

Preventing Physician Burnout, Promoting Wellness and Resiliency through the development of a Wellness Curriculum

- Minerva Medrano de Ramirez, MD Family Medicine Faculty
- Daubney Boland, Ph.D. Behavioral Science Faculty
- Stephanie Benson, MD Family Medicine Faculty



CFHA Annual Conference
October 17-19, 2019 • Denver, Colorado

Faculty Disclosure

The presenters of this session have NOT had any relevant financial relationships during the past 12 months.

Conference Resources

Slides and handouts shared by our conference presenters are available on the CFHA website at https://www.cfha.net/page/Resources_2019 and on the conference mobile app.



Learning Objectives

At the conclusion of this session, the participant will be able to:

1. Identify at least two risks to physician burn-out and two barriers to wellness
2. Identify tools to measure or assess for burnout
3. List specific strategies to promote wellness

Bibliography / Reference

- Brennan J, McGrady A. Designing and implementing a resiliency program for family medicine residents. *Int J Psychiatry Med*. 2015;50(1):104-14. doi: 10.1177/0091217415592369. Epub 2015 Jun 30
- Bodenheimer T, Sinsky C. From the Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider. *Annals of Family Medicine*. 2014;12(6):573-576
- Sinsky CA, Willard-Grace R, Schutzbank AM, Sinsky TA, Margolius D, Bodenheimer T. In search of joy in practice: a report of 23 high-functioning primary care practices. *Ann Fam Med*. 2013;11(3): 272-278
- De Marchis, E., Knox, M., Hessler, D., Willard-Grace, R., Olayiwola, N., Peterson, L., Grumbach, K., Gottlieb, L. (2019). Physician burnout and higher clinic capacity to address patients' social needs. **J Am Board Fam Med 2019; 32:69 –78**. doi: 10.3122/jabfm.2019.01.180104
- Mata DA, Ramos MA, Bansal N, Khan R, Guille C, Di Angelantonio E, Sen S. Prevalence of Depression and Depressive Symptoms Among Resident Physicians: A Systematic Review and Meta-analysis. *JAMA*. 2015 Dec 8; 314 (22):2373-8

Background

- Burn-out family physicians

Our Program

- Southern New Mexico Family Medicine Residency
- Wellness Retreat 2016?
- Wellness Policy
- Wellness Curriculum

www.snmfmrp.com



Assessing Resident Wellness

- Retreat—Curriculum Dev & Needs Assessment – Minerva
- Measures: Qualitative & Quantitative
 - Focus Groups- Daub
 - Questionnaires: Maslach, Oldenburg, Professional Quality of Life-Daub
- Connect with other programs--Stephanie

Self-report Measures

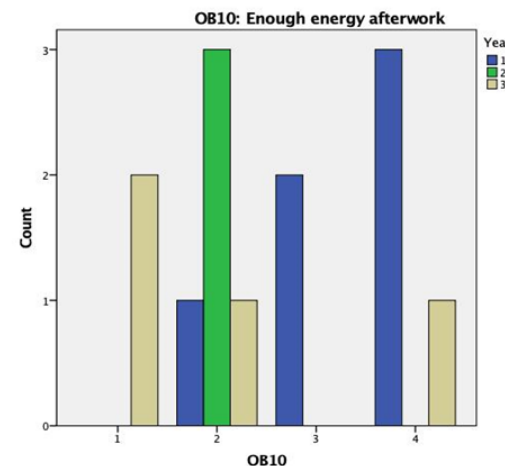
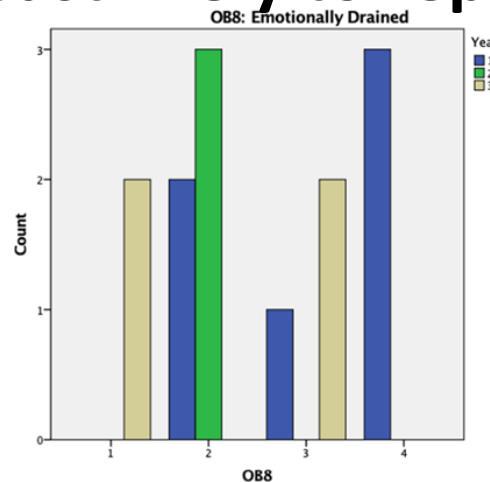
- Professional Quality of Life Scale (PROQOL)
 - Compassion Satisfaction
 - Burnout
 - Secondary Traumatic Stress
- Oldenburg Burnout Inventory
 - Disengagement **
 - Emotional Exhaustion**

Oldenburg Burn-out Inventory

- Disengagement from work-- 7 of 18 indicated having elevated scores/indicating significant episodes of disengagement from work
- Exhaustion scale-- 11 out of 18 endorsed exhaustion in work setting.
- Subscale significant findings:
 - Residents in program year 1 are significantly more likely to report exhaustion as compared to residents in program year 2 [$F(2,10)=3.875$, $p=.05$].

	Disengagement	Exhaustion
Program Year (n)	Mean (SD)	Mean (SD)
1 (6)	16.3 (2.1)	23.8 (4.4)
2 (3)	15.3 (2.5)	15.7 (2.3)
3 (4)	16.2 (3.2)	20.3 (5.4)

- Chi-square & Fisher Exact test analysis- no significant relationships btwn program year. Except for OB8 & OB10:
- **OB8: 2nd year residents where significantly more likely to feeling emotionally overwhelmed, and 1st years were least likely to report feeling emotionally drained** ($\chi^2 [6, 13] = 14.6, p = .01$).
- **OB10: 2nd year residents where significantly more likely to report feeling they have enough energy for leisure activities after work, while 1st years were the least likely to report feeling this way** ($\chi^2 [6, 13] = 12.4, p = .04$).



Focus Group Feedback

Most Stressful:

- Admin Duties
- Need more support staff
- Feedback that is critical
- Meetings
- Inpatient rotation
- Lack of family support
- Social Isolation
- Long days & nights
- Limited control over schedule

Most Rewarding:

- Helping my patients
- Positive feedback
- Learning
- Sharing experiences/laughing with colleagues
- Working with refugees

Suggestion for Wellness Curr.:

- Fun
- More support/inclusion of families
- Admin Time

Barriers to Wellness

- Structural Violence in Medicine
- Moving beyond individual responsibility to systems/structure of medicine

Discussion

Learning Assessment

- Identify and describe at least two factors that contribute to physician burn-out.
- Name at least one assessment tool to measure burn-out and well-being.
- What did you take away from this presentation and how might you apply it to your work setting?

Session Survey

Use the CFHA mobile app to complete the survey/evaluation for this session.



Join us next year in Philadelphia, Pennsylvania! Thank you!