Policy statement on minimal standards for safe working conditions in Emergency Medicine Roberta Petrino, Luis Garcia Castrillo, Basak Yilmaz, Christoph Dodt, Eeva Tuunainen, Abdo Khoury and the Emergency Medicine Day working group

The Emergency Department (ED) is the place where an unpredictable number of patients with any type of urgent and developing clinical condition or injury come to be admitted, stabilised and diagnosed and where the next destination of the patient is decided.

By its very nature it is difficult to predict the actual workload of the ED. This may vary widely from time to time, according to the movement of people, unexpected events, disasters, and other variables. For these reasons it is necessary to be prepared and organised at sufficient levels and in an adequate way to be able to cope with the daily workload and to respond safely to exceptional demands.

This is what happened in 2020 with the Covid-19 pandemic, when an exceptional two year-long workload fell on the shoulders of EM professionals. Most of the Emergency Medical systems were not prepared at the beginning and were insufficiently supported during the Covid crisis.

For the 2022 Emergency Medicine Day campaign, we published the results of the survey on level of burnout among EM professionals<sup>1,2</sup>. This prompted great public interest, and has underlined the fact that working conditions and professional health deserve more consideration by healthcare administrators, as well as by the scientific community

The survey amassed 1925 responses, 84% of which were from physicians, and showed that there are signs of burnout in 62% of all responders, with about 31% with burnout in two of the three domains of the Abbreviate Maslach Inventory. Females, nurses and less experienced professionals had a significantly higher level of burnout. The responders reported frequent understaffing at work, and this was in turn related to a higher level of burnout and the desire to change jobs or workplace. The majority of those who participated reported having no access to support programmes to cope with these difficulties.

The results of the survey were discussed among professionals during a webinar presented for EM Day on 27 May 2022, and many suggestions and comments were received. The Emergency Medicine Day group has incorporated the campaign outcomes in the policy statement that follows.

## **Each Emergency Department should have:**

- Adequate numbers of staff. The number of doctors, nurses and paramedics should be calculated on the basis of the average number of visits per year and the complexity of the ED
- Adequate competence of staff. In any country a specialty basic training in emergency medicine should be provided to all doctors working in the ED, and specific training in emergency and critical care must be granted for nurses and paramedics.
- **Adequate respect from other specialists**. The job of EM professional is difficult and very demanding. Often this professionalism is not sufficiently recognised and respected and thus the sense of frustration is greatly increased.
- **Adequate on-call system** and organisational plan, to be activated promptly and safely in case of a mass casualty event.
- **Adequate number of working hours**. This includes shift duration, flexibility about parttime, dedicated time for training and research
- **Adequate structure**. The ED should have adequate space related to patient numbers and the organisation of work, and be respectful of privacy for patients and professionals. It should also have space for isolation of patients. It should be suitable for disabled staff members, and provide security for patients and professionals.
- Adequate equipment. The ED should be equipped with furniture, medical devices, drugs, medical supplies, and protective personal equipment to enable safe working in an ethical manner for patients and professionals
- Adequate supporting infrastructures. Functional and customisable IT support is necessary to reduce administrative and bureaucratic burden.
- **Adequate space for rest** and refreshment during shifts, in a calm and quiet place, with clean and dedicated toilets.
- Adequate facilities for parents with babies. A reasonable time before leaving maternity, protected time for breast feeding, nurseries and kindergartens are necessary
- **Adequate hospital policies** that are respectful and do not discriminate by race, religion, sex, allowing everyone the same chances of career and professional growth.
- Adequate psychological and emotional support. Emergency medicine is a stressful job, where professionals are exposed to sudden deaths, large numbers of patients, catastrophic events and pandemics. Prompt and competent support must be available to help staff coping with critical experiences.

We hope that policymakers and healthcare administrators will heed our demands; it would be highly irresponsible to ignore the alarming situation that exists at present (3). If they do not, it is very likely that many burned-out EM professionals will leave their job, with catastrophic consequences for patients, particularly should there be a further pandemic.

## References

- 1. Petrino, Roberta<sup>a</sup>; Riesgo, Luis Garcia-Castrillo<sup>b</sup>; Yilmaz, Basak<sup>c</sup> Burnout in emergency medicine professionals after 2 years of the COVID-19 pandemic: a threat to the healthcare system?, European Journal of Emergency Medicine: May 27, 2022 Volume Issue 10.1097/MEJ.00000000000000952 doi: 10.1097/MEJ.00000000000000952
- 2. Khoury, Abdo<sup>a,b</sup> Burnout syndrome in emergency medicine: it's time to take action, European Journal of Emergency Medicine: May 27, 2022 Volume Issue 10.1097/MEJ.0000000000000949 doi: 10.1097/MEJ.0000000000000949
- 3. Khoury, Abdo The day after Eur J Emerg Med. 2020 Dec;27(6):392-393