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Nurses Health – Do You Manage This Challenge?

Summary: Patients rely on healthy nurses for optimal care – but who is looking after this staff of carers in a demanding work environment? A veteran nursing expert describes the outcomes of a project aimed at promoting nurse all-round health held at Hannover Medical School.

Various statistical surveys show that the workload of nurses in hospitals and outpatient care services is high. Although the average length of stay in hospitals has fallen (Lower Saxony 2005: 8.6 days, 2017: 7.1 days) and the number of cases continues to rise (Germany 2005 16,873,885, 2017 19,442,810),

(doctors, medical-technical services, and functional services) have significantly increased their personnel (Figure 1) (Federal Statistical Office Destatis 2017).

Accordingly, the number of nurses per 1,000 cases reduced from 24.7 in 2005 to 22.1 in 2017. Although statistical variables are of limited use in assessing the

These are probably the reasons for the high part-time rate of 53.2% (Federal Agency for Work 2019) and the above-average number of days of incapacity for work of carers [30 days/year for carers, compared to an average of 18 days/year for all insurance members] (Grobe et al. 2019).

Caregivers who receive support in their competencies development can optimally meet the demands of the workplace

there has been a below-average increase in employment in nursing services. In comparison, other medical professions workload of caregivers, they do indicate that caregivers work under increasingly tense conditions.

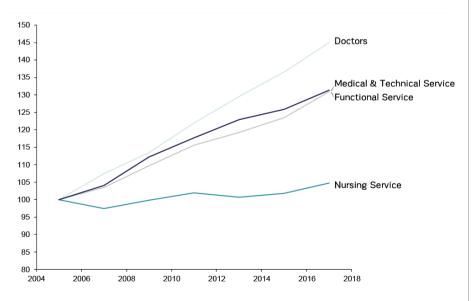


Figure 1. Medical Staff Growth Index, Lower Saxony 2005-2017 (2005=100)

These developments can be observed on a small scale in every work organisation of a hospital. For me, as the responsible nursing manager at the Hannover Medical School (MHH), the connection between workload and downtime is indisputable.

Accordingly, it is important to counter these developments with adequate management methods in order to identify and reduce burdens and, consequently, set up a comfortable workplace for consequently carers.

In the following, a practical project is described which started in November 2016 on ward 42, Department of Haematology, Haemostaseology, Oncology and Stem Cell Transplantation. The core elements of this project are modified employee manager interviews (MVG) and a series of further training courses based on current needs.

workplace health management, health promotion

Baseline Situation

In November 2016, there were high absenteeism rates (15.5%) and, as a result, the impact on the environment was an increased workload for the nurses of ward 42. These manifested themselves in a low level of motivation on the part of the nurses. For the responsible nursing managers, this meant an enormous amount of work in the area of reorganisation of staffing.

Project Course and First Measures

In the following, the individual milestones (Overview 1) of the practical project are described in more detail.

- 12/2016
 Information collection and literature research
- 02/2017
- **Expert advice**
- 05/2017 Coaching Return talks
- 06/2017

Psychological risk assessment

• 12/2017

Change in MVG

Overview 1. Milestones of the Practical Project

In order to be able to deal with the situation adequately, the management team carried out a collection of information and a literature research at the beginning of the project. In addition, in February 2017, experts from the MHH's Health Promotion, Personnel Development and Occupational Safety departments provided in-depth advice to the divisional and group management.

As a result, the management team was coached in May 2017 by the personnel development department on the topics of life-phase oriented planning, appreciative dialogues and presence-promoting leadership. Increasing knowledge and changing the attitude of the management team are the first goals to be achieved within

the framework of coaching. Already at that time, further talks were held on the subject of attendance and absenteeism after a prolonged period of incapacity to work. The scheduling of the talks was carried out according to the urgency.

In order to obtain further specific information from the nursing team, the Occupational Safety Department carried out a risk assessment of the psychological stress of nurses at the request of the Haematology, Haemostaseology, Oncology and Stem Cell Transplantation Department in June 2017. The evaluation of the survey was multi-professional. Concrete measures were introduced (eg changes in night shift times, case discussions) in order to reduce the burden on nursing staff. In addition, the previous steps were reflected on in order to be able to derive further measures all round.

Method Description:

The Employee Superior Interview

In December 2017, the content of and processes in the MVG's existing management toolbox were worked on in addition to the measures initiated. A needsoriented cluster for the systematic assessment of caregivers was synthesised from the current literature. Components of this cluster are operationalised contents from the area of competencies as well as the area of motivation (Table 1).

The development status of the respective employees is located using the Benner competency level model and varies in this case from advanced beginners to nursing experts (Benner 1982). In preparation for the MVG, carers carry out specific self-reflection.

In addition, all employees were discussed by the management team in a personnel conference. On this basis, each MVG was carried out individually, corresponding objectives were planned and appropriate measures were initiated.

Caregivers who receive adequate support in their professional competence development can optimally meet the demands of the workplace. Conversely, the burden on caregivers can be reduced, which in turn can have a positive effect on attendance and motivation.

The connection between competence development and stress has already been presented for other service occupations (Schmitt 2005) and is a guiding thesis of this practical project.

Appraisal Range	Example
Professional Competence	Current state of knowledge on the most common health disorders
	Proximity and distance behaviour
	Guidance of learners
Social Competence	Communication with patients and relatives
	Conflict management
Methodological Competence	Time management
	Prioritising
Personnel Competence	Self-reflection
	Critical faculties
	Cooperation within the nursing team
Motivation	Readiness for further education and training
	Order

Table 1. Contents of the Competence-Oriented Cluster

In addition, the MVG was expanded to include the subheading of presence-promoting resources and stress.



With regard to the health promotion of caregivers, it is essential to identify individual and general stressful experiences at the workplace and to identify resources that promote attendance in order to strengthen them. This assumption represents the second guiding thesis of this practical project.

Random Sample

Talks were held with 24 employees, including 22 women and two men, on the above-mentioned topics. The participants were on average 31 years old and had an average work experience of 5.7 years. The nurses had various formal qualifications (two had professional training in oncological care, two were practical instructors for nurse students, two were in palliative care, one had a Bachelor of Arts Nursing).

Outcomes

Over the entire period of the project, the rate of absenteeism fell to 7.5%. In addition to these measurable results, the following content-related and non-measurable results, which were also perceived as very positive by the nursing staff, could be derived:

- Meeting individual development needs.
- Improving individual resources.
- Improving resources in the work area.
- Improvement of the analysis capability of the management
- Improvement of the nursing staff's self-reflection competence.
- Increased transparency.

- Increase of the perceived esteem from colleagues.
- Intensified relationship between employees and superiors.
- Meeting of training needs.

Conclusions and Outlook

These results make it possible for the responsible managers to work on the processes and structures at different levels in order to reduce the stress-related experiences of the carers. Ward 42 is currently working on the most urgent issues requiring change.

Furthermore, it was possible to detect general development needs in the context of stress-related behaviour and the handling of pressure. As there is no further training on offer for these topics, this need was passed on to the Nursing Education Academy in January 2019 by the nursing management. Training courses are currently being prepared on the following topics:

- Resilience, resistance and inner strength.
- Stress-reduction.
- · Anti-stress and anger management.
- Change of position of patients to a more central role in their healthcare.

The competence development of the nursing staff through the amended processes of the MVG, combined with personal development through participation in further training courses with the focus on health promotion, has a positive effect on the experience and handling of stress as well as the stress-related behaviour of nursing staff. Both elements make a significant

contribution to supporting and strengthening the health of caregivers. With this practical project, we, the responsible nursing managers at MHH, are fulfilling our duties, countering an ever-increasing burden resulting from increased capacity and maintaining our most important resource – our nursing staff.

In this context, in addition to our efforts, it is more than imperative that policy-makers also assume their responsibilities and improve the framework conditions for carers. Only in this way can healthy carers continue to enjoy their challenging work – because healthy carers are indispensable for our society.

Author: Juliane Hesse

Division Manager, Nursing Department | Hannover Medical School | Hannover | **Germany** Hesse.Juliane@mh-hannover.de | mhh.de



Key Points

- The average length of stay in German hospitals has fallen, but the number of nurses has decreased.
- The resulting heavy workload of nursing staff has led to increased sick-day absenteeism.
- Individual interviews between management and nursing staff on stress factors and needs improved presence.
- Training focused on mental and physical health of nursing staff improved performance.

REFERENCES

Benner P (1982) From Novice to Expert. The American Journal of Nursing, 82(3):402-

Federal Agency for Work (2019) Reports:

Focus on the labour market - labour market situation in the care sector. Nürnberg: Federal Agency for Work.

Federal Statistical Office Destatis (2017)

Health basic data of hospitals. Wiesbaden: Destatis.

Grobe T, Steinmann S, Gerr J (2019) Health Report 2019, Berlin: Barmer.

Schmitt L (2005) Experience of stress in service occupations dependent on competence. Mannheim: University of Mannheim.