Promoting Well-Being in the Workforce

**About the authors**: Bill Laughlin, Bill Siren, and Maureen Medlock are leaders within Deloitte’s Health Care practice. This editorial illustrates perspectives on how health care leaders can develop long-term strategies to promote workforce well-being across health care organizations to prevent provider burnout and mitigate attrition.

**Introduction**

The COVID-19 pandemic changed the way health systems operate and emphasized the importance of workplace well-being. Over the course of the pandemic, many organizations had to adapt their approach to employee well-being due to increased pressures of remote work, health concerns, and job uncertainty. Until recently, approaches to improve well-being have focused on targeting individual factors, such as employee resiliency. However, today there is broader awareness that organizational and systemic factors (e.g., workplace culture, clinician shortages, employee policies) are key contributors to worker burnout. To create a long-term solution, a well-being lens must be applied to fundamentally transform the way health care organizations deliver care to patients and support workers across all needs.

**Uncovering the Barriers to Well-Being and Causes of Burnout**

A 2022 Deloitte study found that about half (46%) of clinicians report high levels of burnout, painting a dire picture of the current health care talent emergency. Hospitals addressed worker shortages and high attrition by hiring contract/temporary labor during the pandemic. But the use of temporary employees has become a long-term solution for many hospitals, spiking the demand and the cost of labor. This has resulted in contract staff being paid higher rates for the same level of work but requiring additional education and training due to lack of institutional knowledge. The combination of high turnover, time spent training, and compensation disparities has led to resentment and frustrations among permanent staff, which has increased tensions already present between these two groups.
Health Care Chief Strategy Officers (CSOs) recognize that understanding these issues from the lens of the workers is critical, and have been implementing employee listening sessions, surveys, and other tools to understand the root causes before developing solutions for their workforce. Although a variety of approaches can be applied to understand the voice of the workforce, a population-based approach can help identify issues and create more tailored solutions to meet specific needs (e.g., role, generation, type, and length of experience). While collecting data to inform their approach, CSOs can pair qualitative data from listening tools with data from employee engagement metrics.

Leaders can leverage existing data, including turnover, retention, and longevity metrics as well as an employee’s allocation of time between administrative and patient-facing tasks to create a holistic understanding of barriers. Equally important for analyzing employee needs, health care organizations should also examine how they may be contributing to potential income inequality, which can contribute to burnout. While discussions around well-being for physicians and nurses may focus on increasing satisfaction and sense of meaningful work, many members of the health care workforce, such as Certified Nursing Assistants (CNAs) and medical assistants, may be focused primarily on financial stability.

Crafting a Long-Term Strategy

The challenge facing health care CSOs is to create a long-term strategy that promotes and sustains employee well-being. Key areas of focus in long-term strategy development include listening to frontline staff, transforming work to reduce burnout, and restoring trust in organizational leadership.

Incorporating Frontline Staff

CSOs are relying on their frontline staff to identify and implement sustainable solutions for well-being. Addressing burnout should not be viewed as a checklist of tasks, but rather a cultural shift involving all stakeholders. Organizations should develop a plan to engage key stakeholders, including frontline workers and management, in decision-making, burnout prevention, and creating well-being plans. Frontline workers are likely the most knowledgeable about where changes are needed but require organization support to drive change. Practically, at the organizational level, this can look like: assessing the delta between current resources and the desired state, identifying and prioritizing opportunities for improvement, developing pilot programs, and addressing employee self-care—from training and onboarding to continuing education.

Driving Workforce Retention

Workforce retention can be impacted by many factors, including but not limited to:

- Workload intensity – This continues to rise to the top of conversations and matters across all roles and industries.
- Flexibility and choice – Workers expect to have an increased level of choice in when, how, and where they work.
• Meaning, purpose, and connection at work – Workers would like to have a choice in when, how, and where they connect with co-workers, whether that be virtual or in-person, to create meaningful interactions and purposeful workflows. Workers would also like to have more time and autonomy to focus on nurturing patient relationships, a duty which many clinicians derive meaning and purpose from.2

• Opportunity for learning and development – Organizations can address retention issues by creating opportunities for career development and mobility.2 This has become even more prevalent with the entrance of Gen Z into the workforce, as one of the top drivers of whether they will stay at an organization is the availability of learning and development opportunities.6

• Competitive total rewards packages – According to a Deloitte survey of 500 frontline clinicians, about half are satisfied with their compensation (44%) and benefits (51%). One-third of clinicians advised that health care administrators can solve workforce burnout and shortages by offering stronger compensation and benefits.2

**Restoring Trust in Leadership**

Trust in leadership is essential for a healthy work environment but has been found to be extremely low in health care settings.7 Fewer than half (45%) of frontline clinicians trust their organization’s leadership to do what is right for its patients, and even fewer (23%) trust their leadership to do what is right for its workers.2 Organizations can aim to enhance trust in leadership by listening to frontline workers, recognizing their clinical autonomy, elevating their voice to leadership, and building an inclusive culture.2

**Conclusion**

As health care systems emerge from the COVID-19 pandemic, workplace well-being has proven its staying power as a key issue, and organizations are recognizing the importance of investing in employee well-being. This issue is being addressed not only by health systems and insurance providers, but also by the federal government. We’re starting to see a cross-sector movement towards supporting provider well-being and preventing burnout – in March 2022, the Dr. Lorna Breen Health Care Provider Protection Act was signed, providing federal funding, training, and awareness to address behavioral health and well-being among health care workers.8 An effective strategy for health care organizations to promote workforce well-being will take a holistic approach to understand present challenges and create long-lasting solutions.
Please reach out to Bill Siren, Bill Laughlin, or Maureen Medlock with any questions.

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