



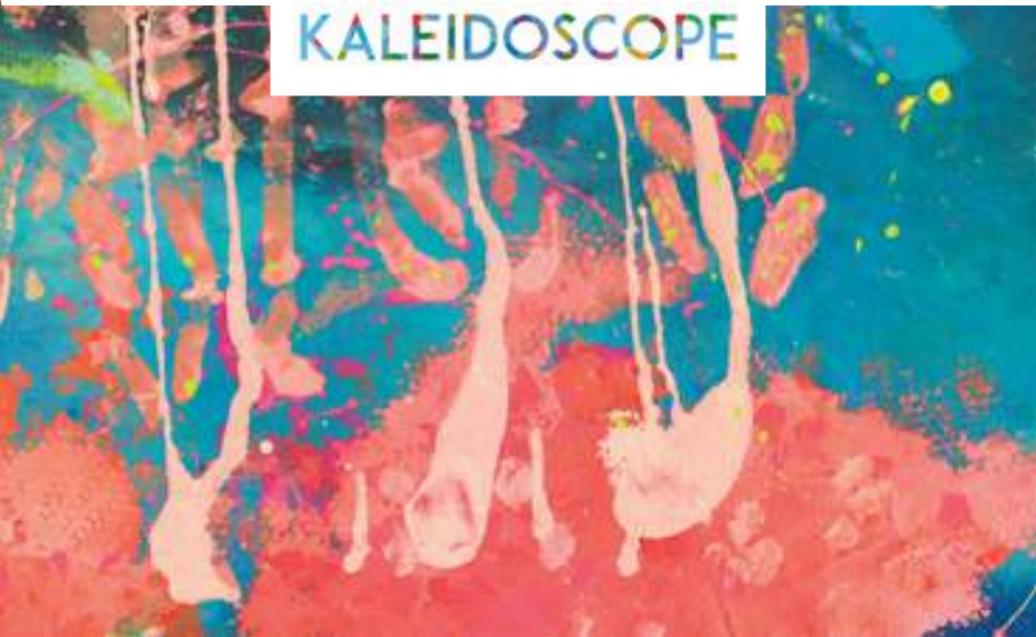
# Beyond burnout

A call to action for joy in work

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Samantha Buttemer

KALEIDOSCOPE



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## **About Sam Buttemer**

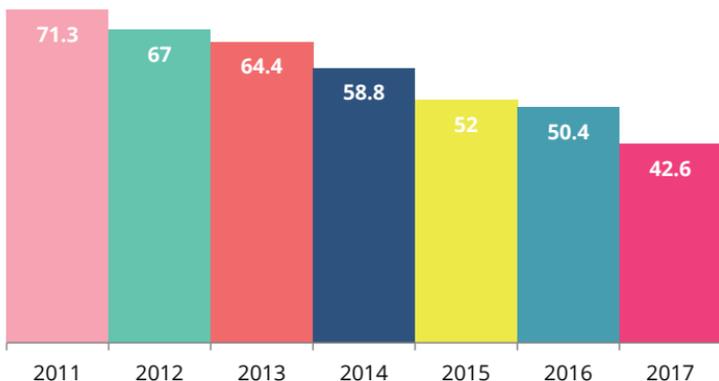
Sam Buttemer is a family doctor and public health resident at Queen's University in Kingston, Ontario, Canada. She is currently pursuing her MSc in Public Health at the London School of Hygiene and Tropical Medicine, with a specialisation in Health Services Management. She is particularly interested in bridging the gap between primary care and public health, with a focus on marginalised populations, and in quality improvement through effective, empowering clinical leadership.

# Beyond burnout: How we can reclaim joy in work in the NHS?

If you ask any young, bright-eyed student why they want to work in health care, you inevitably hear a version of 'I want to help people'. In its purest form, working in health care allows us to fulfill the basic drive of caring for others. And yet, so often we hear of hardened NHS employees advising youth to look elsewhere for a career.

This steely attitude comes on quickly: only 42.6% of junior doctors opted to move directly into specialist training within the NHS after completing their foundation years in 2017. This is an issue that is getting worse, with the numbers dropping every year since at least 2011.<sup>1</sup>

**Figure 1: Junior doctors continuing clinical training, 2011–2017**



Junior doctors have expressed frustration with working conditions, and they are not alone in wanting out. Retention has become a major concern within many fields of the NHS. Policy leaders within the government are looking to raise pay and increase training spots as a counter-measure, but that alone is not enough<sup>2</sup>. Even for employees that continue to work, low engagement is associated with more sick days, which means more costs and demands on the already strained system<sup>3</sup>.

Nurses, doctors, and allied health professionals are all key parts of the system of care provision, and without enough workers the NHS will cease to work. So why are these people steering clear, and what can we do to encourage them to stick with their jobs in the NHS?

We propose that, in the most simple of terms, we need to help them find the joy in their work.





## What is joy in work?

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When you arrive at work for yet another long shift, it's hard to imagine the word 'joy' as describing what you are about to experience. Maybe gratifying or fulfilling... Not joy, right? It might not be obvious at first, but when you really break it down, it is easy to see where joy can come from in health care. As human beings, we strive to feel purposeful, and health care is arguably one of the most obviously purposeful fields of work. Caring and healing are inherently joyful practices, because there are few things in the world that can make us feel so needed, so useful. It is easy to think of joy as associated with transient emotions, like happiness. But it is deeper than that; it is the sense of meaning, purpose and, as W. Edwards Deming puts it, "pride in workmanship" that we strive for and can still achieve even in the most challenging of clinical situations.<sup>4</sup>

To tap into this natural joy, you need a few other tools as well. You need to be well enough yourself to recognise it, and you need to be engaged enough in your work to uncover it. We often talk about burnout in health care, the combination of exhaustion, disengagement, and feelings of inefficacy rampant throughout the NHS and it is clear that this is antithetical to joy.<sup>5,6</sup> If we want to tackle burnout before it hits in full force, we need to buffer it by finding joy in work.

The *IHI Framework for Improving Joy in Work* by the Institute for Healthcare Improvement in the USA<sup>4</sup> was our inspiration for exploring the topic further, within our own national context. The IHI paper eloquently makes the argument for joy in work and what needs to be done to achieve it, from individual employees up to the most senior levels of management. Jessica Perlo from the IHI shared their work on joy with us in a webinar<sup>7</sup> that set the stage for our focus on joy. The IHI used a familiar quality improvement approach as their team created a four-step model to work on improving joy throughout a health care organisation (Figure 2). In their eyes (and ours too), joy is a quality we want to strive for, and so it deserves a framework for action.

## **Figure 2. The IHI's Four Steps for Leaders for Joy in Work**

**4.** Use improvement science to test approaches to improving joy in work in your organisation

**3.** Commit to a systems approach to making joy in work a shared responsibility at all levels of the organisation

**2.** Identify unique impediments to joy in work in the local context

**1.** Ask staff, 'What matters to you?'





## Do we really need joy in work?

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We are unashamedly pro-joy. This is not a long diatribe against burnout, but instead an exuberant call to action to bring joy itself into the NHS. And yet, there are so many other issues in the NHS, why worry about joy now? Why should joy be a top priority? It may seem impossible and impractical to think about finding joy when we are dealing with so much concern about burnout, but it is the upstream solution to burnout, along with many other problems being faced by the NHS.

To set the stage for understanding the importance of joy, it is important to keep in mind that while individuals can find joy in their work, ultimately it is also a property of systems being engineered to create it. As the saying by Paul Batalden goes, “Every system is perfectly designed to get the results it gets,” and the NHS is no exception to this. The NHS is set up in such a way that joy is not necessarily the norm. From administrative burdens, inflexible measures of success, and concerns around bullying, racism and sexism, the NHS as it stands has room to grow.

We could take a narrow approach and tackle any single one of these issues, but it's time to look at the bigger picture and consider that all of these issues fall under

the umbrella of joy (or un-joy) in work. Thinking broadly is conceptually appealing, sure, but it is also incredibly pragmatic, for the following reasons:

## Money

One big reason we need to address joy is that we simply can't afford not to. Creating a joyful and engaged workforce saves money, plain and simple. Going beyond burnout to a happy, enthusiastic workforce reduces staff turnover and cuts down on sick days. In the US, the costs of replacing a single doctor are estimated to be over \$1 million.<sup>4</sup> We don't have an exact number for the UK, but it is not likely to be small.

We do have some estimates for engagement and sick days in the NHS, and the numbers are staggering: one standard deviation increase in overall engagement within a single trust is associated with around £1.7 million saved in staff spending, which appears to be directly associated with the reduction in sickness days taken when engagement is higher.<sup>3</sup>

Beyond the numbers, if we want the best and brightest to work in the NHS, we need to make it attractive. Focusing on joy does just that. Measuring and sharing joy levels within organisations helps attract and retain top performers.<sup>4</sup> If we want our staff to choose the NHS over jobs in other countries, we need to make this shift so that we get a return on the investment we make in their training.





## Safety

Of course, there is more to it than the staff. The NHS ultimately exists for patients, so how does joy help the patients out? Simply put, joyful staff are safer staff. Engaged staff make fewer errors and provide more discretionary effort. Happier staff can also spread joy to their patients, a psychologically important aspect of care provision.

By improving engagement, staff performance improves, which in turn improves patient experience and outcomes.<sup>4</sup>

## Ethics

At a basic level, though, quite possibly the strongest argument is the ethical one: how can a system dedicated to improving health ignore the health of its own employees? We believe everyone deserves a chance to love their jobs, considering so much of our waking lives are spent working. People-centred health care, the World Health Organization's progression forward from the patient-centred health care movement, gives us a chance to make this a priority. By considering the importance of patients as part of a team, rather than as someone having something done to them, patients are an equal in the process of care.<sup>8</sup>

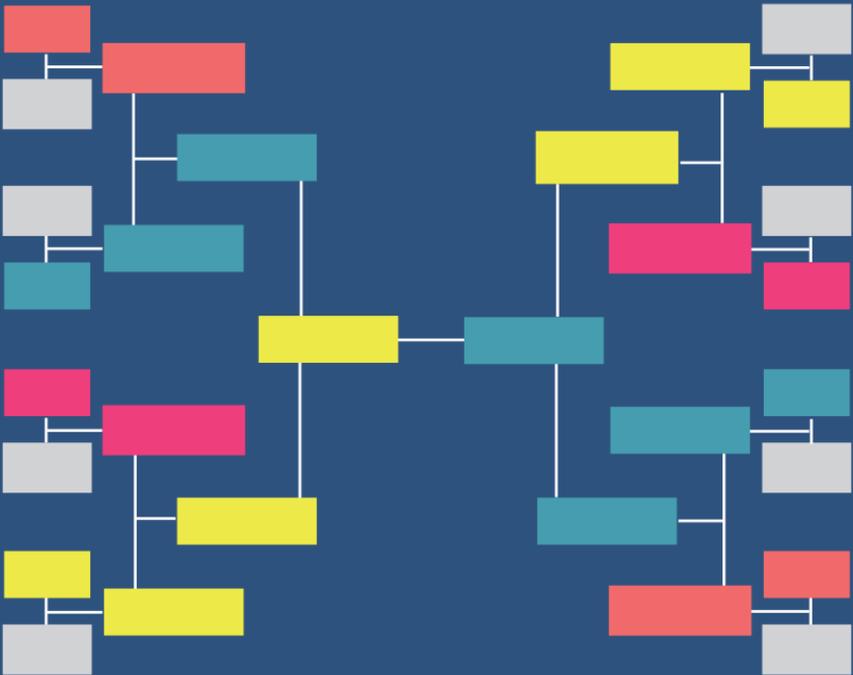
With this perspective, it is easy to see that if we are aiming for equality, we need *everyone* on the team to be allowed to strive for ideal health.

# Champions of joy!

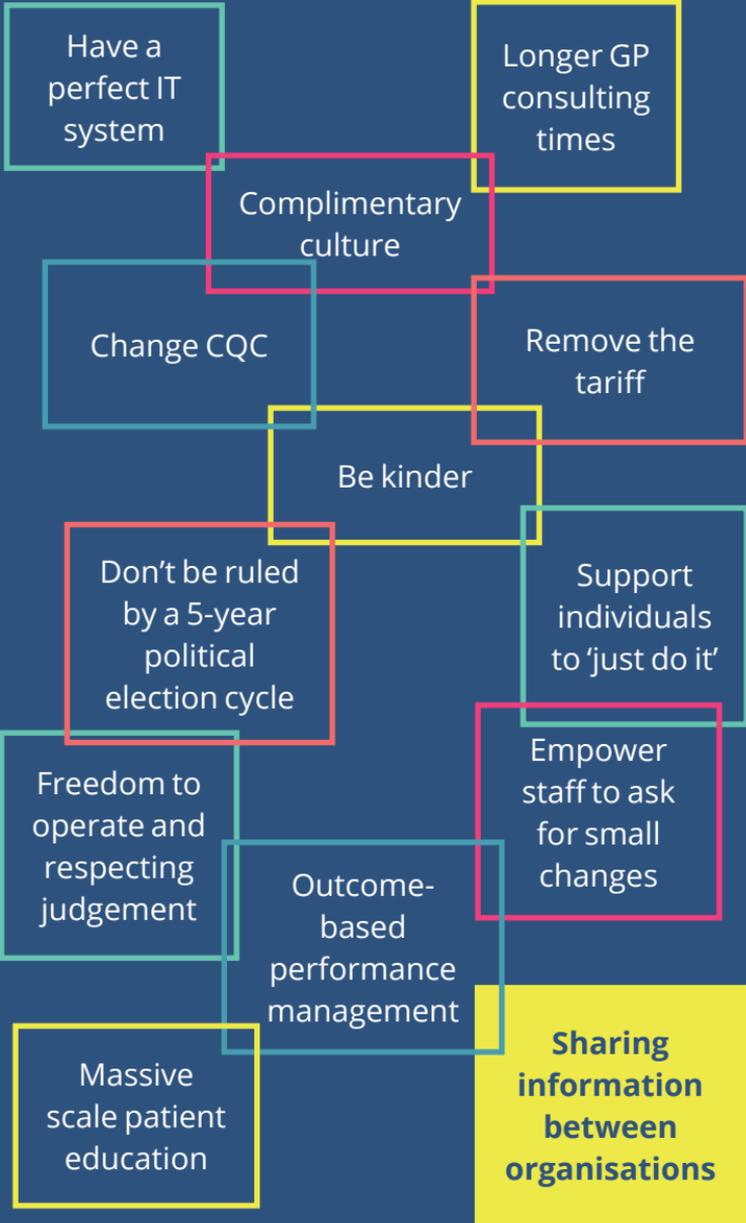
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At our event, we got some great ideas about what participants thought was the one single most important system-wide change needed to bring joy.

Setting out the different ideas akin to a football cup draw, we asked participants to vote between pairs as to which idea, if enacted across the NHS, would have the biggest positive impact on joy in work. A 'joy-off' if you will...



# Ideas included the following – pick your winner!



**“The gifts of hope, confidence, and safety that health care should offer patients and families can only come from a workforce that feels hopeful, confident, and safe.”**

*Don Berwick<sup>4</sup>*

We've been convinced that joy is important, and in order to spark more conversation around joy in work, we created the NHS Joy event held on 2018's 'Blue Monday' – January 15 – to bring together eager minds from across England to discuss how to bring joy into the NHS. As far as we can tell, this is was a unique event that has not been done elsewhere (though we would love to see others like it!). It acted as a springboard for our ongoing conversations about joy throughout the NHS.





## Joy: an issue on three levels

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Joy is not borne by individuals alone. It is a characteristic of highly functional organisations – and systems as well. As such, it needs to be cultivated on all three levels simultaneously to have a shot at making it happen. Our NHS Joy event was broken down in the same way, so we could spend time talking about what changes can happen at each stage in order to make the whole of the NHS better for all of us: patients and staff alike.

### Individual

It isn't impossible to find joy in the NHS as it stands now, maybe just harder than it should be. Ted Adams, an obstetrician and gynaecologist from Liverpool, spent time in the USA a few years ago exploring what brings joy in work to people working in obstetrics. His work involved in-depth interviews and found that joy comes from clinical work, but also from non-clinical work, like the chance to work within a strong team and working on quality improvement initiatives, as well as personal wellness. All of this plays into daily productivity. He brought his expertise on the topic to our NHS Joy event to explore what brings us joy here in England.

Early in the day, we had our participants turn their brains on and start pondering this simple question: what brings you joy at work? It turns out, so many

things, big and small, bring us joy to our work every day. Things like sharing a cup of coffee with a colleague, hearing a sincere thank you from a patient, or solving a particularly challenging clinical problem bring people joy, day in and day out. When we all took a moment to step back and think about it, we could see the small joys in our everyday experience.

So based on that, we know there are people that do find joy in work within the NHS. It *is* possible.

Bob Klaber, a general paediatrician at Imperial College Healthcare NHS Trust, joined us in a webinar on the topic.<sup>9</sup> He prioritises joy by prioritising relationships and learning, but most of all, leadership in terms of portraying a real sense of interest in the people around us, patients and colleagues alike. Never underestimate the impact of even simple acts, like smiling or holding open a door, on the lives of those around you. No matter how junior you are, if you can cultivate this sense of consideration, you will find and share joy.

Megan John, a GP from Bracknell, is one of those people that manages to find joy, even during the days where her clinic is booked solid, all the while knowing she has a stack of paperwork to get through as well. She makes a major effort to help her patients during each appointment, and extends this effort to finding joy. She will take a minute to share a joke with a colleague, and makes the effort to give positive feedback to her colleagues whenever she can. It's hard to understate the importance of saying thank you on staff morale,





energy, and positivity. She believes if you create a culture of appreciation, you can create joyful practice. Participants at the NHS Joy event agreed: both the give and take of gratitude create joy in work.

**“I chose to be a doctor, and there is inherent positivity in that.”**

*Megan John*

Nish Manek, a GP trainee from Cambridge, has also managed to find joy in her work despite the pressures she faces as a junior doctor. How does she do it? By finding people, purpose and proficiency; and working to create this in the environments she works in. She recognises that as a trainee, she doesn't always have control over the situations she is working within, but she does have the ability to remind herself of her purpose as a doctor, share gratitude and joy with her colleagues (instead of simply commiserating over how hard everything is) and gaining proficiency in her role as a GP.

### **Organisation**

Culture is born at the organisational level, with each hospital and clinic within the NHS functioning a little differently than the others. Targeting this level is a natural fit for making the changes needed to promote joy in work.

Jos de Blok revolutionised the management of health care organisations with Buurtzorg, a home care nursing organisation in the Netherlands. We were lucky enough to hear him speak about this at our NHS Joy event. Building Buurtzorg from the ground up, he was able to prioritise joy in work for all of his employees, starting with the first small team of nurses.

So how does Jos bring joy to work for his (now) thousands of employees? By giving each team of up to 12 nurses a specific community to work within, and the ability to self-manage. Jos feels strongly that it is better to work in networks than hierarchies. The nurses have control in their work: who they care for, when they do it and how they do it. The mindless administrative burden is managed within the IT system, leaving the nurses to focus on mindful work.

Some managers in organisations might find this frightening, suspicious of whether quality care can flourish under such freedoms. And yet, Buurtzorg wins awards for providing the highest quality of care in the country. It turns out that self-management allows Buurtzorg to tap into the intrinsic motivations of its employees, the need for purposeful care for patients. These nurses *want* to be the best they can be, and they have the flexibility to change how they care for patients to do so. Their passion is not stifled by layers of rules and accountabilities. Ultimately they are accountable to their patients and the other members of their team, and they know it. It encompasses the ideals of patient-centred care.





**“In the other organisation... [nurses] got instructions on how much time they could spend on cleaning a toilet, and I think ‘how can you imagine that somebody should be given instructions to clean a toilet?’”**

*Jos de Blok*

Organisational joy can come from large networks, like Buurtzorg, but also in smaller organisations that function on a local level, even when dramatically changing the management structure isn't easily done.

Matthew Dolman, a GP Partner from Somerset, manages and practices alongside a team of 30 people. He works to make leading his coworkers to joy a routine. A simple but powerful goal is to eat lunch together each day, regardless of the workload. Give people something to look forward to, keeping a space carved out for positive interaction with each other. He also contends that as a manager, you need to work to find and foster laughter with each other, even if it proves challenging at times. He sees this as an important managerial role. Working in health care can be emotionally exhausting, and we need to help support each other to find the joy. Ultimately we need to actively build community in order to stay joyful, and leaders are well positioned to exemplify this.

## System

Despite all of the changes that can be made individually and organisationally, there is still room for a frameshift in the culture of the NHS as a whole.

How can we sell joy without sounding like we're in a cult? Culturally, it can be embarrassing for health care professionals to say they love their job. Somehow it has become the norm within the NHS to be negative. Maybe it's because people don't want to give up the guise that working in health care is a slog, but who's to say that you can't find joy even when work is challenging?

David Haslam argues that the culture needs to change at the system level around talking about joy in work, and valuing joy. He spoke about fostering joy in work at the upper echelons of the NHS, particularly in terms of spreading gratitude. Those at the highest levels of management need to prioritise these ideas to make the environment where joy can spread. He himself, as Chair of the National Institute of Health and Care Excellence, prioritises talking about kindness and compassion at every talk he gives.

**"There was one big conference where I made everyone close their eyes. Then if they enjoyed being a doctor, put their hand up, but they had to promise to keep their eyes shut. Almost every hand in the place went up. I'm absolutely certain if I'd have asked that straight with everyone's eyes open, they'd have been too embarrassed."**

***David Haslam***





“Love the work, but hate the job.” We’ve all heard that one before, and it seems especially true with regards to health care.

Rebecca Rosen, a GP also working as a Senior Fellow in Health Policy at the Nuffield Trust, emphasised this struggle between enjoying the true work of health care while being bogged down by the un-joy of administrative burdens. She believes the NHS needs a rethink about the administrative demands being placed on employees, clinical staff and managers alike. No one goes into health care for the paperwork, and if we can bring employees back to their core purpose as to why they went into health care in the first place, we can help them find the joy in their work yet again.

These issues are seen in health systems across the world, with GPs from Canada to France to Spain all finding their joy is associated with control of their working lives. Health systems leaders need to create the infrastructure for health care workers to have their autonomy valued in order to foster joy throughout the system as a whole.

It will be tempting for those working at the highest levels of the NHS to create processes and rules to create joy, but joy comes from the bottom up. It behoves us to have systems that create the space in which joy can naturally flourish and try not to get in its way.

As the final exercise of our workshop, we had a head-to-head bracket to figure out the number one thing we thought the NHS needs to do system-wide to bring joy to work. Many great ideas were proposed, but only one could reign victorious: sharing information between organisations. (For the full results, see the diagrams on pages 10 and 11.)

The crowd was passionate about this one. Not having all of the information to do your job well, and wasting significant amounts of time trying to find it is the ultimate un-joy. If we could arrange our systems to be more collaborative and open, staff would be able to spend more time solving clinical issues, something they told us brings joy every day, and patients would benefit through improved continuity of care.

**“It’s okay to talk about joy, even at a time in the NHS when things are incredibly difficult.”**

*David Haslam*





## Call to action

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Our workshop on joy has wrapped up, but the ideas brought up by our speakers and participants continue to percolate. It remains clear that cultivating joy is better for efficiency and the financial bottom-line, better for patient safety and better for maintaining the necessary humanity in health care. Regardless of what you prioritise, this is an issue to be tackled. So what do we need to do to bring back the joy?

It is time to be bold.

We need to help employees find the joy they crave by letting them feel their humanity at work. Everyone deserves the chance to bring their best self to work every day, and to share in that in functional teams. Let's break down the silos in health care and let workers cross boundaries and make new relationships in the workplace.

How can it happen? By engaging every single person in the process. The NHS can become an integrated health care system where every employee, from porter to surgeon, from pharmacist to chief executive, undergoes baseline training within their hospital to cultivate relationships and shared values in the organisation. These programs can give employees a sense of purpose, a feeling of being valued, that is desperately needed to cultivate joy.

Or maybe we can go even bigger. Let's rethink the entire education process for doctors, nurses, and other health care professionals. Who says the status quo needs to stand, as is? Why not have a shared year to start where we all learn about each other's roles and purposes in the system to build empathy for each other at work each day? We are all in the trenches together, so to speak, so why not develop the camaraderie needed to stay positive from day one?

It is easy to think of health care providers as only providing service when in the clinical encounter, directly interacting with patients. The cultural expectations we have placed on our providers to prioritise clinical encounters has shifted the focus away from innovation. Sometimes patients are best served when clinicians can spend a few minutes reading around their chart, catching up on new medical literature, or on the phone discussing a challenging case with a specialist colleague. Variety is the spice of life, as they say. Facilitating these other activities can encourage innovation in care provision, like Bob Klaber has, and the flexibility in what work looks like can bring joy.

**"You have influence around you, whoever you are. The way you stand, smile, chat to people has real influence."**

*Bob Klaber*





It isn't as though the NHS is oblivious to the need for change. The annual staff survey measures engagement, but is that really the best way to measure what we're looking for? What does a 0.1 point change in overall engagement even look like? Why not switch it up and come up with tangible, actionable measures, like how often a GP gets 30 minutes away from the computer for lunch? Or why not let teams figure out what matters to them and find their own metric instead of working top-down.

We cannot fall into the trap of seeing joy in isolation, as just another system-wide metric needed to achieve. Such an approach would inevitably fail. Instead it is a crucial part of a comprehensive strategy to move health care from a medical model to a health model. We need to ensure everyone is as healthy as possible in our health care teams, from patient to nurse to doctor to manager. This is the embodiment of people-centred health care.

And for those of us not in a position to enact these major changes, we are not powerless. Advocate for the importance of joy, both to higher management and to those around you. Every small act of kindness, day in and day out, can help change the culture of your clinic or hospital for the better. Prioritise joy in your work and you can help spread it to those around you. Normalise kindness and joy, for the sake of us all.

## Five ways to bring joy right away!

The individuals that joined us for our Joy in Work event brainstormed what brings them joy in an average day. Add these things to your daily routine to find your own joy – and share it with your coworkers.

1

### **Eat together**

Make dedicated time for your colleagues, even just five minutes, to share a cup of tea or your lunch. Enjoy each other's company without the distraction of computers/phones.

2

### **Say thank you**

Create a culture of positivity at your workplace by setting the standard. Normalise thank yous and you will start to hear them back.

3

### **Seek laughter**

This one seems obvious, but it is true: laughter brings joy. Share jokes and allow yourself to have a laugh, even if you're having a tough day.

4

### **Learn new things**

Learn things about your specialty, your patients, even each other. Discovering something new is invigorating and joyful. There's no way you went into health care without enjoying learning (since there's just so much of it!)

5

### **Support flexibility**

Do your best not to micromanage your colleagues – let their creativity and joy flourish, but be available for advice and direction if needed.

And an extra one for good measure: remember, it's okay to feel joy even when things are tough. You're allowed.



“Sam and colleagues expand on the way we think about Joy in work, bringing its many manifestations to life with examples from the field and expanding on the IHI Framework for Joy in Work. Here we’re given important steps we can take **today** to produce more joyful systems. This can move leaders at all levels and their organisations towards creating person centered care cultures guided by kindness and compassion and joy!”

*Jessica Perlo, IHI*

## **Acknowledgements**

Thank you to everyone who contributed, big and small, to the development of content for our call to action by attending our NHS Joy event in January 2018. Special thanks to Jessica Perlo, Bob Klaber, Ted Adams and Arthouse Meath for their individual contributions. All of you have helped bring joy our way.

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## **ARTHOUSE Meath, creators of 'Underwater' featured on the front cover.**

Back in 1999, Becky Sheraidah started to run art workshops for men and women living with severe epilepsy, learning and physical difficulties. With the workshops allowing those who lived with disabilities to start expressing themselves creatively, Becky could see a positive change in the artists. In 2005 she founded ARTHOUSE Meath (or simply, ARTHOUSE) – a thriving non-profit business that offers purpose, health and well-being to each artist through its doors.

Since 2005 ARTHOUSE has grown into something recognisable. The artists create artworks which are developed into wonderful products for sale. 100% of sales revenue sustains the enterprise, enabling it to expand and evolve with the hope of offering more opportunity for more people in the future.

Work from two of the talented artists Chris Hodding and Dominic Chin feature on the cover of this document. Dom and Chris often combine their creative talent, "The best thing is working in a team with my best friend Chris" says Dom. "Our paintings were in the window and then they sold. It makes me feel pretty good to see that."

The future aim of ARTHOUSE is to offer people more opportunity and become a household name in order to change attitudes and help people to feel integrated, accepted and respected.

For more information on ARTHOUSE Meath visit [www.arthousemeath.com](http://www.arthousemeath.com) or follow @arthousemeath



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