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# Creating High-Quality Health Care Workplaces

by

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## Executive Summary

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## Executive Summary

Health human resources have emerged as a top priority for research and action. This paper echoes calls for a fundamentally new approach to the people side of the health care system – treating employees as assets that need to be nurtured rather than costs that need to be controlled.

The scope of the human resources crisis in health care is multi-dimensional in its symptoms, underlying causes, and consequences. Finding solutions to these problems starts with the recognition that the performance of any health care organization depends on motivated, knowledgeable, and well-resourced employees. The same work environment factors that help to meet organizational goals (i.e., a ‘healthy’ or well-functioning organization), also contribute to positive worker outcomes ranging from physical well-being to skill development and job satisfaction.

The question guiding the paper is: “What are the key ingredients of a high-quality work environment in Canada’s health care sector and how can this goal be achieved?” Synthesizing insights from a variety of research streams, the paper identifies many ingredients are needed to create a high-quality workplace. We take a multidisciplinary and holistic approach, which complements other research initiatives on health human resources in three ways. Specifically, this approach:

- Documents the links between work environments, employment and industrial relations, and ‘healthy’ outcomes for workers and organizations. This moves beyond previous studies that concentrate on one of these sets of factors.
- Views health as one aspect of a high-quality work environment that flows from specific organizational changes and human resource management practices.
- Presents a model of a high-quality work environment that draws on a broad base of evidence, adapting it to the distinctive features of health care workplaces.

The discussion of high quality workplaces draws widely on workplace and organizational research, focusing on four sets of factors that interact to enable or constrain the achievement of positive outcomes for employees, organizations and patients:

- 1) the work environment, broadly considered, and the human resource practices that shape it;
- 2) job design and organizational structure (including technology);
- 3) employment relationships, which covers issues from trust and commitment to communication; and
- 4) industrial relations.

The paper suggests that health care organizations can, and must, achieve a virtuous circle connecting work environments, individual quality of work life, and organizational performance. Doing so will require a bold new vision of health human resources, supported by a workplace culture and leadership approach that fully values the contributions of all staff.

The paper makes recommendations, summarized below, for policy and practice. Many of these recommendations were formulated at a National Roundtable, organized by Canadian Policy Research Networks, in Ottawa on October 29, 2001.

The recommendations call for a new vision of health human resources built around recruitment, retention, staff development and quality of work life. Progress depends on all players being committed to this vision – including ministries, unions, professional associations, and leaders and managers at all levels within health care organizations.

*Broad Public Policy Recommendations:*

1. Each jurisdiction is encouraged to negotiate an *accord* among institutional leaders, acknowledging that they share the goal of creating high quality work environments in health care and setting out principles to guide action.
2. Health care organizations need a stable policy and funding environment in which to make workplace improvements.
3. Blueprints for health care reform must explicitly consider their impact on workplaces and employees.
4. The Ministers of Health should establish an inter-disciplinary, applied research unit on Health Human Resource Management.

*Union and Professional Association Recommendations:*

5. While members of the different health care unions and professional associations have unique needs, it nonetheless is important for leaders of these organizations to develop a common, long-term workplace improvement agenda.
6. It would be useful for employer and employee groups to collaboratively document the 'lessons learned' from examples of cooperative labour-management relations, whether in health care or other industries.
7. Unions and professional associations need to address growing concerns about employee health and wellness in health care workplaces.

*CEO and Management Recommendations:*

8. There is a pressing need to promote workplace cultures that value employees as assets. Rebuilding commitment and trust between employee and employer must be a senior management priority within each workplace.

9. Organizational change must be guided by comprehensive strategies (rather than piecemeal programs) that involve all employee groups in design and implementation.
10. Where possible, jobs in the health care system should be designed to increase employees' skills, responsibility, autonomy and participation.
11. Integrated human resource information systems are an essential management tool, helping to make the case for specific human resource interventions—as well as showing the costs of inaction.