

# Safe & Sound Campaign

## Did You Know?

**Did you know that leadership and management-level positions are often the key to whether there is a culture of workforce safety and well-being in an organization?**

Addressing workplace safety and well-being depends on your role in the organization.

A [recent study](#) indicates that while physicians and nurses said they want management to address care delivery and nurse staffing issues, 42 percent of physicians and 46 percent of nurses reported lacking leadership confidence. "Close to half of physicians and nurses were not confident that management would act to resolve problems that clinicians identify in patient care, and close to one-third of clinicians reported that their values were not well aligned with those of management."

[IHA reports](#) that approximately half (49.95%) of our Indiana hospital workforce rate their unit/work area positively on "Overall workplace safety for providers and staff," and 64.49% report having one or more symptoms of burnout (of those organizations that completed the AHRQ workplace safety supplemental survey).

Some [research](#) suggests that workers resign because of inadequate pay. Still, other reasons include a lack of career development or advancement opportunities, uncaring or uninspiring leaders, limited workplace flexibility, and, not surprisingly, insufficient support for employee well-being.

[According to the U.S. Department of Health and Human Services](#), "Even before the COVID-19 pandemic, health workers were experiencing alarming levels of burnout - broadly defined as a state of emotional exhaustion, depersonalization, and low sense of personal accomplishment at work. Burnout can also be associated with mental health challenges such as anxiety and depression. In 2019, the National Academies of Medicine (NAM) reported that burnout had reached "crisis" levels, with up to 54% of nurses and physicians and up to 60% of medical students and residents suffering from burnout. The pandemic has since affected the mental health of health workers nationwide, with more than 50% of public health workers reporting symptoms of at least one mental health condition, such as anxiety, depression, and increased levels of post-traumatic stress disorder".

**Please consider these strategies when improving your organization's workplace safety and well-being culture and plan:**

- Assess your nurse-to-patient ratios; [one study finds](#) "physicians and nurses preferred interventions aimed at improving their ability to provide effective care in a positive work environment. Among their priority choices was improved nurse staffing (which was highly ranked by 45% of physicians and 87% of nurses)".
- Other preferred interventions include taking breaks without interruptions, reducing time spent on documentation, improving the usability of electronic medical records, and controlling scheduling.
- Protect time away from work. As recommended by another study on [reducing unnecessary occupational stress in the health care field](#), policy, and culture must support job requirements ending when the shift ends.

According to a [Q&A by Jeff Salvon-Harman, VP Safety, Institute for Health Improvement](#), "We cannot expect highly-qualified professionals to outperform poorly designed systems in any industry, and health care has been slow to invest in systemic change to reduce friction, frustration, and moral distress of its clinical workforce. More demands of individuals in the workforce are made with little alteration in time availability, billing reform, work balance with homelife, workload reduction for increasing complexity of care, or civility in the care environment".

