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Let's reconnect healthcare with its mission and purpose by bringing humanity to the point of care

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INTRODUCTION

There is a global workforce crisis in healthcare. The WHO projects that an additional 40 million health workers will be needed by 2030,¹ meanwhile, burn-out² and retention within the healthcare workforce have been compounded by the pandemic. This unsustainable situation needs health systems where people are at the centre of our goals.³

This requires significant change, not least in the culture of 'industrialised healthcare' which frequently prioritises technical and scientific aspects of delivery over humanity and whole person centred care.⁴ Evidence demonstrates that quality and safety of care are closely linked to the well-being of staff,⁵ and that quality and safety improve if we can improve joy at work for staff.⁶ It is the things that are human and built around relationships that make the biggest impact, and yet they are often activities and ways of working that our health and care systems appear to value the least.⁷

We need more compassionate leaders that demonstrate higher levels of kindness and start by asking what matters to their staff. It is why we will describe those three emerging concepts on which we all work: 'what matters to you' (WMTY), kindness in healthcare and compassionate leadership. These three keys have a common focus: to bring more humanity to the point of care.

WHAT MATTERS TO YOU

Few things in healthcare spread rapidly but WMTY is building momentum and change worldwide. Introduced in an editorial in *NEJM*,⁸ WMTY was initially piloted in Norway and Scotland. A series of talks by MB at the Institute for Healthcare Improvement (IHI)⁹ challenged a shift in emphasis from the traditional 'what's the matter?' to also asking, 'WMTY?', sparking an international WMTY movement in 2014 that has spread to over 50 countries and is changing the caregiving culture in thousands of organisations.¹⁰

WMTY conversations help healthcare teams understand what is 'most important' to patients, leading to better care partnerships, space to listen to patient preferences and improved patient experience. Agreeing on 'what matters' was identified as one of five practices with the potential to enhance physician presence and meaningful connection with patients in the clinical encounter, and WMTY is one of the Age-Friendly Health System's 4Ms, what matters, medications, mentation and mobility.¹¹

Finding increased meaning and purpose in work can improve staff morale and decrease burn-out.¹²

Asking staff what matters to them is also a foundational element of IHI's framework for 'Improving Joy in Work'¹³ and aligns closely with Motivational Interviewing; a method designed to align with patients' needs to enhance improved health behaviour change.¹⁴ WMTY is not only rebalancing work toward things that matter; it is also proving effective in unleashing progress on results for IHI's Quintuple Aim in healthcare,¹⁵ including the important societal needs of access to and cost of care and simultaneously improving experience for staff (statement from the WMTY international steering group). The IHI Quintuple Aim—better care, better health for populations, lower costs, equity in care and systems for best outcomes, and joy in work, all benefit from a new way to look at designing and leading our care systems.

KINDNESS IN HEALTHCARE

In parallel to the spread of WMTY as a global movement, there is a growing focus on the fundamental role of kindness in healthcare, described by a number of authors and researchers.¹⁶ Kindness is being repositioned from 'soft and fluffy' to the central starting point of how healthcare is led and delivered.¹⁷ For example, evidence links kindness to better staff experience and retention, to better teamworking scores, and even to improved patient outcomes (including faster wound healing and discharge) through six types of kindness: deep listening; clear empathy; generous acts of discretionary effort that go beyond what patients and families expect; timely care that reduces stress and anxiety; gentle honesty in discussions and conversations; and thoughtful support for families and carers.¹⁸

The links between kindness as a behaviour and the leadership role of creating psychological safety in teams, in clinical environments and in organisations are also becoming increasingly clear. A group of health and care colleagues and friends working in healthcare in Sweden, the UK and the USA started a monthly 'conversation for kindness' as a way to develop a movement 'Kindness in Healthcare' in 2020. The initial purpose was to explore kindness as the 'business end' of healthcare and interest has grown to hundreds of contributors from 30 different countries across the globe, sharing insights, outcomes and experiences.¹⁹

COMPASSIONATE LEADERSHIP

This work is aligned to the extensive research underpinning the notion of 'compassionate



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leadership'.^{20 21} The authors describe how compassion implies, 'a sensitivity to suffering in self and others with a commitment to try to alleviate and prevent it'. Compassionate leadership involves a focus on relationships through careful listening, understanding, empathising and support, thus enabling those we lead to feel valued, respected and cared for, thereby reaching their potential and doing their best work. There is clear evidence that compassionate leadership results in more engaged and motivated staff, with high levels of well-being, which in turn results in high-quality care.

Compassionate leaders empathise with colleagues and seek to understand the challenges they face. They are committed to supporting others to cope with and respond successfully to work challenges and they focus on enabling those they lead to thrive in their work. Compassionate leaders do not have all the answers or simply tell people what to do; instead, they engage with the people they work with to find shared solutions to problems. Compassionate leadership is inclusive and collective. Compassionate leadership also enables teams to flourish, by engaging and supporting all team members, and creating an inclusive, psychologically safe environment in which diversity in all forms is valued and team members contribute creatively and enthusiastically to team performance. At a time of stress in healthcare systems globally, this new way to see leadership is vital for care for our communities, our patients and our care teams.

BRINGING IT ALL TOGETHER

When we look at the current culture and organisational climate in healthcare, we can envision the challenge it means to adopt such principles. Engagement surveys show a never seen level of fatigue and burn-out. A Belgian unpublished survey done in 2022 on 17 336 healthcare workers, using the SCORE(TM) survey, show a rate of self-declared burn-out of 58.6% on 4209 answers. We can read the same kind of rate in the last results of the National Health Service (NHS) national staff survey with 46.8% of staff have felt unwell as a result of work-related stress in the last 12 months.²² Attrition and turnover are at near all-time highs. One of the hypotheses could be that our leaders are not educated to bring humanity, this so-called 'fluffy' skill, into their management skillset. Are we afraid of what matters

to people? Or just afraid of the answer to what matters? Our healthcare world is focused on the process, on measurement and on guidelines. There is a very little place to teach these skills and yet, it is crucial to bring them back to create meaning for people and to learn how we can make healthcare attractive again as a career. Healthcare staff describe meaning and impact as key parts of what keeps them caring, especially in times of crisis.

In 2022, a group of international experts from the IHI and the Plateforme pour l'Amélioration continue de la Qualité des soins et de la Sécurité des patients (Platform for Continuous Improvement of Quality of Care and Patients' Safety) (Belgium) convened to describe a new way to lead in these challenging times. The group identified the principal elements of a learning system in the healthcare sector (figure 1). Ongoing work based on two foundational frameworks published by the IHI^{13 23} highlights the importance of the three previously described principles, WMTY, kindness and compassion. In these challenging times, this new way to lead and think will guide us to a better system of care and caring. This formed a core part of a recent discussion among an international healthcare leadership community, IHI's Health Improvement Alliance Europe,²⁴ discussing a common vision for a better future.

There is a clear commitment across the leaders of these synergistic areas to proactively grow the impact within health and care teams, organisations and systems across the globe. Day to day, all three areas need to form part of a person-centred approach that sets the foundation of organisational culture and enables daily improvement for patients and staff in healthcare.

The healthcare sector is facing multiple crises simultaneously with the consequences of the COVID-19 pandemic and staff shortages all over the world. It is one of the top challenges cited by Chief Executive officers (CEO) in the last survey on issues confronting hospitals in 2022 run by the American College of Healthcare Executive.²⁵ This critical moment also asks for an increased and useful focus on equity, diversity, inclusion (EDI) and social justice. We are deeply convinced that showing more empathy and humanity will lead to better outcomes on this very important agenda which can lead us to better empowerment of our peoples into the healthcare business. We cannot run EDI improvements without humanity. And as stated before, WMTY,

AIM:		
To continuously improve health and healthcare by codesign and coproduction with and for patients and staff (For safe, reliable, efficient cares and quality of life for all)		
Continuous Learning System by daily improvement and measure for improvement and Q Insurance		
<ul style="list-style-type: none"> Using improvement methods in our daily work Building reliable processes (HRO) Transparency 	<ul style="list-style-type: none"> Understanding and acting on variation Using data for learning and improving 	<ul style="list-style-type: none"> Sharing knowledge at all levels for learning and improvement Celebrating successes and learning from what doesn't work
Organizational Culture		
Context and Shared responsibility	Person centered to bring Meaning and Purpose	Teamwork and Cooperation
<ul style="list-style-type: none"> Psychological & physical safety Just approach to failure and issue External stakeholders Internal accountability 	<ul style="list-style-type: none"> WMTY—centre on staff WMTY—centre on patients Kindness-Compassion Equity 	<ul style="list-style-type: none"> Participative management Effective communication Trust and courage Autonomy & choice

Figure 1 A model for safe, reliable, efficient cares and a quality of life for all, draft, IHI-PAQS. IHI-PAQS, Institute for Healthcare Improvement-Plateforme pour l'Amélioration continue de la Qualité des soins et de la Sécurité des patients; WMTY, what matters to you; HRO, high reliability organizations.

kindness in healthcare and compassionate leadership concepts are the first actions to put in place if you want to improve bring back more humanity in healthcare.

We all dream of outstanding healthcare systems that support our local communities. In the early 19th century, JW Marriott said, ‘If you take care of employees, they’ll take care of your customers, and the customers will keep coming back again and again’. In healthcare, we need to focus more on people: if we take care of our staff, they’ll take care of our patients, and the patients will keep being in a safe and reliable care system. We know what to do! And now, we must do what we know.

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