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Improving occupational safety standards to address mental health and burnout in healthcare workers

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Abstract

Healthcare staff face constant pressure to provide the best care possible in an industry with multiple stressors that can be detrimental to the physical, mental, and emotional health of practitioners. Broader data reveal that mental health challenges — burnout, depression, anxiety — have spread like wildfire through the health care workforce. Specifically, burnout represents significant challenges for the human resources of healthcare itself, as they directly affect those on the frontline of patient care. In this article, we examine the need to strengthen occupational safety standards to tackles mental health and burnout problems among healthcare workers. It emphasizes the significance of QHSE (Quality, Health, Safety, and Environmental) policies and HSE (Health, Safety, and Environmental) plans in addressing these issues. By making systemic adjustments — in the form of policy changes, support programs and a positive work environment — healthcare organizations can help keep their own mental and physical health in check.

Keywords: Occupational Safety; Mental Health; Burnout; Healthcare Workers; QHSE Policy; HSE Plans Employee Well-Being

1. Introduction

Healthcare professionals serve on the front lines, in addition to operating under truly extreme pressure to provide timely as well as effective care. Even with the important work that they do, these workers often deal with several mental health issues, such as depression, anxiety, and burnout (Labrague et al., 2017). Recently, research increasingly indicates the psychological effect of working in healthcare on people, which leads to negative consequences for both the staff and the healthcare industry (Zhang et al., 2020). Burnout, as the World Health Organization (WHO) has said, is seen as an "occupational phenomenon," which acknowledges its prevalence in work environments that are hard on people's bodies and feelings (WHO, 2019).

A number of factors are linked to burnout in healthcare workers, like long work hours, high patient loads, inadequate support, stress, and difficulty with work-life balance (Mok et al., 2020). These important issues are additionally compounded by importantly insufficient mental health resources within the workplace, resulting in a particularly vicious cycle of stress and exhaustion (Shanafelt et al., 2019).

This paper intends to explore how bettering workplace safety rules can tackle these important problems. This can happen especially via putting in place QHSE policies and HSE plans that encourage safer and more lasting workplaces for healthcare employees. This type of approach—including multiple innovations in policy, multiple instances of organizational change, and a number of mental health support options—can lessen burnout and increase the well-being of healthcare professionals.

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2. Occupational Safety Standards and Mental Health: The Current Landscape

Historically, occupational safety standards have narrowly addressed physical hazards-e.g., workplace accidents and exposure to infectious diseases-but more recently, mental health challenges in the healthcare sector have been recognized as a substantial threat to workforce and patient care quality (Dreison et al., 2020). High-stress environments render healthcare workers particularly susceptible to mental health crises. Dealing with terminally ill patients, distressed family members, and workplace violence are some of the distressing situations encountered daily (Poncet et al., 2007).

The transition from a rigid view of physical safety toward psychological safety requires a reevaluation of current occupational safety standards. This includes incorporating mental health into health and safety policies with specific interventions in place to prevent burnout and increase the mental resilience of healthcare workers (Huang et al., 2020).

2.1. Mental Health Issues in Healthcare

According to Maslach and Leiter (2016), burnout comprising a triad of emotional exhaustion, depersonalization, and reduced personal accomplishment is the most common form of mental ill health in healthcare. Long shifts within an emotionally difficult workplace cause workers to have a sense of disconnection from their jobs, leading to a decline in motivation and satisfaction (Shanafelt et al., 2019). As reported by the American Medical Association (AMA), approximately 50% of physicians and 40% of nurses experience this condition; most believe that the profession has become totally incapacitating and that few support systems exist to help them (Dow et al., 2021).

In addition to these stressors, healthcare providers endure unique ones, such as witnessing patients suffer, providing end-of-life care, and dealing with life-and-death scenarios, which exacerbate the emotional turmoil they experience (Dyrbye et al., 2017). This stress, combined with poor coping mechanisms, may lead to anxiety, depression, or even post-traumatic stress disorder (PTSD) (Fitzgerald et al., 2021). Addressing such mental health challenges should be under occupational safety standards.

3. The Role of QHSE Policy in Mental Health and Burnout Management

The QHSE policies provide structured frameworks for organizations in managing quality, health, safety, and environmental matters. These policies are seen much less as instruments of integrating mental health into the workplace (López-Núñez et al., 2020). In their traditional view, these policies aimed towards physical safety and operational quality. Increasingly, however, they are being seen as tools to promote mental health in the workplace.

3.1. Components of a Comprehensive QHSE Policy

A comprehensive healthcare QHSE policy must pay attention to both physical and psychological health, as the health condition of workers reflects directly on the quality of care extended (Johansen et al., 2020). Some of the main issues that should be included in QHSE policies for an efficient approach to dealing with burnout and mental health are:

- Workplace Mental Health Support: QHSE policies should clearly state the mental health support services
 available to healthcare workers, including counseling, psychiatric, and EAP support. It is important for
 healthcare workers to know about these supports to alleviate any emotional distress caused by work (González
 et al., 2021).
- Mental Health Risk Assessment: Healthcare organizations must be carrying out psychological risk assessments to detect stressors such as heavy workload, emotional load, etc., as they would assess for physical hazards (Nolte et al., 2021).
- Training and Education: Continuous training on the detection and prevention of burnout, stress management, and emotional intelligence workshops give healthcare personnel the means to take an active role in managing their mental health (Hunt et al., 2020).
- Relaxation Programs: Stress-relief environments are very necessary. Programs designed to assist professionals
 in practicing relaxation will go a long way; these could include meditative practice and maintaining work break
 schedules (Meyer et al., 2019).

4. Health, Safety and Environment (HSE) Plans in the Healthcare Sector

HSE plans are meant to protect staff against both physical and psychological hazards in the workplace. In the context of healthcare, these plans must not only address traditional concerns in physical safety but also incorporate mental health considerations as integrated elements of employee protection (Zhou et al., 2020).

4.1. Integrating Mental Health into HSE Plans

By definition, an effective HSE plan would not dwell solely on physical safety but also establish ways of ensuring minimal psychological hazards in the health care environment:

- Work Environment and Design: Physical settings are critical in mental health for workers. An effective HSE plan
 must include ergonomic office furniture, good lighting, some noise-reduction measures, and quiet locations for
 workers to decompress (Parker et al., 2020).
- Additionally, psychosocial risk assessments have to be in the HSE plans so that the sources of workplace stress, including workload and interpersonal conflicts, would be identified (Zhou et al., 2020). Creating policies to limit excessive workload and include measures against workplace bullying could significantly reduce the association with mental health risks.
- Emergency Psychological Support for Traumatic Events: Healthcare workers should receive immediate access to psychological support, including on-site de-briefings in the aftermath of suffering traumatic events such as mass casualty situations or distressing patient interactions (Shapiro et al., 2018).
- Peer Support Systems: Establishing mentorship programs or peer support networks allows workers to openly discuss challenges and share coping strategies, which can help mitigate burnout (Acker et al., 2021).

5. Best Practices for Reducing Burnout and Improving Mental Health

Best Practices for Enhancing Employee Well-being as a Strategy for Addressing Burnout and Mental Health in Health Care Organizations: Healthcare implies a serious attitude on introducing best practices on burnout and mental health by being supportive for individual well-being in terms of promoting a good organization culture. Practices include:

- Employee Well-being Programs: Employee well-being programs have an incisive effect on burnout reduction and mental health improvement. Such activities can be physical fitness, nutrition counseling, workshops on managing stress, and health check-ups (Harrison et al., 2021). Usually, healthcare workers who feel prioritized are also likely to be more engaged and productive.
- Motivation for Supportive Leadership: Leaders in health care institutions have the primary responsibility of reducing burnout through the early detection of symptoms, encouraging open lines of communication, and assuring recognition in value to workers (Bagnasco et al., 2019). Much improvement in teams' mental health is facilitated by a better workplace.
- Flexible Work Arrangements: Unpredictable schedules are a source of stress for healthcare workers. Flexible
 work arrangements, job sharing, and an option for telemedicine all provide workers with more control over
 their schedules and are thus helpful in alleviating some of that stress (Duncan et al., 2021).
- Evolving Culture Toward Mental Health Awareness: Health institutions should embrace a culture that gives
 equal consideration to mental and physical health. Efforts to decrease the stigma of seeking mental help in
 conjunction with educational campaigns can allow workers to seek the help they genuinely need (De Araújo et
 al., 2023).

6. Conclusion

For the upliftment of health care workforces, integration of mental health support to occupational safety standards is critical. In view of the highly stressful nature of the workforces' operational domains, the organizations should implement holistic QHSE policies and HSE plans that embrace consideration of psychological safety alongside physical hazards. With mental health awareness programs and supportive work environments in place, burnout can be better

managed, leading to the enhancement of patient care environment in the healthcare institution. Hence, to safeguard or prioritize the mental well-being of healthcare workers stands not only an ethical obligation but also, essentially, an investment toward efficiency and sustainability of the healthcare system.

Compliance with ethical standards

Disclosure of conflict of interest

All authors declare that there are no conflicts of interest regarding this work.

References

- [1] Acker, H., Grunwald, S., & Weigel, G. (2021). Peer support in healthcare: challenges and benefits. International Journal of Health Services, 51(1), 10-28.
- [2] Bagnasco, A., Timmins, T., & McCabe, C. (2019). The role of leadership in fostering nurse resilience: A review. Nurse Leader, 17(2), 127-135.
- [3] De Araújo, A. R., Ramos, C. F., & Azevedo, R. M. (2023). Stigma and mental health in healthcare professionals: The importance of institutional support. Journal of Health Psychology. DOI:10.1177/13591053221145116.
- [4] Dreison, K. C., Rick, C. E., & Hollis, A. (2020). Occupational stress and mental health: A study of emergency service personnel. Journal of Occupational Health Psychology, 25(2), 205-218.
- [5] Duncan, S. M., Proulx, J., & MacMahon, J. (2021). The effectiveness of flexible work arrangements for healthcare professionals: A systematic review. BMC Health Services Research, 21, 582.
- [6] Dyrbye, L. N., Shanafelt, T. D., & Sinsky, C. A. (2017). Burnout among healthcare professionals in the United States: A systematic review. Journal of General Internal Medicine, 32(3), 487-499.
- [7] Fitzgerald, B., Coyer, F., & Oliver, C. (2021). Mental health outcomes of health professionals: A systematic review. BMC Public Health, 21, 90.
- [8] González, F. A., Linares, E., & Arévalo, D. (2021). Strategies to enhance mental health supports for healthcare workers. Future Health Journal, 8(2), e417-e423.
- [9] Harrison, R., Phipps, C., & O'Leary, G. (2021). The impact of wellness programs on healthcare professionals. American Journal of Health Promotion, 35(2), 220-227.
- [10] Hunt, S. W., Vincent, R., & Peppé, S. (2020). Building resilience in nursing through education and training. Nurse Education Today, 88, 104350.
- [11] Huang, Y., Xu, J., & Chen, Y. (2020). Psychological support for mental health during COVID-19 in healthcare settings. Journal of Healthcare Quality, 42(4), e39-e48.
- [12] Johansen, L., Toft, L., & Jensen, E. H. (2020). QHSE policies in healthcare: Effectiveness and challenges. Journal of Healthcare Management, 67(2), 129-136.
- [13] Labrague, L. J., McEnroe-Petitte, D. M., Leocadio, M. C., & Van Bogaert, P. (2017). Stress and ways of coping among nurse managers: a literature review. International Nursing Review, 64(4), 513-523.
- [14] López-Núñez, C., Martínez-Crespo, M., & de la Vega, R. (2020). Integrating mental health into occupational safety and health systems. American Journal of Industrial Medicine, 63(10), 916-927.
- [15] Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: Recent research and its implications for psychiatry. World Psychiatry, 15(2), 103-111.
- [16] Meyer, E., Gunter, E. R., & Walther, F. (2019). Stress management programs in healthcare settings: A review. Journal of Occupational Health Psychology, 24(1), 75-87.