.g., clinical instant messaging platforms)	Navigating multiple learning technologies (e.g., learning management system) Navigating norms for communicating with faculty and staff Interruptions (e.g., instant messages, social media)
Work-home conflict Extent to which demands at work affect one's experiences at home or vice-versa (may also be referred to as work-family conflict)	Parenting or other caregiving responsibilities (e.g., aging parent) Domestic interpersonal conflicts	Parenting or other caregiving responsibilities (e.g., aging parent) Working to support self and/or others Domestic interpersonal conflicts

Whether the demands in Table 3.4 will affect well-being depends in part on the extent to which they represent challenges or hindrances.[34] Hindrances are organizational constraints that cannot be overcome with individual effort (e.g., role ambiguity, social conflict, organizational politics), making them a common source of burnout. Hindrances must be addressed by changes to the work environment, many of which are made at the supraindividual level.[4] However, the relationship between challenges (e.g., workload, time pressure) and well-being is complex. A reasonable level of challenges can be motivating and lead to positive experiences at work or school.[35] However, when challenges become insurmountable, they are just as detrimental as hindrances and can elicit strain in even the most resilient people. Addressing these latter two scenarios requires an adjustment to demands and/or resources, a topic we will return to in *Action Planning* (Section 4).

Finally, a review of the data obtained during the exploration process may reveal deficits in knowledge about well-being as well as resistance from faculty, staff, or students. These provide an opportunity for education and training, a topic we address in *Implementation* (Section 5).

Sharing Findings and Soliciting Feedback

Aside from informing the design and implementation of the school's approach to well-being, exploration also provides a valuable opportunity to share initial findings. These results can be used to garner support from school leaders, demonstrate the organization's commitment to well-being, assure faculty, staff, and students that their voices are being heard, and provide evidence of progress (i.e., creating small wins). Communicating the results of the exploration also provides an opportunity to solicit feedback from a broader group of stakeholders prior to action planning. We share strategies for effectively communicating these findings in *Evaluation* (Section 6).

Section 4: Action Planning

After exploring and identifying the school's unique challenges, attention should turn to action planning. Although the process depicted in Figure 1.3 (also in Appendix 1) can be viewed as an approach to action planning, this section will focus on the use of goals to connect the lessons learned from the previous section to the next two steps of the process—*Implementation* (Section 5) and *Evaluation* (Section 6). We will also introduce an approach to selecting organizational interventions based on the JDR model (i.e., adjustments to demands and/or resources) with a focus on those expected to have the greatest impact.

Determining Priorities

In *Mobilizing for Change*, we made the case for why well-being should be an organizational priority, but we recognize that the exploration process may reveal an overwhelming number of issues affecting well-being. Not everything can be addressed at once and some challenges may be outside the school's scope, making it difficult to know where to start. Prior to goal setting, an important interim step is determining the school's well-being priorities, i.e., the critical areas requiring action. Some direction may come from revisiting the reasons for undertaking this process (e.g., staff turnover, declining student performance). Alternatively, tools of varying complexity can be used for determining priorities, such as an importance-urgency matrix (i.e., a two-by-two grid in which challenges are sorted according to their importance and urgency) to differentiate crises (important *and* urgent) and challenges requiring longer-term solutions (important *but not* urgent) from everything else.[36] Regardless of the approach used, the purpose of determining one's priorities is to identify a few key areas in which actionable goals can be developed.

Strategic communication remains an important part of the process as the organization's priorities and goals are determined. Bidirectional communication helps secure ongoing support from leaders and other stakeholders and demonstrates that their input has been incorporated into the action plan. It may also ease resistance and invite participation from faculty, staff, and students, especially those to whom the intervention will be targeted.

Setting Effective Goals

An important but often overlooked aspect of organizational change is setting effective goals. Although a comprehensive discussion of the science of goal setting is beyond the scope of this guide, we wanted to highlight some aspects of successful goals to support schools in their well-being efforts.[37,38]

First, goals are more likely to be achieved if people are committed to them, reinforcing the value of garnering stakeholders' input and integrating it into action planning.[37] Second, the specificity of a goal is important because it forces planners to identify the strategies necessary for success.[38] Third, feedback facilitates goal success because it provides a measure of progress and whether adjustments are necessary (e.g., increased effort, alternative approaches).[37] Feedback is often framed in subjective terms, but it could also involve objective measures, such as interim changes in well-being measures or the time remaining to successfully accomplish a goal. Finally, challenging goals are more motivating than easier goals, though goal difficulty should be counterbalanced by the belief that it can be achieved (i.e., self-efficacy).[38,39]

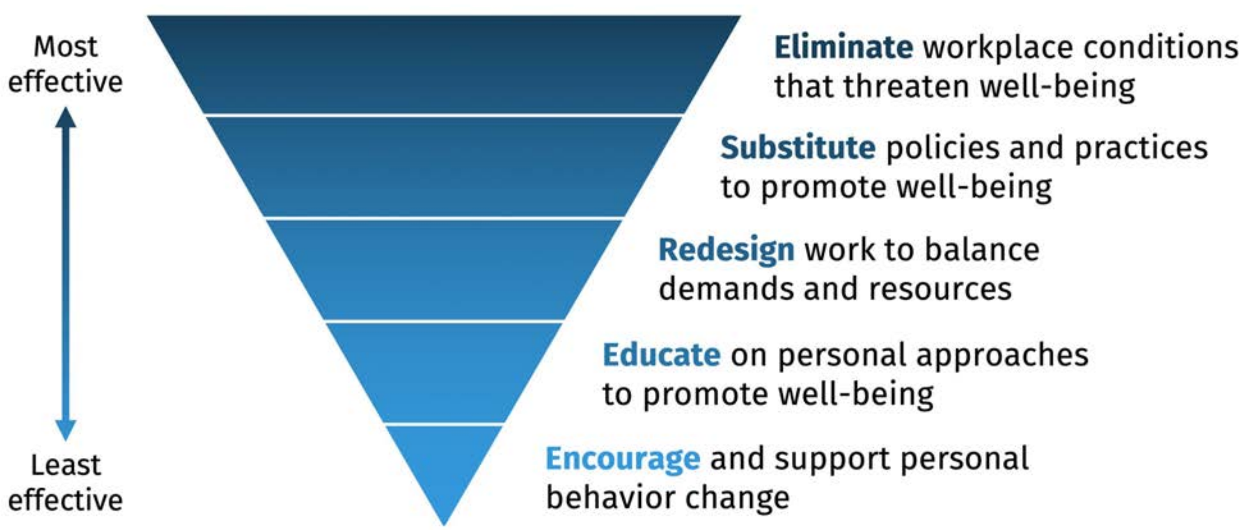
Several frameworks exist for applying the science of goal setting in a practical way. We chose SMART (specific, measurable, attainable, relevant, and time-bound) because of its ubiquity, though many readers may have been unaware of its underlying research support. We address each aspect of SMART below but will focus on specificity and attainability, as the remaining components are addressed in more detail elsewhere in the guide.

Specific

Developing specific goals means aligning one's well-being efforts with the challenges identified during exploration. Whereas some problems may be solved via individual behavior change (e.g., relieving short-term symptoms of stress or anxiety via a consistent meditation practice) or training (e.g., an online module on stress management techniques), most threats to workplace well-being are deeply rooted in organizational life. For this reason, NIOSH advises organizations to focus their efforts on broader-level interventions, such as improving environmental conditions, changing organizational policies and practices, and redesigning work. This framework is referred to as the Hierarchy of Controls model (Figure 4.1) and is intended to help organizations prioritize the most effective strategies for promoting well-being.

Figure 4.1 Hierarchy of Controls for Well-Being Strategies

Adapted from the National Institute for Occupational Safety and Health.



The Hierarchy of Controls approach is also helpful because it can be used to integrate the principles of the JDR model, i.e., addressing threats to well-being by adjusting organizational demands and resources. In *Exploration* (Table 3.4), we listed some of the demands that commonly affect faculty, staff, and student well-being. In this section, we address how those causes of work-related ill-being can be addressed by reducing demands to more reasonable levels, eliminating demands altogether, or counterbalancing demands with resources.[4] By resources, we mean factors like social support (e.g., supervisor or peer support) and making changes to work itself, such as increasing autonomy or improving perceptions of fairness and transparency. Interventions that involve increased resources are generally more effective at improving well-being compared to reducing demands, and they are especially helpful for counterbalancing demands that are difficult or impossible to overcome with increased effort (i.e., hindrances).[4,23,34,35] In Table 4.1, we list common categories of resources and examples of how they might apply to faculty, staff, and student demands.

Table 4.1 Common Resources Available to Schools of Pharmacy (with Examples)

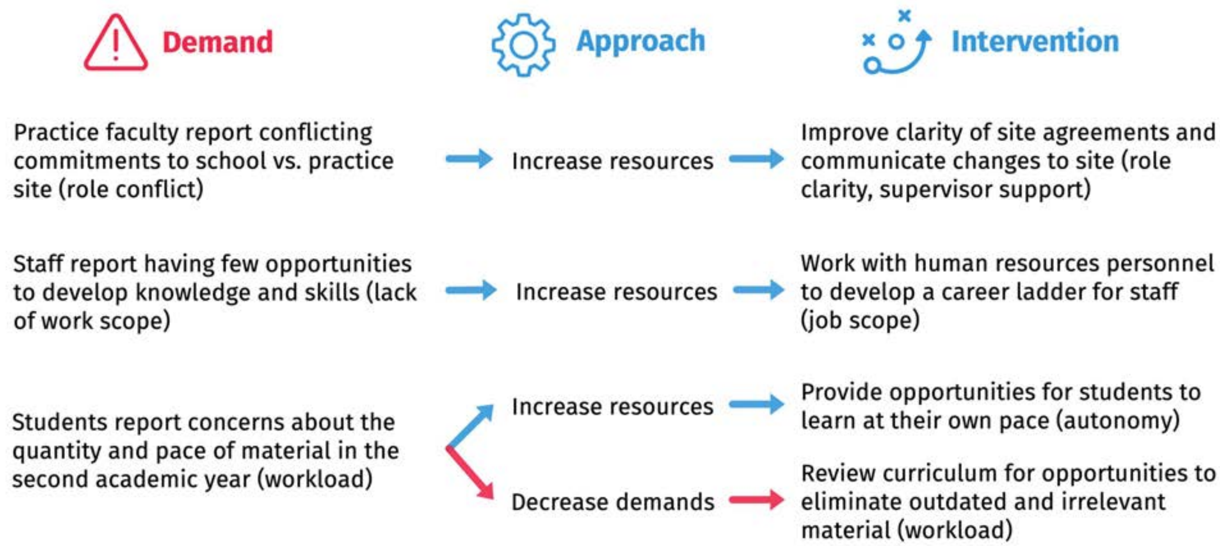
Resource	Faculty and Staff Examples	Student Examples
Autonomy or control Allowing people to make decisions about work (i.e., what to work on and when, where, and how to do it)	Flexible work arrangements (e.g., work from home policies) More voice in organizational decision-making Streamlining policies Archiving outdated policies	Greater flexibility (e.g., self-directed learning) More opportunities for choice (e.g., assignment topics)
Rewards Incentivizing performance (financial or non-financial)	Updating promotion, retention, and tenure processes Recognizing contributions other than scholarship (e.g., excellence in teaching) Creating advancement opportunities for staff Recognizing accomplishments Discouraging overwork	Recognizing accomplishments (e.g., alumni newsletters) Funding scholarships and grants Emphasizing learning over grades (e.g., using pass-fail grading schemes, eliminating class rankings)
Development or training Opportunities to learn and develop knowledge and skills	Leadership training for new administrators Stress management training Career development for staff	Leadership training for new student leaders Elective courses on stress management
Feedback Providing information about performance	Interim performance feedback (i.e., semiannual evaluations) Dashboards to track productivity Gamification (e.g., badges, leaderboards)	Emphasizing formative feedback and other alternatives to grades Facilitating peer feedback Gamification (e.g., badges, leaderboards)
Fairness Perceptions regarding how decisions are made (e.g., distribution of resources) and how people are treated; also referred to as organizational justice	Diverse, equitable, and inclusive workplaces Junior faculty and/or staff representation in organizational committees Strategies for distributing workload equitably Increased transparency in how decisions are made	Diverse, equitable, and inclusive learning environments Student representation in organizational committees Greater voice in decisions affecting students' learning experiences

Social support Support provided by one's social network, including supervisors and/or peers	Mentorship and mentorship training programs Recognizing and incentivizing helping behavior Providing feedback Establishing affinity groups*	Faculty and/or peer mentorship programs Recognizing and incentivizing helping behavior Providing feedback Establishing affinity groups*
Sociotechnical design Designing how people interact with technology	Streamlining the platforms needed for work (e.g., meeting and file storage platforms) Policies addressing electronic communications (e.g., email availability expectations) Hiring instructional designers with technological expertise	Streamlining the platforms needed for learning Establishing norms around electronic communication (e.g., availability expectations)
Teamwork Forming teams or providing opportunities to build cooperative attitudes	Facilitating inter- and intra-departmental collaboration Forming centers or informal collaboratives to pool talent and resources Teamwork training	Instruction on teamwork skills and attitudes Team-based learning Peer support groups
Improvements to physical environment Eliminating hazards and improving comfort	Space for collaborative and individual work Spaces for breaks and social interactions Upgrading physical infrastructure (e.g., offices, bathrooms, nursing rooms)	Space for collaborative and individual work Spaces for breaks and social interactions Upgrading physical infrastructure (e.g., classrooms)

*An affinity group (also referred to as an employee resource group or ERG) is a group formed around a common interest or identity, particularly those that are traditionally underrepresented in an organization (i.e., based on gender, race, sexual orientation, disability, etc.). Affinity groups provide a forum for networking, resource sharing, and discussion about issues facing members of the group.[40]

Except for a few broadly effective interventions (e.g., training leaders on follower-supportive behaviors), resources are most effective at improving well-being when they are appropriately aligned with a corresponding demand.[9,41] For example, providing faculty with more autonomy would be an effective approach if one of the themes identified during exploration was that faculty feel constrained by existing policies. Figure 4.2 provides an illustration of how other problems can be solved by adjustments to demands and/or resources.

Figure 4.2. Addressing Well-Being via Changes to Demands and Resources



We again want to emphasize that demands can be partially offset by personal resources (e.g., developing adaptive coping skills, providing access to mental health resources), but these approaches alone are insufficient for sustainably improving well-being.[13] Long-term improvements in well-being are only possible when personal resources are preceded by organizational resources.[5] Moreover, strategies to build personal resources should not be mandatory, such as requiring faculty, staff, and students to complete a training course on stress management, as doing so adds to workload, compromises autonomy, and hinders people from pursuing approaches that may already work for them. Schools can support individual efforts through policies and practices, however. For example, a school could support psychological detachment after work or school—a type of recovery experience associated with improved well-being—by establishing guidelines for after-hours communication or prohibiting deadlines during or immediately after recognized breaks (e.g., holidays, weekends).[42]

Measurable

An important aspect of organizational change is evaluating whether a new initiative was implemented effectively and had the intended impact. We introduced this concept in the previous section as it pertained to exploring the organization's needs (see Table 3.3), but it is also a foundational part of action planning. Making a goal measurable means identifying the variables by which change will be measured and then obtaining these at baseline and throughout implementation to determine if a goal remains on track.

In terms of selecting the measures upon which goals will be evaluated, some of these may have already been identified during the exploration process, such as baseline assessments of well-being. However, these measures are often crude assessments of well-being and may not reveal much information about the underlying causes of strain. The qualitative data uncovered during exploration may point to additional measures of interest for determining goal success. For example, faculty or staff interviews may reveal interpersonal conflict as a driver of ill-being within their department. To determine whether a goal to reduce interpersonal conflict is successful, baseline and follow-up measures of interpersonal conflict would need to be obtained. Although a follow-up assessment of this goal could entail another round of interviews, changes in interpersonal conflict could also be measured using a validated scale, such as the Interpersonal Conflict at Work Scale (ICAWS). In *Evaluation* (Section 6, Tables 6.1-6.2), we provide a list of tools that can be used in the development of measurable goals.

Attainable
Above we discussed the importance of ensuring that goals are difficult yet also attainable.[37,38] Whereas prioritization focused primarily on the urgency and importance of various well-being efforts, goal-setting involves other key considerations, such as feasibility and sustainability. For schools embarking on this process for the first time, we suggest starting small, i.e., choosing one or two short-term goals that can provide small wins and build momentum and support for the overall change effort. In Table 4.2, we provide considerations for appropriately resourcing an initiative to help ensure its success.

Table 4.2 Considerations for Resourcing a Well-Being Initiative

Category	**Examples**
People	People whose effort has been allocated to the initiative (e.g., well-being champion, task force) Input and participation from faculty, staff, students, and other stakeholders University or campus-level support (e.g., human resources) Community partners (e.g., vendors, speakers)
Expertise	Expertise in data analysis and interpretation Expertise in organizational change processes Mental health professionals
Funding*	Funding for events (e.g., seminars, training workshops) Participant incentives
Physical resources	Space for events Equipment and other materials Recording and broadcasting technology
System support	Leadership support Administrative support (e.g., scheduling) Marketing support (e.g., disseminating information) Assessment support (e.g., survey distribution) Training to develop internal expertise

*Example sources include university or campus-level support, school budget, grants, and sustainable donors

Relevant
As described above, goals are more effective when people understand their importance and commit their time and effort to them.[37] Several of the steps from previous sections can help to ensure the relevance of a goal, such as understanding organizational context (e.g., the school's overall mission and strategy), gathering input from stakeholders (e.g., faculty, staff, and students), and determining the school's well-being priorities. It may also help to revisit the

information gathered during exploration and following up with stakeholders to ensure they see their input emerging in established goals.

Time-bound
Goals should have a targeted completion date, and longer-term goals should also have interim benchmarks to gauge progress. Organizational culture cannot be changed overnight, so it is important to be realistic about timelines to ensure goals remain attainable. Because organizational change can be viewed as a continuous cycle, the attainment of multiple, shorter-term goals can help achieve the broader, longer-term goal of creating a culture of well-being.[39]

Putting It Together
Action planning is crucial to organizational change because it sets the stage for how well-being efforts should be implemented and evaluated (Sections 5 and 6, respectively). To help with brainstorming effective goals based on the information in this section, we outline two examples in Table 4.3.

Table 4.3. Example Goals Using the SMART Framework

Domain	Example 1	Example 2
Theme Identified During Exploration	In response to a decline in NAPLEX scores, the school recently implemented comprehensive, high-stakes exams at the end of each academic year. Students report that having these exams after finals has considerably increased their levels of stress at the end of the year.	During the height of the pandemic, faculty and staff primarily worked from home and developed new routines and schedules. Now that faculty and staff have returned to campus, they report missing opportunities to interact with their colleagues like they had prior to the pandemic.
Specific	Reduce students' reported stress by (1) scheduling high-stakes exams at an alternative time (short-term change), (2) scheduling announcements about the school's mental health resources during high-stress periods, and (3) exploring alternatives to high-stakes exams (long-term change).	Increase perceptions of social support and connectedness among faculty and staff by (1) adjusting the course schedule to ensure a half-hour break in the midmorning and an hour break for lunch, and (2) schedule at least two social events per semester during these break times (e.g., coffee and snacks, catered luncheon).
Measurable	Success will be measured by (1) re-surveying students after changes are implemented to assess levels of acute psychological distress, and (2) the number of respondents who can list mental health support resources provided by the school.	Success will be measured by (1) adding two questions about social support to the annual engagement survey (to gauge changes in faculty and staff perceptions) and (2) by recording the number of attendees at each social event.

Attainable	The goal of reducing students' reported stress is made more attainable by supplementing personal resources (mental health resources) with organizational change (changing the exam schedule and revisiting the school's overall exam strategy). Additionally, separating the goal into multiple steps helps ensure small wins while longer term solutions are explored.	The goal of improving faculty and staff perceptions of social connectedness is made more attainable through organizational change (altering the course schedule) while maintaining autonomy (permitting them to use the time as they wish). Scheduled social events help establish a norm of using these times as a break and as an opportunity to interact with colleagues. An attempt to secure funding will be made by aligning the events with campus goals (see below).
Relevant	The goal aligns with the school's strategies of academic excellence while also fostering a supportive environment for student well-being. Concerns expressed in student surveys are explicitly integrated into the goal.	The goal explicitly addresses faculty and staff concerns. Buy-in from leadership (e.g., funding) will be obtained by demonstrating how this initiative aligns with the university's goal of being recognized as one of the best places to work in the city.
Time-bound	The task force will set deadlines for completing Parts 1 and 3 by the end of the next academic year and Part 2 immediately.	The task force will set a deadline of adjusting the schedule by the beginning of next semester and scheduling the first social during the second week of the semester.

Abbreviations: NAPLEX, North American Pharmacy Licensure Examination

Section 5: Implementation

People are hardwired to protect against uncertainty, which partially explains why organizations are often so resistant to change.[43] This resistance can be eased in part by starting small and producing a few quick wins early in the change process. Examples include confronting "low-hanging fruit" or conducting a pilot program before scaling an intervention up across the school. In this section, we discuss the value of starting small to generate quick wins (even for challenging goals), strategies for successfully implementing a pilot program, managing resistance, and considerations for maintaining and scaling a well-being intervention.

Starting Small to Generate Quick Wins

Quick wins can build momentum for more substantial efforts later in the change process. They can also consolidate support by signaling to stakeholders that their input is being heard. Starting small may seem contradictory to the benefits of setting difficult goals,[37] but just because goals are challenging does not mean that the steps for achieving them must be. Each of these smaller steps provides an opportunity for a quick win. Alternatively, a difficult goal can also be made more attainable by implementing it as a pilot within a single academic department or class of students before launching it school-wide. Pilot programs also provide opportunities to experiment and learn, which can reduce the risk of failure and the opportunity for resistance to escalate. Below we provide a detailed example of starting small to generate quick wins despite a very challenging goal—making faculty workloads more equitable.

Example: Addressing Inequities in Faculty Workload

In previous sections, we noted that interventions to improve well-being often align with an organization's efforts to promote DEI. A pertinent example of this is inequities in faculty workload, as women tend to be assigned more service and mentorship-related responsibilities and members of racially minoritized groups tend to be assigned a greater share of a school's DEI efforts.[31] Although these activities are important, they tend to receive less credit in the promotion and tenure process, reinforcing disparities in the type of faculty who achieve higher academic ranks. As the JDR model predicts, this imbalance of demands and resources (in this case, an imbalance between qualitative workload and career rewards) increases the risk of burnout and other forms of work-related ill-being.[9,31]

Applying the SMART framework from Section 4, an example goal to address this imbalance might be: *Improve perceptions of fairness among faculty by making workload more transparent and equitable by the end of the next academic year*. On the surface, this goal does not provide any obvious opportunities for quick wins. However, a report detailing the results of the Faculty Workload and Rewards Project (FWRP) includes a list of tactics for improving workload equity, several of which can yield quick wins.[31] For example, a workload dashboard, which provides a snapshot of teaching and service commitments for everyone in the department, can increase transparency and highlight inequities warranting additional action. A second example, which could be used to counterbalance these inequities, is a credit swap system—a process that allows faculty to apply alternative yet still important activities (e.g., mentoring student projects) towards their teaching or scholarship workload. Both tactics provide an opportunity to build momentum for implementing some of the more complex recommendations in the FWRP report (e.g., changing norms).[31] The success of both efforts could be further supported by implementing them as a pilot in one academic department or among a small group of faculty before expanding to the entire school. Additional examples of quick wins for challenging problems are provided in Table 5.1.

Table 5.1. Example Quick Wins for Challenging Well-Being Problems

Well-Being Problem	Example Quick Win
Faculty members who have arranged for flexible work (e.g., working from home 1-2 days per week) report that some of their peers see them as being less committed to the school and their responsibilities as faculty members.	Support flexible work by making it the default (i.e., anyone can work from home 1-2 days per week), discuss its benefits at an upcoming faculty meeting, and celebrate those faculty members who use it successfully.
Staff report that it is difficult to complete their work because they spend too much time in meetings, some of which are only informational or do not require their participation.	Reduce overall meeting workload by identifying a weekly meeting-free period (e.g., Friday mornings) and changing the default meeting duration in the school's calendar application (e.g., Microsoft Outlook) from 1 hour to 30 minutes.
Major changes have been made to the curriculum to meet accreditation standards, but student leaders report that these decisions were made without their input on how it might affect well-being (i.e., lack of fairness or transparency).	Empower student voice by scheduling town halls with school leaders each semester and adding the student government president as a voting member of the school's executive team.
Students report that the first professional year has become highly competitive, increasing psychological distress and interpersonal conflict during an already challenging academic transition.	Reduce academic competitiveness in the first professional year by eliminating the reporting of class rankings in the transcript portal and move induction into honorary societies to the third professional year.
Students report that they are encouraged by the school's commitment to diversity, equity, and inclusion, but note that they have not seen many examples of it being demonstrated in their everyday experiences.	Embody the school's commitment to these values by holding information sessions on how to form affinity groups and organizing an annual cultural gallery walk, where faculty, staff, and students can showcase items of cultural importance and learn about others' backgrounds.

Applying Implementation Science Principles

Although quick wins are not always possible, applying the principles of implementation science can increase the likelihood that a pilot program will be successful. Below we highlight a few strategies that can help, especially in the early phases of implementation.

- **Think in terms of tasks and responsibilities**, as even simple goals may entail numerous steps. Like goals, the specificity of tasks can help people understand what needs to be done to ensure success. Specificity can also help with dividing and delegating work among task force members. Implicit in this process is determining *who* should be responsible for implementation. Tools such as a responsibility assignment matrix (RAM), also known as a RACI matrix (responsible, accountable, consulted, and informed) can help identify who is responsible for each task.[44]

- **Create opportunities for learning and sharing** by communicating prior to and throughout the implementation process (e.g., educational meetings, town halls). These meetings should be used to obtain feedback—from those implementing the intervention *and* those to whom it is targeted—and as an opportunity to celebrate small wins, build support, and incentivize participation.
- **Provide education and training** to those involved in implementing the intervention. This is different from the education and training that NIOSH cautions against (i.e., education on how to implement personal well-being behaviors; see Section 4 for details). Our use of the term here refers to training people on how to implement the intervention, as there may be gaps in knowledge or skills pertaining to well-being efforts. These gaps may also serve as sources of resistance, a point we will return to later in this section.
- **Monitor the progress of the intervention** to identify potential threats to success (e.g., resistance to change). Like the use of formative feedback in the classroom, monitoring progress provides information on whether the pilot is going according to plan or requires adjustments (e.g., remedial training). As alluded to above, feedback should be collected from a variety of stakeholders to understand how the intervention is progressing and/or how it may be affecting them. Key to this is determining when and how often to perform these formative evaluations. We discuss this further in *Evaluation* (Section 6).

Easing Resistance to Well-Being Efforts

Despite the strategies outlined above, resistance may still occur in response to any major change to organizational culture. In Table 5.3, we outline several common sources of resistance and strategies for easing or countering these concerns.

Table 5.3. Addressing Resistance to Well-Being Efforts

Category of Resistance	Example Statements	Possible Responses
Failure to recognize burnout and other threats to well-being as a problem	"People are just too sensitive." "I handled stress just fine when I was in school [or when I was a new practitioner], so why can't they?" "This younger generation of students just isn't resilient enough."	Discuss the increased complexity of contemporary pharmacy education and practice Share evidence for the lack of support for generational differences (i.e., gaps in knowledge and skills are a function of age or experience and not unique to a specific generation)[45]
Refusal to acknowledge that organizations share responsibility for well-being or see well-being as an organizational priority	"This isn't the school's job." "Well-being is a personal issue." "People should take accountability for their own well-being." "Research [or teaching] comes first."	Share evidence supporting the business case for well-being (e.g., turnover, effects on patient care)[46] Share evidence demonstrating the effects of organizational demands and resources on well-being and academic

	"There are more important issues to address."	outcomes; share guidance from NIOSH[4,10,23] Discuss ways that well-being efforts can align with other priorities
Discomfort with well-being as a cultural value	"Well-being is too personal to discuss at work." "I never talked about this growing up."	Provide coaching and social support Share evidence for detrimental effects of excess stress and burnout[15,41]
Lack of time, resources, or support	"I don't have time to talk about this with my team." "We don't have the money." (e.g., due to declining enrollment) "I don't have support from my team (or institution) to promote well-being."	Share evidence supporting the business case for well-being (e.g., turnover, effects on patient care)[46] Emphasize value of starting small Provide resources from institution and/or professional organizations Use the school's focus on well-being as a recruitment tool
Lack of knowledge or discomfort with engaging in conversations about mental health and other well-being topics	"Where do I start?" "I don't know how to talk about this." "I'm not comfortable with this."	Provide coaching and social support Offer training opportunities (e.g., mental health first aid) Provide resources from institution and/or professional organizations
Negative experiences with prior well-being efforts (or cynicism towards them)	"These interventions never work." "This isn't going to make a difference." "This is just a way for leadership to check a box and say they care about well-being."	Interview about past experiences during exploration phase Engage as a stakeholder in action planning and throughout implementation Emphasize organizational focus (e.g., changes to work environment and policies and practices)

Abbreviations: NIOSH, National Institute for Occupational Safety and Health

Maintaining and Scaling the Intervention

After implementing a successful pilot, the focus shifts to maintaining those efforts or scaling them across the school. Many of the principles of implementation science outlined above will continue to be important during this latter process. For example, progress should continue to be periodically monitored (e.g., pulse surveys, dashboards) to ensure the initiative is on track ahead of a final evaluation of its success (Section 6). Communication is also important as the initiative is maintained or scaled; for example, the success of the pilot can be used to garner additional support and ease resistance arising from other parts of the organization. As we described in *Mobilizing for Change* (Section 2), efforts to make the program a lasting component of organizational culture will be more effective if leaders support it in material ways (e.g., integration into the organization’s strategic plan).

Section 6: Evaluation

The final step of the organizational change process is evaluation, which is important for determining whether change was successful, securing ongoing support, and informing future well-being efforts. Although this section is being presented last, we noted in previous sections that evaluation is an iterative process and has already played an important role in exploring the school's needs (Section 3), developing measurable action plans (Section 4), and assessing progress (Section 5). The purpose of this section is to describe evaluation in greater detail, with a focus on evaluating the implementation of the program (process evaluation) and its success (outcome evaluation). Both types of evaluation follow the same general steps we first described in *Exploration* (Figure 3.1): organization, data collection, data analysis and interpretation, and sharing findings and soliciting feedback. Organization (e.g., what to measure and how) should mostly be complete at this stage, as these decisions were made in *Action Planning* and further refined in *Implementation*. Here we resume with the remaining steps of the process, after making a few recommendations regarding the evaluation team.

Forming the Evaluation Team

The well-being champion (and/or task force) will be primarily responsible for planning and conducting an evaluation of organizational change. However, as we introduced in *Exploration* and have discussed in each section since, it is also important to involve a diverse set of stakeholders to assist with data interpretation. The two most important groups to involve are those who were involved in implementing the initiative and representatives from the groups of faculty, staff, and students to whom the intervention was targeted. Others to consider including in the process are school and student leaders (as they will be involved in implementing long-term changes resulting from the program) and individuals with expertise in data analysis and interpretation to assist in evaluating the effectiveness of the intervention.

Process Evaluation

Although determining the effectiveness of an intervention is important, it is also important to know whether the program was implemented according to plan. In case measures of well-being do not improve, process evaluation helps distinguish whether this may have been due to suboptimal implementation or the ineffectiveness of the intervention itself. Process evaluation can also help identify whether external factors (e.g., changes in the pandemic, contemporary events) may have limited the effectiveness of the intervention. Although formative evaluations (see *Implementation*) can help identify these challenges early, their full effects may not be realized until after implementation is complete.

Process evaluations primarily entail qualitative data (e.g., feedback from those involved in implementing the program and those to whom it was targeted) and descriptive statistics (e.g., extent to which the program was successfully implemented, time required for implementation). For these reasons, many of the recommendations we made in *Exploration* will be helpful here, especially engaging a diverse set of stakeholders and using multiple data sources (Tables 3.2 and 3.3). Because these methods of data collection often take more time and effort (e.g., focus groups, interviews), attention should be paid to workload for both participants and task force members.

Evaluating Outcomes
In *Action Planning*, we introduced the importance of identifying the measures upon which the program will be evaluated. Here we describe that process in greater detail.

Data Collection
Whereas *Exploration* focused primarily on qualitative data collected from focus groups and interviews, outcome evaluation will mostly entail quantitative data. Ideally, measures should be obtained at baseline and follow-up to demonstrate the effectiveness of the intervention. School leaders will likely be interested in how the intervention affected global measures of well-being, such as scores on the Well-Being Index (WBI) or Maslach Burnout Inventory (MBI), but a major disadvantage of these measures is that they rarely provide information on whether a change in scores was due to a specific intervention. Even if a robust design is used (i.e., a controlled trial), these measures often only indicate that *something* worked. For these reasons, we encourage the use of facet-level measures as a supplement to general measures to assess the effects of a specific intervention. For example, if an intervention is made to improve inequities in faculty workload (as described in *Implementation*), the Quantitative Workload Inventory (QWI) would be an acceptable measure for this facet of the work experience. In Table 6.1, we provide a list of measures that can be used for both general and facet-level assessments of well-being.

Another important consideration is whether to use previously validated measures, such as those provided in Table 6.1, or in-house measures developed as part of the organizational change process. Although the latter can be helpful for elucidating experiences for which no measures currently exist, we encourage the use of previously validated measures for several reasons. First, these measures can withstand greater scrutiny, especially in the face of resistance from others in the organization, or if plans are being made to publish one's results. Second, many of these measures have been explicitly linked to well-being outcomes, providing greater support for the intervention if changes are observed. The third reason is entirely practical—the use of existing measures avoids the time- and resource-intensive process of creating, piloting, and potentially validating a new measure.

Table 6.1. Example Validated Measures*

Domain	Category	Examples
Overall well-being Intended to capture respondents' overall experiences	Specific to health professionals	Well-Being Index (link) Professional Fulfillment Index (link) Professional Quality of Life (ProQOL-5) (link)
	General measures	NIOSH Worker Well-Being Questionnaire (link) Workplace Well-Being Questionnaire (link) Job-related Affective Well-being Scale (JAWS) (link)
Stressors Work-related demands that can result in strain if left unmitigated	Social stressors	Interpersonal Conflict at Work Scale (ICAWS) (link) Perception of Organizational Politics Scale (POPS) (link) Workplace Incivility Scale (WIS) (link) Organizational Justice Scale (link)

	Task stressors	Organizational Constraints Scale (OCI) (link) Role Ambiguity and Conflict scales (link) Quantitative Workload Inventory (QWI) (link) Autonomy and other work characteristics (link)
Strains Psychological, physical, or behavioral consequences of excess demands	Psychological strain	Perceived Stress Scale (PSS) (link) Maslach Burnout Inventory (link) Oldenburg Burnout Inventory (link)
	Physical strain	Physical Symptoms Inventory (PSI) (link) Cohen-Hoberman Inventory of Physical Symptoms (CHIPS) (link)
Other measures Other phenomena that may help characterize the experiences of faculty, staff, and students	Positive experiences	Job Satisfaction Survey (JSS) (link) Job in General Scale (JIG) (link) Utrecht Work Engagement Scale (UWES) (link)
	Relationships with the organization	Perceived Organizational Support (POS) (link) Organizational Commitment scale (link) Turnover Intention scales (link)
	Resilience	Connor-Davidson Resilience Scale (CD-RISC) (link) Brief Resilient Coping Scale (BRCS) (link)
	Work boundaries and recovery	Recovery Experiences Questionnaire (link) Work-Family Conflict scales (link)

*Many of these measures were derived (with permission) from a collection compiled by Dr. Paul Spector, a professor and occupational health psychology researcher. Most of them can be used free of charge for non-commercial purposes (e.g., quality improvement, education, research), but the owners should be contacted for other uses. Readers should review the stipulations for each measure prior to using them (available at the links above).

In addition to self-report measures, school leaders may also be interested in whether the intervention changed organizationally relevant outcomes (Table 6.2). Although changes to these outcomes are considerably more difficult to measure, they can provide compelling evidence of a change in organizational culture if they align with changes in self-report measures. Increases in recruitment-related data (e.g., applications to the school's educational programs and faculty and staff positions) are especially persuasive, as they can provide evidence that a school's culture of well-being is observable to outsiders. Even personal anecdotes, such as comments about the school's culture or its efforts to promote well-being, can help tell a compelling story about organizational change, particularly when they accompany improvements in quantitative measures.

Table 6.2. Organizational Outcomes

Category	Example Measures
Well-being	Accidents and other safety reports Health plan use and/or costs Use of fitness center and other campus resources

	Student referrals for counseling services Use of employee assistance programs
Recruitment	Student applications Applications to faculty and staff positions Number of unfilled positions
Withdrawal and counterproductive work behavior	Absenteeism Voluntary student withdrawals Voluntary faculty and staff turnover Reports of theft, sabotage, and other damage Reports filed with human resources (e.g., interpersonal conflict)
Performance	Student academic performance (e.g., exam scores) Graduate hire and residency match rates Faculty grants submitted and/or funded Faculty publications Faculty, staff, and student awards and other achievements Employee engagement surveys

As alluded to in our discussion of process evaluation above, another important consideration when choosing measures is the potential effects on participant workload. Survey fatigue can affect the quality of data in several ways, such as reducing the number of overall respondents or increasing the risk of satisficing (i.e., when respondents put minimal effort into their answers). These threats can be minimized by being judicious in the selection of measures and having fewer qualitative items. Concerns pertaining to workload can also be ameliorated by timing the distribution of surveys apart from other school-wide assessments or finding opportunities to incorporate data collection into existing processes. For example, the first few minutes of a faculty meeting or a student town hall could be dedicated to the completion of surveys. Alternatively, items could be added to faculty effort reports or integrated into the portal used for collecting students' course evaluations.

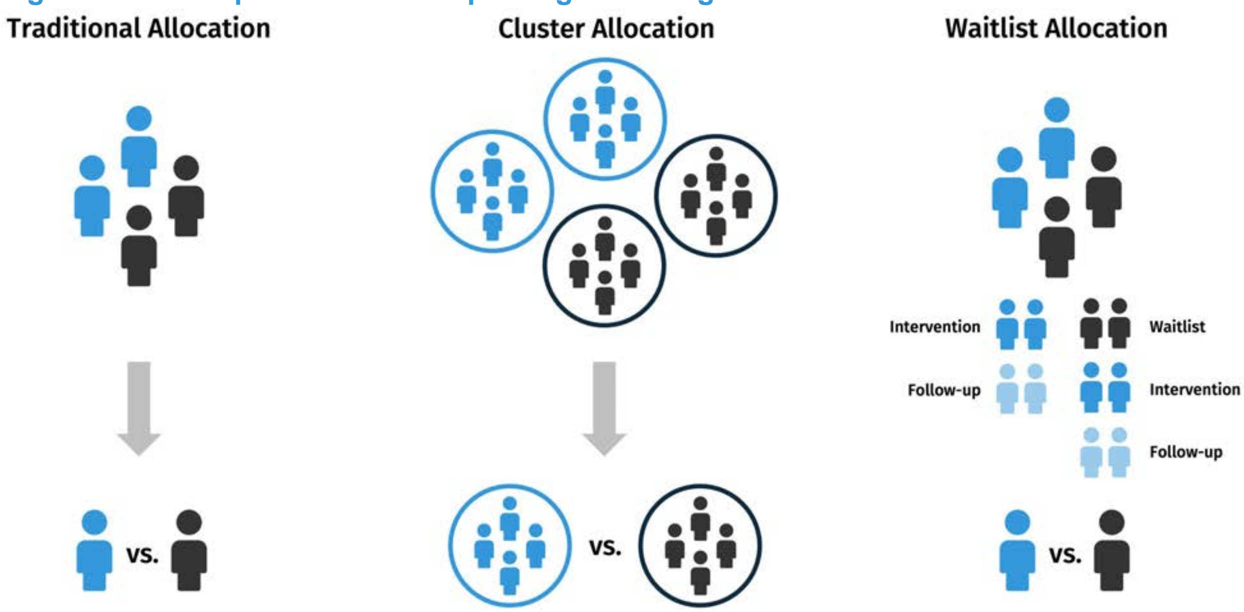
Data Analysis and Interpretation

The effectiveness of an intervention can be analyzed in several ways, each with an added level of rigor. However, the tradeoff for the robustness of an evaluation is greater complexity, which means the evaluation team will need to weigh the level of rigor thought to be necessary for garnering support and/or countering resistance against the feasibility of carrying out the evaluation (e.g., time, expertise).

The easiest approach to data analysis to survey organizational members after the intervention has been implemented and gauge their perceptions of its effectiveness.[29] Unfortunately, this approach cannot distinguish whether change truly occurred and is also subject to cognitive bias (e.g., recency bias, confirmation bias). A more ideal approach—and the reason for emphasizing measurable goals in *Action Planning*—is to survey respondents at baseline and after the intervention has been implemented to assess the change over time (i.e., a pretest-posttest design). Although there are some statistical issues with analyzing change scores that are beyond the scope of this guide, this approach should meet most organizations' needs.[29] As a repeated-measures design, one important consideration is how respondents' scores will be matched across time points if they are participating anonymously. Fortunately, many survey platforms, including Qualtrics XM (Qualtrics; Provo, UT) provide tools for linking anonymous respondents across multiple waves of a survey.

One disadvantage of a single-group, pretest-posttest design is its inability to distinguish whether changes were the result of the intervention or exogenous factors. To overcome this latter challenge, a control group is needed, which can be difficult to facilitate in an organizational setting.[29] Although some interventions are amenable to traditional allocation schemes, a couple of alternative approaches can make control groups more feasible (Figure 6.1). For example, a cluster design can be used, in which the intervention is implemented in only one class of students or in one department. Alternatively, a wait-list approach can be used, in which some participants are assigned to the intervention and others are assigned to a wait-list control group. After the intervention is complete, those in the intervention group enter a passive follow-up phase while the intervention is conducted in the wait-listed group. In all three approaches, data analysis entails a comparison of change scores in the intervention and control groups.

Figure 6.1. Example Control Group Designs for Organizational Evaluation



A question that often arises after the successful implementation of an intervention is whether those results would make a meaningful contribution to the literature. Although additional scholarship is needed in this area, we encourage those interested in publishing their experiences to plan for this a priori through thoughtful study design.[47] First, research should be grounded in theory to help establish a causal mechanism if an effect is observed. For example, the JDR model suggests that an intervention to improve student autonomy (i.e., a job resource) would offset demands and lead to improved well-being (e.g., reduced psychological distress). Second, the intervention should be designed in a way that explicitly tests the theorized mechanism, facilitates the collection of valid measures, and integrates foundational elements of study design. For example, the study could compare students' autonomy and psychological distress using measures from Table 6.1 at baseline and after the implementation of an intervention to increase autonomy (e.g., permitting students to complete a course at their own pace). Finally, evaluation team members should contact their local institutional review board (IRB) to determine whether review or exemption should be sought prior to implementation. Although organizational change initiatives do not require IRB approval, some IRBs may challenge efforts to seek post hoc approval for the purpose of presenting or publishing one's findings after an intervention has already been implemented.

Communicating Results

After analyzing and interpreting data, the final step of the evaluation process is to then share those findings with school leaders and others throughout the organization. Although there is no single "right" way to communicate these findings, below are several tips for sharing these results more effectively.

- **Know one's audience.** Given the variety of stakeholders in an organization, results will likely need to be communicated to multiple audiences. For this reason, the message may need to be tailored differently for school leaders, faculty, staff, and students.
- **Keep the message simple.** Although the evaluation team will be well-versed in the language of organizational change and workplace well-being, others in the organization may not be. Avoid the use of jargon and remember to focus on the big picture.
- **Use figures to illustrate key points**. Some of the analyses described above provide ideal opportunities to share results using charts and figures. Use illustrations to capture the audience's attention and point them to the most important findings from the evaluation.
- **Share stories to bring the data to life**. Most of the effectiveness data will be quantitative in nature, but stories from faculty, staff, and students can help bring those data to life and vividly illustrate what changes in organizational culture feel like.
- **Collect feedback**. As illustrated by the above point, communicating results is not a one-way conversation; instead, it provides an opportunity to learn how the intervention has impacted faculty, staff, and students. Ask them if the results of the evaluation align with their everyday experiences and how ongoing efforts could further promote their well-being. Like the data collected during the exploration phase, feedback should be used to inform future work so that faculty, staff, and students feel like their voices are being heard.

Reminder: Culture Change Is an Ongoing Cycle

A final point we want to return to here is the importance of viewing organizational change as a cycle. Given the complexity of pharmacy education and the many factors affecting faculty, staff, and student well-being, it is very possible that one's initial efforts may not be successful or may not have yielded the magnitude of benefit expected. However, we encourage well-being champions and others involved in cultivating a culture of well-being to not lose heart, as even an ineffective intervention can still be successful in multiple ways—from providing opportunities to experiment and learn (which can then be integrated into future efforts) to building support for well-being through the involvement of faculty, staff, and students throughout the organization.

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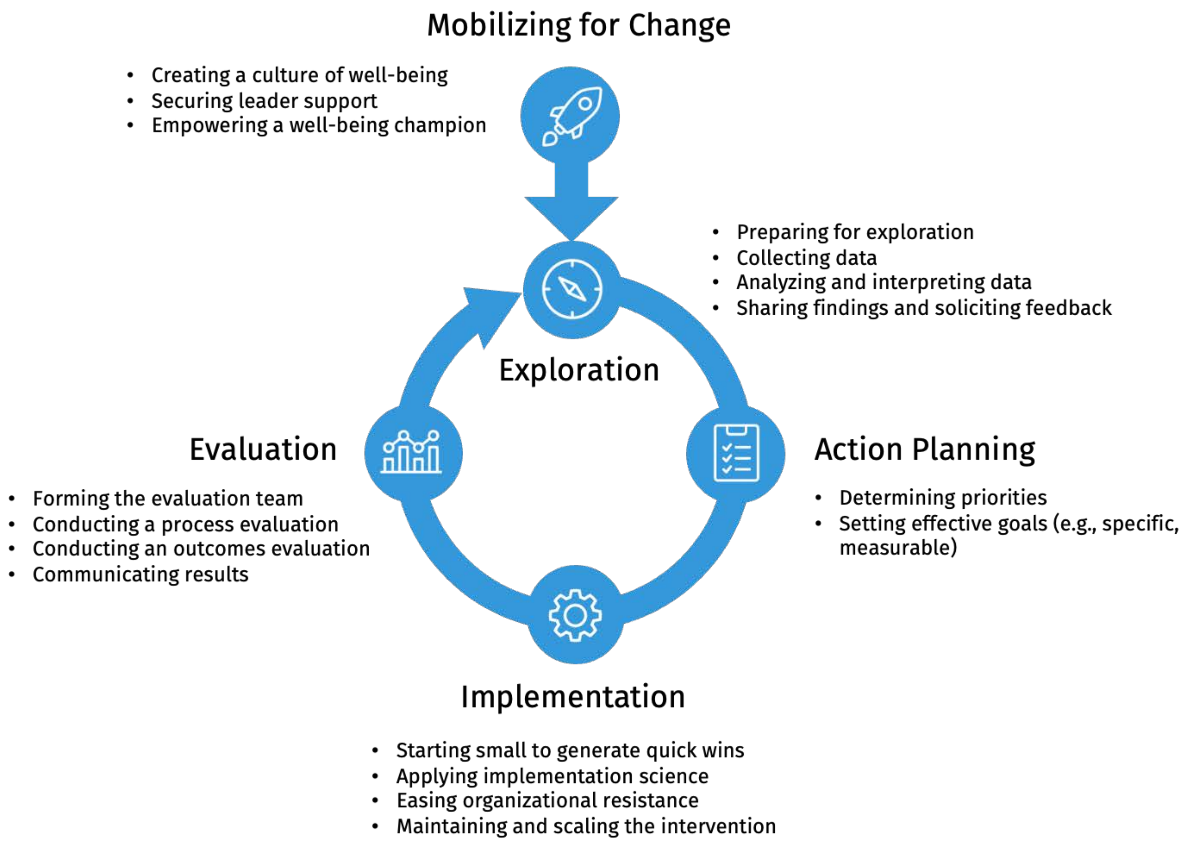
Appendix 1. Organizational Change Process

Below is a detailed figure of the organizational change process covered in the resource guide.



Appendix 2. Relevant Well-Being Policies and Recommendations

AACP Policy Statements

AACP affirms that fostering leader, faculty, staff, and student wellbeing is a vital responsibility of the academy and individual schools and colleges. (Source: Academic Affairs Committee, 2019)

AACP believes that all administrators, faculty, staff, preceptors, student pharmacists and alumni should contribute to a culture of well-being in pharmacy education. (Source: Student Affairs Committee, 2018; revised in 2022)

AACP encourages schools and colleges of pharmacy to proactively promote overall well-being for students, faculty, and staff. (Source: Student Affairs Committee, 2017; revised in 2022)

AACP believes that school and college leaders (e.g., deans, department chairs) are responsible for creating positive working and learning environments through an appropriate balance of expectations and resources or support. (Source: Student Affairs Committee, 2022).

Committee Recommendations
2021-2022 AACP Student Affairs Standing Committee

Recommendation #1: AACP should recognize well-being as a core value.

Recommendation #2: AACP should dedicate staff and resources to its efforts to promote well-being across the Academy.

Recommendation #3: AACP should develop a process for collecting and analyzing data on faculty, staff, and student well-being, and provide this information to schools and colleges to support local well-being efforts.

Recommendation #4: AACP should develop programming and resources to assist schools and colleges in implementing organizational strategies to promote faculty, staff, and student well-being (e.g., adjusting workload, providing social support).

Recommendation #5: AACP should advocate that ACPE provide additional guidance to schools and colleges on promoting student success and well-being as required by Standards 14 and 15.

Recommendation #6: AACP should advocate that ACPE include the well-being of faculty, staff, and students as a key element of organizational culture in the next set of accreditation standards (currently Standard 9).

2017-2018 AACP Student Affairs Standing Committee

Recommendation #5: AACP should develop programming and resources to assist schools in developing activities and tools to help students and faculty successfully integrate self-awareness, self-care, well-being, and resilience as part of professional development.

Recommendation #6: The AACP Board of Directors should form a task force to create a white paper on the topic of wellness and resilience and to build related core competencies.

Recommendation #7: AACP should collaborate with other appropriate organizations to train faculty, staff, preceptors, and other practitioners to embrace and teach self-care practices.

Recommendation #8: AACP should partner with other organizations to provide regional training sessions on the topic of wellness and resilience for colleges and schools of pharmacy.
Recommendation #9: The AACP Teachers Seminar should focus on the theme of wellness and resilience.

2016-2017 AACP Student Affairs Standing Committee

Recommendation #1 - Wellness: [Include] programming on stress management at AACP Meetings.

Recommendation #2 - Wellness: Include a mindfulness/stress management tip in each issue of Academic Pharmacy Now.

Appendix 3. Example Well-Being Champion Job Descriptions

Example 1. Director of Well-Being

Adapted from a job description at the University of North Carolina Eshelman School of Pharmacy.

Organizational Structure:
The Director of Well-Being is a [%] administrative appointment for a faculty member. The Director will work closely with various stakeholders in the school to promote well-being and will report to the [insert position] for their administrative responsibilities.

General Responsibilities:
The Director will be responsible for overseeing, implementing, and assessing strategies that support and promote a culture of well-being within the school. They will oversee the work of the Well-Being Committee, which is comprised of professional and graduate students, faculty, and staff who will be appointed annually. The Committee will work closely with the Director to identify and implement school-wide priorities pertaining to well-being each year. They will also develop interprofessional collaborations with other health science schools at the university.

Specific Responsibilities:
The Director of Well-Being will:

- Support and promote a culture of well-being within the school
- Review and prioritize recommendations pertaining to well-being and develop an implementation plan that is feasible and financially sound
- Collaborate with internal and external stakeholders to develop new ideas warranting further review and discussion
- Oversee the work of the Well-Being Committee and implement shared priorities identified by the Committee
- Oversee the components of the school's strategic plan focused on well-being
- In collaboration with the [Assessment Office], assess the impact of well-being activities and interventions, and monitor trends over time
- In collaboration with the assessment office and other stakeholders, develop an annual report on well-being
- Develop and implement a communication plan for the well-being initiatives
- Contribute to the body of literature on well-being in health science schools by presenting, publishing, and promoting initiatives and work within the school

Faculty with an interest in applying for the position of Director of Well-Being should send their [application materials] to [insert name] by [date].

Example 2. Director of Well-Being

Adapted from a job description at the Southern Illinois University Edwardsville School of Pharmacy.

The Director is appointed by the Dean to provide leadership on matters of well-being in the school and serve as an advisor to the Dean. The core function of the Director is to serve as a key leader for strategy, policy, and practice related to matters of mental health and wellness, while fostering a healthy climate for faculty, staff, and students within the school.

Responsibilities and Expectations:

- Serve as a member of the Dean's Advisory Council
- Serve on the school Well-Being Committee
- Support and promote a culture of well-being within the school
- Review and prioritize recommendations from the Well-Being Committee, and develop an implementation plan that is feasible and financially sound
- Collaborate with the [Student Affairs Office] to coordinate student-oriented well-being initiatives
- Provide regular reports on progress on well-being initiatives to the dean and faculty
- Oversee the components of the school's strategic plan focused on well-being
- In collaboration with the [Assessment Office] and the Well-Being Committee, assess the impact of well-being activities and interventions, and monitor trends over time
- Implement an on-going communications plan for well-being initiatives
- Collaborate with internal and external stakeholders to develop new ideas warranting further review and discussion
- Foster interprofessional collaborations related to the topic with other health science schools.

Example 3. Inclusion and Wellness Coordinator

Adapted from a job description at Manchester University College of Pharmacy, Natural and Health Sciences. Note: This position also involves oversight of the school's inclusion initiatives.

Position Overview:
Reporting to the [Dean of Academic Affairs], the Inclusion and Wellness Coordinator is responsible for developing and maintaining programs and resources to support student wellness and a spirit of inclusion within pharmacy programs. In addition to administrative responsibilities, the Inclusion and Wellness Coordinator is expected to engage in the areas of teaching, scholarship, and service as a faculty member reporting to the corresponding department chair.

Administration (20%):

- Collaborate with faculty, staff, and students to identify students who are struggling with wellness issues (e.g., social, familial, curricular, physical, emotional, etc.)
- Design, implement, and assess programs intended to improve student wellness; support community within the programs; facilitate student success; promote a positive culture; and advance the programs' mission, vision, and strategic outcomes

- Work with personnel in the [Office of Academic/Student Affairs] and University counseling services to determine programming topics that are specific and relevant to student concerns
- Identify appropriate internal and external resources or offices to assist students in their wellness
- Encourage students to seek additional resources based on their situation/issue/challenge
- Work closely with personnel in the [Office of Academic/Student Affairs] and University counseling services to ensure students are directed to appropriate resources
- Design, implement, and assess programs intended to foster and enhance a community of inclusivity
- Work in partnership with the department vice chairs to design and deliver programming to aid in the development of faculty and staff

Appendix 4. Example Items for Interviews and Focus Groups

The following items may be used or adapted to create an interview or focus group guide. Interviews may be conducted with individuals or groups. Focus groups differ from group interviews in that participants of a focus group are encouraged to interact with each other and not just the facilitator. All three forms of data collection follow the same general format: a brief introduction to describe the purpose of the session and any rules or guidelines; an icebreaker activity or introductory question(s) to get participants talking; the main items or questions of interest; and a brief closing (usually an opportunity for participants to share anything the facilitator did not explicitly ask about). Because focus groups are intended to facilitate discussion, the number of items or questions should be fewer in number (depending on the allotted time and number of participants) than those used for interviews. These questions may also be used to construct a qualitative survey, though consideration should be given to the effort it will take for respondents to complete the survey. Some initial exploratory work may be necessary for identifying the specific questions that should be selected for each interview or focus group. Alternatively, these items may be used as follow-up questions based on participants' responses to general questions. Questions are written from the perspective of faculty or staff but can be modified to apply to students.

Example Purpose Statement

The purpose of this interview is to uncover some of the challenges related to your well-being here at the school and ways that we might be able to improve those experiences.

Example General Questions

1. How would you describe your typical level of stress?
2. What do you believe are some of the major causes of your stress at work? How do they affect you?
3. What are the drivers of burnout at our school?
4. What words or phrases would you use to describe how well-being is generally viewed here?
5. What resources already exist to support the well-being of faculty, staff, and students?
6. What resources do you use when you're feeling particularly stressed at work?
7. What role(s) do you believe the organization should play pertaining to your well-being?
8. If one change could be made to improve your well-being at work, what would it be?

Example Questions Pertaining to Specific Demands and/or Resources

1. How would you describe your typical workload?
2. What aspects of your work do you find especially exhausting? Engaging?
3. To what extent does work interfere with your home or family life?
4. How clear are the expectations regarding your work roles and responsibilities?
5. To what extent do your roles and responsibilities conflict with each other?
6. How much control do you have over how you do your work?
7. To what extent are you involved in the decisions that affect your work the most?
8. How do you know when you've done a good job at work?
9. What types of activities get rewarded or recognized here?
10. To what extent are you appreciated by your supervisor? Coworkers? The organization overall?

11. How would you describe the opportunities for professional development here?
12. How would you describe the communication among the people with whom you work the most?
13. How collaborative are people within your department? In other departments?
14. To what extent do people in this organization trust each other?
15. How much conflict do you experience with the people at work?
16. To whom do you turn when you're facing a problem at work?
17. How supportive are your coworkers? Supervisor? The organization overall?
18. How fair are the procedures for making decisions here? What about appealing those decisions?
19. Compared to your coworkers, how fairly are you rewarded or recognized for your work?
20. How fairly are resources or support distributed here?
21. To what extent can you speak up without fear of retaliation?
22. How concentrated is the power here? Is it shared or concentrated in the hands of a few?
23. To what extent do leaders value the input of people throughout the organization?
24. To what extent does the organization's values align with your personal values?
25. In what ways are you expected to compromise or act against your personal values?
26. How comfortable is the physical environment in which you typically work?