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I hate mice. There, I said it. I can't stand mice and I never use them if I can help it. I suffer from a bit of carpal tunnel syndrome, and using mice—even for very short periods of time—causes me pain in my hand and forearm. A good trackball prevents that pain altogether. Instead of moving my wrist all over the place, I can keep it stationary and move the ball around with my thumb and use my other fingers to click the buttons. That's much more comfortable for me. Don't get me wrong, I'm not bashing mice per se. If they work for you, then great. But I would never willingly use one if I had a trackball available. I just wish it didn't seem like that "if" were getting bigger every day. The Tragedy of Logitech's Trackballs started with Logitech's excellent T-CL13 TrackMan Marble Wheel. Unfortunately, Logitech stopped making it and replaced it with an ergonomically inferior model. But the T-CL13 still has a devoted following, and you see it in how much it costs. As I was writing this column, a new Logitech T-CL13 trackball was being sold on Amazon.com for \$179 by one seller and \$299 by another. Talk about gouging the market! But who can blame these sellers? There are only so many of these trackballs around and very few of them are new and unused. After Logitech stopped making the T-CL13 and I needed a new trackball, I tried the replacement model, the Logitech Trackman Wheel Optical. The problem with it is that a hump on it makes it darned uncomfortable during long stretches of work. I don't know why Logitech made the change, but the older trackball was much more usable. Goodbye Logitech, hello Microsoft! Having been driven away from Logitech, I decided to switch to Microsoft's Trackball Optical. I thought for sure I'd be safe, as Microsoft is such a huge corporation and there'd be no problem with its making that trackball forever. Right? Wrong! Microsoft eventually opted to discontinue trackballs, too! Now the last models are also going for huge prices on Amazon: A new one costs around \$278, and a used one about \$129. This means that there aren't many input devices that are ergonomically useful for me. Oh sure, there are other trackballs out there, but none is as good as the older Logitech or Microsoft ones. They didn't push upward into my palm, they made optimal use of the fingers, and had buttons that felt like they were designed for using Exposé on the Mac. Right now I have two functioning Microsoft trackballs—but they're not both in perfect condition. My parrot, Bilbo, got to one of them and did a number on its cord. (He has a fetish for plastic and rubber.) If I get distracted again someday, he may finally be able to finish it off! And then where will I be? Staffing shortages hit technician ranks hardest, putting additional pressure on pharmacists. We do not need to go much farther than the local diner, grocery store, or retail location to recognize that there is a widespread labor shortage. The media have reported for months on the so-called Great Resignation during the COVID-19 pandemic. The health care sector, including pharmacy, has been no exception to staffing shortages. The US Bureau of Labor Statistics indicated in its December 2021 employment report that employment in the health care sector for November 2021 was down by 450,000 individuals since February 2020, an improvement from more than 500,000 in August 2021. However, the results of a recent survey showed that 18% of health care workers quit their jobs during the pandemic and another 12% were laid off. Of those still employed, more than 30% said that they have considered leaving their jobs, and approximately 80% of health care workers said that the national workforce shortage has negatively affected them and their place of employment. 2 The impact of this level of attrition is further exacerbated by a lack of qualified applicants seeking employment; long training lead times; loss of highly skilled and more senior health care workers, who are also needed to train others; and surging demand for health care in both the ambulatory and acute care settings. Increased need for health care services is caused by a combination of COVID-19 and non-COVID-19 illnesses that have led to unprecedented rates of hospital admissions, primary care workload, and urgent-care visits. Patients presenting with non-COVID-19 illnesses are often more acutely ill with more advanced disease processes, which is thought to result from the avoidance of health care and deferral of care since the start of the pandemic. Understaffing at long-term-care facilities (LTCFs) limits the number of patients they can accept, leading to a backup in hospitals who are medically ready for transfer to a LTCF but have no place to go, further exacerbating the critically high census at many hospitals. All of this leads to severe overcrowding of emergency departments, which also are understaffed. Add to the mix another significant surge of COVID-19 illness, affecting mostly the unvaccinated, and most hospitals are facing a true crisis. If we experience a significant influenza season for the 2021-2022 season, because of lower-than-usual vaccination rates, open schools, and a return to large public gatherings, there will likely be severe, widespread shortages of access to acute health care. The combination of staff shortages, very high demand, an increased severity of illness, lack of available beds, and more inexperienced health care workers providing often fragmented and rushed care is negatively affecting the quality of that care. 3 The term perfect storm seems appropriate. Health system pharmacies are no exception to the workforce shortages, with the pharmacy technician ranks most significantly affected. I recently attended a virtual meeting of health system pharmacy executives, and to a person everyone listed technician shortages as one of the top 2 challenges their departments face. As another indicator that the problem is widespread, the American Society of Health-System Pharmacists' 2021 survey of hospital pharmacies included specific questions relative to the severity of and measures being taken to deal with technician shortages. This is not a new problem 4 but it has certainly been exacerbated by the pandemic. The causes include concerns about COVID-19 infection, general health issues associated with the pandemic, lack of recognition and reward, perceived lack of advancement opportunities, relatively low wages, undesirable schedules associated with 24/7 operations, workload stressors, and, for some, health system and state vaccine mandates. Of course, worsening staffing shortages only increase the schedule disruptions, stress, and workload for those remaining, fueling greater risk of attrition due to anger, anxiety, and burnout. Although there are many suggestions about how to improve employee engagement, increase retention, and introduce greater workplace flexibility, 5 they seem a bit absurd to try to implement while the house is burning down. Perhaps the aphorism of trying to "build the plane while flying it" is appropriate? The overworked, underappreciated, and underpaid technician crisis has been brewing for years, but it took a pandemic to expose the potential severity of the issue. In the short term, health system pharmacy leaders are reassigning pharmacists to tasks normally completed by technicians, pulling back pharmacists to support greater operational burdens, and spending money on contract labor and overtime. These are necessary patches, which are probably contributing to decrements in the quality of care, but we all recognize that it will do nothing to solve the issue long term. What is perplexing is where have all the workers gone? And what are they living on? We find ourselves in a position of more proactively reaching out to potential employment pipelines and trying to sell a career as a technician—and maybe we should have been doing this all along. Long term, we are only going to be successful if we make an investment in accredited technician training programs to provide real vocational training leading to board certification, greater advocacy efforts to increase recognition through continuing education and licensure, meaningful career ladders that represent true job growth opportunities, and salary structures that provide a livable wage. Technicians are critical to providing safe medication use systems, and the pandemic has exposed how tenuous technician support can be. Health system pharmacy leaders should act now to ensure that when individuals are ready to return to the workforce, being a technician is an appealing career choice. Patients deserve nothing less. Curtis E. Haas, PharmD, FCCP, is the chief pharmacy officer for the University of Rochester health care system in New York. REFERENCES Employment situation summary. US Bureau of Labor Statistics. December 3, 2021. Accessed December 20, 2021. G. Nearly 1 in 5 health care workers have quit their jobs during the pandemic. Morning Consult. October 4, 2021. Accessed December 20, 2021. health-care-workers-series-part-2-workforce/Wells K. ERs are now swamped with seriously ill patients — but many don't even have COVID. National Public Radio. October 26, 2021. Accessed December 20, 2021. ers-are-now-swamped-with-seriously-ill-patients-but-most-dont-even-have-covid/Chunderlik G, Coughanour J. Pharmacies need to solve workforce shortages. Pharmacy Times®. April 9, 2019. Accessed December 20, 2021. pharmacies-need-to-solve-workforce-shortages/2022 AHA health care talent scan. American Hospital Association. Accessed December 20, 2021. Issue: January 2022

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