

## Creating Healthy Work Environments 2019

### A Shared Vision for Well-Being: Connecting Nature, Art, Science, and Caring to Transform Workplace Culture

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The well-being of nurses and other health care professionals is crucial for person-centred care delivery, improved patient outcomes and decreased length of patient stay (Kurjenluoma, Rantanen, McCormack, Hahtela, and Suominen, 2017). Nurse leaders are acutely aware that the physical, mental, emotional and social well-being of employees can influence quality of care, productivity and employee recruitment and retention (Fontaine, Koh and Carrol, 2012; Haddon, 2018; Timm, Gray, Curtis and Chung, 2018). Decreased connection with nature, less physical activity, increased work related stress and overwhelming workloads further impact the health and well-being of staff (Grawitch, Ballard and Erb, 2015; Stringer, 2016). To address this increasingly common problem, organisational focus is rapidly shifting towards the creation of healthier workplace environments that connect with nature, reduce stress and help create a healthy workplace culture and (Stringer, 2018; Timm, Gray, Curtis and Chung, 2018).

Environments that sustain human flourishing are currently being designed and constructed across the globe (Stringer, 2016, pp. 127-148). One such environment is the recently commissioned South East Regional Hospital (SERH) in Australia. Designed by an award winning architect, this contemporary functional building and its riverside surrounds resembles a vibrant community precinct rather than a traditional hospital. Designed to showcase and reflect a strong connection with the land, local community, Aboriginal culture and surrounding natural environment, the generous outlook and uplifting views embrace the local landscape and connect those within to the adjoining natural beauty (BVN, 2015).

This purpose-built, health care facility has been deliberately planned to develop into an integrated health campus. The welcoming atrium is bathed in natural light, which has been shown to increase staff productivity and reduce length of patient stay (Stringer, 2016, pp.129-131). In addition, art, colour, and live music further increase occupant alertness and engagement (Stringer, 2016, p.139). This central open space connects to all activities and facilities on three levels with open staircases that bring together clinical services, further education and accommodation (BVN, 2015).

Inside corridors between the main walls allow patients and staff to navigate effortlessly through the hospital in complete privacy, thus reducing stress and anxiety levels (Stringer, 2016, pp. 81-82). Easy access to the beautifully landscaped outside spaces, gardens and balconies, further contribute to a sense of calm reflection and well-being (Stringer, 2016 pp. 127-148).

A shiny, brand new greenfield workplace however, does not necessarily result in a healthy workplace culture when staff walk through its doors for the very first time. As glorious as the physical environment and workspace was, staff were still challenged by clinicians not working effectively in interdisciplinary teams, a disengaged medical workforce and a degree of grieving for the old site. In addition to conflicting values, the larger footprint and wider geographical locations between departments was challenging, with much complaining of sore feet and loss of time.

Two years into the life of the South East Regional Hospital and having embarked on a significant cultural change program in late 2017, feedback and evaluation from staff demonstrates that a shared vision and focus on cultural change has been rewarding and successful. The shift in workplace and person centred culture has evolved into a sense of caring for self, staff and patients, as well as shared values and a connectedness to each other and our work environment (McCormack and McCance 2017).

Recognition programs and awards are now commonplace as are monthly whole of hospital events, competitions and celebrations in the atrium and gardens that unite the workforce. Renewing governance frameworks with involvement of staff from the ground up, has resulted in professional and clinical practice forums, student support programs and interdisciplinary leadership development that empowers and supports staff health, well-being and commitment to the organisation (Laschinger, Wong, Cummings and Grau, 2014).

Workplace environments are complex common spaces where individual human beings with diverse experiences, values and perspectives, must not only develop relationships with each other, but also interact with the physical building, its fixtures, fittings, machinery and external surrounds (Timm, Gray, Curtis and Chung, 2018). When interdisciplinary teams unite and focus on a shared vision, these challenges provide a unique opportunity for individual personal and professional growth, enhanced team work, increased potential for improved patient outcomes and a transformed, nurturing and caring workplace culture that promotes health and well-being.

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**Title:**

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**Keywords:**

Culture Transformation, Healthy Buildings and Shared Focus

**References:**

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### **Abstract Summary:**

This presentation will discuss how moving from an old health care facility to one that was purposefully designed to provide a nurturing and healing environment provided unique challenges and opportunities for staff to transform their existing workplace culture into an uplifting environment that focused on caring, health and well-being

### **Content Outline:**

Presentation:

- Introduction
  - Title and author acknowledgement
- Background
  - History of both hospital sites
- Photos of both hospitals and surrounds
- Old culture
  - Review & Recommendations
- Cultural change program
  - Details
- Outcomes
  - Evaluation & feedback.
- Questions

First Primary Presenting Author

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**Professional Experience:** 2011 - present: Lecturer, University of Wollongong, School of Nursing. Teach, coordinate and assess subjects in undergraduate and postgraduate nursing programs: March 2004 – December 2004: Lecturer, Health & Social Care, Salisbury College of Further Education, Health & Care Program, Salisbury, Wiltshire, UK. 2000 – 2001: Lecturer & Clinical Facilitator, Adult & Paediatric Post Graduate Nephrology Nursing Program, Oman Nursing Institute, Muscat, Oman. 1996 – 2000: Clinical Nurse Educator, B Braun Aesculap/ B Braun Medical Ltd., Sheffield, UK. Awards, conference presentations and publications: Student mentoring, design of online teaching and eLearning activities, interactive and immersive classroom teaching and learning, nursing practice simulation and community engagement.

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