Creating Healthy Work Environments in Academia

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Virginia League for Nursing, April 2017
Resilience as a remedy
from Long Island, NY to Niagara Falls, NY
to Bay Area, CA and Quad Cities, IA
MISSION

A cornerstone of the UVA SON Strategic Plan is the Healthy Work Environment (HWE) initiative, which identified statements of exactly what a HWE meant to faculty and staff. Our “compiled wisdom” was organized into five areas—Respect & Appreciation, Communication, Workload, Physical Environment, and Interpersonal Relationships—and became our working statement.
AACN Standards for Establishing and Sustaining Healthy Work Environments

A Journey to Excellence

Authentic
SKILLED
EFFECTIVE
Appropriate
meaningful
true

American Association of Critical-Care Nurses
Statement on a Healthy Work Environment for the University of Virginia School of Nursing 2013

- **Respect & Appreciation**
  - The School of Nursing welcomes and embraces differences in ethnicity, race, culture, gender, sexual orientation, age, religion, occupation, socioeconomic status and perspective (from the SON Mission Statement). Mutual respect and appreciation characterize all relationships within the community, regardless of role or any other descriptors.
  - On a daily basis, we demonstrate appreciation and respect (i.e., basic manners) to all individuals at all levels.
  - We recognize when our co-workers put forth extra effort and when they complete a job well done.
  - We value the importance and contributions of everyone associated with the School of Nursing community and we acknowledge everyone's achievements.
  - We are considerate and understanding of each other's personal and professional lives.
  - We actively and respectfully listen to each voice. While we may sometimes disagree, we remain respectful of differences in opinion and viewpoint.
  - We acknowledge when someone is on the telephone or meeting with someone, and we do not interrupt unless absolutely necessary to do so.
  - We are accountable and reliable, and we strive to earn the trust of colleagues by providing the best service possible.
  - We are respectful of our colleagues and their rights to privacy. We avoid passing along gossip, and we maintain trust by keeping confidences.

- **Communication**
  - We are committed to open, honest, positive, and constructive communication throughout the organization.
  - We always conduct ourselves professionally, and we use proper language, tone, and non-verbal cues to express ourselves to others.
  - We disseminate information (e.g., events, changes, new hires, new positions) to our colleagues in a timely manner.
  - We appreciate knowing the rationale behind decisions that affect us.
  - We are active listeners and respond thoughtfully to questions when in conversation with others.

- **Workload**
  - In a healthy work environment, work responsibilities are engaging, manageable within the work day, transparent, and well-supported with resources. Employees are cross-trained (when appropriate) and...
## Healthy Work Environment Proposed Standards for Academic Settings

<table>
<thead>
<tr>
<th>AACN Established HWE Standard</th>
<th>AACN: Clinical Setting Standard</th>
<th>Proposed Adaptation: Academic Setting Standards</th>
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<tbody>
<tr>
<td>#1 <strong>SKILLED COMMUNICATION</strong></td>
<td>Nurses must be as proficient in communication skills as they are in clinical skills.</td>
<td>Faculty and staff are as proficient in communication skills as they are in their respective academic duties and skills.</td>
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<tr>
<td>#2 <strong>TRUE COLLABORATION</strong></td>
<td>Nurses must be relentless in pursuing and fostering true collaboration.</td>
<td>Faculty and staff are relentless in pursuing and fostering collaboration within and beyond the university.</td>
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<td>#3 <strong>EFFECTIVE DECISION-MAKING</strong></td>
<td>Nurses must be valued and committed partners in making policy, directing and evaluating clinical care, and leading organizational operations.</td>
<td>Faculty and staff are valued and committed partners in implementing shared governance within the school and university setting.</td>
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<tr>
<td>#4 <strong>APPROPRIATE STAFFING</strong></td>
<td>Staffing must ensure the effective match between patient needs and nurse competencies.</td>
<td>Faculty and staff ensure the effective match between the mission of the school and designated employee competencies.</td>
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<tr>
<td>#5 <strong>MEANINGFUL RECOGNITION</strong></td>
<td>Nurses must be recognized and must recognize others for the value each brings to the work of the organization.</td>
<td>Faculty and staff are recognized and recognize others for the value each brings to the work of the organization.</td>
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<tr>
<td>#6 <strong>AUTHENTIC LEADERSHIP</strong></td>
<td>Nurse leaders must fully embrace the imperative of a Healthy Work Environment, authentically live it, and engage others in its achievement.</td>
<td>Faculty and staff leaders fully embrace the imperative of a healthy work environment, authentically live it, and engage others in its achievement.</td>
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<td><strong>Proposed Standard #7</strong></td>
<td>Nurses and nurse leaders must embrace self-care as foundational to the creation of a healthy work environment where patients and clinical partners can thrive.</td>
<td>Faculty and staff engage and are supported in developing self-care as foundational to the creation of a healthy work and learning environment where all members of the academic community can thrive.</td>
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</table>
Nursing, nationally

3,764,491 licensed registered nurses, US
74%
2 to 3 1/2 times more likely
Can’t hide from the sobering facts

• Work force shortage
  – Crisis looming
• Moral distress
• Lateral and vertical violence, i.e. bullying
• Quality & safety
• Attrition/Turnover
• Working wounded
  – BURNOUT
**Burnout** *(Maslach, 1981)*

- **Emotional exhaustion**
  - Emotionally overextended and exhausted by work
- **Depersonalization**
  - Negative, cynical, treating others as objects
- **Personal accomplishment (low)**
  - Feeling inadequate, incompetent, and inefficient
Association between Burnout and Patient Outcomes

- Hospitals with more stressed nurses had higher infection rates
- When burnout was reduced, quality of care and cost improved
  - 30% decrease -> over 6,000 fewer infections and cost savings of $69M

Cimiotti et al., 2012
Nurses who experience burnout...

- Higher number of sick days; miss work due to injury, illness, depression or fatigue
- More likely to have workplace errors
- More likely to be impatient and reactive to fellow colleagues and patients and families
- More likely to change jobs
Cost of Nursing Staff Turnover

2x a nurse’s annually salary for each nurse who leaves

$15M -- annual cost per health care institution as a result of nursing turnover

[Citation: http://www.nmlegis.gov/lcs/handouts/LHHS%20081312%20NursingTurnover.pdf]
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Cimiotti et al., 2012
If we truly practiced with compassion and empathy, what would the health care system look like? How would we be transformed? How might this change the outcomes for patients and families...

Maya Angelou 1928-2014

“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.”
Compassion

...experiencing a trembling or quivering of the heart in response to another’s pain

Sharon Salzburg
Empathy

Putting yourself *in the shoes of another*

A necessary _precondition_ for compassion
What do people see when they see you?

Compassion is a rigorous stance

We live in a time when science is validating what humans have known throughout the ages: that compassion is not a luxury; it is a necessity for our well-being, resilience, and survival.

Roshi Joan Halifax
Qualities Necessary for Compassionate Care

• **Attention/Awareness**
  – Not distracted
  – Keen assessment skills (details and big picture)
  – Recognize concerns and issues of others in order to respond to needs wisely

• **Presence**
  – In tune with your own experience (interoceptivity)
  – Visceral attunement (sensitivity to other’s experience)
  – Empathy and compassion

• **Stress Resilience**
  – Maintaining your own health and well-being while continually giving and trying to meet others’ demands
Qualities of Clinical Excellence

Awareness—Presence—Resilience
Mindfulness

Awareness—Presence—Resilience
Components of Mindfulness

- **Attention**: “Paying attention in the present moment”
- **Intention**: “On purpose”
- **Mindful Awareness**: “Non-judgmentally, with curiosity, openness, and acceptance”
- **Attitude**: Adapted from Shapiro et al. (2006). J Clin Psychol.
“The science of finding focus...”

Health

Immune system

Neuroplasticity

Well-being
How can we get better?
Based on Research  Mindfulness facilitates:

- More Focus
- More awareness of what is around you
- More fully present
- Less rigid in thinking
- Less fearful
- Less stressed out
Resiliency Initiative
The Architecture of Resilience

“...resilient practices -- things like meditation, yoga, reflective writing, deep breathing, even physical exercise -- make for happier, stronger, more centered clinicians.”

D. Fontaine, S. Bauer-Wu, & D. Germano (2014)

http://www.huffingtonpost.com/dorrie-k-fontaine/the-architecture-of-resil_b_4560762.html
A mindful leader embodies leadership presence by cultivating focus, clarity, creativity, and compassion in the service of others.
Mindfulness-Based Stress Reduction (MBSR)

• Developed in U.S. in 1979; original focus to help cope with stress
• Integrated into modern Western medical settings
• Growing evidence that it is indeed helpful in reducing stress and stress-related conditions
  – Improved immune system and less inflammation
  – Improved cardiovascular functioning
  – Less depression relapse
  – Less anxiety and rumination

Founder of the program: Jon Kabat-Zinn, PhD, from the University of Massachusetts Medical School
2365 peer-reviewed articles peer-reviewed research and scholarly articles published between 2010 and 2014 on “mindfulness”

source: American Mindfulness Research Association’s, Mindfulness Research Monthly
47% adults **not focused** on what they’re currently doing *and* **not happy** when mind is distracted

-Killingsworth & Gilbert, 2013
Mindfulness associated with brain regions involved with...

- Focusing attention
- Adapting to unexpected changes
- Monitoring and perceiving the environment
- Perceiving internal body sensations
- Less activation in fear regions
- Less ruminations and distractive thinking

(Jha, Krompinger, and Baime 2007; Slagter et al. 2007; Moore and Malinowski 2009; Lutz, Slagter, et al. 2008; Farb et al. 2007; Brefczynski-Lewis et al. 2007; Jain et al. 2007).
In essence, neuroscience research shows that mindfulness facilitates:

• More focused
• More aware of what is happening around you, and consequently respond wisely
• Be in tune with your body and its needs (and consequently take care of it more wisely)
• More present with others
• Less rigid in thinking
--“Go with the flow”
• Less fearful and stressed out
Reunion Weekend Yoga on The Lawn June 7, 2014
Mind Full, or Mindful?
Mindful clinicians associated with better patient care

- Multi-center, observational study (MD, NP, PA)
- Measures:
  - Patient ratings of quality of care (n=437)
  - Clinician (n=45) encounters recorded and coded into high and low mindfulness
- High mindfulness clinicians associated with:
  - Patient-centered communication
  - Positive emotional tone
- Overall better patient satisfaction
- **No difference in amount/length of biomedical conversation**

(Beach et al., 2013)
Compassionate Care

Resilient Nurses →
Patient and Family (Relationship)-Centered Care
Quality and Safety research

Nurse Satisfaction ↔ Patient Satisfaction

1 point ↑ NS translates to 3 point ↑ PS
How can you be your best self, so you can shine brightly and not burnout?
In Our Unit

The Pause
Jonathan B. Bartels, RN, BSN

A young woman is wheeled into the trauma bay. She’d been crossing a busy intersection at night, clad entirely in black, and was an empty numbness in its place. It is as if our team lost the most important
Self-narratives/mental stories = Stress

• For clinical staff:
  – Concerned that they cannot adequately alleviate patient and family suffering
  – Concerned that they said the wrong thing or did unintentional harm
  – Feeling inadequate or overwhelmed
  – Too much to do, not enough time
  – Personal financial challenges
Self-narratives/mental stories = Stress

• For you/leadership/management:
  – Balancing budget
  – HR issues/concerns
  – Accreditation
  – Etc...
Consequences of Chronic Stress

❖ Physiological
  – Impairment of all biological systems, ↑ illness & aging

❖ Behavioral
  – Impaired sleeping, eating, and activities

❖ Psychological
  – Anxious, irritable, low vitality and creativity

❖ Social/Relational
  – Withdrawn, less tolerant

❖ Spiritual
  – Sense of meaninglessness and despair

❖ Functional
  – Poorer communication, poorer work quality, increased errors, attrition, and burnout
The ability to be one’s best self in the ongoing challenges of being a nurse, physician, or other clinician.

It means thriving— embodying a sense of wellness, connectedness, joy, and meaning—within the everyday work environment.

Bauer-Wu & Fontaine, 2015, GAHMJ
Prioritizing Clinician Wellbeing: The University of Virginia's Compassionate Care Initiative

Priorizaci6n del bienestar del clfnico: caso clfnico organizativo de la Iniciativa de cuidados paliativos de la Universidad de Virginia

Susan Bauer-Wu, PhD, RN, FAAN, United States; Dorrie Fontaine, RN, PhD, FAAN, United States
Meditation $\leftrightarrow$ Medicine

“mederi”

(Latin) to comfort, to heal, to care for
What are we doing at UVA?

Integrating into the Schools of Nursing and Medicine, all of UVA and the Health System

Built a resilience room and contemplative classroom

Free yoga and meditation 5 days a week
What are we doing at UVA?

Formal courses and ones sprinkled throughout curriculum

Resiliency retreats (for every nursing student and those “in the field”)

Compassionate Care “ambassadors”
Healthy Work and Learning Environments

Appropriate Workload
Effective Decision Making
Authentic Leadership
True Collaboration
Meaningful Recognition
Self-care

1) Patient's family is demanding extensive, invasive testing when you know it's medically not indicated.
2) Attending physician is demanding you to give expensive new drug protocol. You know patient's insurance won't cover it so creating pocket money.
3) Colleague verbally attacks you for something you did or didn't do.

Purposeful Pauses

When:
- Underestimates hurt when they're true
- Educated usually handle it okay
- Emotionally aware, sensitive, present

STOP
- Stop thinking about it
- Take a few deep breaths. Let things sink in
- Open eye, close them
- Read a book
- Relax

A Humankind special
Distributed by NPR
Produced by DAVID FREUDERBEG

UVA
How can we get better?
100 square feet of space
Interprofessional. Compassionate. Innovative.
The UVA Way.

I save lives and provide comfort in death.
“We live in a time when science is validating what humans have known throughout the ages: that compassion is not a luxury; it is a necessity for our well-being, resilience, and survival.”

- Roshi Joan Halifax
3 C’s to create more compassion for our world

Consider a contemplative practice
Carve out time for gratitude
*Cultivate a practice of kindness towards yourself and others*
What do people see when they see you?
Compassion

We cultivate kindness and empathy.

Healthy Community
University of Virginia School of Nursing
Please take care of you.
Thank You!

Photo by Larry Bouterie