

Not Your Typical Wellness Talk

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We have no disclosures.



Learning Objectives

- Describe the current state of clinician well-being
- Explore the prevalence and impact of the less commonly discussed sources of burnout
- Review resources available to support clinicians



The image shows two bright yellow bells hanging from a white, possibly sterile, garment. The bells are positioned in the foreground, with their ribbons trailing down. The background is a blurred hospital room, showing rows of blue padded beds and medical equipment. The lighting is soft and clinical.

*“In health care, we tend to
value helping others before we
help ourselves.”*

Jessi Gold, MD, MS
@drjessigold

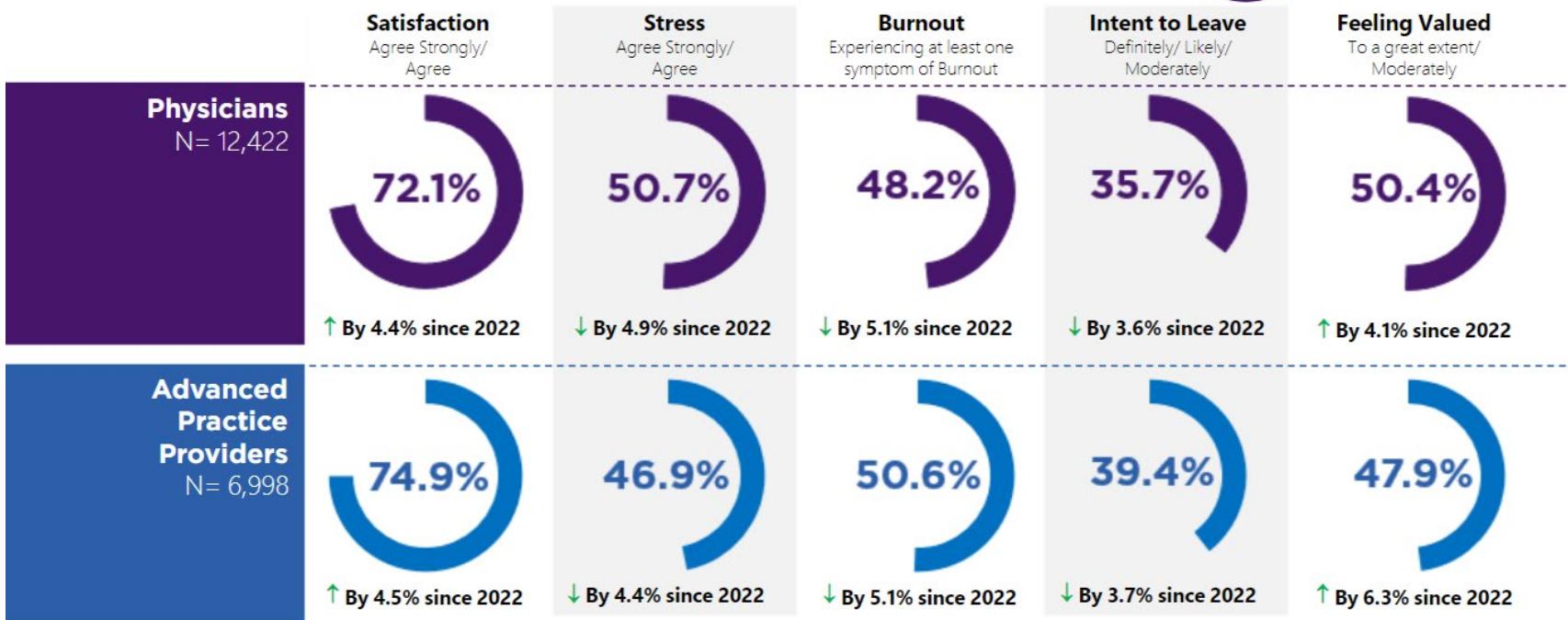
Burnout

- Emotional exhaustion
- Depersonalization, cynicism
- Low sense of personal accomplishment



2023 Key Performance Indicators

Role Results with Comparison to 2022 National Results



Burnout prevalence for other team members: 54% for nurses, 60% for medical students and residents, and up to 75% for pharmacists (Jones et al., 2017; NASEM, 2019; Patel et al., 2021)



**NATIONAL
PLAN** for health
workforce well-being



[National Plan for Health Workforce Well-Being - National Academy of Medicine \(nam.edu\)](https://nam.edu)

“The severe health workforce shortage, beyond pre-pandemic projections and most critically among nurses, health aides, and assistants, places an enormous burden on remaining health workers and jeopardizes the health of the nation.”

“Recent surveys showed high-stress work environments are driving more physicians (20 percent) and nurses (40 percent) to leave their practice.”



The Consequences

- Lower patient care quality, safety and experience
- Increased malpractice claims
- Increased risk of substance use disorder, depression & suicide
- Lower morale and productivity
- Turnover affecting workload & patient access to care



Addressing Burnout is Important . . . and Hard

- Redesign of structures, workflows, policy all improve burnout
- These activities take considerable time + energy
- If we wait on others to solve burnout, likely to wait a long time
- Hard to do when workforce is depleted . . .

So where to start?



We can...

- Raise awareness
- Normalize & validate stressors commonly faced by clinicians
- Destigmatize getting help
- Take care of ourselves
- Support one another



So, on a 1 to 9 on rubberduck scale, how are things today?



**The less “talked about”
contributors to burnout....**



People keep asking me "how's it going" like I have any idea what's going on at any point.



Imposter Syndrome



Imposter Syndrome

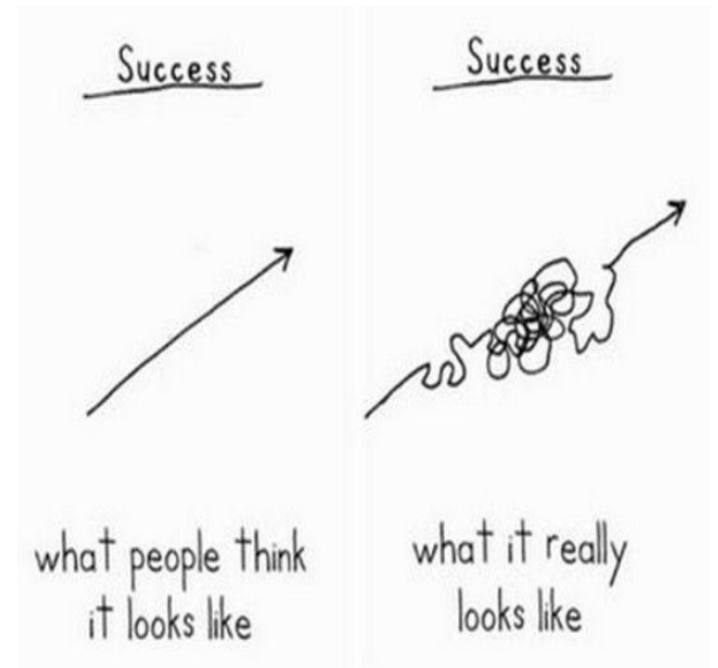
- Feeling inadequate and incompetent despite contradictory evidence
- **Most common among high achievers**
- Presents most strongly during transitions
- Affects both genders

What Impostor Syndrome Feels Like



Dealing with Imposter Syndrome

- Be aware of it; “Name it to tame it”
- Recognize that you are not alone in experiencing this
- Expect it to occur at transitions
- Have trusted colleagues who can support you





Melissa Capriglione @ Basil and Orega... ...
@mcapriglioneart

When you ask me how I'm doing and I say "I'm functioning" this is what I mean



Moral Distress & Injury

Psychological distress from witnessing, perpetrating or failing to prevent acts that transgress core moral beliefs such as:

- Inability to deliver the level of care one would like to due to structural constraints (e.g., staff shortages, network outage, visitation policies)
- Balancing one's own physical/mental health with that of patients

*Source: Greenberg, Docherty, Gnanapragasam & Wessely. Managing mental health challenges faced by healthcare workers during covid-19 pandemic. BMJ 2020;368:m1211 doi: 10.1136/bmj.m1211 (Published 26 March 2020)



Effects of Moral Injury

- Feelings of guilt, shame and disgust
- Negative thoughts about self and/or others
- Can contribute to depression & anxiety

*Source: Greenberg, Docherty, Gnanapragasam & Wessely. Managing mental health challenges faced by healthcare workers during covid-19 pandemic. BMJ 2020;368:m1211 doi: 10.1136/bmj.m1211 (Published 26 March 2020)



Preventing Moral Injury

Proactively provide opportunities to discuss ethical challenges before, during and after

- Include honest assessment of what is likely to occur
- Create safe space to share emotional challenges
- Encourage clinicians to seek support
- Team leads and more experienced members check-in with others

Monitor psychological well-being of team

- Those suffering often don't discuss it due to shame and guilt

*Source: Greenberg, Docherty, Gnanapragasam & Wessely. Managing mental health challenges faced by healthcare workers during covid-19 pandemic. BMJ 2020;368:m1211 doi: 10.1136/bmj.m1211 (Published 26 March 2020)



Second Victim Syndrome

- The emotional and psychological impact on healthcare providers who have been involved in a medical error or adverse patient event.
- >90% of physicians report previous involvement in events ranging from near misses to serious errors & >80% report some degree of job-related stress
- Clinicians report feelings of shame, anger, failure, depression (3-fold increase), inadequacy, and loss of confidence, PTSD and decreased QOL
- Feelings can be long-lasting

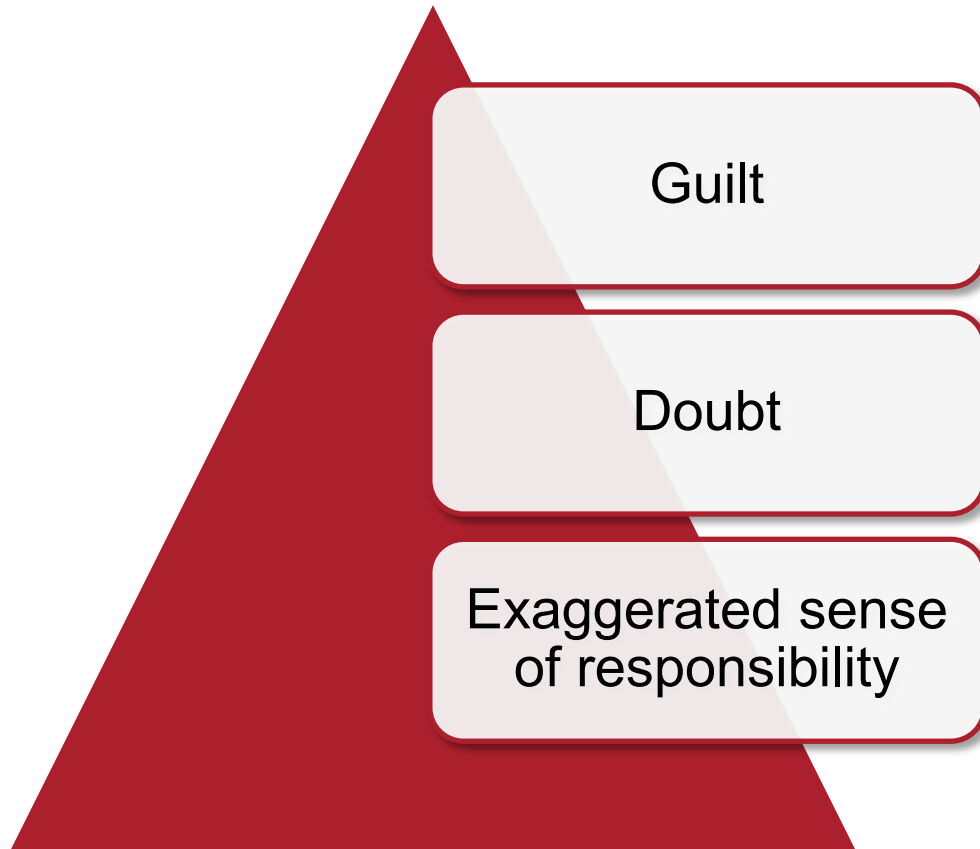


Second Victim Syndrome

- Remember you are only human. People make mistakes.
- Seek support
- Participate in debriefing sessions
- Connect with trusted colleagues



Physician Triad



Gabbard, et al. JAMA, 1985



There's a Name for the Blah You're Feeling: It's Called Languishing

The neglected middle child of mental health can dull your motivation and focus — and it may be the dominant emotion of 2021.

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Common reactions to chronic traumatic stress

- Lower creativity
- Irritability/impatience
- Disinterest in social activities
- Short-term memory problems



"Are you ok?"

Oh my god no, but for the purposes of this conversation yes I'm fine.



Check-in Guide for Self & Others



Identify

Assess to see if you or someone you care about are experiencing stress in one of these areas.

Physical	Emotional	Cognitive	Behavioral
<ul style="list-style-type: none">• Sleep disturbance• Fatigue• Headache	<ul style="list-style-type: none">• Irritability• Anxiety• Guilt• Sadness	<ul style="list-style-type: none">• Difficulty concentrating• Forgetfulness• Racing thoughts	<ul style="list-style-type: none">• Impulsivity• Withdrawal• Isolation• Avoiding responsibilities



Initiate

Reach out to your colleagues one-on-one or in small informal groups*.

Ask open-ended questions to initiate meaningful conversation.

“What has been the most difficult thing for you lately?”

“How has it been for you these past few weeks, months?”

“You seem to be handling the situation well. Is my perception accurate?”

Share your own stressors to normalize difficulties and allow for honest sharing.

“Recently, [insert here] has been really hard for me lately. How has that been for you?”

**Consider dedicating time at your team meetings to check in*



Intervene

Take action to make change or get help.

- If you are struggling, you are not alone. Find a trusted peer and/or professional for help.
- If your colleague is struggling:

Actively listen and rephrase what they are saying	Validate and legitimize their emotions
Share what's helped you in the past	Ask what's worked for them in the past
Share available resources and offer to accompany a colleague to a program, meeting, etc.	Commit to check in again



Evidence-Based Stress Management

- Mindfulness
- Move your body
- Time outside
- Connection
- Creative outlets
- Relaxation techniques
- Gratitude



When should I seek help?

- Intrusions (nightmares, flashbacks, intrusive thoughts)
- Hyper-arousal (anxiety, insomnia, irritability, etc.)
- Depressive symptoms that won't go away
- Avoiding feelings by using substances
- Feeling numb, spaced out or like things aren't real
- When daily functioning is affected



How can the arts and humanities help with burnout?

- Research with medical students shows that engagement with the humanities:
 - Reduces burnout
 - Increases empathy, perspective, wisdom



Nebraska Medical Orchestra & Choir



Vacations Matter!

- Taking vacation [increases positive emotions](#) and reduces depression.
- According to the Framingham Heart Study, men who didn't take vacations were 30-percent more likely to have a heart attack and women were 50-percent more likely
- Taking vacation can improve performance. For every additional 10 hours of vacation time, year-end performance improved 8% in one study.





Original Investigation | Health Policy

Vacation Days Taken, Work During Vacation, and Burnout Among US Physicians

Christine A. Sinsky, MD, MACP; Mickey T. Trockel, MD, PhD; Lotte N. Dyrbye, MD, MHPE; Hanhan Wang, MPS; Lindsey E. Carlasare, MBA;
Colin P. West, MD, PhD; Tait D. Shanafelt, MD

- 60% of physicians reported taking <3 weeks of vacation
- 70% worked during a typical vacation day
- Taking >3 weeks vacation per year and having adequate coverage while away was associated with lower burnout



National Academy of Medicine Change Maker Campaign

Priority Areas for Health Workforce Well-Being

1 Positive work
& learning
environments
& culture

2 Measurement,
assessment,
strategies &
research

3 Mental health
& stigma

4 Compliance,
regulatory &
policy barriers
for daily work

5 Effective
technology
tools

6 Well-being as a
long-term value

7 Diverse &
inclusive health
workforce



EXTERNAL RESOURCES FOR SUPPORT

Crisis	Peer Support	Burnout	Substance Dependence
External Resources (* Available to Physicians & APPs)			
<p>24/7 Crisis Lines *</p> <p>Dial 988 or 1-800-273-8255 Text 741741</p> <p>Support available in English, Spanish and translation to over 150 languages</p>	<p>Physician Support Line</p> <p>Offers free and confidential peer support to American physicians and medical students by creating a safe space to discuss immediate life stressors with volunteer psychiatrist colleagues who are uniquely trained in mental wellness and also have similar shared experiences of the profession.</p> <p>Dial 1-888-409-0141</p> <p>Visit their resource page for tools to maintain and enhance your well-being.</p>	<p>Decreasing Physician Burnout</p> <p>A way to understand the difference between stress and burnout. A method to see if you are at risk for - or suffering from - physician burnout.</p> <p>Three distinct methods to reverse and prevent physician burnout</p>	<p>Substance Abuse and Mental Health Services Administration (SAMHSA) *</p> <p>Confidential free help, from public health agencies, to find substance use treatment and information. The service is open 24/7, 365 days a year</p> <p>Dial 1-800-662-HELP (4357)</p>
<p>Disaster Distress Helpline *</p> <p>Call 1-800-985-5990</p>	<p>Emotional PPE Project *</p> <p>A directory that provides contact information of volunteer mental health practitioners to healthcare workers who are in need of no cost, no insurance, or confidential therapy.</p>	<p>American Psychological Association *</p> <p>Videos:</p> <ul style="list-style-type: none"> ● Calm Yourself ● Ground Yourself ● Relax Yourself ● Focus Yourself ● Celebrate Yourself 	
<p>National Domestic Violence Hotline (24/7) *</p> <p>Call 1-800-799-7233</p>	<p>Therapy Aid Coalition *</p> <p>Free & Low Cost Therapy for US Healthcare Professionals and First Responders</p> <ul style="list-style-type: none"> ● Available In person, online, or both. ● Availability based on zip code ● Some free or low cost ● Have some resources for Substance Dependence (based on geographic location) 		



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