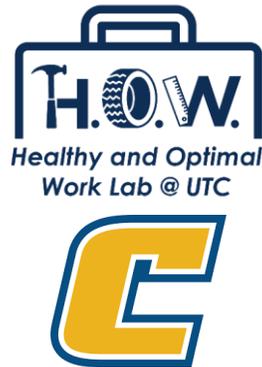


Surviving & Thriving as a Healthcare Team Member: Preliminary Findings From The M3 Study *Finding And Sustaining Motivation And A Sense Of Meaning In Medicine*

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Note: Portions of this presentation were shared at the 14th International Conference on Work, Stress, & Health in November 2021

Roadmap



Project purpose and support



Sampling and methodology



Preliminary findings



Next steps and open discussion

Project Purpose and Support

- **Objective:** Understanding how workers in these environments build and sustain their own resources to support their functioning and well-being
 - Key resources: motivation, sense of meaning, and sense of purpose
- Only possible with the financial support of **Millie and Jackson Yium**
- Many thanks also owed to the following members of the HOW Lab research team, especially: **Jane Voss, Katie Werth, Nolan Doscher, Kobe Verser**

Working Well in Healthcare

- Healthcare work can be deeply rewarding and gratifying, but with chronic demands and challenges that take a toll on healthcare team members' health and well-being
 - Critical stress incidents, pandemic trauma and stress experience (PTSE), burnout
- Healthcare workers often experience **demands > available resources**
 - Healthcare organizations often cannot provide sufficient psychological, social, physical, and environmental resources due to finances, regulations, and lack of knowledge and creativity
- Multiple protective factors can help workers build and sustain resilience even in the most difficult work situations, including what we studied...

Extrinsic Motivation

- Work-related motivation is often linked to extrinsic rewards (e.g., compensation, benefits, perks, praise/awards, career progression)
- *In environments where extrinsic rewards are most salient, many people work only to the point that triggers the reward – and no further*
 - Innovation and creativity, crucial to generating new ideas and greater productivity, are often stifled when extrinsic rewards are introduced
 - Rewards enhance performance in the short term, at the expense of intrinsic motivation – once the reward is removed, overall motivation decreases

The Alternative: Intrinsic Motivation

- Intrinsic motivation comes from within the person (i.e., is not depending on external sources) and can be as simple as the joy one feels after accomplishing a challenging task
 - Three commonly cited components:
 - **Autonomy**: having a choice in what you do, and being self-driven
 - **Mastery**: wanting to get more skilled and be recognized for competency
 - **Meaning/purpose**: understanding why you are doing the work; often linked to helping others
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Meaning/Purpose and Social Relations

- Closely connected to personal and professional identity
 - Our “vocation”
 - We do what we are / we are what we do
- Deeply linked to motivational theories (expectancy; job characteristics theory, etc.)
 - Our “drive” or what “gets us out of bed”
- So much of who we are is contingent on who we are with and the quality and nature of those relationships

Sampling and Data Collection Details

- All primary participants actively working in a healthcare provision context at least at the time of completing their baseline survey.
- $N = 54$ healthcare workers (with ~ 30 significant others also responding at baseline) representing different career stages in:
 - **Administrator/leadership:** To include executive and director level personnel
 - **Physician:** To include residents, fellows and practicing physicians
 - **Nurse:** To include nurses at different levels including physician assistant and nurse practitioners
 - **Staff:** To include operations staff (e.g., janitorial, food service, tech/support aides, chaplains)
- Baseline data gathered late Summer through early Fall 2020 via internet survey (COVID-19 period), followed by monthly surveys for 8 months + an in-depth concluding interview

Participant Details

- 48.1% identified as male and 51.9% identified as female.
- Most participants (86.5%) identified as White, while 7.7% of respondents identified as Black or African American and 3.8% identified as multi-racial.
 - 3.8% identified as Hispanic/Latinx and 96.2% identified as not Hispanic/Latinx.
- Most participants (67.3%) were married, while 15.4% of respondents reported being single and 9.6% reported being in a committed relationship while living separately.
 - The average number of dependents = 1.15 ($SD = 1.23$).
- The average age of respondents was 42.67 years ($SD = 12.46$).
- The average job tenure of respondents was 6.58 years ($SD = 8.09$).
- The average organizational tenure of respondents was 9.75 years ($SD = 8.87$).

Primary Participant Constructs - Survey

Work locus of control (baseline)	Core Self Evaluations (baseline + 7 monthly)	Comparative Physical Health (baseline + 7 monthly)	Comparative Mental Health (baseline + 7 monthly)	Psychological General Well-Being (baseline + 7 monthly)	Resiliency (baseline + 7 monthly)	Job-Related Self Efficacy (baseline + 7 monthly)
Burnout (Exhaustion) (baseline + 7 monthly)	Burnout (Disengagement) (baseline + 7 monthly)	Stress in General (baseline + 7 monthly)	Stress as Achievement (baseline)	Relaxation Remorse (baseline + 7 monthly)	Income Inadequacy (baseline + 7 monthly)	Flourishing (baseline + 7 monthly)
Sense of Coherence (baseline)	Job In General (baseline + 7 monthly)	Positive Affect (baseline + 7 monthly)	Negative Affect (baseline + 7 monthly)	Engagement (baseline + 7 monthly)	Compassion Fatigue (monthly follow-up 6 +7 only)	
Age	Sex	Ethnicity	Race	Relationship Status	# of Dependents	
Earned Educational Degrees	Job Title	Organization	Department	Tenure at Current Organization	Tenure in Current Job	
Spark (baseline)	COVID Perceived Personal Impact (baseline)	COVID Perceived Impact on Work (baseline)	COVID Motivation (baseline)	COVID Meaning (baseline)	Typical Recovery Strategies (baseline)	COVID Changes to Recovery Strategies (baseline)

Legend

- Scale Variables
- Demographics
- Open Ended

Participant Interview Questions

[Domain 1: Motivation]

What about your work in the healthcare space do you find particularly motivating, even on the really difficult days?

What aspects of your work do you find to be de-motivating?

Has the healthcare industry's response to the COVID-19 pandemic affected your motivation to work in healthcare in a positive or negative way?

[Domain 2: Meaning]

What aspects or areas of your work do you experience the greatest sense of purpose or meaning? Please explain.

What aspects of your work detract from or do not contribute to your sense of meaning or purpose?

What does it mean to you when you tell others your profession?

Is there a work-related role in particular that you find more meaningful than others?

Does spirituality/religiosity influence how you approach your work? If so, how?

[Domain 3: Relationships & Connections]

How have interpersonal connections or relationships been important to you in your career to-date? Please explain.

How do you stay authentic (true to who you are and what you value or care about)? Or do you?

How do connections with others (coworkers, patients, etc.) influence how you approach your work?

[Domain 4: Personal Self-Care & Recovery]

How do you ensure that you are at your very best for every day of work?

What are some strategies/techniques you use during work and nonwork periods of time to help ensure you are functioning at your very best?

What are the top 3-5 factors associated with your work that prevent you from engaging in proper self-care?

How has COVID-19 impacted your ability to engage in these habits?

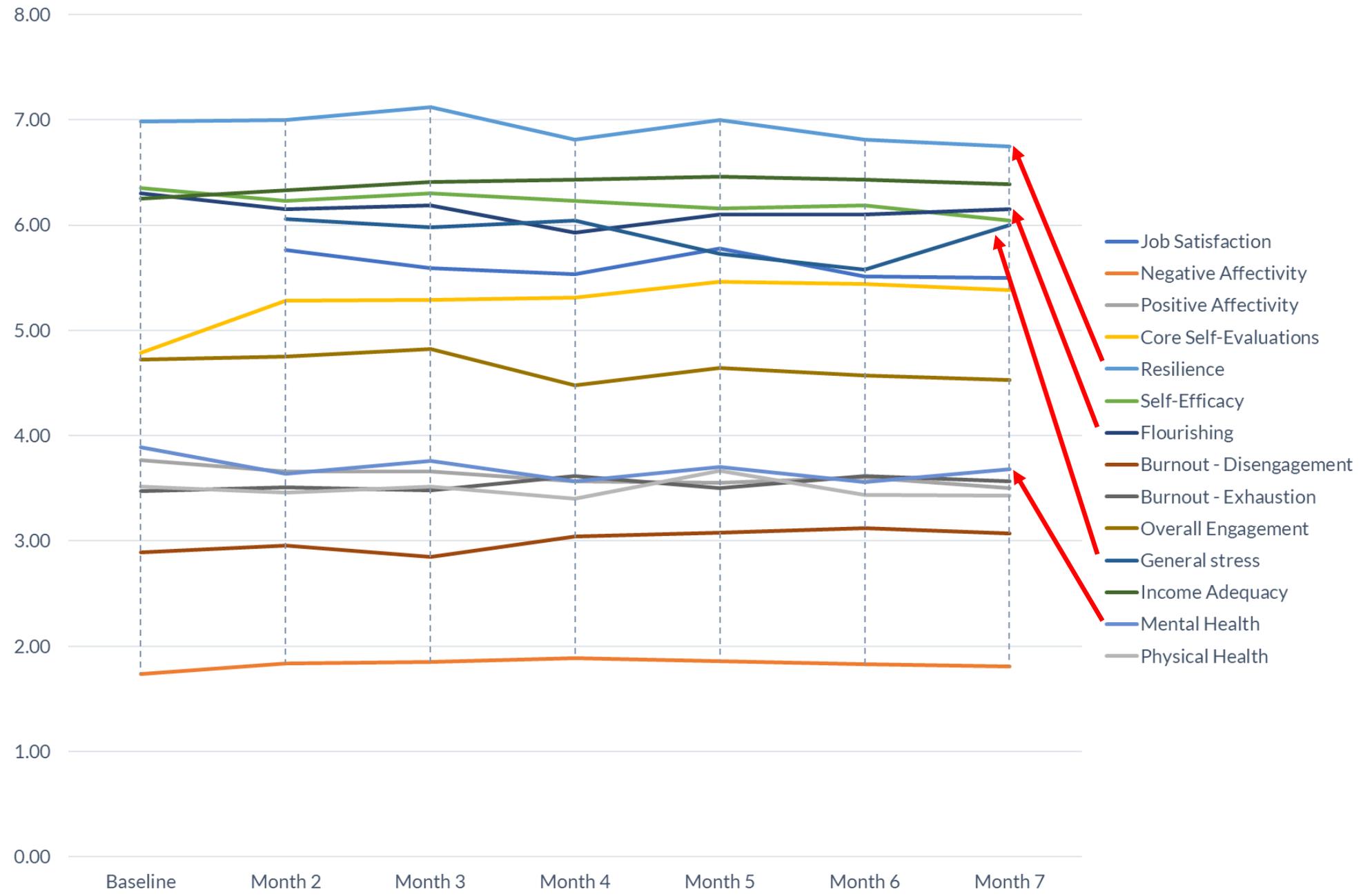
When you were preparing to enter your career, what additional information or training would have helped you most to improve your ability to care for yourself?

Preliminary Findings

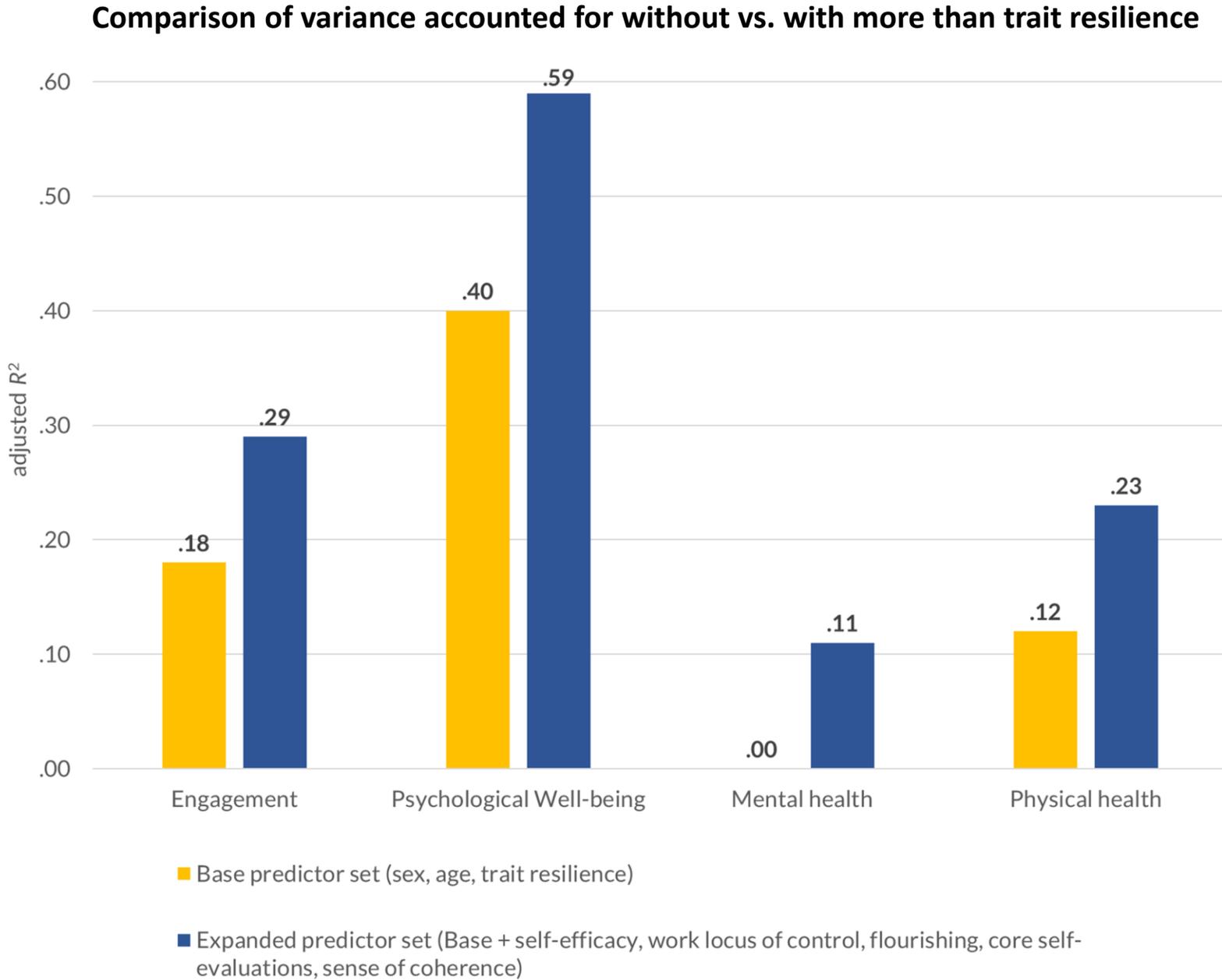
Our initial analyses are highlighting the following general findings:

- 1) This sample really does represent a resilient healthcare workforce
- 2) Maintaining a sense of meaning/purpose, motivation, and social relationships are all linked to healthcare worker resilience in various and complex ways
- 3) Self-care requires effort and is not the sole key to resilience

Remarkable consistency over time



Healthcare worker resilience is more than a simple personality trait. Considering a broader profile of individual differences in perspective, affect, cognition, etc. improves our understanding and ability to intervene.



Meaning/Purpose and Resilience

- This sample reports generally feeling and perceiving that their work has purpose
 - “For me... there always is a purpose with everything that I’m doing...”
- What they do is more of a calling than a “job”
 - “...I’m somebody who cares...I chose this line of work. Nobody made me do this, you know...nobody pushed me to this. It was definitely a calling, what I chose to do for me...”
- Damage and impact when not acknowledged, trusted, or seen as “essential”
 - [RE being furloughed during COVID:] “...it can come across as well I guess I’m not as important as I thought I was. Its pretty - it can be earthshaking for someone.”
 - “I’ve definitely struggled with that. I’m like am I just like a glorified scribe, like what, you know, what are they paying me for? Or why do I show up? And then I have those moments where you know, I’ll catch something before the physician does, or you know I have an opportunity to kind of take charge of a situation. I’m like, okay maybe this is where I’m supposed to be at...”

Meaning/Purpose, Motivation, and Resilience

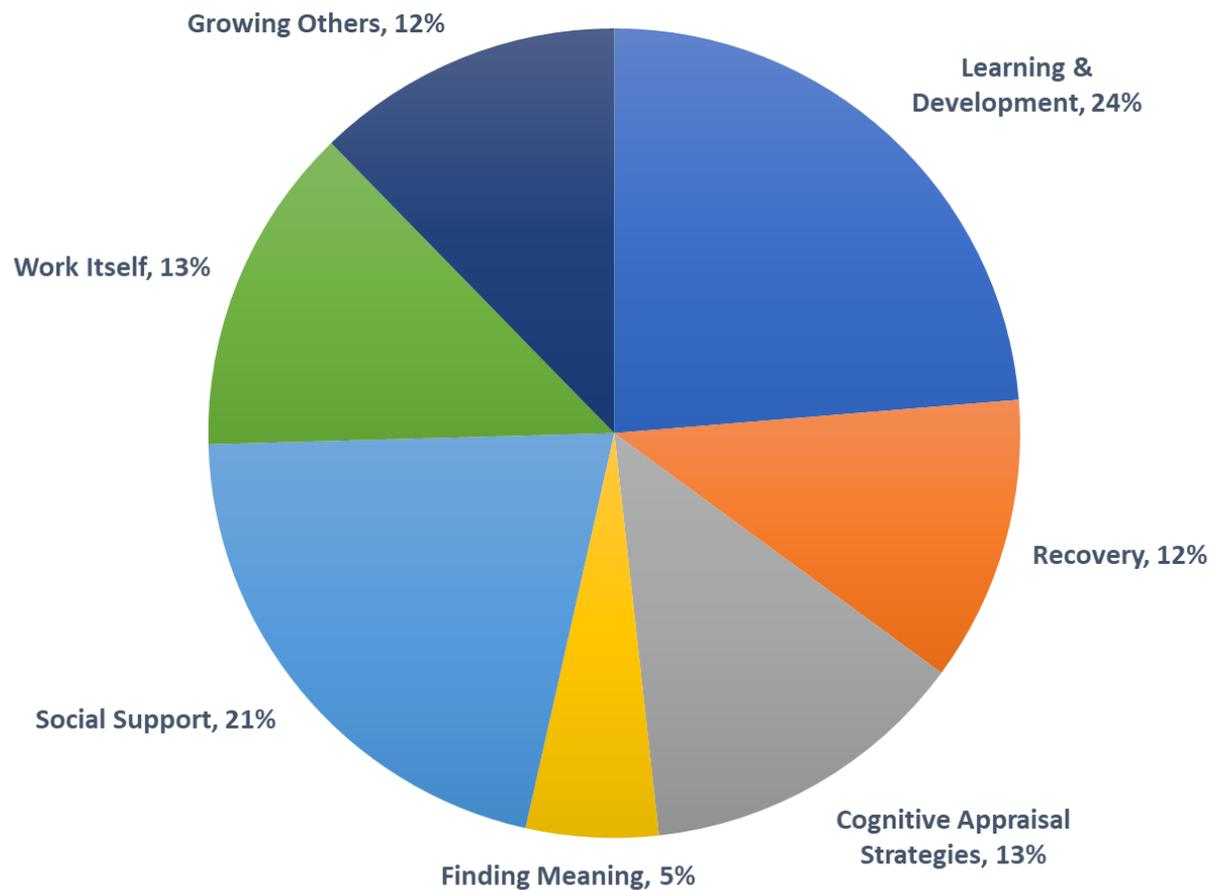
Direct patient care and being available to others in need is a common and powerful source of meaning, purpose, and motivation

- “...knowing the difficulty of what families are facing and being present with them, I think that’s motivating...Working with kids who have been impacted by abuse or neglect...or just going through really difficult situations from a mental health perspective...I find that motivating. Really just I think being a part of different stories, being a part of different journeys, getting to be a resource to families in tough times which is the nature of, again this job and the role that I have...”
- “I always enjoyed, you know, being there more for families too whenever it was somebody else’s end of life time...I mean it’s not that, that brings me any joy, but you know, there’s a sense of peace that I feel like I can help bestow on families.”
- “...I had a family of two young boys...that were taken away from their parents, and their mother happened to be the one passing away...I was done with my day... But, they needed somebody there...to do this and they didn’t have anybody, and I was like ‘that’s fine, I’ll just clock off and I’ll go ahead and help these family members.’...Walking these two children to see their mother who was going to be taken off life support...We brought them all up and I did my part, and somebody found out—somebody told them that I wasn’t working technically and I was doing this out of the kindness of my heart...”

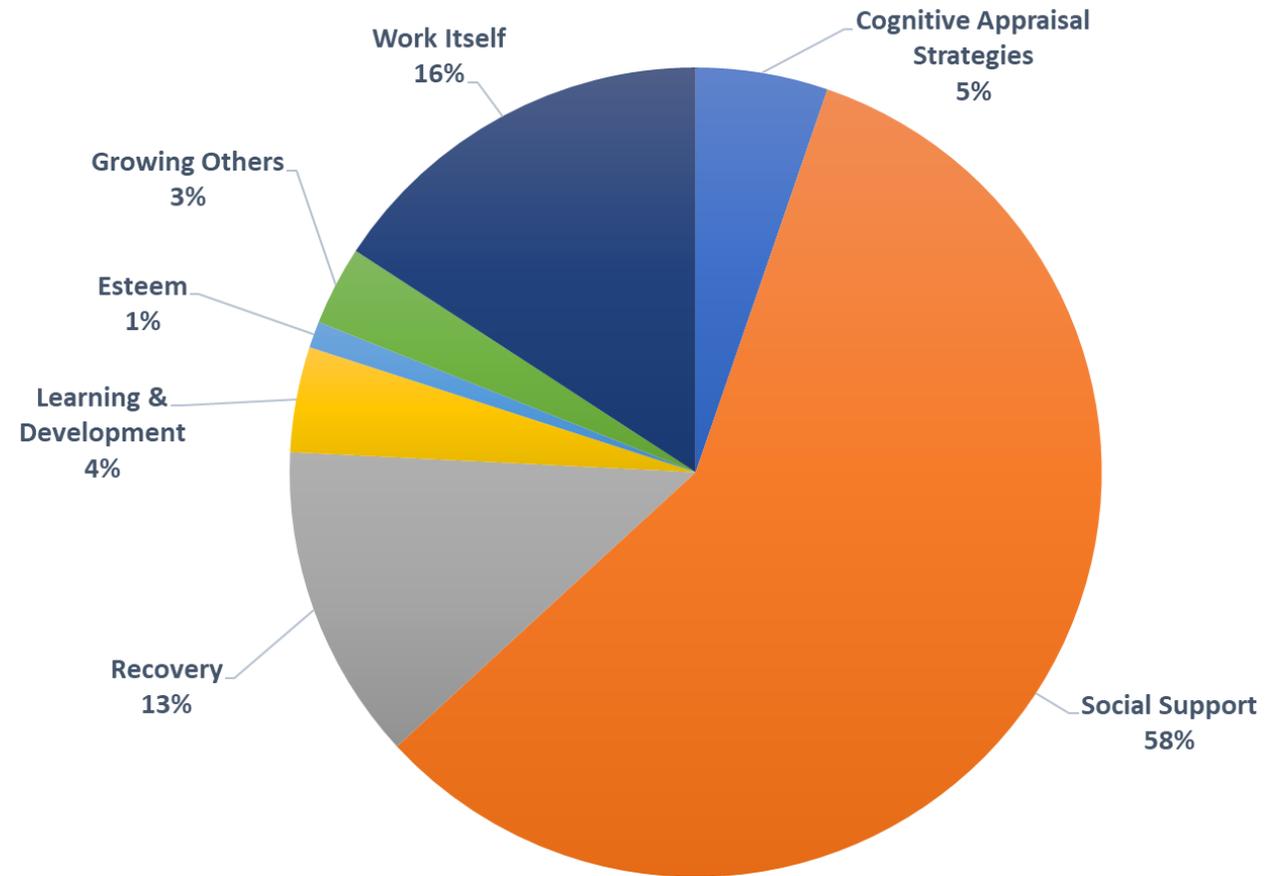
Motivation and Resilience

- **Often overlapping with data we gathered about meaning and purpose, respondents also reported multiple strong sources of motivation that contribute to their work-related resilience, including:**
- Positive outlook on growth and learning through one's daily work
 - "I never know what I'm walking into when I walk in the door in the morning...and there's always a new challenge for me...just to continue to grow and learn and be a part of some else's journey or experience...I feel like I'm doing something that matters..."
- Motivated to keep doing better
 - [with respect to COVID:] "I'm proud of what we've done, but I think we could've been better prepared, and I hope that we, whenever this does slow down and we can stop and think, that we learn from this and are much better prepared for the next one because there will be a next one."
- Demotivators commonly linked to administrative demands and resource constraints
 - "If you didn't document it you didn't do it and we all understand that but there's so, so much that we all do that never - you know doesn't ever get documented any where you know we sat at the bedside for 45 minutes and let grandma cry and tell us her whole life story... you know cause she lost her husband 3 weeks ago and she's given up you know or you know... any kind of story like that and you don't want to walk away from that person but also your not going to sit down and type up the 45 minute conversation and say that's what you did."

How do you find and maintain your “spark” to work in this setting over time?



What resources (e.g., people, tools/technology, spaces) in your work environment help you maintain your motivation even when work is difficult?



Social relationships and Resilience

- **Critical importance of mentors, support of peers/staff/colleagues/leaders, connectedness to patients and their families, etc. – practicing resilient healthcare requires social relationships**
- Key, lasting impact of mentors (on all levels, by nearly every respondent)
 - “the lady who trained me...I’ll never forget her. She scared me to death my first day of orientation about a medication and I will never forget that you have to check that heart rate before you give that medicine...she was fantastic and she ended up becoming a patient and insisted that I was her nurse so that was really scary. Really very scary to take care of my mentor and my trainer...”
 - “the nurse practitioner that I was working with initially that trained me, I mean, she’s become one of my best friends... she’s been with me through so much. Shortly after I started this job, I got a divorce and it was like a really nasty like, very ugly...and she was just always like, you know, full of words of wisdom and encouragement and just kind of keeping me, you know, focused on the bigger picture...”
 - “I would say in school I have a lot of great mentors...that meant a lot to me, people that I looked up to that...were great communicators or people that had a lot of knowledge, that were great teachers...had a passion for what they did...”

Social relationships and Resilience

- Importance of good communication patterns and trust with team members
 - “...the nurse practitioners that I work with, I feel like we’re all really close...and they’re all really great people. And the physicians, too. We have some really kind physicians. I tell everybody that we probably are the best group to work for as a nurse practitioner because, for the most part, our physicians really appreciate us. And typically show us that they appreciate us...and they’re very kind and they’re never condescending...so we’re really lucky in that aspect, because not every group is like that...”
- Negative impact of lack of support
 - “Sometimes I don’t feel like everyone feels or- and I know I don’t (Clears throat) feel like we’re as supported as we could be from the higher ups um.... It getting much better than it used to be, I definitely feel more supported, they’ve made changes in the C suite and I appreciate that and they are very visible now um and very approach able um at least to myself. I don’t know that the staff really feel as much that way as I do, cause I do have more opportunity to be around and about and see them, but um its hard when you get emails saying “well you know, you didn’t document this and you didn’t document that” and it’s like yeah but we kept someone from nosediving out of their bed you know we... we chased someone naked down a hallway today. Yeah, I missed charting that vital sign, but you know we saved a live. That’s hard.”

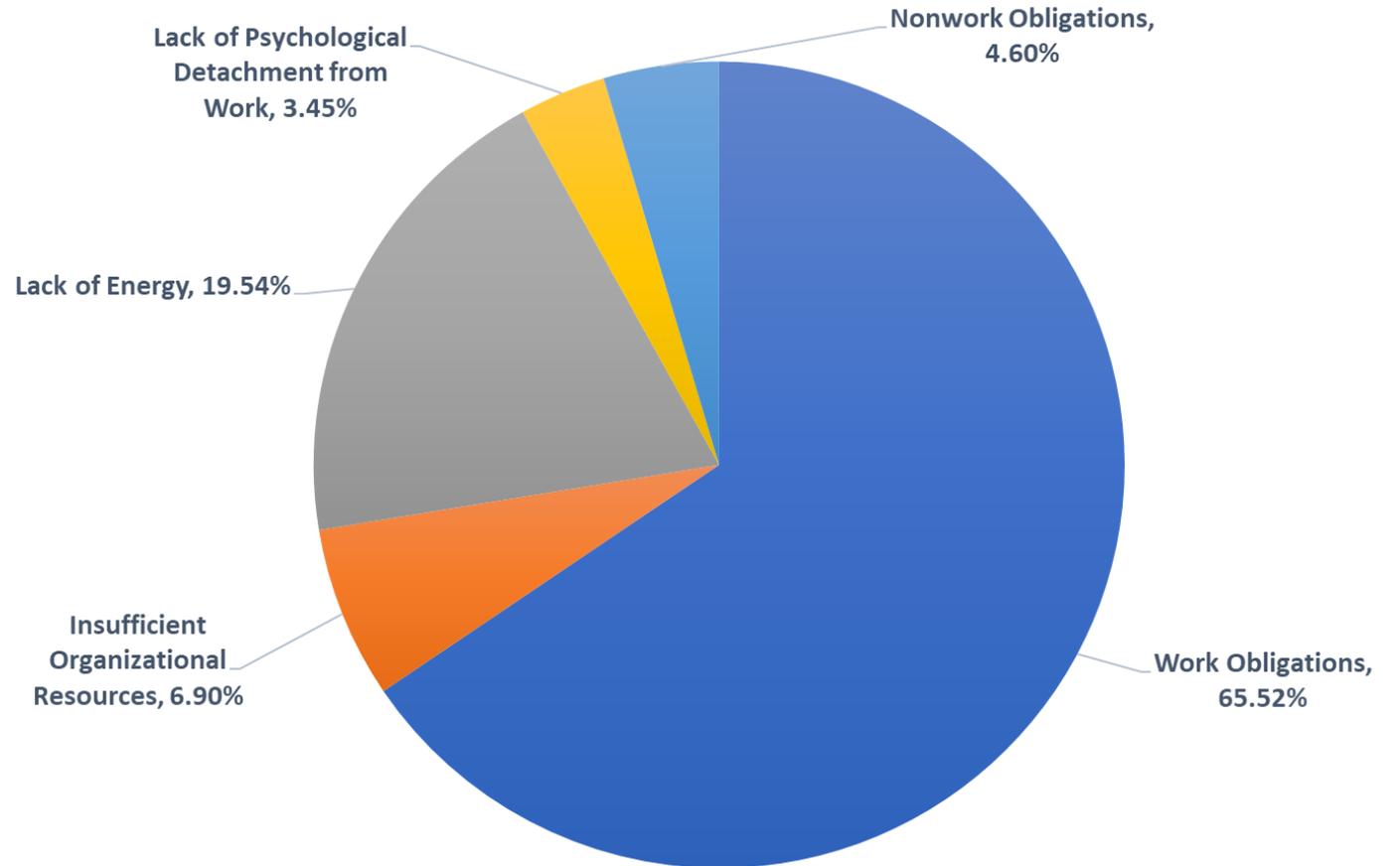
Self-care and Resilience

- **Self-care is insufficient by itself to sustain resilience, but it is an essential factor that was very evident within the practices and mindsets of our respondents**
- Criticality of regular replenishing and restoring
 - “Because if you have nothing to give, if your gas tank is empty, how do you expect for you to be there for other people if you don’t have enough for yourself...you cannot be a good caretaker if you don’t know how to take care of yourself first.”
- Self-care can be modeled and learned
 - “I was prepped from a very young age...and my mother was a nurse. And all my sisters are nurses...my grandmother was a nurse. So, I guess, you know, they understood that and instilled that in me from a very young age. Like, you know...you gotta do something for yourself. Nobody’s gonna make you feel any kinda which way. You have to bring that to yourself. Nobody’s gonna fulfill you as a whole.”
 - “My director...when I was helping caregive for my aunt, she was wonderful about saying like, ‘Hey I know that you’re up all night so come in when you get here, work a 4-hour day, you know serve your time and then go. You’ll get your stuff done, you’ll make it up, I’m not worried about it, just do what you need to do’...having somebody I think above me that was my supervisor tell me to make myself and my family a priority in that very difficult situation was a gift I’ll never be able to repay and like something that I will spend the rest of my time working here making sure that I earn...

Self-care and Resilience

- Strategies for self-care abound and are varied, but generally involve some degree of detachment and/or segmentation
 - “I always stop for lunch no matter what, I make myself stop even if its just 15 minutes. Just stop and breathe and sit down. Its easy to keep going and work through lunch and you know just not take care of yourself or I think having those few minutes to force myself to stop what I’m doing matters.”
 - “The best things I've done for myself...from a work perspective is I don’t get work emails on my phone...and I think for just not being constantly bombarded with that has really been helpful...”
- Also valued and practiced are even micro-opportunities or strategies to inject joy and happiness
 - “You know, I, I do things to bring happiness to myself, to bring good things. Like, I like to live my life happily...I’m a very, I’m an eternal optimist...I’m a very fun person...”
 - “And then sometimes it was like, okay, I have an hour in the day between you know stepchildren, dogs, husband, home duties, where I’m like okay, I’m just gonna turn up the music really, really loud. Imma dance in my underwear in my living room and call it a day.”

What, if any, aspects or features of your work prevent you from fully engaging in your preferred recovery activities?



Next Steps (within next 9-12 months)



Finishing review, coding, and analyses of in-depth interviews



Drafting and submitting for review 3-4 manuscripts and/or conference presentations based on the focus and findings of this project



Developing content for a multi-level intervention

An IGLOO Approach



- Building and sustaining healthcare worker resilience will require a multilevel and multi-pronged effort that connects to all elements illustrated in this figure
 - This is serious organization and work redesign and development, not just small “tweaks”
- More details about IGLOO: Nielsen et al., 2017 and 2018 in *Work & Stress*

Questions?

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THANK
YOU!