Psychological Engagement Factors and Organisational Engagement Behaviours for the Medical Workforce

Purpose of Research:

Within the NHS, effective processes to promote staff engagement have been shown to correlate positively with improved patient safety and mortality.[1] The engagement of consultant doctors in particular has been considered a key component of healthcare reform; that *'transforming complex health systems will require the engagement of physicians as leaders in their health care settings, in both formal and informal roles.'* [2] The implication is that a virtuous circle can be formed of psychological engagement, behavioural engagement and improved performance outcomes.

Organisational Engagement Behaviour

Factors of Workplace Engagement

Organisational Outcomes

Links have been made between employee engagement and tangible organisational performance benefits across a range of sectors.[3] For healthcare organisations in which service improvement is challenging, lack of medical engagement is often cited as an underpinning cause.[4] However, definitions of 'engagement' for consultant doctors often focus on their effort in support of the wider organisation and too rarely on behavioural aspects of their work and factors underpinning workplace engagement.

This research considered the relationship between factors of workplace engagement (Slaski et al, in prep) and organisational engagement behaviour.

Design:

A cross-sectional, within-subjects design and questionnaire approach assessed the relationship between factors of workplace engagement and the key organisational engagement and organisational engagement behaviours, such as seeking information and influencing change.

Factors of Workplace Engagement:
- Voice
- Challenge
- Growth
- Recognition
- Clarity
- Reward
- Freedom

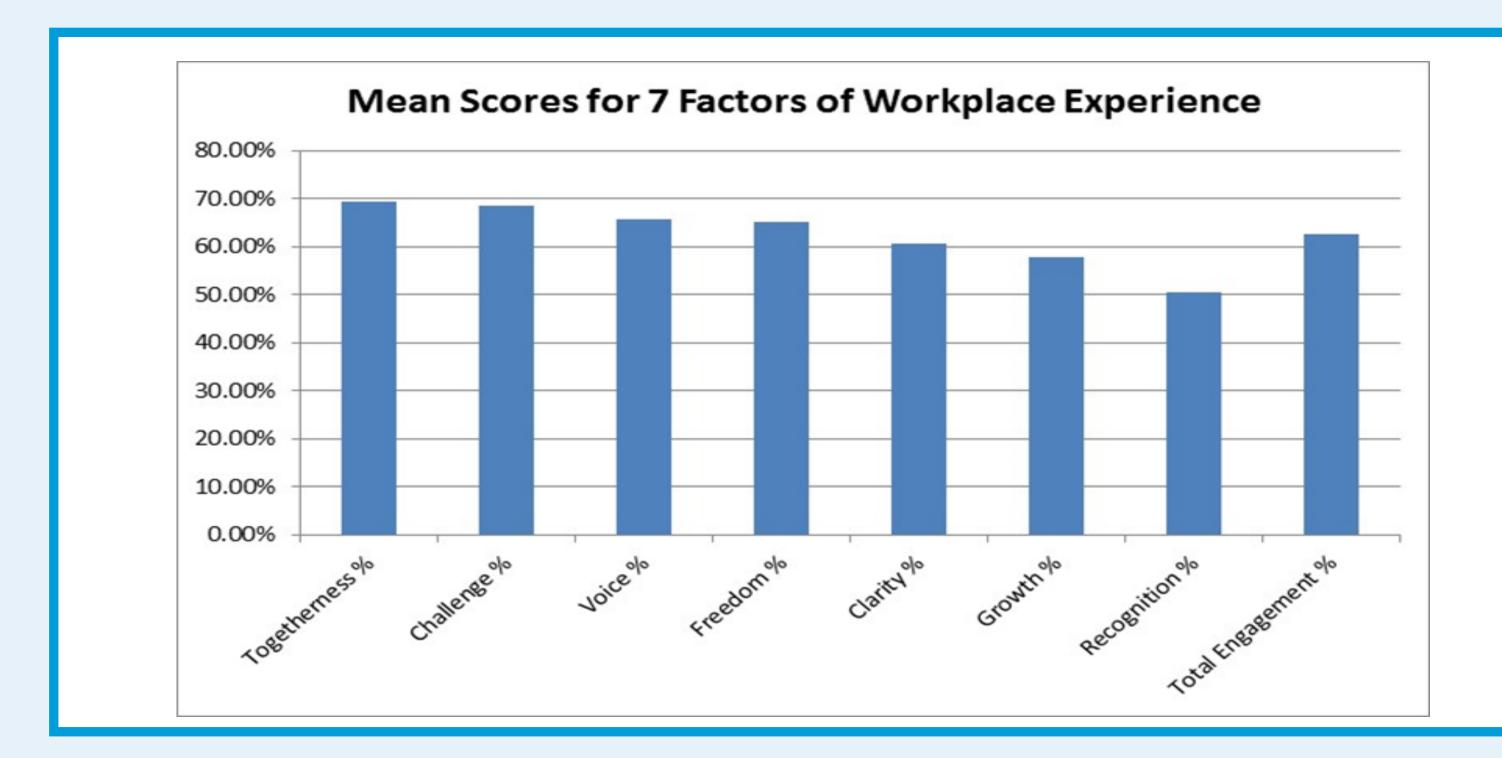**Organisational Engagement Behaviour**

Civic Virtue:
- Keeping up to date?
- Proactively involved?
- Prepared to disagree?

Commitment:
- Sorry to go?
- Plan to stay?
- Feel they belong

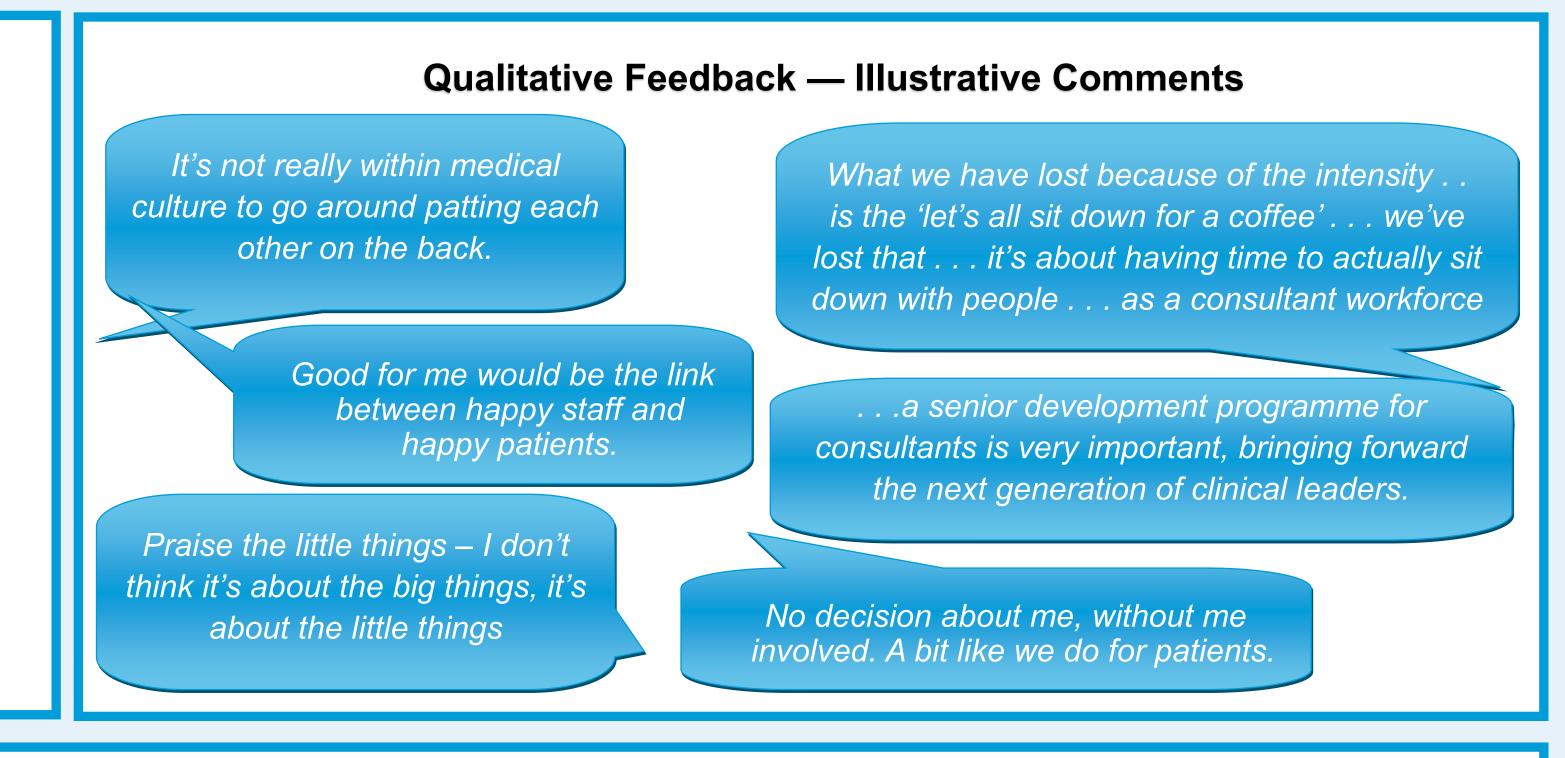## Method:

- All consultant doctors employed at a general hospital were invited to complete a questionnaire, with a 52% response rate achieved (n=124).
- The questionnaire used was based on Slaski's 7-factor model of workplace engagement and also used measures of civic virtue[5] and organisational commitment[6].
- A qualitative approach underpinned by appreciative inquiry provided insight into the experience of organisational leaders in promoting medical staff engagement.

Key Results:

- A positive correlation was observed between workplace engagement and civic virtue behaviours (r = 0.442); indicating that the more consultants experience the 7-factors of engagement surveyed, the more likely they are to engage in positive civic virtue behaviours.
- A positive relationship also existed between workplace engagement and organisational commitment (r = 0.632).
- 92.5% of the variance in the total engagement score could be explained by the variables of 'growth' and 'voice', with growth a particularly strong driver (r^2=0.782).

Mean Scores for 7 Factors of Workplace Experience

Qualitative Feedback — Illustrative Comments

It's not really within medical culture to go around patting each other on the back.

What we have lost because of the intensity . . is the 'let's all sit down for a coffee' . . . we've lost that . . . it's about having time to actually sit down with people . . . as a consultant workforce

Good for me would be the link between happy staff and happy patients.

. . .a senior development programme for consultants is very important, bringing forward the next generation of clinical leaders.

Praise the little things – I don't think it's about the big things, it's about the little things

No decision about me, without me involved. A bit like we do for patients.

Further Outcomes:

- How medical staff feel about their workplace correlated with their engagement behaviours, such as seeking out information and influencing change.
- Overall, consultants in leadership roles self-reported significantly higher levels of engagement behaviours than those that do not hold defined leadership roles.
- Within all groups, including those in leadership roles, consultants reported low levels of 'recognition' for their work and limited opportunities for 'growth'.
- Across all groups, scores for 'togetherness' and for 'challenge' were consistently high.
- After 6 – 10 years length of service, consultants' sense of accomplishment is significantly lower than during the first 5 years.
- Free text responses highlighted the importance of the wider consultant body feeling valued and that their views are listened to and respected.

Conclusion:

This research supported the notion that maximum benefit could be derived if the definition of medical engagement takes account of both the organisation's behavioural expectations and an individual's need for a humanistic working culture. Significantly, the implication is that creating a more humanistic culture may also have a positive impact on patient experience and outcomes.

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References:

1. West, Dawson, Admasachew & Topakas, 2011
2. Adamson & Kwolek, 2008
3. Bakker et al, 2008
4. McKee, 2016
5. Graham and Van Dyne, 2006
6. Meyer & Allen, 1990