

Academic Burnout

Identifying Causes and Creating a Plan for Vitality

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February 16, 2018

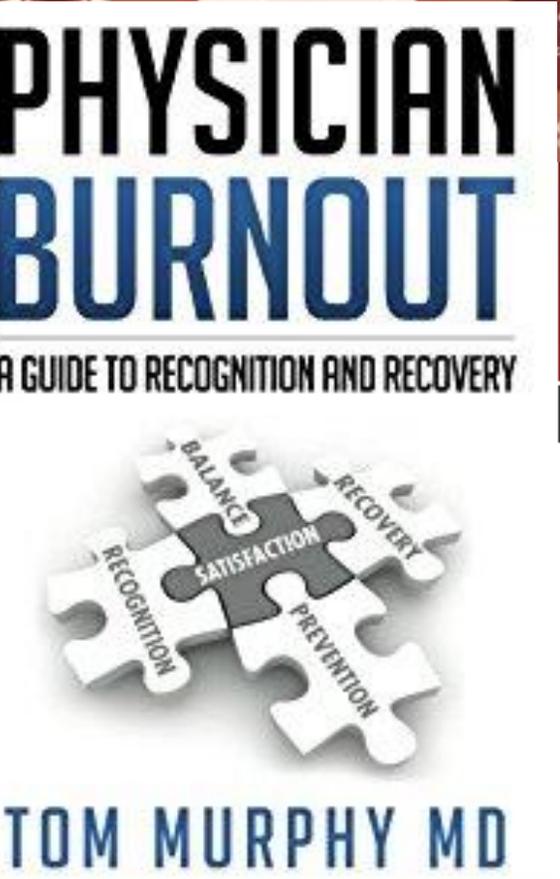
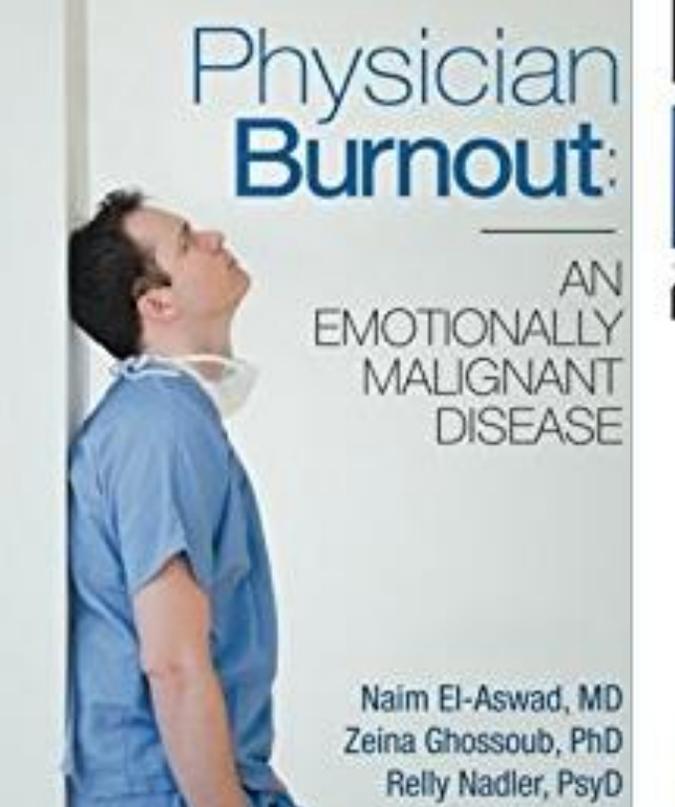
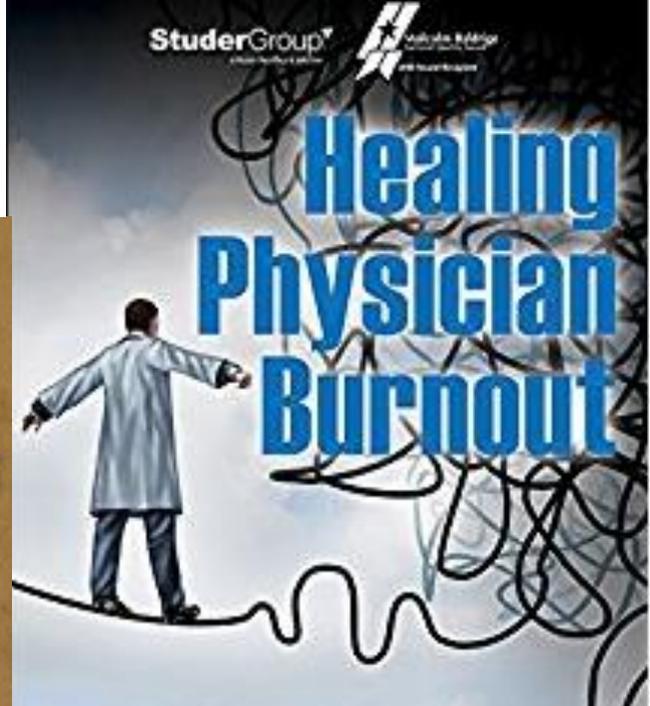
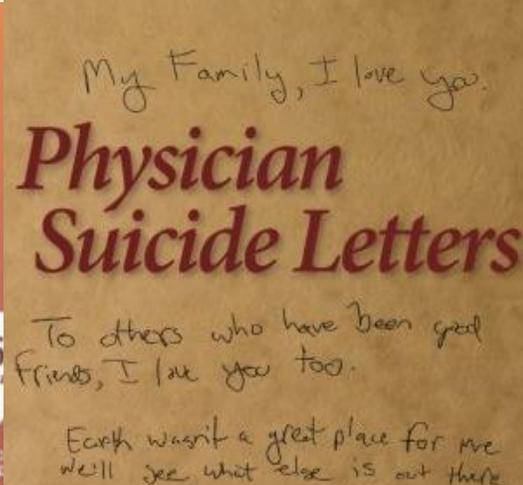
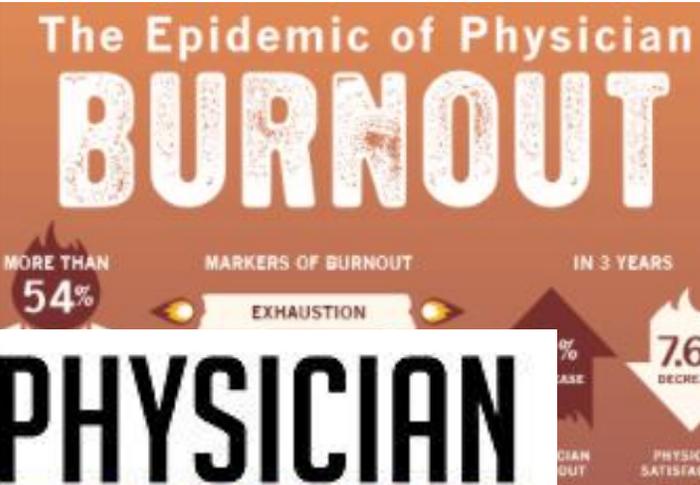
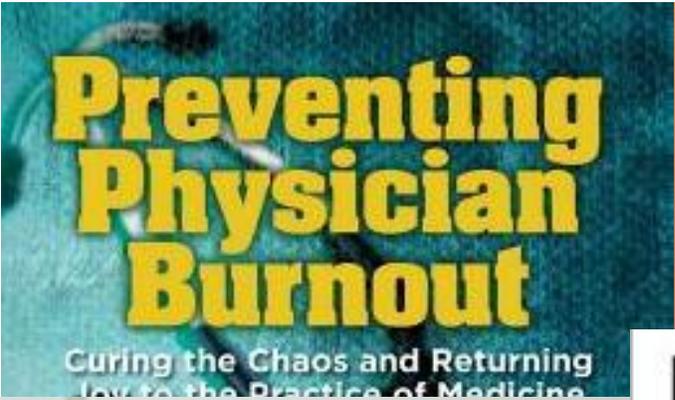


Learning Objectives

1. Describe the components and adverse consequences of burnout in academic settings
2. Describe the individual, divisional, and institutional drivers of burnout identified in the literature
3. Identify your own personal drivers of vitality and burnout
4. Create your personal plan for vitality

Commentary: Surviving scientist burnout

Luigi Delle Site



nature International weekly journal of science

Home | News & Comment | Research | Careers & Jobs | Current Issue | Archive | Audio & Video | For

Archive > Volume 545 > Issue 7654 > Careers > Features > Article

NATURE | CAREERS | FEATURE

Work-life balance: Break or burn out

Kendall Powell

Nature 545, 375–377 (18 May 2017) | doi:10.1038/nj7654-375a
Published online 17 May 2017

First Known Reference to Burnout: Exodus 18: 17-18

וַיֹּאמֶר חִתָּן מֹשֶׁה אֵלָיו לֹא־טוֹב הַדְּבָר אֲשֶׁר אַתָּה עֹשֶׂה: 17

But Moses' father-in-law said to him, "The thing you are doing is not right;

נָבֶל תִּבֶּל גַּם־אַתָּה גַּם־הָעָם הַזֶּה אֲשֶׁר עִמָּךְ כִּי־כִבַּד מִמֶּךָ הַדְּבָר לֹא־תוּכַל עֲשֹׂהוּ לְבַדָּךְ: 18

you will surely wear yourself out, and these people as well. For the task is too heavy for you; you cannot do it alone.

Almost as long ago ...

Housestaff/Faculty Survey in Pediatric Department, 1997 (n=327)

Work-Family Issues and Perceptions of Stress Among Pediatric Faculty and House Staff

*Jessica A. Kahn, MD, MPH; Susan K. Parsons, MD, MPH; Philip A. Pizzo, MD;
Jane W. Newburger, MD, MPH; Charles J. Homer, MD, MPH*

73% frequently/constantly torn between work and personal life

83% stressed due to balancing work and life

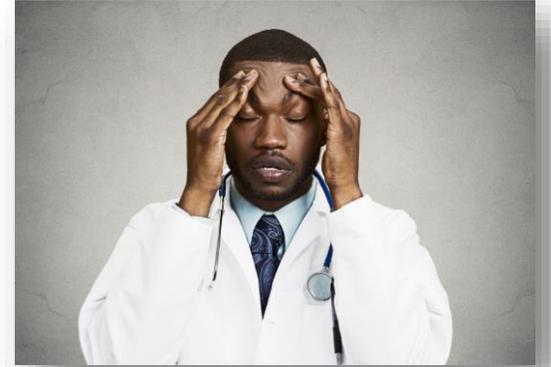
55% have to choose between successful career and spending time with family

4% strongly agree division supports work/life needs

What is Burnout?

An experience in response to chronic job stressors leading to

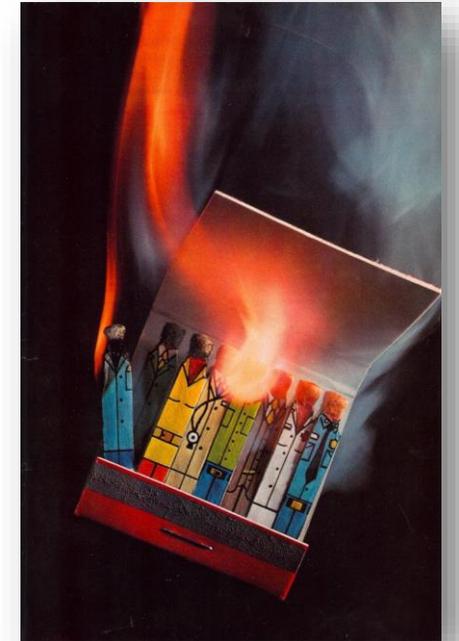
- Emotional exhaustion – *stress response*
 - ✓ Emotionally overextended, exhausted by work
- Depersonalization/cynicism – *negative response to job/others*
 - ✓ Unfeeling or impersonal response toward recipients of one's service, care treatment, or instruction
- Low personal accomplishment – *negative response to self*
 - ✓ Decreased sense of competence, success and achievement in one's work



Adapted from Christina Maslach, November 2017

Measurement

- Multiple measures, though Maslach Burnout Inventory most commonly used
- Measures may not be comparable, may not have been validated
- Measurement error may be due to concerns about confidentiality or stigma
- Often measured as a yes/no but occurs along a continuum



Adapted from Christina Maslach, November 2017

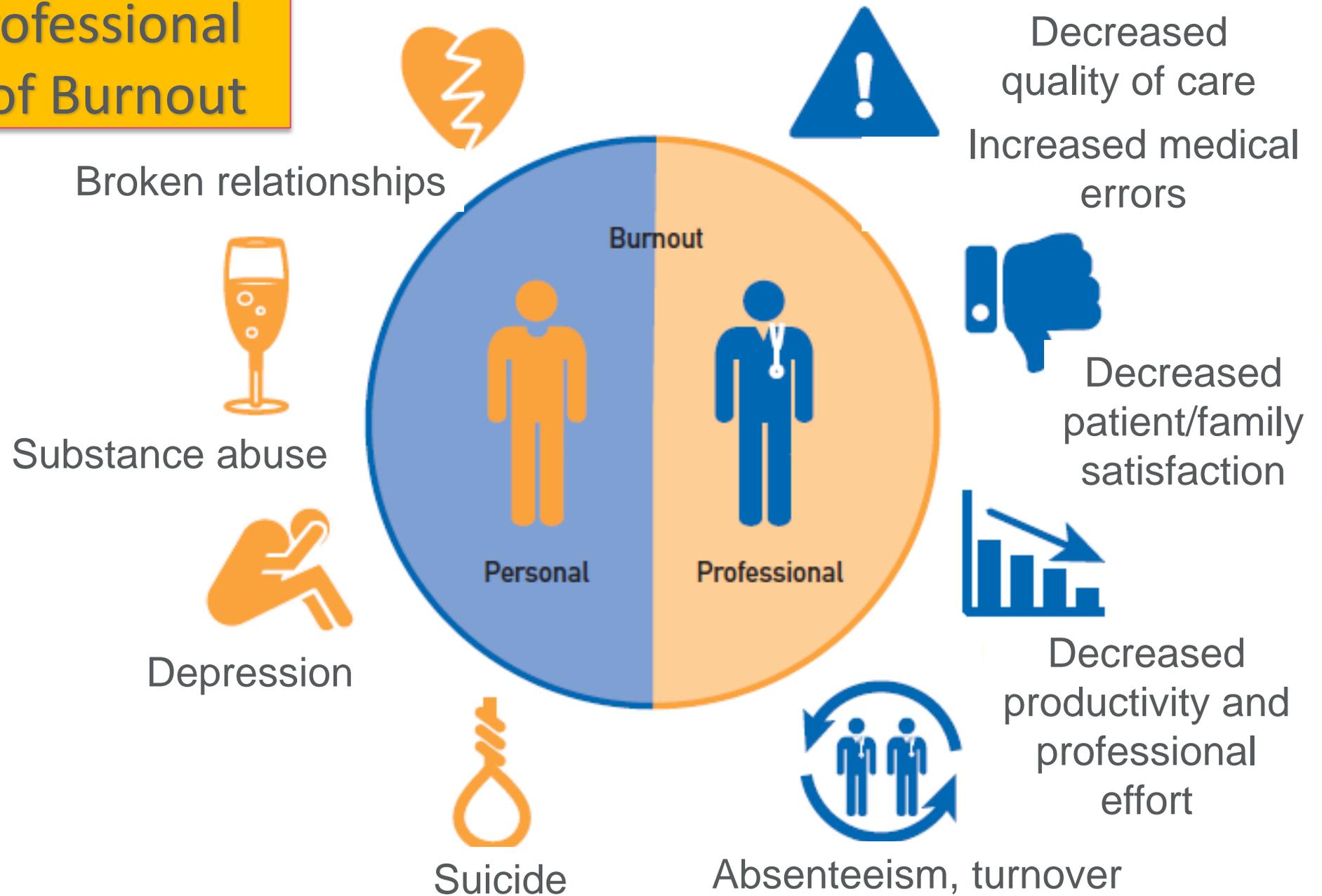
What is the Opposite of Burnout?

- Wellness
 - ✓ A state of complete physical, mental, and social well-being
- Engagement
 - ✓ Involved in, enthusiastic about and committed to work and workplace
- Vitality
 - ✓ Professional fulfillment, motivation, and commitment to ongoing intellectual and personal growth, full professional engagement, enthusiasm and positive feelings of aliveness, energy, and excitement

Forbes.com 2012; Pololi, 2015; Shah, Acad Med 2017



Personal and Professional Consequences of Burnout



Adapted from
Shanafelt, Mayo Clin
Proc 2016

Personal and Professional Consequences of Burnout

Researchers

↓

Productivity
Creativity
Vibrant lab culture

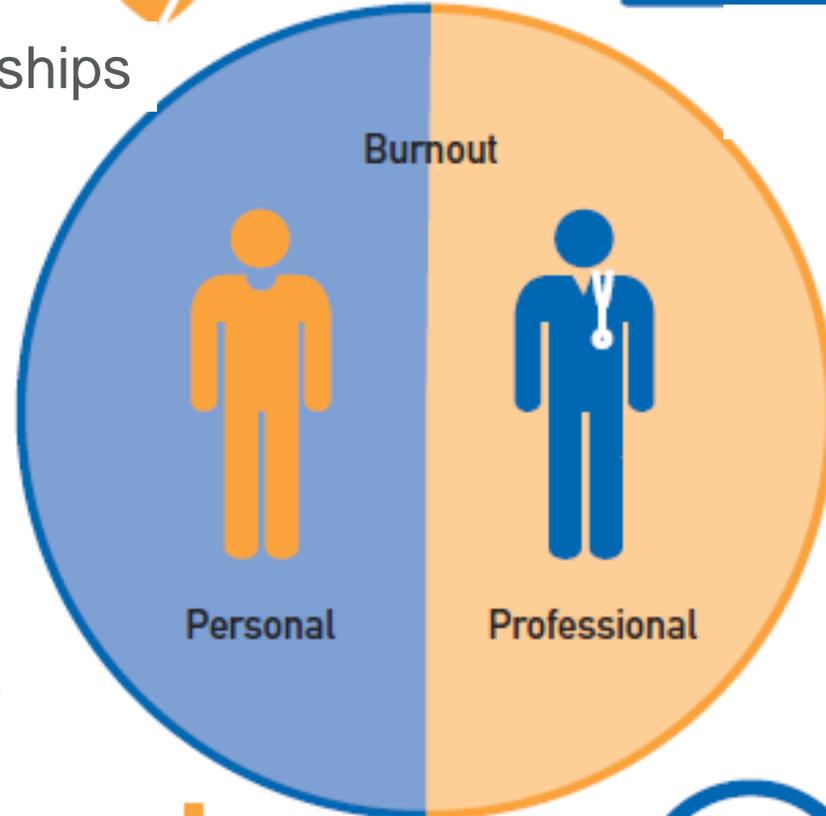
Broken relationships



Decreased quality of care
Increased medical errors



Decreased patient/family satisfaction



abuse



Depression



Suicide



Absenteeism, turnover



Decreased productivity and professional effort

Burnout Starts During Medical Training

- Matriculating medical students have better mental health than peers
 - Lower burnout scores
 - Less depression
 - Higher quality of life
- This pattern is reversed by second year of medical school

Brazeau, Acad Med 2014; Dyrbye, Acad Med 2014;
Dyrbye, Mayo Clinic Proc 2013; Dyrbye, Acad Med 2006



Burnout, Depression Vary By Training/Early Career Stage

National survey of medical students, residents/fellows, early career physicians, 2011-2012

Characteristic	Medical students (n=4,402)	Residents/ fellows (n=1,701)	Early career physicians (n=880)	P value
Burnout (%)	56	60	51	.0001
Emotional exhaustion - high (%)	45	44	40	<.0001
Depersonalization - high (%)	38	51	38	<.0001
Personal accomplishment - low (%)	36	22	18	<.0001
Depression screen + (%)	58	51	40	<.0001
Suicidal ideation past 12 mo.	9	8	6	.0058

Trainees experience significantly higher burnout, depression than age-matched peers

Dyrbye Acad Med 2014



Burnout Varies Across Career Stage

National survey of U.S. physicians from all specialty disciplines, 2011

Characteristic	Early career: ≤ 10 years (n=1,583)	Mid-career: 11-20 years (n=1,634)	Late career: ≥ 20 years (n=3,906)	P value
Burned out (%)	51	54	40	<.001
High emotional exhaustion (%)	40	47	33	<.001
High depersonalization (%)	36	34	24	<.001
Not satisfied with work-life balance (%)	56	61	46	<.001
Moderate/high likelihood of leaving current practice within 2 yrs (%)	34	25	40	<.001

Dyrbye Mayo Clin Proc 2013



Burnout and Depression Increasing Over Time

National survey of U.S. physicians (>20% academic)/age-matched controls, 2011 and 2014

Characteristic	2011 (n=1,583)	2014 (n=1,634)	P value
Burned out (%)	46	54	<.001
High emotional exhaustion (%)	38	47	<.001
High depersonalization (%)	29	35	<.001
Low personal accomplishment (%)	12	16	<.001
Depression (% positive screen)	38	40	.04
Suicidal ideation (%)	6	6	.98
Dissatisfaction with work-life balance (%)*	38	45	<.001

*disagree that schedule leaves time for personal life

Burnout - Public Health Crisis in the U.S.

Level	Estimated number burned out
Medical Students	> 40,000
Residents and fellows	> 60,000
Physicians	> 490,000



Levels of stress and burnout high among other health professionals

- Nurses
- Pharmacists
- Allied health professionals

Balogun, 2002; Deary, 2003; Dyrbye, 2010; Lloyd, 2002; Shanafelt, 2012;
table adapted from Colin West

What about Researcher Burnout? Few Data



Stress and Morale of Academic Biomedical Scientists

Warren L. Holleman, PhD, Ludmila M. Cofta-Woerpel, PhD, and Ellen R. Gritz, PhD

- Study of chairs (n=19) of basic/population/quantitative science departments at MD Anderson
- Morale worsening over time

Major Stressors Identified

- **Funding and productivity pressures**

- Fear of not maintaining sufficient funding to keep position and sustain career
- NIH funding decreasing while institutions requiring higher % grant funding
- Relentless pressure for ever-increasing productivity – continuous increase in funding, higher-quality publications, higher standards for academic excellence (teaching, collaboration), innovation, commercialization – constantly raising the bar for already high-functioning faculty members intensifies levels of comparison and competition and a risk for burnout

- **Bureaucracy**

- Frustration over administrative duties: reports, personnel evaluations, grant procedures, training requirements, meetings, emails – distracts from research; saps energy, creativity and productivity

- **Faculty-administration conflict**

- Distrust due to increasingly adversarial relationship with leadership
- Shift from academic culture to more corporate culture, with explicit productivity targets, commercialization, top-down decision making

Addressing Burnout in Academic Settings

- Moral and ethical imperative
- Professional and business imperative

“Faculty vitality, as defined by the institution, has a critical role in ensuring future institutional successes and the capacity for faculty to thrive in a complex health care economy”

– D. Shah

Drivers of Burnout Occur at Several Levels



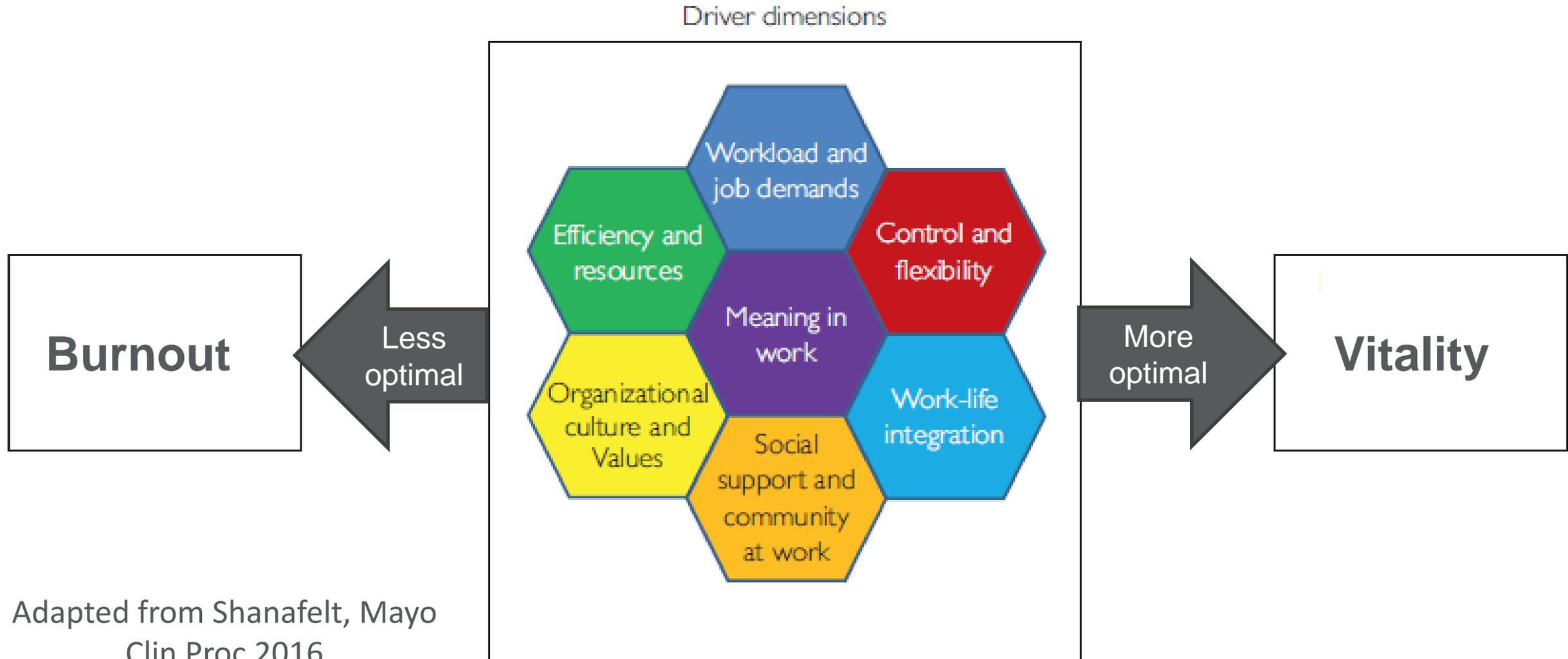
Shanafelt, Mayo Clin Proc 2016



Key Drivers of Burnout and Engagement Across Levels

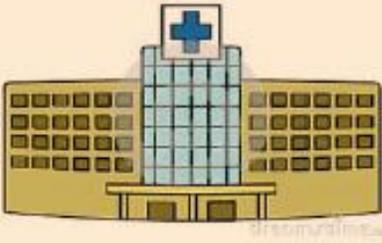


Key Drivers of Burnout and Vitality



Adapted from Shanafelt, Mayo
Clin Proc 2016

Key Drivers Across Levels

Drivers of burnout and engagement in physicians	 Individual factors	 Work unit factors	 Organization factors	 National factors
	<ul style="list-style-type: none"> • Experience • Ability to prioritize • Personal efficiency • Organizational skills • Willingness to delegate • Ability to say “no” 	<ul style="list-style-type: none"> • Availability of support staff and their experience • Patient check-in efficiency/process • Use of scribes • Team huddles • Use of allied health professionals 	<ul style="list-style-type: none"> • Integration of care • Use of patient portal • Institutional efficiency: <ul style="list-style-type: none"> - EHR - Appointment system - Ordering systems • How regulations interpreted and applied 	<ul style="list-style-type: none"> • Integration of care • Requirements for: <ul style="list-style-type: none"> - Electronic prescribing - Medication reconciliation - Meaningful use of EHR • Certification agency facility regulations (JCAHO) • Precertifications for tests/treatments

Key Drivers of Burnout and Vitality: Individual



Handout: Start a Personal Plan for Vitality



Personal Plan to Improve Vitality

Drivers	My personal drivers of burnout – what I am moving away from	My personal drivers of vitality – what I am moving towards	What change I will make in the next month to promote vitality in this area
Meaning in work			
Culture and values			
Control and flexibility			
Social support and community			
Workload and job demands			
Efficiency and resources			
Work-life integration and personal wellness			



Meaning in Work

Drivers

- Self-awareness of most personally meaningful aspect of work
- Ability to shape career to focus on interests
- Personal recognition of positive events at work

Meaning in Work

- Consider most meaningful aspects of work
- Define your purpose

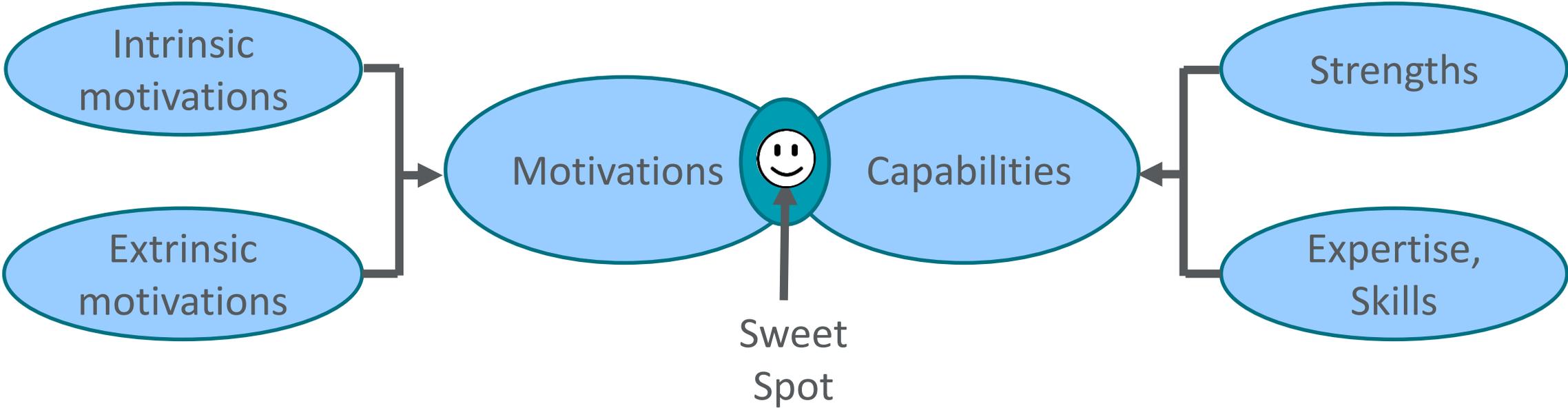
Tell me, what is it you
plan to do with your one
wild and precious life?

Mary Oliver

The two most important
days in your life are the
day you are born, and the
day you find out why
Mark Twain

Meaning in Work

Find Your Own Purpose



Adapted from *Discover your True North*, Bill George

Is your Purpose Aligned with your Work?

- Physicians who spend at least 20% of their professional effort focused on the dimension of work they find most meaningful are at dramatically lower risk for burnout
- Create a mission statement based on your purpose
To encourage, inspire and support family, friends, colleagues and mentees to find their purpose and soar
- How much of your work is aligned with that mission statement? How can your work better align?

Culture and Values

Drivers

- Personal values, institutional values, and alignment between them
- Professional values
- Level of altruism
- Moral compass/ethics
- Commitment to organization

The Role of Values Alignment/Misalignment

Physicians motivated by these values

- Fulfilling patient needs
- Developing patient-physician relationships
- Community health
- Equity in health care delivery and outcomes
- Altruism
- Quality
- Service
- Teaching and mentoring
- Developing the next generation of physicians

Messages, metrics and incentives imply institutional values

- RVUs
- Volume
- % commercial pay
- Net operating income

The Role of Values Alignment/Misalignment

Researchers motivated by these values

- Discovery that will transform health
- Team-based research
- Mastery of techniques, field
- Teaching and mentoring
- Developing the next generation of researchers

Metrics, messages, incentives imply institutional values

- R01s
- Number of publications
- H factor

Value Misalignment Linked to Burnout

	Emotional exhaustion	Depersonalization	Personal accomplishment
Work overload	↑↑	↑	
Values misalignment	↑	↑↑	↓

- Workload and value congruence independently contribute to burnout
- Values congruence especially important to female physicians

Leiter, Can Fam Physician 2009; table adapted from Tait Shanafelt

Control and Flexibility

Drivers

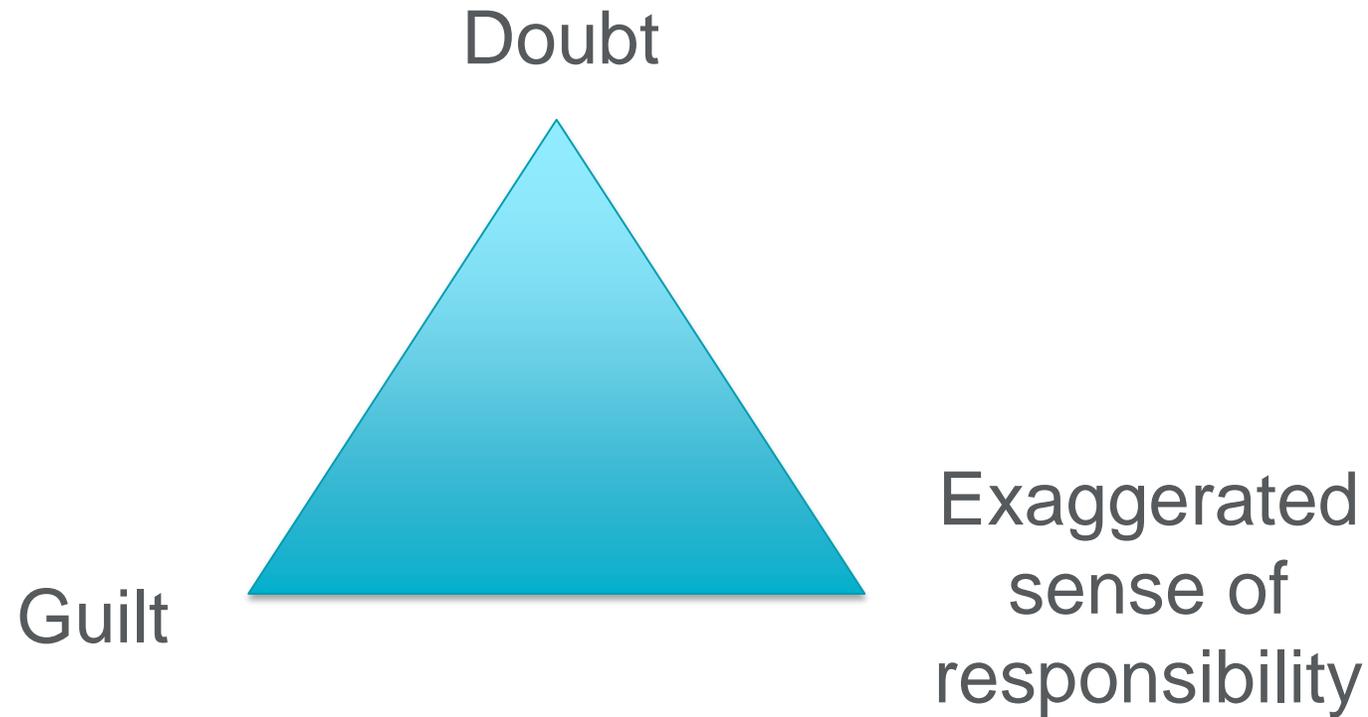
- Personality traits
- Assertiveness
- Intentionality

Physician Identification with Personalities Linked to Burnout, Job Satisfaction and Anxiety

	Believe improves performance (%)	Emotional exhaustion	Job Satisfaction	Anxiety
Workaholic	55	↑	↑	
Type A	72	↑		↑
Control Freak	40	↑	↓	↑

Lemaire, BMC Health Services Research, 2014

The Role of the “Triad of Compulsiveness” in Physicians



Gabbard, “The Role of Compulsiveness in the Normal Physician,” JAMA 1985

Adaptive and Maladaptive Consequences

Adaptive

- Diagnostic rigor
- Thoroughness
- Commitment to patients
- Desire to stay current
- Recognition of responsibility for patients' trust

Maladaptive

- Difficulty relaxing
- Reluctance to take vacations
- Problems in allocating time to family
- Inappropriate/excessive sense of responsibility of things beyond one's control
- Chronic feelings of “not doing enough”
- Difficulty setting limits
- Guilt - interferes with healthy pursuit of pleasure
- Confusion of selfishness with healthy self-interest

Gabbard, JAMA 1985

The Role of the “Triad of Compulsiveness” in Physicians

None of us would question the importance of thoroughness in the physician’s diagnostic and therapeutic practice, and we would all probably choose a compulsive physician if we were seriously ill. Herein lies the grand paradox: **compulsiveness and excessive conscientiousness are character traits that are socially valuable, but personally expensive.** Society’s meat is the physician’s poison.

Glen Gabbard, M.D.

Gabbard, “The Role of Compulsiveness in the Normal Physician,” JAMA 1985



“You must unlearn what you have learned”



- Don't take responsibility for things beyond your control
- Set limits
- Don't let guilt interfere with healthy pursuit of pleasure
- Don't confuse selfishness with healthy self-interest
- Know that you are enough!

Social Support and Community

Drivers

- Length of service
- Relationship-building skills
- Support systems

Social Support and Community

Develop Professional and Personal Support Networks

“... when we have a community of people we can count on – spouse, family, friends, colleagues – we multiply our emotional, intellectual, and physical resources. We bounce back from setbacks faster, accomplish more, and feel a greater sense of purpose ... the effect on our happiness is both immediate and long-lasting.”

- Shawn Achor, *The Happiness Advantage*



Impact of Core Leadership Program on Social Support

Qualitative analysis demonstrated positive impact of the program on development of peer networks, improved communication, and engagement



- * “Getting to know other Cincinnati Children’s faculty that I would not have had the opportunity to know otherwise; sharing our journeys, struggles, and successes with each other ...”
- * “Learning about the leadership journeys of my peers and sharing our paths with one another in a nonjudgmental setting”
- * “The people and sharing stories - I feel like I have a support network around the hospital”

Social Support and Community

Surround Yourself with Support

- Friends, family, colleagues
- Take advantage of leadership and career development programs
- Network at meetings
- Create a community of mentors
- Assemble a personal board of directors



Workload and Job Demands

Drivers

- Size of lab
- Administrative and leadership responsibilities
- Teaching responsibilities

Workload and Job Demands

- Can administrative and grant-related work be delegated/streamlined?
- Do you need fewer hours/more flexibility?
 - ✓ Part-time work, flexible hours, working from home
 - ✓ Reorganization of roles and responsibilities, shared leadership responsibilities
- Can you pare down?
 - ✓ What do you absolutely have to do? What can you let go of?

Efficiency and Resources

Drivers

- Experience
- Ability to prioritize
- Personal efficiency
- Organizational skills
- Willingness to delegate
- Ability to say “no”

Efficiency and Resources

Time Management and Organizational Skills

- **Urgent/important**

Do these (what will you get fired for if it doesn't happen?) – is time aligned with getting done?

- **Not urgent/important**

Decide how to schedule into calendar, block time/cluster meetings

- **Urgent/not important**

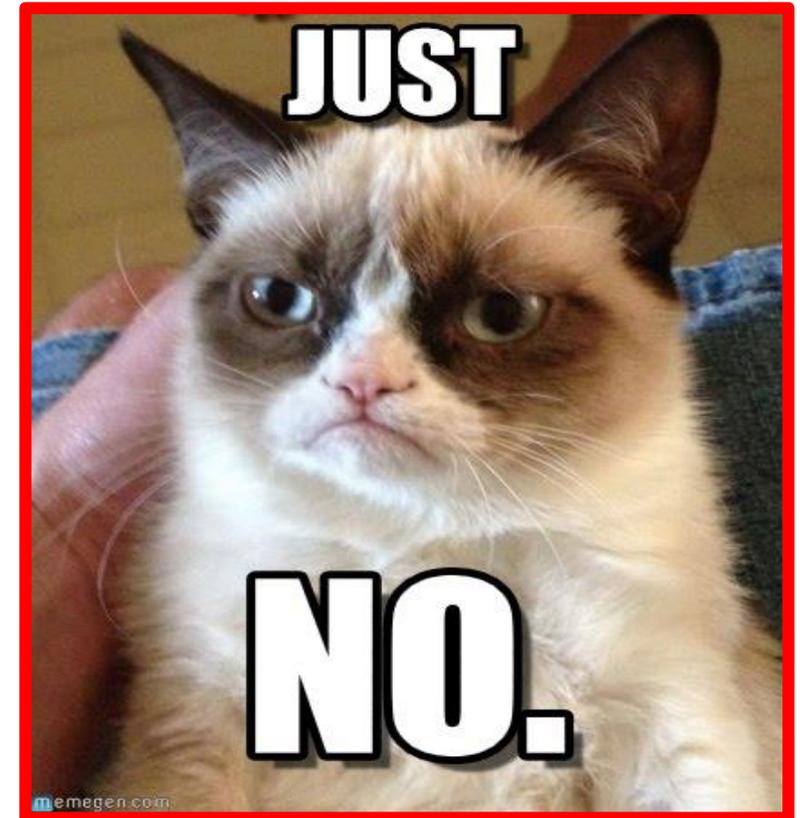
Delegate or manage effectively (e.g. emails)



Efficiency and Resources

Time Management and Organizational Skills

- **Urgent/important**
Do these (what will you get fired for if it doesn't happen?) – is time aligned with getting done?
- **Not urgent/important**
Decide how to schedule into calendar, block time/cluster meetings
- **Urgent/not important**
Delegate or manage effectively (e.g. emails)
- **Not urgent/not important**



Efficiency and Resources

Delegation

- Delegation to staff, trainees, junior faculty facilitates
 - ✓ Learning of new skills, empowerment, trust, development opportunities
- Ensure adequate administrative support
 - ✓ Partner effectively
 - ✓ Delegate calendar, editing, grant submissions, spreadsheets, meeting minutes, PowerPoints
 - ✓ Train if skills are needed (Excel, ePAS, etc.)

Efficiency and Resources

Take advantage of resources

- Programs and policies
 - ✓ Family leave, adoption assistance, emergency childcare
 - ✓ Extension of time to tenure if part-time or leave of absence
- Outsourcing
 - ✓ Laundry, housecleaning, meal preparation, gift-buying, etc.
 - ✓ Concierge service
- Be aware of unconscious barriers to using resources
 - ✓ Faculty may be reluctant to use existing policies to avoid “signaling low commitment” and the resulting adverse career consequences

Leslie, Acad Management J, 2009; Magali, Acad Med, in press

Efficiency and Resources



Take Control of Your Time

- Be a master of your schedule, not a victim!
- Learn how you work best: early am, late evening, in spurts, limit time on weekends spent on work/computer
- Consciously prioritize what you want to devote energy to
- Take ALL your vacation days!
- Block off random days for rejuvenation

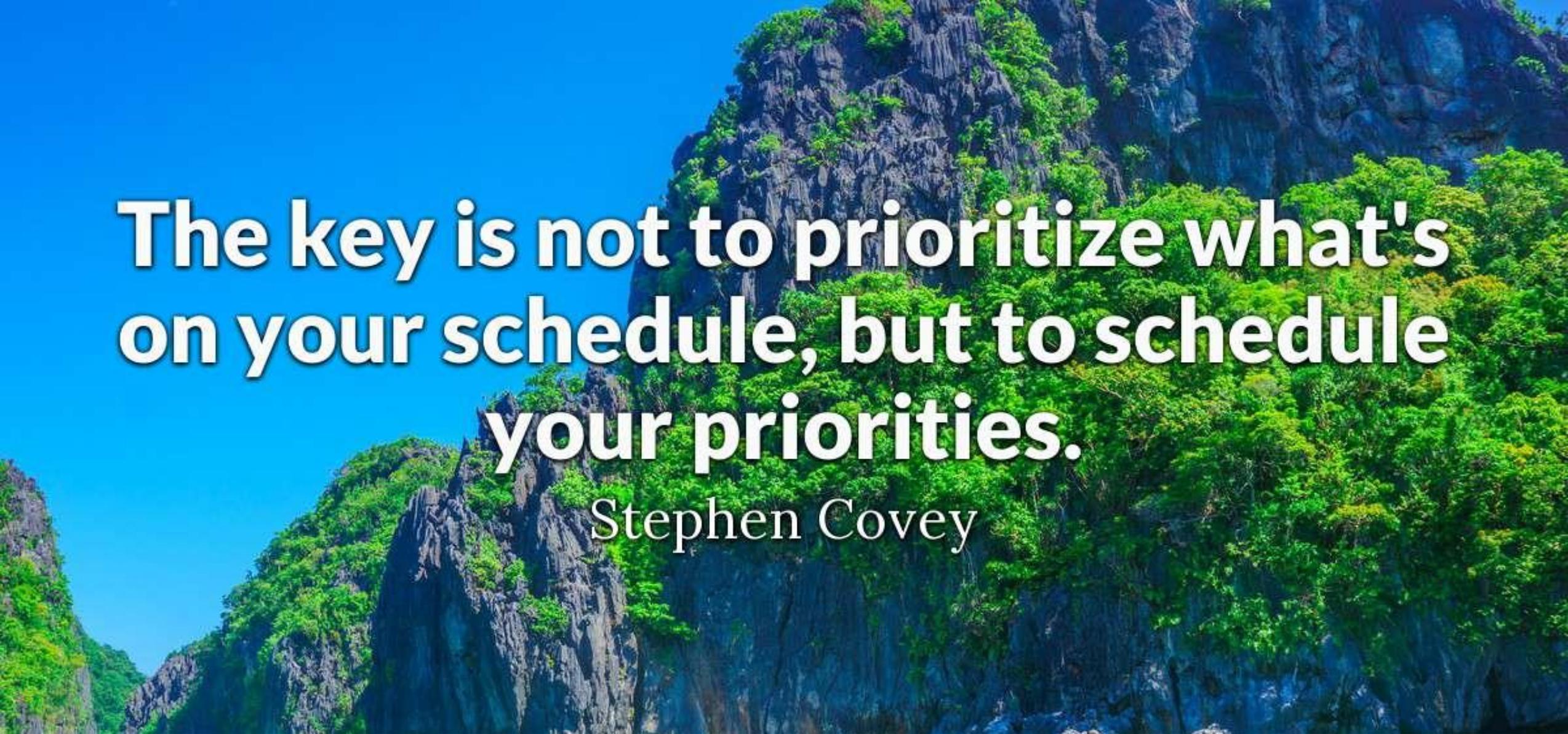
**Harvard
Business
Review**

WORK-LIFE BALANCE

Making Time Off Predictable—and Required

by Leslie A. Perlow and Jessica L. Porter

FROM THE OCTOBER 2009 ISSUE



**The key is not to prioritize what's
on your schedule, but to schedule
your priorities.**

Stephen Covey

Efficiency and Resources

Saying Yes and Saying No: The 24-Hour Rule

- What is the time commitment?
- Is it aligned with your purpose, priorities and goals?
- What is the value added to professional goals?
- What is the cost to your personal goals?
- Will similar opportunities be available in the future if you decline?
- How will a “no” impact your reputation or your colleagues?
- *What will you give up?*



The forever rule?

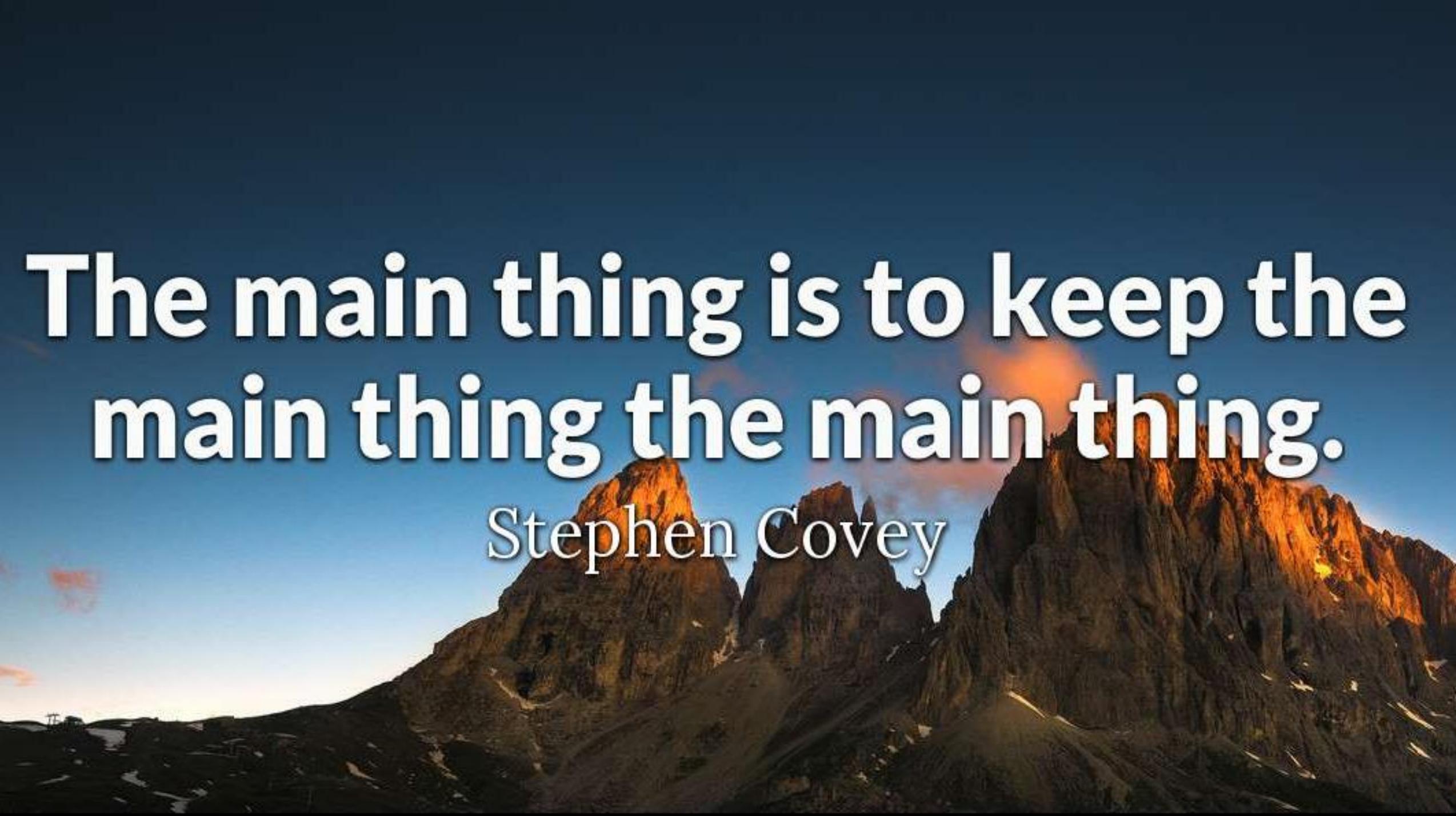


“No, Thursday’s out. How about never—is never good for you?”

Work-Life Integration and Personal Wellness

Drivers

- Priorities and values
- Personal and family characteristics
- Self-care practices
- Health issues

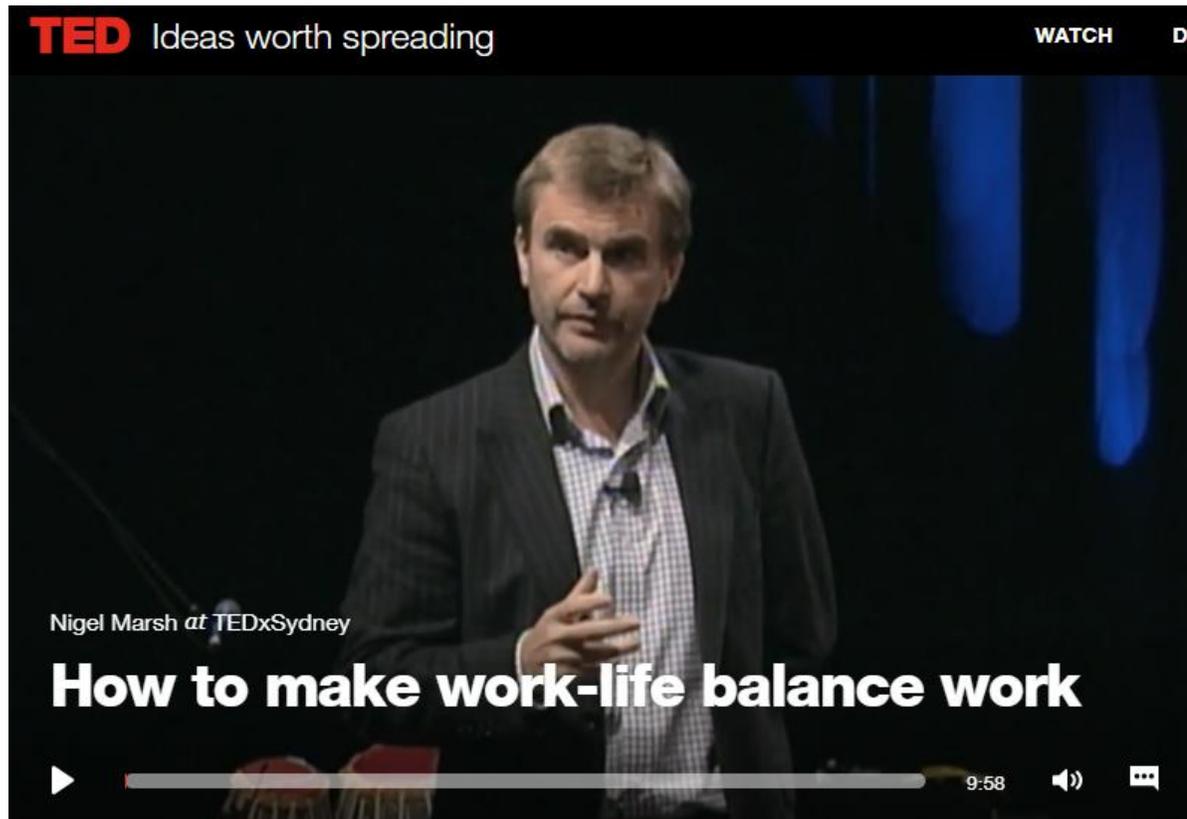


**The main thing is to keep the
main thing the main thing.**

Stephen Covey

Work-Life Integration and Personal Wellness

Design Your Life



“If you don't design your life, someone else will design it for you, and you may just not like their idea of balance.”

Nigel Marsh

Work-Life Integration and Personal Wellness



Self-Care: Put on Your Own O2 Mask First

- What are the things you most love to do? What recharges you? What gives you perspective? A sense of purpose?
 - Stress management, diet, sleep, exercise, recreation, relaxation practice
- What activities and obligations steal your time? Get in the way of the life you want to lead?
- How can you prioritize what recharges and energizes you, and reorganize your time to better align with those priorities?

Kenison, 2000

Work-Life Integration and Personal Wellness

Mindfulness Benefits

- Improves overall health and well-being
- Improves cognitive functioning and productivity
- Lowers stress and burnout
- Increases experience of gratitude and joy

Easy Mindfulness Practices

- **3-minute breathing space**

- Awareness: check-in with thoughts, feelings, bodily sensations
- Gathering: focusing on the breath in the abdomen
- Expanding: expanding to wider awareness of bodily experience



- **STOP sign**

- Stop what you're doing, step out of auto-pilot
- Take a breath
- Observe what's happening
- Proceed with awareness and kindness



- **Practice awareness**

- Notice that you are walking, standing, sitting, breathing – throughout day

Carl Fulwiler, MD, PhD

Mindfulness Resources

Apps

- Insight Timer: <https://www.insighttimer.com>
- Headspace: <https://www.headspace.com/>
- Calm: <https://www.calm.com/>
- The Mindfulness App: <http://www.mindapps.se/?lang=en>
- Meditation for fidgety skeptics: <http://www.10percenthappier.com/>
- Mental Workout: <http://www.mentalworkout.com/store/programs/mindfulness-meditation/>

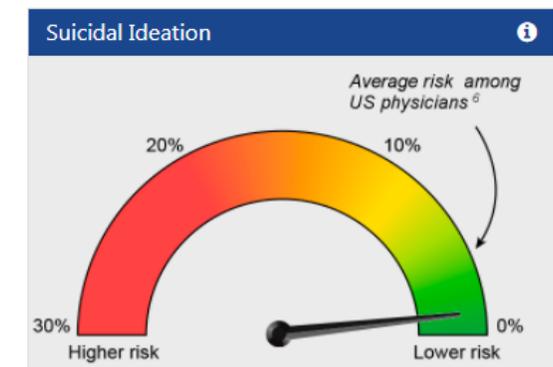
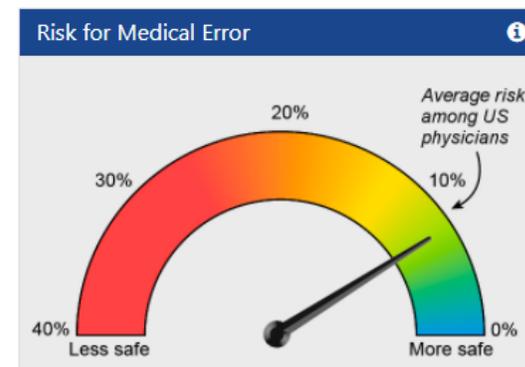
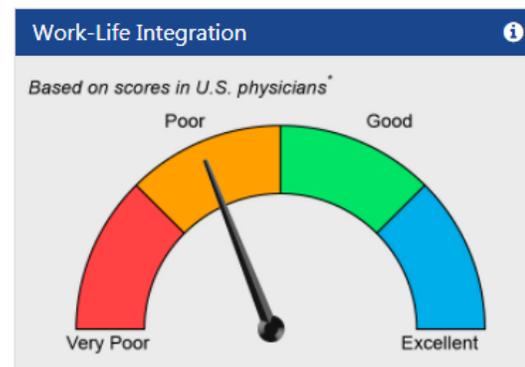
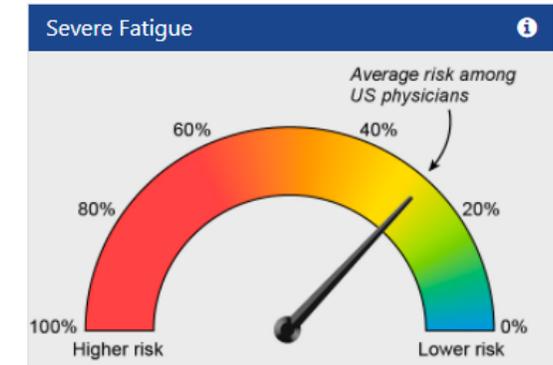
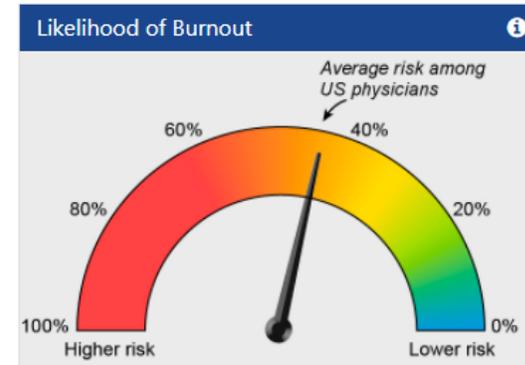
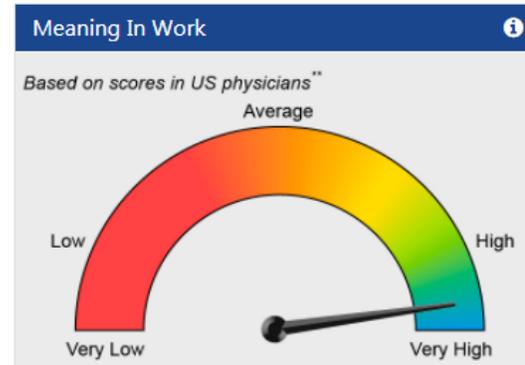
Other resources

- Center for Mindfulness in Medicine, Health Care, and Society www.cfmHome.org

Physician Well-Being Index

<https://www.mywellbeingindex.org/login>

- Assesses wellness
- Provides resources
- Tracks progress



Building Resilience Prevents Burnout

Resilience: the ability to effectively cope with stress, bounce back from adversity, and ward off the accumulation of toxic residue from frustrating experiences

Foundations of resilience

1. Mindfulness practices
2. Self-awareness
3. Self-management and lifestyle
4. Purpose and perspective
5. Interpersonal relationship management

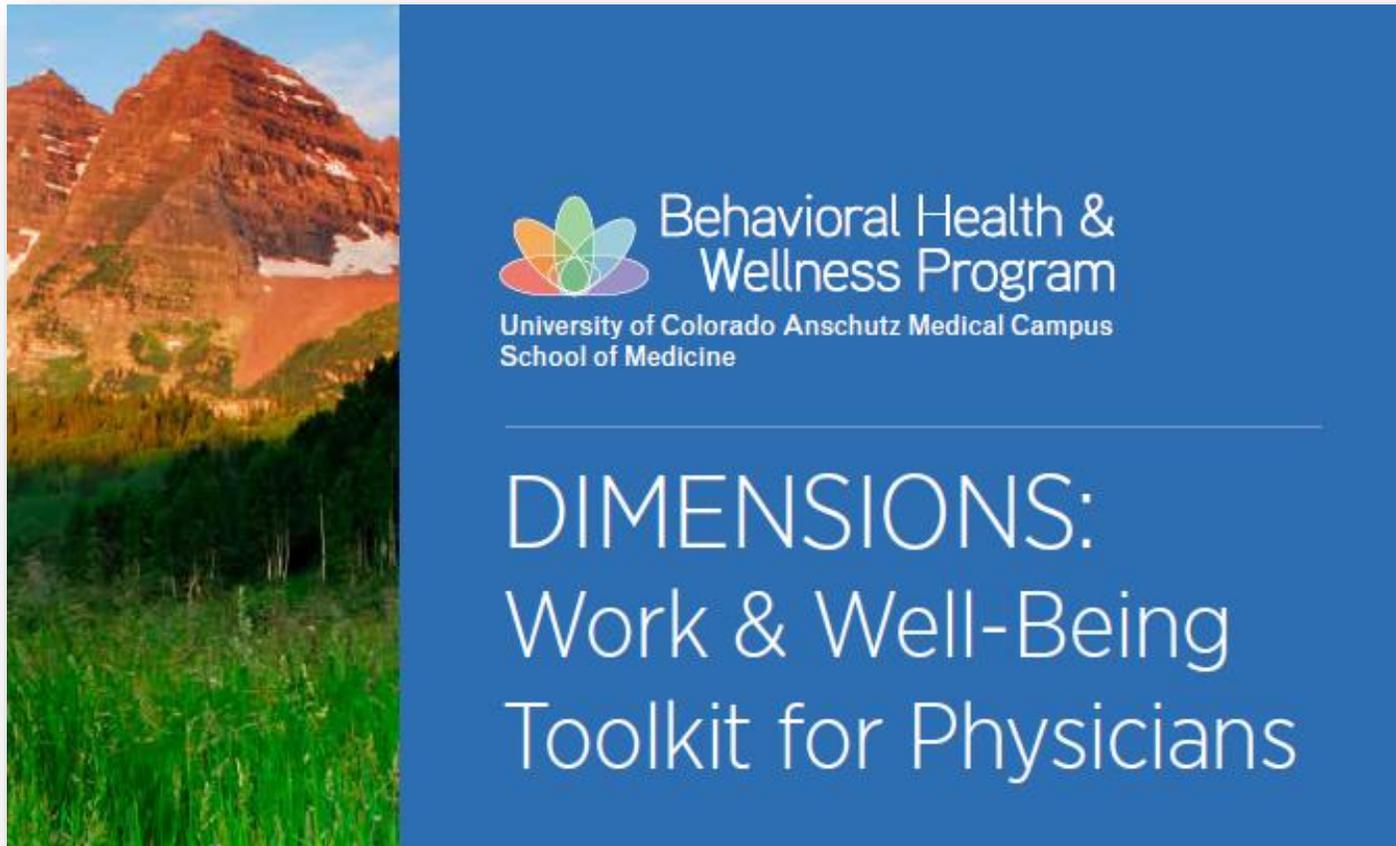


Wiederman, GHS Proc, 2017

Your Personal Plan for Vitality

- Handout from today
- For more in-depth planning:

<https://www.bhwellness.org/toolkits/Work-and-Well-Being-Toolkit-for-Physicians.pdf>



Organizational Drivers of Burnout and Engagement





Researcher/ Physician Burnout: Stop Blaming the Individual

Event Talk · June 30, 2016

Tait Shanafelt, MD

Mayo Clinic



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.”

What Are We Doing at CCHMC?



Dr. Jamilah Hackworth
OAACD



Dr. Derek Wheeler
Chief of Staff



Dr. Christy White
Associate Chief of Staff



Drs. Sue Poynter and Ndidi Unaka
Pediatric Residency Program



Drs. Tom DeWitt and
Javier Gonzalez del Rey
GME



Dr. Paul Samuels
Professional Health
Committee



Dr. Anne Boat
Patient and Family
Experience Officer



Dr. Tom Boat
Director, CF WELL



Scott Steel
Talent



Terri Thrasher
Senior Director
HR



Rachael Grile
HR Consultant - Benefits

OAACD Faculty Wellness Initiative

- Burnout/wellness sessions in multiple programs
 - ✓ Leadership, acculturation, monthly seminars
- Wellness pilots in Divisions/Departments
- Wellness resources on intranet site
- Wellness corner in monthly Faculty Flash newsletter
- 2017 Wellness Symposium, with support from CCTST, Medical Staff Office
- Mindfulness meditation sessions for faculty
- Programs to promote faculty engagement: leadership, mentorship, networking, diversity, awards, newsletters, internal grants
- Collaborating with other institutions to assess burnout among researchers
- One-on-one consultation



Professional Health Committee

- Provides support and referral to medical staff with substance use and mental health concerns
- Established a relationship with the Lindner Center City of Hope to provide psychiatric and mental health counseling services to Medical Staff, residents, and fellows
 - Physician-led assistance within 24 hours of contact
 - Immediate and private access to a psychiatrist or psychologist
 - 513-536-0311
- Leading role in promoting similar programs across Cincinnati
- Peer support program being planned



For further information, contact Dr. Paul Samuels 513-636-7339



Medical Staff Office

- Burnout assessment
 - Medical staff burnout survey
 - Focus groups of medical staff, residents starting soon
 - Results will be used to create a plan to address medical staff wellness
- Medical staff onboarding with peer mentors



Office of Graduate Medical Education

- Mental health and counseling services
- Collaboration with Pediatric Resident Resilience Burnout Consortium:
<http://pedsresresilience.com/>
 - Participation in multicenter study: “Can a mindfulness curriculum prevent burnout during pediatric internship?”



Human Resources



- Employee Assistance Program
 - Assistance with marital and family stresses, depression, grief, and other issues
 - Up to 8 free visits with an on-site counselor: 800-EAP-CALL
- MyHealthPath
 - *Cincinnati Children's incentive-based wellbeing program: provides inspiration, motivation, and resources to achieve your ideal level of wellbeing*
 - Coaching webinars on mindfulness and resilience, one-on-one coaching, guided meditation, relaxation yoga, support around compassion fatigue
- Concierge service





MyHealthPath

Cincinnati Children's is committed to creating an environment in which every employee is capable of being resilient, mindful, safe and focused on taking care of themselves, each other and the patients and families we serve. MyHealthPath is Cincinnati Children's incentive-based wellbeing program that provides you with inspiration, motivation, and resources to achieve your ideal level of wellbeing.

Expand All +

- Physical Wellbeing +
- Emotional Wellbeing +
- Financial Wellbeing +
- Professional Wellbeing +

Upcoming Events

Current

Join our Family Fun Fitness Event - Feb 02/02/18

Wellbeing Dimensions



[Physical](#)

[Emotional](#)

[Professional](#)

[Financial](#)

MyHealthPath News



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QuickLinks



MyHealthPath Login



Register For Events



Lunch and Learn Videos



Wellbeing Ambassador



Weight Mng Calendar



Fitness Calendar



Mobile Mammography



Pregnancy Toolkit



Tobacco Cessation Toolkit



Less Stress Toolkit



Program Info and FAQs

UC College of Medicine

Task Force for Integrative Health and Wellness

- Representatives from the UC Colleges of Medicine, Allied Health Sciences, Nursing, and Pharmacy, CCHMC, VA
- Purpose – to synergistically increase and develop robust inter-professional integrative health and wellness initiatives and programs
- Current initiatives
 - ✓ Wellness Inventory
 - ✓ Integrative Health and Wellness Presentations
 - ✓ Farmer’s Market on UC’s East Campus
 - ✓ Collaborating with UC HR on Be Well - UC Employee Wellness Program
 - ✓ Collaborating with UC Health on Wellness Matters
 - ✓ Mind-body Skills Program and Mindfulness Drop-in Sessions

UC College of Medicine

Center for Integrative Health and Wellness



College of Medicine

- ABOUT
- EDUCATION
- RESEARCH
- DEPARTMENTS
- INSTITUTES & CENTERS
- ADMISSIONS
- CLINICAL CARE

Today is Saturday, Feb. 10, 2018

University of Cincinnati College of Medicine > Integrative Health

Center for Integrative Health and Wellness

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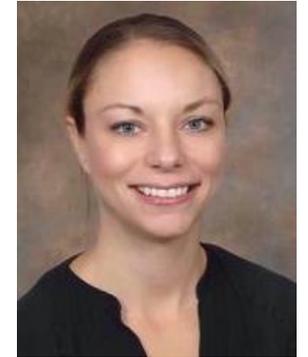


About the Center

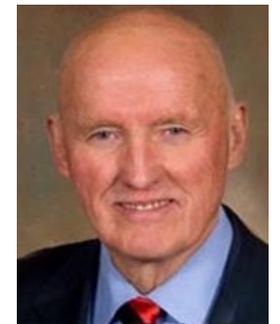
E-Newsletter Sign Up



Dr. Sian Cotton



Lisa Doogan
Program Coordinator



Dr. John Tew

Next Steps

1. Align efforts of those working on burnout, wellness and engagement
2. Examine key drivers of researcher burnout
3. Define what faculty vitality means at CCHMC and UC
4. Pull together evidence
 - Data on key drivers of burnout from Divisional and Departmental pilots, focus groups of medical staff, assessment of researchers
 - Review literature on interventions
5. Create and implement a comprehensive, evidence-based plan to address burnout and promote vitality among faculty

Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis

Colin P West, Liselotte N Dyrbye, Patricia J Erwin, Tait D Shanafelt

Lancet 2016; 388: 2272-81

- 15 RCT's, 37 non-RCT's
- Effects similar for RCT and non-RCT, for individual vs. structural interventions
- Results
 - High emotional exhaustion - 14% $p < 0.001$
 - High depersonalization - 4% $p = 0.04$
 - Overall burnout - 10% $p < 0.001$

Other Resources to Guide Work

- ACGME
<http://www.acgme.org/What-We-Do/Initiatives/Physician-Well-Being>
- NEJM Catalyst
<https://catalyst.nejm.org/>
- National Academy of Medicine
<https://nam.edu/ClinicianWellBeing>
- American Medical Association
<https://www.stepsforward.org/>
- AAMC
<https://www.aamc.org/initiatives/462280/well-being-academic-medicine.html>
- IHI
<http://www.ihl.org/Topics/Joy-In-Work/Pages/default.aspx>

A Possible Approach

Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout

Tait D. Shanafelt, MD, and John H. Noseworthy, MD, CEO

Strategies



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 organizational science

Objective: Create a Healthy Workplace that Promotes Faculty Vitality

- Clear values and meaningful work
- Supportive work community
- Fairness, respect, and social justice
- Sustainable workload
- Choice and control
- Recognition and reward



Adapted from Christina Maslach, November 2017

Learning Objectives

1. Describe the components and adverse consequences of burnout in academic settings
2. Describe the individual, divisional, and institutional drivers of burnout identified in the literature
3. Identify your own personal drivers of vitality and burnout
4. Create your personal plan for vitality

*With our pitchers we attempt
sometimes to water a field, not a
garden*

-Anne Morrow Lindbergh

