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New roles and challenges within the healthcare workforce: a Heideggerian perspective: Anthea Maria Elisabeth Wilson

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New roles and challenges within the healthcare workforce: A Heideggerian perspective

Introduction

At the beginning of the 21st Century, the healthcare workforce is faced with unprecedented change. Arguably, two of the most significant of these has been the development and diversification of the Health Care Support Worker (HCSW) role, and the extension of nurse roles into Clinical Nurse Specialists nurse consultants and Advanced Nurse Practitioners. Role innovation is now well established in the UK National Health Service (Hyde et al., 2005, Bach et al., 2008, Desombre et al., 2006) and similar developments are occurring globally (Shiu et al., 2012, Antunes and Moreira, 2013). Pressures for more cost-effective care and skill-mix have contributed to increased reliance on nurses extending their roles into areas previously occupied by junior doctors (Williamson et al., 2012). Furthermore, nurse shortages have resulted in healthcare services making greater demands on HCSWs (Spilsbury and Meyer, 2004, McKenna et al., 2007). HCSWs usually work under the supervision of a nurse, midwife or allied health professional, their remit reflecting the particular clinical context. They provide vital support for patients, for example attending to hygiene, nutrition and mobility needs, and where appropriate performing technical procedures such as phlebotomy and electrocardiography.

While there is considerable enthusiasm for these developments, evidence for cost-effectiveness appears weak (Antunes and Moreira, 2013) and concerns abound that such changes can destabilise and compromise care delivery. For example, specialist nurses can be accused of ceding fundamental nursing care in favour of medical procedures (Pearcey, 2008) and the competencies associated with new roles may be poorly defined and difficult to maintain (Mills and Pritchard, 2004). Moreover, inquiries into serious care failings indicate persistent flaws in the modernised workforce (Francis, 2013). Arguments favouring role redesign present innovations as ways of improving workforce flexibility and productivity, but less optimistic viewpoints cite such developments as mechanisms for reducing staffing costs that replaces skilled professionals with protocol-dependent

support workers (Macfarlane et al., 2011). While the roles of registered nurses and HCSWs are subject to debates about 'role drift' towards assistants (McKenna et al., 2007: 1283) and questions about the extent to which HCSW competence can be stretched (Spilsbury and Meyer, 2004), our understanding of this experience is limited to a number of organisational perspectives. To date, our understanding of the inner world associated with the blurring of boundaries has been underexplored.

Diversification of services and development of novel roles has also created new challenges for the individual workers. For example, the boundaries of novel roles can shift over time (Bridges et al 2007) and often the role drift blurs the boundaries between clinical professions and non-clinical or unregistered clinical support staff such as HCSWs (McKenna, 2004). This paper focuses on how people adapt to new work environments and novel roles in situations such as these. I argue that Heidegger's concepts of authentic and inauthentic self provide a basis for understanding the shifting, complex and difficult roles in healthcare. Finally, I propose a conceptual frame, based on Heidegger, for understanding workplace experience during change. As the English terms commonly applied to Heidegger's ideas can lose the precision of Heidegger's analysis of existence, whenever practicable the original German terms are applied.

Being uprooted from the familiar

Role redesign can place people into unfamiliar job roles and/or unfamiliar work environments. Changes that render roles temporarily unfamiliar to an individual include taking on new tasks (e.g. HCSWs taking on nursing tasks), widening scope (e.g. a pharmacy technician adding ward visits to existing dispensing and stock ordering duties), assuming heavier responsibility through more demanding work, or adopting significantly new roles (e.g. 'emergency care worker') (Hyde et al., 2005). Professional training situations can illustrate the issues associated with transitions into new roles. The extant literature makes explicit links between work performance and work transitions, including claims that an individual's established levels of competence may not be achievable immediately following a transition (Kilminster et al., 2010). Kilminster et al (2010 p 566) suggest that

transition is a 'critically intense learning period', which requires greater recognition and consequently suitable affordances. This period of intense learning is also recognisable in the transition from student to qualified practitioner, and has attracted international interest (e.g. Phillips et al., 2013, Liaw et al., 2014, Brennan et al., 2010).

If, as suggested by Bridges et al (2007), some novel roles feature ongoing role shift, it is important to understand the implications for the post holders and their colleagues. New roles such as HCSWs designed to fill the gaps across professions, 'unconstrained by traditional occupational boundaries' (pp 389-390), are inherently malleable. In addition, malleable roles appear to foster conditions conducive to personalisation of a role. A study of the roles of support workers in social care (Manthorpe et al., 2010), which reported that the roles were ill-defined and spanned multiple contexts, identified as befriending role as a core aspect. Kubiak and Sandberg (2011) similarly argued that unregistered 'paraprofessionals' personalised their work and would shape their roles according to their personal interests. These two perspectives imply that where clear professional boundaries are lacking there is a greater emphasis on elements the individual personally brings to a role. Furthermore, Holt (2008) observed that nurses who moved into new roles took personal blame for practice mishaps, rather than attribute blame to a function of their role. The next section draws on Heidegger to discuss the implications for a workforce of adapting to novel work environments.

What can Heidegger contribute to our understanding?

Heidegger (1962), in his major work *Being and Time*, conceptualised human existence as *Dasein*, in which a person exists in a world of objects, practices, other people, and the associated meanings. The world is always and 'already' there, indicating that person and world are integral and inseparable. Juxtaposing a worker's experience with *Dasein* facilitates a unique perspective on the uprooting identified above in relation to new roles. This section begins with a synopsis of how *Dasein* supported interpretation in a phenomenological study of the experiences of nurse mentors (Author 2012) and subsequently addresses the utility and transferability of the concepts discussed. Figure 1 illustrates the fundamental dimensions of *Dasein* aligned with thematic interpretation in the

mentor study, and how past, present and future shape Dasein's world. The concepts discussed in this paper span these temporal elements, which are somewhat artificial divisions of a whole.

[insert Figure 1: Temporal aspects of Dasein and associated themes in the mentor study]

First, the study drew attention to how mentors enabled learners to engage with practice knowledge by acknowledging students' watchful engagement as newcomers to a workplace ('noticing the *Umwelt*'). In the context of *Dasein*, the *Umwelt* is the world immediately around a person: the practical, meaningful world of purpose and everyday existence. *Dasein* understands itself in the context of a world and its world only exists through human activity and interpretation (Heidegger, 1962). A person, as *Dasein*. constitutes the *Umwelt* through sense-making, so that people encounter entities as something – a notebook, a dressing, a uniform, and so on. *Dasein* establishes meaning by understanding entities as something within the totality of the *Umwelt*. Therefore, a new workplace or a new role will demand that new meanings are made through a process of sense making. The term *Umwelt* succinctly encompasses the idea of a practical, meaningful world, which can change depending on what someone is doing and what their purpose is, as well as their surroundings.

Second, the study considered the implications of understanding the mentors' world relating to *Zuhandenheit* (readiness-to-hand). According to Heidegger (1962), if something is 'ready-to-hand', or *zuhanden*, it is barely noticed as an entity because *Dasein* is preoccupied with the task in hand. This phenomenon can be illustrated in any skilful task such as driving a car, where the focus could be on getting around a corner instead of changing gear and turning the steering wheel a particular way. A novice driver, on the other hand, would have to concentrate on the controls, which would then be *unzuhanden* (unready-to-hand). Transferring the concept of *Zuhandenheit* into a discussion of new work roles, it can be argued that novel features of the *Umwelt* render a practitioner into a relatively de-skilled state in which work is deliberative and less fluent.

Third, and perhaps most significantly, the study interpreted the nuances between *Eigentlichkeit* ('authenticity') and *Uneigentlichkeit* ('inauthenticity') in the mentors' world of practice. *Eigentlichkeit*

is a mode in which individuality manifests itself and a person is prone to angst (Mulhall, 2005). The eigentlich ('authentic') self appeared when the mentors expressed feelings of guilt and explored their conscience. This occurred when they felt particularly burdened by accountability, especially when making important judgements about their students. By contrast, *Uneigentlichkeit* implies being absorbed in a public world. The *uneigentlich* (inauthentic) self is the 'they-self' (Heidegger, 1962 p. 167) which is carried along in the crowd, unburdened by guilt and conscience. An *uneigentlich* ('inauthentic') mode is a way of thinking of people as 'interchangeable occupants of impersonally defined roles' (Mulhall, 2005 p. 71). For the mentors, *Uneigentlichkeit* signified a preoccupation with being 'a mentor' and 'a nurse', and 'this is what we do'. However, in their personal involvements with students, they frequently felt that they were not simply interchangeable, and this was an indication of *Eigentlichkeit*.

In addition to the following summary of findings (Figure 2), the study highlighted that the implications were relevant to a variety of other professional roles and contexts, and partly developed in this paper.

[Insert Figure 2: Summary of findings from the mentor study (Author, 2012)]

A key insight gained by conceptualising the mentor experience through these Heideggerian lenses was the dynamic between the *eigentlich* and *uneigentlich* self, which had repercussions for well-being and the quality of work. Sometimes, their habitual mentoring strategies became problematic, interrupting flow and causing them to reflect. This could reveal their transition from the *uneigentlich* mentoring role to occasions when the *eigentlich* self is enlisted to solve problems. The conditions under which the mentors expressed their *eigentlich* or *uneigentlich* selves can easily translate to other work roles. An over-emphasis on the *eigentlich* self would be stressful and burdensome, and an emphasis on the *uneigentlich* self could mean that individual practices are not sufficiently challenged. Moreover, this implies great variation in how any role can be experienced.

Although variation in the experience of stress or distress has been widely reported, scholars agree that personal factors and the work environment interact and that effective leadership and support

can mitigate the risk of distress (McVicar, 2003, Koivu et al., 2011, Happell et al., 2013). In a review of stress in nursing, McVicar (2003) recommended that the health services in the UK needed to develop effective ways of detecting difficulties early. It could be that developing awareness of *Eigentlichkeit* and *Uneigentlichkeit* can help to signal workforce needs for either support or challenge. Furthermore, the inquiry into Mid-Staffordshire NHS Trust where serious care failings and staff distress went unchecked for several years, identified that the lack of management response was partly attributed to assumptions that someone else would deal with the problems (Francis, 2013). This appears to be a manifestation of the *uneigentlich* 'they-self' keeping staff busily occupied in their roles at the expense of the *eigentlich* self, which would have enabled a greater sense of personal accountability and conscience. Heidegger (1962) explained that these are the inescapable conditions of human existence; that the 'they-self' dominates ordinary, everyday life. Two lines of argument are developing. One is to add a new way of conceptualising thorny management issues, as above, and the other is to propose that the *uneigentlich* and *eigentlich* selves could signal, barometer-like, the effects and implications of change and adaptation.

Novel roles or role changes would increase the instance of *Eigentlichkeit* and temporary lack of fluency in practice. This *eigentlich* engagement, by implication, places more of a burden on practitioners as individuals and emphasises the importance of peer and managerial support in the workplace. Conversely, role stability and certainty are conditions that support fluency and confidence, but could blind practitioners to the need for change if equipment and practice strategies, or know-how, are *zuhanden* and therefore unnoticed. Therefore, it should be feasible to propose that monitoring signs of *Eigentlichkeit* – being burdened by guilt and conscience (finding oneself lacking in some way), and *Uneigentlichkeit* – being absorbed in a public world, can provide valuable management information about the impact of role changes in the workforce.

[insert Figure 3 Contrasting interactions within the *Umwelt*]

Figure 3 consolidates the ideas discussed in this section. The *Umwelt*, which provides a context for the dynamic relationship between work roles and the *eigentlich* or *uneigentlich* self, is concerned

with human activity in a meaningful world of purpose and everyday existence. The discussion of *Eigentlichkeit* and *Uneigentlichkeit* has unpacked some of the human factors impinging on a workforce. Although this discussion has sprung from a study of nurse mentors, it has implications for the education and training of all health professions as well as the role diversification currently occurring in both primary care and hospital settings. Further research is needed to investigate the lived experience of novel role holders, HCSWs, and students of health professions with reference to adjusting to new work environments. Also, the implications for managers warrants further investigation to determine best ways of monitoring and understanding the effects of change on individuals' wellbeing and practice effectiveness.

Concluding remarks

In workforce redesign, workers are uprooted from the familiar and the work-world becomes a shifting landscape. Such shifts have unavoidable impacts on the *uneigentlich* 'they-self' of workers as well as the *eigentlich* 'one-self' that is open to angst and guilt. The concepts of *Eigentlichkeit* and *Uneigentlichkeit* in Heidegger's *Dasein* offer an analytic framework for understanding people's lived experience of a changing workplace. These ideas provide a means of conceptualising the unfamiliar, malleable roles emerging in the context of healthcare modernisation. For example, skill redistribution in the nursing workforce means HCSWs are taking on more nursing work, while nurses are further extending their roles.

In a shifting work-world containing novel roles, workers are less able to assume a shared, public 'they-self'. While this can be viewed as a situation creating a greater sense of personal accountability, it can also increase the burden on individuals. Alternatively, lack of challenge in a role could lead to inertia and lack of personal accountability. These applications of Heidegger's philosophy can offer innovative ways of understanding workplace change. Indeed, the current intense scrutiny on care quality and patient safety demands that we actively seek novel solutions to understanding the human factors in health care delivery.

References

- Antunes, V. & Moreira, J. P. (2013), "Skill mix in healthcare: An international update for the management debate", International Journal of Healthcare Management, Vol. 6, No. 1, pp. 12-17.
- Bach, S., Kessler, I. & Heron, P. (2008), "Role redesign in a modernised NHS: the case of health care assistants", Human Resource Management Journal, Vol. 18, No. 2, pp. 171-187.
- Brennan, N., Corrigan, O., Allard, J., Archer, J., Barnes, R., Bleakley, A., Collett, T. & de Bere, S. R. (2010), "The transition from medical student to junior doctor: today's experiences of Tomorrow's Doctors", Medical Education, Vol. 44, No. 5, pp. 449-458.
- Bridges, J., Fitzgerald, L. & Meyer, J. (2007), "New workforce roles in health care: Exploring the longer-term journey of organisational innovations", Journal of Health Organization and Management, Vol. 21, No. 4/5, pp. 381-392.
- Desombre, T., Kelliher, C., Macfarlane, F. & Ozbilgin, M. (2006), "Re-Organizing Work Roles in Health Care: Evidence from the Implementation of Functional Flexibility", British Journal of Management, Vol. 17, No. 2, pp. 139-151.
- Francis, R. (2013), Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, The Stationery Office, England, available at: http://www.midstaffspublicinquiry.com/report (accessed 28 March 2014).
- Happell, B., Dwyer, T., Reid-Searl, K., Burke, K. J., Caperchione, C. M. & Gaskin, C. J. (2013), "Nurses and stress: recognizing causes and seeking solutions", Journal of Nursing Management, Vol. 21, No. 4, pp. 638-647.
- Heidegger, M. (1962), Being and time, Blackwell, Malden MA.
- Holt, I. G. S. (2008), "Role transition in primary care settings", Quality in Primary Care, Vol. 16, No. 2, pp. 117-126.
- Hyde, P., McBride, A., Young, R. & Walshe, K. (2005), "Role redesign: new ways of working in the NHS", Personnel Review, Vol. 34, No. 6, pp. 697-712.
- Kilminster, S., Zukas, M., Quinton, N. & Roberts, T. (2010), "Learning practice? Exploring the links between transitions and medical performance", Journal Of Health Organization And Management, Vol. 24, No. 6, pp. 556-570.
- Koivu, A., Saarinen, P. I. & Hyrkas, K. (2011), "Stress relief or practice development: varied reasons for attending clinical supervision", Journal of Nursing Management, Vol. 19, No. 5, pp. 644-654.
- Kubiak, C. & Sandberg, F. (2011), "Paraprofessionals and caring practice: negotiating the use of self", Scandinavian Journal of Caring Sciences, Vol. 25, No. 4, pp. 653-660.
- Liaw, S. Y., Koh, Y., Dawood, R., Kowitlawakul, Y., Zhou, W. & Lau, S. T. (2014), "Easing student transition to graduate nurse: A SIMulated Professional Learning Environment (SIMPLE) for final year student nurses", Nurse Education Today, Vol. 34, No. 3, pp. 349-355.
- Macfarlane, F., Greenhalgh, T., Humphrey, C., Hughes, J., Butler, C. & Pawson, R. (2011), "A new workforce in the making? A case study of strategic human resource management in a whole-system change effort in healthcare", Journal Of Health Organization And Management, Vol. 25, No. 1, pp. 55-72.
- Manthorpe, J., Martineau, S., Moriarty, J., Hussein, S. & Stevens, M. (2010), "Support workers in social care in England: a scoping study", Health and Social Care in the Community, Vol. 18, No. 3, pp. 316-324.
- McKenna, H., Thompson, D. & Watson, R. (2007), "Health care assistants an oxymoron?", International Journal of Nursing Studies, Vol. 44, No. 8, pp. 1283-1284.
- McKenna, H. P. (2004), ""Role drift" to unlicensed assistants: risks to quality and safety", Quality & Safety In Health Care, Vol. 13, No. 6, pp. 410-411.
- McVicar, A. (2003), "Workplace stress in nursing: a literature review", Journal of Advanced Nursing, Vol. 44, No. 6, pp. 633-642.
- Mills, C. & Pritchard, T. (2004), "A competency framework for nurses in specialist roles", Nursing Times, Vol. 100, No. 43, pp.
- Mulhall, S. (2005), Guidebook to Heidegger and Being and Time, Routledge, London.

- Pearcey, P. (2008), "Shifting roles in nursing does role extension require role abdication?", Journal of Clinical Nursing, Vol. 17, No. 10, pp. 1320-1326.
- Phillips, C., Esterman, A., Smith, C. & Kenny, A. (2013), "Predictors of successful transition to Registered Nurse", Journal of Advanced Nursing, Vol. 69, No. 6, pp. 1314-1322.
- Shiu, A. T. Y., Lee, D. T. F. & Chau, J. P. C. (2012), "Exploring the scope of expanding advanced nursing practice in nurse-led clinics: a multiple-case study", Journal of Advanced Nursing, Vol. 68, No. 8, pp. 1780-1792.
- Spilsbury, K. & Meyer, J. (2004), "Use, misuse and non-use of health care assistants: Understanding the work of health care assistants in a hospital setting", Journal of Nursing Management, Vol. 12, No. 6, pp. 411-418.
- Williamson, S., Twelvetree, T., Thompson, J. & Beaver, K. (2012), "An ethnographic study exploring the role of ward-based Advanced Nurse Practitioners in an acute medical setting", Journal of Advanced Nursing, Vol. 68, No. 7, pp. 1579-1588.

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Anthea Wilson is a lecturer in Health and Social Care at The Open University, leading and authoring modules addressing the front line of care. A registered nurse, she has worked in the UK National Health Service in clinical and educational roles. Her research interests include workplace learning and distance learning.

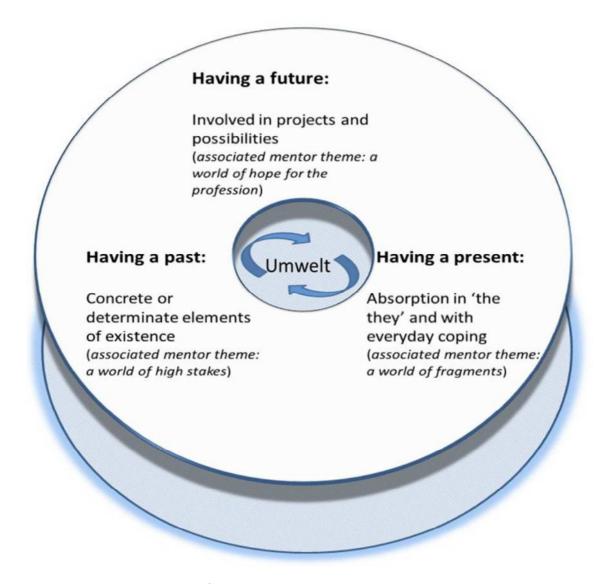


Figure 1: Temporal aspects of Dasein and associated themes in the mentor study

Summary of findings from the mentor study The essence of mentoring comprised the educational use of self in a world of high stakes, hope for the profession, and fragments. Significant concepts and implications identified are summarised below. Professional will Stress Better employer engagement with and support for mentors, recognising the Signals the need for Self-regulation difficulties and complexities of their roles Trust Letting learn Mentor employers and the higher education institutions to engage more Signals the need for Boundary spanning effectively in practice education partnerships Guilt and conscience Training interventions that enable mentors to recognise and work with situations Signals the need for Moral reasoning involving their intuitions Knowledge brokering Visible/invisible Training interventions that prepare mentors learning to work with complex and 'hidden' Signals the need for knowledge in the clinical environment Patients' bodies Hidden emotions

Figure 2: Summary of findings from the mentor study (Author, 2012)

Uneigentlich self (prevailing condition, where work is routine and roles are well established)	Eigentlich self (heightened in new work roles or challenging situations)
Focused on purpose and meanings	Actively making sense
Largely unaware of equipment in use or other 'tools of the trade' such as underpinning knowledge.	Conscious of equipment in use or other 'tools of the trade' such as underpinning knowledge, which may need to be studied
Confident, working fluently and intuitively	Works deliberatively, lacking fluency and confidence
Identifying with a body of workers in similar roles and interchangeable with others	Prone to angst, guilt and conscience
	Sense of personal accountability

Figure 3: Contrasting interactions within the *Umwelt*