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Frontline Perspectives and Emerging Solutions for Strengthening Healthcare Workforce Well-Being

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Executive Summary

Burnout, chronic stress, staff shortages, and increasing psychosocial risks continue to threaten the well-being and retention of Europe's healthcare workforce. As health systems confront rising demands and recurring crises, strengthening workforce resilience has become a strategic priority.

The EU-funded [KEEPCARING](#) Project brings together scientific, clinical, technological, and end-user partners to co-create evidence-based tools and interventions that promote mental health, organisational support, and psychological safety among healthcare professionals working in hospital environments.

Frontline insights gathered through stakeholder engagement activities, including those facilitated by the [EFN](#), complement the scientific evidence base generated across the KEEPCARING Project consortium. Bringing these strands together helps illuminate the conditions required to sustain a resilient, motivated, and well-supported healthcare workforce across Europe.

These insights complement evidence emerging from scientific partners across the consortium, ongoing EU policy developments, and WHO Europe's 2025 mental health findings.



Introduction

Workforce Resilience as a European Priority

Across Europe, the well-being and resilience of the healthcare workforce have become central concerns for policymakers, researchers, and professional organisations. Nurses and other healthcare professionals continue to face increasing pressures linked to persistent staff shortages, high workloads, workplace violence, and the psychological consequences of successive crises. These challenges have significant implications not only for individual well-being but also for patient safety, service quality, and the long-term sustainability of healthcare systems.

A substantial body of international research, including multi-country studies by Aiken et al., has consistently demonstrated that inadequate staffing levels, poor working conditions, and skill-mix imbalances increase burnout, reduce quality of care, and contribute to higher patient mortality across hospital settings.

Recent evidence from multiple sources illustrates the scale of the problem. Insights reported in the earlier EFN article [Frontline Nurses Mental Health & Wellbeing](#) complement EU-level and WHO Europe evidence indicating that psychological distress among nurses affects patient safety and workforce stability. These observations align closely with the findings of the European Parliament's [Joint INI Report on 'an EU health workforce crisis plan: sustainability of healthcare systems and employment and working conditions in the healthcare sector'](#), being developed jointly by the [EMPL Committee](#) and [SANT Committee](#), which calls for urgent action to improve working conditions and address psychosocial risks. Similarly, WHO Europe's 2025 [survey](#) on the mental health of nurses and doctors reveals concerning levels of anxiety, depression, and emotional exhaustion across the continent, with strong links to turnover intentions and long-term workforce instability.

Within this context, the EU-funded [KEEPCARING](#) Project contributes to ongoing efforts by conducting research into mental well-being among healthcare professionals, and by developing and evaluating digital and non-digital interventions designed to strengthen resilience among healthcare professionals working in hospital settings. By integrating scientific evidence, technological innovation, and end-user perspectives, the project aims to provide solutions that support coping, promote psychological safety, and facilitate organisational change. Understanding how these dimensions align with wider European policy priorities is essential for advancing sustainable improvements in workforce well-being.

Role Of Stakeholder and End-User Insights

End-user and stakeholder perspectives are helpful for understanding how resilience-building interventions can be meaningfully integrated into the daily reality of hospital work. While scientific partners within the [KEEPCARING](#) Project consortium generate empirical qualitative and quantitative data, develop technologies, and evaluate interventions, the voices of those working directly with patients provide a complementary layer of contextual

knowledge. These insights can help clarify how organisational pressures, emotional demands, workflow constraints, and team dynamics influence the feasibility and perceived usefulness of new tools designed to strengthen well-being.

Within this multi-partner framework, the European Federation of Nurses Associations ([EFN](#)) contributes perspectives gathered through its engagement with nursing leaders, registered and postgraduate nurses across Europe. These insights therefore complement and contextualise the broader environment in which the [KEEPCARING](#) Project's interventions will eventually operate. They also highlight areas where resilience supports, coping mechanisms, or organisational adjustments may be particularly relevant.

By capturing real-world experiences, end-user contributions support a deeper understanding of how different forms of stress manifest in clinical settings, how psychological safety varies across teams, and which factors influence nurses' willingness or ability to engage with digital and non-digital interventions. This knowledge complements the evidence generated by the [KEEPCARING](#) Project by pointing to practical considerations that affect implementation, acceptability, and long-term sustainability.

These insights complement the work conducted across the [KEEPCARING](#) Project consortium, including, among others, the Pan-European Workforce survey, the Job-Crafting study and the Change Management Platform (CMP), by helping ensure that emerging tools remain relevant to frontline needs.

The integration of scientific research, policy developments, and frontline experiences reinforces [KEEPCARING](#) Project's co-creation approach. Aiming to support that the tools under development remain context-sensitive, ethically grounded, and aligned with professionals' actual needs increases their usability and potential for uptake. In this sense, stakeholder insights add value by helping to contextualise the [KEEPCARING](#) Project's innovations in the lived experiences of Europe's healthcare workforce.

Frontline Perspectives Across Europe

Insights gathered from nursing leaders at the [ICN Congress 2025](#) (June 2025) and from postgraduate nurses in [University of Luxembourg](#) and [University of Hasselt](#) provide a cross-sectional view of the pressures facing today's nursing workforce. Although collected in different settings and countries, the discussions revealed a series of recurring themes that reflect broader European workforce challenges. These themes offer valuable context that complements the scientific and policy evidence informing the [KEEPCARING](#) Project.

These insights resonate with several areas of ongoing scientific work within the [KEEPCARING](#) Project, particularly the development of Job crafting Interventions (EUR), the compassionate leadership study (UoC) which will guide the development of a compassion-based intervention (iWork.COMP), and the Change Management Platform (Digital Twin/CNR).

Workplace Violence and Emotional Safety

Participants consistently identified workplace violence, both verbal and physical, as a major barrier to well-being. Emergency departments and high-intensity units were described as especially vulnerable environments where emotionally charged encounters with patients or families often undermine psychological safety. Experiences of aggression were linked to increased stress, reduced team morale, and long-term emotional fatigue. These observations echo policy frameworks such as the [Directive on Combatting Violence Against Women and Domestic Violence](#), the [EFN Policy Statement on Zero Tolerance on Violence Against Nurses](#), and findings from EU-level reports that highlight workplace violence as a growing concern for healthcare systems.

Importantly, these observations can inform the logic of the Change Management Platform (CMP), which is being developed in the KEEPCARING Project, as workplace violence is an important stressor that should receive adequate attention among the different interventions that will be available to healthcare professionals through the CMP.

Staffing Shortages, Workload Intensity and Fatigue

Across all groups, nurses reported that staffing shortages and high workloads are the primary contributors to burnout. Many described long shifts without sufficient recovery time, cumulative fatigue, and a sense of unsustainable pressure. Importantly, participants emphasised that burnout is not a reflection of decreased motivation or professional commitment, but of structural conditions that require systemic action. These insights align with the priorities outlined in the European Parliament's [Joint INI Report on 'an EU health workforce crisis plan: sustainability of healthcare systems and employment and working conditions in the healthcare sector'](#) and underscore the need to integrate safe staffing considerations into resilience strategies.

Feedback from postgraduate nurses at the University of Luxembourg and University of Hasselt, further illustrated that unsafe staffing, overtime, and chronic exhaustion are central drivers of burnout. Importantly, this feedback complements the studies being conducted in the KEEPCARING Project on implementation pathways, as the interventions that will be developed in the KEEPCARING Project need to take into account the often-limited time for self-care that frontline healthcare professionals have at their disposal during their busy shifts.

Emotional Strain, Mental Health Risks and Retention Pressures

Nurses described emotional exhaustion, compassion stress, and anxiety as routine elements of frontline work. High levels of emotional labour, combined with unpredictable clinical situations, contribute to short- and long-term mental health risks. Participants also linked poor well-being to decreased job satisfaction and increased turnover intentions. Such perspectives mirror key findings of WHO Europe's 2025 workforce mental health [survey](#) and preliminary outcomes of the KEEPCARING survey, and

reinforce the importance of early intervention, accessible support, and continuous monitoring.

From a KEEPCARING Project perspective, these observations resonate well with the work on compassionate leadership being conducted by the University of Coimbra (UoC). This is because compassionate leadership acts as an important driver of organisational change and workplace satisfaction, which are closely linked with workforce retention.

Perceptions of Digital and AI-Supported Tools

While nurses expressed interest in digital and AI-supported supports, they highlighted several concerns related to usability, accessibility, and maintaining the human aspect of care. Some participants emphasised that digital tools should be accessible outside working hours, noting that frontline staff often lack the time or energy to engage with interventions during shifts. Others pointed to positive national examples, such as the [Health Village](#) platform developed at [Helsinki University Hospital](#), which provides digital mental health pathways that support self-advocacy and psychological well-being. Academic contributors at the ICN Congress 2025 further underscored that digital and AI-supported interventions must account for diversity within the workforce, including differences in age, gender, disability, and pre-existing mental health conditions. These reflections provide valuable context for the human-centred design and usability focus of the KEEPCARING Project's digital interventions, including the CMP, which will need to cater for different users' profiles and needs.

The Role of Education, Leadership and Competence Development

Participants stressed the importance of supportive leadership, opportunities for continuing education, and evidence-based resources to help manage work-related stress. Many highlighted the need for structured supervision, reflective practices, and psychologically safe team cultures. These expectations resonate with ongoing discussions around workforce resilience at EU level, as well as with the [KEEPCARING](#) Project's work on compassionate leadership, organisational support and stress-management tools.

Together, these themes offer a grounded understanding of the conditions that shape workforce well-being across Europe, offering a complementary view into the environments in which the KEEPCARING Project intervention will eventually be implemented.

Policy Developments Relevant to Workforce Well-Being

Recent policy developments at European and international levels provide crucial context for understanding the systemic pressures affecting the healthcare workforce and the broader relevance of resilience-building interventions. These developments reinforce the need for evidence-based solutions that address both organisational and psychosocial risks and highlight the urgency of supporting Europe's nurses and other healthcare professionals.

European Parliament Joint EMPL–SANT INI Report

The European Parliament's Own-Initiative Report on the EU health workforce crisis, developed jointly by the [EMPL Committee](#) and [SANT Committee](#), underscores the need for structural reforms to safeguard workforce sustainability. During the political negotiations, Tilly Metz (Greens/EFA, SANT shadow rapporteur), in consultation with [EFN](#), played a key role in ensuring that mental health, psychosocial risks, and workforce resilience remain core priorities.

Co-rapporteurs Loucas Furlas (EPP, Cyprus, EMPL Co-Rapporteur) and Ruggero Razza (ECR, Italy, SANT Co-Rapporteur) highlighted several priority areas, including the importance of appropriate nurse-to-patient ratios, access to mental health support, and recognition of psychosocial risks as occupational hazards. The report also draws attention to risks linked to mobility, brain drain, and the projected shortage of up to four million healthcare professionals in the coming years.

Additional evidence from the EFN Report on [Newly Registered Nurses](#) and the EFN Report on [Gender and Profession-Based Violence](#) further illustrates how poor working conditions, exposure to violence, and lack of organisational support drive early exits from the profession and exacerbate workforce instability across Member States.

During the first Joint EMPL–SANT Public Hearing, stakeholders and Members of the European Parliament discussed these priorities. Jan Willem Goudriaan ([EPSU](#) Secretary General) emphasised the need for stronger occupational health protections for healthcare workers. These discussions are closely connected to the EU's occupational health and safety competences under [article 153 TFEU](#), which provide a legal basis for addressing psychosocial risks and unsafe staffing conditions as hazards affecting healthcare professionals.

Through ongoing dialogue with [MEPs](#), stakeholders across Europe have contributed reflections on the realities of frontline work, highlighting the scale of burnout, turnover, and emotional strain. These political discussions have also involved exchanges with representatives of [DG SANTE](#) and [DG EMPL](#), while MEP Irena Joveva (Renew Europe, EMPL shadow rapporteur) and MEP Tomislav Sokol (EPP, Croatia) reaffirmed the importance of safe staffing legislation and EU-level action on mental health. Their interventions further underline the urgency of implementing measures that address not only individual coping but also organisational conditions, leadership support, and service design.

These policy and political developments therefore reinforce the importance of the work being conducted across the KEEPCARING Project consortium, with interventions like Job-Crafting interventions and the iWORK.comp internet-based intervention which, among others, aim to tackle some of the challenges at the individual and organisational levels that were identified by MEPs in the development of the INI Report on the EU health workforce crisis.

WHO Europe [Survey](#) on the Mental Health of Healthcare Professionals

In parallel, [WHO](#) Europe launched a 2025 [survey](#) on the mental health and well-being of healthcare professionals, generating one of the most comprehensive datasets to date, with responses from over 100 000 nurses and doctors across the EU, Iceland, and Norway.

The findings reveal significant proportions of the workforce reporting symptoms of anxiety, depression, emotional exhaustion, and, alarmingly, suicidal ideation. This work, developed by the [WHO/Europe Health Workforce and Service Delivery \(HWD\)](#) team and the [Mental Health \(MHF\)](#) team, was strongly supported by Dr. Natasha Azzopardi-Muscat, Director of Country Health Policies and Systems at WHO Europe, who presented the preliminary findings during the first EMPL–SANT Public Hearing.

This work highlights key workplace factors associated with poor mental health outcomes, including temporary contracts, excessive working hours, shift and night work, and exposure to violence. The [COVID-19](#) pandemic continues to influence mental health status, turnover intentions, and overall workforce stability.

The findings of the survey are further supported by the [WHO Europe Report \(2025\)](#), presented during a side-event of the [Regional Committee](#), which highlighted persistent mental health challenges across Member States and reinforced the need for coordinated action to strengthen support systems for nurses and other healthcare professionals.

Importantly, the findings of the WHO Europe Survey complement the preliminary results of the Pan-European workforce survey conducted in the KEEPCARING Project by the University of Limerick, underscoring the urgency to act on the mental health and well-being of the healthcare workforce.

Relevance for the [KEEPCARING](#) Project

Both policy frameworks strongly reinforce the importance of the work being undertaken by the [KEEPCARING](#) Project consortium. The emphasis on psychological safety, safe staffing, data-informed decision-making, and early intervention aligns closely with the project's objectives and ongoing research activities.

While policy initiatives operate at systemic and legislative levels, the [KEEPCARING](#) Project contributes at the practical and empirical level by developing user-centred tools and interventions that address stress, burnout, organisational change, and emotional well-being in hospital environments. Integrating policy insights with scientific evidence and frontline experiences supports a more comprehensive understanding of workforce resilience and strengthens the potential for sustained impact.

Innovation and Development Across the Consortium

The [KEEPCARING](#) Project consortium brings together a multidisciplinary group of research institutions, clinical partners, and technology developers to design, test, and evaluate interventions that strengthen workforce resilience in hospital settings. These innovations represent the scientific backbone of the project and

aim to address stress, burnout, and organisational challenges through complementary digital and non-digital approaches.

Team-Based Prosocial Job Crafting (Erasmus University Rotterdam - [EUR](#))

The [team-based prosocial job crafting intervention](#) is being developed and led by Prof. Arnold Bakker, Prof. Daantje Derks, and Dr. Luisa Solms from Erasmus University Rotterdam ([EUR](#)), supporting nursing teams in adopting proactive, collaborative strategies for task distribution, workload balance, and mutual support. This approach aligns with evidence showing that collaborative job crafting can reduce stress and promote psychological safety. The intervention is currently being tested across multiple European hospital settings, including [Amsterdam UMC](#) under the scientific leadership of Prof. Marlies Schijven, and [University Hospital Copenhagen Rigshospitalet \(RIGS\)](#) under the scientific leadership of Jeanett Strandbygaard, MD, PhD, with ongoing discussions on expansion to Frankfurt University Hospital. A weekly diary study coordinated with the Amsterdam UMC research team allows for repeated measurement of job demands, resources, and team-level behaviours.

Individual-Level AI-Supported Job Crafting Micro-Intervention ([EUR](#))

In parallel, [EUR](#) is developing a micro-intervention that uses AI-supported feedback to help individual healthcare professionals optimise their own work processes. The tool aims to help users identify early signs of stress, adjust routines, and strengthen personal resilience strategies without requiring extensive training. This individual-focused innovation complements the team-based intervention by targeting different layers of workplace experience.

1.1. Effects Of Deep Relaxation Using Virtual Reality (VR) Before Working in the Operating Room (OR) (Amsterdam UMC, RIGS, [University Medical Centre Hamburg Eppendorf](#), [University of York \(Uoy\)](#), And [Healthy Mind](#))

Amsterdam UMC is leading a study to determine whether deep relaxation using VR before working in the OR is an effective and cost-effective intervention to mitigate stress and help promote resilience. To test this, a [specific VR solution](#) developed by Health Mind (HM) in co-creation with end-users, with embedded privacy-by-design, will be tested in Amsterdam UMC, University Hospital Copenhagen Rigshospitalet (RIGS), and University Medical Centre Hamburg-Eppendorf (UKE), in a cross-over design intervention. The results will be compared to the relaxation effects of a normal pause in a quiet environment; immediately preceding the normal time-out procedure in the OR, acting as the control. At the same time, they will conduct a qualitative analysis to assess the potential impact on the level of stress, user satisfaction and quality of the VR scene.

Effects of Deep Relaxation Using VR at the Surgical Wards (Amsterdam UMC, RIGS, UKE, Uoy, And HM)

Similarly to the aforementioned study, Amsterdam UMC is

leading a study to assess the effects of VR based deep relaxation in the surgical wards. The study will involve the same clinical partners taking part in the previously mentioned study, as well as Healthy Mind as the industry partner in charge of developing the VR tool. Importantly, this qualitative based study aims to uncover the strengths and weaknesses of using VR at surgical wards, to find the best organisational fit to obtain the most effective outcomes, based on important aspects such when is the right time to use VR, with which scenery, for how long and by whom. This will allow the researchers to define the (cost-) effectiveness outcomes of this important intervention.

Biobehavioural Monitoring Using Hexoskin Smart Shirts (UKE And NOVA)

A biobehavioural monitoring study led internally by Dr. Felix Nickel, at the [University Medical Centre Hamburg-Eppendorf \(UKE\)](#) is using "[Hexoskin](#)" smart shirts, which continuously record real-time physiological indicators such as heart rate, heart rate variability, breathing rate, and breathing volume.

The anonymised biometric data collected through these wearable devices are processed by the AI and data science research group at Universidade NOVA de Lisboa ([NOVA](#)), under the scientific direction (internally) of Prof. Luis Silva, which is developing an algorithm to identify stress and resilience biomarkers. These data-driven insights lay the foundation for personalised and targeted well-being interventions.

AI-supported Change Management Platform (Digital Twin Technology and CNR)

The AI-supported Change Management Platform (CMP) is being developed by [Digital Twin Technology](#) and co-created through [two co-design events](#) organised and facilitated by the [National Research Council of Italy \(CNR\)](#). The co-design activities were coordinated and facilitated by Maria Chiara Caschera and Tiziana Guzzo, who lead the socio-technical and participatory design processes within the consortium. Their work ensures usability, ethical alignment, and accessibility for frontline healthcare professionals.

This platform integrates organisational data, behavioural insights, and AI-supported modelling to support hospitals in managing change processes, identifying stress-related risks, and implementing resilience-enhancing strategies. Its design is grounded in human-centred and socio-technical principles to ensure practical usability and ethical alignment.

Psycho-Educational Online Course for Coping and Emotional Regulation (University of Tartu)

The [University of Tartu \(UoT\)](#), is developing a comprehensive psycho-educational online course tailored specifically for healthcare professionals. The course development is led by Prof. Andero Uusberg, whose academic work focuses on emotional regulation, stress responses, and psychological resilience. The course aims to strengthen coping strategies, promote emotional regulation, and increase awareness of stress responses. Its development will be

grounded in psychological science and informed by feedback from end-user partners, ensuring that content remains relevant and accessible to frontline staff.

Mitigating Toxic Leadership Styles – The Iwork.Comp Intervention (University of Coimbra)

The [University of Coimbra](#) (UoC), with the lead of Prof. Diana Ribeiro da Silva, is conducting a study to determine the feasibility and user-acceptability of an internet delivery compassion-based intervention (iWork.COMP). This intervention will be embedded in the CMP portal, and it will aim to mitigate toxic leadership styles through the promotion of a compassionate motivation in the workforce. Participants in the study and intervention will be guided to develop mental health compassionate tools to cope with leadership challenges and stress in the workplace, including both in their roles as leaders and/or non-leaders. Furthermore, they will develop an SOS-Button, which will be linked to a validated collection of short-term exercises, frequently used for compassion-based interventions, when faced with acute stress situations.

Psychologically Safety Using Data-Enhanced Debriefing After Surgery (RIGS, Amsterdam UMC, And UKE)

RIGS is leading a multicentre [prospective comparative cohort study](#), which will be conducted to examine whether teams who participate in a debriefing with deeper-derived data-insight resulting from use of a medical data recorder (Operation Room Black Box, ORBB®) feel equally psychologically safe as teams who get ‘traditional’ debriefings using a debriefing template. The medical centres that have access to an ORBB are Amsterdam UMC and RIGS, while UKE does not and it will act as the control, allowing the researchers to compare the results of using a digital AI empowered system to support psychological safety in team debriefings, versus traditional team debriefing system.

Pan-European Workforce Survey (University of Limerick)

A foundational scientific component of [KEEPCARING](#) Project is the pan-European workforce survey led by Professor Stephen Gallagher and Dr. Trina Tamrakar, Postdoctoral Researcher at the University of Limerick. This validated, multilingual survey collected detailed data on burnout, stress, job demands, organisational resources, and resilience among hospital-based nurses and physicians across EU Member States.

The data gathered serves as an empirical foundation for several of the project’s intervention streams, providing comparative insights that support the design, targeting, and refinement of digital and non-digital tools within the consortium.

Collectively, these studies and interventions form the empirical and technological backbone of the project, ensuring that policy discussions around mental health and resilience are grounded in actionable evidence. Together, these scientific and technological innovations form a coherent suite of interventions aimed at supporting individual resilience, strengthening team functioning,

and enabling organisational change. By integrating empirical research, human-centred design, and advanced analytics, the [KEEPCARING](#) Project contributes actionable knowledge and practical tools that complement ongoing efforts to improve workforce well-being across Europe.

Added Value of Combining Evidence, Innovation and Frontline Insights

The strength of the [KEEPCARING](#) Project’s approach lies in its integration of scientific research, technological development, policy evidence, and frontline perspectives. Each source contributes a different layer of understanding to the complex issue of workforce well-being. When combined, these layers offer a more comprehensive and actionable foundation for designing interventions that are both evidence-informed and sensitive to the realities of clinical work.

Scientific partners provide empirical depth through validated methodologies, biometric monitoring, psychological assessments, and advanced analytics. Their work generates rigorous evidence on stress mechanisms, behavioural patterns, and the effects of organisational environments on well-being. Technology developers translate these findings into practical tools that can support individuals, teams, and healthcare organisations.

At the same time, stakeholder and end-user perspectives introduce crucial context. They highlight how structural pressures, emotional demands, and workplace cultures influence the feasibility and acceptability of resilience-building interventions. These insights also help identify potential barriers to uptake, such as time constraints, accessibility needs, or concerns about depersonalisation in digital care.

Policy developments at EU and [WHO](#) Europe level further embed these scientific and experiential insights within a wider strategic framework. They underscore the importance of addressing systemic issues such as safe staffing, psychosocial risks, and leadership capacity.

By bringing together these complementary forms of knowledge, the [KEEPCARING](#) Project reinforces the principle that effective solutions for workforce well-being cannot emerge from any single perspective alone. Instead, sustainable change requires approaches that are grounded in evidence, informed by lived experience, and supported by organisational and policy-level alignment. This convergence increases the likelihood that the project’s outputs will be meaningful, implementable, and capable of contributing to long-term improvements in the resilience and mental health of Europe’s healthcare workforce.

Reflections for the Future of Workforce Well-Being

Sustaining a resilient and motivated healthcare workforce requires long-term commitment at multiple levels of the system. While the pressures facing nurses and other healthcare professionals are complex, recent evidence demonstrates that actionable solutions do exist and can be strengthened through coordinated efforts across research, practice, and policy.

The innovations emerging from the [KEEPCARING](#) Project consortium illustrate how scientific methods, co-creation processes, and advanced technologies can support both individual and organisational resilience. However, their ultimate impact will depend on the degree to which healthcare institutions prioritise psychological safety, invest in staff well-being, and embed resilience-building strategies into everyday clinical practice. Equally important is the need for supportive policy environments at national and EU level, including frameworks that address safe staffing levels, occupational risks, and the mental health needs of healthcare professionals.

Frontline perspectives further reinforce that resilience cannot be achieved through individual coping strategies alone. Nurses consistently call for safer workplaces, stronger leadership, accessible education, and interventions that respect the diverse realities of hospital work. Aligning these lived experiences with scientific and policy evidence creates a more complete understanding of what sustainable workforce well-being requires.

This aligns with [De Raeve's et al. \(2025\) analysis of the European nursing workforce](#), which underscores that long-term workforce sustainability depends on sustained investment in safe working environments, safe staffing levels, and protection of nurses' health and safety.

Looking ahead, the integration of technological innovation, empirical research, and user-centred insights offers a promising pathway for strengthening the resilience of Europe's healthcare workforce. While project outputs cannot replace broader policy or organisational reforms, they can help inform ongoing debates and support the development of interventions that are relevant, context-sensitive, and grounded in real-world need. Achieving lasting improvements will depend on continued collaboration among healthcare professionals, researchers, policymakers, and system leaders.

Conclusion

As the healthcare workforce faces a serious mental health crisis which harms the resilience of EU healthcare systems, it is clear that any solution stands across a continuum of frontline lived experience, research, innovation, policymaking, and organisational change.

While still aiming to inform the public attention on the serious mental health crisis of the healthcare workforce, this article therefore aimed to offer a more forward-looking scrutiny of the state of affairs in the EU. This is the case not because we are not facing a crisis, but because all evidence points to the fact that, at the time of writing, we are seeing concerted and evidence-based efforts to tackle this crisis.

On the one hand you have the European Parliament INI Report on the Healthcare Workforce and the WHO Europe Survey on the Mental Health of Healthcare Professionals, which are steering EU and National level policy actions on safe staffing levels, workplace safety, and mental health to address the crisis. On the other hand, you have the [KEEPCARING](#) Project, which, through scientific research and innovative digital and non-digital interventions, is developing

the tools which can support both individual mental health and well-being, as well as organisational change and resilience.

Then, acting as the common denominator at the cross-road between policymaking and scientific innovation, you have a process of co-creation. In policymaking this is achieved through informed advocacy and stakeholders' engagement. In the KEEPCARING Project, this is achieved through the coordinated contributions of multiple partners, including professional associations, which provide informative end-users perspectives to scientific research and innovation.

Therefore, if we continue working with a shared purpose and guided by evidence and informed end-users' perspective, we will be able to tackle the crisis at its root, and provide the mental health support that is desperately needed by the healthcare workforce [1-10].

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