Change Fatigue in Health Care Professionals—An Issue of Workload or Human Factors Engineering?

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In the demanding and fast-paced world of health care, it is not uncommon for nurses and other health care professionals to have days where they are pushed to their limits. Despite these pressures, each year, new initiatives and practice recommendations are shared within organizations that the nurses must learn, embrace, and include in their practice. Each new initiative can be additive to the nurse's workload; most changes are not time neutral but require staff to expend an allotment of time from their day to complete. In our efforts to adopt new recommendations, is it realistic or possible to add on to workload and stretched resources in an ongoing manner? The following article provides an overview of how issues such as change fatigue and increased workload need to be addressed. Through use of workload measurement tools and guidance by the principles of human factors engineering, we can better support the provision of optimal patient care in a demanding environment.

Keywords: *change, fatigue, human factors engineering, workload, change management.*

OBJECTIVES—(1). Discuss how workload measurement tools can be used to enhance the delivery of patient care; (2). Describe the field of human factors engineering.

There is a general awareness that a chronically heightened stress level is a risk factor for the onset of cardiovascular disease, depression, and cancer.[1] Having recently gone through the journey of cancer, I was pulled away from the health care's busy playing field to observe clinical practices through a different lens. Health care is a complex, changing, and costly business. Being a nurse and now a cancer patient, I questioned what steps can be taken to support quality care yet avoid health care provider burnout, or worse serious illness.

Despite numerous studies on fatigue and patient safety, the need remains to address the growing concern around high workload for nurses.[2] Evidence of the strain is seen by higher absenteeism, turn over, and job dissatisfaction in the nursing profession compared with other occupations.[2] By examining how change is introduced into health care with consideration to workload measurement and human factors engineering (HFE), there is hope to make improvements in these aspects of the nursing profession.

Aiming for Resilience and Avoiding Project Exhaustion

Research has found that the human brain has limitations in recall.[3] As we try to remember more than

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six or seven digits or tasks, there is a corresponding drop in efficiency. Furthermore, recall overload and impaired short-term memory can be seen when the number of tasks exceeds six.[3] A question to consider is how does a busy health care organization determine the optimal number of change initiatives to enact each quarterly season? Is there an empirically based method to guide organizations to optimize change management processes while avoiding change fatigue (CF) and burnout? If so, what factors would be inclusive in the calculation, namely patients volumes, population served, mortality rates, acuity levels, organization size, number of employees, and so on.

Such a discovery may be useful in guiding organizations to prioritize care planning at the start of a new budgetary year. But for now, we are encouraged to taking a thoughtful and long-range approach to change to avoid overburdening health care professionals (HCPs). In doing so, health care organizations can ensure a sustainable and manageable improvement processes.

According to change guru John Kotter, 70% of the change management projects are unsuccessful. This is in part owing to the organization not taking a holistic and long-range approach to see things through.[4] The simple math of this figure is startling when one considers the time, energy, cost, and efforts to enact change. Despite placing demands on the internal resources of the organization, much of the time the goals around a change are not achieved. In an environment where time is a stretched commodity, projects must be managed in a manner that ensures effective use of all stakeholders' time.

Change Is Constant

It is common knowledge in today's society that change is a constant. We are asked to accept change, otherwise it will change us. To facilitate the ongoing ups, downs, and dynamics of the change process, there are numerous theories, courses, and workshops on how to successfully enable change.[4] Some theories outline the importance of first identifying the enablers, stakeholders, and barriers to change. Regardless of the approach the organization chooses (eg, Haines' six steps of the rollercoaster of change or Kotter's eight steps of change), consideration must also be given to the volume of concurrent changes and workload of the staff.

There are few studies that examine the impact working in an organization that has frequent flux and uncertainty inherent with change.[5] However, identifying the presence of CF can be accomplished through use of a measurement scale on its own, or adding this to other tools already in place in the organization (Appendix I).[5] In taking efforts to measure CF, negative outcomes can be avoided, including exhaustion, decreased commitment to the organization, and employee turnover.[2]

Although change can bring advancement, improvements, and innovation, we must be aware that the very nature of change can create a paradox.[5] It is the presence of a sustainable and predictable environment with routines that assists staff to adapt to change. Introducing an excessive amount of change can impair coping and adaptation, and create a sense of uncertainty. Humans have an inherent need for predictable and orderly environments, thus change must be introduced to the organization in a thoughtful and forward thinking manner if the changes are to be sustainable and effective.[2] Areas to consider in reducing the discomfort of change are the frequency of changes, the transformative nature of the change, and the level of supportive leadership provided to staff. Furthermore, when the staff have a sense that a change was well planned, it is associated with less strain than a change that is introduced more suddenly.[6]

Workload Measurement Tools

Creation of the ideal nursing workload measurement tool (WLMT) has yet to occur despite ongoing efforts since the 1930s.[7] It is a challenge to capture within a tool the complex demands, multitasking, and direct and nondirect patient care activities that can be unpredictable and changing. The dynamic nature of nursing care along with multifactorial interruptions in patient care are cited as barriers to achieving success in designing a reliable WLMT that quantifies nursing care in a reliable manner.[7]

It is recognized that workload for nurses has been on a steady increase since the 1990s.[2] Ironically, the nurses have provided feedback that their