Institute for Healthcare Improvement

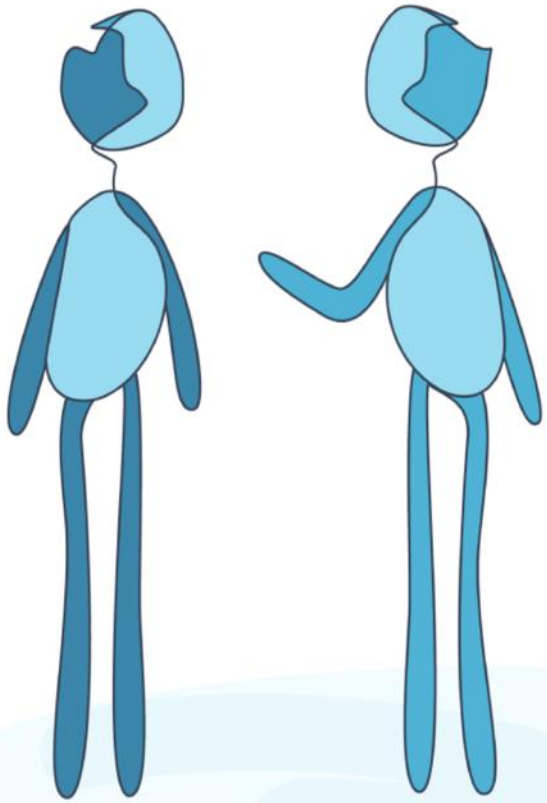
# Victorian Healthcare Worker Wellbeing Initiative

Thought: Julia Skinner

## Start with Bright Spots

# What Matters To You?

- What matters to me is…
- What makes me proud to work here is…
- The most meaningful or best part of my work is…



- When we are at our best, here's what it looks and feels like…
- What brought me to healthcare…
- I know I make a difference when…

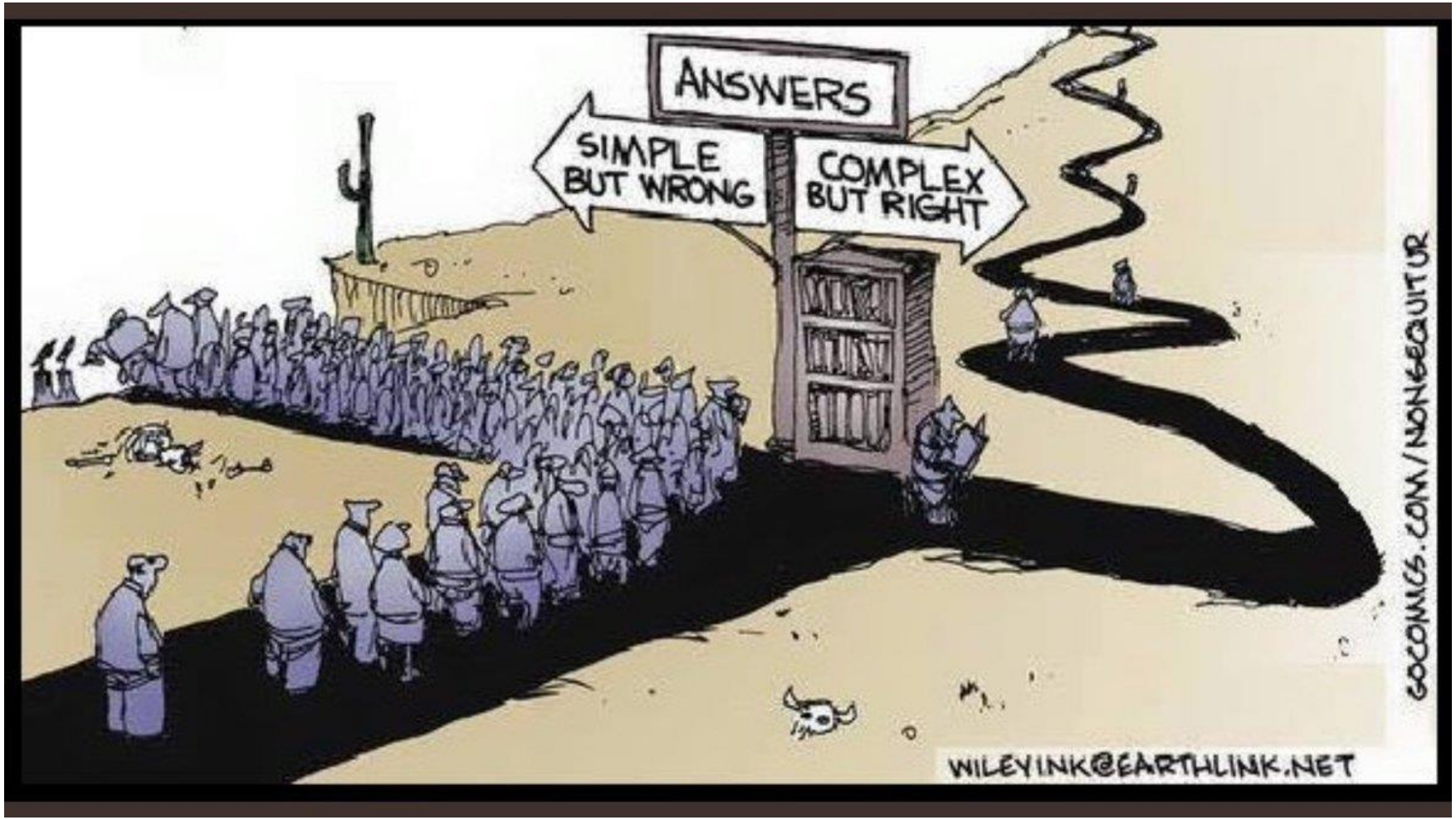
What Matters to You Conversation Guid

Theory
Measurement
Results
Evaluation
Findings

Trust

Change

Joy



# Depletion or emotional exhaustion

# Increased mental distance from one’s job or feelings of negativism related to one's job

# Reduced feelings of personal accomplishment[1]

International Journal of Environmental Research and Public Health

MDPI

*Review*

The Burden of Burnout among Healthcare Professionals of Intensive Care Units and Emergency Departments during the COVID-19 Pandemic: A Systematic Review

Maria Rosaria Gualano, Tiziana Sinigaglia, Giuseppina Lo Moro *, Stefano Rousset, Agnese Cremona, Fabrizio Bert and Roberta

check for updates

Citation: Gualano, M.R.; Sinigaglia, T.; Lo Moro, G.; Rousset, S.; Cremona, A.; Bert, F.; Siliquini, R. The Burden of Burnout among Healthcare Professionals of Intensive Care Units and Emergency Departments during the COVID-19 Pandemic: A Systematic Review. *Int. J. Environ. Res. Public Health* **2021**, *18*, 8172. https://doi.org/10.3390/ijerph18158172

Contents lists available at ScienceDirect

EClinicalMedicine

journal homepage: https://www.journals.elsevier.com/eclinicalmedicine

ELSEVIER

Research paper

Prevalence and correlates of stress and burnout among U.S. healthcare workers during the COVID-19 pandemic: A national cross-sectional survey study

Kriti Prasad[a,b,*], Colleen McLoughlin[c], Martin Stillman[b], Sara Poplau[b], Elizabeth Goelz[b], Sam Taylor[c], Nancy Nankivil[c], Roger Brown[d], Mark Linzer[b], Kyra Cappelucci[c], Michael Barbouche[e], Christine A. Sinsky[c]

[a] University of Minnesota Medical School, 420 Delaware St SE, Minneapolis MN 55455, United States
[b] Hennepin Healthcare, Minneapolis MN, United States
[c] American Medical Association (AMA), Chicago, IL, United States
[d] University of Wisconsin School of Nursing, Madison, WI, United States
[e] Forward Health Group, Madison WI, United States

ARTICLE INFO

*Article History:*
Received 1 January 2021
Revised 15 April 2021
Accepted 16 April 2021
Available online 16 May 2021

*Keywords:*
COVID-19
Occupational stress
Burnout
Nursing
Allied health professionals
Mental health

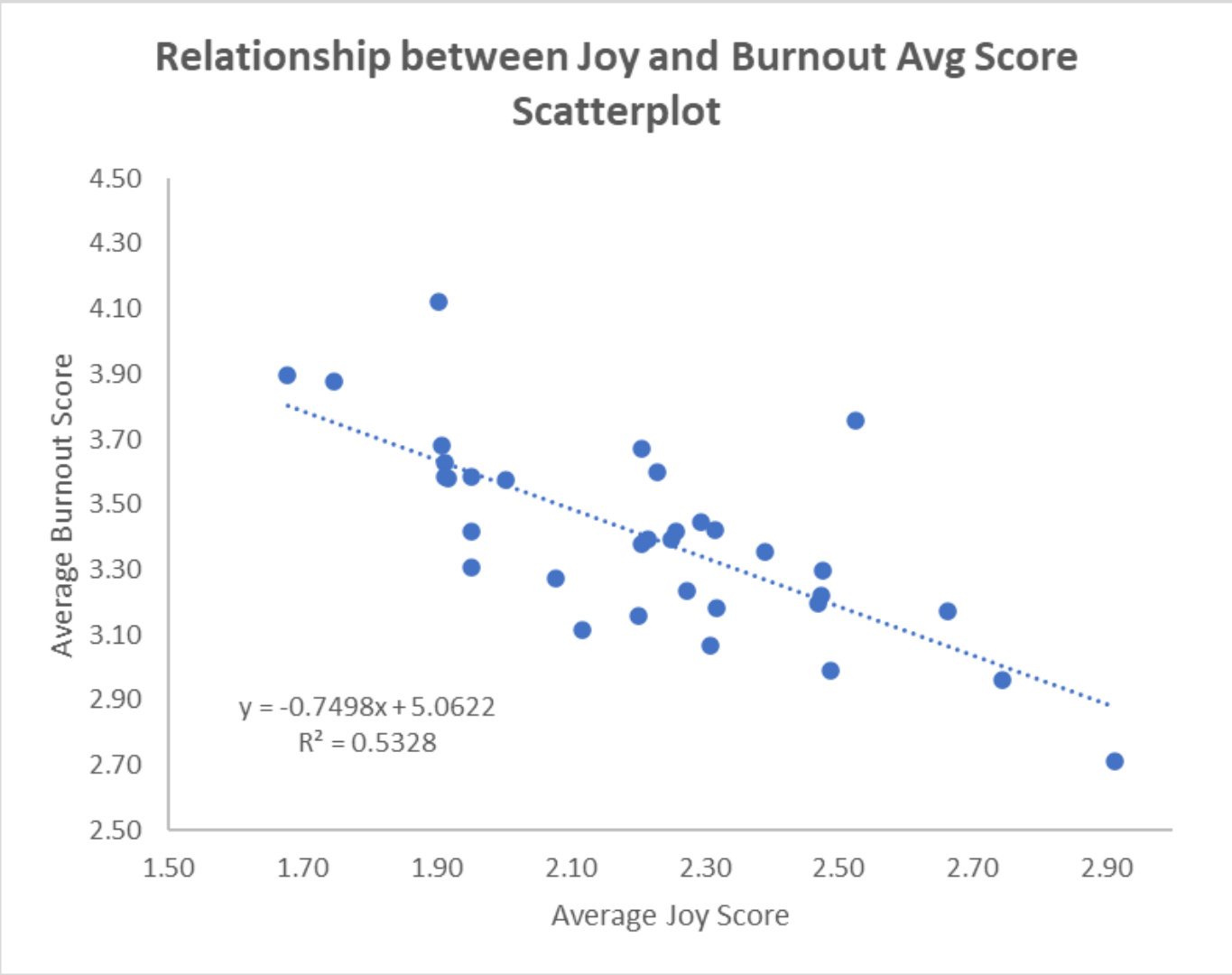
ABSTRACT

*Background:* COVID-19 has put extraordinary stress on healthcare workers. Few studies have evaluated stress by worker role, or focused on experiences of women and people of color.
*Methods:* The “Coping with COVID” survey assessed US healthcare worker stress. A stress summary score (SSS) incorporated stress, fear of exposure, anxiety/depression and workload (Omega 0.78). Differences from mean were expressed as Cohen's d Effect Sizes (ESs). Regression analyses tested associations with stress and burnout.
*Findings:* Between May 28 and October 1, 2020, 20,947 healthcare workers responded from 42 organizations (median response rate 20%, Interquartile range 7% to 35%). Sixty one percent reported fear of exposure or transmission, 38% reported anxiety/depression, 43% suffered work overload, and 49% had burnout. Stress scores were highest among nursing assistants, medical assistants, and social workers (small to moderate ESs, $p < 0.001$), inpatient vs outpatient workers (small ES, $p < 0.001$), women vs men (small ES, $p < 0.001$), and in Black and Latinx workers vs Whites (small ESs, $p < 0.001$). Fear of exposure was prevalent among nursing assistants and Black and Latinx workers, while housekeepers and Black and Latinx workers most often experienced enhanced meaning and purpose. In multilevel models, odds of burnout were 40% lower in those feeling valued by their organizations (odds ratio 0.60, 95% CIs [0.58, 0.63], $p < 0.001$).
*Interpretation:* Stress is higher among nursing assistants, medical assistants, social workers, inpatient workers, women and persons of color, is related to workload and mental health, and is lower when feeling valued.

© 2021 Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/)

1. Maslach, C., et al. (2001). Job burnout. Annu Rev Psychol, 52, 397-422.

# The case for joy in work



# Critical components for a joyful engaged workforce

Choice & Autonomy

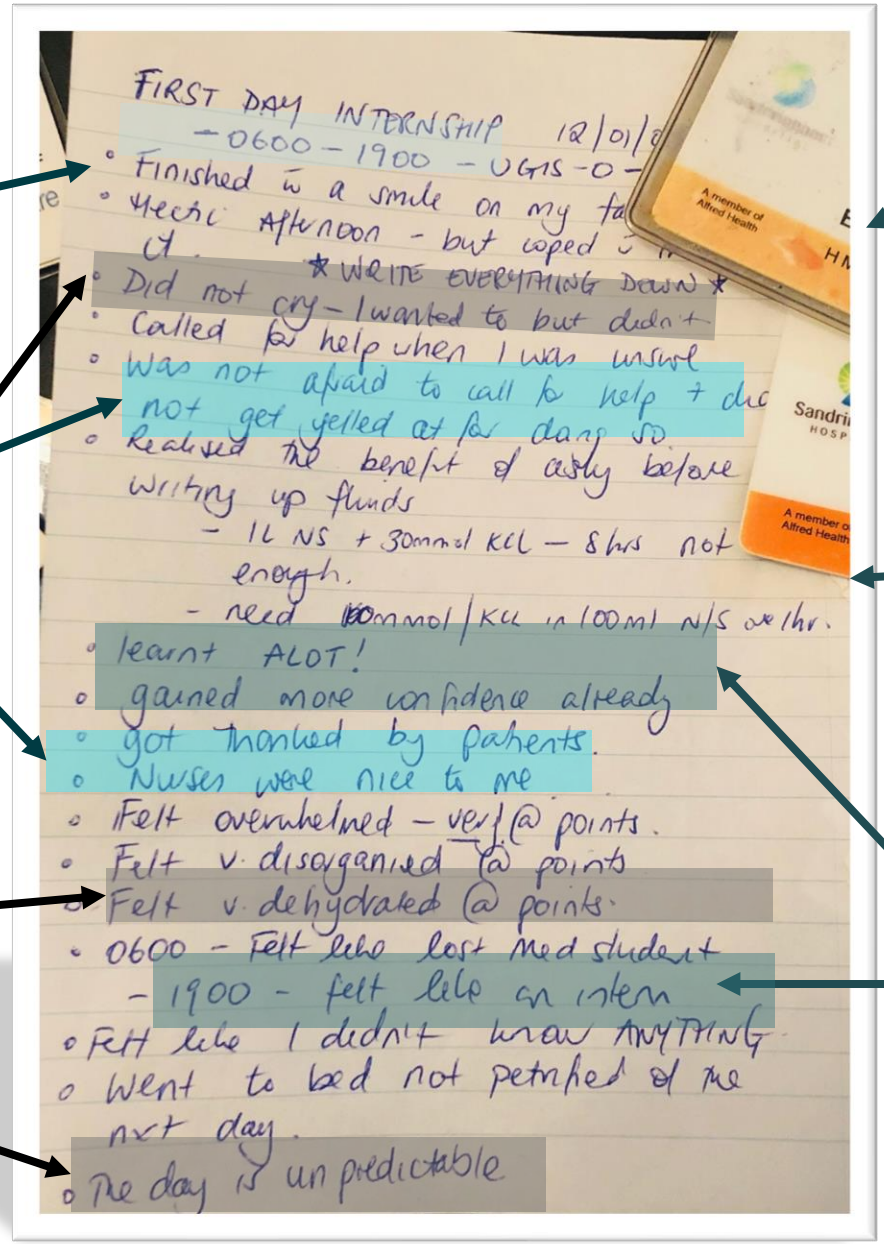
Psychological Safety

Wellness & Resilience

Participative Management

Recognition & Reward

Meaning & Purpose



# The Joy in Work Framework

**4.** Use improvement science to test approaches to improving joy in your organisation

**3**. Commit to making *Joy in Work* a shared responsibility at all levels

**2.** Identify unique impediments to *Joy in Work* in the local context

**1.** Ask staff “what matters to you?”

Source: Perlo J, Balik B, Swensen S, Kabcenell A, Feeley D. *IHI Framework for Improving Joy in Work*. IHI White Paper. Cambridge, MA: Institute for Healthcare Improvement; 2017. http://www.ihi.org/resources/Pages/IHIWhitePapers/Framework-Improving-Joy-in-Work.aspx

# Two Phases of Work

**Phase One:**

**Phase Two:**

# Design

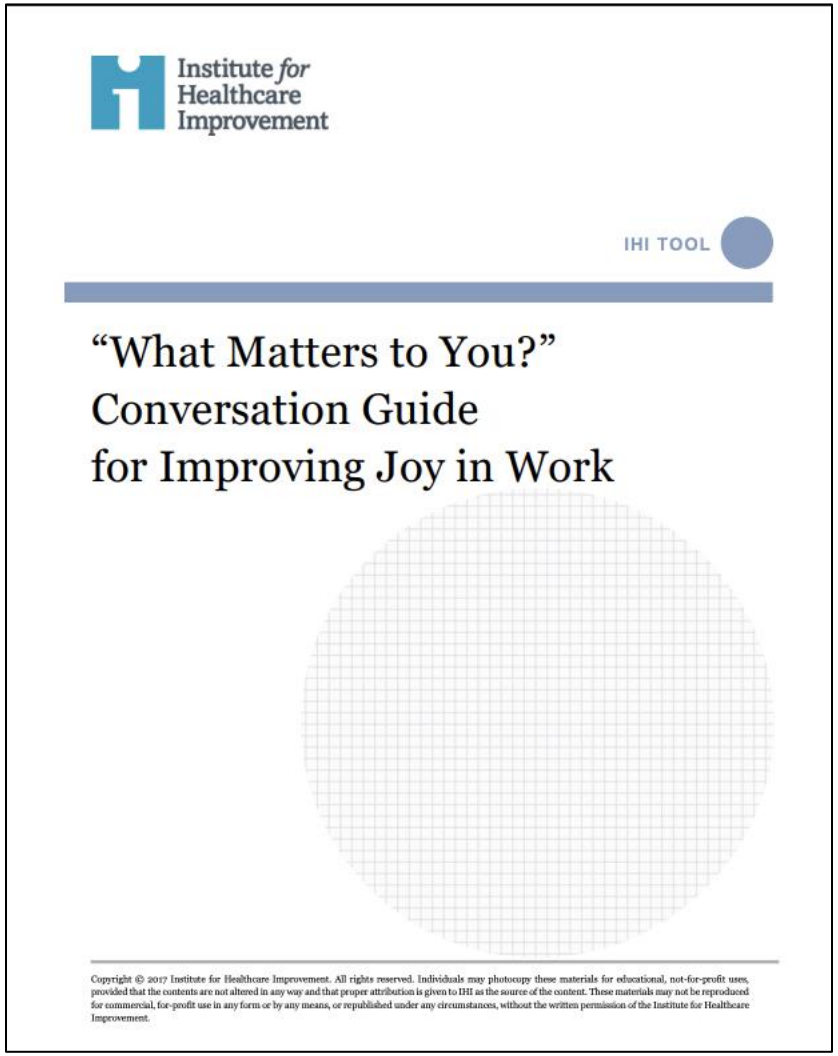
Teams applied the IHI Joy in Work Framework to test changes using PDSA cycles and real-time data.

Kick off event ▶ Learning session 1 ▶ Learning session 2 ▶ Learning session 3 ▶ Showcase event

International expert speakers and facilitated workshops

Coaching calls I Data/collaboration platform

Monthly action period calls  I Team reports I Leadership support




http://www.ihi.org/resources/Pages/Tools/Joy-in-Work-What-Matters-to-You-Conversation-Guide.aspx

**"What matters to you? What makes a good day? When you are feeling your best, what is happening?"**

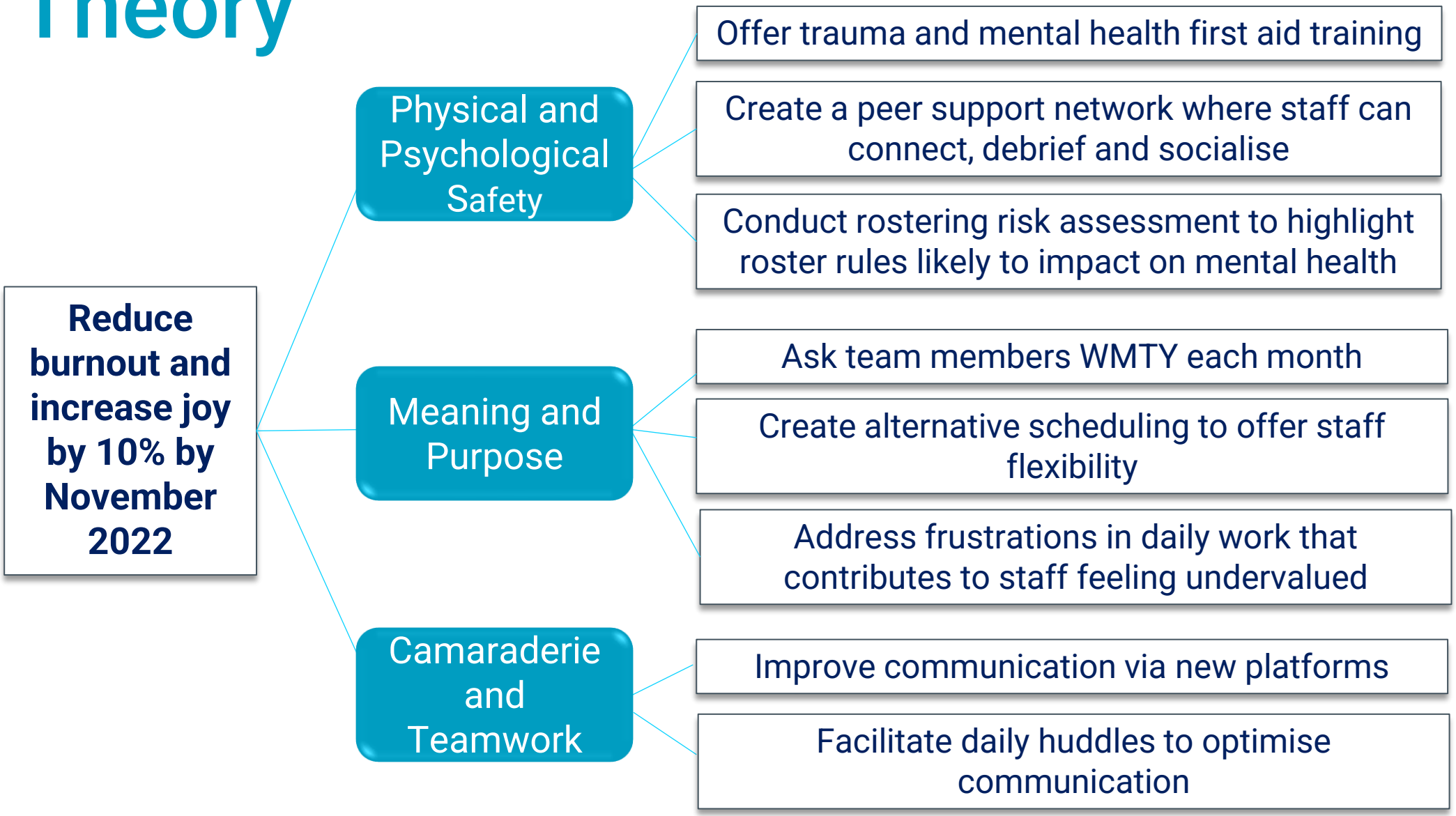
**"What gets in the way of a good day? What are the 'pebbles in your shoes'?"**

Ask the question, listen to the first response, then allow for deeper reflection about the initial comments.

Be comfortable with silence. Practice curiosity. Listen to understand.

You do not have to fix everything now. Understand what matters, then work together to use improvement science tools to address the things that get in the way of what matters.

# Theory


Reduce burnout and increase joy by 10% by November 2022
Physical and Psychological Safety
Offer trauma and mental health first aid training
Create a peer support network where staff can connect, debrief and socialise
Conduct rostering risk assessment to highlight roster rules likely to impact on mental health
Meaning and Purpose
Ask team members WMTY each month
Create alternative scheduling to offer staff flexibility
Address frustrations in daily work that contributes to staff feeling undervalued
Camaraderie and Teamwork
Improve communication via new platforms
Facilitate daily huddles to optimise communication

**100%** Engaged in ***What Matters to You*** conversations with their staff

**86%** Teams measured **staff well-being** throughout the program

**17+** Average **interventions** conducted per team

Teams improved their capability across all **nine QI domains**



# Aggregate measurable

results were achieved across Mini Z survey measures including:

Joy

Burnout

Workstress

Values Alignment

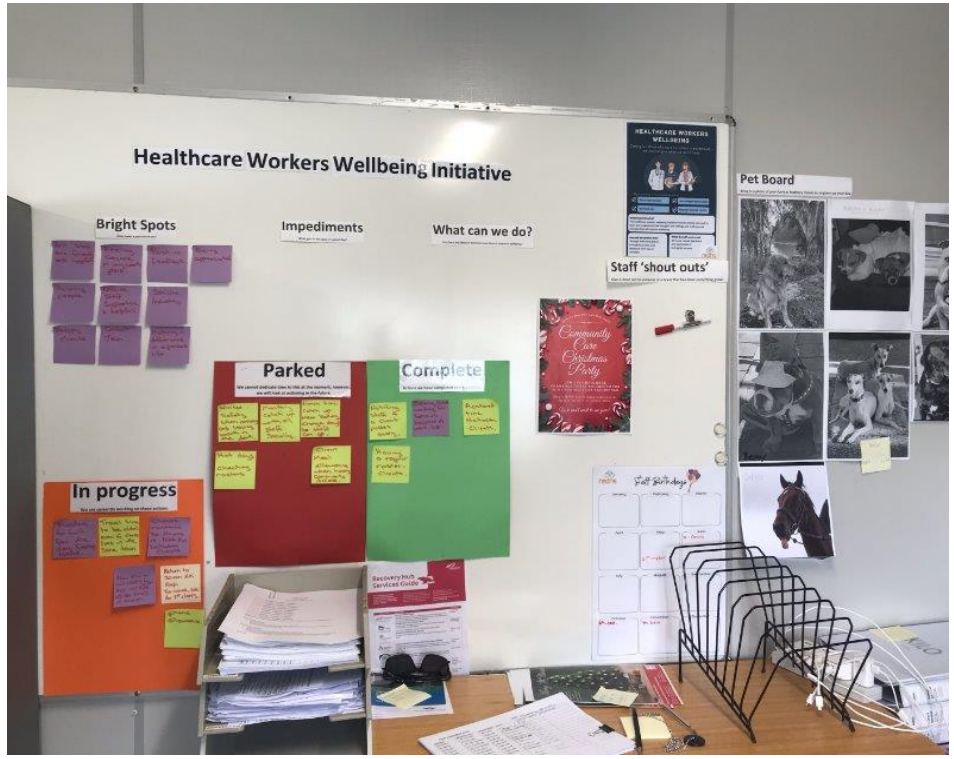
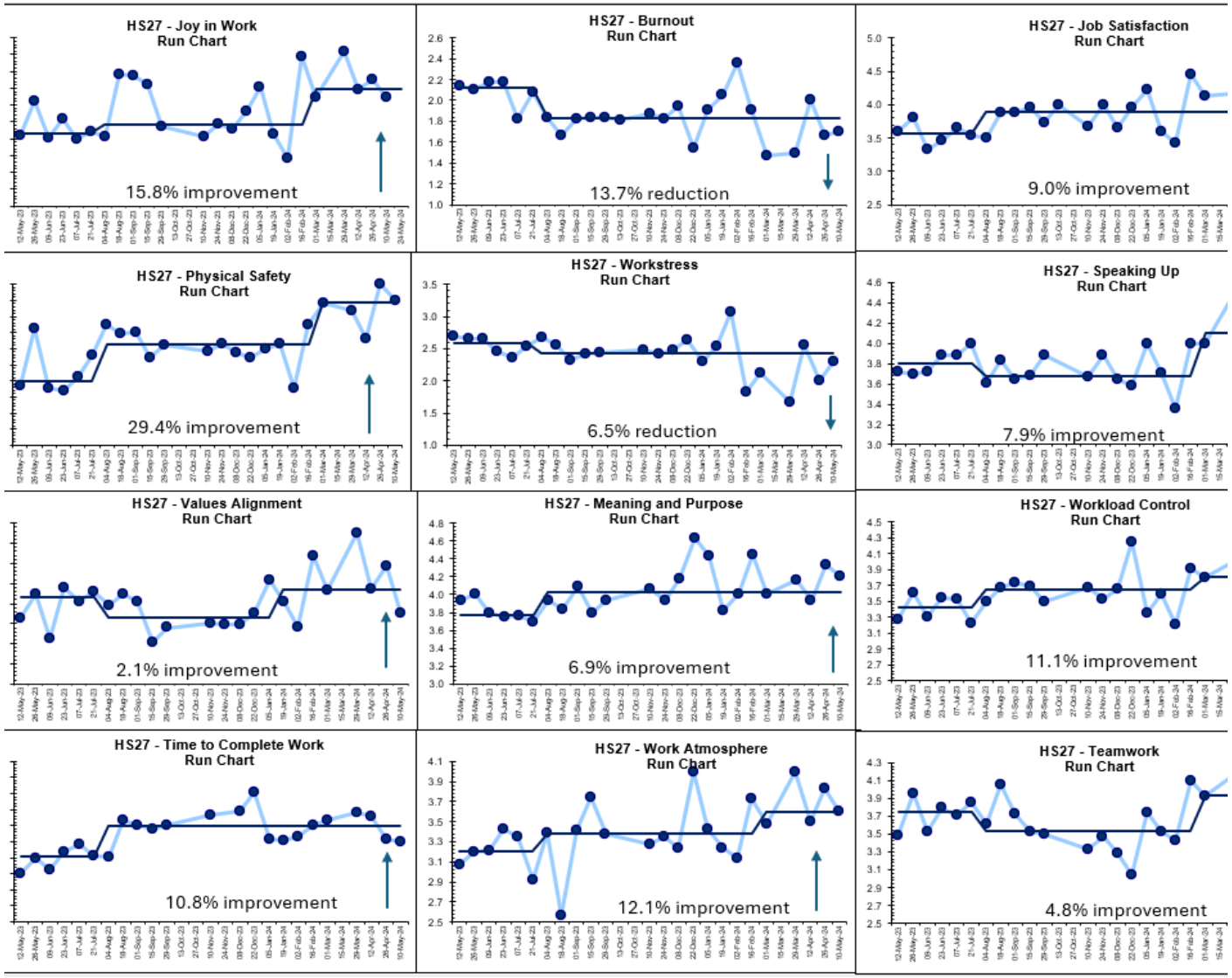
Workload Control

Time to Complete Work

Work Atmosphere

**93%** Of staff reported "joy in work" levels as better or much better

redhs

# Rochester & Elmore District Health Services

*"They make listening to staff a priority and responded quickly to our concerns. They understand how important a manageable workload has on mental health. I feel really well taken care of and supported."*