

EXECUTIVE SUMMARY

# THE HEALING HEALTHCARE INITIATIVE: GUIDING LEADERS TO HEAL A TRAUMATIZED WORKFORCE

## INTRODUCTION

We published a paper in “Healthcare Management Forum” describing early results of the Schwartz Center’s Healing Healthcare Initiative (HHI) pilot program. As we know, the COVID-19 pandemic exacerbated burnout, highlighted health inequities, and increased staffing shortages. In particular, it intensified psychological stress injuries and mental health issues among healthcare workers and leaders.

The HHI pilot offers senior executive and clinical leadership teams a space for reflection and open conversations, fosters trust within the team, and reinforces their commitment to employee well-being. The program supports leadership teams in creating a strategy to implement the HHI framework and engages front-line workers in co-designing organizational solutions for a thriving workforce.

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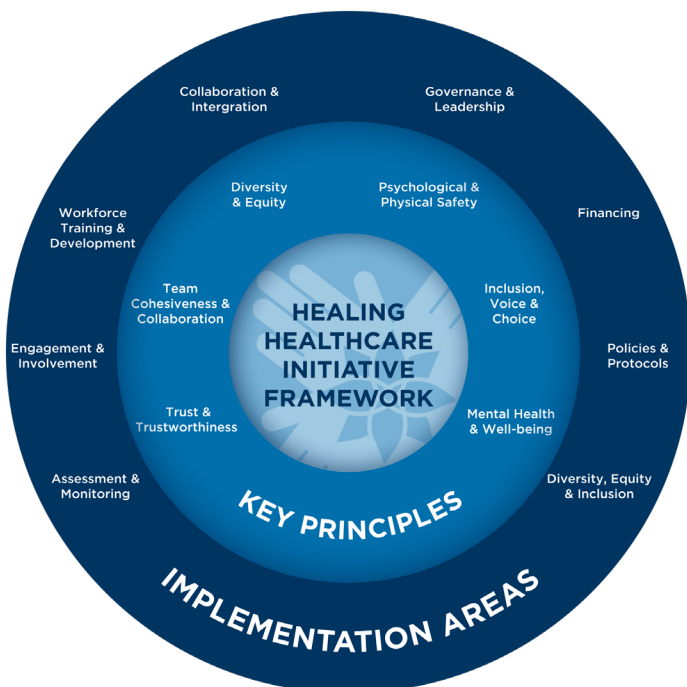
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### BACKGROUND: THE HEALING HEALTHCARE INITIATIVE FRAMEWORK AND PILOT PROGRAM

The Healing Healthcare Initiative (HHI) is a trauma- and resilience-informed program developed by the Schwartz Center. The program supports healthcare leaders to create a workplace that prioritizes the well-being of healthcare workers, so they can continue to provide high-quality care for patients and their families.

The HHI framework is adapted from the Substance Abuse and Mental Health Services’s (SAMHSA) trauma-informed approach to patient care and consists of six key principles and eight implementation domains to establish compassionate, trauma-informed organizational cultures and practices.



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The program’s goals are to help leadership teams implement the framework to address and mitigate risks for healthcare workers through organizational and operational initiatives, policies, and metrics. The program also provides leaders with a psychologically safe space for reflection and peer support.

Pilot sites for the HHI pilot program included diverse healthcare settings, including safety-net, academic, rehabilitation, pediatric, and adult hospitals.

The program emphasizes communication and collaboration among departments, disciplines, and locations to identify effective initiatives and spread them across healthcare organizations. Each organization established an employee HHI Organizational Committee (HHIOC) to participate in planning sessions to co-create and implement HHI activities.

Cohort-wide activities and resources include Schwartz Rounds<sup>®</sup>, expert-led learning collaboratives, relational leadership coaching, peer learning sessions, and a roadmap of facilitated sessions with discussion guides and slides to help leadership teams progress toward their goals.



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### INITIAL FINDINGS

Assessment methods encompassed organizational practices surveys, semi-structured leader interviews, and pre- and post-program leadership and workforce surveys, providing a comprehensive evaluation of HHI implementation and impact.

The HHI teams found the organizational practices survey to be a valuable intervention in identifying existing supportive practices and gaps, particularly in measurement. It revealed that well-being initiatives often operate independently, leading to a lack of awareness across departments and locations. While some peer support initiatives were well-utilized, others were not.

In the baseline survey, 91% of HHI leadership team members rated the value placed by their organizations on team cohesiveness and collaboration lower than other key principles, and they also rated themselves lower on awareness of health workers' needs. However, the teams rated their organizations highly on valuing physical safety, diversity and equity, and having support to promote equity. They also rated their organizations highly on sharing information and decisions with health workers to maintain trust.

There was a wide range of scores within each leadership team, indicating divergent perspectives on their alignment, sparking in-depth discussions in facilitated data reflection sessions. This initial assessment highlighted the need for improved communication and integration of initiatives, a better understanding of health workers' needs and the need to restore their trust in leadership, and the importance of internal team dialogue and alignment.

We experienced challenges in convening entire leadership teams for HHI meetings due to competing priorities, despite the positive reception of the safe space created for honest conversations and reflection. HHI participants recognized the critical importance of clinical and executive leaders' involvement in addressing the mental health and well-being of health workers to rebuild trust and counter perceptions of abandonment. Leaders were encouraged to articulate a positive pathway forward and emphasize the alignment of key principles with organizational values and strategies to improve patient care.

Throughout the program, we emphasized the importance of collaboration and communication and designed the HHI program activities to model the key principles, specifically by encouraging the leadership teams to engage the workforce in co-designing solutions to organizational challenges.

Additionally, the Schwartz Center collaborates with HHI leadership teams to continuously improve the program, and peer learning sessions provide valuable opportunities for leaders across pilot organizations to learn from each other's experiences.

Overall, the pilot underscores the significance of sustained leadership involvement in addressing the well-being of health workers and highlights the importance of trust, workforce involvement, collaboration, communication, and peer learning in driving organizational change.



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### LESSONS LEARNED

The pilot highlights the complexity of organizational systems change and emphasizes the importance of aligning human-centered values with operational priorities to enable the organization and its workforce to thrive. It emphasizes that CEO commitment and leadership investment in the HHI key principles are essential to creating compassionate, trauma- and resilience-informed organizational cultures, but acknowledges that this process takes time and sustained attention. The pilot has highlighted the need for prioritizing and measuring the key principles to the same degree as patient quality and safety, particularly in the wake of the pandemic and its disruptive aftermath.

Rebuilding frayed trust requires visible CEO presence, continuous listening strategies, bi-directional communication, tailored approaches for different workforce segments, and new quality metrics—aligned with the key principles—to assess organizational performance.

The pilot has underscored the essential role of workforce mental health and well-being in fulfilling the purpose of medicine and fostering caring relationships. It suggests that through organizational transformation, healthcare leaders can ensure a thriving workforce capable of providing compassionate, safe, and equitable care, even during future emergencies.

**To read the full article, “The Healing Healthcare Initiative: Guiding leaders to heal a traumatized workforce,” please visit: [bit.ly/hhiarticle](https://bit.ly/hhiarticle)**

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