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Engaging Employees in Well-Being

Moving From the Triple Aim to the Quadruple Aim

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Anne Arundel Medical Center has been on a 3-year journey to improve employee well-being with the assumption that employee well-being and employee engagement are interconnected. Improvements in employee well-being will result in increased employee engagement and will be a pivotal driver to assist the health system meet its goals. Historically, Anne Arundel Medical Center successfully differentiated itself in the market by being the region's high-quality, low-cost provider of health services delivered through intense collaboration with patients and families. The financial, quality, and patient satisfaction results are in the top percentiles nationwide. However, as the pace of change accelerates and the organization faces increased pressure to improve outcomes, keeping employees from becoming burned out and disengaged becomes an increasing concern. The WellBeing framework was developed on the basis of the work of Tom Rath and Jim Harter as the model to support Anne Arundel's WellBeing work. The efforts around well-being are comprehensive and impact all aspects of how work is conducted. Employee well-being has been elevated to an equal third prong along with providing high-quality low-cost care in a patient-centered environment. This focus on leading an employee WellBeing Program has resulted in improved engagement scores at Anne Arundel Medical Center. **Key words:** *employee engagement, leadership, quadruple aim, WellBeing Program*

WHEN ANNE ARUNDEL MEDICAL CENTER ("AAMC") adopted its 10-year strategic plan, "Vision 2020" in 2009, it was developed around 5 strategic pillars: Quality, Community, Workforce, Growth, and Finance. The initial strategies tied heavily to the Triple Aim of improving the health of populations, improving the patient experience, and lowering the cost of care.[1] Anne Arundel Medical Center had and continues to have excellent outcomes, regularly receiving statewide recognition for high patient experience scores as compared with the state of Maryland, better than average turnover scores, and being the first organization in the country to be awarded the Organization Patient Safety Certification by the Maryland Patient Safety Center and the Courtemanche & Associates. The system continues to grow and be a financially strong, independent health system. In the early years of Vision 2020, AAMC strove to differentiate itself in the market by being the high-quality, low-cost provider of health services delivered through intense collaboration with patients and families. Anne Arundel Medical Center

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adopted a culture of continuous performance improvement by following Lean[2] principles. In addition, AAMC began to include patients and families in all aspects of care delivery. By 2015, AAMC had 100 patient advisors actively participating on system committees at every level, including on the Board Quality Committee and Physician Peer Review Committee.

As the pace of change accelerated, and AAMC faced increasing financial pressure along with ever-changing reporting mandates, concerns about staff fatigue and burnout surfaced. Goals associated with the workforce pillar of the strategic plan focused on increasing employee engagement and decreasing turnover. Both were important goals but neither did enough to address employee stress and burnout. In 2014, Thomas Bodenheimer, MD, and Christine Sinsky, MD,[3] published an article reporting that staff burnout and dissatisfaction are associated with lower patient satisfaction, reduced health outcomes, and potentially increased costs. They recommended that organizations adopt the quadruple aim, citing that the fourth aim, improving the work life of health care clinicians and staff, is necessary to achieve the triple aim.[1]

In this same time period, Gallup (2013) published the *State of the American Workplace*,[4] reporting that overall, in all categories and all industry sectors, employee engagement continues to remain at 30% across the US workforce. They noted that the work environment has a significant impact on employee well-being, and employees with poor well-being were less engaged and more negative about the workplace. The Gallup study reported that employees who had high well-being were more likely to be agile and resilient, experience better health, and report higher job performance. It was suggested that making well-being an organizational strategy could be a way to improve employee's lives while achieving organizational outcomes. Further research about well-being led to the work of Rath and Harter, published in the book *Wellbeing: The Five Essential Elements*.[5] Rath and Harter define well-being as "the combination of our love for what we do each day, the quality of our relationships, the security of our finances, the vibrancy of our physical health, and the pride we take in what we have contributed to our communities."[5] The core concepts of well-being transcend countries, culture, and generations. For the purposes of this article, definitions spelled out in Table 1 are used to describe WellBeing at Anne Arundel Medical Center. Rath and Harter posture that organizations that invest in their employee well-being will gain an emotional, financial, and competitive advantage.[5]

The stressors at work were not the only stresses facing AAMC employees in 2014. The economy was improving, but in a national study that year, 76% of Americans surveyed cited personal finances as a leading cause of their stress.[6] The survey revealed that many physician visits are related to financial stress while resulting in increased health care costs, prescription costs, and absenteeism.[6]

Table 1. Definitions of Well-Being at Anne Arundel Medical Center

Purpose WellBeing: Having something to do every day that is challenging and enjoyable. For most people, it is their jobs that contribute to their purpose.
Social WellBeing: Having strong relationships and love in your life. Having a supportive work environment with people who care about you and who you care about is critical for thriving social well-being.
Financial WellBeing: This element is about managing your finances in a way that provides long-term economic security.
Physical WellBeing: Employees with thriving physical well-being experience good health and have enough energy to get things done on a daily basis.
Community WellBeing: Being engaged with the community where they live and work enhances an employee's overall well-being.

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In addition, 69% of 2014 college graduates left college with student loan debt. Between 2004 and 2014, students' average debt had increased 56%, from $18 550 to $28 950.[7] Other research showed that people were more isolated and not connecting enough. This resulted in increased loneliness and poor social well-being.[8] One comment from a survey participant was:

> At one time, work was a major source of friendships. We took our families to company picnics and invited our colleagues over for dinner. Now, work is a more transactional place. We go to the office to be efficient, not to form bonds.[8]

By every measure, American workers were less healthy than at any other period in our history.[9]

It appeared that by focusing on WellBeing there could be improvement in the lives of employees while AAMC continued to meet the goals expressed in the triple aim.

There was early concern that focusing on employee well-being was getting the organization too involved in employees' personal lives. Questions were raised about what could actually be done to improve employee well-being. From the outset, AAMC leaders were determined to take demonstrable action to improve employee well-being as part of meeting the hospital mission: "To enhance the health of the people we serve." Hospital employees are part of the community being served, and all stakeholders could see the direct correlation between employee well-being and the Vision 2020, "Living Healthier Together." It was recognized that adoption of a WellBeing program would take careful thought and preparation. To get started, executive leaders participated in a retreat to immerse themselves in the WellBeing model. The retreat's objective was to help leaders understand what it means to commit to employee well-being and what outcomes they could expect from a formal program. There was honest dialogue about how work was impacting each executive's well-being. The discussion centered on how individuals own their personal well-being and the need to make small shifts to improve work-life balance. Each executive committed to a personal action plan. A significant outcome of the retreat was recognition of the importance of executive role modeling. As a team, executives adopted several strategies to help with their own work-life balance, knowing full well that the changes they made would impact the larger leadership team. These strategies were to

- reduce many meetings from an hour to 45 minutes in order to allow time for bio-breaks, checking e-mail, and getting from one meeting to the next;
- stop sending e-mails between 7PM and 7 AM and on weekends, unless it was absolutely required;
- use texts and calls to reach a colleague (if necessary) in the "off hours." This would reduce everyone's need to constantly check e-mail. It was acknowledged that this was already a practice and which differentiated routine contact from urgent communication;
- role model well-being, while speaking openly at meetings about individual commitments to improve personal well-being.

The rollout of the WellBeing program to the employees was gradual, giving AAMC time to test the model, build infrastructure, and ensure support. Leaders monitored and recognized the model's swift adoption by staff and management as people saw relevance to their lives. All management staff received the book, *Wellbeing: The Five Essential Elements* by Tom Rath and Jim Harter.[5] A committee was formed to conduct a needs assessment to identify the organization's well-being strengths and opportunities for improvement. The human resources (HR) department reviewed its programs to determine how they could be redesigned to support well-being.

METRICS FOR SUCCESS

A key foundational strategy was to determine, in advance of the rollout, how well-being would be measured and where the

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results would be reported. Ten initial workforce aims were identified. Each month a report is shared at the quality committee of the board of trustees. Each aim supports 1 or more WellBeing element. For instance, there is an aim to increase employee Financial WellBeing by increasing participation in the 401k plan. Another metric is to increase Physical WellBeing through increased sales of healthy food at all organization cafeterias and coffee shops. Purpose WellBeing has aims to increase the number of BSN-prepared nurses and to increase staff skills in Lean quality concepts. The Community WellBeing aim is developed around support for community service. Over time, the workforce aims have evolved. For example, feedback from employees who vocalized concerns about employee safety has resulted in additional aims targeted at reducing injuries to employees caused by patients.

To get a baseline on employee engagement and well-being, AAMC implemented a WellBeing survey that included the Gallup Q12 and Gallup's Well-Being 5 View assessment.[10] As of 2018, AAMC has 3 years' worth of data. Each year, goals are set at the system level as well as the department level to increase employee well-being and engagement. In addition, HR has built the concepts of WellBeing into the core structural practices of recruitment, staff and leadership development, and goal setting. Some examples include the following:

- WellBeing is integrated into the leadership framework. Leadership behaviors at AAMC are guided by the leadership framework of "Team, Change, Business." To be a leader, each manager must excel at managing his or her team by serving as a coach, serving as a mentor, assuring staff well-being, and encouraging team diversity. Leaders are expected to demonstrate changes in a transformational and innovative way. The framework's reference to business means that leaders need to understand the business of health care, their role in it, and the basic skills of management. WellBeing concepts have been woven into the "Team, Change, Business" framework, making the commitment explicit.
- The electronic performance appraisal and goal-setting system is used to have all employees develop personal well-being goals. By doing this, leaders have the opportunity to learn more about their teams. They can better determine whether there are ways to support staff members with their goals. Employees determine how much they want to share. Many have found it beneficial and are getting support from their teams, as they seek to improve their own well-being. Development of personal well-being goals is voluntary and not part of the weighted performance appraisal.
- The WellBeing concepts are woven into orientation and into the leadership development curriculum.
- Interviews for new leaders highlight the importance of well-being for both themselves and their staff members. When new leaders are onboarded, they receive training on the well-being principles along with an introduction to their role in promoting employee well-being.
- Organizational goals to improve well-being outcomes were set in year 2 and have been applied to all leaders.

COMMITTEE FORMATION AND PARTICIPATION

Once the commitment was made by the organization to embrace employee well-being as a core differentiator, education was done with key constituents. These included the nursing leadership team and the Nurse Professional Practice Council. Each presentation was well received and resulted in volunteers to help roll out the strategies. A structure was developed that supports well-being across the organization and includes staff at all levels. The structure includes a steering committee and 5 subcommittees, 1 for each of the 5 WellBeing elements. The steering committee is led by the VP of HR, and there is an identified executive champion for each of the 5[5]

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committees. In addition, there are 3 additional staff committees to represent night shift as well as off-site stakeholders. Membership applications are taken through an intranet application system in which employees can express their interest to serve on a committee of their choice. Employees are asked, but not required, to attend the meetings in person or virtually. Conference line numbers are provided for meeting times. Members have become champions within their departments, constantly communicating efforts. Committee participation started at about 40 employees and has surged to more than 160 participants organization-wide during a 3-year time period. There has been consistent participation due to expressed employee passion for the work. Some participants like to work at the organizational level while others focus at the department level. The committees have developed strategic objectives to guide the committee work and set priorities. This step has been pivotal in ensuring that work is measurable and tied to the overall well-being objectives. These objectives are shared in Table 2.

Each year, the committees reevaluate goals and develop actions for the coming year. Successful programs are continued and unsuccessful programs are revisited, either to revise objectives or to develop new ones.

A big challenge for this work is prioritizing the interventions so that goals can be met. The employees on these committees drive the work and take ownership for the initiatives. Because all stakeholders are involved in the process, well-being actions have been implemented for all shifts and sites. The committee members supporting the Eastern Shore (approximately 25 miles from the main campus and part of the organization consisting of physician practices and small ambulatory sites) focused on Purpose, Social, and Physical WellBeing. They increased the amount of education available to staff and held a fun, competitive Field Day. They provide tips and ideas about what individuals could do to improve personal well-being.

The other regional committee serves a larger population in 1 locale. Over the course of 6 months, this group flourished. There is consistent committee participation from 15 team members. The committee has planned social gatherings, hosted a farmer's market over the summer months, implemented morning stretching sessions, reinstituted a popular weight loss program, and planned a yearlong Financial WellBeing series for employees. A significant accomplishment was the addition of food trucks to compensate for the lack of a cafeteria. Staff members regularly comment about the commitment to increase their well-being and how they do not have to leave the site to achieve it. The well-being scores in one department at this site increased by 7% over the course of 3 years.

The smaller number of staff on the night shift creates challenges for bringing events and programming to employees. The night shift committee has developed creative ways for programs designed for the day shift to be successfully replicated for the night shift, including specially designed physical challenges and a stress reduction fair. The night shift WellBeing champions have encouraged an increase in social activities. They are coordinating the financial series for this staff as well. The committee challenges the organization to include them in activities and has taken accountability to help increase night shift member participation at programs. The success of the committees is driven by interested and engaged leaders who can facilitate a philosophical conversation, understand the limitations of what can actually be achieved, and encourage the committee to follow through on planned actions. Employees do not have to wait for someone else to make a change. Changes can be made at the organization level or department level through committee work or by the individual. The steering committee, executive champions, and the VP of HR are available to remove obstacles or to guide actions so that they are aligned with the overarching strategy and plans for the organization.

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Table 2. AAMC WellBeing Strategic Objectives and Tactics, 2015-2018

WellBeing Element	Strategic Objectives	Completed Tactics over the last 3 y
Purpose	Evaluate opportunities to increase reward and recognition for individuals and departments Provide additional opportunities at all levels to participate in career development opportunities Expand coaching and mentoring throughout the organization Promote empowerment philosophy	$250 000 scholarship program for nonclinical employees; career exploration fair for internal applicants looking to explore opportunities or transfer to new jobs; 100% e-mail access for all employees; increased number of employee classes; monthly newsletter to all employees with education offerings; leadership essentials program for new leaders; panel sessions focused on balancing work/life; national speakers on WellBeing topics
Social	Provide increased opportunities for employees to participate in system-sponsored social events Develop strategies to increase social WB at unit level Provide education and support to employees to learn impact of others on their social WB	Thank You Card program; NYC Bus Trips; Baseball Game; Book Club; Movie Nights; Increased recognition training; Best Friend at Work campaign; Art in the Café; free tickets to local baseball and lacrosse games; guidance to departments for how to host their own department events focused on Social WB; EAP hosted a class on toxic people
Financial	Increase participation in retirement program Increase financial education for all staff	Financial education series; auto enrollment for retirement plan; home buying course; enhanced pharmacy benefits; partnership with financial planners that offer complimentary introduction and reduced fee; financial fitness fair; vendor fair to explore discounts; additional vendors added to employee discounts; promotion for EAP; combined leave benefit revision
Physical	Promote healthy eating/ healthy food choices Provide stress-reduction programming Promote health/opportunities to stay active Develop executive-level/ leadership involvement	Fresh fruit tastings with recipes in cafeteria; cancer screenings and education for employees; Wellness Wednesdays and Fitness Fridays; Walk with an Executive series; reduced soda and unhealthy snacks; enhanced signage; healthy cooking classes; New Year's resolution events; WellBeing+ (a wellness portal to track challenges and overall health); free seated chair massages; fryerless Fridays; whole fruit at cafeteria registers; stress reduction fair; stress reduction baskets to departments

(*continues*)

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Table 2. AAMC WellBeing Strategic Objectives and Tactics, 2015-2018 (*Continued*)

WellBeing Element	Strategic Objectives	Completed Tactics over the last 3 y
Community	Increase communication about current AAMC community activities Create additional opportunities for employees to participate in community service Recognize and support employees for community service	Food collection for local women's shelter; backpack collection and delivery for foster children transitioning to homes; sock drive; United Way campaign; cultural diversity series; partnership with project clean stream; CEUs for community education; employee hardship assistance fund; community events at other well-being fairs (such as packing lunches or can drives); more than 200 000 h in community benefit hours

Abbreviations: AAMC, Anne Arundel Medical Center; CEUs, continuing education; EAP, employee assistance program; WB, WellBeing.

INVESTMENTS, ACTIONS, AND OUTCOMES

The initial investment in WellBeing was the implementation costs of adding the WellBeing survey to the employee engagement survey and the training of leaders on WellBeing. A WellBeing manager was hired to help facilitate the work of the committees, conduct training, and oversee the survey and action planning. The AAMC WellBeing budget is small but it pays for 1 national external presentation a year as well as the supplies needed to support committee activities. Significant changes, such as alterations to the retirement program, are funded through the annual benefits budget. The majority of activities are low cost and free. Whenever possible, WellBeing concepts are interwoven into existing activities such as Nurses Week. Each WellBeing element (Purpose, Social, Financial, Physical, and Community) had specific activities that have been implemented across the organization. Each is described in more detail later:

Purpose WellBeing

There is a direct correlation to Purpose WellBeing and high employee engagement.[11] Anne Arundel Medical Center internal data show that departments with high levels of well-being are 12 times more likely to have engaged employees. The Purpose WellBeing committee has embraced career development and has implemented an annual career development fair. In addition, the committee has raised awareness of the needs of entry-level employees. As a result, an "Expanding Horizons" program has been created in collaboration with the Purpose WellBeing committee to provide opportunities for career exploration, career paths, and advancement for entry-level staff within AAMC. Resources have been invested to ensure that all staff have e-mail access along with basic computer skills. Entry-level staff now have access to career coaching, basic skills assessment, and development activities. Service department leaders support and encourage their staff to take advantage of these opportunities, which increase promotion potential. The focus on Purpose has resulted in the development of a career ladder for patient care technicians in the hospital. As a result, there are currently 35 patient care technicians on the ladder, and several ancillary support service employees have been promoted. System benefits include reducing turnover and improving retention.

Data from the annual WellBeing survey indicated the need to invest more in the development of leaders. Programs have been

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expanded to support leaders through the entire life cycle of leadership. The AAMC "Lead Academy," an emerging leaders program, was started in Nursing and was then expanded to all leaders throughout the organization. In addition to learning basic leadership skills, Lead Academy participants must complete a yearlong project. Several projects tie directly to the WellBeing work, such as one study introducing mindfulness to AAMC, and another that researched the impact of sleep deprivation on patient care.

Social WellBeing

This element has been widely embraced at all levels of the organization. Under Social WellBeing, the focus of the work is on bringing employees together socially. It also focuses on reducing stress, increasing employee safety, and reducing bullying. There is overlap between Physical WellBeing and Social WellBeing in developing and executing programs. Examples of activities include well-loved programs such as bus trips to local attractions, family movie nights, sports outings, book clubs, and art nights. Employees of all backgrounds help organize the events, and participation is consistently high. Departments have worked hard to conduct and support social activities. Some combine social activities with community support, such as volunteering together at the local homeless shelter.

One area of concern to AAMC team members is that health care workers today feel more threatened and less safe in the workplace.[12] Anne Arundel Medical Center is able to leverage the WellBeing strategy to address employee safety concerns. The workplace safety committee has been reinvigorated. Members connect their work to improving employee well-being. The most recent AAMC Patient Safety Culture Survey experienced a 16% increase in participation, and 11 of the 12 composite areas went up significantly. The composite score for Handoffs and Transitions went from 43% to 77% and the composite score for Nonpunitive Response to Errors increased from 41% to 72%. This is an example of how employees are beginning to see the connection of well-being to all facets of their work life.

Nationally, it has been well documented that relentless change and ongoing pressure to improve quality and reduce cost have led to increased stress and dissatisfaction for clinicians.[13] The AAMC WellBeing Steering committee has spearheaded more efforts toward reducing stress within the organization. The committee sponsored a speaker who came to the organization to talk about burnout and techniques to combat it. A stress reduction fair is hosted each year to give employees the opportunity to explore offerings such as acupuncture, zero balancing, and mindfulness. Anne Arundel Medical Center also contracts with local providers to offer employees a discount on these services. One of the most successful, yet simplistic, tactics has been to create a stress reduction basket that contains a plethora of stress reduction massage tools along with tips for stretching. These baskets rotate around the organization, and many departments take matters into their own hands by purchasing their own supplies for a "relaxation station."

The medical staff has also championed physician well-being. An annual physician WellBeing conference attracts approximately 100 to 200 physicians. A physician well-being survey is currently being implemented to identify areas for improving provider well-being. The physician lead for this work and the manager of WellBeing are working together to create synergy between efforts.

Financial WellBeing

Financial WellBeing is the most difficult element for leaders to address. Leaders across the organization express discomfort when dealing with this subject. There is not an expectation that leaders need to discuss personal financial planning with their staff. Rather, leaders need to be aware of how financial worries impact employee well-being and, potentially, job performance. Leaders can be the

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conduit to the growing library of information the organization has to offer. The Financial WellBeing committee arranged for a financial series that offers opportunities for employees to learn about topics ranging from retirement, home buying, credit card theft, improving credit scores, simple budgeting practices, and loan forgiveness programs for health care workers. Programs are offered in person and online. The goal is to encourage individuals to manage their financial resources (rather than the misconception that the organization focusing on Financial WellBeing was going to give everyone a raise). At the system level, AAMC has taken significant steps to increase employee Financial WellBeing. The Expanding Horizon program was developed to encourage a career path for entry-level employees. As part of the evaluation of the Expanding Horizon program, the minimum starting wage was strategically increased by almost $3.00 an hour over 2 years, with plans to continue to invest as resources allow.

Gallup data indicate that individuals who take steps to increase their long-term economic security enjoy higher well-being overall. This information led to the system increasing the retirement match an additional 1% and automatically enrolling employees in the retirement program with an auto escalation. Today there is a 95% participation in the retirement program. This investment in Purpose and Financial WellBeing for entry-level staff has resulted in a 24% decrease in first-year turnover.

A source of huge pride at AAMC is the implementation of the Auxiliary Scholarship program for entry-level staff. The volunteer auxilians were educated about the principles of WellBeing and then decided to build a program for staff with the greatest need. The Auxiliary donated $250 000 to start the program. This competitive, scholarship program is helping to build the pipeline for career progression in the organization. Scholarship winners are paid for full-time work but are scheduled only 20 hours per week, allowing them to enroll in school full time. All recipients are assigned a coach and a mentor. They take classes that lead directly to a degree or a certification for a job at AAMC. Once an individual is close to successfully completing his or her program, the desired department works to hold a position for the employee. On average, there has been an increase of 25% to the employee's base rate of pay in the scholarship group. Twenty-three employees have successfully completed the scholarship in 7 fields. Currently, through the Foundation, 20 nursing scholarships are offered annually that go beyond regular tuition reimbursement.

Physical WellBeing

Prior to the adoption of the WellBeing framework, AAMC had a wellness initiative called "Energize." This successful program provided on-site exercise classes and offered weight loss reduction programs along with healthy challenges. Since the adoption of WellBeing as a program, participation in Energize programs has increased by 75%, with 4300 employees participating in the program. The Physical WellBeing committee expanded the scope of Energize. Members work directly with the dietary department to decrease the sale of unhealthy food in the cafeteria. Sale of healthy food now contributes 66% of all revenue in system eateries. Soda has been eliminated from the conference center, and the sale of sweetened beverages has been reduced by 24%. In addition, a cooking class is being hosted for employees. They can come to the organization's kitchen to learn how to cook simple, easy, and healthy dishes at home. They get to taste the food, too! Many departments have developed programs and challenges to promote a healthy lifestyle. The benefits of these programs cross over to increased Social WellBeing. A number of employees have made significant gains in improving their health. Their accomplishments are celebrated on the internal AAMC WellBeing Web site.

Community WellBeing

A few of the actions that were taken early on were about building and expanding what

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was already successful in the organization. Two examples came directly from the nursing division. Long before Community WellBeing was being planned, the nursing staff had organized a committee called the Community Service Initiative. This group planned sponsored community drives and collections for local shelters and schools. The Community WellBeing committee built upon the nursing structure and expanded it throughout the organization, thus allowing more collections and drives. For many years, the nursing staff did community outreach to the local homeless shelter by providing a health clinic twice a month. The Community WellBeing committee expanded that support by formally agreeing to support 2 families annually as they transition from the shelter to a home. Anne Arundel Medical Center employees collect both new and used goods that could outfit an entire house, including furniture, kitchen supplies, and the hundreds of basics it takes to make a home for a family. A future challenge for the Community WellBeing committee is to develop ways to encourage employees to get involved in their own communities and help leaders recognize staff who do. The efforts around Community WellBeing have increased employee pride in working for AAMC. The Community WellBeing score has experienced the largest increase over the 3 surveys, with a 5% improvement.

NURSING LEADERSHIP AND WELLBEING INITIATIVES

As the manager of the largest employee base in the health system, the chief nursing officer's (CNO's) involvement and passion for this work are essential for the system's success in deployment. The AAMC National Database of Nursing Quality Indicators (NDNQI) nursing satisfaction results were above benchmark in all major categories, but it was clear from employee feedback that the radical changes occurring in health care and the stresses of the workplace today have strained the staff. The CNO must take an active role in educating nurse leaders on the positive impact of increased employee well-being. He or she must support the training and education needed to properly support this type of change. One of the core principles of a nursing Magnet hospital is to create a work environment supportive of nursing professional practice and development. The CNO should act as a role mode or executive leader in this work by clearly demonstrating to a large employee base that the well-being of our staff is a priority for the organization.

The development of the WellBeing initiatives, with the strong involvement of frontline staff, has complemented work being done to enhance Magnet performance and to maintain a supportive work environment. In addition to initiatives developed by the staff, national experts were invited to provide educational programs for frontline and leadership staff to add to the WellBeing work. One, particularly focused in Nursing, was centered on bullying and incivility. Another was to provide techniques for helping staff develop resiliency in these times of change. Both courses were received very positively by the staff and augmented work being done through the WellBeing committees.

An example of frontline nursing staff contributions toward the development of a project for one of our committees is the "Petals of Purpose." Discussions at the professional practice committee have included conversations about the personal impact of remembering why individual nurses chose the profession. These thoughts were shared through the Purpose WellBeing committee and resulted in a systemwide "petals of purpose" project, which has resonated strongly with the nursing staff. Employees were given paper petals on which they wrote their purpose, and each unit created a poster in which these are mounted in their unit (see Figure 1).

Overall, this work supports the joy of practice[14] and is in line with the latest white paper released by the Institute for Healthcare Improvement[13] on bringing joy back to the workplace. This joy optimizes performance, reduces turnover, and improves quality of care. The 2017 IHI Framework for Improving

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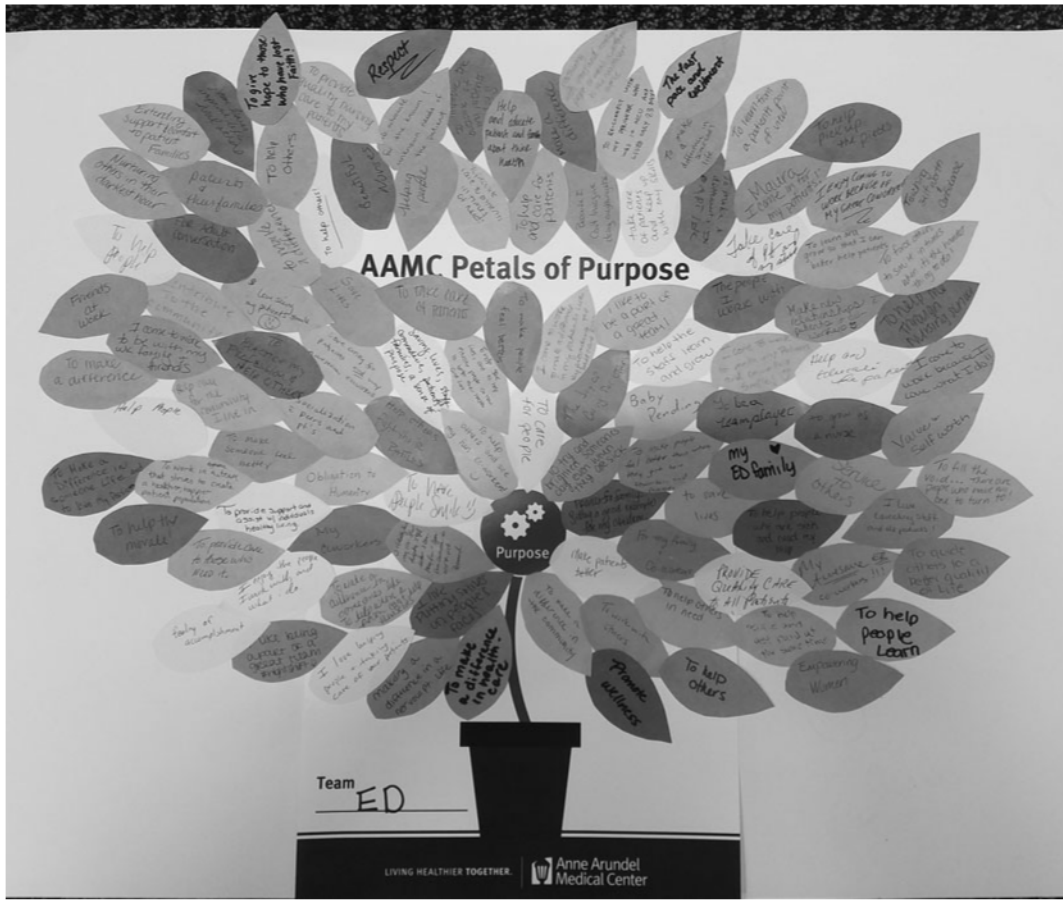

Figure 1. Emergency department "petals of purpose." Used with permission from Anne Arundel Medical Center.

Joy in Work summarizes the importance of leaders by stating that "the leadership and management practices designed to improve joy in work are some of the most high-leverage changes an organization can undertake since a focus on joy in work simultaneously impacts so many goals embedded within the Triple Aim."[13] At AAMC, the success of this work in each department was made a part of individual nurse leaders' performance evaluation. Regular pulse surveys are done to give snapshot views of progress. Combining information from the employee engagement survey and the NDNQI survey, nurse leaders worked to develop action plans that tie the work together in order to prevent duplication of plans. The pulse surveys ask 5 or 6 questions and allow monitoring the success of work occurring on different units.

It is very important for staff to see the CNO and all executive leaders as promoters of this work. Discussing these initiatives with large groups of nurses provides an excellent opportunity to allow employees to see that the organization is supportive of this work to benefit them. The success of major cultural change initiatives like this is dependent on executive leaders actively demonstrating their support. In partnership with the VP of HR, nurse leaders can customize some of this work for Nursing and then develop appropriate training. Frontline leaders need to receive excellent coaching so that they can support changes in their individual departments.

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IMPLICATIONS FOR BOARD MEMBERS

The CNO has an active role with HR to underscore the importance and then the success of the WellBeing work to the board of trustees. When quality efforts and initiatives emerge for health systems, the role of the board of trustees is critical. Board member engagement at the right level and at the right time is essential for large-scale change efforts to be successful. Appropriate board-level engagements in understanding the strategic priority, the expected outcomes, and the necessary resources are all areas that board members should be attuned to. "For the not for profit hospital, the highest order stakeholders are the patient and community"[15(p59)] and by extension the community of caregivers who provide that care. Board members need to understand the impact of a healthy employee population on the care of patients. They should take the employees' needs for well-being into account when considering resource allocation and strategy decisions. Board roles in this work include activities such as approving high-level organizational goals and policies, overseeing project performance at a strategic level through review of performance metrics and results, and acting as an advocate within the community for important initiatives.[16] The management team of AAMC has created "True North" metrics of operational measures that include the WellBeing efforts to improve workforce health. Table 3 shares the extended well-being goals and measures. Metrics are tracked monthly and quarterly and are presented at each meeting to both the quality and safety committee

Table 3. Workforce Goals and WellBeing Framework

AAMC Workforce Aims	WellBeing Framework	Last Year Result (2017)	This Year Goal (2018)
Reduce year 1 turnover	Purpose WellBeing	38% staff turnover	33% staff turnover
Increase number of diverse candidates for leadership positions	Purpose WellBeing Community WellBeing	New	80%
Increase participation in defined contribution plan	Financial WellBeing	87% of staff participating	92% of staff participating
Increase employees participating in fitness challenges	Physical WellBeing Social WellBeing	4306 employees participating	4737 employees participating
Increase sales of healthy foods in cafeteria	Physical WellBeing	65%	67%
Reduce number of products offering sugar by 65%	Physical WellBeing	168 products in cafeterias	59 products in cafeterias
Reduce number of injuries from combative patients	Physical WellBeing Financial WellBeing	17 employee injuries	14 employee injuries
Maintain contributions level to United Way	Community WellBeing	$123 000 in contributions	$120 000 in contributions
Implement pulse surveys and track improvement in Great Places to Work survey	All WellBeing and Engagement Dimensions	New	TBD

Abbreviations: AAMC, Anne Arundel Medical Center; TBD, To be determined.

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of the board and the entire board of trustees. The review and directional progress toward annual goals are discussed in subcommittee and committee meetings. Board members are expected to ask knowledgeable and appropriate questions of management[16] in order to exercise the decision-making function and the oversight function. The board members serve as excellent external advocates for the initiative. They realize that the approximately 4800 employees at the health system are also members of the community, and that their well-being has an impact on the ability of the system to have a robust workforce to provide high-quality, consistent care. Annually, progress toward goals is reviewed, and board approval is sought when setting new targets. In addition, top leadership and executive performance reviews are tied to achievement of annual operating goals. In this way, alignment occurs throughout the organization, and the management team can be rewarded for reaching goals.

EVALUATION AND NEXT STEPS

Anne Arundel Medical Center surveys for both engagement and well-being at the same time. The organization uses the Gallup Q12 for staff engagement and the *Gallup-Healthways Well-Being 5 View* to measure staff well-being. Survey results show that work groups that are high in engagement also tend to have higher well-being scores. Thirty-eight percent of employees are highly engaged at AAMC, while 14% are disengaged. Employees who are thriving in well-being tend to be more highly engaged. The latest survey results show that

- 74% of employees who are thriving in all 5 WellBeing elements are engaged;
- 48% of employees who are thriving in 3 of the 5 WellBeing elements are engaged; and
- engagement drops to 10% for employees thriving in zero WellBeing elements.

In addition, metrics for the WellBeing program measure specific criteria reported to the board of trustees (Table 3). Anne Arundel has seen the following improvement since the program began:

- Physical WellBeing: There has been an improvement in participation in physical activity programs (called "Energize") from 2466 participants in 2014 to 4298 participants in 2017. This represents a nearly 75% increase. In addition, the system had a 65% reduction in cafeteria product offerings of sugared beverages. This resulted in the elimination of 68 sugar products.

There was an improvement in staff perception of feeling active and productive and having physical health near perfect.

- Purpose WellBeing: Twenty-three employees enrolled in the "Expanding Horizons" program that resulted in promotions and pay increases. There was an improvement in staff rating of "liking what I do every day," and learning and doing something interesting every day.
- Social WellBeing: Because of all of the activities and social events that have been conducted, there has been an improvement in employee perception of receiving positive energy every day.
- Financial WellBeing: Over 3 years, participation in defined contribution plans rose from 75% to 95%. There was a decrease in employee perception of "being worried about money in last seven days" as well as an increase in employee perception of "having enough money to do everything."
- Community WellBeing: Contributions to United Way increased. An employee hardship fund was launched as part of the AAMC Foundation Annual Giving Campaign, which gave employees the opportunity to designate funds to help fellow employees during a financial emergency. Employee perception was highest in "receiving recognition for helping to improve the city where I live."

Next steps for AAMC include a program evaluation and further analysis of data. For example, the organization will evaluate different

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workforce strategies and stratify them by generation. Data will be analyzed to see whether there are differences in perception based on age category. Another step will be to further enhance the opportunities for employees to more completely develop their own personal well-being plan, along with individual milestones that are easily tracked at the individual level. Determination of the most valuable elements of the WellBeing program from the employee perspective will allow the leadership team to further develop the most valuable components of the program. In addition, linking the WellBeing program outcomes to employee engagement scores will ultimately lead to reduced turnover and improved employee satisfaction.[17] Ultimately, these metrics will be linked to organizational patient satisfaction and quality-of-care outcomes.

CONCLUSION

As the work in WellBeing at AAMC has evolved, one lesson learned has been that the success of this initiative is dependent on working with employees to own their own WellBeing journey. The organization is providing resources that employees can choose to utilize as they desire. In this way, employees are truly engaged in their health and well-being. There is an expectation that there will be an increase in the emotional commitment that the employee has to the organization and to the "community we serve." The program will continue to be expanded. It will include more frontline employee participation, stronger frontline leadership, and enhanced education about the importance of whole-person well-being for employees. Ongoing evaluation of progress will continue. Opportunities for research in this space exist, and data evaluation and linkages can continue to be made by linking well-being to employee engagement. Ultimately, this improvement in employee well-being will lead to better outcomes, as demonstrated by documented studies that show that engaged employees lead to better service, quality, and productivity.[6] Anne Arundel Medical Center is well on its way to reaching the quadruple aim through well-being of employees.

Engaged employees who feel cared for by their employer through initiatives like our WellBeing programs positively influence an organization's performance. The work done at AAMC provides a framework, and gives suggestions to others, around the process of developing a robust employee WellBeing program.

Many health care organizations have exclusively focused on Physical WellBeing, under the moniker, Wellness, and are now contemplating moving toward a more comprehensive well-being strategy. Anne Arundel Medical Center started out with a broader WellBeing platform. Our wellness initiatives were placed under Physical WellBeing as just one component. This has allowed us to communicate with our staff members in a direct way. We have embraced the quadruple aim not just in theory but through demonstrable actions, actions that any leadership team can embrace.

REFERENCES

1. Berwick DM, Nolan TW, Whittington J. The triple aim: care, health, and cost. *Health Aff (Millwood)*. 2008;27:759–768.
2. Barnas K. *Beyond Heroes: A Lean Management System for Healthcare*. Appleton, WI: ThedaCare Center for Healthcare Value; 2014.
3. Bodenheimer T, Sinsky C. From triple to quadruple aim: care of the patient requires care of the provider. *Ann Fam Med*. 2014;12(6):573–576.
4. Gallup. *State of the American Workplace: Employee Engagement Insights for US Business Leaders*. Annapolis, MD: Gallup, Inc; 2013. http://www.gallup.com/file/services/176708/State%20of%20the%20American%20Workplace%20Report%202013.pdf. Accessed April 6, 2018.
5. Rath T, Harter J. *Wellbeing: The Five Essential Elements*. New York, NY: Gallup Press; 2010.
6. Clarke A. $tress: a workplace epidemic. *Benefits Magazine*. August 2014:32–35.
7. Camera L. 2014 graduates had the highest student loan debt ever. US News and World Report. October 2015.

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8. Grant A. Friends at work? Not so much. New York Times. September 2015.
9. Chenoweth D. *Promoting Employee Well-Being: Wellness Strategies to Improve Health, Performance and the Bottom Line*. Alexandria, VA: SHRM Foundation; 2011:1–57.
10. Gallup, Inc. Gallup Q12 and WellBeing 5 assessment. https://q12.gallup.com/public/en-us/Features. Accessed April 6, 2018; http://www.healthways.com/well-being5. Accessed April 6, 2018.
11. Rath T, Harter J. *The Economics of Wellbeing*. New York, NY: Gallup Press; 2010:14.
12. Phillips J. Workplace violence against health care workers in the United States. *N Engl J Med*. 2016;374:1661–1669. doi:10.1056/NEJMra1501998.
13. Perlo J, Balik B, Swensen S, Kabcenell A, Landsman J, Feeley D. *IHI Framework for Improving Joy in Work. IHI White Paper*. Cambridge, MA: Institute for Healthcare Improvement; 2017. http://www.ihi.org/resources/Pages/IHIWhitePapers/Framework-Improving-Joy-in-Work.aspx. Accessed April 6, 2018.
14. Gergen Barnett K. In pursuit of the fourth aim in health care: the joy of practice. *Med Clin North Am*. 2017;101(5):1031–1040.
15. Bader BS. Distinguishing governance from management, great boards, trustee services. *Am Hosp Assoc Publ*. 2008;8(3):58–62.
16. Callender AN, Hastings DA, Hemsley MC, Morris L, Peregrine MW. *US Department of Health and Human Services Officer of the Inspector General, American Health Lawyers Association*. https://oig.hhs.gov/fraud/docs/complianceguidance/corporateresponsibilityfinal%209-4-07.pdf. Published 2007. Accessed February 14, 2018.
17. Kruse K. What is employee engagement? *Forbes*. https://www.forbes.com/sites/kevinkruse/2012/06/22/employee-engagement-what-and-why/#68d84b697f37. Published 2012. Accessed February 14, 2018.

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