

Emotional Labor: The Overlooked Human Toll of Urgent Care Service

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The catchphrase “service with a smile” has long been considered the “mantra” of retail business, and for good reason. Consumers, with their myriad spending options, demand their hard-earned dollars be rewarded with a friendly smile, undivided attention, and genuine interest. Urgent care centers—with their extended hours, walk-in availability, high-visibility locations, and patient experience emphasis—are a “retail” delivery channel for health care that survives so long as it can attract patients from other health care options in the community. Repeat business and positive word-of-mouth are the lifeblood of urgent care, which makes delivering an outstanding customer experience absolutely critical.

To that end, a center’s care team will strive to make each patient visit feel valued, and handled with warmth and compassion. But as the urgent care business model calls for moving many patients through a center quickly and efficiently, this goal can become exceedingly difficult to accomplish. Providers, moving at a brisk pace and shuttling patients in and out, may struggle to consistently present the “happy face” desired for each patient visit. Further, if the provider’s professional, “public” face doesn’t reflect their true emotional state, they’re then said to be engaging in “emotional labor”—and emotional labor, as numerous studies show, is not without considerable economic and personal cost.

Emotional Labor

The term *emotional labor* was actually coined in 1983 by the pioneering sociologist Arlie Russell Hochschild in her groundbreaking work, *The Managed Heart: The Commercialization of Human Feeling*. Emotional labor can be loosely defined as “emotion regulation in order to create a publicly observable facial display desirable in the workplace.” That is to say, a pleasant and welcoming appearance/attitude to the customers of a business establishment. Emotional labor is highly valued by employers due to its importance in creating a positive service experience for customers, which in turn helps foster brand loyalty and repeat business.

Emotional labor, in all its varied forms and applications, is essentially performed in one of two ways: *surface acting* and *deep acting*.

- **Surface acting** – Simulating an emotional state incongruent with one’s true, hidden feelings. An example of surface acting in an urgent care setting might be a physician, who in seeing his 20th patient of the afternoon, pretends to be cheerful and relaxed when he actually feels aggravated and exhausted. Surface acting, if engaged in for prolonged periods, can lead to employee burnout.
- **Deep acting** – Attempting to create within oneself the emotional state that one wishes to publicly display, usually through some cognitive process. If a nurse briefly gazes at a desktop portrait of her children in order to conjure feelings of love and compassion before seeing her next patient, this is an instance of deep acting.

A third distinction, *genuine acting*, is actually a misnomer since this term indicates that the outwardly expressed emotion is identical to the inner feeling. Hence, there is no emotional “labor” involved. Interestingly, genuine acting is considered a passive form of deep acting.

Understanding Employee Burnout

The inevitable end result of continued and prolonged surface acting, absent effective coping strategies, is burnout. According to clinical sociologists, workplace burnout related to emotional labor has one or more of the following characteristics:

- Exhaustion (mental and physical)
- General malaise

- Sense of distress
- Reduced effectiveness
- Decreased motivation
- Negative attitude

Basically, burned out employees have buckled under the weight of continually suppressing their own emotions in order to present an appropriate and beneficial public face. They’ve become depressed, cynical, and dread performing their job duties. And naturally, their performance suffers.

Ironically, those employees who are most committed to fulfilling the emotional role required of them are the ones at the highest risk of burnout. It’s not that these providers don’t care about their jobs and the patients they serve; To the contrary, it’s their heartfelt desire to treat every patient kindly and compassionately that leads to their immense emotional investment, which unfortunately carries with it the threat of burnout.

Burnout, especially for front-line workers who deal directly with the public, is a serious workplace issue that has very real ramifications for both employer and employee. In an urgent care setting for instance, a center staffed with care team members suffering from burnout will inadvertently provide a substandard patient experience. It’s the very nature of burnout to wear down and break through an artificially pleasant façade, and result in care team members openly expressing aloofness, cynicism, and curtness—in front of patients no less. Of course, patients will be unhappy with this level of service and won’t return, opting for health care services elsewhere.

And the negative effects don’t end there. Workplace burnout also results in:

- High employee turnover, from both staff quitting and terminations due to poor job performance
- Absenteeism, resulting in an understaffed center and longer patient wait times
- Poor quality of service to due to low employee morale

Coping Strategies for Mitigating Burnout

The good news for front-line health care staff is that burnout is not inevitable, nor is it a one-size-fits-all proposition. In fact, workplace sociologists have identified many effective coping strategies and subsequently classified them into two basic categories: emotion-focused coping, and problem-focused coping.

Emotion-focused – These strategies can be described as a sort of “self-therapy” where the employee deals directly with or reconciles his/her own emotional states to minimize burnout. Examples of emotion-focused coping includes:

- Vigorous physical activity to re-energize and clear one’s head
- Self-relaxation such as a hot bath, reading uplifting materials, or pampering oneself in some other way
- Reappraising workplace events through an altruistic, or service-based perspective. Particularly in health care, an employee’s understanding of the value their service provides goes a long way towards increasing job satisfaction

Problem-focused – Of particular interest to employers is problem-focused coping strategies, as they represent supportive workplace policies, procedures, and training. Several strategies, and their practical implementation are outlined in the following table:

Table 1: Front-line staff support

Strategy	Implementation
Management Support	Creating an open-door policy that allows care team staff to communicate problems and concerns. Additionally, it allows staff to vent their frustrations to a supportive and encouraging care team.
Co-worker Support	Creation of “buddy systems” where care team members can pair up with a co-worker, which reduces the instances of emotional labor performed in isolation
Training	Training to reduce ego involvement in patient interactions, sensitivity training, conflict resolution techniques, and communication skills

Job Design	Time allotted for back office functions and administrative work, reducing the total time the care team member has to engage in direct emotional labor with patients
Team Functions	Teams meetings to promote problem solving and allow vent sessions. "Time-outs" when appropriate.

Conclusion

Emotional labor is a very real component of front-line patient service. As valid and essential as its physical and mental counterparts, emotion management is a true skill that requires cultivating and nurturing to create the highest-quality patient experience. An urgent care center's management team must realize that oftentimes, care team members are indeed "on stage" and "performing" many hours a day, and these "performances" do not come without a human cost. Consistently delivering a pleasant patient experience will often mean denying one's own moods and feelings, and left unchecked this emotional labor can lead to employee burnout.

Burnout and all its negative consequences, however, can be minimized (or even eliminated) by implementing policies and procedures that foster a positive, supporting, and encouraging employee environment. In summary, front-line patient work doesn't have to be unpleasant and tedious; In fact, if it's approached with the knowledge, skill, and respect it requires, providing patients with quality, heartfelt health care services can be its own reward.