## 3. PROMOTING NURSES’ HEALTH AND WELL-BEING

### 3.7 Employers, including nurse leaders, should prioritize and invest in evidence-based mental, physical, behavioral, social, and moral health interventions, including reward programs meaningful to nurses in diverse roles and specialties, to promote nurses’ health, well-being, and resilience within work teams and organizations.

<table>
<thead>
<tr>
<th>1. Key Strategic Stakeholders</th>
<th>2. Top 3-5 Actions for 2021</th>
<th>3. Top 3-5 Actions for 2022</th>
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</table>
| **Nursing**  
Accrediting organizations (tie accreditation to support for nurse health/well-being programs)  
Healthcare  
HR departments; Insurance companies to create parity with mental health services; Mental Health/Counseling Organizations  
Other  
Boards of Organizations/representatives throughout the organizational chart (100% buy-in): Exercise and Fitness Organizations; Marketing – messaging; Spiritual Organizations/Chaplaincy Programs (to address stress); | A. Identify best practice P&P to support work/life balance  
B. Leaders create a safe environment to self report needs for mental health (MH) services – role model/action oriented  
C. Permission for MH Days.  
D. Public Service Announcements (PSAs) re: need for nurses’ Mental Health (MH)/wellness needs (Messaging for health/well-being)  
E. Mindful/ Quiet rooms with release time to use  
F. Normalize need for health promotion/wellness  
G. Investigate reward programs directed toward individual nurses and employers  
H. Identify best practices among organizations across all sectors to create a culture of health/well-being for employees  
I. Promote/Create environment/culture to enhance equity – identify structures of the environment/culture  
J. Redesign nursing work hour expectations (safety/wellness) – are 12 hour shifts safe???  
K. Identify modernized preceptorship models to reduce burden with financial incentives  
L. Org. survey/analysis of what employees want/need: rewards focused on needs/wants of employees | A. Nurse Managed health/wellness organizations  
B. Child/Elder Care  
C. Pre/Post tenure sabbatical (Q2years) – in academe/practice (reward!)  
D. Flexible PTO/banking hours for later use (reward!).  
E. P&P, legislation to address/prevent violence against healthcare professionals (HCPs) – focused throughout organizations (leadership to frontline workers) – including accountability  
F. Create programs to allow nurses to spend more time with family  
G. Create a culture of equity and inclusivity in organizations  
H. Incorporate indicators of well-being into accreditation processes – applied equitably  
I. Develop and implement NAWE (Nurse Adverse Work Events) survey for nurses (Evidence-based Practice (EBP) based on Academic Center for Evidence-Based Practice (ACES))  
J. Develop a Culture of Care/Language of Care (Employers → Employees) (a la Planetree)  
K. Implement modernized preceptor models with financial incentives (Excellent model at Norton Health in KY) |

### 4. Success Indicators

- Lower turnover rates among nurses across settings – est. baselines/target.
- Retention of new nurses across settings - 1, 3, 5 years out.
- Pre/Post implementation surveys to measure improvement change (Nurse Adverse Work Events, NAWE).
- Measure the hardwiring of a culture of employee wellness/health.
- Menu of awards/recognitions based on needs/wants.