Insights Series
A thought leadership publication

Issue 57

Staff well-being in hospitals

The Mount Sinai strategy in practice



SIEMENS Healthineers

Introduction

Healthcare organizations across the world are under growing pressure to improve access, quality, financial sustainability, and workforce stability simultaneously. These challenges are unfolding against a backdrop of workforce shortages, increasing operational complexity, and persistent financial strain across many healthcare systems.

At the same time, burnout and workforce instability among healthcare professionals continue to climb. Recent surveys suggest that almost half the physicians in the U.S.[1] report symptoms of burnout. Studies among academic physicians have identified substantial retention challenges, particularly in high-intensity specialties such as radiology, where up to 40% report intentions to leave. In addition to burnout, medical professionals also cite factors like reduced professional fulfillment as reasons behind their desire to change careers.[2]

Workforce well-being assumes greater importance against this backdrop. It is sometimes viewed as a goal somewhat lower on the list of healthcare priorities, below more immediate operational and financial concerns. Such a view, however, fails to take into account that employee well-being directly influences issues like retention, productivity, patient experience, reputation, quality of care, and long-term organizational sustainability.[3] Regulatory and accreditation bodies are also beginning to ask healthcare organizations to demonstrate how they are addressing workforce experience. Together, these developments send a clear message that workforce well-being must be understood not as a peripheral or HR issue, but as a core organizational and operational concern.



Nearly 40% of academic radiologists intend to leave their current institution.[2]

© Siemens Healthineers AG

Yet despite growing awareness, many organizations still struggle with execution. Initiatives are often attempted in isolation, without a clear plan, overall strategy, or evaluation criteria. And larger operational drivers of employee stress such as inefficient workflows or administrative complexity are often overlooked.

Successfully addressing workforce well-being requires more than individual resilience programs. It requires a system-level approach that combines organizational strategy, operational redesign, leadership support, and mechanisms for local implementation.

Mount Sinai Health System in New York City offers a compelling example of how such an approach can be successful and operationalized at scale.



© Siemens Healthineers AG

The Mount Sinai approach

Building workforce well-being as an organizational capability

Mount Sinai Health System is one of the largest integrated academic health systems in the U.S. serving the New York metropolitan area with seven hospital campuses, a large regional ambulatory network, and more than 48,000 employees across a broad range of clinical and operational settings.

Workforce issues are particularly challenging in an organization of such size and diversity as employee needs and operational pressures vary considerably across specialties, departments, and professional groups. Mount Sinai's approach therefore combines centralized system-level governance, measurement, and leadership support with local departmental and divisional ownership and implementation. Under such a model, workforce well-being is approached not as a collection of isolated initiatives, but as an organizational capability embedded into the broader functioning of the system.

Mount Sinai Health System locations across the New York metropolitan area

The Office for Professional Engagement and Development's Well-Being and Work Experience Core at the Icahn School of Medicine serves as the central hub for system-wide well-being strategy. It collaborates with local teams across the Mount Sinai Health System to advance well-being initiatives.

48,000 employees
working across 4 health centers, 7 hospital campuses, and hundreds of outpatient practices



Source: Icahn School of Medicine at Mount Sinai

© Siemens Healthineers AG

Creating the foundation for workforce well-being

To embed workforce well-being into the organization's broader strategy and operations, Mount Sinai established a dedicated Well-Being and Work Experience Core led by a Chief Wellness Officer (CWO) and supported by a multidisciplinary group. Dr. Jonathan Ripp serves as CWO at Mount Sinai, in addition to his responsibilities as Professor of Medicine, Medical Education and Geriatrics and Palliative Medicine and Dean for Well-being.

Dr. Ripp is a strong believer in the idea that workforce well-being is largely shaped by the work environment itself. Systems, workflows, leadership behaviors, and organizational practices influence whether individuals can focus on the work they are trained to do, rather than being absorbed by avoidable friction. The role of Dr. Ripp's central team is therefore not to "deliver" well-being directly, but to provide the governance, measurement, expertise, and resources needed to support organization-wide action. Working closely with functions such as HR and behavioral health, the team helps translate workforce well-being from a broad organizational priority into actionable areas for measurement and intervention.



Their core responsibilities include:

- Establishing a shared understanding of workforce well-being and its actionable drivers
- Developing frameworks to guide local implementation
- Measuring workforce experience and underlying drivers of distress
- Translating data into actionable insights for leaders
- Supporting and enabling locally embedded Well-Being Champions

© Siemens Healthineers AG

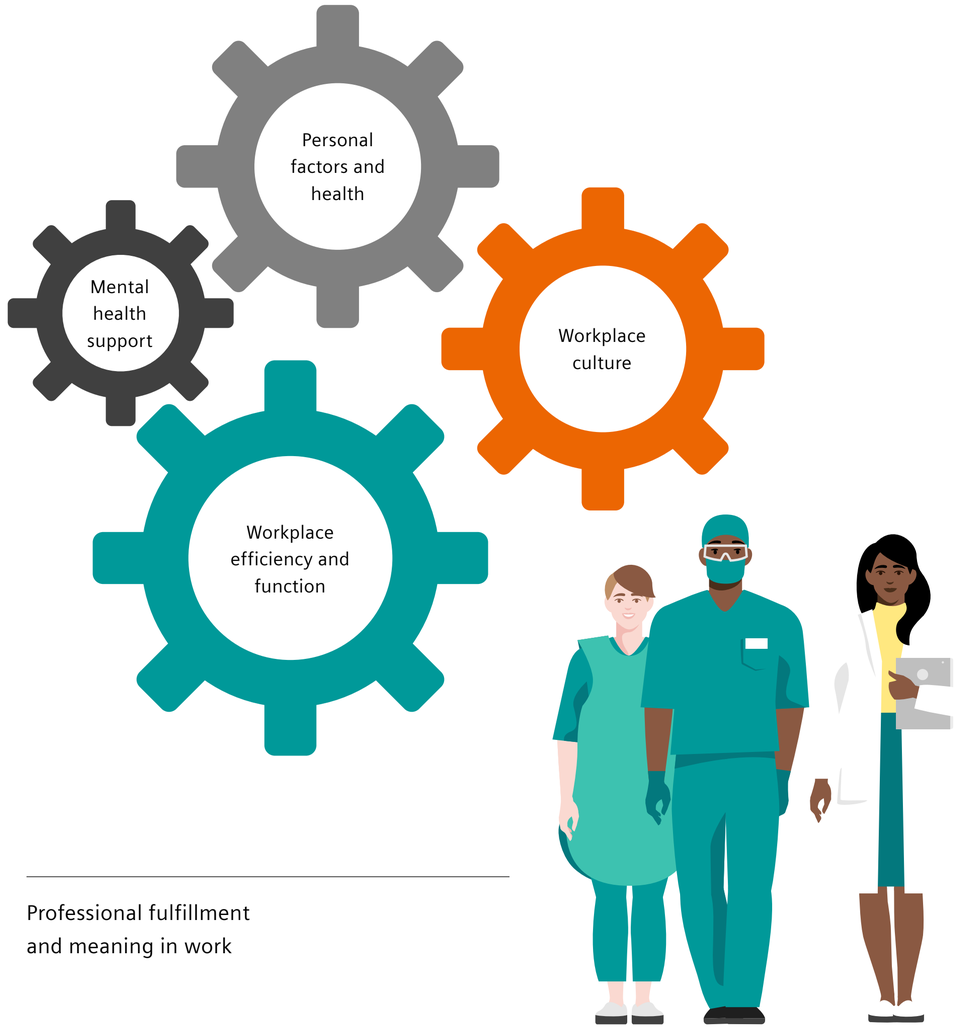
"A healthcare workforce that has well-being prioritized and elevated will be one that arrives at work with the tools and support needed to perform at the top of their license, within a community and culture where they feel valued, respected, and appreciated."

Jonathan A. Ripp, MD

Mount Sinai's framework focuses on domains such as workplace culture, workplace efficiency and function, personal factors and health, and mental health support. However, the specific framework itself is less important than having a shared structure that helps organizations identify drivers, prioritize action, align leadership around a common approach, and connect measurement with intervention.

Equally important, the framework helps define ownership and boundaries. It clarifies which well-being challenges can be addressed directly and where collaboration with other organizational functions is required, ensuring that solutions are pursued through the most appropriate capabilities and resources across the organization.

Focus areas of Mount Sinai's well-being framework



Source: Icahn School of Medicine at Mount Sinai, Well-Being and Work Experience Core

© Siemens Healthineers AG

Translating global strategy into local action

A system-level strategic framework provides direction, but implementation must occur locally, in large part because workforce experience may differ considerably across departments, specialties, and professional groups. As Dr. Ripp notes, “all well-being work is local.”

To support local implementation, Mount Sinai established a network of Well-Being Champions embedded within departments and divisions. These are clinicians and staff members who, in addition to their primary roles, serve as designated well-being representatives with dedicated capacity to support local implementation efforts.

The role of Well-Being Champions typically includes:

- Identifying local drivers of distress and operational friction
- Developing and testing targeted interventions
- Working with leadership to prioritize initiatives and allocate resources
- Gathering feedback from faculty, staff, and trainees
- Evaluating whether interventions should be adapted, expanded, or discontinued

The success of the program depends on Well-Being Champions being part of the decision-making process. Therefore, it is not a top-down effort, with decisions imposed from above. Instead, it relies on continuous exchange between the Well-Being and Workplace Experience Core, departmental leadership, and frontline staff, with local Well-Being Champions serving as an essential liaison. The result is a dynamic model combining central coordination with local ownership.

© Siemens Healthineers AG

Bridging organizational strategy and frontline experience through Well-Being Champions

In addition to local input, accurate data is also an essential component of decision-making. Organization-wide workplace surveys are conducted regularly to assess multiple dimensions of workforce experience and to allow departments to benchmark progress over time. Findings are reviewed not only at the departmental level, but also across subspecialties and divisions, recognizing that different clinical environments may face unique operational pressures. Within the Radiology Department, for example, separate surveys are conducted for individual divisions such as neuroradiology, pediatric radiology, and interventional radiology.

Another important feature of Mount Sinai's program is that local interventions are approached as iterative improvement cycles: pilot, measure, adapt, scale where effective, or discontinue if not. This aligns workforce well-being work with established quality improvement practices and reinforces the view that sustainable change is incremental. Survey data is not treated as an endpoint, but as a mechanism for evaluation, prioritization, and continuous improvement.

Roles and collaboration



© Siemens Healthineers AG

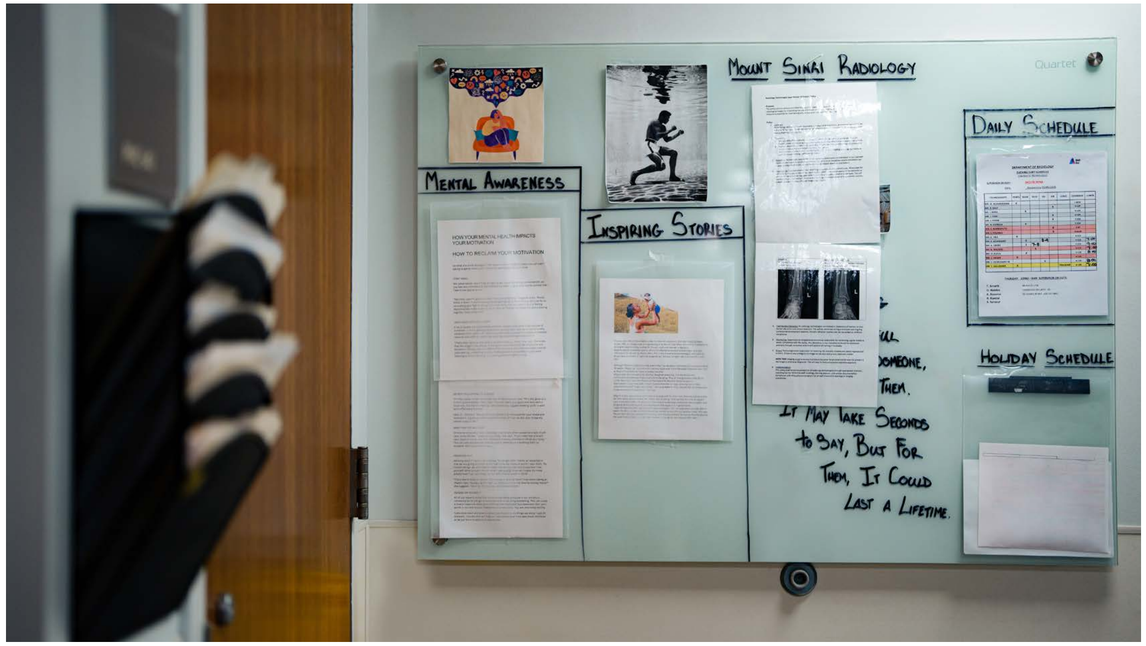
“Listening to your staff goes beyond the faculty. You need to hear from people across the organization, because each sees something different. Bringing those perspectives together gives you a much clearer picture of what’s actually going on.”

F. Scott Nowakowski, MD

Local action in Radiology: From insights to intervention

The Radiology Department provides an illustrative example of how Mount Sinai translates organizational strategy into local operational action. Dr. Scott Nowakowski is a senior interventional radiologist at Mount Sinai’s Radiology Department and also serves as the department’s Well-Being Champions. In this role, he works closely with Department System Chair Dr. Neil M. Rofsky as well as the central Well-Being and Workplace Experience Core led by Dr. Ripp. Together, they interpret survey data, identify challenges, and develop action plans to address them.

Dr. Nowakowski believes in the value of gathering input from the entire team, not only senior medical staff. Therefore, he reaches out to other personnel including technologists and housekeepers.



© Siemens Healthineers AG

Radiology operates at the intersection of diagnostic expertise and hospital-wide coordination. Radiologists must maintain sustained focus while interpreting increasingly complex imaging studies, often under significant time pressure. At the same time, the department is closely connected with clinical functions throughout the hospital, exposing staff to frequent interruptions, ad hoc communication, and coordination demands across the broader care pathway.

At Mount Sinai, departmental survey data consistently identified interruptions and administrative tasks as a major source of strain for the radiology team. Radiologists reported that a significant portion of their workday was spent on activities that detracted from diagnostic work and teaching. This compromises the efficiency of the department as a whole, yet it also places additional burdens on individual physicians. Functional challenges such as clerical responsibilities like communicating findings to referring providers can take up to 15 minutes per case.



Rather than addressing multiple issues simultaneously, the department chose to focus on this clearly identified driver: interruptions related to clerical and coordination tasks. To address this issue, Mount Sinai introduced the role of Reading Room Coordinator.

© Siemens Healthineers AG

Redesigning work for focus and efficiency

The Reading Room serves as the central “nerve center” of many radiology departments; a place where radiologists analyze images, consult with referring physicians, and instruct younger residents and fellows. Yet their work within this busy hub is frequently interrupted. The newly created Reading Room Coordinators now act as a central point of contact, handling incoming requests, triaging communication, and managing non-interpretive tasks.

The initiative was initially supported through a central well-being grant enabling a pilot phase with one Reading Room Coordinator. Survey data indicated that the program was a success, with the number of radiologists reporting that clerical tasks “always or very often” create a barrier to their well-being dropping by almost 50%.[4] The enhanced efficiency resulting from the work of the Reading Room Coordinators now allows radiologists to spend more time on teaching and research and contributes to overall well-being. The success of the pilot project has resulted in this program being continued and expanded.

≈50%

Reading Room Coordinators reduced the proportion of radiologists reporting that clerical tasks frequently interfered with their well-being by nearly 50%.[4]

Building on the success of the Reading Room Coordinator pilot, the department is looking at ways to further refine and expand the project. One option currently being explored is whether ‘to assign one radiologist per shift to serve as a dedicated point of contact for clinically relevant requests from the Reading Room Coordinators. This would allow for more structured handling of interruptions and would reduce the need for coordinators to identify available staff ad hoc.

© Siemens Healthineers AG

“AI’s potential is still evolving, but it can already help take some of the more routine tasks off people’s plates. The goal isn’t to replace the meaningful clinical work, but to create more space for it. Becoming more efficient doesn’t just mean doing more of the same, it also means giving people time to take a break, and recharge.”

Neil M. Rofsky, MD



© Siemens Healthineers AG

Technology also plays a role in making the work of the radiology department more efficient and streamlined. Numerous tools are available to help guide staff through protocol selection and to standardize processes, helping to reduce ad hoc questions and variability, supporting more consistent workflows and removing repetitive or non-interpretive tasks.

Today, AI already serves as a valuable support, enhancing accuracy and efficiency in things like volume calculations, automating lesion segmentation, or automating score calculations like PI-RADS-Score to assess prostate lesions.

In addition to changes in day-to-day operation procedures, improvements are also possible at a system level. Replacing inefficient IT systems, such as PACS, can significantly improve both workflow efficiency and staff experience. At the same time, such changes should be considered holistically, including potential downstream effects on workplace ergonomics and setup. Even in resource-constrained environments, targeted adjustments to the physical workspace can make a meaningful



difference. For example, small changes to the Reading Room environment such as improved lighting, flooring, and overall design, have further contributed to a work environment that is more conducive to well-being.

More broadly, these efforts reflect a shift from viewing workforce well-being as a separate initiative to treating it as an important design consideration. Technology, workflow, and workplace decisions are increasingly evaluated not only for their operational impact, but also for how they shape the day-to-day experience of the workforce.

© Siemens Healthineers AG

Sustaining change through leadership and culture

Dr. Neil M. Rofsky, System Chair of Mount Sinai's Radiology Department, also serves as Senior Associate Dean of Well-Being and Coaching. To improve employee well-being throughout the organization, he believes that a culture shift must take place, in addition to operational or structural reforms. He observes, "We have to move away from a mentality of 'work, work, work'".

Dr. Rofsky places strong emphasis on creating a more sustainable professional rhythm. In his view, efficiency is not simply about doing more, but also about creating space for recovery, reflection, and the focused work that requires creativity, learning, and clinical judgment. For Dr. Rofsky, implementing such changes depends heavily on role modeling. Leaders must demonstrate these behaviors themselves, not just speak about them. Only then will such working routines be perceived as established norms for younger colleagues to emulate. During his meetings with department heads, he encourages leaders to actively model this way of working.

Other elements of the culture Dr. Rofsky seeks to embed include a greater openness to feedback, and a willingness to be more creative with well-being pilot projects. Not every project must succeed. Instead, projects should be treated as essential parts of a broader improvement process. Presently, well-being interventions at Mount Sinai can receive annual grants of $25,000 from the Well-Being and Workplace Experience Core for pilot projects and to build the case for scaling.

Another initiative strongly supported by Dr. Rofsky is a mentoring program, currently available at Mount Sinai to everyone who is interested. The Mount Sinai Health System also offers mindfulness sessions and actively encourages participation. In addition, there is strong support and awareness around mental health with an excellent safety net for dealing with crisis situations, ranging from anonymous and confidential peer-to-peer support, to employee assistance programs, and psychiatric support when needed. Together, programs like these help to create a work environment that supports and encourages employee well-being.

© Siemens Healthineers AG

“There’s no one size fits all solution. It’s always different from department to department, institution to institution. So it’s important to listen first and then drive actions from what the team needs.”

Neil M. Rofsky, MD

The Radiology experience illustrates an important point: while the solutions may differ across departments, workforce well-being requires action at multiple levels. Some challenges are best addressed locally, while others benefit from organization-wide resources. Ultimately, workforce well-being is shaped by how organizations design work, support their people, and continuously improve the environments in which they work.

Takeaways for healthcare leaders

Mount Sinai’s experience demonstrates that workforce well-being can be built as a sustainable organizational capability. Through strategic commitment, a shared framework, governance, measurement, and local implementation, workforce well-being becomes embedded in the way work is designed and improved, supporting operational performance, workforce sustainability, and quality of care.

As healthcare organizations continue to face workforce shortages, operational complexity, and financial pressure, the Mount Sinai experience suggests that workforce well-being is increasingly becoming a defining organizational capability — one that influences performance, resilience, the ability to attract and retain talent, and ultimately the capacity to adapt in a rapidly changing healthcare environment.

© Siemens Healthineers AG

Six key lessons from Mount Sinai

01 Treat workforce well-being as a strategic priority

Like other enterprise priorities, workforce well-being requires clear ownership, governance structures, dedicated expertise, and sufficient capacity to support implementation over time.

02 Focus on measurable operational drivers

Rather than trying to solve every challenge at once, departments should concentrate on clearly defined issues that can be measured and addressed. In Radiology, for example, these included interruptions, administrative burden, and workflow inefficiencies. Addressing these friction points improved not only workforce experience but also productivity, teaching, and clinical efficiency.

03 Listen before acting

Organization-wide and departmental surveys can help to identify where interventions are most urgently needed and where they could have the greatest impact. Ideally, feedback should be gathered from all professional groups involved in day-to-day operations, not only physicians and leaders.

04 Start small, test, and scale

Many successful interventions can begin as pilot projects supported through targeted funding mechanisms. Organizational willingness to fund experimentation is critical, allowing departments to test ideas, demonstrate impact, and build the case for broader implementation. Effective approaches can then be adapted, scaled, and applied across other departments.

05 Combine central strategy with local ownership

While Mount Sinai's central Well-Being and Work Experience Core provides frameworks, measurement capabilities, and strategic direction, many of the most effective solutions emerge locally through collaboration, shared learning, and adaptation to departmental needs.

06 Don't let the search for perfect structures stop you from getting started

A practical lesson emphasized by the Mount Sinai experts is that meaningful progress does not require large infrastructures or extensive resources from the outset. Surveys, frontline listening, and adapting proven frameworks from peer institutions can provide a strong foundation to get started.

© Siemens Healthineers AG

Explore more



Shape 25 Spotlight

Empowering todays workforce for tomorrow
Best practices for a resilient and skilled healthcare workforce

↗ **Discover now**



Insights Series – issue 52

Turning workforce challenges into opportunities
How to use technology to overcome workforce barriers

↗ **Discover now**



Insights Series – issue 56

Well-being starts with culture
A healthcare leader's guide

↗ **Discover now**

About the Insights Series

The Siemens Healthineers Insights Series is our preeminent thought leadership platform, drawing on the knowledge and experience of some of the world's most respected healthcare leaders and innovators. The Series explores emerging issues and offers practical solutions to many of today's most pressing challenges in healthcare:

› **siemens-healthineers.com/insights-series**

Feedback

To submit feedback, or for any questions or further support, please contact us at:

✉ **strategic.marketing.team@siemens-healthineers.com**

Subscribe

To be added to our mailing list for updates on upcoming Insights Series papers, please click here:

Subscribe now

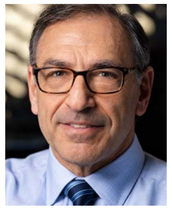
© Siemens Healthineers AG

About the authors



Jonathan A. Ripp, MD
Dean for Well-Being,
Icahn School of Medicine at Mount Sinai

Jonathan Ripp, MD, is Dean for Well-Being and Chief Wellness Officer at the Icahn School of Medicine at Mount Sinai, where he leads system-wide initiatives to advance the well-being of all members of the Mount Sinai community. An internationally recognized expert in clinician well-being, burnout prevention, and workforce resilience, he is co-founder and inaugural president of CHARM, a national consortium dedicated to advancing healthcare professional well-being. His research focuses on physician burnout and evidence-based interventions that promote resilience, professional fulfillment, and sustainable healthcare workplaces.



Neil M. Rofsky, MD
System Chair of the Department
of Diagnostic, Molecular and
Interventional Radiology,
Mount Sinai Health System

Neil M. Rofsky, MD, is Professor and System Chair of the Department of Diagnostic, Molecular and Interventional Radiology at the Mount Sinai Health System. He is an internationally renowned leader in academic radiology and an expert in MRI, with a track record of translating innovation into new standards of clinical care. Dr. Rofsky has incorporated coaching concepts into a transformational leadership style that he teaches on local, regional, and national levels to improve communication and collaboration. He also serves as Senior Associate Dean of Well-Being and Coaching, advancing well-being across the Mount Sinai Health System.



F. Scott Nowakowski, MD
Director of Quality
Interventional Radiology,
The Mount Sinai Health System

Francis Scott Nowakowski, MD, is Director of Quality for Interventional Radiology at The Mount Sinai Hospital, System Vice Chairman for Wellness for the Department of Radiology, and a nationally recognized interventional radiologist. He is a founding member of the iCARE Team, a peer-support program for healthcare professionals following challenging clinical events, and serves as the Well-Being Champion for Radiology. Through his role, he helps identify workforce challenges, develop local well-being initiatives, and foster a culture of support and continuous improvement.

© Siemens Healthineers AG

About the authors



Julia Rosa
Global Strategic Marketing Manager,
Siemens Healthineers

Julia Rosa is Strategic Marketing Manager at Siemens Healthineers, focusing on workforce related challenges in healthcare such as shortages, efficiency, and well-being. She has been with the company for more than seven years, previously working in product marketing for interventional cardiology.



André Steinbuss
Head of Core Marketing,
Siemens Healthineers

André Steinbuss is a Strategic Marketing Manager at Siemens Healthineers. His work in the Corporate Marketing department is dedicated to today's challenges in healthcare: staff shortage, planetary health, and digitalizing healthcare. He has been with the company for more than 20 years.

© Siemens Healthineers AG

References

1. Medscape. Physician Mental Health & Well-Being Report 2025 [Internet] 2025 [cited Nov 3, 2025].

   ↗ **View source**

2. Ligibel JA, Goularte N, Berliner JI, et al. Well-Being Parameters and Intention to Leave Current Institution Among Academic Physicians. JAMA Network Open. 2023;6(12):e2347894. doi:10.1001/jamanetworkopen.2023.47894

3. Hodkinson A, Zhou A, Johnson J, et al. Associations of physician burnout with career engagement and quality of patient care: systematic review and meta-analysis. BMJ. 2022;378:e070442. doi:10.1136/bmj-2022-070442

4. Internal survey data from Mount Sinai showed that, after introducing the Reading Room Coordinator function, the proportion of radiologists reporting that clerical tasks “always or very often” created a barrier to their well-being decreased from 77.9% to 39.4% (a reduction of nearly 50%)

© Siemens Healthineers AG

At Siemens Healthineers, we pioneer breakthroughs in healthcare. For everyone. Everywhere. Sustainably. As a leading medical technology company, we want to advance a world in which breakthroughs in healthcare create new possibilities sustainably. We've been pushing the boundaries in medical technology for more than 125 years. Today, we are active in imaging, diagnostics, cancer care, and minimally invasive therapies — augmented by digital technologies and artificial intelligence.

With our unique combination of strengths in Patient Twinning[1], Precision Therapy, and Healthcare AI, we take on the greatest challenges in healthcare. We help improve access to healthcare for underserved communities worldwide and overcome the most threatening diseases: Neurodegenerative and cardiovascular diseases, stroke, and cancer. We partner with healthcare providers to address their most pressing challenges so that they can deliver high-quality, patient-centered care, efficiently.

Motivated by our purpose and guided by our values, we foster an inclusive and innovative workplace for our diverse and engaged teams globally. We are a team of around 74,000 Healthineers in over 70 countries passionately pushing the boundaries of what is possible in healthcare so that patients can live with hope, not fear of disease.

[1] *Early detection, accurate diagnosis, individualized therapy selection, simulation and planning, continuous monitoring, and aftercare.*

Siemens Healthineers Headquarters
Siemens Healthineers AG
Siemensstr. 3
91301 Forchheim, Germany
Phone: +49 9191 18-0
siemens-healthineers.com

Published by Siemens Healthineers AG · QR700046986 · online · 1126 · *©Siemens Healthineers AG, 2026*