

Presentation Objectives

- Recognizes the symptoms of burnout and examine its scope and impact.
- Examine a framework promoting professional fulfillment
- How to assess organizational readiness to change
- Engaging the “C-Suite”

What is burnout?





Burnout

“An erosion of the soul caused by a deterioration of one’s:

- Dignity
- Spirit
- Values
- Will”

— Christina Maslach, PhD

Key Components of Burnout

1

Physical Exhaustion

Physically
overextended

2

Depersonalization

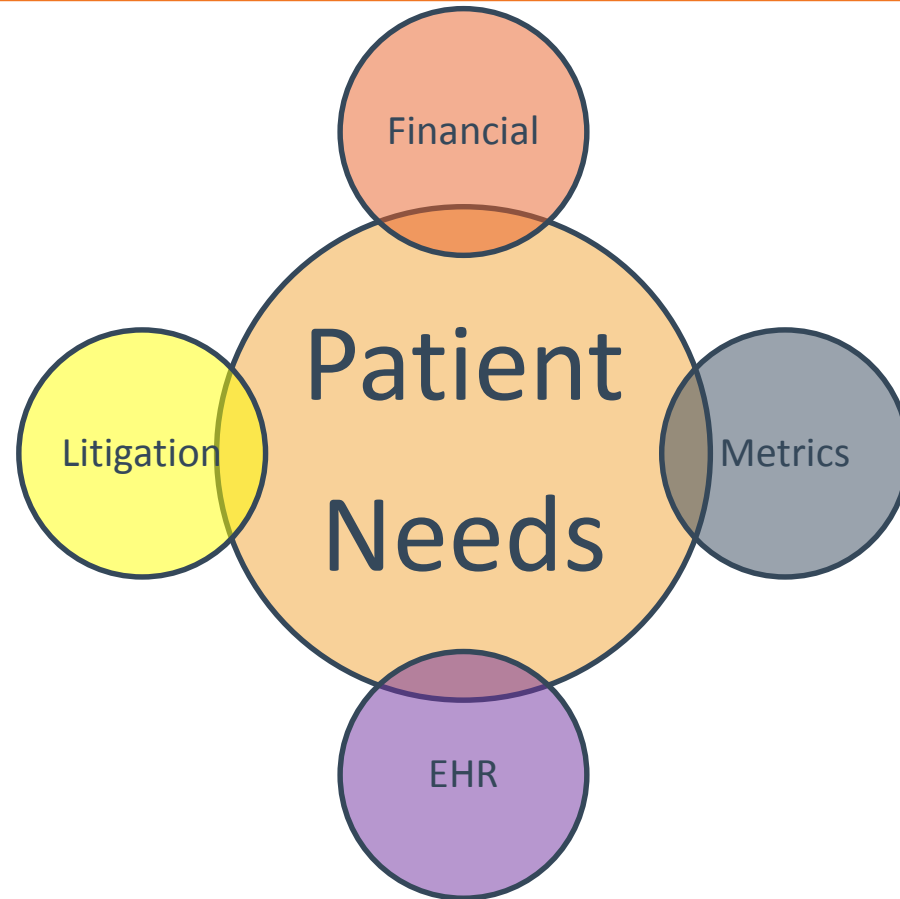
Impersonal response
to patients

3

Loss of Efficacy

Decreased sense
of accomplishment

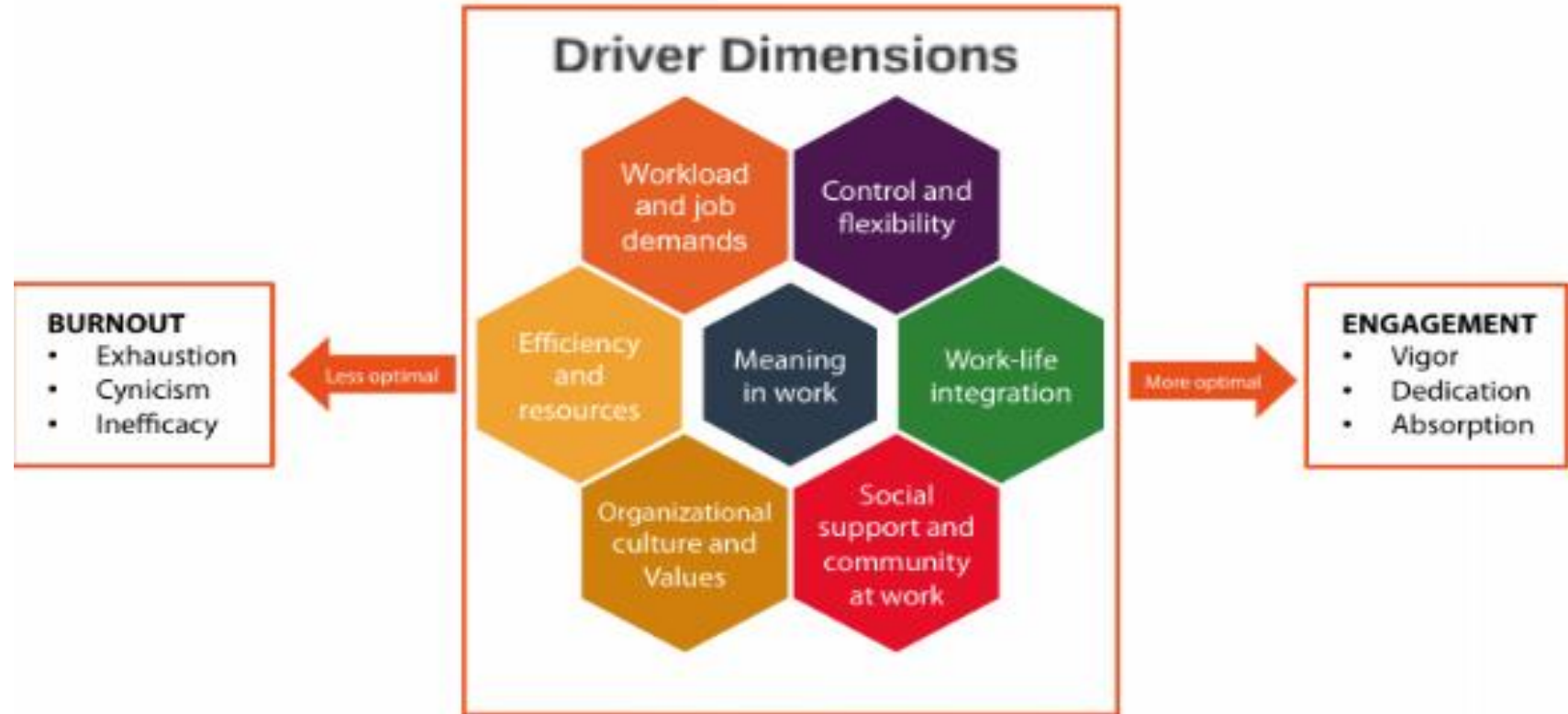
Moral Injury



Routinely experiencing the suffering, anguish, and loss of being unable to deliver the care that patients need is deeply painful. These routine, incessant betrayals of patient care and trust are examples of “death by a thousand cuts.” Any one of them, delivered alone, might heal. But repeated on a daily basis, they coalesce into the moral injury of health care.

Talbot, SG, Dean W . STAT ; July 2018 .

Driver Dimensions



Shanafelt, Mayo Clinic Proceedings 91:422

Burnout is not an attitude problem

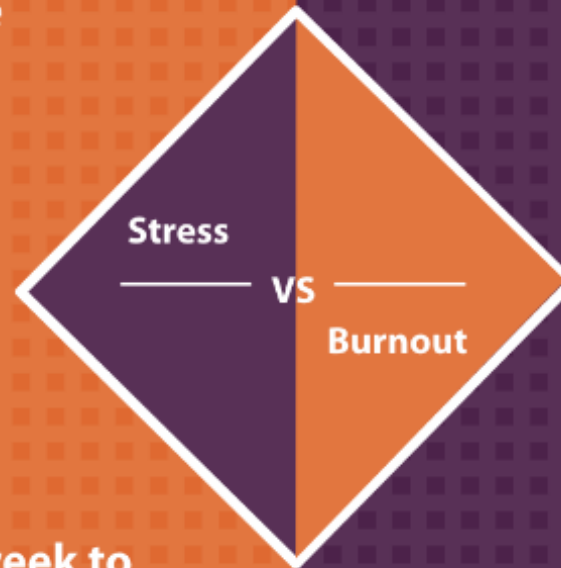
Burnout is a workplace problem

“Failure to recognize the human side of work or demands of superhuman efforts, people feel overloaded, frustrated and well, burned out. Self-improvement alone will not beat it.”

– Sexton J.B., et al. J Perinat 2006; 26:463-470

Stress vs. Burnout

- is a normal part of life
- not always bad
- resolves with time off
- is not overwhelming
- capable of recovery week to week



- Unable to recover due to relentless drain on energy reserves
- "I'm not sure how much longer I can do this"
- Doesn't improve with vacation or sabbatical
- Can be a strong catalyst for change

Why are we talking about it?



Reality Check – U.S. Health Care

- \$3.2 Trillion dollars spent annually
- 30 Million new patients accessing ACA
- 10,000 Medicare recipients added daily
- Turnover cost of physician burnout 17 Billion
- Turnover costs of nursing burnout 14 Billion
- Resident Physician Shortage Reduction Act has not passed since 2007

Forbes July 2013

The Business Case for Humanity in Healthcare April

Impact and Scope of Physician Burnout

50%

US physicians reported burnout

Medscape survey 2016

47%

considering change of how they practice in next 1 – 3 years

The Physician's Foundation Survey 2016

Predicted physician shortage:

34 - 88,000

By 2015: AAMC 2017

1 out of 50

Physicians plan to leave for different career, next 2 years

AMA

400+
Suicides annually

For every open primary care physician job, there is less than one applicant seeking that job.

**Cejka*

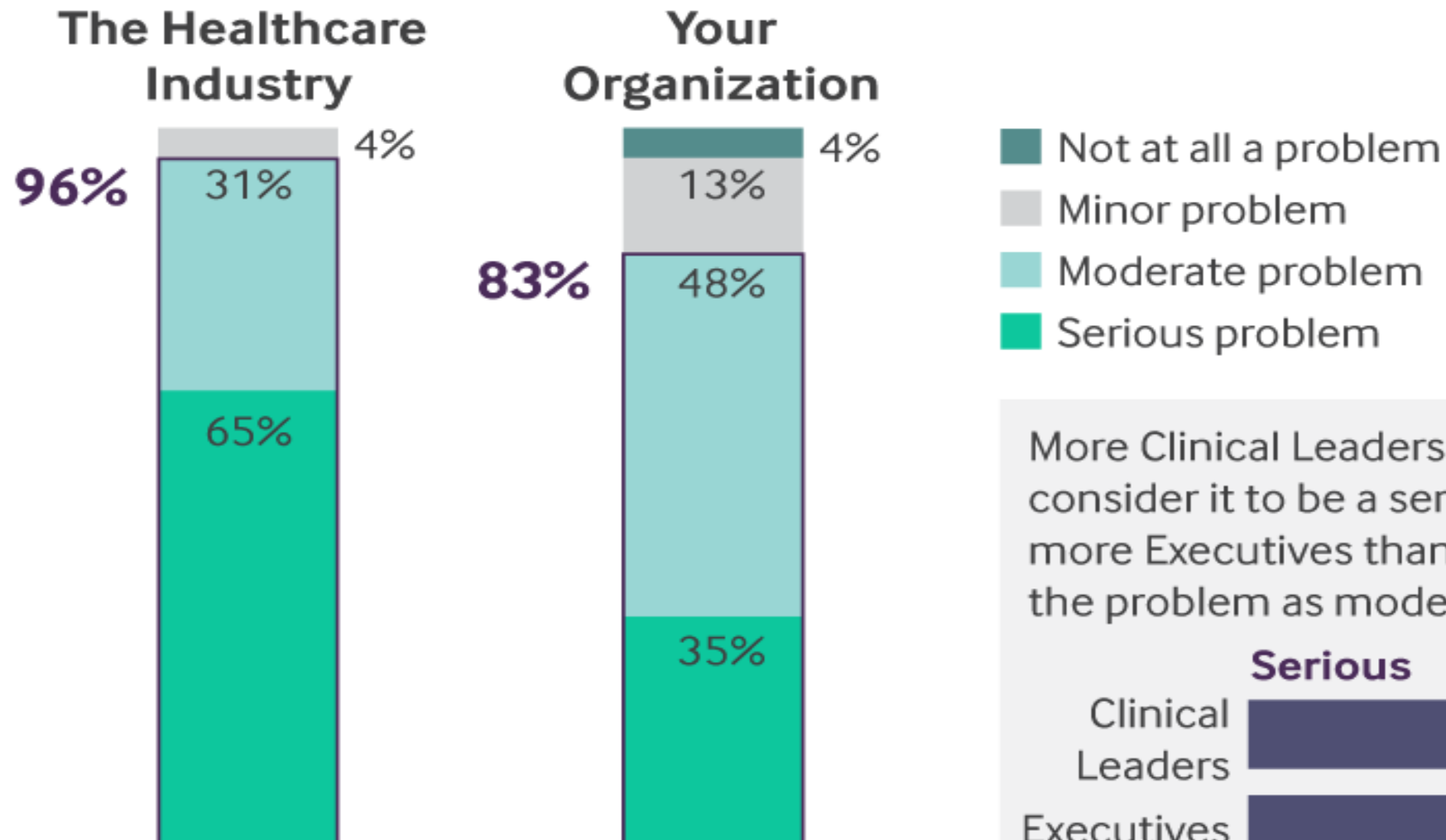
Burnout Statistics (Medscape 2016)

- Over 50% physicians in US reported clinical evidence of burnout
- Highest specialties were primary care especially Internal Medicine and Emergency Medicine reported nearly 60%
- No substantial difference between inpatient and outpatient physicians
- Gender differences females > male physicians
- Peak ages 46-55 years of age (less likely to volunteer or engage in leadership as well as most likely to leave profession)

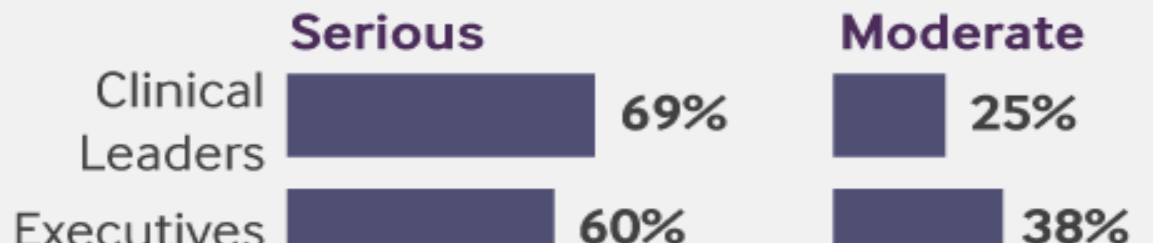
The Physician Burnout Problem Is Perceived to Be Larger Outside of One's Organization

NEJM Catalyst December 8 2016 Swenson S et al.

To what extent is physician burnout a problem in ...



More Clinical Leaders than Executives consider it to be a serious problem whereas more Executives than Clinical Leaders rate the problem as moderate.



Impact of burnout on nurses

- 24% ICU nurses tested positive for PTSD (Mealer et al. AJRCCM 2007)
- 26% ER nurses burned out (Adriaenssens et al. IJNS 2015)
- 30-35% oncology nurses experience burnout (Gomez-Urquiza et al. Psych-Onc 2018)
- 33% of new RNs seek another job within 1 year (2013)

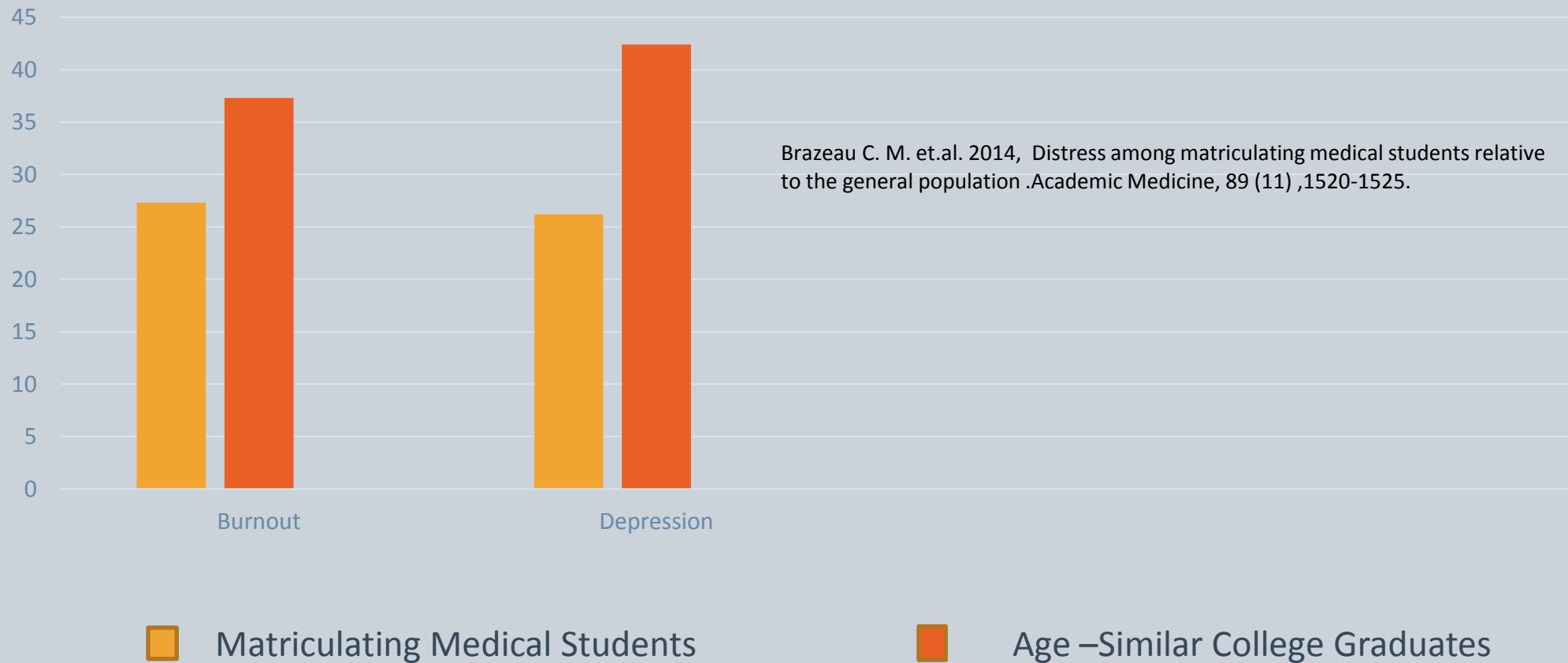
How Nurses Feel About Their Jobs

- The American Nurses Association (ANA, 2002) reported that the four most frequent responses to “how nurses felt about their jobs when they left each day” were:
 - Exhausted and discouraged (50%);
 - discouraged and saddened by what I couldn’t provide for my patients (44%);
 - powerless to affect change necessary for safe, quality patient care (40%); and
 - frightened for patients (26%).
- Exhausted, discouraged, saddened, powerless, frightened – these are the emotions experienced by nurses on a daily basis.

Medical Student Burnout



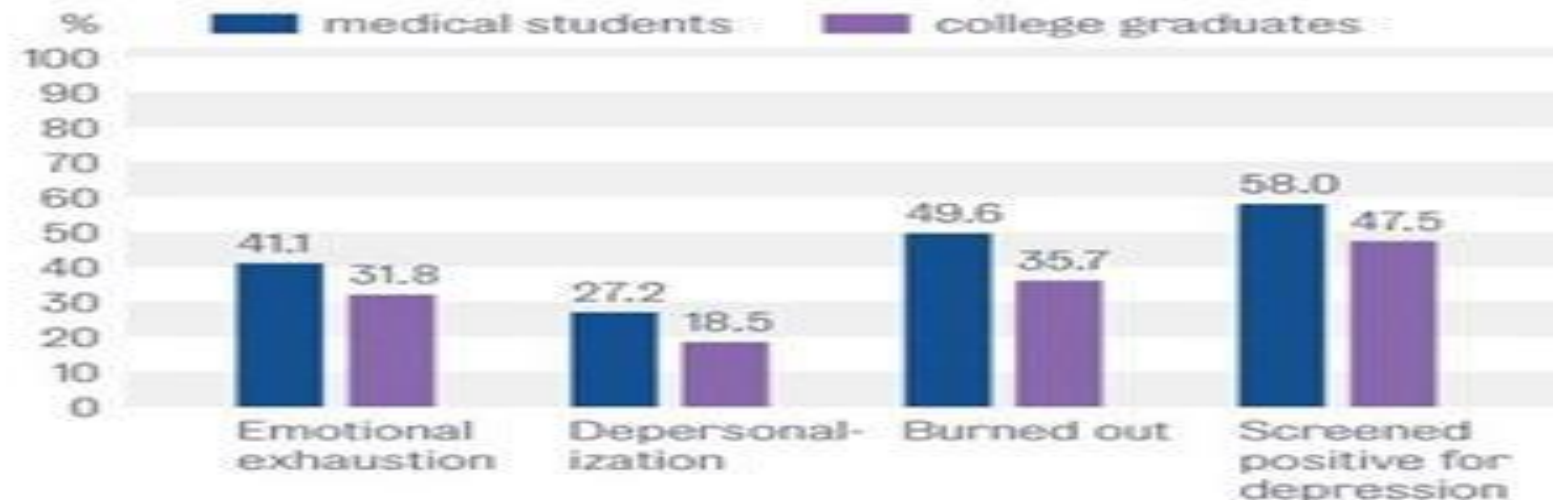
Future physicians have excellent mental health... before training begins



Burnout in Medical School Students

ARE MEDICAL STUDENTS MORE BURNED OUT THAN THE REST OF THE POPULATION?

In a 2014 study by the journal *Academic Medicine*, around 4,000 medical students aged 22 to 32 years old reported symptoms of burnout, exhaustion and depression. Their results were compared to over 700 responses by age-matched U.S. college graduates.



SOURCE: Burnout Among U.S. Medical Students, Residents, and Early Career Physicians Relative to the General U.S. Population. *Academic Medicine*, March 2014. Graphic reporting by Sbraya Aljar, Daily Bruin senior staff. Graphic by Jason Farwell, Daily Bruin contributor.

The Culture of Medical Education

- Cognitive overload and sleep deprivation
- Constant scrutiny
- Abuse and shame
- Detached from relationships
- Perpetual self postponement
- Cognitive intelligence > emotional intelligence
- Reductionist view
- Survivalist mechanisms (workaholic, superhero, lone ranger, perfectionist, emotionless)

The Physician Personality

Adaptive

Diagnostic rigor

Thoroughness

Commitment to patients

Desire to stay current

Recognize responsibility of patients trust

Maladaptive

Difficulty relaxing

Problem allocating time for family

Sense responsibility beyond what you control

Sense “not doing enough”

Difficulty setting limits

Confuse selfishness vs. healthy self-preservation

Difficulty taking time off

Why Focus on Physicians?

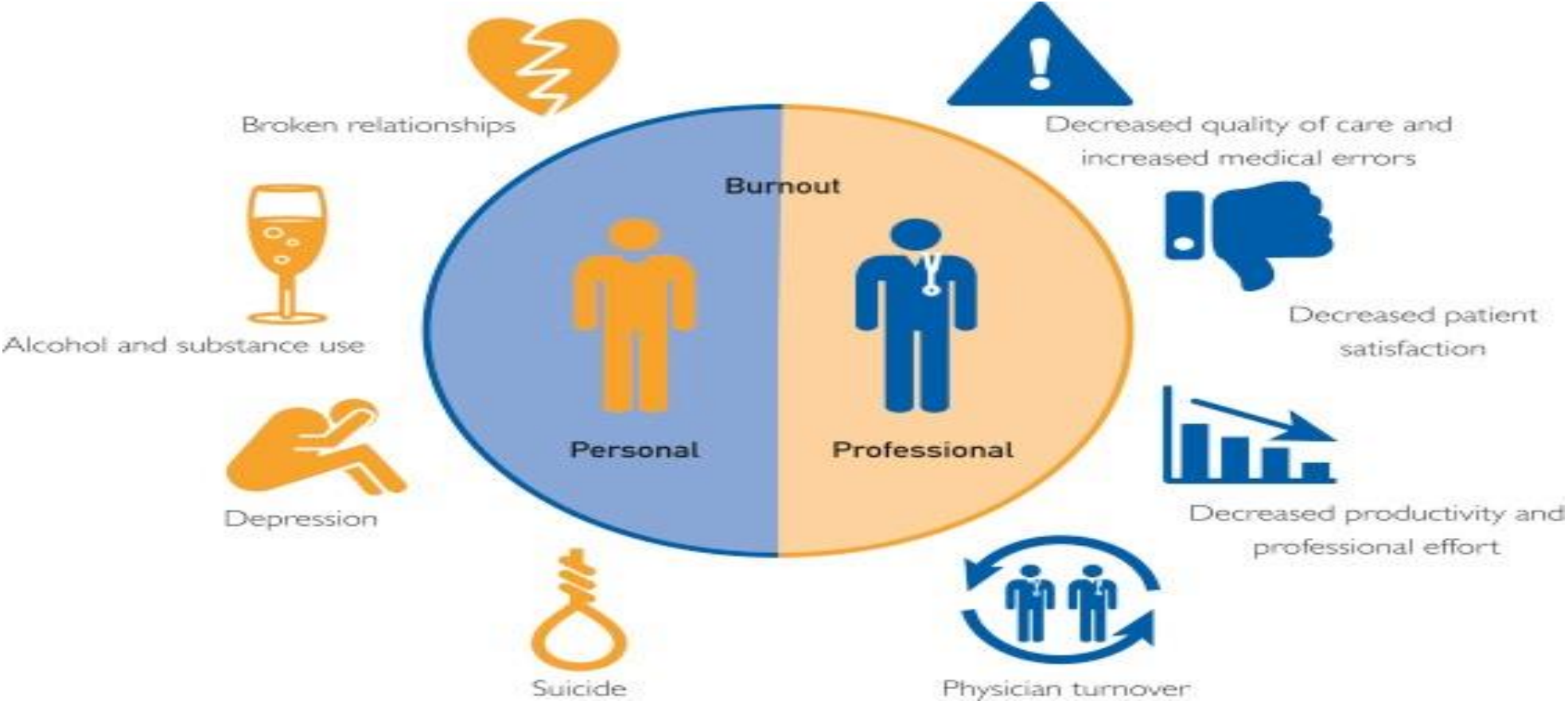
- Whole team matters
- Physicians have unique challenges
- Strongest business case
- Most affected group
- “Can’t boil the ocean”



Rationale for Investing in Physician Well Being

- Moral and ethical responsibility of HCO.
- Direct impact on patient care and success of a HCO.
- The existence of a strong and resilient physician culture is essential for HCO to survive and be nimble in an environment of constant change.
- Physician vacancies and recruitment are costly > 1M/ year per PCP.

Consequences of Physician Burnout



Consequences of Physician Burnout

Increase risk of suicide (400 physician suicides per year, equal preponderance of male and female physicians vs. national statistics males 4x more likely to commit suicide in the general population)

Even though doctors agree they have an ethical obligation to intervene when they believe a colleague is actually impaired, only 67 percent will report appropriately.

Terry K. Impaired physicians: speak no evil? *Med Econ.* 2002;79(19):110-112.

Addressing Physician Burnout



So...What Next?

“How can we transform healthcare without a healthy engaged physician workforce?”

Framework for Professional Fulfillment

Culture of Wellness

Organizational work environment, values and behaviors that promote self-care, personal and professional growth, and compassion for ourselves, our colleagues and our patients



Efficiency of Practice

Workplace systems, processes, and practices that promote safety, quality, effectiveness, positive patient and colleague interactions, and work-life balance.

Personal Resilience

Individual skills, behaviors, and attitudes that contribute to physical, emotional and professional wellbeing.

What Is Physician Wellness?

“Wellness goes beyond merely the absence of distress and includes being challenged, thriving, and achieving success in various aspects of personal and professional life.”

Shanafelt TD, Sloan JA, Haberman TM. The well being of physicians. *Am Med J* 2003; **114**: 513–17.



Establishment of Center for Physician Well-Being and Professional Development



Goals of the Center for Physician Well-Being and Professional Development

- Reduce physician stress
- Improve work-life integration
- Educate and train physician leaders
- Restore the joy of practice



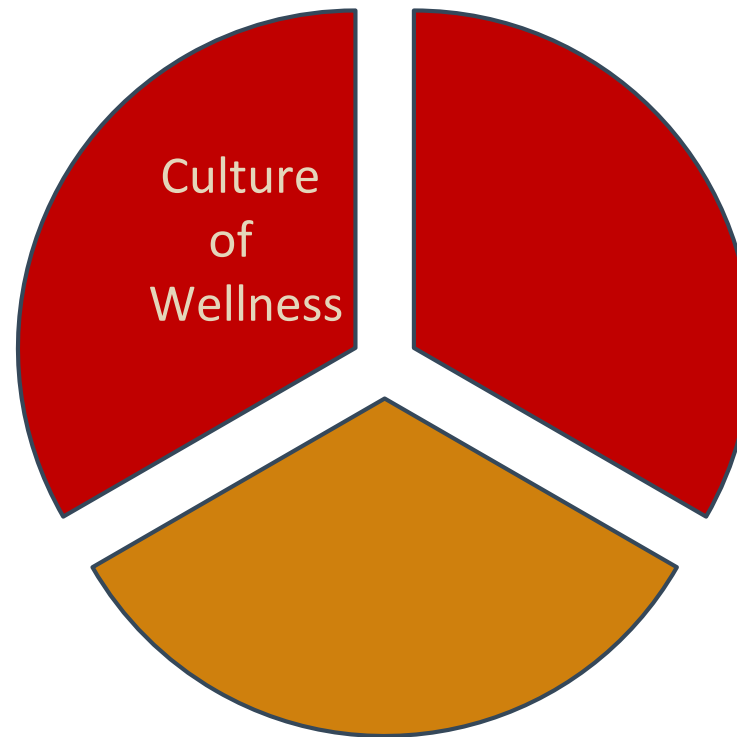
Framework for Professional Fulfillment

Education

Leadership training
and support

Measurement of
Fulfillment

Recognition and
appreciation



Collegiality

Career Fit

Fair and just culture

Resources to
support wellness

Why HR Can't Manage Burnout

- No cookie-cutter approach
- Have to focus on everyone
- Usually focus is on individual resilience
- Measure lagging indicators (turnover)
- Usually can't impact leadership

Visit the Website via inComm

The screenshot shows the inComm website home page. The top navigation bar includes 'News & Events', 'Where I Work', 'Departments', 'For Clinicians', and 'Who We Are'. A purple arrow points to the 'Providers' link in the 'For Clinicians' dropdown menu. The main content area features 'FEATURED NEWS' with a 'Community in the News' article, 'Around Community' and 'Online with Bryan' highlights, and 'MY NEWS' with articles on 'Hand Hygiene' and 'NRCP News'. A search bar is located in the top right. The bottom of the page shows a Windows taskbar with various application icons.

The screenshot shows the inComm website 'Providers' page. The top navigation bar is the same as the home page. The main content area is titled 'Providers' and includes 'Information for our providers' with links to 'Clinical Education', 'Clinical Engineering', 'Dietitian and Nutrition Services', 'Library', 'Patient Education', 'Pharmacy', and 'Transfer Center'. A 'Center for Physician Well-Being' link is highlighted with a purple arrow. The right sidebar contains 'RESOURCES', 'OUR EVENTS', and 'RELATED' sections. The bottom of the page shows a Windows taskbar with various application icons.



- Physician Leadership Development
- WorkLife Assistant
 - Time-saving virtual concierge services to help with family & personal daily living tasks
- Legal & Financial Resources
- Time of Need support for physician/provider & their families:
 - Stress & Burnout
 - Depression
 - Conflict & Relationships
- Available 24 x 7

Why Does Strong Leadership Matter?

- Increases team engagement
- Improves overall quality of care
- Increases productivity
- Improves patient satisfaction
- Reduces staff and physician turnover
- Overall improves performance and results in better outcomes!

Swensen, Stephen, et. Al. J of Man. Dev. 35.4 (2016):549-570



Cultural Attributes Most Valued by Physicians

- Skilled leadership that demonstrated awareness and concern for their needs
- Collaborative environment between administrators and providers
- Accountability of both physicians and administrators



Culture of Wellness: Strategy



know me

Know that I'm an individual and have a unique story.

include me

Be transparent and include me in the conversation.

empower me

Respect me and empower me to act.

Quantitative Data Collection: Leadership Index

My immediate supervisor:

- Holds career development conversations with me
- Empowers me to do my job
- Encourages me to suggest ideas for improvement
- Treats me with respect and dignity
- Provides helpful feedback and coaching on my performance
- Recognizes me for a job well done
- Keeps me informed about changes taking place
- Encourages me to develop my talents and skills
- Overall, how satisfied are you with your immediate supervisor



Shanafelt, Menaker, Buskirk, Gorridge, Swensen. 12 Leadership Dimensions. Mayo Clinic Proceeding. April 2015: 90(4): 432-440

Impact of Organizational Leadership on Physician Burnout and Satisfaction



- What the study found was that for each 1-point increase in composite leadership score, there was a commensurate 3.3% decrease in likelihood of burnout and a 9.0% increase in the likelihood of job satisfaction

Shanafelt, T.D., et al. (2015)

Mayo Clinic Proceedings, 90(4), 432-440

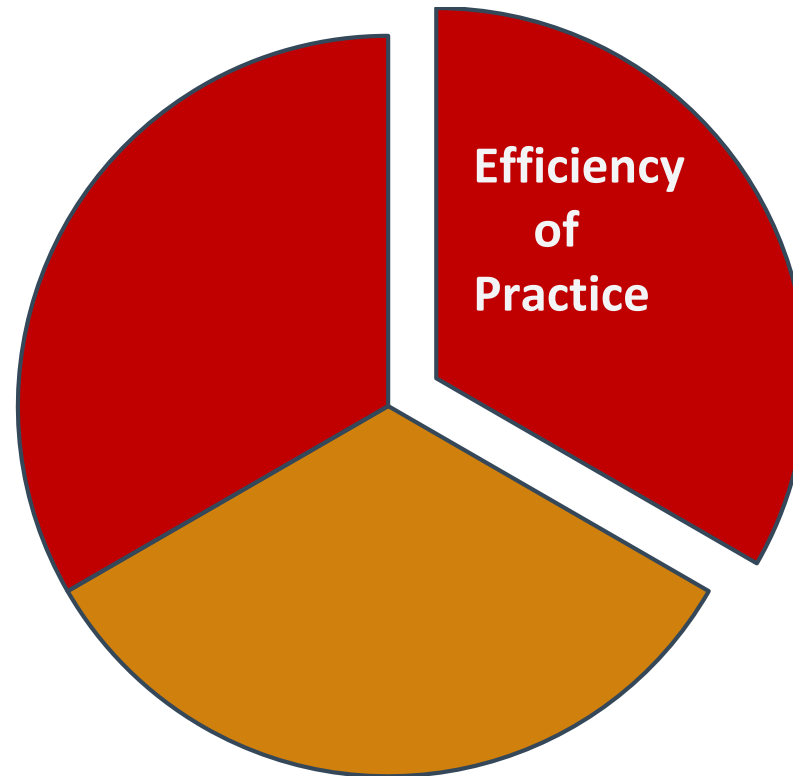
Framework for Professional Fulfillment

Reduce inefficient work

Provider involvement
in redesign

Team care models

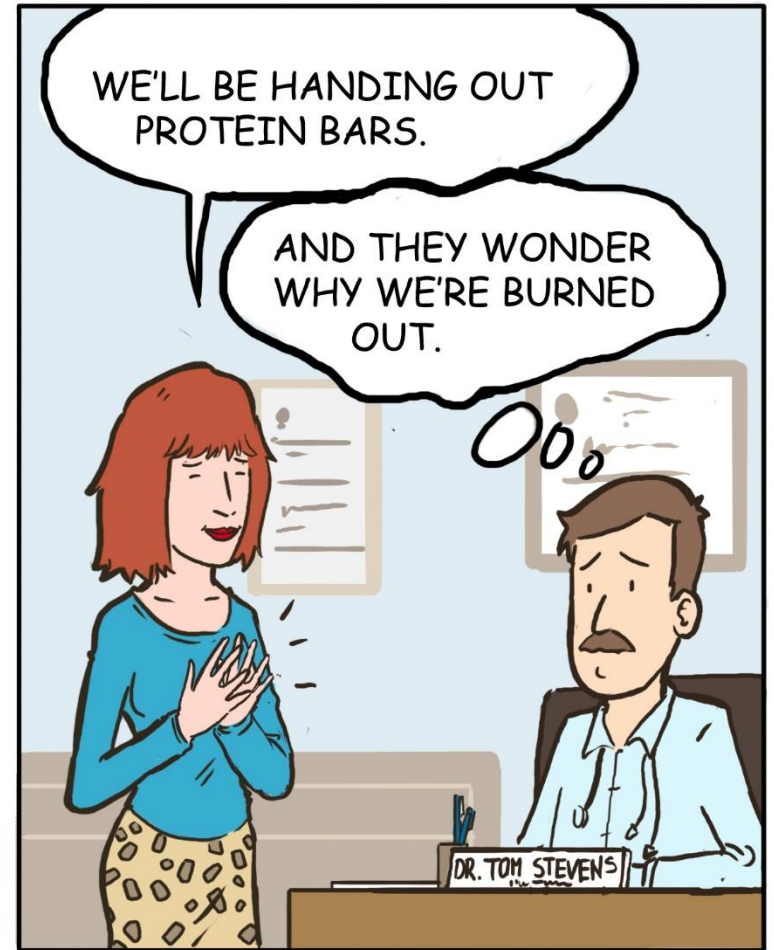
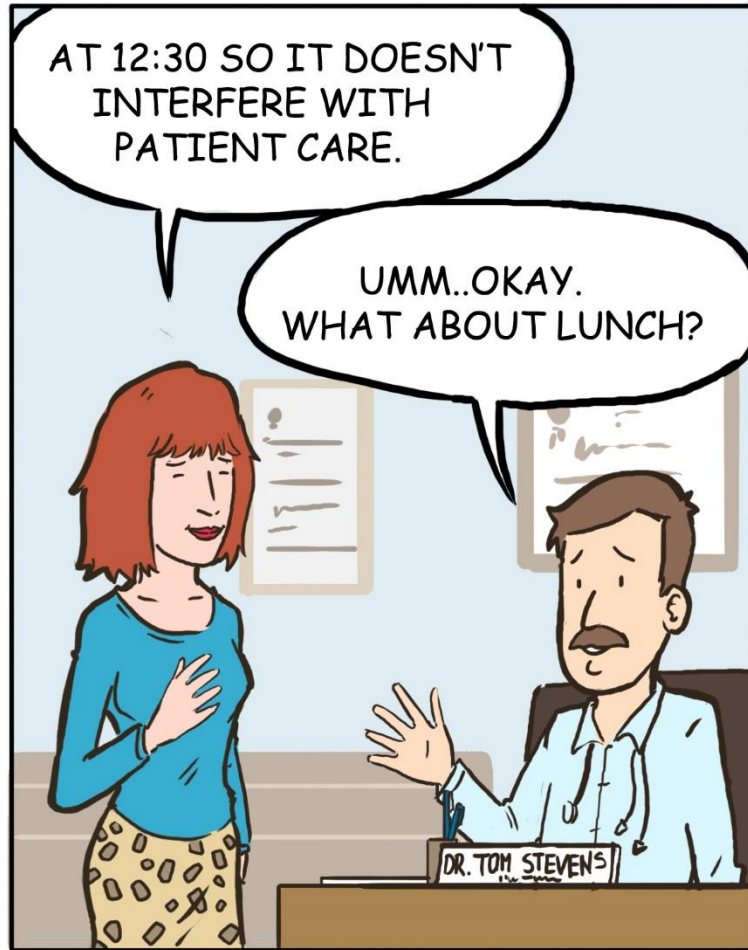
Workspace redesign



Staffing to
accommodate
predictable absences

Minimize in-box
and email

DOC RELATED



Dr .Peter Valenzuela

Addressing Physician Resilience

“We tell physicians to get more sleep, eat more granola, do yoga, and take better care of yourself.

These efforts are well intentioned. The message to physicians however, is that you are the problem.”

– Tait Shanafelt, MD

Resilience: Do you bounce or break?

Resilience is a function of your
ability to cope (individual)

and

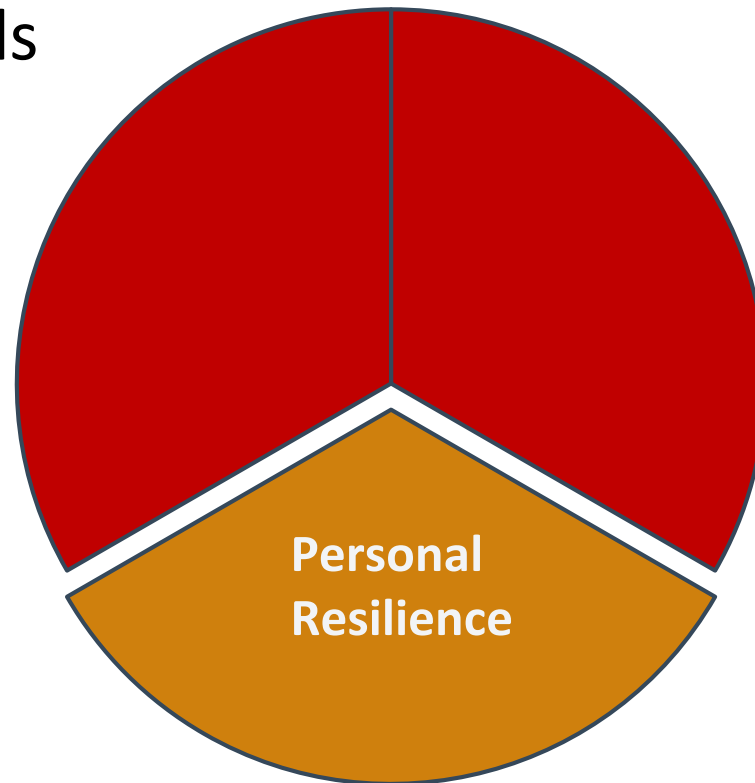
availability of resources (environment)
related to health/well being

Framework for Professional Fulfillment

Rituals and firewalls

Sleep

Life calendar



Self Care

Exercise

Nutrition

MBSR



Community
Health Network

*"Mindfulness is
paying attention
in a particular way;
on purpose,
in the present moment,
and nonjudgmentally."*

Jon Kabat-Zinn

Consequences of sleep deprivation

- Intermittent lapses in attention
- Inaccurate processing of others' emotions
- Decreased affect regulation
- Inaccurate reward/incentive processing
- Decreased hippocampal encoding of long-term memory



Krause, A. J. et al.(2017) The sleep deprived human brain. Nature Reviews Neuroscience, 18(7),404-418

Deterioration of cognitive performance

- Two consecutive nights with less than 6 hours sleep are associated with decreases in performance which last for a period of 6 days



Althoff, T., Horvitz, E., White, R. W., & Zeitzer, J. (2017). Harnessing the Web for Population-Scale Physiological Sensing. *Proceedings of the 26th International Conference on World Wide Web - WWW 17*. doi:10.1145/3038912.3052637

Work Home Conflicts

WHC associated increased risk:

- Burnout (37% vs. 17%)
- Depression (51% vs. 21%)
- Intent to reduce clinical hours
- Leave current position next 24 months
- Decreased satisfaction relationship partner
- Increased likelihood separation or divorce

Dyrbye , Arch Surgery 147:933; Dyrbye, JGIM 29:155; Dyrbye Arch Surg 146:211; Dyrbye, Arch Int Med 171:1207; Guille, JAMA Int Med 177:1766

Barriers to Resilience

- Physicians often fail to use flexible policies
- Lack of information on eligibility and benefits
- Workplace norms and culture
- Uninformed leadership
- Use shifts burden of work to colleagues

Where Do You Start? Organizational Readiness

- Assess Current State of Organizational Culture
- Mission, Vision, Values
- Respect for People (Physicians, Staff, Leadership)
- Attitudes and Morale (Cynicism/Passivity vs. Engagement)
- Operational Concerns (Practice efficiency, quality, safety)
- Financial Environment (Operating margins/Market competition, Compensation Structures)

Find Your Burning Platform

- Medical Errors
- Physician Dissatisfaction
- Recruitment and retention issues
- Productivity
- Quality metrics
- Patient satisfaction
- Suicide
- Physician engagement



Making the Business Case

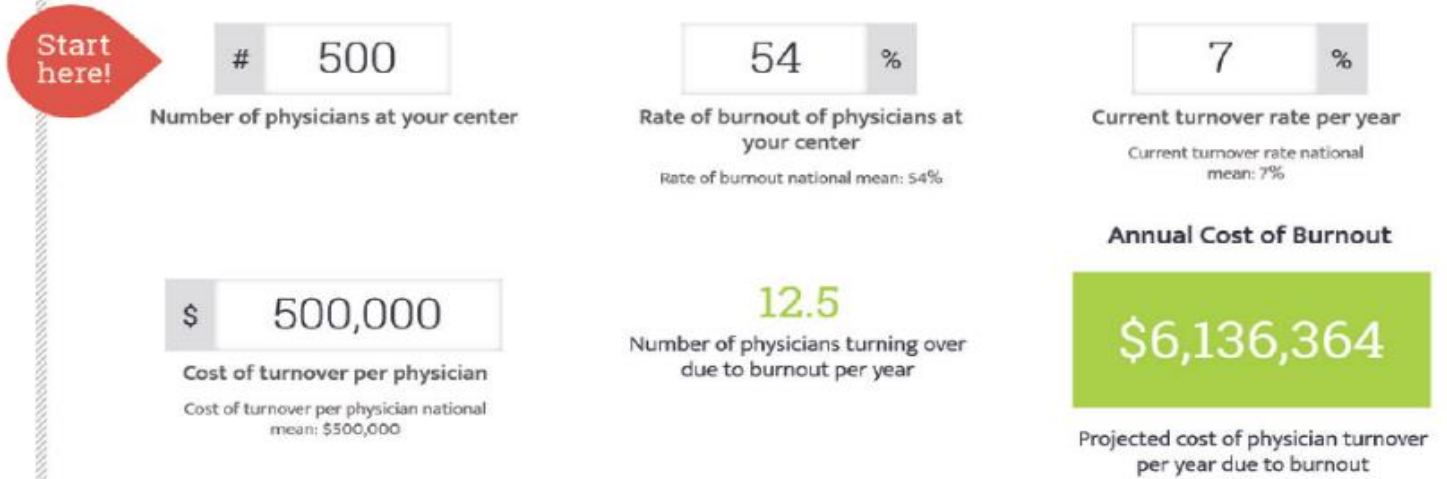
- Wellness as a health system strategy (Quadruple Aim)
- Quality indicator
- Recruitment, engagement, retention
- Professionalism effect on culture
- Speak the language, know management methodologies
- Use local data and challenges
- Explain why physicians are unique and that interventions go beyond traditional HR programs
- Start small timelines and deliverables

Facing the Headwinds

- Physician cynicism
- Complex organizations
- Competing priorities
- Financial resources
- “At or below the mean is acceptable”
- Bureaucratic inertia
- Lack of a safe culture (Blame and shame)
- Unwillingness to provide time /compensation to lead efforts

Organizational Cost Calculator of Replacing Physicians










Projected cost of physician burnout in terms of turnover. (Other costs of burnout, in terms of medical errors, malpractice liability, patient satisfaction, productivity and organizational reputation, are not included.)



Return on Investment for Interventions to Reduce Burnout



Strategies for Healthcare Organizations to Promote Physician Wellness

-  Acknowledge and assess the problem
-  Harness the power of leadership
-  Develop and implement targeted work unit interventions
-  Cultivate community at work
-  Use rewards and incentives wisely
-  Align values and strengthen culture
-  Promote flexibility and work-life integration
-  Provide resources to promote resilience and self-care
-  Facilitate and fund organizations science

Shanafelt, Mayo Clin Proc
January 2017

Common Pitfalls

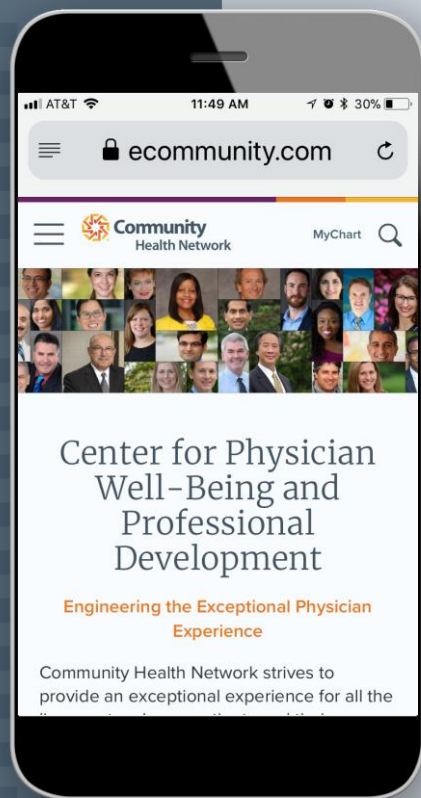
- Initial program scope too large
- No baseline metrics
- Senior leadership and Board support lacking
- Multiple non-integrated wellness efforts
- Lack of a business case
- No demonstrable ROI
- Limited financial resources
- Lack of administrative support

Problems Measuring Burnout

Measuring Burnout...

- ▶ Overall results look great! But...
- ▶ Mathematically there is a ceiling effect in measuring burnout
- ▶ Because of the sensitive nature of some items, respondents must feel comfortable about their true feelings
- ▶ Anonymous nature precludes using it as a screening tool
- ▶ "Sensitization" to burnout phenomenon due to personal expectations and beliefs
- ▶ Validity: is expressing burnout a measure for dissatisfaction with job or a measure of depression (prevails all aspect of life)
- ▶ Designed for all professions, but is health care different?
- ▶ Communicates message of impending doom
- ▶ Not helpful for designing program level interventions

Metrics of Success



- Vital Work Life Utilization and Physician engagement
- Serve360° participation
- Physician Leadership Academy enrollment and career growth
- Patient satisfaction
- Physicians utilizing vacation time
- PFI Stanford
- Physician recruitment
- Physician attrition/exit interviews
- Website utilization internal and external
- Internal promotion
- Disruptive/impaired MD referrals

Physician Engagement Surveys 2014-2017



- Statistically significant sustained survey participation (>58% of employed physicians)
- A four year high in engagement, ranked in 92nd percentile (4% absolute increase and 10% relative increase)
- Only 1 in 10 demonstrated symptoms of burnout (National average approximately 50%)
- 12% decline in perception of burnout across employed providers (30% relative decrease)

Key Takeaways

- Burnout is a significant threat to a provider's career and a HCO ability to provide high quality healthcare
- There are compelling and undeniable reasons to invest in provider well-being and leadership development
- Investing in provider well-being and physician leadership builds strong organizational culture
- A strong, healthy , engaged provider workforce is vital in order to succeed in this ever-changing healthcare environment.



Live Content Slide

When playing as a slideshow, this slide will display live content

Social Q&A