

# A JOY IN WORK PROJECT

Improving joy in work in the East and North Hertfordshire NHS Trust Continuous Quality Improvement Team



## The Project Team

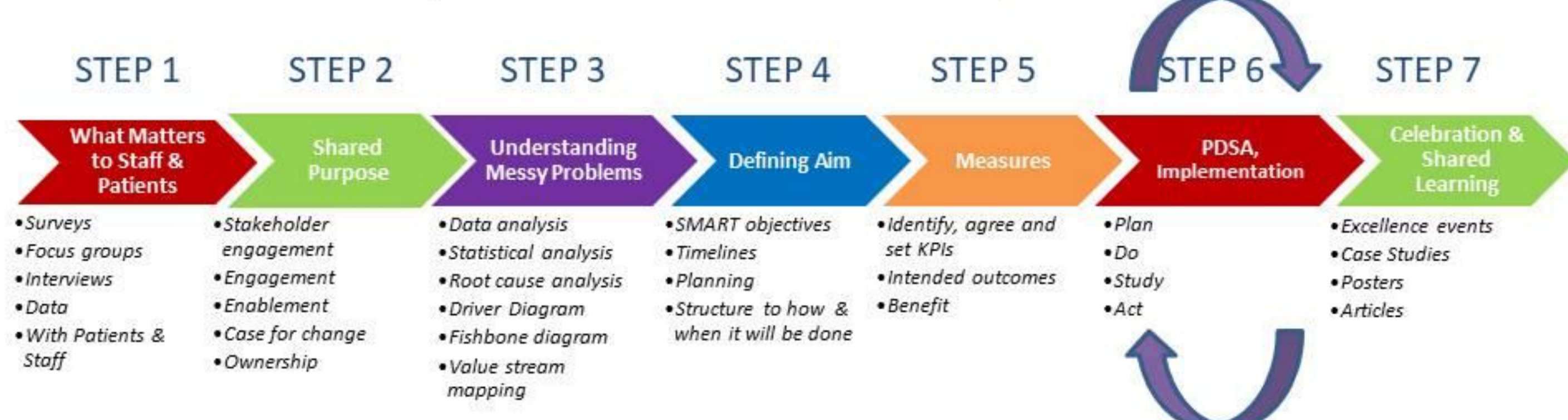
- Trace Van Wyk *Head of Quality Improvement*
- Czar Ian Cacanindin *Quality Improvement Coach*
- Anna Cull *Quality Improvement Coach*
- Bianca Viegas *Harm Free Care Lead*
- Claire Batchelor *Quality Improvement Coordinator*

## The challenge

- Burnout is common in any healthcare setting and its effects are alarming. In 2015, a study found out that 50% of physicians report symptoms of burnout.<sup>1</sup> Thirty-three percent of new registered nurses seek another job within a year, according to another study in 2013.<sup>2</sup> It is safe to say that turnover is up and morale is down.
- Burnout leads to lower level of staff engagement and this in turn correlates to lower-quality care, increased risk of workplace accidents and to limited empathy – a crucial component of effective and person-centred care.
- Caring and healing are naturally joyful activities. Joy therefore is one of healthcare’s greatest asset. Instead of focusing on burnout, capitalizing on joy creates safe, human places for people to find meaning and purpose in their work.

## Our improvement methodology

### The ENH Way – Our Continuous Improvement Model



## What matters to our team

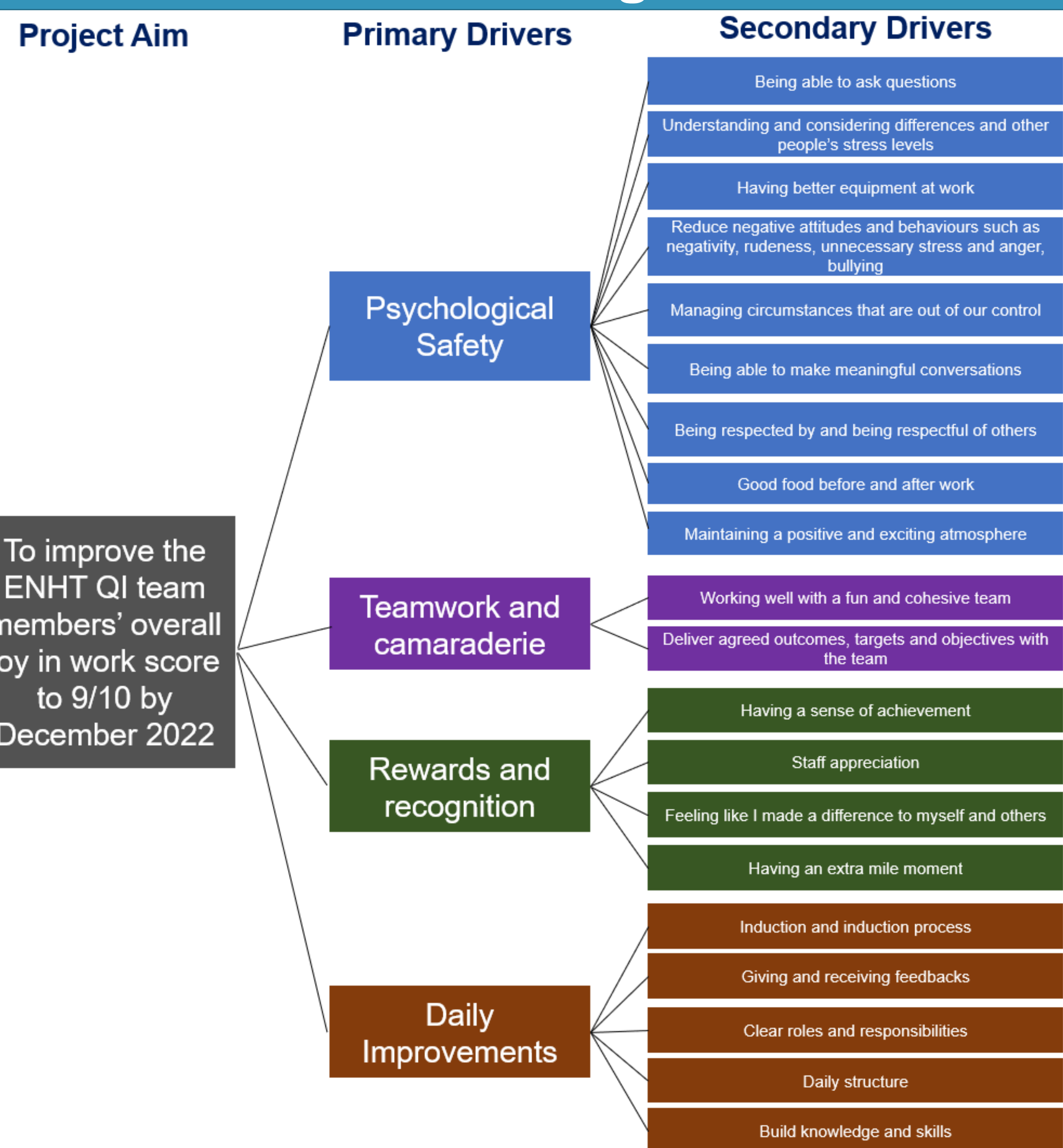
- What matters to you?* Conversation: All members were asked what matters to them in terms of having joy in work. The responses were analysed and were arranged into themes.
- Our main drivers to achieve our aim were **Psychological and Physical Safety, Teamwork and Camaraderie, Recognition and Rewards, and Daily Improvements.**



## Project aim

- The key aim of the project was **to improve the ENHT QI Team’s overall joy in work.** Specifically, the team aims to **increase the overall score of the team from their baseline if 7/10 to 9/10 by December 2022.**

## Our driver diagram



## Our change ideas

- There were different change ideas that were identified. However, the team decided to iteratively test ideas using PDSA cycles on the following:
  - Structured check-ins: The team meets at 9:30 and each member may choose how they check-in for the day from a check-in menu. Every member rates their day using a RAG rating and shares how full their tanks are for the day. In addition, those who need help arranges a schedule with anyone who can offer help for the day.
  - Celebrating the wins of the week: Each team member is asked about their wins of the week. The top 5 are shared as High Five Fridays on Twitter by the end of each week.
- Monthly one-on-one with line manager for feedback and to discuss challenges and opportunities.
- Desk rota / work from home schedule
- Coach the coaches fortnightly
- Sessions on making difficult conversations

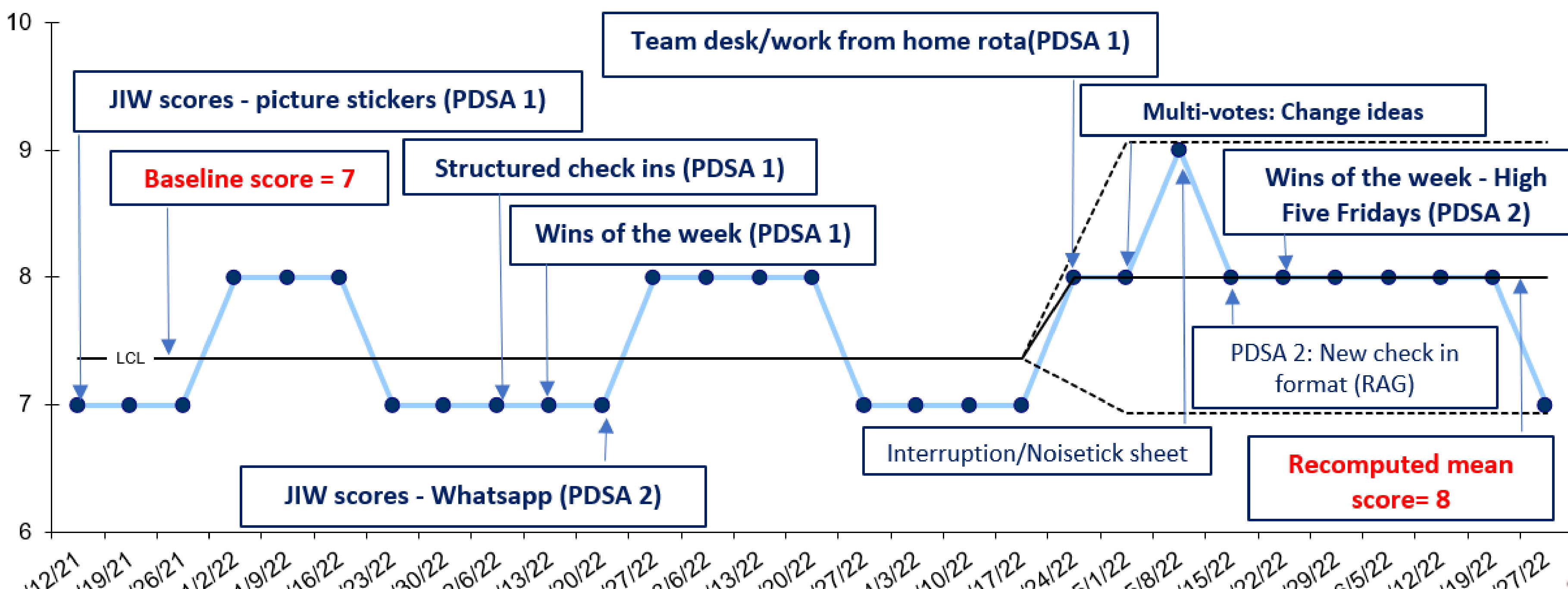


## What we measured

- Outcome:** Whilst there is no standard measure for joy in work, the team agreed to operationalize how they would rate joy in work. The group agreed to answer the question, **“How do you feel about work today?”** The group would answer the question using a scale of 1-10 with 1 being a bad day and 10 being a great day.
- Process:** The time spent for check-ins, rating the new structure of check-in as to efficiency and effectiveness, number of distractions, rating the coach the coaches sessions, qualitative feedbacks on the new format of check in and wins of the week

## Our current data

### 'How do you feel about work today?' weekly scores



## The impact

- Some team members felt more cohesive as they know more about each other during the check-ins.
- The wins of the week promoted a positive culture of celebrating incremental achievements. The wins gave a narrative that the team can achieve more. The members particularly felt valued when their efforts were recognized by the patients and the members of the team.
- The team became more comfortable giving and receiving feedback to and from other members of the team. This allowed an environment where everyone can be more open and honest to each other.

## Next steps

- Test new ideas using PDSA cycles and come up with more process measures
- Continue monthly *Joy in work* sessions with the team.
- Once improvement is achieved, the project may be spread and scaled up to other teams in the organization
- Present project in local and regional meetings, forums and conferences

## Acknowledgements

Lauren Butterfield<sup>1</sup>, Liz Dunn<sup>1</sup>, Michael Nahal<sup>1</sup>, Kristin Cacanindin<sup>1</sup>, Rebecca Pickering<sup>2</sup>, Maria Rushton<sup>2</sup>

<sup>1</sup>Keeping in Touch Team, <sup>2</sup>Patient Experience Team

## Leadership learnings

*The project allowed me to draw from different leadership energies in driving change. I learned to value the importance of listening to other people’s ideas. The experience was humbling as I learned to work with both seasoned improvement expert and new staff members. I appreciated the importance of delegating tasks to other members of the team such as plotting measurements and leading check-ins. Furthermore, the project allowed me to be an authentic leader and a member of the team. Moreover, I learned to be flexible and learned from failures along the way. I am passionate and keen to develop my leadership skills as I continue the project.*

**Czar Ian Cacanindin**

Quality Improvement Coach  
East and North Hertfordshire NHS Trust  
czar.cacanindin@nhs.net



## References:

- <sup>1</sup> Shanafelt TD, et al. 2015, Changes in burnout and satisfaction with work-life balance in physicians and the general US working population between 2011 and 2014;90(12):1600-1613.
- <sup>2</sup> Lucian Leape Institute. 2013. *Through the Eyes of the Workforce: Creating Joy, Meaning, and Safer Health Care.* Boston, MA: National Patient Safety Foundation.