# The Etiology and Reduction of Role Overload in Canada's Health Care Sector

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# Executive Summary

This research is the first in-depth investigation of the phenomenon of role overload – having too many responsibilities and too little time in which to attend to them. This study set out to answer the following questions:

- What are the key antecedents of role overload in Canadian hospitals?

- What are the consequences of high levels of role overload to those working in Canadian hospitals and their employers?

- What strategies can health care workers and health care organizations employ to reduce the formation of role overload?

- What coping strategies can health care workers and organizations health care employ to mitigate the negative impacts of role overload on individual and organizational well-being?

The study was undertaken at four Ottawa hospitals. A multi method research approach (focus groups, survey, interviews) was used. The first step of this research initiative involved six focus groups. Separate focus groups were held for each of the following job groups: nurse, union-support staff, non-union support staff, management, physician and para-medical/allied heath. The second step of this research initiative involved surveying a sample of employees working for the four Ottawa hospitals that participated in this study. In total 1,396 employees responded to the survey. The final phase of our research involved in-depth interviews with 150 health care workers. The interview was designed to help increase our understanding of the survey data and to give us a better understanding of the factors that make some people feel overloaded in a particular situation – while others do not.

The survey data determined that high levels of work role overload and total role overload are systemic in Canada's hospitals. The fact that the hospital workers in our sample are twice as likely to report high levels of work role overload (57% high) as report high levels of family role overload (24% high) suggests that work demands are more likely to overwhelm employees than are family demands.

## Antecedents of role overload in Canadian hospitals

- The first research question addressed in this study asked "what are the key antecedents of role overload in Canadian hospitals?" Answers to this question can be taken from all three studies that were part of this initiative.

What causes overload at work? A lack of time (too many commitments, time constraints, and unrealistic work deadlines and work expectations), multiple competing priorities, a lack of help and support due, in many cases, to understaffing and an inability to control the situation.

What causes overload at home? Expectations at work (paid employment takes priority and overtime systemic), a lack of time (too much to do in the time available), competing demands and priorities (conflicting schedules and priorities within the family), a lack of help and support (no help or support at home), life cycle stage (eldercare, children at a difficult age) and an inability to control the situation (family crisis).

## Consequences of high levels of role overload

Data from the survey and interview studies link higher levels of role overload with negative emotions (interview data only), poorer mental health, poorer physical health, increased conflict between work and family and poorer relationships at work and at home.

Data from the survey study connects higher levels of role overload with greater intent to turnover, increased absenteeism, greater use of EAP, lower commitment and lower productivity.

## Coping with role overload

This study found that Canadian hospital workers employ a myriad of strategies to cope with role overload. Both the survey and interview data found that the majority of individuals, when faced with an overload situation, coped by using active coping strategies, taking direct action and getting by on less sleep. More specifically, they work harder they plan ahead, they prioritize, they get practical help from their work team or family, they speak to their boss/partner at home about the situation, they delegate, they reduce the quality of their work, they cut out non essential tasks and they compartmentalize. A minority try and separate themselves emotionally or physically from the situation and focus on keeping their emotions under control. Very few individuals seek to cope by putting their family first (15%). Approximately one in three cope by drinking/using prescription medicine occasionally: 15% use this strategy several times a week or daily. Health care employees also cope by seeking support from others: 66% seek support from friends and family and half half seek support from colleagues at work.

Canadian hospitals provide employees with few supports to help them cope with role overload. Perceived control, "the belief that one has the ability to make a difference in the course or the consequences of some event or experience" is very low within the hospital sector with very few hospital workers reporting high levels of control over their work environment (only 13% high), their pace of work (only 15% high), or over their work day (25% with high perceived flexibility).

Very few employees perceive their hospital to be a supportive employer. Only 24% of the sample report high perceived organizational support (POS) while 33% report low. Fewer than half (45%) of the employees in this sample view their manager as supportive: one in five rate their manager as non-supportive. Very few employees have a positive view of the organizational culture in their hospital. Less than one in four agree that the culture has the positive attributes associated with a values driven, cohesive culture, a culture of appreciation and respect, and a culture of team work, while approximately 30% disagree that these cultures exist in their place of work. One in five agree that the culture is one that forces a choice between work and family (i.e. a culture of work or family) while one in three disagree (i.e. think that the culture is supportive of balance).

**Coping with Role Overload: Prevention**

What helps prevent overload from occurring? This research identified the following set of strategies that employees can use to reduce the incidence of overload:

- Be prepared emotionally.

- Have the necessary knowledge, experience and skills to deal with the situation.

- Formulate a plan with respect to how best to deal with the situation.

- Have a good support team and access to help.

- Set boundaries at work and at home.

- Simplify where ever possible.

There are also a number of things that interview participants said their hospital could do to reduce the incidence of overload including:

- Reduce the number of tasks that need to be done (prioritize).

- Increase the number of employees doing the tasks (increase staff numbers, bring back administrative support).

- Set up more realistic deadlines so that people have more time to complete the work.

- Increase the efficiency of their current workforce (conduct a systematic examination of workflow and work processes).

- Increase the number of supportive managers in the organization (analysis of the survey data determined that supportive management reduces the negative effect of work role overload on total role overload).

**Coping with Role Overload:  Mitigation**

What strategies can health care workers and organizations employ to mitigate the negative impacts of role overload on individual and organizational well-being? The survey component of this research supports the following conclusions:

- Employers who wish to reduce turnover need to reduce the workloads on their staff and give them opportunities to socialize and communicate with their colleagues at work.

- Employees who wish to reduce absenteeism need to reduce workloads and the sense of overload by addressing the conditions that cause overload at work (the culture, understaffing, complexity of work).

- Employees who wish to improve their mental and physical health need to make an effort to get enough sleep, put their family first, seek social support from colleagues at work and friends and reduce their use of alcohol and over the counter medication.

- Employees who wish to improve their work life balance need to try and emotionally distance themselves from the situation causing them stress as well as to make an effort to get enough sleep, put their family first, seek social support from colleagues at work and friends and reduce their use of alcohol and over the counter medication.

A second set of recommendations can be drawn from the interview study which determined that to cope with overload employees need to use two sets of strategies:  one set to help them deal with the demands they face and a second set to helps them cope with the emotional component of overload.   Respondents from the interview study offered the following suggestions to colleagues on how to cope with the emotions associated with being overloaded:

- Engage in stress reducing activates (i.e. exercise).

- Talk to a trusted family member, friend or partner.

- Keep your emotions in check (seek professional counselling, take comfort in spiritual beliefs).

- Put the issue into perspective/reduce the expectations you place on yourself  (stay calm, accept that you cannot do it all)/

- Push back (learn to say no, do not take on extra responsibilities when already overloaded).

Interview respondents also offered a number of practical suggestions on how to deal with the increased demands that are often a precursor to increased overload.  Active coping strategies endorsed by the respondents to this study included:

- Prioritizing: make sure you do the most important tasks first, delegate low priority work to others, say no to things that you do not have a passion for.

- Planning and organizing.

- Asking for/hiring help.

- Making time for partner, family, friends, colleagues and "you."

From the interview study we also get the following set of strategies employers can use to help employees cope with role overload:

- Increase the amount of tangible support available from colleagues/the immediate manager.

- Increase staffing (especially support staff) so there are enough staff to do the work.

- Give employees time to dialogue and learn from each with each other at work.

- Develop priorities and a plan, and stick with them.

- Increase role clarity by clarifying roles and responsibilities and restructuring as necessary.

- Change the culture from one which validates role overload to one that values employees.

This study makes a number of important contributions to research in this area. First, it has developed and validated a model of role overload that informs our understanding of this construct and its etiology. Second, we have identified a number of moderators/mediators of the relationships between overload and individual/organizational health. This information can be used by policy makers and work-place health professionals to design programs to reduce role overload. Third, the data from this study can be used to build the business case for change in this area by helping practitioners determine the costs of overloading employees. Fourth, this study developed valid and reliable measures of the organizational antecedents of role overload within hospitals and the organizational culture within hospitals. These measures can be used by health care organizations to benchmark their organizations, identify key priorities areas with respect to the design of interventions and evaluate the success of different intervention strategies. There are a number of possible interventions suggested by this study but we would recommend that organizations interested in reducing overload look first at immediate manager and cultural change as culture and manager moderate many of the relationships in the model.

Finally, the link between role overload and employee physical and mental health is an important one for those concerned with health and safety as it suggests that supportive policies and work place safety initiatives, on their own, are unlikely to have the desired results on employee health if decision makers implement them into a work environment where there are not enough staff to do the work, the culture forces a choice between work or family, the urgent overtakes the important, where it is unacceptable to say no to more work. The link between overload and organizational effectiveness gives employers a further incentive to address this issue.