Recommendations to sustain our humans in healthcare

Words to action, surviving to thriving

Beamtree
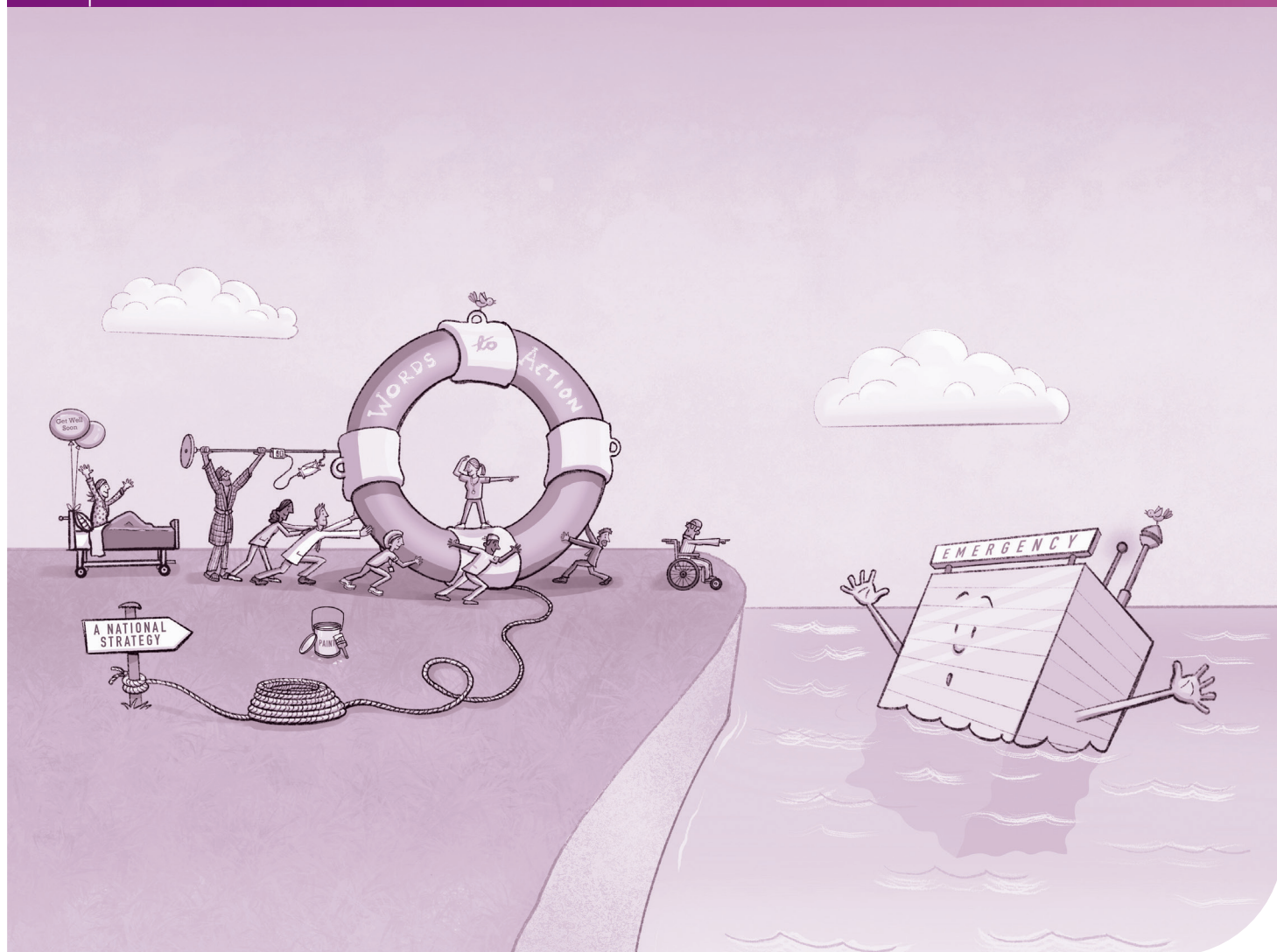
HEALTH ROUNDTABLE

WORDS *to* ACTION
# SURVIVING *to* THRIVING

Introduction

Beamtree in partnership with the Health Roundtable, is delighted to continue to support the healthcare sector through its Workforce Wellbeing Collaborative Program. This program supports healthcare leaders to monitor levels of wellbeing and distress in their workforce and provides a forum for Australian and New Zealand health workforce experts and wellbeing leaders to come together to discuss, share and collate innovation and resources that are working to support our healthcare workforce.

This discussion paper has been developed from the voices of this collaboration to inform discussions at the National Leaders Forum of the Organisational Response to Workforce Wellbeing event being held 11–12 September 2023 in Sydney, Australia. We are proud to have been able to invite Dr Tait Shanafelt, Chief Wellness Officer at Stanford University as the keynote speaker to this event.

It has been recognised that there has never been a more pressing need for healthcare organisations to monitor and support the wellbeing of the workforce. This paper aims to provide actionable items that mitigate burnout and enhance healthcare worker wellbeing in healthcare organisations across Australia and New Zealand.
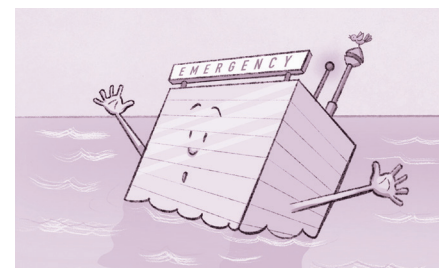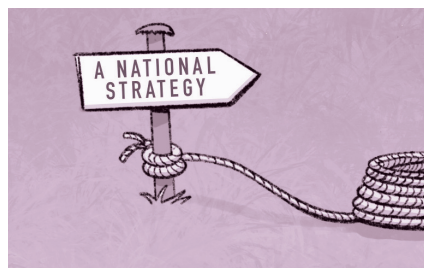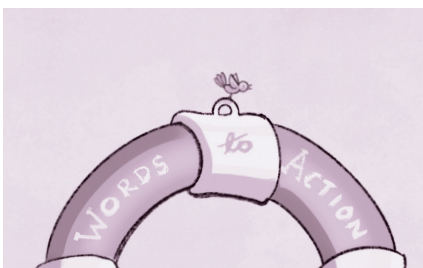
Background

In late 2022, the Beamtree Workforce Wellbeing Collaborative Program team brought together a small group of senior wellbeing experts from across Australia and New Zealand to collaborate on the design of a two-day wellbeing event: Organisational Response to Workforce Wellbeing. The activities commenced with inviting Dr Tait Shanafelt, Chief Wellness Officer, Stanford University and designer of the Mayo Clinic's Wellbeing Index as keynote speaker.

A survey was then designed, implemented and analysed by Dr Bethan Richards, Chief Medical Officer Sydney Local Health District in conjunction with senior wellbeing expert colleagues. The survey was completed by 41 healthcare leaders from various health disciplines and included representation from across all Australian States and Territories, and from New Zealand. Different professions, perspectives and issues captured the diverse and complex range of experiences of the healthcare workforce. Participants provided their insights into the barriers, challenges and successes influencing the wellbeing of healthcare workers.

In June 2023, the Workforce Wellbeing Expert Advisory Group was formed with 35 senior healthcare leaders meeting to discuss the key themes that had emerged from the survey results. The group developed recommendations to address these themes and identify barriers to sustain the wellbeing of the health workforce. The results of these discussions are as follows.

Themes

The survey responses were analysed and seven key themes were identified as barriers to sustaining the wellbeing of the health workforce. Of these seven themes, the following five were explored:

THEMES

1. *Need for a national workforce wellbeing strategy*
2. *Enabling true buy-in from health leaders at all levels*
3. *The importance of an evidence-based approach*
4. *Wellbeing education to effect change*
5. *Where to start? – Resources and personnel*

Two other themes, stigma and an under resourced healthcare system were identified. While acknowledging their critical importance, these themes were deemed beyond the scope of this discussion paper. They require separate, dedicated strategies for effective resolution. The focus of this report was: What can we do now to support the wellbeing of workers within the system? The Expert Advisory Group deliberated on these five themes and formulated a series of recommendations based on their discussions.

"It's the difference between having a string of initiatives that might make a difference, and having a strategy that guides your work."

Dr Maura Kenny

Theme 1: Need for a national workforce wellbeing strategy

1

DISCUSSION: There was robust agreement that a national level workforce wellbeing strategy is needed to ensure a consistent, sustained and unified approach and to off-set the macro-level forces affecting healthcare worker wellbeing. Approached sensitively, members agreed a national strategy has the potential to unite a diverse range of stakeholders towards a common goal and to decrease siloing and segregation between jurisdictions, systems and organisations. For a high-level strategy to be meaningful it would need to have a clear purpose and acknowledge the variation in our different health systems. In Australia, the implementation of an overarching wellbeing framework would offer a unified approach that allows states and territories to adapt it to their specific needs. Local healthcare leaders would be responsible for staying informed about legislation to ensure compliance with relevant regulations and requirements. This adaptable framework would enable a more tailored approach at the local level while maintaining a cohesive national vision for wellbeing. Suggested inclusions for a national strategy:

- *Formation of a national healthcare workforce wellbeing taskforce*
- *Development of a national healthcare workforce wellbeing accreditation program*
- *Key performance indicators to guide implementation and evaluation*
- *Validated measures of workforce wellbeing*
- *Embed a wellbeing governance structure in health organisations*
- *Appropriate wellbeing leads at a senior leadership/executive level within health organisations*
- *Adequate resourcing for development and implementation of the strategy*

These inclusions would provide a foundation for the additional recommendations described in the remainder of the report.

In New Zealand, following the Expert Advisory Group meeting, Te Whatu Ora Health New Zealand released a national workforce strategy 'Health workforce plan 2023/24' aiming to relieve current workforce pressures and meet the challenges of the future. As a part of this strategy, there is clear commitment to focus on the wellbeing of the workforce.

RECOMMENDATIONS

1. *Establish a national workforce wellbeing strategy for Australia*

Theme 2: Enabling true buy-in from health leaders at all levels

2

DISCUSSION: Advisory members recognised adoption and implementation of a national workforce wellbeing strategy would not be possible without the support of leaders at every level of the health system. Finding compelling ways to connect with leaders to secure their understanding and commitment would be essential to the success of the strategy and to the implementation and evaluation of any activities aimed at improving workforce wellbeing. Knowing what levers might achieve or work against this outcome is therefore critical.

Demonstrating the link between wellbeing and accreditation was identified as an important lever. There was overwhelming desire to include wellbeing of the health workforce as a ninth standard of the National Safety and Quality for Health Services (NSQHS) framework in Australia. By establishing a ninth standard for workforce wellbeing, organisations can develop a well supported workforce, enabling them to deliver the highest quality care with a direct positive impact on patient safety.

The power of linking and aligning an organisation's values, mission and purpose to the wellbeing of the workforce was strongly recognised. It was agreed that accountability for wellbeing should be built into existing systems, such as Key Performance Indicators (KPIs) and Board reports. This would allow organisations to understand the cost of not acting, thereby supporting leaders to understand how healthcare worker wellbeing impacts their effectiveness and efficiency and can be linked to retention, productivity and safety. Finding compelling ways to connect with leaders through education and storytelling to grow their understanding and commitment to workforce wellbeing would be advantageous. A customised approach would include conversations that have been tailored to their needs and interests. This meant identifying their levers: patient and family satisfaction, moral obligation, workforce recruitment and retention, finance, health and safety outcomes, efficiency and productivity, etc.

Cont:

# Theme 2: Enabling true buy–in from health leaders at all levels *Cont:*

RECOMMENDATIONS

1. *Inclusion of a ninth standard for workforce wellbeing in the National Safety and Quality for Health Services (NSQHS) framework in Australia*
2. *Align organisational values and develop accountability by linking Key Performance Indicators (KPIs) to wellbeing objectives*
3. *Educate and empower health leaders through the application of professional levers including tailored language and powerful stories*

"If a workplace goes out of its way to actually work out a program of employment that suits workers' needs, they'll feel individually valued, motivated and inspired. An inspired employee will put in 150% because they really enjoy what they're doing and feel appreciated."

Dr Richard Read
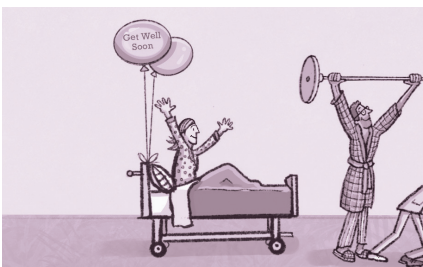
Theme 3: Importance of an evidence-based approach

3

DISCUSSION: Advisory members recognised that to achieve health leaders' commitment and effect change, desired outcomes need to be articulated and measured in the national workforce wellbeing strategy.

A singular, consistent and robust wellbeing data set was deemed essential in the discussion. Anecdotal evidence was recognised as valuable and should continue to be collected, however regular and timely measurement using validated instruments was considered key. It was accepted that no measurement tool can be perfect, but regardless of the chosen instrument, a consistent measure was required. As an example, the Well-Being Index currently has broad use across Australia and New Zealand, with organisations using this tool to monitor the impact of interventions.

In addition, members noted the importance of seeking frontline input into solutions and a need to discover what is working across health services; to look for positive outcomes and interventions rather than focusing on negative assessments. A single national or Australia and New Zealand data set would facilitate further analysis to better understand what is working well in different areas and identify areas for improvement. Discussions also focused on:

- *Measurement of individual wellbeing and its impacts over time*

- *Recognise collecting, and analysing data and generating reports is additional work for staff, and resources need to be allocated to this*

- *Take a 'business as usual' approach to data collection*

- *Make research on workforce wellbeing a priority*

- *Data collected needs to be fed back to frontline staff in a timely and meaningful way for discussion and commitment to improvement activities*

- *Dedicated resources (eg implementation team) to address issues identified in the data will be needed to enable changes to occur over time*

Theme 3: Importance of an evidence-based approach

Cont:

Members also emphasised the importance of purposeful and sustainable measurement. Timely communication of results to both the survey participants and those responsible for resource allocation was understood to be critical to its success. The measurement process should lead to actionable outcomes that address the identified issues. To truly support the healthcare workforce in transitioning from surviving to thriving, we must actively translate words into tangible actions.

RECOMMENDATIONS

1. *Use a consistent and timely, validated measurement tool*

2. *Seek solutions from frontline staff*

3. *Evaluate wellbeing interventions for impact*

4. *Communicate results and ensure resources to act on outcomes*

"In addition to top-down support, it's really important to stay in touch with the people that you're trying to make change for. Check in with frontline staff and make sure what you're doing is sitting well with them."

Dr Joanna Sinclair

Theme 4: Wellbeing education to effect change

4

DISCUSSION: Advisory members identified a range of stakeholders: hospitals, public and private organisations, universities and colleges, professional associations and unions, regulatory and legal bodies, and others who have influence on effecting change through wellbeing education.

The importance of wellbeing throughout a health workers career was discussed, emphasising the need to introduce a wellbeing curriculum at the point of entry into the training environment. There was no known consistent, discipline–specific wellbeing or burnout prevention elements in curriculum to educate people working in health. If this curriculum was developed, it would be important to acknowledge the responsibilities and impacts at the personal, organisational and national levels. It was further recognised that healthcare services would benefit from embedding workforce wellbeing curricula that supports employees at all levels and is completed on a routine basis. Other suggestions supporting this recommendation included:

- *Ensure executive teams in organisations embed wellbeing education in their organisation's strategic plan*
- *Align wellbeing education closely with workplace health and safety goals*
- *Ensure supervisors are trained and capable of supporting staff wellbeing*
- *Focus on practical skills delivery*
- *Ensure suitable spaces are available for staff to meet and connect*
- *Prioritise diversity and inclusion as key drivers for empathy and understanding*

RECOMMENDATIONS

1. *Review and develop a wellbeing curriculum within healthcare professional training institutes and colleges*
2. *Implement healthcare workforce wellbeing curriculum across all disciplines and service providers*

Theme 5: Where to start?
Resources and personnel

5

DISCUSSION: It was widely acknowledged by the advisory group that hospitals are recognising the importance of prioritising workforce wellbeing however, are uncertain about first steps. Despite their willingness to address the issue, there is often a sense of overwhelm and a lack of clear direction about where to start. This hinders leadership efforts to implement comprehensive, effective strategies for improving health worker wellbeing.

To ensure workforce wellbeing is resourced and supported, it was agreed that dedicated wellbeing teams with sufficient resources is essential. Among these roles, a clinician-led director of staff wellbeing (eg Chief Wellness Officer or equivalent) embedded into the executive level of organisational structures, emerged as a key position needed to engage frontline staff and drive meaningful change. This role would work closely with the hospital executive team and be responsible for strategic planning, data review, overseeing implementation of wellness initiatives and linking wellness efforts with organisational initiatives, including staff retention, patient safety, budgets, measures and outcomes. To support the diverse needs of different healthcare staff groups it was recognised there was a need to establish wellbeing teams with senior representation from a range of disciplines and allocated time.

Learning from proven models of success in addressing healthcare worker wellbeing within the Australian and New Zealand health care systems as well as more broadly can help combat the overwhelm and ensure best practice is implemented from the outset.

The discussion also focused on the importance of fostering trust, respect and collaboration between the organisation and their employees, as well as among staff themselves. Organisations need to ensure their workplace culture emphasises connection and belonging – that employees are recognised for their value, have a platform to share their ideas and opportunities to collaborate and co-design solutions at the local level. To support this, there was an identified need to bridge the gap between clinicians and administrators, by breaking down siloes and building networks of support with a sense of shared responsibility.

There was discussion about the need to support the lower-paid workforce whose wellbeing may be impacted by the current cost of living. Additionally, flexible working arrangements, recognition, autonomy and control were seen as key drivers to engage staff, increase retention and improve the wellbeing of the health workforce.

Theme 5: Where to start?
# Resources and personnel

Cont:

1. *Invest in leadership roles that have accountability for healthcare staff wellbeing and empower them in governance structures to effect change*
2. *Cultivate an environment of trust and respect*
3. *Break down silos and build networks based on shared responsibility*
4. *Learn from models that are demonstrating improvements and success at addressing wellbeing to continue to build best practice*

"I think empowering individuals to start in their own backyards is also important – no matter where you are on the hierarchy, you have some degree of influence over the wellbeing of individuals on your level and junior to you."

Dr Caitlin Weston
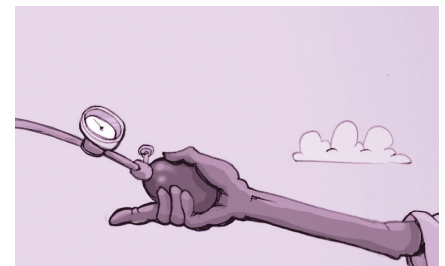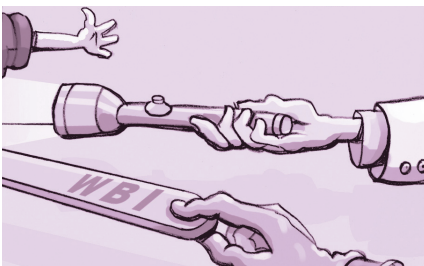
Conclusion

The collaborative efforts of the Workforce Wellbeing Expert Advisory Group have shed light on the pressing challenges faced in promoting workforce wellbeing within the complex healthcare system. Through insightful discussions and collective expertise, the group has identified key recommendations to sustain our humans in healthcare. This discussion paper serves as a pivotal stepping stone towards fostering a supportive and healthy work environment for healthcare professionals. By working together and prioritising the wellbeing of our workforce, we can create a thriving healthcare community, capable of providing exceptional care to both patients and the healthcare workforce alike.
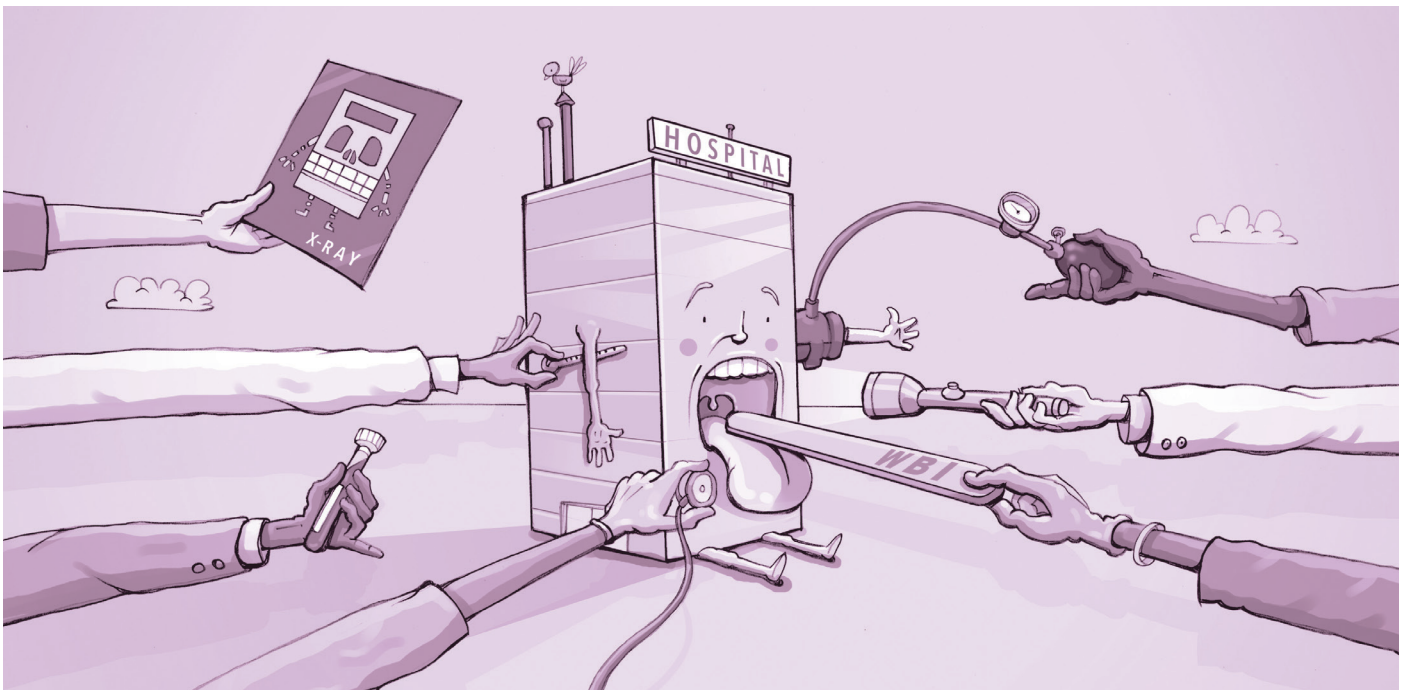
"We need to draw on people who have been able to do what seems impossible ... hospitals that ask people what fits their needs and have found that it's not a barrier to filling rosters but that it takes a different mindset."

Dr Tracey Tay

Acknowledgements

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