

CALMING THE WATERS

Promoting Well-Being Beyond Individual Responsibility

Sean Lansing, PhD
William Hubbard, DHCML



MOUNT CARMEL

A Member of Trinity Health

SPEAKERS


Sean Lansing, PhD



- Mission Leader, Mount Carmel Health System
- Family includes wife Beth, and two son Liam and Simon
- Love to hike, bike, and bake

William Hubbard, D. HCML



- The other Mission Leader with Mount Carmel
- Loves listening to audio books while walking
- Recently started learning to sew 

DISCLAIMER

"The views and opinions expressed in this presentation are our own and do not necessarily reflect those Mount Carmel Health System."

LEARNING OBJECTIVES

Learn	Learn the importance in shifting from focusing well-being efforts on individuals and programs to organizational strategies.
Learn	Learn practical strategies to promote well-being in the workplace.
Explain	Explain the investment in front-line leaders.
Understand	Understand the importance of fostering positive workplace culture for well-being.
Propose	Propose aligning organizational well-being initiatives across an enterprise.

SESSION OUTLINE

How we got into this work and why we think it matters

Introduce our qualitative study for approaching well-being initiatives

Discuss study conclusions and implications for our well-being work

Future directions and applications

Questions



PERSONAL WELLBEING RESOURCES

"I laughed so hard, I choked on a doughnut reading this book. I'm so glad Brigid Delaney tried all of this cra

NETFLIX

JEN MANN, AUTHOR OF *PEO*

How to Find Balance and Reclaim Your Life

THE CURE

FOR

BURNOUT

EMILY BALLESTEROS

"Useful and practical . . . an empowering guidebook."
—CHARLES DUHIGG, *New York Times* bestselling author of *The Power of Habit* and *Smarter Faster Better*

"Speaking as both a psychologist and a fellow traveler, this is the most valuable, comprehensive book on human development that I've ever read."
—JOAN BORYSENKO, PHD, author of *Minding the Body*, *Mending the Mind*

RESILIENT



HOW TO GROW AN
UNSHAKABLE CORE OF CALM,
STRENGTH, AND HAPPINESS

RICK HANSON, PH.D.

New York Times Bestselling Author of *Hardwiring Happiness* and *Buddha's Brain*

with FORREST HANSON

#1 NEW YORK TIMES BESTSELLING AUTHOR

DAN HARRIS



ANXIETY
FOR
BEGINNERS

A PERSONAL INVESTIGATION

'A powerful and beautifully written account' *Guardian*

ELEANOR MORGAN

WORKPLACE WELLBEING RESOURCES

PAULA DAVIS, JD, MAPP

BEATING

BURNOUT

AT WORK

WHY **TEAMS** HOLD
THE SECRET TO **WELL-BEING**
AND **RESILIENCE**



THE
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50 TOP TOOLS FOR EMPLOYEE WELLBEING

A COMPLETE TOOLKIT FOR DEVELOPING
HAPPY, HEALTHY, PRODUCTIVE AND
ENGAGED EMPLOYEES

DEBBIE MITCHELL



ALLUP
on Global Interviews

BEING
ORK

Resilient
g Teams

Jim Harter

Review Article

A critical review of the definition of 'wellbeing' for doctors and their patients in a post Covid-19 era


Gemma Simons¹  and David S Baldwin^{1,2,3}

Abstract

Background: There is no international consensus definition of 'wellbeing'. This has led to wellbeing being captured in many different ways.

Aims: To construct an inclusive, global operational definition of wellbeing.

network analysis

Eoin McElroy^{1*} , Mathew Ashton², Anne Marie Bagnall³, Terence Comerford⁴, Mick McAndy Pennington⁷, Jane South³, Tim Wilson⁴ and Rhiannon Corcoran⁸

Abstract

Background: Previous research has examined individual-level and place characteristics a wellbeing, with many studies concluding that individual factors (e.g. health, finances) are wellbeing. However, this 'dualistic' approach has been challenged, with some arguing that disentangle the effects of the two domains, and that wellbeing should be considered as part of a network of mutually reinforcing relationships between individual, community and place characteristics. We used network analysis to explore these complex associations.

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ARTICLES

End-of-life despair in terminally-ill

Violence and Mitigating Roles of

Contents lists available at ScienceDirect

SSM - Population Health

journal homepage: <http://www.elsevier.com/locate/ssmph>



The differential impact of major life events on cognitive and affective wellbeing

Nathan Kettlewell^{a,c,d,*}, Richard W. Morris^{e,f}, Nick Ho^g, Deborah A. Cobb-Clark^{b,c,d}, Sally Cripps^e, Nick Glozier^{f,g}

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^b School of Economics, University of Sydney, NSW, Australia

^c ARC Centre of Excellence for Children and Families Over the Life Course, University of Queensland, QLD, Australia

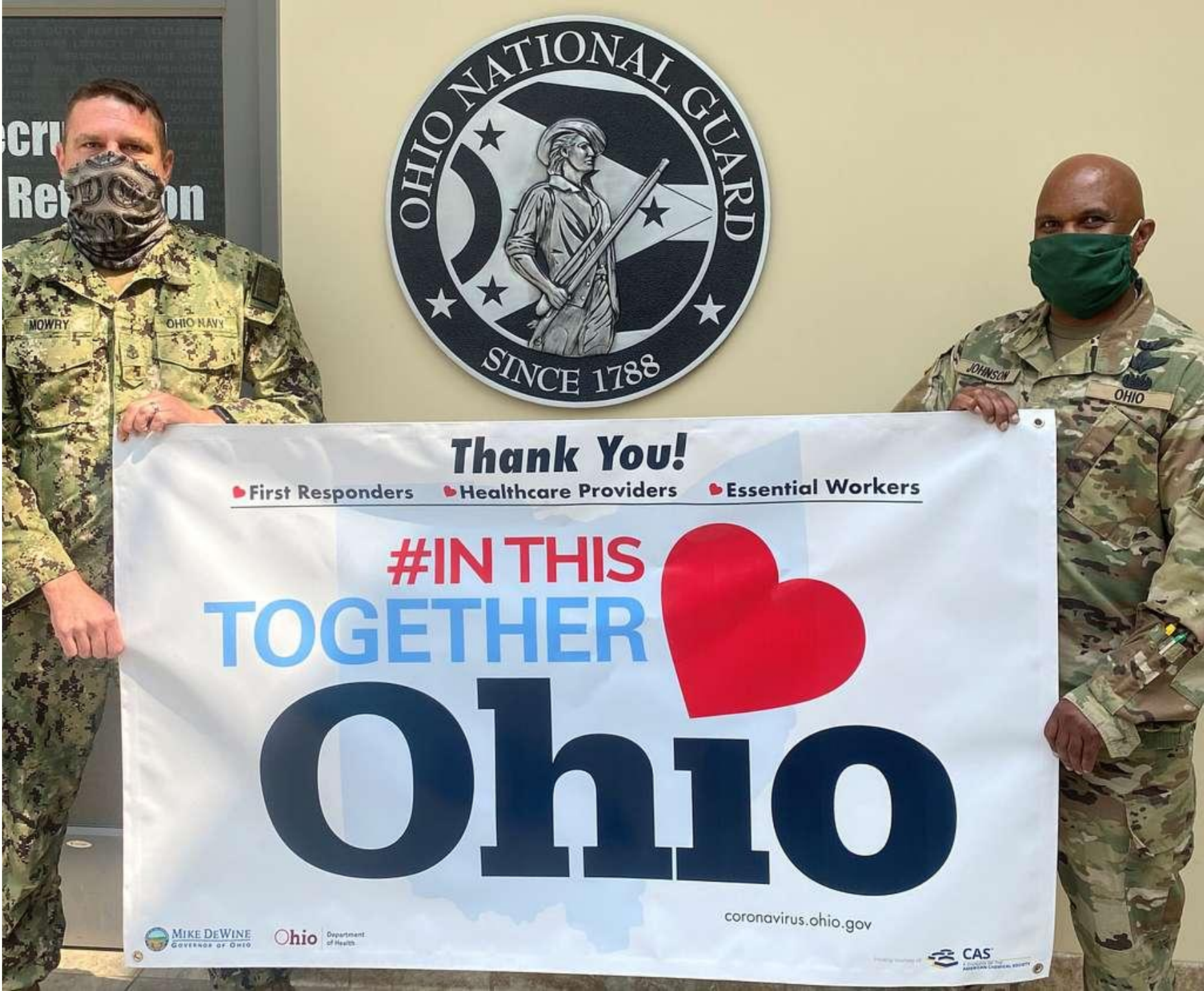
^d Institute of Labor Economics (IZA), Bonn, Germany

^e Centre for Translational Data Science, University of Sydney, NSW, Australia

^f Central Clinical School, Faculty of Medicine and Health, University of Sydney, NSW, Australia

^g Brain and Mind Centre, University of Sydney, NSW, Australia






Thank You!

♥ First Responders ♥ Healthcare Providers ♥ Essential Workers

**#IN THIS
TOGETHER** 
Ohio

 **MIKE DEWINE**
Governor of Ohio

 **Ohio** Department
of Health

coronavirus.ohio.gov

 **CAS**
A Division of the
American Legion, 8000171

Our Qualitative Research Design Overview

Data Collection

- Develop Focus Group Protocol
- Train Facilitators
- Conduct Focus Groups via Microsoft Teams recording and using transcription tool
- Collect Transcripts and verify accuracy with recording

Data Analysis

- Code Transcripts
 - create code book
- First Review
 - Revise Codebook
 - Edit Necessary Codes
- Second Review
 - Look for Themes
- Third Review
 - Finalize Themes

Share Findings

- Create a Summary Report
- Share Locally
 - Locally
 - Trinity Wide
- Operationalize Findings
 - CC Plan
 - Across MCHS
- Share Publically
 - Workshops
 - Journal Article



Participant Eligibility

- Full time colleagues as close to the front line as possible
- Exempt and non-exempt – paid for non-exempt employees through a MC Foundation grant

Participant Recruitment

- Colleagues were invited through their supervisor and manager, those who volunteered were sent individualized emails with instructions
- Worked to intentionally include colleagues from across the healthcare system

PARTICIPANT SAMPLE

Identity Demographics

- 81 participants
- 19 listening session
- 68 participants filled out demographic information

Race		Age		Sexual Orientation		Gender Identity	
American Indian or Alaskan Native	0	18-24	1	Lesbian or Gay	2	Female	57
Black/African American	7	25-34	10	Bisexual/ Pansexual	2	Male	
Asian	1	35-44	18	Queer	0	Gender Neutral/ Gender Nonconforming	10
Hispanic/Latinx	7	45-54	22	Heterosexual/ Straight	55	I prefer not to answer	0
Native Hawaiian or other Pacific Islander	0	55-64	14	I prefer not to answer	2		1
White.Non Hispanic	55	65-74	2	other	1		
Multiracial/Two or more Races	2	75 or older	0				
I prefer not to answer	2	I prefer not to answer	1				
Other	1						

Work Demographics

- 81 participants
- 19 listening session
- 68 participants filled out demographic information

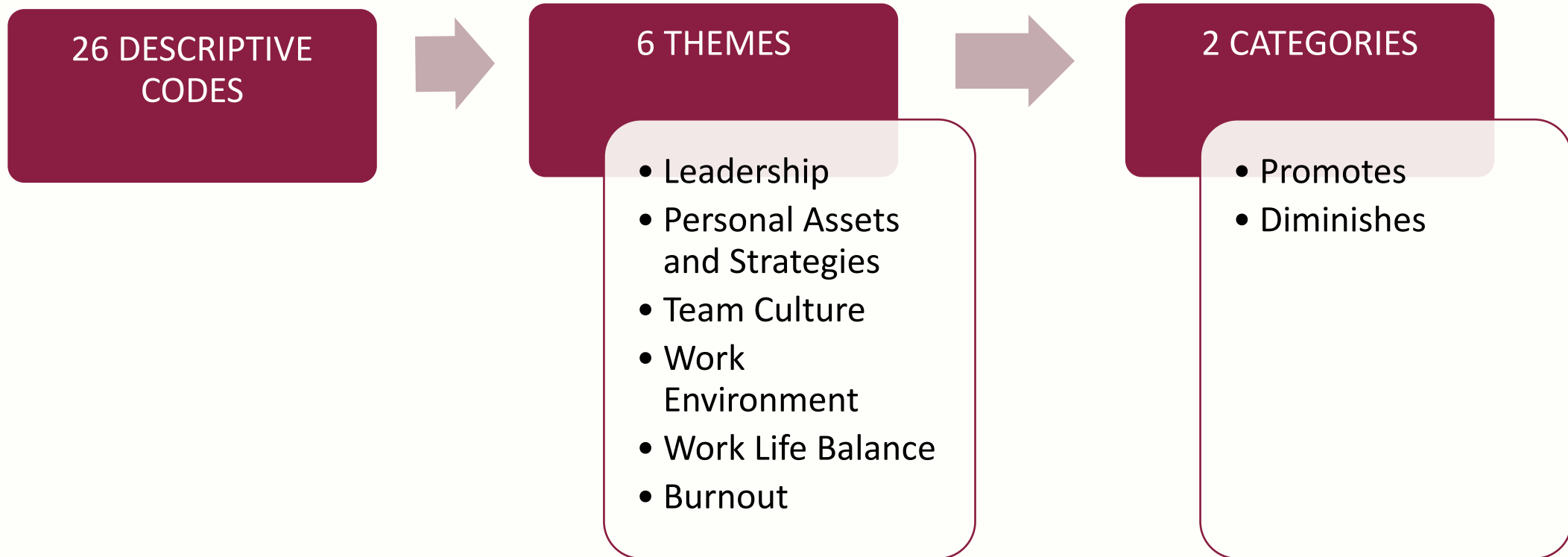
Work Location		Work Shift	
Medical Group Office	6	Days	59
At a Hospital	36	Evenings	2
At an Outpatient Site	1	Nights	1
At the College of Nursing	0		
From Home	11		
Corporate Services Center	3		
Other	5		

Research Goal: How Can We Support Colleague Wellbeing

Focus Group Questions:

- 1) What have you done in the past three months to promote wellbeing in your own life?,
- 2) How does your team support your wellbeing?
- 3) What do you think is the biggest threat to your wellbeing at work?
- 4) What is the biggest source of emotional, physical, mental, or moral stress at work
- 5) What would be the biggest support to your wellbeing?

Using NVIVO, a qualitative research tool...



THEME #1: LEADERSHIP BEHAVIOR

Category: Diminishes Wellbeing

These behaviors include:

- No clear sense of vision
- No executive leadership presence
- No response to simple things
- Micromanaged
- Not supportive of PTO
- Negative leadership style
 - No affirmation
 - Only negative feedback
 - Threats “if you don’t like it, find another job”
 - Never asking for input

“When you have your huddles and stuff and you are always put down. You are afraid to speak up because you may lose your job and no one speaks up. It always very negative.”

“You are not going to keep long term employees by walking in and saying if you don’t like it, leave. That’s not ok to say to people, especially when they are coming to Mount Carmel and doing everything they can every day and still getting their butts kicked because you have left us so understaffed.”

THEME #1: LEADERSHIP BEHAVIORS

Category: Promotes Well being

These behaviors included:

- Supportive in difficult situations (professional and personal)
- Caring of colleagues as individuals
- Regular check-ins
- Laugh together
- Supports life outside of work
- Approachable
- Present
- Supportive of PTO

“My manager checks in with me and that is very gratifying because I feel like she is engaged and she wants to know what’s happening...”

“Leadership that I work with have been very supportive and making sure I have everything I need in both my previous role and my present one, making sure I have all the opportunity to grow and develop all of the skills that I need to be successful in this position.”

THEME #2: TEAM CHARACTERISTICS

Category: Diminishes Well being

- Colleagues being mean/rude to colleagues from other departments when interacting
- Bringing anger to work
- Poor performance on the job
- Cliques on teams
- Favoritism
- “toxic” colleagues (those who bring negative behavior every shift all the time)
- Colleagues that don’t get along and create tension
- Office drama

“I guess the biggest thing previously for me was drama. The amount of drama going on in the office. Seemed like there was different clicks and groups that are back and forth with this group or that group. So it was distracting and I think that distraction could lead down the road of being harmful to other people, patients included.”

“The negativity within my department. It is very bad. Always has been, for years. Personality, favoritism, name it. Group clicks. That’s what I’m saying. I’m focusing on myself and doing my job.”

THEME #2: TEAM CHARACTERISTICS

Category: Promotes Well being

- Colleagues checking in on each other
- Colleagues connecting with each other (in and outside of work)
- Feeling of taking care of each other
- Cover for each other when need be (shifts, help out, etc)
- Being proactive to solve problems as a team
- Celebrating life events together while at work (new baby, wedding, birthday, etc)
- Help picking up the slack
- Leaders who jump in and help when workload is heavy or shift is short
- Collectively working on the same goal
- Positive attitudes
- Engagement activities like potlucks, outside of work events
- Team flexibility

“And then also if we're short in one area, there's no hesitation for another person to come in and help us. So, knowing that they have my back in those manners helps me. And so I tried to do the same for them as well.”

“I work from home, which is a real struggle for me. I’m a very social person, so our team has daily huddles. It just makes you feel like you are not alone when working from home, just checking in and seeing how everybody’s doing and I really appreciate that.”

THEME #3: WORK ENVIRONMENT

Category: Diminishes Well being

“I would say turnover in general, not just in our area, our area seems to be pretty steady, but a lot of what we do is educate the staff. And so it's hard for departments to find some consistency and workflow when they constantly are having to bring new people in and get them up and running trained and what they need to do in their area. So I think that can be a little bit of a hurdle.”

“see about eight people in a day. And so I go home with eight heavy hearts for those people, you know. And so it's not just like, a physical job.”

“It's more. It's more like being short staffed consistently. It's coming in and having like a long, you know, rough day. And then knowing if you come in like the next day, it's going to be similar, you know. Yeah, it just makes it hard to want to come back in.”

“On my work here, and mostly just the stress of kind of knowing that we're trying to perform, we're all doing the best we can, but we're not performing and that just feels stressful.”

“I feel the hospital can be more discharge centric more than patient centric.”

THEME #4: PERSONAL ASSETS AND STRATEGIES

Outside of Work:

- Play music
- Bake
- Cook
- Working out/exercising
- Meditation
- Gardening
- Travel
- Pets
- Connecting with friends
- Read
- Practice gratefulness
- Start healthy habits: weight loss, getting more sleep, better eating habits build routines
- Go to support group or therapy
- Active in religion/spiritual life
- Avoid social media
- Focused time for myself
- Disconnecting from work when not at work

At Work

- Using my PTO
- Use respite room
- Use EAP resources
- Take walks outside on work breaks
- Take lunch break away from desk

THEME #5: WORK LIFE BALANCE

Category: Diminishes Well being

The term work life balance was used a lot in the transcripts. Not every mention was coded to this theme because the reference was specific to team characteristics or a leader supporting work life balance. The references coded to work life balance were those that provided descriptions of colleagues' struggle with work life balance.

“I think that's it's a to being able to set boundaries professionally and appropriately so that still feeling accomplished we still make sure we're supporting the staff here in the unit and in the hospital and the system to make sure everything gets accomplished so probably a hard look at how to set boundaries appropriately for ourselves.”

OUR FINDINGS SUGGEST...



Mindset shift from programs to partnership [and back to programs]



Foster Positive Team Culture



Investment in improving the leadership practice of front-line leaders



Leverage Interventions that Promote Personal Strategies

Foster Positive Team Culture



Investment in improving the leadership practice of front-line leaders



Leverage Interventions that Promote Personal Strategies





QUESTIONS AND DISCUSSION



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Thank you!

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