

SNI Webinar Recap

Landscape of Workforce Wellbeing

On September 28, 2022, SNI hosted a webinar featuring Dr. Read Pierce, Chief of Hospital Medicine and Associate Chair for Faculty Development and Wellbeing at University of Texas, Austin. The webinar slides* and recording are available [here](#). Below are key takeaways from the session.

Current State of Workforce Wellbeing

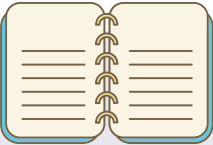
- Burnout is significantly higher than before the pandemic: **35-50%** → **60-70%**
- Mental health conditions are now also a major concern: **50%+** experiencing anxiety, depression, and/or PTSD
- Healthcare staffing shortage is unprecedented: Deficit of **150,000** physicians by 2033 and **1+ million** nurses and **3+ million** essential low-wage health workers over the next five years

The Negative Effects of Burnout

- Burnout degrades the quality of interpersonal interaction and workplace culture, causing:
 - Poorer diagnostic accuracy
 - Increased surgical complications
 - Lower patient satisfaction
 - Worsened morale, retention, and performance
- Burnout is associated with infections, lower patient satisfaction, cost and readmissions, high standardized mortality ratios, medication errors, and length of stay.
- Due to turnover costs, physician and nurse burnout costs \$4.6 billion and just under \$9 billion per year, respectively.

"In the US every year, lost productivity is estimated to equal the loss of the graduating classes of seven medical schools."

- Shanafelt TD et al., 2016



Three Good Things

In a study, health care workers who wrote down three good things from their day and what their role was in making those things happen for just 15 days, experienced increased happiness, better work-life balance, and reduced burnout and depression, with results lasting 12 months.

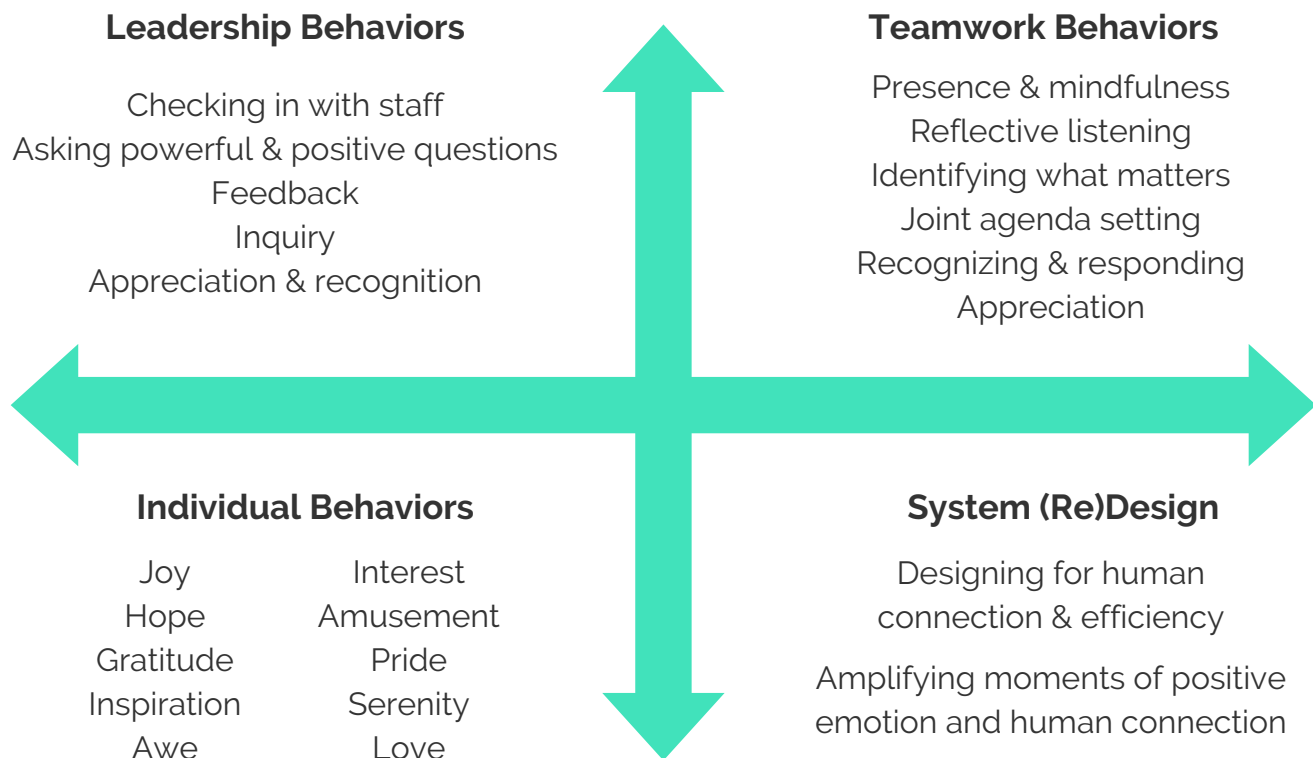
Evolution of Models for Workforce Wellbeing

From the 1980s to now, models of burnout have evolved from focusing on **emotional exhaustion, depersonalization, and low sense of personal accomplishment** to centering **emotional recovery and emotional thriving** (i.e., joy, hope, gratitude, love, etc.).

*Citations and sources can also be found in the slide deck.

Framework of Interventions to Enhance Workforce Wellbeing

Dr. Pierce introduced a framework of workforce wellbeing interventions, organized into four primary categories, and provided examples of effective interventions.



What are Public Health Care Systems Trying?

- **Riverside University Health System** set up a live chat app operated by trained peer support specialists for staff to utilize.
- **San Joaquin General Hospital** implemented an AI-powered medical scribe in exam rooms to reduce workloads.
- **Los Angeles County Department of Health Services** ensures that leaders check in on team members' wellbeing when making rounds.

"The underlying science is: How do we build actions that generate positive emotions regularly inside our daily work?"

- Dr. Read Pierce

Wellbeing Measurement Approaches: Part 1

On October 24, 2022, SNI hosted a webinar featuring Dr. Bryan Sexton, Director of the Duke Center for Healthcare Quality and Safety at Duke University Health System. The webinar slides and recording are available [here](#). Below are key takeaways from the session.

Workforce Wellbeing is Quality

Recent studies show that emotional exhaustion increased among nurses and physicians from 2019-2022, which has significant consequences on work effort and costs approximately **\$4.6 billion per year** in physician turnover and reduced workloads.

Burnout is also associated with infections, lower patient satisfaction, medication errors, and higher standardized mortality ratios, demonstrating that workforce wellbeing *is* quality.

Bite-Sized Interventions

Dr. Sexton introduced several bite-sized interventions to improve wellbeing among health care workers:

- **WISER intervention:** a package of six evidence-based bite-sized interventions proven to improve wellbeing
- Frontline **wellbeing ambassadors** to champion wellbeing
- **Positively-framed Patient Safety Leadership Rounding** (e.g., “what’s going well and what could be better?” versus “how are we messing up?”)
- Resources:
 - [Duke Center for Healthcare Safety and Quality:](#) Evidence-based resources and tools for well-being, resilience, and measurement
 - [Well-B:](#) Free evidence-based pandemic recovery series for health care workers



Promising Practice

Make wellbeing interventions

ruthlessly simple and accessible. Bake them into organizational structures by “hiding” them in CME credits, making them bite-sized, piloting them with different end-users, and fitting them all into one session with food and without homework.

Validated Measurement Tools and Metrics

- **If you're only going to measure one thing, make it emotional exhaustion.** Emotional exhaustion is the best metric for wellbeing because of its ability to predict disruptive behavior, intentions to leave within the next year, and reduced clinical hours. It can be predicted by work-life balance, which is best measured through behaviors like sleeping less than 5 hours in a night, skipping a meal, and working through a shift without breaks.
 - If you have the ability to measure more items, other good wellbeing indicators are **happiness, thriving, recovery, and work-life balance.**
- **The Safety, Communication, Operational Reliability, and Engagement (SCORE)** survey consists of domains on burnout climate, local leadership, teamwork climate, safety climate, work-life balance, improvement readiness, emotional thriving, and emotional recovery, and is a good indicator of outcomes such as patient satisfaction, turnover, and infections.
- A survey response rate of 60% or higher is important to the reliability of the data.

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Wellbeing Measurement Approaches: Part 2

On November 14, 2022, SNI hosted a webinar featuring Dr. Christine Sinsky, VP of Professional Satisfaction at the American Medical Association (AMA), and Dr. Elizabeth Harry, Senior Medical Director of Well-being at UHealth. The webinar slides and recording are available [here](#). Below are key takeaways from the session.

Validated Tools to Measure Burnout

The National Academy of Medicine recommends the following [validated and reliable survey instruments to measure burnout, well-being, and other work-related dimensions](#):

- Maslach Burnout Inventory (MBI)
- The Well-Being Index
- Stanford Professional Fulfillment Index
- Mini-Z Single Item Burnout Question
- Oldenburg Burnout Inventory
- Copenhagen Burnout Inventory
- The Patient Health Questionnaire-9 (PHQ-9)

Key takeaway: Pick a tool that is recommended by the National Academy of Medicine or Surgeon General and use it repetitively to track changes over time.



Align wellbeing measurement with existing structures

- Identify wellbeing measures that align with and improve existing Key Performance Indicators.
- Make a list of other surveys that your institution uses to ensure there's no overlap. Ideally, an organization should consolidate all surveys into one with smart logic that only displays the relevant questions.

Now What? Considerations Once You've Collected the Data

Quantitative survey data isn't a blueprint for interventions, but an initial signal of need. Use survey results as a starting point for conversations with staff (e.g., focus groups, townhalls, crowdsourcing). Then, starting with the frontline's recommendations and focusing on evidence-based interventions, develop wellbeing interventions. **"Nothing about me without me."**

"Don't Reinvent the Wheel": Tools to Create an Organizational Scorecard

- National Academy of Medicine's [National Plan for Health Workforce Well-Being](#) is organized into seven priority areas and is a useful resource to structure organizational wellbeing "to-dos."
- The AMA's [Organizational Biopsy](#) is a free assessment and set of services organized around the Stanford WellMD Model to support organizations in measuring and taking action on wellbeing.
- Many organizations have used the AMA's [Joy in Medicine recognition program](#) to form their strategic wellbeing roadmaps.

Other Wellbeing Tools

- The AMA developed an [interactive calculator](#) that estimates the cost of burnout at organizations.
- [AMA STEPS Forward](#) offers 70+ free toolkits, videos, and webinars on practice transformation, for example, to improve:
 - **Efficiency:** [Saving Time Playbook](#) and [Getting Rid of Stupid Stuff](#)
 - **Culture:** [Chief Wellness Officer Roadmap](#) and [Building Bridges Between Practicing Physicians and Administrators](#)
 - **Institutional support for personal resilience:** [Peer Support Programs for Physicians](#)
- The AMA's [De-Implementation Checklist](#) lists processes with low value-added that organizations can consider de-implementing, such as password-related burdens.