



Institute for
Healthcare
Improvement

Restoring Joy in Work for the Healthcare Workforce

It's more than just reducing burnout.

If burnout in healthcare were described in clinical or public health terms, it might well be called an epidemic. The numbers are alarming. In a 2015 study published in *Mayo Clinic Proceedings*, Tait D. Shanafelt, MD, and colleagues found that as many as 50 percent of physicians report being burned out (“Changes in Burnout and Satisfaction With Work-Life Balance in Physicians and the General U.S. Working Population Between 2011 and 2014”). Nearly three in four people know someone who has left the healthcare profession because of burnout, according to the Lucian Leape Institute report *Through the Eyes of the Workforce: Creating Joy, Meaning, and Safer Health Care*, published in 2013 by the National Patient Safety Foundation, Boston. Turnover is up, and morale is down.

Burnout affects both the business side of providing care and the quality of patient care. It leads to lower levels of staff engagement, which correlate to lower customer (patient) satisfaction, lower productivity and an increased risk of workplace accidents. The impact on patient care is even more worrying. Lower levels of staff engagement correlate to lower quality patient care, and burnout limits providers’ empathy—a crucial component of effective and person-centered care.

So, what can leaders do to counteract this epidemic? The Institute for Healthcare Improvement, Cambridge, Mass., believes an important part of the solution is to focus on restoring joy to the healthcare workforce.

Why Joy?

Some may think focusing on joy in healthcare—a physically, intellectually and emotionally demanding profession—is a distant goal for many. But focusing on joy is important for three fundamental reasons.

First, focusing on joy, as opposed to focusing only on burnout or low levels of staff engagement, accords with an approach applied to solving many intractable problems in health and healthcare. It’s tempting to analyze a problem by only paying attention to deficits or gaps. But, to get to solutions, it is essential to identify, understand and leverage all the assets that can be brought to bear, and joy is one of healthcare’s greatest assets. Healthcare is one of the few professions that regularly provides the opportunity for its workforce to profoundly improve lives. Caring and healing should be naturally joyful activities. The compassion and dedication of healthcare staff are key assets that, if nurtured and not impeded, can lead to joy as well as to effective

and empathetic care. This assets-based approach to improvement enables people to look at issues from different perspectives, which often leads to designing more innovative solutions.

The sociologist Aaron Antonovsky, PhD, taught us to think of health as more than merely the absence of disease. Health is about coherence, he said—a sense that life is comprehensible, manageable and meaningful. Following Antonovsky’s lead, the second reason to focus on joy in healthcare is because joy is about more than the absence of burnout. Joy, like Antonovsky’s conception of health, is about connections to meaning and purpose. By focusing on joy through improving and enhancing the connections to meaning and purpose, healthcare leaders can reduce burnout while simultaneously building the resilience healthcare workers rely on each day. Again, the goal of this approach is to design innovative solutions by looking at issues from a different perspective.

The third reason for focusing on joy takes us back to W. Edwards Deming. His 14 points for management, first presented in his book *Out of the Crisis*, published in 1982, address joy, but use different terms. Consider, for example, point 11,

“Remove barriers that rob the hourly worker of his right to pride of workmanship,” and point 12, “Remove barriers that rob people in management and in engineering of their right to pride of workmanship.” For Deming, “pride of workmanship” and “joy” were highly related, if not interchangeable. Later in life, Deming promoted the importance of joy with increasing emphasis. In his final lectures, he routinely stated that “Management’s overall aim should be to create a system in which everybody may take joy in [their] work.” Ensuring joy is a crucial component of the “psychology of change,” one of the cornerstones of Deming’s scientific approach to improvement. The concept here is simple: If most people are naturally predisposed to resist change, they will be much more likely to engage in improvement activities if they see that change will lead to joy. In addition to being a core part of his theory of improvement, joy in work, to Deming, was also a fundamental right. It is up to leaders to ensure that workers can enjoy that right.

A Path Forward

As IHI engaged with partners and colleagues in thinking about how to restore, foster and nurture joy in the healthcare workforce, the Institute began to see an evolving path forward, with four key steps.

Step No. 1: Ask staff, “What matters to you?” This step is about asking the right questions and really listening to the answers to identify what contributes to—or detracts from—joy in work for staff. For years now, IHI has been promoting

the transformative provocation, which first appeared in *The New England Journal of Medicine* in a 2012 article written by Susan Edgman-Levitan and Michael J. Barry, MD, to ask patients, “What matters to you?” in addition to “What’s the matter?” Healthcare leaders need to ask the healthcare workforce the same question. Only by understanding what truly matters to staff will senior management be able to identify and remove barriers to joy.

Step No. 2: Identify the unique impediments to joy in work in the local context. Just as answers to the question “What matters to you?” will vary depending on the individual, the system-level impediments to joy will also vary depending on the organization, department, unit or team. Some barriers to joy need to be addressed before others. For example, if physical and psychological safety are not ensured first, then it’s more difficult to improve important elements of joy such as camaraderie, autonomy and connection to purpose.

Step No. 3: Commit to making joy in work a shared responsibility at all levels. Deming said that “quality is everyone’s responsibility.” So, too, is joy. It is everyone’s duty to seek out the impediments to joy and then intervene if possible. One of the best articulations of this idea comes from a video created by LTG David Morrison of the Australian Army and posted on the Army’s official YouTube channel. In the video, Morrison addresses an incident in which demeaning material was distributed among his staff. He uses this incident to teach a larger

lesson: “The standard you walk past is the standard you accept.” Seeing behavior or a situation that prevents staff from experiencing joy in work requires leaders to act. Each allowance, each turning away and ignoring the problem, each instance of explaining, “Well, that’s just the way it is around here,” is an act of approval or acceptance. This third step could aptly be called, “Don’t walk past.”

Step No. 4: Use improvement science to test validated approaches in your organization. There are many validated approaches to restoring joy in work. But, as steps 1 through 3 make clear, context is key. Using the principles of improvement science—creating logic models; implementing small-scale testing of changes using plan-do-study-act cycles—is the key to real and lasting improvements.

The path forward that IHI is proposing is a simple framework that underpins a complex pursuit of joy in work. As with all frameworks, it needs testing. IHI invites organizations to test these four steps and share improvements made and lessons learned. ▲



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