

MAY 2026

EDITION #5

Forge

**SHAPING LEADERSHIP
CRAFTING IMPACT**



WHEN LEADERSHIP HURTS.

**THE WEIGHT OF LEADERSHIP FATIGUE
AND RESPONSIBILITY**

Editors Notes

SHAPING LEADERSHIP.
CRAFTING IMPACT.

ARTICLES THAT SERVE AS A BLUEPRINT FOR BUSINESS LEADERS SEEKING TO BUILD RESILIENT ORGANIZATIONS CAPABLE OF THRIVING IN DYNAMIC ENVIRONMENTS.



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Leadership, Engagement, Learning,
Recovery.



Danielle Lord, PhD | Principal
Archetype Learning Solutions

When leadership hurts, it rarely starts with malice. It usually starts with good people carrying more than a human nervous system can hold, inside systems that quietly reward self-erasure and constant availability. This, on top of everything else we carry in our personal lives.

We ask leaders to be strategist, shock absorber, therapist, disciplinarian, storyteller, and shield, all at once, often without training, support, or a place to put their own pain. Over time, what once felt like a calling can start to feel like a chronic ache: you're never "off," someone is always disappointed, and the gap between what you know is right and what the system will tolerate stretches wider. That ache is not just burnout; it's grief, moral injury, and loneliness in a role that still expects you to "set the tone."

The hidden cost of holding everyone else

In many organizations, the unspoken rule is that leaders don't get to hurt out loud. Your distress shows up sideways: irritability, decision fatigue, perfectionism, over-functioning, or emotional distance. You absorb your team's frustration, your own values-conflicts, the pressure from above, and there is nowhere for it to go. That is how cumulative workplace distress builds in leaders: not one dramatic event, but thousands of small moments where you swallow what you feel so everyone else can keep moving. Its why our research into physician leadership fatigue generated the #distressednotdisruptive!

When leaders' pain becomes everyone's problem

Unattended leadership pain doesn't stay contained. It leaks. It shows up as sharper emails, disappearing 1:1s, performative positivity, "just get it done" when what's really needed is "tell me what this is costing you." It can turn into policies that protect the organization from discomfort rather than protecting people from harm. When leadership hurts and has no place to metabolize that hurt, the system begins to organize around avoidance instead of around truth and care.

What leaders need (but rarely ask for)

Leaders don't need one more webinar on "being resilient." They need spaces where it is safe to say, "This role hurts," without being labeled weak or ungrateful. They need peers who can sit with the complexity of loving their people and still sometimes wanting to walk away. They need structures that acknowledge their humanity: realistic spans of control, permission to have boundaries, and support to repair when their own hurt has spilled over onto others.

An invitation for this month's Forge

As you move through this month's edition, I invite you to notice where leadership is hurting in you. Not to shame it, not to push it down, but to treat it as data: evidence that something in the role, the system, or the story you've been handed is too heavy to carry alone. Our work at Archetype is not to make you "tougher." It is to build ecosystems where leaders can be fully human, and where the unavoidable pain of leadership is held, witnessed, and transformed, instead of quietly passed down the line.



I've had enough: It shouldn't hurt to go to work.

Takes on a whole new meaning in the context of leadership fatigue!

Airs monthly beginning in June - first Friday of every month | 9:00am PST



**IT SHOULDN'T
HURT
TO GO TO WORK**

DR. DANIELLE LORD

WHY IS WORK A PAINFUL EXPERIENCE?

USA GLOBAL
TV & RADIO

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Leadership: its not a title, a role, or a position. Its a behavior. At Archetype Learning Solutions we define it as an “influence relationship among leaders and followers, that is active, reciprocal, and non-coercive.”

Our behaviors, regardless of our role or title, shapes how we engage with others. In light of all we face, how will you shape the weather?

Forge Magazine,
part of Archetype
Learning Solutions

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Rx: happy brain, happy employee. A simple cure for dis-engagement.

HelixMD: where physician leadership development meets recovery

Just last week, I was talking with a retired physician turned coach who literally teared up when I was telling him about our research, the same research that led to HelixMD. The stress that many physicians are experiencing is overwhelming, deeply personal, and contributing to tremendous chaos in the industry.

HelixMD is research-based physician leadership development and recovery program from leadership fatigue. It is more than supporting physicians with new concepts, tools, and language. It provides a space for physicians to re-learn how to navigate a complex system that is often very different than what they learned as part of their medical education. And re-learning takes time.

The worst things I've heard during the research and after:

1. "what's your exit strategy" This quote was shared by one of our research participants who told us how one physician leader asked her non-chalantly - how are you planning to get out of this mess?

This simple question is a powerful indicator that physicians are not getting the support that they need to function at their best and that many others are potentially asking the same question.

While this statement alone was enough to cause pause between myself and fellow researcher, Christopher Kodama, MD it's an indicator of something much bigger: Leadership Hurts. Sadly, this pain is felt beyond the walls of healthcare, it's felt in large, small, and not for profit organizations around the world. While this statement alone was telling, worse yet was a statement from an outside agency reviewing our research.

"The systemic cumulative workplace distress is at the root of the moral injury and burnout that we all experience in healthcare. I so appreciated you creating that all-inclusive term. It conveys how moral injuries occur incrementally and have a cumulative effect on our nervous system."

Kevin Taylor, MD

HelixMD: where physician leadership development meets recovery

Since our research was published, we've heard from others in the industry -

2. "thousands of physicians have transitioned into leadership roles and they're just fine."

While two things can be true, have they asked themselves the question: what does success look like? Is it the title? The fact that they've been able to survive in the role for X number of years? That physicians have silently suffered?

Surveys are clean. They don't cry, they don't shake, they don't ask you if they're a failure for wanting out. Lived experience is messy. What it sounds like:

- "I'm succeeding on paper, but so angry."
- "its impacted my marriage, my family, my life"
- "I've started hoping for a minor health crisis just to get a break."
- "I'm tired of being treated as the token physician leader"

If your metrics say your physician leadership strategy is "working," but your rooms are full of leaders quietly breaking down between meetings, believe the room, not the dashboard. Until we center the raw, unfiltered stories of physician leaders themselves, we will keep building programs that look beautiful in a slide deck and completely miss the point in real life.

What makes HelixMD different? While we provide leadership development specifically to physicians, we also help to heal and recovery from the Cumulative Workplace Distress.

HelixMD is an evidence based physician leader recovery program. The framework and resulting leadership fatigue are the result of three co-morbidities: lack of development, laissez-faire support, and loss of identity.

The program: HelixMD, addresses all three co-morbidities, as stand alone or in combination to help physicians regain their identity.

when leading hurts:

Naming leadership fatigue

Our feature Archetype Learning Solutions article.

Stop Calling It Burnout: Understanding Cumulative Workplace Distress

For years, organizations have talked about burnout as if it were a fleeting, individual problem, something that happens when people can't handle stress, take too few breaks, or forget to "practice self-care." But it's time to stop calling it burnout.

What we are witnessing is not burnout; it's years of Cumulative Workplace Distress (CWD), a term described in the research of Lord, Kodama, and Granzotti (2025) to represent the slow, repeated, and deeply personal form of trauma that unfolds through prolonged exposure to harmful workplace conditions. CWD is not a momentary loss of resilience; it's a systemic outcome of how modern organizations are designed and led.

From Scientific Management to Systemic Damage

The modern workplace is still largely governed by principles of scientific management, a framework developed over a century ago to maximize efficiency, standardization, and control. These ideas made sense in the industrial age but have quietly eroded human wellbeing in today's knowledge- and service-based world.

Systems built on productivity metrics and rigid hierarchies have created an environment where people are treated as components rather than contributors. The result is disengagement, high turnover, and widespread emotional exhaustion that leaders often mistake for personal weakness rather than organizational failure.

As one executive once told me when I directed leadership development for a large healthcare system, "Burnout in our clinical leaders isn't my problem." That statement, though disheartening, perfectly captures the deeper issue: organizational trauma is often denied, minimized, or outsourced to individual "resilience" training rather than treated as the shared responsibility it is.



What we label burnout is often the visible scar of a deeper injury: years of cumulative workplace distress.

D. Lord, PhD, 2026



when leading hurts:

Naming leadership fatigue

The Nature of Level II Trauma

CWD reflects what psychologists call Level II trauma. Unlike acute, event-based trauma, what we think of after a fire, accident, or episode of violence, Level II trauma is slow, insidious, and cumulative. It emerges through repeated exposure to environments that violate psychological safety, moral integrity, and professional identity.

The workplace becomes a site not of growth or purpose, but of chronic emotional injury. Over time, this manifests as:

- Compassion fatigue and moral injury
- Identity erosion (the loss of self through surface-level acting)
- Heightened cynicism, disengagement, and detachment
- Increased health problems and absenteeism

The tragedy is that these outcomes are preventable. They arise from systems that prize control over curiosity and metrics over meaning.

When Systems Fail to See the Human

CWD doesn't happen in isolation; it's cultivated by systemic blind spots that many organizations unintentionally reinforce. We see it in:

- Bad management practices that reward compliance over connection.
- Lack of leadership development that neglects the human side of leading.
- A fundamental misunderstanding of leadership itself, treating leaders as task managers instead of relational stewards.
- Cultural inertia, believing that the workplace still functions as it did in 1950.
- Pop culture distortions that glorify overwork and "grind" mentalities.

When systems fail to adapt, they perpetuate harm. Employees learn to hide distress, leaders normalize dysfunction, and organizations quietly hemorrhage their most talented people. The emotional toll is not just burnout; it's systemic trauma masquerading as individual weakness.

Rethinking Leadership and Accountability

If we are to address Cumulative Workplace Distress, we must reimagine leadership, not as positional authority, but as the practice of creating conditions where humans can thrive.

That means:

- Shifting from performance management to relationship stewardship.
- Redefining resilience as reciprocal support, not personal endurance.
- Integrating trauma-informed leadership frameworks into all levels of development.
- Holding organizations accountable for the psychological safety of their people.

when leading hurts:

Naming leadership fatigue

We already understand the J-curve of change: performance drops before it rises, and if we don't support people in the dip, the initiative fails. Cumulative Workplace Distress is the human side of that same curve, a predictable bottoming-out of emotional capacity when we keep asking leaders to absorb more without redesigning the system around them. The question is no longer whether burnout exists; it's whether we are willing to treat that bottom of the J as our responsibility. If we can redesign workflows, we can redesign support. If we can measure productivity, we can measure distress. The real call to action is simple: stop pathologizing the people in the dip, and start rebuilding the system so they don't have to climb out alone. CWD reminds us that human distress at work is not a side effect; it's a vital signal that the system itself is unwell. The solution begins not with another wellness initiative, but with rethinking the very architecture of work.

When leaders are constantly bracing
for impact, they don't become less
caring, they become less able to show
the care they still feel

D. Lord, PhD

Author's note:

Cumulative Workplace Distress (CWD) is an emerging framework developed by Lord, Kodama, and Granzotti (2025) to describe the prolonged exposure to psychologically injurious workplace conditions that lead to chronic emotional trauma. Their research reframes "burnout" as a systemic and relational failure rather than an individual deficit.



COMPASSION

Spring is my favorite season, and here we are, right in the heart of it.

It's been beautiful so far. I've been spending time in the yard, in the garden, and in my greenhouse, my little slice of heaven. It's become a space where I can slow down, breathe, and reconnect. A place where I find *hygge*, a sense of warmth, ease, and quiet joy.

This month's theme is:

Renew & Reconnect — A Season of Coming Home to Yourself.

For me, that means finding time in my busy week to rest, engaging in activities that bring me joy, and reconnecting to my purpose and intention.

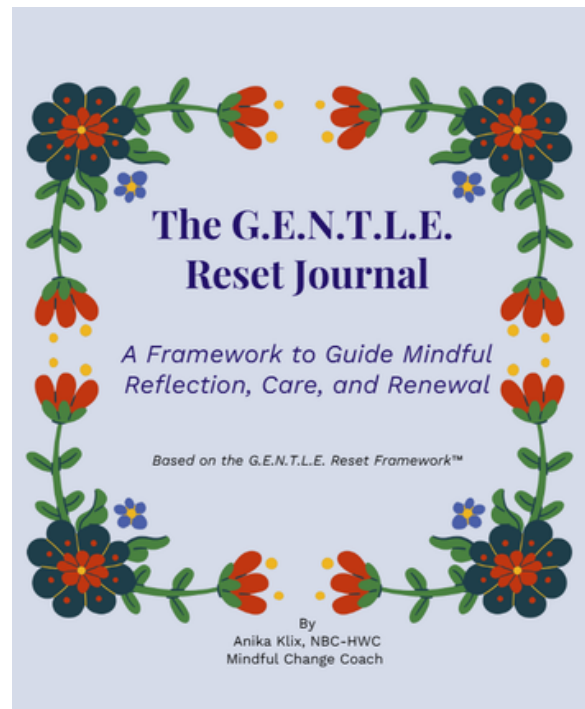
Take a few moments to reflect on what renewing and reconnecting means to you.

Mindfully yours,

~Anika



Our COMPASS Mindfulness coach: Anika Kilx



Connect with Anika:
<https://www.halsacoaching.com/book-online>

HelixMD



Being a physician was a life long dream, you could say its in your DNA. At the intersection of clinician and leader is HelixMD. Preparing future physicians for leadership roles, helping existing physician leaders navigate leadership fatigue. Get back to your roots with our strategies to help you transition from the clinic to the c-suite.

Physician is in your DNA: don't let leadership fatigue derail your career evolution

HelixMD was built on a simple observation: most physician leaders are overextended, under-supported, and expected to “power through” exhaustion in roles they were never truly prepared for. Behind the titles and metrics are people who care deeply about their teams and patients, and who are quietly running on fumes. HelixMD coaches step into that gap.

Our coaching bench brings together two groups:

- Physician coaches who know, from the inside, what it means to carry a panel, a service line, and a leadership portfolio at the same time.
- Leadership Recovery coaches who have spent years walking alongside physicians and health-care leaders through change, conflict, and organizational distress.

They are not here to “fix” you. They are here to listen, to name patterns you have been living inside for years, and to help you experiment with different ways of leading that are more sustainable, for you and for the people who depend on you.

According to Gay and Katie Hendrick from the Hendricks Institute, they state that “All drama is caused by unaligned commitments and unclear and unkept agreements.” This is confirmed in our findings on the impact of **lack of clarity** and **role ambiguity**. This has been at the heart of my own academic research for the past 20 years. Physicians are no less impacted. Sadly, they are expected to work through the pain as part of the hidden curricula medical education. Even worse, this lack of clarity is one of the greatest challenges physicians face when they enter into leadership roles. It is exactly this lack of development, laissez-faire support, and loss of identity that are one of the three physician leadership fatigue co-morbidities. Its a pattern so predictable, we built HelixMD to disrupt it.

We built HelixMD because this pattern is so predictable, and its fixable.

Our next cohort for physician leaders is forming now. If you're ready to lead without abandoning yourself, reply to this Forge or email me for cohort dates and details.

When Leadership Hurts

*For the past two years, we've seen the Gallup reports from the Global Report on Engagement. Once again, manager scores have fallen. Contributor Annie Frisbie provides a compelling look at the small things that contribute to leadership fatigue...
bite by bite by bite.*

Leadership hurts when people love your strength but forget it is not endless. They love that you can figure it out, hold it together, make the call, clean up the mess, remember the details, take the pressure, absorb the emotion, and still show up composed. Until one day, your strength becomes their expectation. And expectation is a dangerous thing. Because once people are used to you carrying heavy things, they stop asking if it is heavy.

Leadership hurts when you are trusted with responsibility but not always met with tenderness.

When people want your wisdom, but not your weariness. Your solutions, but not your limits. Your excellence, but not your humanity. It hurts when you are the one everyone looks to in the hard moment, but few people look closely enough to see what the hard moment is doing to you. At work. At home. In family. In ministry. In friendship. In community. In rooms where you never applied for the title, but somehow became the one everyone depends on.

Leadership is not always a position.

Sometimes it is being the oldest daughter. The one who translates the doctor's words. The one who remembers birthdays. The one who checks on everyone after the funeral. The one who sends the money. The one who keeps the family talking. The one who apologizes first so the room can breathe again.

Sometimes leadership is being the manager who protects the team from chaos they will never know about.

Sometimes it is being the mother who cries in the bathroom, then comes out and asks, "What do you want for dinner?"

Sometimes it is being the friend who holds everyone else's heartbreak while yours sits quietly in the corner, untouched.

Sometimes it is being the person who has to make the hard decision, then watch people judge the decision without knowing the full weight of the facts.

When Leadership Hurts

That is another way leadership hurts: when you are often misunderstood by people who have the luxury of not knowing everything. They get to have opinions without consequences. You have to carry the consequence. They get to say, “I would have handled it differently.” You had to handle it with the information available, the clock running, the budget tight, the emotions high, the stakes real, and everyone watching.

Leadership hurts when you cannot explain everything.

When confidentiality ties your hands. When maturity keeps your mouth closed. When protecting someone else’s dignity makes you look like the villain. When you know the whole story, but only get to respond with half a sentence. So you absorb the misunderstanding. You let people think what they think. You carry the truth quietly.

And that silence has a cost.

Leadership hurts when correction comes without curiosity.

When someone questions one thing you missed without seeing the hundred things you caught. The appointment made. The crisis prevented. The relationship repaired. The child comforted. The plan rebuilt. The room held. The mistake intercepted before it ever became visible. People often do not notice what did not fall apart because you were standing underneath it. But they notice the one thing that slipped. And yes, real leaders own their gaps. They apologize. They adjust. They communicate better, they learn, but accountability without grace can become a wound. Because there is a difference between being corrected and being reduced to the thing you missed.

Leadership hurts when you become useful but unseen.

When people praise what you produce, but never ask what it cost. When they celebrate the outcome, but ignore the exhaustion underneath it. When they call you “strong” in a way that gives them permission not to help. Strong people need support too. The one who always shows up still needs someone to show up for them. The one who leads the meeting still needs a safe place to unravel. The one who gives the speech still needs someone to hear the sentence behind the sentence:

“I am tired.”

“I am carrying a lot.”

“I need grace.”

“I do not want to become hard.”

When Leadership Hurts

“Strong people need support too.”

Leadership hurts when it teaches you to distrust your own needs.

When you start apologizing for being tired, for needing time, clarity, and help. For being affected by things that would affect any human being. You begin to wonder if needing care makes you less capable. It does not, it makes you honest.

The deepest ache of leadership is not always the workload. Sometimes it is the loneliness of being surrounded by people who need you, but not always known by people who see you.

It is being respected but not held. Needed but not nurtured. Admired but not protected. Called capable, but rarely asked if you are okay. And still, leaders keep going.

Not because it does not hurt, but because the work matters. It all matters:

- The family matters.
- The team matters.
- The mission matters.
- The people matter.
- The future matters.

But leaders are people too. Not machines. Not emotional shock absorbers. Not endless wells. Not stone. People. With nervous systems. With full lives. With private grief. With bills. With children. With aging parents. With marriages. With disappointments. With dreams they have delayed because everyone else’s needs came first.

So maybe the more honest question is not, “Why did you miss that?” Maybe sometimes the better question is: “What are you carrying that I have not seen?” Because leadership does not only hurt when people attack you. Sometimes it hurts when good people forget to see you.

And the healing does not always require grand gestures. Sometimes it starts with grace. A softer question. A little context. A hand on the shoulder. A simple, “I know you are carrying a lot. Thank you.”

Because the people holding everything together should not have to break before anyone notices they are human.

Annie Frisbie is the Chief Philanthropy Officer for UWPC. She is responsible for ensuring that her team shows up in the community to care for others, often those that are overlooked, all while ensuring her own team is well cared for.



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Coming soon to the Archetype Learning Solutions Eco-system of organizational solutions

Exciting new signature solution: Ties not tasks

The Archetype Human-AI interaction leadership series and competency framework-

There is no shortage of AI offers in the feed right now.

One set of ads promises to turn professionals into certified AI consultants: high-paid experts who help organizations “position before the wave,” unlock hidden AI opportunities, and command premium fees, with no coding required.

Another crop of posts pitches AI employees, digital colleagues who take over email, content, lead generation, and other repetitive work so founders can “focus on what really matters.”

Both trends are tapping into something real. Organizations do need help making sense of AI, and most leaders are desperate to get out from under endless administrative tasks. But if all that changes is who configures the tools and how many “AI teammates” you can hire, a deeper problem remains untouched.

Global employee engagement has fallen to around 20%, with managers’ engagement dropping sharply in just a few years. The result is a workforce that is restless, tired, and increasingly worried about what AI will do to their jobs, meaning, and mental health. In that context, adding more automation without redesigning work is like pouring jet fuel into an already shaky engine. The missing piece is not another AI certification or another AI agent. The missing piece is Human + AI leadership.

What the current offers get right

The AI consultant programs are right about one thing: organizations are hungry for guidance. Most leaders are not asking, “Can AI do something here?” They’re asking, “Which of the hundred possible things should we actually do, and how do we not break our culture in the process?” The AI employee platforms are also right: a huge portion of human time is being spent on work that AI can credibly absorb. Estimates suggest generative AI could automate 60–70% of time in some roles, especially those heavy in information processing and communication. For leaders who live in their inboxes and dashboards, the idea of AI colleagues who “take the tasks” is understandably tempting. But neither of these movements answers the question that Gallup’s 2026 data puts in front of us: if engagement is falling and AI worry is rising, what will we do with the time AI gives back?

Coming soon to the Archetype Learning Solutions Eco-system of organizational solutions

Exciting new signature solution: Ties not tasks

Automate tasks, not ties is a more useful starting point is a simple design principle: Automate the tasks, not the ties. Tasks are the parts of work that do not require human presence: drafting, summarizing, routing, filling cells, formatting slides. Ties are the relationships and moments that do: listening, sense-making, negotiation, repair, and recognition.

AI consultant certifications and AI employees both promise to help with the first half of this equation. What is largely missing from the market is serious help with the second. Human + AI leadership work begins by asking different questions:

- Where, in this organization, are relationships already fragile, between managers and teams, clinicians and patients, leaders and frontline staff?
- How might AI worsen that fragility if it is used only to increase speed and volume?
- How can AI be used to buy back human attention for the moments that actually keep people engaged and willing to stay?

Instead of sending leaders to generic AI certification bootcamps, or quietly dropping AI agents into broken workflows, Human + AI leadership design focuses on:

- Trauma-aware practice: recognizing cumulative distress, moral injury, and burnout, and ensuring AI does not deepen it.
- Emotional intelligence in the loop: using AI to prepare for hard conversations, not to avoid them; using tools to rehearse empathy and clarity rather than contempt or domination.
- The AI J-curve: naming the dip in performance and engagement that often follows AI adoption and redesigning roles so humans can survive that curve.
- Concrete redesign of work: turning time saved (from AI scribes, scheduling, or automation) into protected space for 1:1s, team sense-making, and real patient or customer contact.

Where this leaves leaders

Leaders are going to continue seeing “become a certified AI consultant” offers and “hire AI employees” pitches. Used wisely, both can be helpful: consultants can bring technical expertise; AI agents can clear real clutter. But neither replaces the work that only leadership can do: deciding what kind of workplace AI is going to create.

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Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

Contributed by: Douglas Brown of Manage to Retain

Almost all employees start a new career with enthusiasm, excitement, energized, motivated, optimistic, and hope for the opportunities ahead with a willingness to work hard to support their organization and achieve their goals. They look forward to learning, contributing, building relationships, and proving their value while envisioning personal growth, career advancement, and a better future for themselves and their families.

Many employees also feel proud, appreciated, and inspired simply by being chosen for the role. There is often a strong emotional desire to belong, succeed, make an impact, and become part of something meaningful.

Yet often and unfortunately for many, their path leads to frustration, disengagement, quiet quitting, increased absenteeism and eventually a resignation.

A Few Research Statistics

From the recent [State of the Global Workplace: 2026 Report](#) by Gallup there are many key findings with implications for organizational leaders.

ONLY 20% of employees worldwide are engaged at work (Engagement is declining globally — and the manager crisis is a main reason why. Global engagement has fallen to 20%, its lowest level since 2020, and manager engagement has dropped nine points since 2022.)

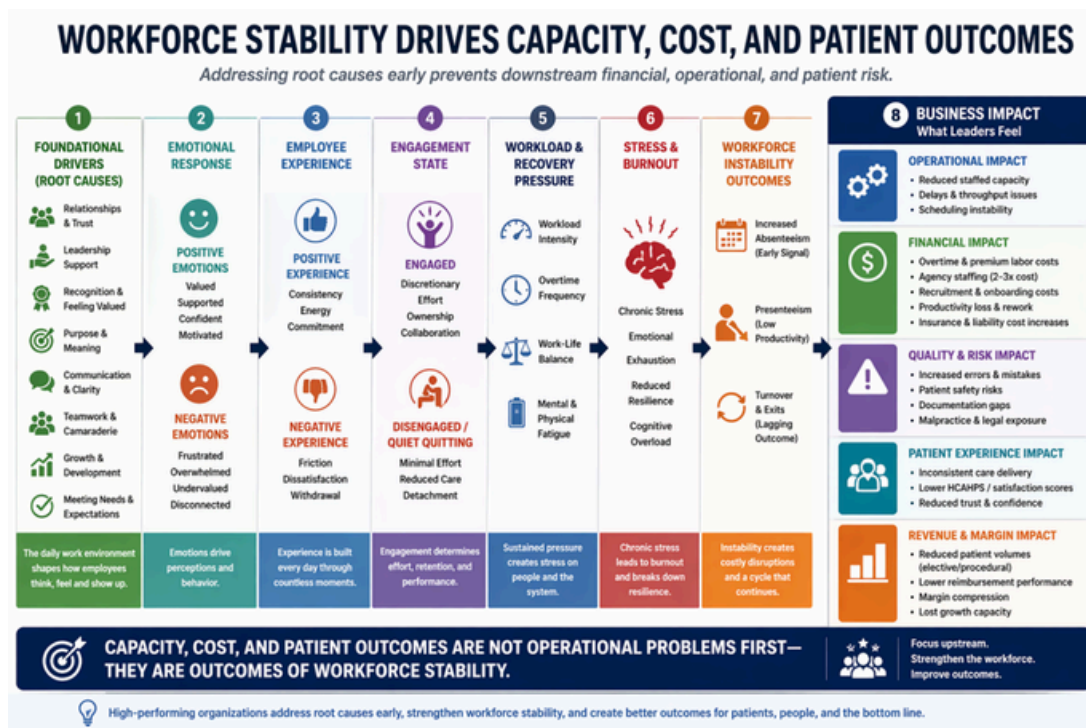
ONLY 34% of employees worldwide are thriving (Wellbeing is stabilizing, but the emotional toll of work remains higher than before the pandemic. Employee wellbeing improved for the first time in three years in 2025, but the percentages of employees experiencing daily stress, anger and sadness remain above pre-pandemic levels.

52% of Employees say now is a good time to find a new job (Job markets are shifting unevenly: Remote-capable workers are losing optimism, while on-site workers are gaining it. The 2025 increase in global job market optimism came entirely from non-remote-capable, fully on-site workers, while optimism dropped for fully remote and remote-capable, fully on-site workers.)

Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

Gallup Report

Organizations across healthcare, manufacturing, and transportation are facing a common set of workforce challenges—turnover, absenteeism, burnout, and disengagement. These issues are typically treated as isolated problems requiring reactive solutions such as increased hiring, higher compensation, or short-term operational fixes. However, as illustrated in our Workforce Stability model below, these outcomes are not the starting point of the problem—they are the result of deeper, earlier conditions that have been left unaddressed.



The most successful organizations are shifting their focus upstream. Instead of reacting to workforce instability after it appears, they are identifying and improving the precursors—the daily conditions that shape employee experience, emotional response, and ultimately performance. This approach is not only more effective, it is significantly more economical and operationally sustainable.

Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

The Root of Workforce Instability: The Daily Work Experience

At the foundation of workforce stability are core employee needs and expectations—trust in leadership, clarity of role, manageable workload, recognition, communication, and a sense of purpose. When these needs are consistently met, employees experience positive emotions such as feeling valued, supported, and confident. These emotions translate into higher engagement, discretionary effort, and performance consistency.

Conversely, when these needs are unmet, employees begin to experience negative emotions—frustration, overwhelm, and disconnection. These emotional signals are early indicators of risk. Managers account for up to 70% of the variance in employee engagement, reinforcing that the day-to-day work environment and leadership behavior are critical drivers of outcomes.

What is important to understand is that these emotional responses do not immediately result in turnover. Instead, they initiate a progression:

Unmet needs → Negative emotions → Poor experience → Disengagement → Stress → Burnout → Absenteeism → Turnover → Labor Shortages → Operational Issues (Capacity Challenges, Quality/Error Problems) → Patient/Client Declining Satisfaction Scores and Experiences → Revenue Losses, Increased Costs and Decreased Financial Profits

By the time organizations are addressing absenteeism or turnover, they are already several stages too late.

Absenteeism and Turnover Are Lagging Indicators

One of the most critical insights for executives is that absenteeism and turnover are not root problems—they are lagging indicators. According to the Work Institute, nearly 75% of employee turnover is preventable, often driven by issues such as lack of career development, poor management relationships, and unsustainable workloads.

Similarly, absenteeism is often an early withdrawal behavior rather than a health issue. Data from the CDC and other workforce studies suggest that unscheduled absenteeism costs U.S. employers over \$225 billion annually, with much of it tied to stress, burnout, and disengagement rather than illness.

Further, employee turnover costs organizations across the USA approximately \$1 trillion annually,

Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

All along this progression organizations have to incur these unwanted costs, from disengagement, quiet quitting, operational challenges (capacity, quality issues, rework, errors...) and also a less than exceptional patient/customer experience.

These costs highlight a key point: organizations are absorbing significant financial and operational impact long before an employee exits.

The Financial Case for Addressing Precursors

The cost implications of ignoring workforce precursors are substantial and often underestimated.

- **Turnover Costs:** Replacing an employee can cost between 1.5 to 2 times their annual salary when factoring recruitment, onboarding, lost productivity, and training.
- **Absenteeism Costs:** The average cost of absenteeism is estimated at \$2,500–\$3,600 per employee annually.
- **Agency and Overtime Costs:** Reliance on temporary labor can increase costs by 2–3 times compared to permanent staff.

However, these direct costs are only part of the equation. Indirect costs such as reduced productivity, errors, rework, and management strain often exceed direct expenses. Deloitte research suggests that the true cost of workforce instability can be 2–3 times higher than what organizations typically measure. By addressing precursors, organizations can reduce these costs at the source rather than continuously absorbing them downstream.

Operational Capacity Is a Workforce Stability Issue

Workforce instability directly impacts operational capacity. Examples- In healthcare, this may appear as reduced staffed beds or delayed procedures. In manufacturing, it manifests as inconsistent output, downtime, and quality issues. In transportation, it results in missed deliveries and reduced service reliability.

These are not purely operational problems—they are the consequence of an unstable workforce system.

When employees are disengaged or fatigued, performance variability increases. Research from the National Safety Council shows that fatigue alone can reduce productivity by up to 13% and significantly increase error rates. In high-risk environments, this also increases costs, safety incidents and liability exposure.

Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

Stable, engaged teams, on the other hand, produce consistent output, require less supervision, and maintain higher quality standards. This consistency is essential for capacity planning and operational reliability.

Quality, Risk, and Customer Experience Are Directly Affected

The connection between workforce stability and quality outcomes is well established.

In healthcare, patient satisfaction scores (including HCAHPS) are strongly correlated with staff engagement and communication. Studies have shown that hospitals with higher employee engagement scores achieve significantly better patient outcomes and satisfaction ratings.

In manufacturing, disengagement leads to higher defect rates and rework. In transportation, it contributes to service inconsistency and customer dissatisfaction.

Errors, missed details, and reduced attention to quality are often not capability issues—they are symptoms of fatigue, disengagement, and cognitive overload.

This creates a compounding risk:

- Increased errors
- Higher liability exposure
- Lower customer trust
- Reduced revenue and retention

Organizations that fail to address precursors are not only impacting internal performance—they are risking their external reputation and growth.

Why Reactive Strategies Continue to Fail

Many organizations continue to invest heavily in reactive solutions:

- increased compensation
- recruitment campaigns
- wellness programs
- exit interviews

While these initiatives have value, they often fail to produce sustainable results because they do not address the root causes of workforce instability.

Addressing workforce precursors is the most effective strategy to protect cost, capacity, and customer outcomes.

Compensation may attract employees, but it does not resolve poor management relationships or workload imbalance when employees are working in their new positions. Exit interviews provide insight after the fact, but do not prevent future losses.

The pattern repeats because the system remains unchanged.

The Strategic Advantage of Addressing Precursors

Organizations that focus on precursors take a fundamentally different approach. They:

1. Diagnose early-stage workforce conditions
2. Identify gaps in workload, leadership, communication, and employee experience before they escalate. This can be done through employee feedback mechanisms and 1:1 manager-employee conversations.
3. Strengthen frontline leadership capability
4. Equip managers to build trust, provide clarity, and support employees effectively.
5. TAKE ACTION on the identified Issues to improve the daily work environment
6. Address friction points that impact how employees feel and perform each day.

This approach aligns with findings from McKinsey and Gallup, which consistently show that improving employee experience and leadership quality leads to higher productivity, lower turnover, and stronger financial performance.

Continues on page 24

Employees come to you for what you offer, they stay with you for what you provide.

D. Lord, PhD



***Want more ways to connect?
...best of all, its free!***

Our Archetype Engagement Blueprint is a powerful toolkit that has all 12 strategies in one complete package. You'll find strategy templates, tools, and a variety of resources to address all 12 of our strategies:

1. Create a sense of community
2. "About Me" posters
3. Becoming VAP: Vulnerable, Authentic, & Present
4. Re-recruit!
5. The daily DOSE
6. Recognition Recipe Cards
7. Perspective taking
8. Gratitude
9. Rounding
10. One to ones
11. Thank you notes
12. Meetings

These are not in any order, but we recognize that some, like becoming VAP, can feel more challenging than others. If vulnerability, authenticity, and presence are more considered a challenge, starting with and perfecting some of the others, will automatically build your VAP muscles!

*Never underestimate the creativity of a disengaged team member!
Check out the complete toolkit at archetypelearningsolutions.com/*

ENGAGEMENT STRATEGIES



Our May strategy (strategy #5) The Daily DOSE

Ah, the daily DOSE of neural happiness: Dopamine, Oxytocin, Serotonin, and Endorphins (DOSE). A potent cocktail of brain chemicals that produces a state of happiness. Necessary because a lack of them actually mimics depression!

Dopamine - the reward chemical: complete a task; perform a self-care activity; celebrate a win, no matter how small it may seem!

Oxytocin - the love chemical: play with a dog, cat, or baby; engage in a game with a colleague; give someone a compliment.

Serotonin - the mood chemical: meditate; exercise; get some sunshine; practice gratitude.

Endorphins - the pain-killer chemical: do a happy dance!; laugh - watch silly cat or baby videos; enjoy some dark chocolate.

These are simple strategies that can provide self- or others-care. The best part when *you* practice many of these, you will feel the reward too!

Rx: use liberally and daily!

Addressing workforce precursors

In Summary: Workforce Stability Is a Business System

The key takeaway is clear:

Turnover, absenteeism, burnout, and disengagement are not isolated problems—they are predictable outcomes of how work is experienced every day.

Organizations that continue to react to these outcomes will remain in a cycle of cost escalation and operational disruption.

Those that shift upstream to focus on the precursors gain a significant competitive advantage:

- lower costs
- stronger capacity
- improved quality
- better customer and patient outcomes

As our model clearly illustrates, capacity, cost, and customer outcomes are not operational problems first—they are outcomes or unmet workforce need and expectations, negative emotions and experiences and developing workforce instability. The most effective strategy is not to manage the symptoms. It is to improve the conditions that create them.



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Tasks not ties

Human + AI leadership asks leaders to do three things:

- **Be honest about the current state.**

Engagement is falling, and many employees are already experiencing AI as another source of anxiety, not relief.

- **Commit to automating tasks, not ties.**

Any AI initiative that doesn't explicitly protect relationship time probably erodes it.

- **Invest in trauma-aware, emotionally intelligent leadership.**

Without psychological safety and real conversation, AI will simply make it easier to avoid the difficult human work that healing and performance both require.

That is the gap most people are still missing, not the chance to get in early on a new credential or a new tool, but the chance to design work so that AI helps people care for each other better.

If this month's Forge has you thinking about how thin relationships can feel at work right now, you're not alone.

Our five part series also includes an optional healthcare module. The series is designed to be leader, not facilitator lead, and is now available when you're ready to choose a different path.

UPCOMING EVENTS:

Join me on Tuesday, May 19 2026 on the Dementia Home Care show, hosted by Forge contributor Tracy Cram Perkins, as we discuss the challenges of caring and leadership fatigue

- **The invisible injury**
- **Role stress as the bridge**
- **The grief no one names**

[https://usaglobaltv.com/shows/Dementia home care](https://usaglobaltv.com/shows/Dementia%20home%20care)



Employee Engagement: Building Sustainable Care Teams in AFH's

Engaged, supported caregivers are the heart of every successful Adult Family Home.

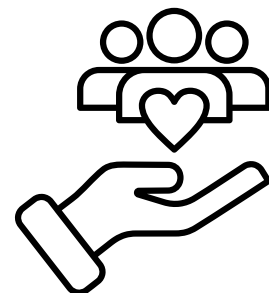
This presentation explores practical, real-world strategies for engaging employees, introduces COMPASS as a support network for caregivers and names the impact of cumulative workplace distress on retention and quality of care. Attendees will leave with language, tools, and hope for creating sustainable, healthy care environments.

2026 Summer Conference
Long-Term Care Foundation
of Washington State

Guest Speaker
Danielle Lord, Phd
Leadership Development
Researcher & Solutions Architect

I'll be presenting throughout June at the Long Term Care Foundation of WA summer series:

Building Sustainable Care Teams in Adult Family Homes through Employee Engagement



NEW Virtual Course! LIVE

Finding Stillness: An Introduction to Mindfulness & Meditation

*July 9, 16, 23, & 30
4 Wednesdays from 6-7:30 PST on Zoom*

Finding Stillness is a 4-week introduction to mindfulness meditation designed for beginners and those wanting to deepen their practice.

Through guided practices, reflection, and supportive teaching, participants learn to cultivate presence, work skillfully with thoughts and emotions, open the heart, and bring mindfulness into daily life.



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Douglas sets his sights on helping managers and executives understand the benefits of employee retention through the lens that comes with excessive turnover and loss of employee engagement.

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Christopher Colombo, MD

Helping physicians and healthcare leaders navigate the real-world demands of leadership, burnout, risk, role strain and so much more. Christopher is a certified positive psychology coach.

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COMPASS



Anika Klix, NBC-HWC

Mindfulness coach Anika brings her wealth of knowledge combined with compassion and empathy to her coaching practice Hälsa Coaching. Contact Anika: <https://www.halsacoaching.com/book-online>

Michon Garemani

Michon's experience as a trauma coach and COMPASS co-founder brings a unique perspective through her trauma informed approach. Contact her: mgaremani@gmail.com

Tracy Cram Perkins

Tracy has one of the most read books including practical advice through the lived experience of caring for her father as he battled dementia and the long term care environment. You can find her book and live show at: USA Global TV & Radio

**MasterHERmind:
CEO support for
women**

Annie Frisbie

Philanthropist, leader, and overall amazing individual. Annie serves as the Chief Philanthropy Officer for United Way of Piere County, bringing awareness to poverty around us and ways forward.

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