

Wellbeing for Healthcare Workers Initiative – Phase 2

Expression of Interest Information Pack for Applicants

OFFICIAL

Safer Care Victoria is excited to offer Victorian health services an opportunity to participate in Phase 2 of the Wellbeing for Healthcare Workers Initiative (the Initiative). This statewide initiative aims to promote joy in work and decrease burnout to improve the wellbeing for Victorian healthcare workers. Participating teams will use improvement science to identify and implement ideas to create individual and system-level changes.

This document provides information for organisations interested in joining the Initiative. Please read thoroughly before submitting your expression of interest.

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Why participate in the Wellbeing for Healthcare Workers Initiative?

Healthcare professionals have the potential to profoundly improve lives. It is imperative that their wellbeing is restored and/or sustained to enable them to effectively engage in their daily work.

Promoting, improving and maintaining healthcare workers' wellbeing is critical for the functioning of the entire healthcare sector. Clinical research indicates that healthcare workers' wellbeing directly impacts on the health outcomes of the people receiving care. Improved healthcare worker wellbeing leads to safer¹, more efficient² patient care with fewer medical errors and a better patient experience.3

Wellbeing is a complex combination of a person's physical, mental, emotional and

The Initiative aims to improve healthcare worker wellbeing by enhancing the experience of joy at work and decreasing reported burnout. Joy in work is not the absence of burnout or an issue of individual wellness, it is a system property that impacts the intellectual, behavioural and emotional commitment to meaningful and satisfying work⁴. In contrast, burnout is a syndrome resulting from chronic workplace stress that has been unsuccessfully managed. It is characterised by feelings of energy depletion/exhaustion, increased mental detachment from one's job, feelings of negativity or cynicism related to one's job; and/or reduced professional efficacy⁵.

In a recent survey of 7,846 Australian healthcare workers about the impact of the pandemic on frontline healthcare workers, 50 per cent of respondents reported experiencing burnout and anxiety, and a third reported symptoms of clinical depression⁶. Increasing demands on time, work commitment and resources during the height of the COVID-19 pandemic and after have contributed to healthcare workers experiencing burnout at higher rates⁷.

A growing body of literature explores definitions and measures of joy in work, burnout, and wellbeing. While many Victorian health services are undertaking a range of local initiatives and programs to improve staff wellbeing, the Initiative enables health services to use the Institute for Healthcare Improvement's (IHI) <u>Joy</u> in Work Framework and develop high-level skills in quality improvement that are transferrable to all types of health service improvement. Measuring new ideas and strategies to support healthcare worker wellbeing through improvement methodology will assist organisations to understand the impact of their improvement efforts.

The Healthcare Worker Wellbeing Centre (the Centre) was established in 2021 as part of the Victorian Government's Healthcare Worker Wellbeing Package. Led by the Clinical and Professional Leadership Unit

^o Better Health Channel, 'Wellbeing', n.d. https://www.betterhealth.vic.gov.au/health/healthyliving/wellbeing

Shanafelt TD, Balch CM, Bechamps G, et al. Burnout and medical errors among American surgeons. Annals of Surgery. 2010;251(6):995-1000.

² Dewa CS, Loong D, Bonato S, Thanh NX, Jacobs P. How does burnout affect physician productivity? A systematic literature review. BMC Health Services Research. 2014;14(325). http://bmchealthservres.biomedcentral.com/articles/10.1186/1472-6963-14-325

³ Paller DA, Perkins E. What's the key to providing quality healthcare? Gallup Business Journal. December 9, 2004. http://www.gallup.com/businessjournal/14296/whats-keyproviding-quality-healthcare.aspx

sirota D, Klein D. The Enthusiastic Employee: How Companies Profit by Giving Workers What They Want (2nd edition). Pearson FT Press; 2013

World Health Organisation, 'Burn-out an "occupational phenomenon": International Classification of Diseases', 28 May 2019. https://www.who.int/news/item/28-05-2019-burn-outan-occupational-phenomenon-international-classification-of-diseases#:~text=%E2%80%9CBurn%2Dout%20is%20a%20syndrome,related%20to%20one's%20job%3B%20and

⁶ Smallwood, N., Karimi, L., Bismark, M., et. al. High levels of psychosocial distress among Australian frontline healthcare workers during the COVID-19 pandemic: a cross-sectional survey. General Psychiatry 2021;34:e100577. doi: 10.1136/gpsych-2021-100577

⁷ Kaushik D. Covid-19 and Health Care Workers Burnout: A call for global action. EClinicalMedicine. 2021;35:100808.

at Safer Care Victoria, the Centre aims to support the wellbeing of all healthcare workers (clinical and nonclinical), including those in hospitals, community health, aged care and primary care settings.

The Centre partnered with IHI to design and implement the statewide Initiative, allowing health service teams to identify and test new ideas to improve their staff wellbeing. Phase 1 of the Initiative was held from January 2021 to November 2022 and involved 24 teams from TV ictorian health services across different health care settings. Phase 1 results indicate that improvement science is a useful method to enhance healthcare worker wellbeing as participating health services were able to achieve positive measurable impacts using key healthcare worker wellbeing measures.

To continue and expand on this important work, the Centre is ready for Phase 2 of the Initiative and we're seeking 40 health care teams that are committed to improving the wellbeing of Victorian healthcare workers.

What is the Wellbeing for Healthcare Workers Initiative?

The Initiative aims to improve joy in work and reduce burnout by 10 per cent in participating healthcare teams by June 2024. We will support individuals, managers and executives to create, test and adapt changes based upon the IHI's Joy in Work Framework.

Using improvement science, the Initiative will enable your health service team to:

- develop sustainable systems to understand what matters to healthcare workers
- build knowledge and skills in the application of improvement science
- test and implement meaningful and measurable changes to improve wellbeing outcomes for your healthcare workers
- learn and collaborate with other clinicians and subject matter experts.

What support will participating teams need?

Key roles and responsibilities

To meaningfully engage in the Initiative, participating teams will need to identify key roles and responsibilities to support and deliver the work (see Figure 1.). Table 1 outlines key roles and responsibilities.

The Initiative will engage the core team through workshops, all-learner calls, and individual and team coaching. We recommend that an **approximated 0.5-1FTE**, spread across the core team, be appointed to resource the Initiative. More time commitment may be needed at the beginning and is likely to fluctuate throughout the Initiative.

Core team support, coaching and communication

Participating teams will receive support through individual coaching calls providing tailored advice, guidance and support from an experienced improvement coach. The coaching calls will occur virtually monthly.

Group coaching can be offered for small team groups to meet online with an Improvement coach and share

progress updates while learning about other participating teams' ideas and experiences.

Teams will be encouraged to regularly curate and share stories of the work through storyboards and short presentations during all-teams calls and a showcase event, which will facilitate teams to learn from each other, problem solve and generate new ideas for improvement.

Teams will also have access to a shared online platform to enable cross-learning.

The health service team

The health service team is the department, ward, unit, or facility that will participate in the Initiative. They will be asked to complete surveys to measure the impact of change using a tool adapted from the mini-z burnout inventory. The health service team may include healthcare workers from varied disciplines, e.g. cleaning, food service and administrative staff. It is vital that the Initiative is communicated to the health service team via noticeboards, newsletters, etc, to ensure they are informed and able to contribute throughout the Initiative.

Organisation

The governance, administration and financial management of a service unit providing health care

Led by the Chief Executive Officer

Health Service Team

The department, ward, unit or facility that will engage in the Initiative by participating in changes to improve wellbeing and completing surveys to measure the impact of change

Led by the Executive Sponsor

Core Team

2-4 people who lead the health service team to achieve the Initiative aims

Led by the Team Lead

Figure 1: The Initiative team structure

 $^{^{8} \ \}text{Institute for Professional Worklife, 'Mini Z Survey', n.d. https://www.professionalworklife.com/mini-z-survey}$

Table 1: Key roles and responsibilities

Role	Responsibility

Executive sponsor

- Accountable for the organisation's participation in the Initiative, ensuring it aligns with organisational values, the strategic plan, and the delivery of project outcomes (ongoing).
- Visible project champion with the management team and ultimate decisionmaker with final approval on all phases, deliverables and project scope changes.
- Participates in 3 x 60-90 minute online executive sponsor calls throughout the Initiative and attends the kick-off and showcase events in-person.
- Examples of an executive sponsor may include the Chief Executive Officer, Executive Director or Health Service Manager.

Recommended core team member roles (2-3 members to attend all learning

sessions)

Each health service team should appoint 2-4 core team members. We recommend nominating staff with the following roles:

- manager / senior team member/s to provide knowledge and insight from the local work environment and play a key role in linking the core team to the health service team
- human resources / wellbeing representative to provide a connection to high level organisation support, advice and strategies on occupational health and workplace safety issues
- project manager / quality and risk manager to bring project management and/or quality improvement knowledge to drive innovative solutions and data driven outcomes
- other staff with a strong interest in promoting wellbeing who are willing to commit to the work, and test and implement ideas to support wellbeing.

Each core team should appoint the following roles:

- team lead to provide guidance and instructions to the core team and to drive the Initiative work
- data champion to collect, present and analyse data in a creative and engaging way while generating enthusiasm for success and sharing the stories behind the data.

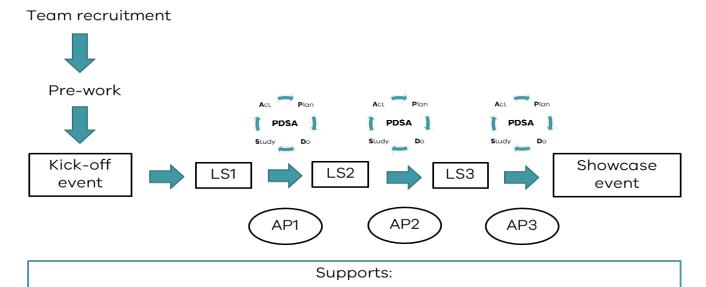
Requirements of the core team

- Attend the in-person kick-off session.
- Attend all learning sessions and all-learner calls during the 15-month period.
- Participate in virtual coaching calls and in-person site visits.
- Collect and analyse survey data to identify areas for improvement.
- Implement, test and refine change ideas within your health service team.
- Report on Initiative measures and share learnings (successes and failures) with other participating teams.

What does participation in the Initiative involve?

Adult learning principles guide the Initiative and participating teams will learn by doing through the IHI's Learning and Action Network approach. As part of this, teams will participate key milestone activities adapted from the IHI's Breakthrough Series model⁹ (See Figure 2). This is intended to support health services to innovate, test and refine new ideas that lead to improvements in their local health service team. An 'All Teach, All Learn' approach¹⁰ will foster a culture of shared learning and collaboration across teams.

Figure 2: Key milestone activities for the Wellbeing for Healthcare Workers Initiative



Learning Session (LS): a regularly scheduled session as part of the Initiative for teams to come together to learn about improvement science and complete practical activities to support the work

Email | Coaching calls | Data/Collaboration platform | Monthly team reports

Action Period (AP): A duration of time whereby change ideas to improve wellbeing are implemented, tested and refined Plan, Do, Study, Act (PDSA): A scientific method used for action-orientated learning to test a change through planning it, trying it, observing the results and acting on what is learned.

⁹ The Breakthrough Series: IHI's Collaborative Model for Achieving Breakthrough Improvement. IHI Innovation Series white paper. Boston: Institute for Healthcare Improvement; 2003. (Available on www.IHI.org)

¹⁰ Hilton K, Anderson A. IHI Psychology of Change Framework to Advance and Sustain Improvement. Boston, Massachusetts: Institute for Healthcare Improvement; 2018. (Available at ihi.ora)

Activity Milestones

The key elements of the IHI's Learning and Action Network approach include the below activity milestones. Phase 2 of the Initiative will commence in March 2023 and run through to June 2024.

Activities (dates subject to minor changes)	What does this involve?
Pre-work Kick-off event Timing: Mar - Apr 2023 Mode: Online and in- person	Establish your core group of 2-4 people from your participating health service team who will attend Initiative milestones. A one day in-person, kick-off event will prepare core teams for their participation in the Initiative. Pre-work will be provided to participating teams as an overview of the Initiative content and theory. During this time, participating teams will be introduced to the IHI Joy in Work Framework.
Learning sessions (LS) Timing: LS1: June 2023 LS2: November 2023 LS3: March 2024 Mode: Online	Learning sessions allow teams to learn about the application of improvement science, build knowledge and skills to implement, test and adapt high-leverage changes for improving healthcare worker wellbeing, and establish relationships with other participating teams. LS1, LS2 and LS3 will be held virtually. The content, mode and length of learning sessions will be determined in consultation with participating teams and may be subject to changes. We expect core team members attend at least 80% of all learning sessions throughout the Initiative.
All-team calls Timing: TBC Mode: Virtual	A 1-hour online call will bring all teams together to receive broad updates from across the Initiative, share stories of the work, and build networks with other health services.
Coaching calls Individual and group Timing: TBC Mode: Virtual	Participating teams will have online, individual coaching calls for tailored advice, guidance and support. Group coaching will be offered for small groups of participating teams to meet online with an Improvement coach, share updates on their progress, and learn about ideas and experiences of other participating teams.
Showcase event Timing: May 2024 Mode: In-person	A one day in-person showcase event will bring teams together to celebrate aggregate and local achievements, network and share learning across participating teams, and foster momentum for continued efforts to support healthcare worker wellbeing.

Who can apply?

The Initiative is open to all health services that are ready to prioritise and accelerate their work on improving their workforce wellbeing. Health services can apply for the participation of a single department, ward, unit, or facility in the Initiative. Participation is open to all public and private health services, including hospitals, community health, aged care and primary care facilities.

Health service teams involved in Phase 1 of the Initiative are not eligible to apply for Phase 2 however a different health service team from the same health service may apply.

In our experience, optimal results can be achieved when the health service team has a minimum of 10 members.

We ask that no more than 2 health service teams from any one organisation apply.

Fees:

No enrolment fee is required. However, health services are expected to commit to the Initiative aims, conduct fortnightly reporting, and adequately resource their local team to ensure successful participation.

How to apply?

We recommend that project lead/s and executive sponsor complete the application.

Step 1

Review this document for further information about the opportunity.

Step 2

Complete the online Expression of Interest form.

Applications close on Friday 17 March 2023 at 11:59pm.

For further information

A virtual information session will be held on Friday 10 March 2023 during which you will hear more about the Initiative and have an opportunity to ask questions.

Register to attend by completing this online form.

For all other enquiries please contact:

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Learn more about the organisations leading the Initiative:

- Safer Care Victoria: <u>Healthcare Worker Wellbeing Centre</u>
- Institute for Healthcare Improvement