

AM I BROKEN?

**A Discussion on Burnout in Healthcare
with Dr Errin Weisman**

IRHA Annual Conference June 18-19, 2019 in French Lick, IN

INTRODUCTIONS

- Interactive Lecture Style with Handouts
- My Disclosures
- My Intentions
- My Story
- Now...tell me about you

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INTENTIONS/LOS

1. Understand the Implications of Burnout on provider, patient and organization
2. Identify the Responsibilities (ethics) of healthcare systems and its management of burnout (helping and healing its own)
3. Bring awareness of burnout symptoms for yourself and colleagues
4. Build actions steps around this information
5. To remind you that you are not alone, burnout is not a personal failing and help is available to all that ask

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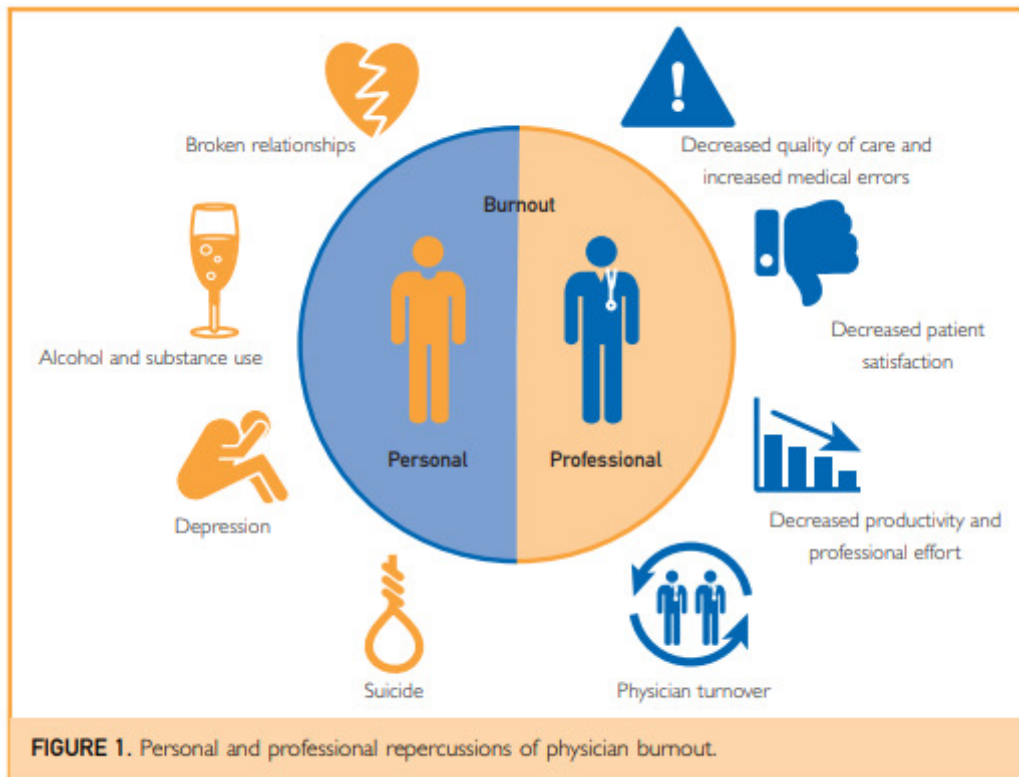
LO1: Implications of Burnout

- Provider
 - Patient
 - Organization
- (fill in your blanks)

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LO1: Implications of Burnout PROVIDER



Consequences of Physician Burnout

- Medical errors¹⁻³
- Impaired professionalism^{5,6}
- Reduced patient satisfaction⁷
- Staff turnover and reduced hours⁸
- Depression and suicidal ideation^{9,10}
- Motor vehicle crashes and near-misses¹¹

¹JAMA 296:1071, ²JAMA 304:1173, ³JAMA 302:1294, ⁴Annals IM 136:358, ⁵Annals Surg 251:995, ⁶JAMA 306:952, ⁷Health Psych 12:93, ⁸JACS 212:421, ⁹Annals IM 149:334, ¹⁰Arch Surg 146:54, ¹¹Mayo Clin Proc 2012

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LO1: Implications of Burnout PROVIDER

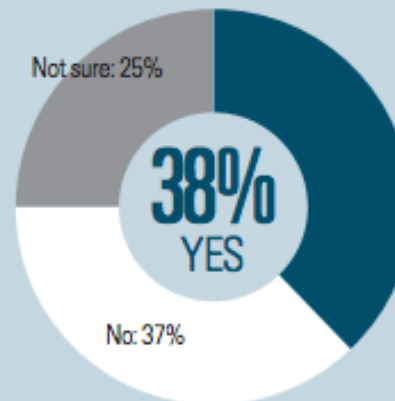
The top 10 issues facing primary care

- 1 Interference from payers
- 2 Too much paperwork
- 3 Payments and reimbursements are too low
- 4 Physician burnout
- 5 EHR systems don't work as they should
- 6 Quality metrics
- 7 Primary care is undervalued compared to other specialties
- 8 Malpractice/need for tort reform
- 9 Competition from retail clinics
- 10 Patients getting health information online

Would you change your career if you could do it over?



Would you recommend that your child or a friend's child pursue a career in medicine?



Lower Savings in Retirement
&
Career and specialty choice
regret

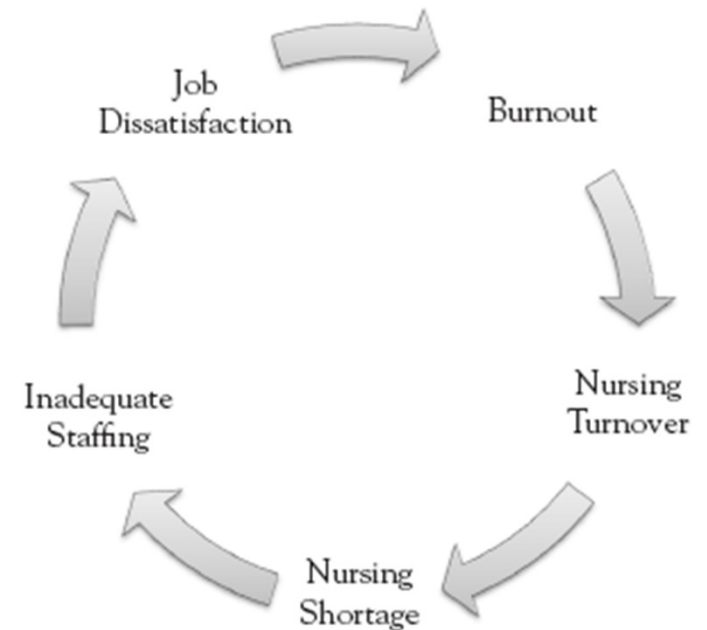
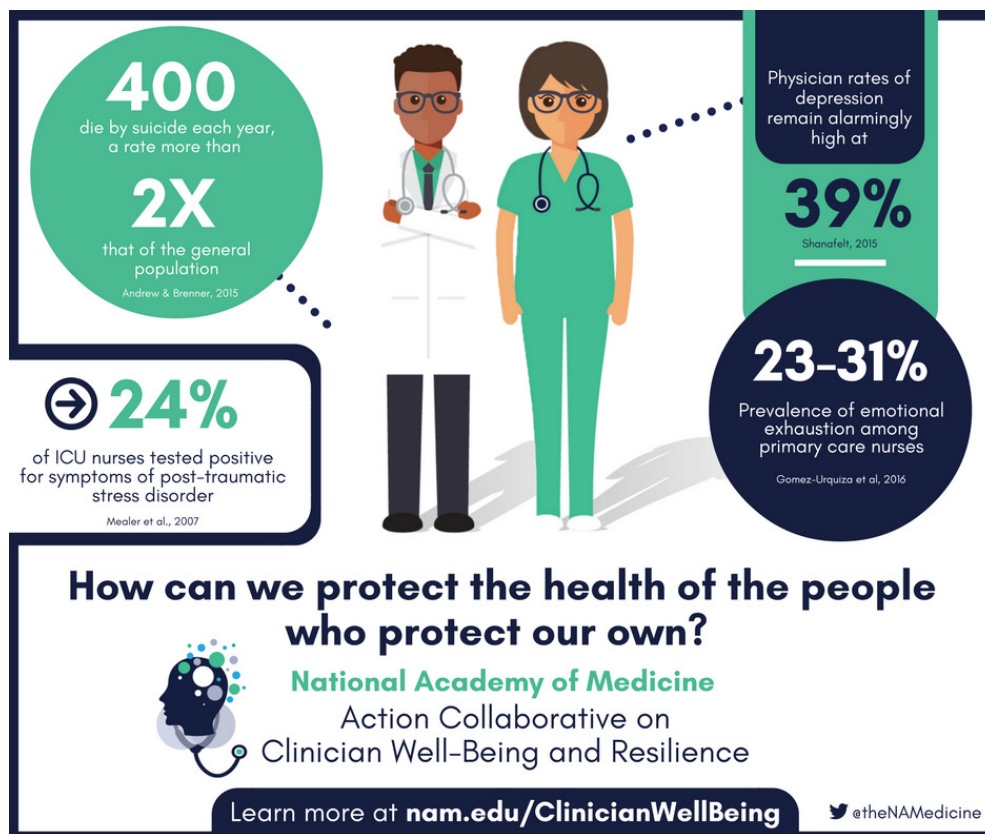


April 25, 2017

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LO1: Implications of Burnout PROVIDER



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LO1: Implications of Burnout PATIENT

PROFESSIONAL (PATIENT) COSTS

Increased medical errors
Communication problems
Decreased quality of care
Patient dissatisfaction

Decrease in treatment adherence

Pediatrics
NATIONWIDE | Advancing the Conversation
on Child Health



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LO1: Implications of Burnout ORGANZIATION

Factors

- ↓ Quality of care
- ↑ Turnover (cost)
- ↓ Productivity
- ↓ Job satisfaction
- Overall ↓↓ in Performance and Culture
- Dealing with Ds and Fs

3 D's

- Disengagement
- Dissatisfaction
- Discouragement

3 F's

- Fear
- Frustration
- Flight

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LO2: Responsibilities/Ethics) of Burnout for Organizations

- Establish need for organizational management of burnout
- Stanford Model
- Mayo Study
- Key Points on factors that must be changed

(fill in your blanks)

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LO2: Responsibilities/Ethics) of Burnout for Organizations

JAMA Internal Medicine | Special Communication | PHYSICIAN WORK ENVIRONMENT AND WELL-BEING

The Business Case for Investing in Physician Well-being

Tait Shanafelt, MD; Joel Goh, PhD; Christine Sinsky, MD

Burnout Among Health Care Professionals

A Call to Explore and Address This Underrecognized Threat to Safe, High-Quality Care

Lotte N. Dyrbye, MD, MHPE, Mayo Clinic; **Tait D. Shanafelt, MD**, Mayo Clinic; **Christine A. Sinsky, MD**, American Medical Association; **Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN**, American Nurses Association; **Jay Bhatt, DO, MPH, MPA**, American Hospital Association; **Alexander Ommaya, DSc**, Association of American Medical Colleges; **Colin P. West, MD, PhD**, Mayo Clinic; **David Meyers, MD**, Agency for Healthcare Research and Quality

Addressing Physician Burnout The Way Forward

Tait D. Shanafelt, MD¹; Lotte N. Dyrbye, MD, MHPE¹; Colin P. West, MD, PhD¹

» Author Affiliations

JAMA. 2017;317(9):901-902. doi:10.1001/jama.2017.0076

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LO2: Responsibilities/Ethics) of Burnout for Organizations

- Burnout is the arch-enemy of Engagement
- If you had a system issue that you knew of that is affecting quality of care, pt satisfaction and limited access to care HOW COULD YOU NOT MOBILIZE RESOURCES TO ADDRESS!
- Organization and systems along with practice environment have been identified as CRITICAL roles to whether a physician remains engaged or becomes burnt out.

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LO2: Responsibilities/Ethics) of Burnout for Organizations



LO₂: Responsibilities/Ethics) of Burnout for Organizations

Mayo Clin Proc. ■ January 2017;92(1):129-146 ■ <http://dx.doi.org/10.1016/j.mayocp.2016.10.004>
www.mayoclinicproceedings.org

-  Acknowledge and assess the problem
-  Harness the power of leadership
-  Develop and implement targeted work unit interventions^a
-  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

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LO3: Awareness of Burnout

- Personal
- Colleague
- Organizational

(fill in your blanks)

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LO3: Awareness of Burnout: Personal/Colleague

Feelings/Emotions (internal)

- Cynical
- Sense of ineffectiveness
- Emotional Exhaustion
- Overwhelming fatigue
- Loss of motivation
- Discouraged
- Dissatisfied
- Disengaged
- Frustrated
- Fearful
- Trapped
- Feelings of failure
- Anxious
- Worried
- Downhearted
- Deflated
- Hopeless
- Disappointed

Actions (external)

- Poor communication
- Extreme fatigued appearing
- Short fuse
- Eye rolls
- Walking Zombie
- Picking a fight
- Working for the weekend
- Monday Dreads
- Planning your next vacation while on vacation

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LO3: Awareness of Burnout: Organizational

Factors

- Inequal compensation
- Productivity targets/focus
- Pressuring due to payer mix
- EHR
- Lack of integration of care
- Organizational culture (mission, values)
- Practice environment
- Opportunities for personal development
- Behavior of senior leadership
- Policies
- Rigid application of practice guidelines
- Lack of Collegiality (doctors/employee lounge, strategies to build community, social gatherings)
- Vacation policy
- Sick/Medical leave
- Part-time work
- Flexible scheduling
- Call schedule

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LO3: Awareness through Assessment

- What assessments are you (personally) currently using?
- What assessments is your organization using?
- If doing assessments, what's your engagement rate?
- What are you doing with the information?

(fill in your blanks)

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LO3: Awareness through Assessment

ment.

Physician Job Satisfaction Scale
Empowerment at Work Scale

Maslach Burnout Inventory
Oldenburg Burnout Inventory

Utrecht Work Engagement Scale

Brief Fatigue Index
Epworth Sleepiness Scale

Perceived Stress Scale

Short Form Health Survey (SF)-8/SF-12/SF-36
Linear Analogue Self-Assessment Scales

25

Well-being Index/Physician Well-being Index^d
Mini-Z^f

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LO3: Awareness through Assessment

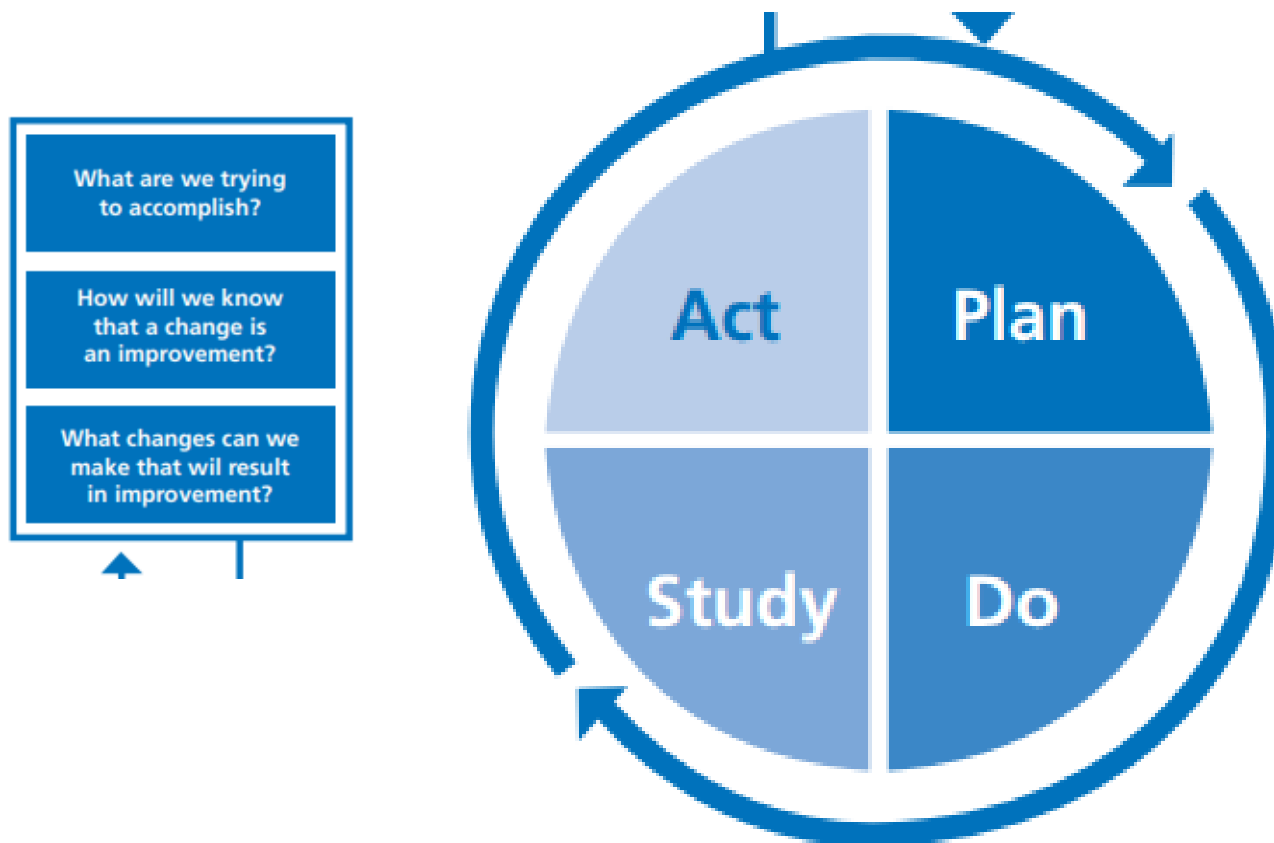
KEY POINTS

- You don't know what you don't know
- Just talking is not enough
- Start with low hanging fruit
- PDSA (Plan-Do-Study-Act, Repeat)

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LO3: Awareness through Assessment



ACT Academy

Online library of Quality, Service Improvement and Redesign tools

Plan, Do, Study, Act (PDSA) cycles and the model for improvement

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LO4: Actions Steps

- What awareness do you now have after this presentation? (What are you taking away from our time together?)
- What will you do?
- How do you plan to implement this knowledge?
- Where can you get support? Who can help? Who needs to be involved?

(fill in your blanks)

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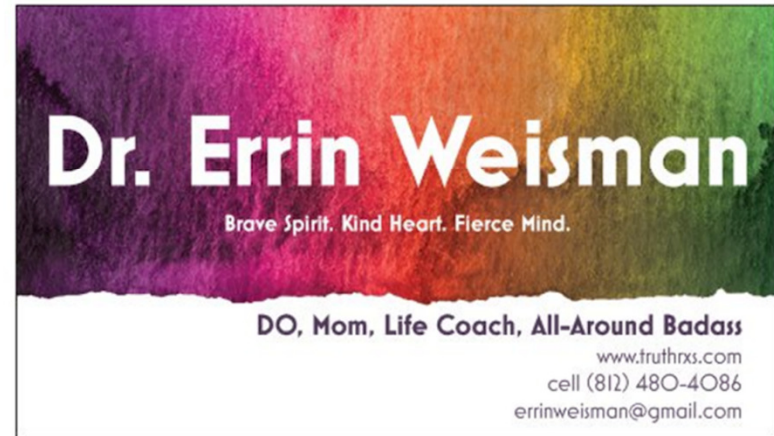
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LIVE
YOUR
BEST
LIFE



In Gratitude to those that love and lift me up!



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References

- Dyrbye LN, T.D. Shanafelt, C.A. Sinsky, P.F. Cipriano, J. Bhatt, A. Ommaya, C.P. West, and D. Meyers. Burnout among health care professionals: A call to explore and address this underrecognized threat to safe, high-quality care. . NAM Perspectives Discussion Paper, National Academy of Medicine, Washington DC <https://namedu/burnout-among-health-careprofessionals-a-call-to-explore-andaddress-this-underrecognized-threat-to-safe-high-quality-care> 2017.
- Shanafelt T, Goh J, Sinsky C. The Business Case for Investing in Physician Well-being. *JAMA Internal Medicine*;177:1826-32.
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- Shanafelt TD, Dyrbye LN, West CP. Addressing Physician Burnout: The Way Forward. *JAMA*. 2017;317(9):901–902. doi:10.1001/jama.2017.0076
- Stanford wellness model from <https://wellmd.stanford.edu/center1.html>
- PDSA model from <https://improvement.nhs.uk/resources/pdsa-cycles/>
- Shanafelt TD, Noseworthy JH. Nine Organizational Strategies to Promote Engagement and Reduce Burnout. *Mayo Clin Proc*; January 2017;92(1):129-146
- Logos/Screenshots/Information were gleaned directly from each organizations or individual's websites
- Infographics also were gathered from website sited on that individual page
- Other pictures provided by Google Images

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