

Introduction

“A man who as a physical being is always turned toward the outside, thinking that his happiness lies outside him, finally turns inward and discovers that the source is within him.”

SOREN KIERKEGAARD

This book originated nearly 30 years ago when my clinical practice primarily consisted of helping two groups of clients, all professionals: some who were hospitalized with severe mental illnesses and others whom I saw as outpatients in private practice. *Healthy Ways to Work in Health Care: A Self Care Guide* reflects what I learned from my outpatient clients—these gifted individuals who were teachers, nurses, counselors, business professionals and ministers. For almost all of them, it was only a matter of time before they reflected on the role that work played in their lives.

Given how much of my clients’ waking lives were spent working, it wasn’t surprising that work shaped their relationships with family and friends and deeply influenced how they felt about themselves. Some thought that the way they worked contributed to their divorces. From others, I learned that being on the job was the activity that held together their otherwise chaotic lives. A surprising number felt they were mismatched to their jobs and

that if only they could find the right job, contentment would follow. Some felt trapped in a job that provided great benefits; their mindset was, “I’m unhappy, but I’d be crazy to change jobs at this time in my life.” Many of my clients seemed to push themselves along as they waited for retirement.

Over the years, I began to intuit patterns and connections woven into clients’ diverse stories. I sought supervision from more experienced colleagues and continually spoke with them about these patterns and connections. Little by little, hardly aware of what I was doing, I started to let go of traditional thinking about work and listened to what my clients were teaching me. That’s when I coined the term “work fixation,” which I could see was different from overwork, work addiction, and work exhaustion. At the same time, I was discovering the value of journal writing as a way to help patients learn about themselves—particularly how to find meaningful work and work in healthier ways.

My own career evolved and I spent years in administrative positions within large health care systems. Naturally, I became intimately involved in the daily experiences of health care professionals—the crises, the joys, the business pressures, team conflicts, and interpersonal issues they face—and appreciative of the extreme emotional, spiritual and physical balancing act they perform personally and professionally as they engage in this

most important work of caring for others. Eventually my thoughts coalesced into this book, which has taken the shape of a hands-on guide for health care professionals and those who, as a result of life circumstances, are caregivers.

Healthy Ways to Work in Health Care starts by taking a step back to define work as a way to build a better world. Whether we work as nurses, physicians, astronomers, lawyers, teachers, sales people, construction workers, or parents, we're engaged in transforming the world as we know it. Even people who operate machines in a garment factory, repair flat tires, teach children to read, act on Broadway, and ferry passengers across the country are engaged in the drama of creation.

In part because of our cultural shaping as well as the demands of work and family, most of us live as if *doing* is the most important side of our life. What we forget is that the other side of *doing* is *being*. The two are inseparable. When we emphasize and balance being with doing, we are acknowledging that *how* we are present is as critical (or some would say more critical) than whatever it is we are doing. Nowhere is this more evident than in caregiving since our primary focus is on the people we are serving.

We are not just doers stocking grocery shelves, programming computers, running spreadsheets or repairing machinery. As health care professionals, our jobs focus on healing people and

because of that, work holds some unique factors: the importance of being present in our work, that presence is influenced by our personal lives and experience, a sense of being called to our profession, the pull of this commitment, the pressures resulting from the business of health care and the immense honor and sometimes burden of caring for others. All of these factors and many more life experiences shape the worker we are and the work that we do. Imagine two nursing school professors. One is a nurse. Will being a nurse influence the way she teaches? I think so. Every experience we have in life influences how we work. You'll learn more about this in the pages that follow.

Florence Nightingale thought of nursing as a calling that requires total commitment. Her ability to be present to others was legendary. A reporter who witnessed her going about a hospital wrote in *The London Times*:

*"She is a "ministering angel" without any exaggeration in these hospitals, and as her slender form glides quietly along each corridor, every poor fellow's face softens with gratitude at the sight of her. When all the medical officers have retired for the night and silence and darkness have settled down upon those miles of prostrate sick, she may be observed alone, with a little lamp in her hand, making her solitary rounds."*²

Was the reporter exaggerating or sentimentally idealizing Nightingale's dedication, healing presence, and influence on patients? Not likely. She was a determined and focused woman

who combined a tough, no-nonsense approach to improving patient care with an admired and tempered human presence that itself was healing.

Anyone who has received nursing care in a hospital, physician office, treatment center, nursing home, home health agency, or hospice knows its value. Some nurses work at the bedside, others as managers, statisticians, professors, researchers, or policy-makers. I once heard a recruiter at a job fair tell a candidate, “If you don’t know what to do, get a nursing degree. You can’t go wrong.” Nurses do many things well. For that reason alone, they deserve our gratitude.

But, if nursing is such a valued profession, why do nurses complain sometimes about being under-appreciated and over-worked? Why do nurses joke among themselves that they can’t wait to win the lottery so they’ll no longer need to work? Why are some nurses always on the lookout for work situations that are more enjoyable or better paid?

Like people in other professions, nurses think a job, department, or hospital elsewhere will better suit them. Such restlessness is a good thing in many ways, as discontent can lead to a refreshed life and innovation. However, it’s also true that geographical cures seldom work. Something else is necessary. The following pages explain that “something.”

Many caregivers are not nurses. We typically think of physicians, pharmacists, home health aides, phlebotomists, psychologists, family therapists, surgery techs, and case managers as caregivers. But what about those who clean rooms, serve meals, and manage the heating and air conditioning at sprawling health care facilities? Or, how do information technology services employees or those working in the business side of health care influence patient care? Even though these employees may be far removed from direct patient care, they nevertheless make a palpable contribution to such care. One could say it takes a village to provide quality health care.

Who Will Benefit *from* This Book?

This book is for nurses who want to rekindle the spirit that first attracted them to the profession and know it’s time to do some personal soul searching. It is not for those who are content with the way things are or who view their work as merely a job. The book can also help two other groups: health care professionals who don’t have a problem with work but want to understand those who do, and workers who feel that their energies have waned.

Other important caregivers, whose numbers are legion and far exceed those of salaried workers, are the family members, friends, and neighbors who try to balance caring for chronically

ill relatives, sick children, and aging parents with the other demands of family, work, and personal needs. This book is for caregivers of every stripe. While this book references the lives and experiences of health care professionals, the information and tips offered will help anyone who is feeling unsettled and is seeking more meaning from their work.

Some will want to take this journey alone, away from work. Others who are fortunate to be working with high-functioning teams where trust and respect are engrained values, will want to explore these questions with their team. However, do not expect to find a guide on how to form these high-functioning teams or how to transform organizations. Other books cover those topics.

How to Use *this* Book—On Your Own

These pages contain many practical suggestions on how to care for oneself while caring for others. Their purpose is to awaken insight, not solve a problem. Once you understand the factors that contribute to unhealthy work styles and behaviors, you'll know what to do. However, corrective action will differ from person to person. Singer Billie Holiday got it right when she said, "If I'm going to sing like someone else, then I don't need to sing at all."³ What's necessary is the courage to be yourself and to make choices based on your needs.

Many of the suggestions involve journal writing, which may be surprising, as adult learning generally involves team activity and sharing insights in safe settings. This book is for people who have profited from such sessions but know they need something more at this point in their lives. Here's how one nurse put it:

"I've gone through many training and educational experiences for which I'm grateful. In spite of these many training experiences, I probably learned the most by leading the effort to get magnet status for our hospital. Even with all of this training, I know I need to draw apart as it were, maybe even turn inward, to focus on what I need to do for myself. The kinds of things I struggle with in my journal are highly personal. It would not have been appropriate to do that soul searching in a group or with colleagues."

This book offers space to jot down one's thoughts after each case study and at the end of each chapter. More journaling pages are in back of the book for further reflective writing.

The Watson Caring Science Institute (WCSI) and Creative Health Care Management (CHCM) help health care professionals, particularly nurses, recognize the critical role of presence in the healing process. Readers familiar with WCSI's and CHCM's work know that when professionals care for themselves, team performance is strengthened and the care of patients and their families enhanced. The question is how to sustain self care. The answer is reflection, time apart, and insight.

How to Use *this* Book—In Teams

High-functioning organizations invest in continual training for their employees, especially training that improves patient care and employee satisfaction. Hospitals that pursue ANCC Magnet status, the numerous programs offered by the Institute for Healthcare Improvement, the WCSI and CHCM programs, and the Joint Commission's education programs provide their staff with exceptional educational opportunities. The natural outcomes of many of these are personal development and self awareness.

While the journey of self awareness is often a solo adventure, the information contained in this book along with the tips, case studies, and inspirational reflections are designed also to be used in a team meeting or retreat setting to support awareness (at a personal and team level), promote team connection, and unleash the benefits of shared team learning.

Improving patient care—both clinical outcomes and patients' satisfaction with their care—requires the transformation of health care organizations. That remaking involves remarkable leadership, uncommon management skills, and teamwork. While we cannot care for others without caring for ourselves, the fact is that to improve patient care, we must be willing to let our needs as caregivers recede in importance—not forget our needs, but place them gently in the background until we can give them the full attention they deserve.

This book is about remembering the delicate task of nurturing the inward lives of dedicated and engaged caregivers. It is written for those who feel the need to reflect and think about themselves while also being present to care for others. This book will appeal to health care professionals who understand the importance of presence and are ready to ask themselves these questions: Is this what I want to do? Am I caring for myself? What is being asked of me at this time in my life?

The goal of this book is to help individuals be faithful to themselves as they care for others.

The 25 Tips in this book encourage the reader to take action. The journey inward to help yourself ultimately leads outward toward bringing a healing presence to patients.

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A Reflection

A PATIENT PERSPECTIVE

Those who choose to work as caregivers are a generous lot. Their accent is on the care of others, not themselves. There is something troubling, even abhorrent, if caregivers place their needs before their patients' needs. Those who have worked within patient care settings have experienced the many personal rewards.

Last week, I watched 30 caregivers receive a remarkable gift. It was at a retreat for clinicians focused on how to improve patients' satisfaction with their care. Their hospital's HCAHPS scores were low and nothing the staff did moved them higher.

To help the clinicians assess their situation and identify solutions, the staff invited three former patients to speak to them. The plan was to have the 30 participants break into smaller groups of 10 and then have the former patients move from one group to another to describe their hospitalization experience.

The staff was noticeably on edge before the patients came into the room. Evidently many had been caregivers of these three patients. Aware of the anxiety in the room, the leader reiterated that we were there to learn. If patients were critical, we would have to quiet any inclination to explain away, deny, or contradict their experience.

The discussions that followed lasted almost two hours. Were the patients critical? You bet. Were they also appreciative? Incredibly so. There was something about being face-to-face in a safe setting that led both patients and caregivers to understand rather than blame one another.

As their time together wound down, the retreat leader asked the patients if they had a final word to the caregivers. Here is what they said:

PATIENT 1: I'm leaving here recognizing that you are not taking care of yourselves. I can now see that when you were cold and snippy it was largely because you were tired. If I could make one suggestion, it would be to take better care of yourselves. If you did, you wouldn't be so bothered by our complaints. As if by magic, your patient satisfaction scores would rise.

PATIENT 2: I don't think you know how important this place is for those of us who have been here. As critical as I have been, I love this place. On more than one occasion when I've driven by, I've said a prayer for those of you who work here. I count on you being here. I'm not alone in feeling as I do.

PATIENT 3: Today, I've been your biggest critic. I'm the one who went off at the mouth about the food, your inane rules, and your lack of communication. While you may find it hard to believe, I love you. Just remember that when you get back to work tomorrow.

It was striking to witness how the former patients ended the day ministering to the caregivers. Two of them even used the word love to describe their sentiments. Are the patients saying something that we need to hear?

As if by magic, would our patient satisfaction scores rise if we took care of ourselves? Could it be that simple? If caring for ourselves isn't entirely the key influencer of patient satisfaction, is it partially so?

The retreat was limited to thirty employees within an organization employing almost 1,500. They heard that they were appreciated, even loved. That was an unexpected gift received on a day they expected to be criticized. Given the pace and intensity of working in a hospital or nursing home, do you think that the words *appreciated* and *loved* are easy to forget? Do you think that those thirty employees were energized when they returned to work? Will the memory linger? Will patient satisfaction scores improve? ♡