



Building Psychological Safety in an Organization under Chronic Stress

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INTRODUCTION

The COVID-19 pandemic exacerbated chronic stress environments across health care organizations in the US. The full psychological impact of COVID-19 among healthcare workers due to prolonged, chronic stress is still unknown but initial studies suggest evidence of high levels of psychological distress and dysfunctional levels of anxiety (Luo et al., 2020). Organizational support that promotes psychological safety is associated with decreased levels of anxiety (Labrague & De los Santos, 2020).

Psychological safety is especially important in healthcare environments, where employee and patient safety are crucial. It has been shown to be critical in enhancing patient safety and increase team and individual learning (Edmondson et al., 2016).

OBJECTIVES

The goal of this DNP project was to develop an educational program for nurse leaders to enhance psychological safety and wellbeing of teams during chronic organizational stress.

Aims:

1. To develop a virtual psychological safety and wellbeing program for nurse leaders in a large urban academic health care system.
2. To implement and evaluate the program.
3. To make recommendations for scaling and sustainability of the program throughout the system.

METHODS

Lewin's Change Management Theory was used as the primary framework for this DNP project

Aim 1: Based on existing evidence on psychological safety, a 1-hour, live, virtual training session to address specific skills in creating psychological safety on a team was developed. The program expanded on an established Culture of Safety training and was aimed at nurse leaders throughout the organization. Topics in this training included:

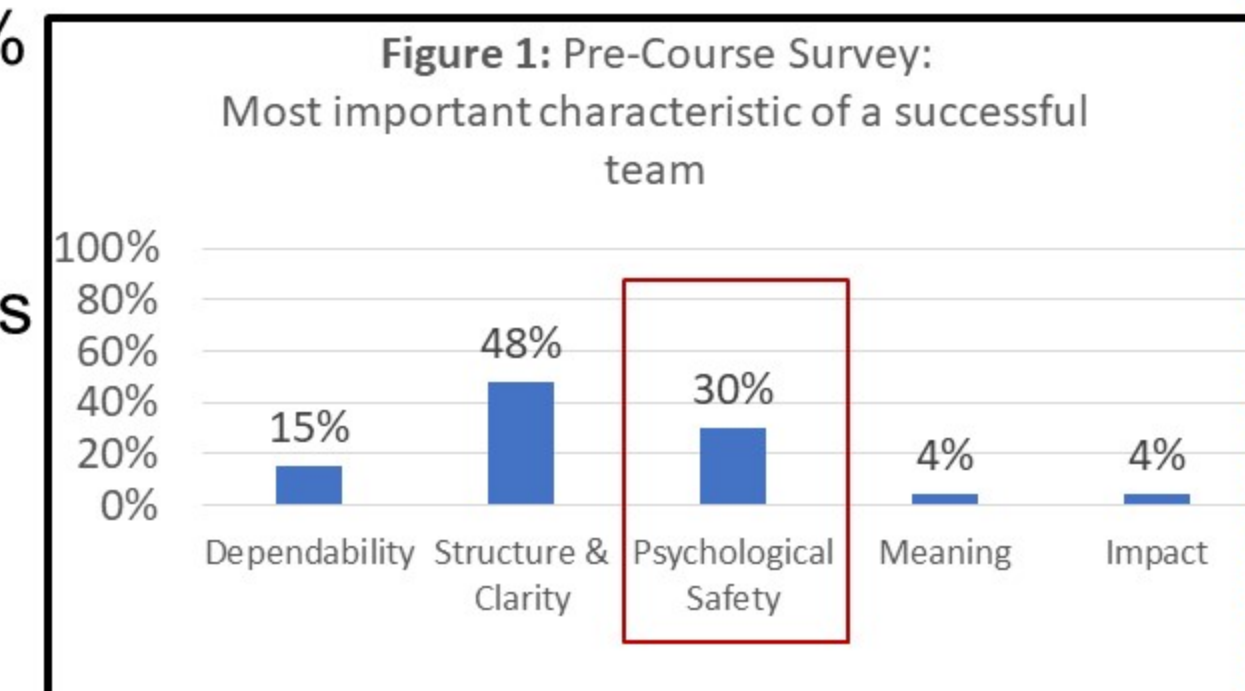
- Introduction to psychological safety
- Factors that drive and undermine psychological safety
- The role of psychological safety in healthcare and within the Institute of Healthcare Improvement's (IHI) Framework for Safe, Reliable, and Effective Care
- Impact on burnout, patient safety, and event reporting
- How to build psychological safety on your team and in virtual settings.

Aim 2: Health care leaders who are involved in the safety event process were recruited throughout the organization to attend one virtual training session. Participants completed a pre-course survey that included the Psychological Safety Measure Tool, and a post-test consisting of 8 knowledge acquisition and 3 program evaluation questions. We tested whether persons newer in the role (< 1 year) would have less knowledge about psychological safety, fewer skills on building it within their teams, and would be more likely to recommend the program to others, using chi-square and t-test statistics.

Aim 3: Recommendations were made to include this program into the existing Culture of Safety training and nurse manager orientation enterprise-wide.

RESULTS

Of 31 participants registered for the program, 29 completed the pre-course questionnaire, 20 completed the post-course test and evaluation. Overall, the pre-course scores for "feeling psychologically safe" was 28.9; no differences were seen by years in the role ($p=0.762$). Figure 1 shows that prior to the class, when asked about the most important characteristic of a successful team, only 30% reported the correct answer of psychological safety. Table 1 summarizes knowledge acquisition where 87% answered questions correctly (item responses in Table). This is statistically significant compared to the pre-course survey question ($p=0.05$). Also, 90% of participants felt the course useful and would recommend to others.



Question	% Correct
1. As a leader, how can you emphasize the complexity and uncertainty of the work that lies ahead?	80%
2. You know your work duties, but you choose not to follow the processes that are in place. Which type of failure does this exemplify?	80%
3. When are you at risk of failing to innovate and also at risk for preventable failures?	90%
4. What is an example of a question that fosters psychological safety?	90%
5. What is the best way to give feedback and not harm psychological safety?	95%
6. Which sign may be a trigger that you need to step back and carve out some safe spaces for learning, improvement, and innovation?	85%
7. When do intelligent failures happen?	80%
8. If you set high standards of accountability and create a climate of psychological safety, which zone will team members likely be in?	95%

No differences by years on the job suggests wide utility.

REFERENCES

Edmondson, A. C. (2018). *The Fearless Organization: Creating Psychological Safety in the Workplace for Learning, Innovation, and Growth*. John Wiley & Sons.

Edmondson, A., Higgins, M., Singer, S., & Weiner, J. (2016). Understanding psychological safety in health care and education organizations: A comparative perspective. *Research in Human Development*, 13, 65-83.

Labrague, L. J., & De los Santos, J. A. A. (2020). COVID-19 anxiety among front-line nurses: Predictive role of organisational support, personal resilience and social support. *Journal of Nursing Management*, 28(7), 1653-1661.

Luo, M., Guo, L., Yu, M., Jiang, W., & Wang, H. (2020). The psychological and mental impact of coronavirus disease 2019 (COVID-19) on medical staff and general public - A systematic review and meta-analysis. *Psychiatry Research*, 291, 113190-113190.