Healthy Work Environment in the Emergency Care Setting

Description

In 2004, the Institute of Medicine (IOM) report, Keeping Patients Safe: Transforming the Work Environment of Nurses, identified the need for transformational nurse leadership in order to develop and sustain a healthy work environment.1 Subsequently, the American Association of Critical Care Nurses (AACN) developed Standards for Establishing and Sustaining Healthy Work Environments in 20052 and updated the document in 2016.3 The work group identified six standards to demonstrate healthy work environments: skilled communication, true collaboration, effective decision making, appropriate staffing, meaningful recognition, and authentic leadership.2 This document continues to serve as the gold standard for evaluating the healthcare work environment, providing a blueprint for implementing positive changes.3

Healthy work environments are associated with improved nursing outcomes such as increased autonomy and control over practice; increased job satisfaction; and decreased nurse burnout, sick time, and turnover.4-7 Characteristics of unhealthy work environments include high workload, low decision authority, low support, poor communication, abusive behavior, disrespect, resistance to change, lack of vision or leadership, distrust, conflict with values, mission and vision, and loss of understanding of the central purpose of professional duties.8,9 Researchers have identified a relationship between these negative characteristics and decreases in nurse satisfaction and retention, patients' safety, worsened patient outcomes, and lower care quality. All of these factors are detrimental financially to healthcare organizations as they result in nurse turnover and human suffering.10-12

Researchers are clear that transformative leadership identifies the essential characteristics to achieve, establish, and maintain a healthy work environment.7,12 A crucial component of a healthy work environment in healthcare is safe staffing. Several factors contribute to safe staffing, including patient census and acuity, length of time required for care delivery, experience and educational preparation of the staff (e.g., advanced practice, baccalaureate or associate degree, nursing diploma, unlicensed staff).13,14 Integral to safe staffing is the inclusion of rest breaks, meal breaks, and debriefing after critical events. While researchers support the inclusion of breaks and debriefing in the emergency department (ED), widespread variability exists in the clinical setting.15

Bullying and violence may hamper the safety of staff, patients, and visitors in the ED.16-18 It is imperative that leaders work to identify and apply a systematic, easily accessible method of reporting and responding to episodes of bullying and violence. According to the Occupational Safety and Health Administration (OSHA), a first step in developing a plan to address workplace violence/bullying in the ED should start with implementation of a screening tool to identify the existence and characteristics of bullying and workplace violence.19-21 Through collaboration with bedside nurses and nurse researchers, leaders can help identify and implement evidence-based policies and procedures that establish best practices to promote a healthy work environment, improve patient outcomes, and mitigate workplace violence.
ENA Position

It is the position of the Emergency Nurses Association that:

1. Leadership and healthcare workers share a mutual responsibility to create collaborative values that support a just culture, healthy work environment, and both personal and organizational accountability.

2. Healthcare workers and leadership share responsibility for respectful, professional, and effective communication with zero tolerance for intimidation, abusiveness, or bullying from any source.

3. Leadership and healthcare workers strive to identify and assess workplace violence triggers and support the implementation of an effective workplace violence prevention program to mitigate violence and its impact.

4. Leadership make resources and education available in the workplace for sustaining the physical and psychological needs of the healthcare worker, such as safe staffing levels, reduction of fatigue-related risks, protected mealtimes, and opportunities to debrief after critical events.

5. Emergency nurses and nurse researchers use current evidence to recommend best practices aimed at creating healthy work environments.

Background

A healthy work environment is safe, productive, and satisfying. Essential to developing and maintaining a healthy work environment is the concept of a just culture. The American Nurses Association (ANA) identified a just culture as an environment where individual healthcare workers are not held responsible for systems or organizational failure. A just culture does not propose the acceptance and overlooking of incidents where healthcare workers practice with disregard for evidence-based standards, or engage in behavior that could be characterized as negligent or malpractice with the potential to harm patients.

Researchers have identified characteristics of a healthy nursing work environment as including a productive and collaborative setting in which nurses and other healthcare workers are free from physical and psychosocial harm. At the same time such a work environment should enable them to maximize their ability to provide safe, quality care as well as meet personal needs and empower them to promote a satisfying work experience. A key to providing and sustaining a healthy work environment is quality leadership.

Shirey identified four themes describing necessary leadership practices to maintain a healthy work environment: quality leadership, relational exchanges, environmental elements, and contextual factors. Leaders who maintained positive relationships with staff and demonstrated competence as a leader
were identified as being effective in establishing healthy work environments. Important environmental factors centered on a supportive employer who is receptive to the needs of the nursing workforce.

A recent review of nurse work environments indicates that healthy work environments are advantageous in maintaining a stable and sufficient nursing workforce, promoting hospital efficiency and safety, encouraging positive nurse performance and productivity, improving patient care quality, and supporting a healthcare organization’s financial viability. Additionally, ENA’s position on staffing and productivity shares evidence that a nursing staff with enhanced education (a baccalaureate degree or higher) improves patient satisfaction and patient outcomes.

It is recommended that safe staffing policies include intermittent breaks and meal breaks. Sufficient, quality rest breaks during work shifts are a key part of decreasing nurse fatigue and increasing attention to details and standards of safe patient care. Many hospitals have policies stipulating rest and meal breaks for nurses. However, frequently nurses do not receive these breaks due in part to demanding patient assignments and low staffing. Although currently there is no single standard across all states for rest and meal breaks, evidence suggests the importance of breaks for nurses as related to patient safety. Additionally, integral to the promotion of standards of safe patient care is debriefing after critical events.

Debriefing after critical events has been identified as an effective means of increasing positive patient outcomes through the evaluation of staff performance and the implementation of existing processes. Debriefings can be an economical method of highlighting positive actions and identifying areas for improvement and retraining without negatively isolating individual team members. Researchers indicate that when debriefing after critical events is used in the clinical setting, individual and team performance can improve by 25% in future critical events.

Consumer and relational violence are a significant contributing factor to an unhealthy work environment. Researchers highlight that violence against nurses perpetrated by patients and visitors is as much as three times higher than violence against all other workers, resulting in injuries and increased stress which exert a negative effect on nurse productivity. Among healthcare environments, ED and mental health inpatient departments are considered to be the highest risk areas for staff, patients, families, and visitors. In addition, relational violence (workplace bullying) poses a significant threat to patient safety and is a contributing factor to nurse dissatisfaction and retention. It is reported that as many as 40% of nurses routinely experience bullying in the workplace. Left unchecked, bullying of nurses not only has a high probability of decreasing nurse retention but also of leading to negative patient outcomes.

In 2015, ANA developed a position statement that identified zero tolerance of workplace violence. This policy launched an organizational campaign whereby violence against nurses in the workplace, regardless of the source or type of violence, would no longer be allowed or accepted as a mere side effect of nursing practice. Staff education on bullying and enforcement of a zero-tolerance policy for bullying can be a factor in increasing nurse retention and satisfaction. ENA supports a zero-tolerance policy of violence in the workplace that includes bullying, and identifies hospital leadership as key to...
developing and instituting these policies. A culture of safety depends on the collective attitude of stakeholders at all levels, with everyone needing to take responsibility for safety and safe practice in the work environment. This can lead to increased safety and decreased injuries for patients and staff.

A healthy work environment is multifaceted. Research has supported the intricate connections between the many personnel and organizational factors that contribute to a healthy work environment. The adoption of standards of evidence-based practice supported by research is critical to the development and maintenance of a healthy work environment.

Resources


References

Position Statement


Position Statement

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