Zen for 10

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Optimizing Utilization of a Relaxation Room to Enhance Employee Experience, Wellness, and Retention

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Background

In recent years the missing link in our nation's current quadruple aim for health care has been identified as clinician experience.[1] Research confirms that health care team members face emotional and physical demands, fatigue, and burnout, all of which lead to decreased job satisfaction and translate to inferior quality of care.[2,3,4,5] There is ample evidence that strategic leadership practices to promote a joyful, engaged workforce lead to enhanced employee experience, retention, productivity, and reduction of waste; improvement in clinical outcomes, safety measures, and patient experience; the combination of all drive improved financial outcomes.[1]

The Quadruple Aim: Better Outcomes, Improved Clinician Experience, Improved Patient Experience, Lower Costs

Frontline team members' rest break frequency is negatively correlated with their psychological distress. Studies show that when leadership encourages staff members to take time away from the clinical setting, there is an increased frequency of staff taking breaks.[6] Furthermore, literature associates break areas (e.g. going outdoors or off the unit, comfortable and separated break rooms with windows) and break activities (e.g. passive and relaxing breaks, socialization) with physical and mental recovery during a work shift.[7] Most clinical settings do not have space or time designated to foster frontline team relaxation, reflection, renewal, and overall wellness. Evidence supports the use of respite rooms to mitigate stress amongst health care teams, yet the literature also identifies the need for intervention studies focused on rest break organization and development of guidelines to maximize frontline team utilization of wellness resources.[8]

Key Driver Diagram

Study Design

The project will utilize a counter-balanced crossover design comparing individual unit team respite room utilization (dependent variable) with and without the "Zen for 10" team support intervention (independent variable). Study groups will be provided with respite space and amenities within their clinical environment and each group will be provided with both a control period of three months with no intervention, as well as an intervention period for three months utilizing the "Zen for 10" intervention. Unit based study groups will experience the control vs. intervention periods in reverse order to serve as a study counter-balance.

Respite room utilization with and without the "Zen for 10" intervention will be measured and compared between clinical teams serving unique populations. Respite room users will be surveyed for feedback on respite space design and amenities.

GRAPHIC WALL – | MASSAGE CHAIR/RECLINER | ROOM DIVIDER
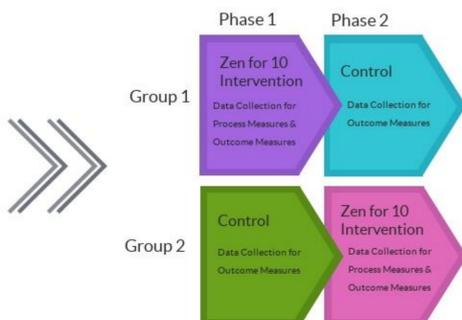YOGA MAT SPACE | 3HI STORAGE – WOOD LOOK | FLOOR LAMP

The "Zen for 10" study intervention is designed to support frontline team members in taking time for a wellness break in the respite room. During the intervention phase of the study, team members share their wellness goals and make a commitment to taking time for their own and their team's wellness. Each day the charge nurse provides frontline team members on the unit with a "Zen" card that includes an inspirational quote for the day and assigns a team buddy to support in a wellness break. The paired team members plan a time to take a "Zen for 10" break based on their patient care workflow. The pair sign up for their individual time in the respite room and then commit to cross-covering patient care assignments while each takes their "Zen for 10" break. Additionally, the charge nurse and leadership team carry "Zen for 10" critical moment cards to provide support to any frontline team member during critical moments of need or when they want to support a team member in taking a wellness break. Providing support for wellness with the gift of a "Zen for 10" is designed to build team relationships, raise awareness of team members critical moments, and care for themselves and others.

Hypothesis and Theory

Implementation of a "ZEN for 10" break intervention will support increased utilization of unit based respite rooms to optimize the positive impact of this organizational resource on employee experience and retention.

IHI Framework for Improving Joy in Work is the model that has guided this work and will continue to direct all of the project's efforts.

Timeline

December 2018
- Education for staff and leaders
- Final preparation for Zen for 10 intervention

January – March 2019
- Completion of respite rooms
- Initiate 1st phase of study

April – June 2019
- 2nd phase of study reversing groups receiving control vs. intervention

July 2019
Data analysis and summary of results

Project Measures

Project Measures

Process Measures:
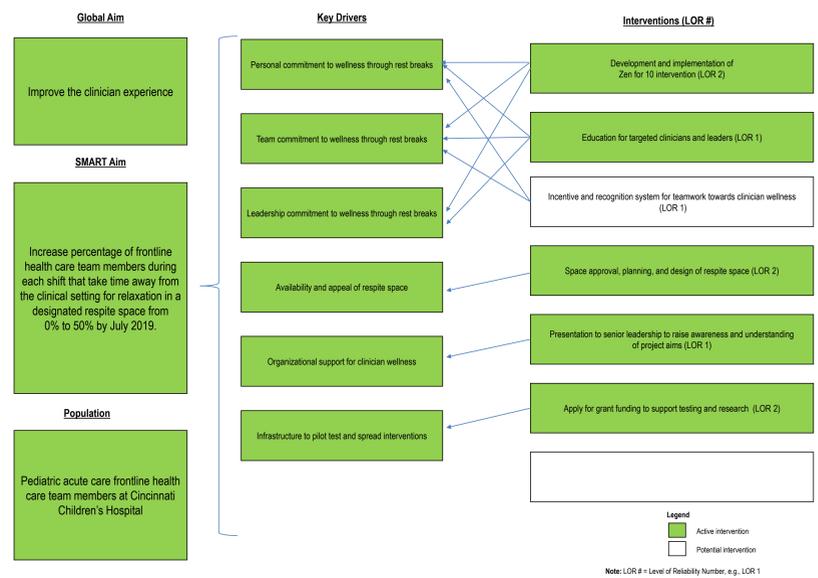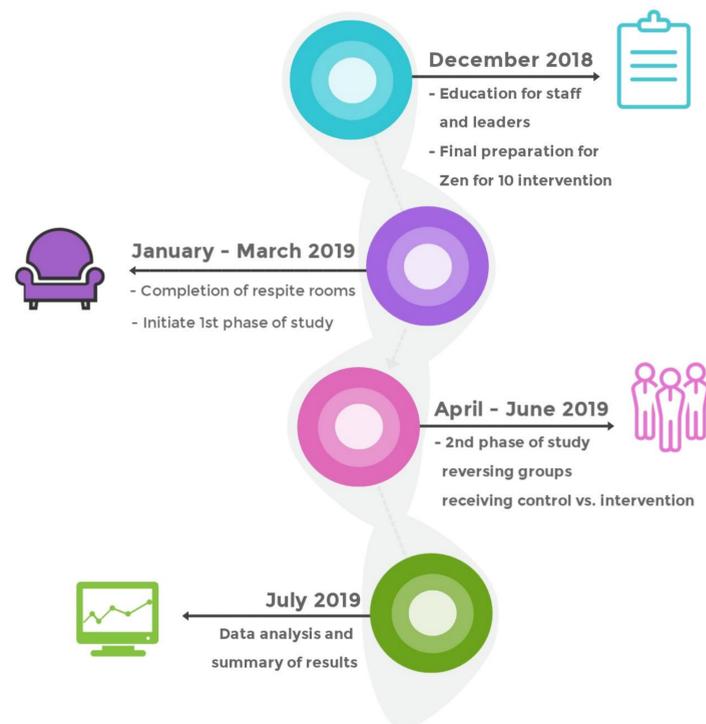- Percent of staff each shift that utilize Zen for 10 intervention

Outcome Measures:
- Percent of staff each shift that utilize respite room
- Staff satisfaction of breaks
- Staff retention over time

Group 1: Phase 1 — Zen for 10 Intervention (Data Collection for Process Measures & Outcome Measures); Phase 2 — Control (Data Collection for Outcome Measures)

Group 2: Phase 1 — Control (Data Collection for Outcome Measures); Phase 2 — Zen for 10 Intervention (Data Collection for Process Measures & Outcome Measures)

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