



Sustaining and Training for Resilience, Engagement and Meaning Training Manual

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STREAM Facilitators Checklist

| Planning to promote the session | | Who |
|----------------------------------|--|-----|
| | Set Date and email STREAM@nationwidechildrens.org with date and module | |
| | Determine modality (face to face, virtual, hybrid) | |
| | Reserve Space or Set up virtual meeting | |
| | E-mail announcement with link to register on the STREAM site | |
| | Create appointment in Outlook with all of the rooms, speakers (or have leader from groups complete) | |
| Planning for technology use | | Who |
| | Test presenting slides and videos in the room or virtual meeting platform | |
| | Plan for technology glitches | |
| Preparing for group facilitation | | Who |
| | Reflect on the context including who is attending and any situational factors | |
| | Review learning objectives | |
| | Review the flow of the session | |
| | Prepare your introduction | |
| | Develop session participations guidelines | |
| | Practice video introductions and debrief questions | |
| | Practice activity introductions and facilitation <ul style="list-style-type: none"> • Communicate purpose of activity • Communicate assignments • Plan for interaction with participants during the activity • Prepare to debrief after the activity | |
| Planning the session Wrap up | | Who |
| | Encourage reflection and planning of next steps | |
| Post Presentation | | Who |
| | Send attendance data to STREAM (if you don't use attendance QR code) | |
| | Review evaluation data and plan improvement for the next session | |

Planning for technology use

STREAM sessions leverage a few common educational technologies to deliver an effective and engaging program. The technologies used include PowerPoint presentations and video as well as Zoom in the case

of virtual sessions. Planning for technology includes testing it in the venue where the session will take place and planning for what you will do if it fails during the session.

Technology used during STREAM sessions

The format of the content for STREAM sessions is PowerPoint presentations and MP4 videos. Most personal and institutional systems are able to play content in these formats. Additionally, sessions may use audience response systems. Facilitators should use the audience response system supported by your institution. If you are presenting via Zoom, use the Polls feature for audience response questions. For more information on creating a Zoom poll visit <https://support.zoom.us/hc/en-us/articles/203749865>

Zoom Tips

If your presentation will be virtual there are a few basic tips to improve the experience for your participants:

1. Make sure your audience can hear you. Test your mic before joining a Zoom meeting. Go Zoom Settings > Audio and test both your microphone and speakers.
2. Make sure your audience can see. Natural light is the best tool to look good in a virtual presentation. If the natural lighting isn't an option, experiment with lamps – even a cheap ring light can make a huge difference.
3. If you have an unstable connection in the middle of a session, turn off your camera to save bandwidth. While it is not ideal, if participants can hear, you can still be effective.
4. To avoid a cluttered screen with static images and videos, you can hide meeting participants without video from the gallery view. Go to Settings > Video and click Hide non-video participants.
5. Hide your self-view during Zoom presentations. The self-view can be distracting. To avoid that, press the three dots button on your video and choose Hide Self View.
6. Eliminate notifications like messages or ads popping out when you're sharing your screen. If you're using a Mac, we recommend turning on Do Not Disturb mode, and for Windows users, use Focus Assist to avoid unnecessary pop-ups.
7. Encourage your audience to use reactions so they can respond and give feedback without unmuting or affecting meeting time

Test presenting slides and videos (including audio)

To ensure that your presentation will run smoothly, test your slides and videos in the room (or zoom room) you will use on the day of the session. Make sure that all the videos launch and can be seen and heard by participants. Make sure that the system speakers are connected to the computer that is displaying the presentation. If using your laptop, plan extra time to get it connected to the room audio. It can be helpful to send the presentation and videos in advance to the technology support staff at your venue in case they need to make any adjustments to systems settings. The files are very large and may not be accommodated by email so you may have to find an alternate file sharing method.

Plan for technology glitches

While the use of videos during presentations is common, so also are technology glitches that interrupt a presentation. To prepare for glitches, plan for what you will say or do in the following situations:

- What you can say or do while the problem is being fixed
- How you can summarize the video content so the learning can continue. Consider printing the slide deck so you have a hard copy to refer to.
- In light of the session objectives and flow, what can be modified in order to support learning and ensure the session ends on time.

Planning for group facilitation

When preparing to facilitate a session, reflect on the context, learning objectives, and instructional methods. Considering the context and learning objectives can provide a broad perspective that will inform the detailed choices you make about the instructional methods.

Reflect on the context including who is attending and any situational factors

Considering why sessions are being offered, who are the stakeholders and champions, and the needs of the participants can provide insight that will inform the choices you make about facilitation strategies.

Reflect on the following questions:

- Why are STREAM sessions being offered?
 - What are the results of the program needs assessment
 - Who are the stakeholders and champions? Why do they support offering the program?
- Who will be attending?
- Why are they attending?
 - Are there situations or factors impact the need for the program?
 - Are there talking points or resources you want to make sure to include?

Review learning objectives

Reviewing the learning objectives for the session in light of the situational factors to determine how well they are aligned with the need for the program and the situational factors and if there are any modifications you need to make in the way you facilitate the session.

During a session, the facilitator's specific roles typically include:

- Setting clear goals at the start of the session
- Facilitating the session and ensuring it runs on time
- Encouraging participants to ask questions throughout the session
- Clarifying areas that may cause misunderstanding or confusion

Prepare your introduction.

The introduction of the session can influence the learning climate and promote psychological safety. Practice your introduction including:

- An overview of STREAM

- Introducing yourself and your interest in facilitating STREAM sessions
- Learning objectives
- Session Guidelines

Develop session participations guidelines

Guidelines can foster an atmosphere of psychological safety, mutual respect, and collaborative inquiry. They help clarify expectations, cultivate a sense of belonging and the ability to engage productively.

The following are some suggestions for guidelines:

During this session we will be discussing some potentially sensitive issues. The following guidelines are designed to encourage safe and productive discussions.

1. Consider what participants share today to be confidential.
2. Listen respectfully.
3. Be open to hearing and learning from other perspectives.
4. Share responsibility for including all voices.
5. (If presenting virtually) Discussions are improved when participants can see non-verbal cues. If you can please keep your cameras on.

To help participants internalize the guidelines, wrap up the discussion of ground rules by asking if there are questions or suggestions for additional ground rules.

Preparing to facilitate

- Practice video introductions and debrief question.
- Practice activity introductions and facilitation
- Plan the session Wrap up to encourage reflection and planning of next steps
- Utilize the facilitation rubric to remind yourself of good practice (last page of this document)

Attendance

There is a QR code for participants on the title slide as well as the slide with the first activity to allow the opportunity to complete to those who were late or otherwise unable. If there are issues with the QR code, please utilize a paper sign in (for in-person) or put names in chat (virtual sessions) or other method of choice and then send the list of attendees to STREAM@nationwidechildrens.org.

Post Presentation

Reflect on presentation and plan improvement for the next session

Were there any unexpected questions, comments or something that didn't go as planned? Anything you would like to change for next time? What can you share with the larger group to improve everyone's success? We will share some of these ideas during our every-other-month STREAM faculty calls.

Face to Face and Virtual Sessions

| Active Learning Strategies | Face To Face | Virtual |
|--------------------------------|--------------------------------|--------------------------------------|
| Audience Response | Institutional supported system | Polls or Chat |
| Large Group Discussions | Participant discussions | Participant discussion or chat |
| Small Group Discussions | Table Groups | Break out rooms |
| Think-Pair-Share | Table groups | Break out rooms |
| Popcorn style reporting | Order by tables | Participants decide who reports next |

References

[Guidelines for Discussing Difficult or High-Stakes Topics | CRLT \(umich.edu\)](#)

Billings H, Malin T, Allen J, et al. Reimagining Learning Spaces of the Future: An Interprofessional, Virtual Workshop Utilizing Rapid Idea Generation and Lean Startup Methodologies. *MedEdPORTAL*. 2022;18:11217. Published 2022 Feb 11. doi:10.15766/mep_2374-8265.11217

Hurtubise L, Martin B, Gilliland A, Mahan J. To play or not to play: leveraging video in medical education. *J Grad Med Educ*. 2013;5(1):13-18. doi:10.4300/JGME-05-01-32

Hurtubise LC, Turner TL, Ledford CH, Mahan JD. Getting Started With Online Faculty Development. *J Grad Med Educ*. 2015;7(4):671-672. doi:10.4300/JGME-D-15-00415.1

Introduction

Those who practice medicine typically aspire to the positive aspects of the culture of medical humanism: striving to provide excellent care, adhering to ethical standards and contributing to the greater good. Unfortunately, necessary stressors, such as clinically and emotionally challenging patients, unpredictable workloads and documentation burden, and unnecessary stressors, such as difficult systems and teams threaten the persistence and wellness of even the most dedicated physicians. Recognition that multiple toxic characteristics of the medical culture are also contribute to distress and burnout in many individuals, including striving for perfectionism, an exaggerated sense of responsibility, self-criticism, suffering in silence and tending to work in isolation. The prevalence of extreme stress, burnout and more serious mental health concerns in physicians has been increased by the COVID-19 pandemic. In late 2022, pediatricians continue to be profoundly stressed due to the combination of pediatric COVID, atypical RSV and influenza, with pediatric hospitals reaching capacity even before the traditional cold-weather virus season. Burnout in physicians contribute to early retirement and attrition which will worsen the already anticipated shortfall of physicians by 2025. Burnout is a serious concern during residency where it affects between 39-74% of trainees and is associated with more medical errors and less effective care. Resident training is an important time to attend to mental health issues.

While multiple interventions targeting stress reduction and burnout in physicians have been developed and overall show promise, burnout rates in pediatricians has been rising for years even before the pandemic. Even with efforts to address systems issues to reduce distress, persistence of high levels of burnout imperil our health care system. STREAM is an interactive, skill building program to improve physician, clinician and trainee well-being. STREAM offers tools to improve individual and systems across four topics: Well-Being, Engagement, Resilience and Joy and Meaning.

The program is customizable:

- Groups can choose 1 or more topics

- All topics have a brief (60 min) and extended (90+ min) version

- Longer versions have more time for activities and cover the topic more in-depth

- All topics can be presented in-person or virtually

A main goal of this program is to be interactive (see design principles). Knowledge alone rarely supports behavior change. In that vein, we have developed an app to support STREAM colleagues in setting and meeting their personal goals related to STREAM topics.

All materials can be found on the website (<http://streamelms.com>). Once you create an account and login, there is a faculty resources tab where you can access the training manual, IRB materials, PowerPoint presentations, etc.

STREAM staff are willing to schedule a dress-rehearsal if you would like to practice before presenting. In addition, if you want to discuss a session or if there are unique circumstances at your site, STREAM leadership is available to support you. To schedule times, email Julie Young (Julie.Young@nationwidechildrens.org)

Well-Being

Introduction:

This module focuses on optimizing your well-being and supporting your colleague's well-being. Positive mental health is foundational to overall well-being. Like physical health, mental health can fluctuate depending on individual circumstances. The goal for this module is to help participants respect their mental health and help them create a supportive environment for their colleagues. Many people do not focus on their mental health until they are feeling very poorly. Participants are encouraged to be proactively attune to what things replenish and deplete them can help guide them in focus on themselves to prevent significant declines in well-being. In the same vein, brining awareness to the sometimes-subtle changes that occur when well-being is dropping can allow participants to adapt their attention to implementing well-being strategies before significant deleterious effects of poor mental health take hold. Also in this section, participants are guided to consider the best ways to support the wellness of their colleagues; creating a culture of caring can offset some of the negative aspects of medical culture such as perfectionism. In the longer version, time is taken to explore suicide in medical professionals, including risk and protective factors as well as providing the most up to date research on the subject.

Objectives:

1. Deepen our understnading of physician mental health and what factors of medical culture enhance risk
2. Commit to periodic reflection on mental health as a vital sign
3. Discuss personalized, proactive strategies for optimizing mental health and protect against suicide risk
4. Know when and how to approach a colleague for whom you are concerned
5. Develop and implement a well-being plan and identify an accountability buddy or team

Lesson plan:

Introduction

Background on how mental health has gained attention and dynamic model of mental health

Mental Health as a vital sign

INDIVIDUAL ACTIVITY: Reflect on personal triggers for poor mental health

Optimizing mental health – importance and strategies

*INDIVIDUAL ACTIVITY: Gratitude, personal reflection

*GROUP ACTIVITY: Gratitude, group discussion

*GROUP ACTIVITY: Creating a culture of caring

Supporting your colleagues

*GROUP ACTIVITY: Experience with Reaching Out

PARTNER ACTIVITY: Approaching a colleague

Mental health as a vital sign

*GROUP ACTIVITY: Mental health as a vital sign discussion

PARTNER ACTIVITY: Design your personal well-being plan

Pair-Share strategies

Summary and wrap up

*Only in 90 minute version

Engagement

Introduction

Engaging in improving one's work increases job satisfaction, even in those who are burned out. A key element is collaborating with your team to drive positive changes as relationships and accomplishments are both important drivers of well-being. This section aims to remind people what it feels like to be engaged in problem-solving and to give them some space to begin thinking about how they can be more engaged in their work. This section is a little different than the others. For the 60-minute version, you will need to gather some information on work stressors that contribute to burnout from the group you are presenting before the training. You can create an anonymous poll (like survey monkey) and have the group leader send it out. Summarize the results/update water cooler (slides 17 and 18). Be prepared to discuss if there are any big differences between the typical stressors Suzie presents and the groups stressors. Update the engagement worksheet with cases to reflect the stressors of the group. (If you need some help with this, please email the project manager - julie.young@nationwidechildrens.org)

Objectives:

1. Appreciate relationship between physician engagement and overall wellness
2. Reflect on areas of personal importance in work that contribute to own/colleagues' stress/burnout
3. Identify explicit ways to become involved in systems-improvement efforts in your own organization

Lesson Plan:

Introduction

Background – what is engagement, why is it important

*SMALL GROUP ACTIVITY: Identify your stressors

Empowering people to change their work environment

GROUP ACTIVITY: Examples of engagement in action

SMALL GROUPS ACTIVITY: Engagement in action

*Context in engagement

*PARTNER ACTIVITY: Personal reflection on engagement opportunities

Wrap up

*Only in 90-minute version

Resilience

Introduction: This section primarily on individual strategies to promote resilience. The materials are adapted from a curriculum called Flourish, which was developed by Jenny Reese. The 60-minute version covers thinking about total well-being, work life balance and using values to guide decisions. The 90-minute version also covers mindfulness and positive psychology interventions. For the 90-minute version, you will want to email out the flourishing ratio spreadsheet to participants ahead of time. As a backup, they can use the paper version on the worksheet, but they may need a few extra minutes to calculate their score. For both versions, it can be helpful to bring some crayons/markers/colored pencils for people to use when completing the PERMAH wheel. As a backup, you could ask to get some different colored highlighters from the unit.

Objectives:

1. Identify the 6 facets of the PERMAH Model of Well-being.
2. Apply the concept of well-being to your own life.
3. *Be acquainted with scope and scientific underpinnings of mindfulness and meditation
4. *Identify how to assess “mindfulness” for personal application
5. *Understand role of Positive and Negative affect/emotion as normal processes within PERMAH Model of Well-Being
6. *Practice exercises designed to cultivate positive emotion
7. Integrate valued directions as a guide toward balance and meaning in the PERMAH Well-Being Model

Lesson plan:

Introduction

Total well-being

PARTNER ACTIVITY: Think of a time when you were at your best

PARTNER ACTIVITY: PERMAH coloring wheel

*Pragmatic mindfulness

*GROUP ACTIVITY: Short mindfulness activity

*Positive Emotion

*INDIVIDUAL ACTIVITY: Flourishing Ratio

*GROUP ACTIVITY: Venting Discussion

*PARTNER ACTIVITY: What’s energizing you right now?

Values-based living

PARTNER ACTIVITY: What brings you joy/How do you want people to see you

INDIVIDUAL ACTIVITY: Values Bullseye

* In 90-minute version only

Joy and Meaning

Introduction: This section focuses on connecting with joy and meaning in medicine. Focusing and living your purpose improves your health. Leveraging positive colleague and patient relationships can cultivate joy. The skill for this session is reflective practice. The point of reflective practice is to ponder things that go well or things that go poorly to see how the story unfolded: How did your thoughts/feelings/behaviors influence the situation? What is something you want to make sure you do again (or not do again)? The one-hour sessions with either be on Meaning or Joy. The longer session will include both Meaning and Joy. In the 90-minute Joy and Meaning, the reflective practice on Joy will convert to a group discussion after the individual reflection (as opposed to a partner share).

Objectives:

1. Understand the importance of connecting with meaning
2. Connect with joy in medicine through positive relationships
3. Use reflective practice to deepen connection with joy and meaning

Lesson plan:

Meaning

Introduction

Why focus on meaning

PARTNER ACTIVITY: Reflect on meaning

How to focus on meaning

PARTNER ACTIVITY: Reflective practice/pair share

*PARTNER ACTIVITY: Ask and open and hones question

How to continue

Summary

Joy

Introduction

What is Joy

PARTNER ACTIVITY: What brings you joy

Relationships

PARTNER ACTIVITY: Reflect on positive relationships

How to continue

GROUP ACTIVITY: Making space for Joy

Summary

*Only in the 90-minute Joy and Meaning.

STREAM Activities

* Are only in 90 minute sessions

Well-Being:

1. *Mental Health as a vital sign discussion
 - Objectives: discuss if mental health should count as a vital sign
 - Debrief template: Regardless of whether or not you think mental health truly counts as a vital sign, it is important to treat it the same as physical conditions (such as high blood pressure)
2. What are your signals of distress?
 - Objective: self-reflect on personal triggers
 - Debrief template: You will use this in your well-being plan
3. *Intentional gratitude & culture of gratitude
 - Objective: reflect on 3 questions related to gratitude, discuss how gratitude can be cultivated at work
 - Debrief template: What strategies have people tried? What is something you are interested in implementing?
4. *Creating a culture of caring
 - Objective: Discussion about how to create a caring environment at work
 - Debrief template: What is a strategy you can implement?
5. *Experience with Reaching Out
 - Objectives: Recall times where people may have not seemed themselves, discuss if people felt comfortable reaching out and if they did how it went
 - Debrief template: It can feel uncomfortable to reach out to a colleague, especially if you do not have an especially close relationship. We are going to hear about some things that might make this easier from Dr. Moutier.
6. Approaching a Colleague
 - Objectives: practice vulnerability, identify key phrases to start/have uncomfortable conversations about mental health
 - Debrief template: How did that feel?
7. Well-being plan
 - Objectives: self-reflect on well-being status, identify individual signs of distress, design well-being plan, brainstorm people who can help to hold you accountable
 - Debrief template: What are some team-based strategies to improve well-being? How can you hold yourselves accountable as a team?

Engagement:

1. *Generating Stressors list (What are your stressors?)
 - Objectives: Generate list of things about work environment that contribute to poor well-being
 - Debrief template: Share ideas and prepare people to think about how they might make improvements

2. Other examples of engagement in action
 - Objectives: Participants begin thinking about what engagement includes
 - Debrief template: The slide has some examples to add to what the participants state
3. Engagement in action
 - Objectives: generate action-oriented solutions for positive engagement, practice considering explicit steps for potential solutions, rate likelihood of leadership investment in potential solutions
 - Debrief template: What was it like to try to come up with solutions? What was most difficult in this process? (emphasis on how different perspectives from a variety of people can allow for better/easier flowing solutions), Was this difficult or once you got in the flow did you find the work to be energizing?, emphasize that it can be a really positive process to get together with other thoughtful people and come up with ideas, Are these solutions practical?
4. *Personal engagement
 - Objectives: Allow people to start planning their own engagement to consider what stressor they might want to change, what people might want to work with them and who might sponsor the idea.
 - Debrief template: This was the start. Make a goal to continue.

Resilience:

1. Time you were at your best
 - Objectives: identify key values (aspects of PERMAH) within the stories that you hear
 - Debrief template: Share your story/what was that like to hear another person's story of them at their best ("What were you doing? Who was around you? Where were you? What about that time made you at your best?), what are some of the attributes you heard in your colleagues stories?, overall very brief
2. PERMAH Coloring Wheel
 - Objectives: self-reflect on various aspects of well-being, realize areas that need improvement/areas that are doing well, commit to specific actions to improve overall well-being
 - Debrief template: anything surprising? Any observations/anything that you noticed? (don't necessarily need to share details of wheel), what other areas do you want to devote a little more time to? What/when specifically can you do that?
3. *Steph Curry Video
 - Objective: Consider mindfulness in a chaotic environment
 - Debrief template: You can think about ways to incorporate mindfulness without going and sitting in a silent room
4. *Flourishing Positivity Ratio
 - Objectives: self-reflect on your overall well-being
 - Debrief template: No debrief
5. *Venting discussion
 - Objective: To discuss how to turn venting into a supportive conversation
 - Debrief template: We all need to have space to discuss things that aren't going well. Make sure that we are cognizant about how negativity can impact others. Try to support colleagues when they are struggling with negative emotions.
6. Values Clarification

- Objective: Pull out values you hear in other people's stories
 - Debrief template: Think about what your partner heard as values that are important to you. You will have the opportunity to reflect on your values in the next exercise.
7. Values Bullseye
- Objectives: reconnect with your core values, identify what qualities you want to cultivate as a person, learn that your values are centered in your relationships with others
 - Debrief template: What is important to you? Why did you choose this profession? What brings you joy and energy in work?

Joy and Meaning

1. Everyday meaning
 - Objective: Start to get people to focus on their meaning
 - Debrief template: We are going to spend more time connecting with our meaning shortly
2. Meaning Reflective Practice
 - Objectives: recall key moments or events that made you reflect on your purpose, connect with others over your story
 - Debrief template: What happened? How did the story unfold? What did you learn about what has meaning for you? Do you have any regrets looking back? Any thoughts about ways you can stay connected to what has meaning to you throughout the day? Act as the listener and keep trying to elicit important details out of those who share
3. Asking Open Questions
 - Objectives: Practice inviting people to reach deeper within their own thoughts
 - Debrief template: Asking open questions of yourself and others can help you connect more deeply with your meaning.
4. Reflect on a moment of positive connection with someone recently
 - Objective: Consider a positive connection in a relationship, share with a partner
 - Debrief template: We will have more time to think about joy shortly
5. Reflection on connecting with moments of joy
 - Objectives: reflect on a meaningful connection with a patient or a colleague, connect with others over your story
 - Debrief template: What were the joy moments of mutual delight?, Why was it meaningful to you?, What allowed you to experience that moment at that time (any specific mindset you were in, particular setting)? Surprises/insights? Relish in the joy of these stories and encourage the unique properties that come with each one. Use this time to really allow others to share their moments of joy.
6. *Making space for joy
 - Objectives: Discuss how to overcome our negativity bias
 - Debrief: We can change our brains to see the positive, but it does take work

STREAM Year 2 Design Principles:

The following principles were based off feedback from evaluation forms completed by participants, responses to questions elicited from participants, speaking with participants, and evaluating content from the lens of stated program goals.

1. **We will aim to develop content that is 35-50% discussions/interactive activities.**

Rationale: Participants comment regularly that the interactive parts with their peers are the most valuable. As a main goal of STREAM is practicing/building skills, this is best accomplished through activities and active learning. We can add short videos on specific topics for those that want to learn more about the background/evidence and make these available to participants and all who visit our website as optional asynchronous activities.

2. **We will offer the format in both 90 minute 60 minute sessions for each pillar with the ability to mix and match pillar modules/content based on site needs.**

Rationale: Sites can choose which format fits best for specific groups. 1 hour sessions could easily be delivered in a departmental meeting and organized development times. Longer sessions could be delivered in a retreat, academic half-days, etc. The ability to customize content should increase ability for participants to engage in STREAM.

3. **We will focus on live events with an emphasis on presentations being delivered during scheduled departmental/divisional meetings (eg staff meetings, retreats, etc).**

Rationale: Participants' comments strongly endorse the value of live sessions for interactivity with colleagues. This can be done virtually or in-person. We will not pursue asynchronous version due to these 3 deficits: 1. No connection with people; 2. Easy to play recording in the background/not actively engage with content; 3. Most of activities would need to be re-designed (and likely have a lower yield).

4. **We will develop content for a facilitator to lead rather than require STREAM sites to commit to developing content experts.**

Rationale: Site will struggle to produce individuals who can become subject matter experts. Our leadership team provides excellent content. Video clips will be re-recorded as needed for quality and dropped into slide decks for facilitators. Our training institute for year 2 will focus on training facilitators to use these slide decks (with different presentation options).

5. **We will incorporate explicit EDI content into each presentation.**

Rationale: Equity is foundational to promoting well-being. Feedback from evaluations consistently scored low on incorporating EDI into presentations. More intentional incorporation of EDI principles/content will help insure better delivery and training on this point of emphasis.

6. **We will highlight the evidence for topics**

Rationale: Physicians and trainees will see that STREAM is evidence-based and evidence-informed. We will review the most impactful evidence for each pillar as part of the didactic section of the presentation.

7. **We will introduce 1 skill in each domain and create additional content to reinforce the skills to be delivered through the app**

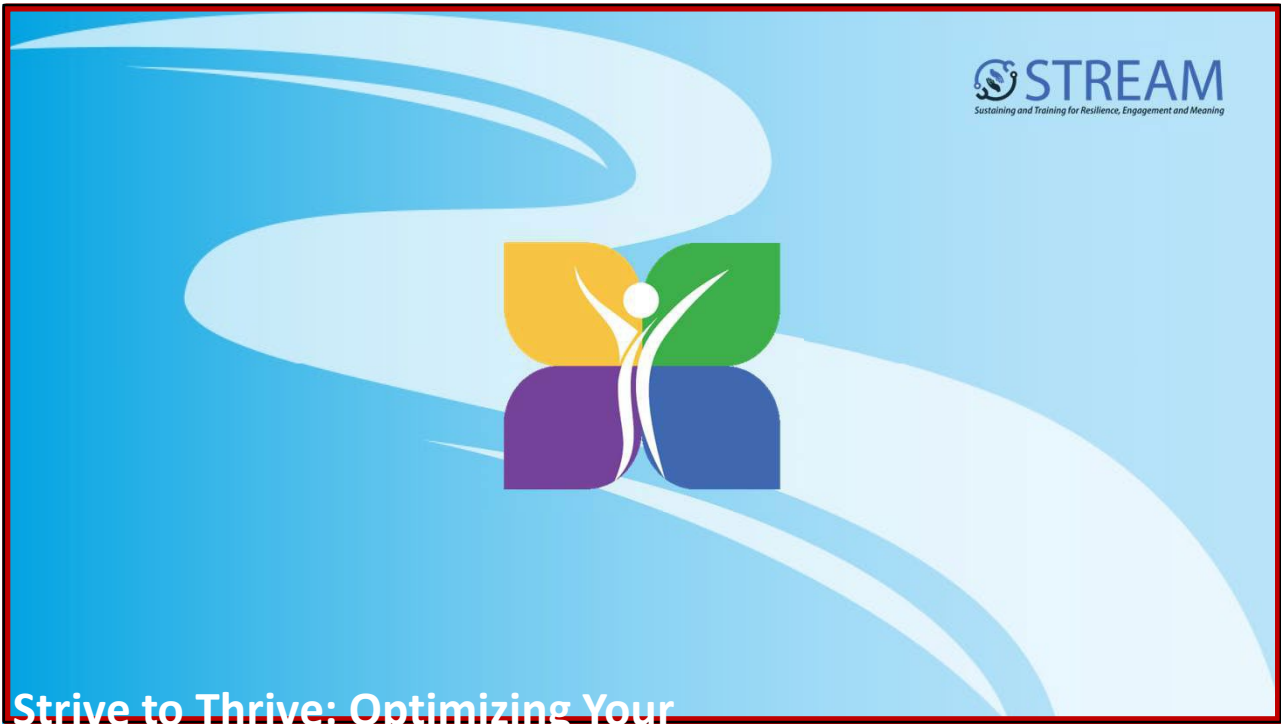
Rationale: Skill building is paramount for successful behavior change. While a 1 or 2-hour session may not allow participants to develop competency in the skill, the live presentations will introduce the skill and provide practical tips to allow participants to continue. Additional content/activities will help solidify the skill for participants.

8. We will ground each presentation in the PERMA-H framework

Rationale: We will frame each session as a part of PERMA-H to allow participants to visualize how each is connected to their well-being.

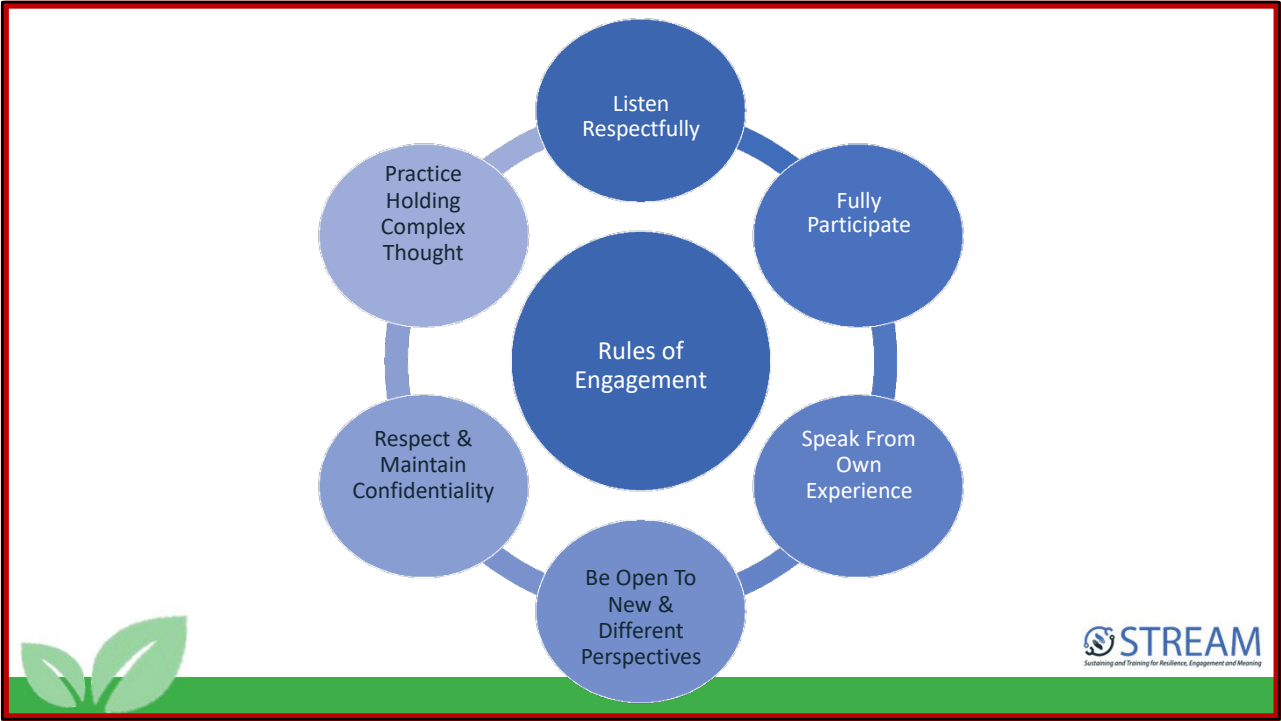
Slides with a red box around them are slides the facilitator will cover

Well-Being

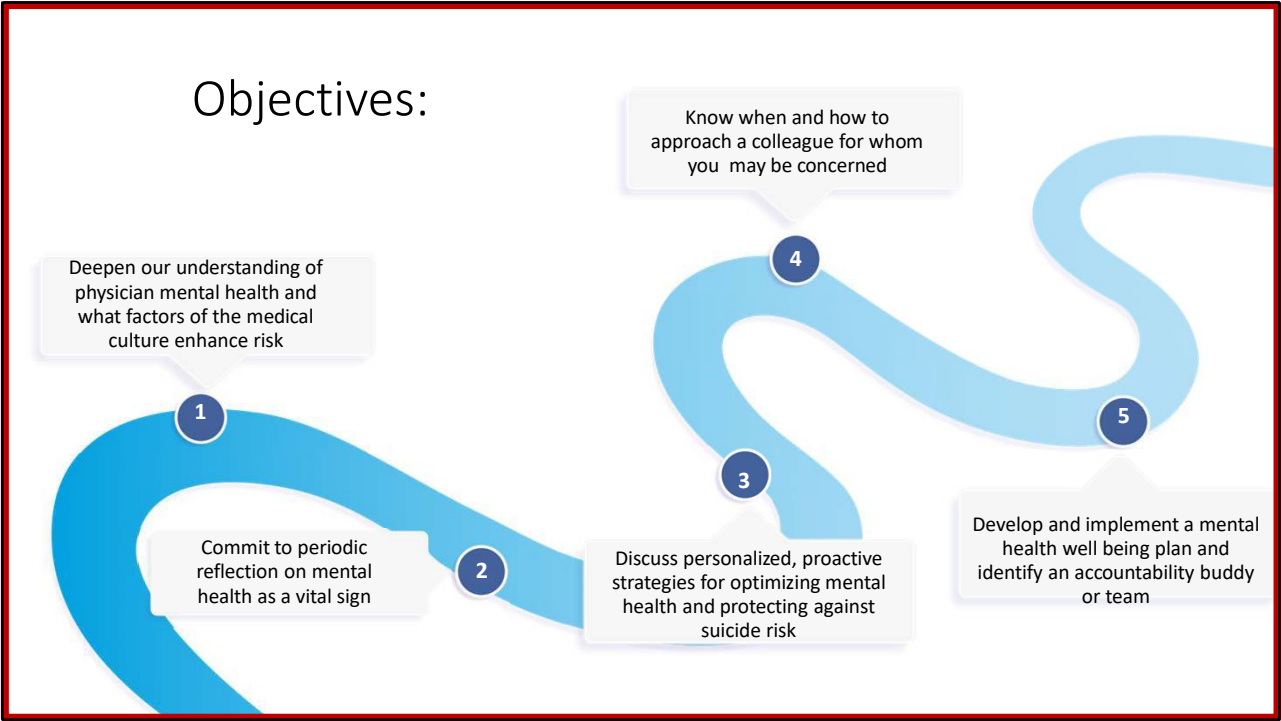


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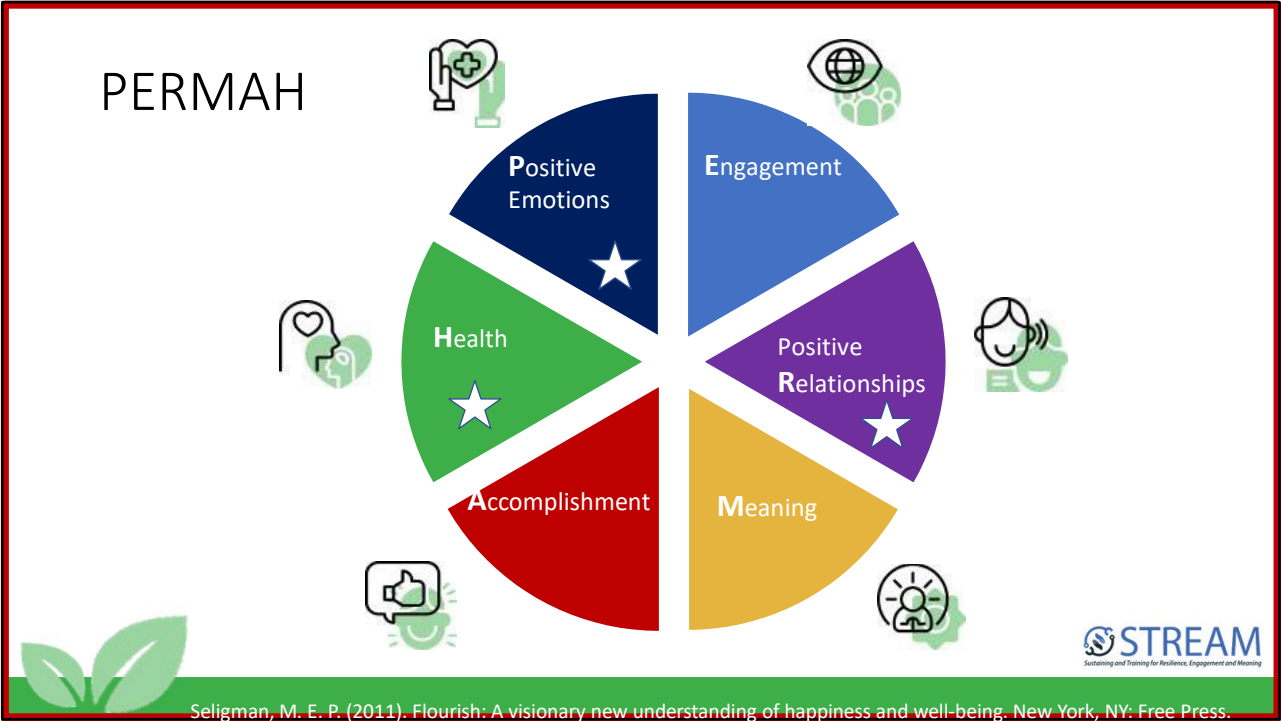




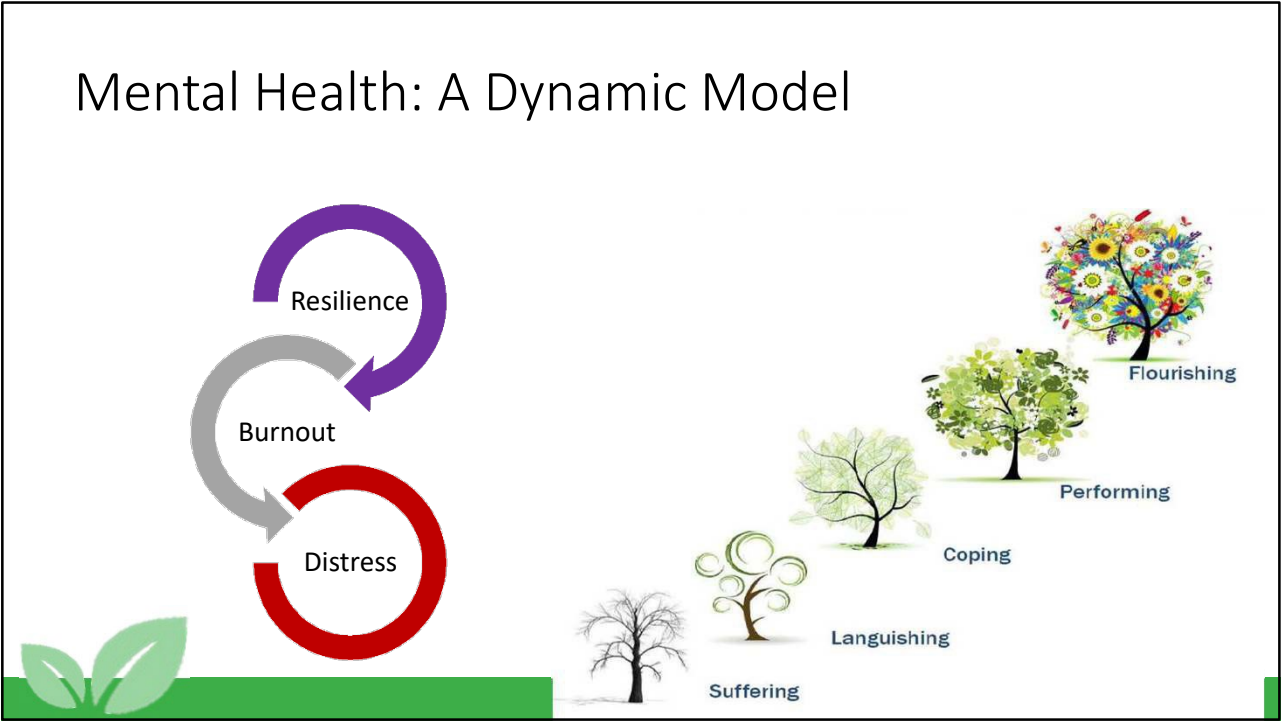
3



4



5



6

Physician Mental Health & Distress: Reflection on Mental Health as a Vital Sign

7

Positive Aspects of the Culture of Medicine

- Humanism as a foundational principle
- Working to serve others to provide excellent care
- Achieving the highest ethical and professional standards
- Contributing to something larger than oneself



 **STREAM**
Sustaining and Training for Resilience, Engagement and Meaning

Michalsak-Smith, *AMA J Ethics* 2015; Thomas LR, *JAMA* 2018

8

Negative Aspects of Medical Culture May Contribute to Personal Attributes that Increase Risk

- **Perfectionism/ Compulsiveness/ Rigidity**
- Need for control: *"If I just push myself harder, get more disciplined..."*
- High need for achievement
- **Exaggerated sense of responsibility/ Delay gratification**
- Need to please everyone
- **Stigma/Difficulty asking for help/Denying vulnerability**
- Excessive, unrealistic guilt
- **Suppression of feelings**
- Culture of self-sufficiency



Myers M & Gabbard G "The Physician as Patient" 2008; Gabbard G JAMA 1985 , Martimianakis MA. Acad Med. 2015, Wright SR. Acad Med 2019



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"Doctors, more often than not, are left alone to struggle with their suffering. Many find it hard to ask for help, to acknowledge needing it: they are trained to be independent, to be accountable for decisions that cost or save lives, and to assume an undue portion of the miseries of others."

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Humanism:

“My Relationship with Patients Sustains Me”

Facilitators

- Connection with patients
- Humanistic values
- Role modeling to pass on values
- Being in the moment

Threats

- Inadequate time
- Stress
- Medical Culture
- Episodic burnout



Branch WT, Pat Educ Couns, 2017

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Medical Culture Normalizes Serious Distress

- Physicians with a Well-Being Index score in the bottom **30%** of national physician cohort:
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Shanafelt et al, 2014, Schwenk et al, JAMA 2010

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- *Know your unique experiences that signal change in MH*

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- Similar to a body scan in yoga or meditation when you note areas of stress
- Recognize distorted “always/never” thoughts (e.g., “I’m never good enough”)

- Determine periodicity of reflection: daily, weekly?

- Notice a concern? Utilize your well-being plan



15



INDIVIDUAL ACTIVITY:

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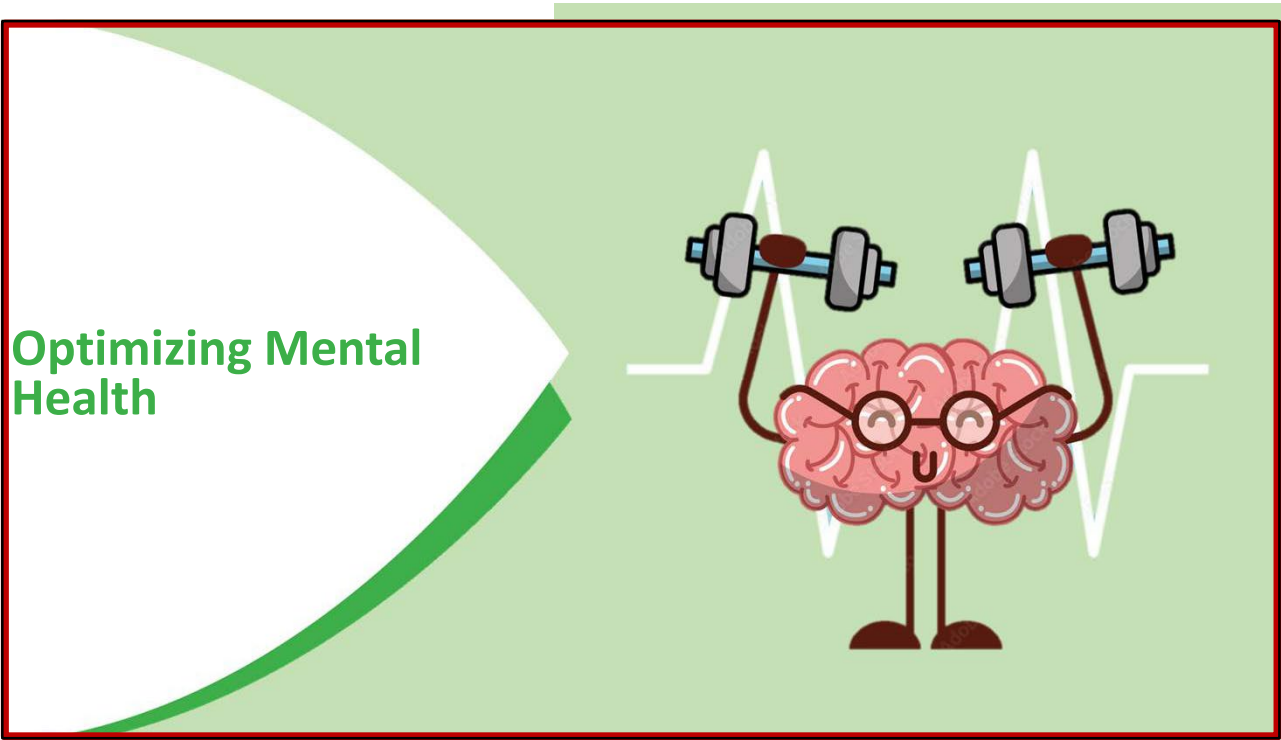
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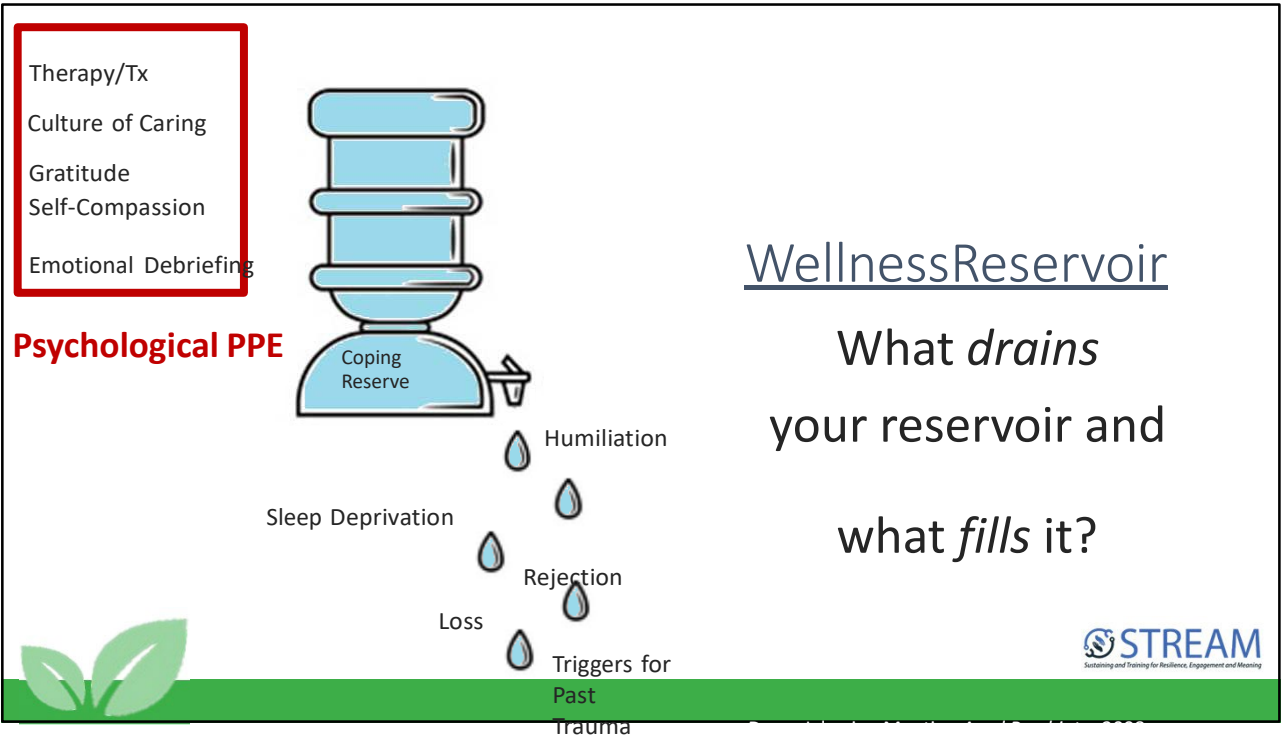
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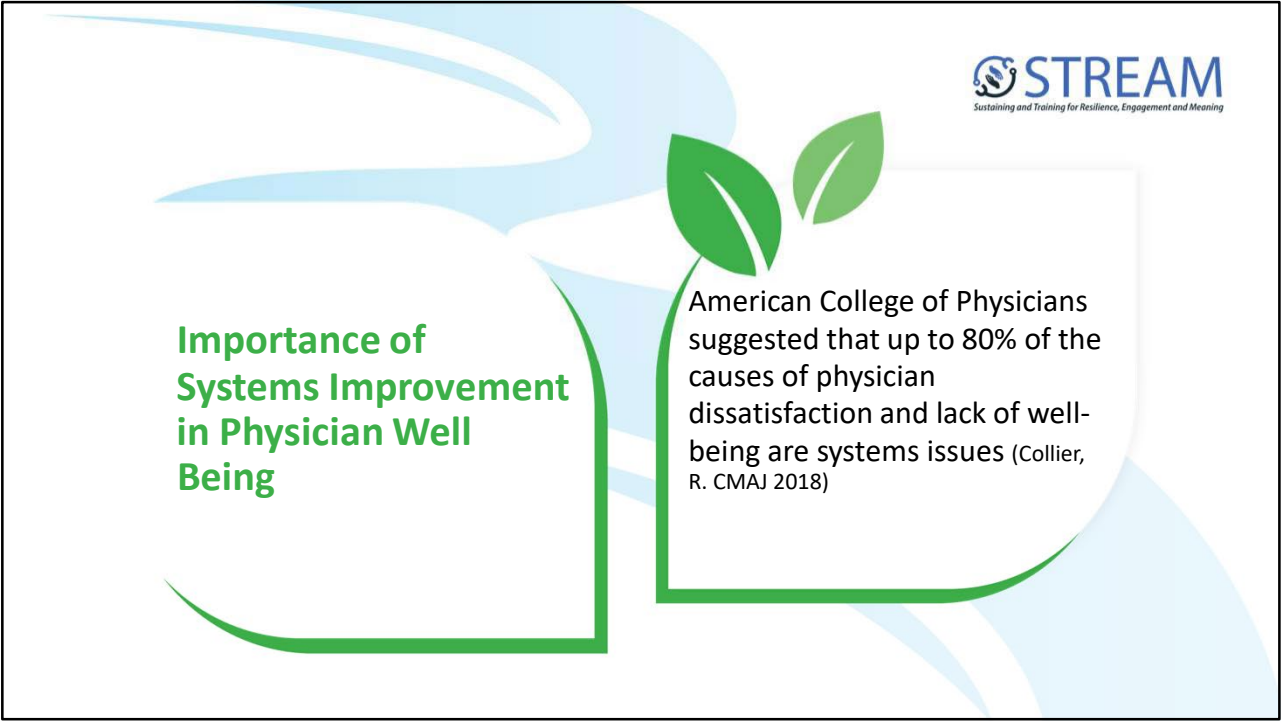

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17



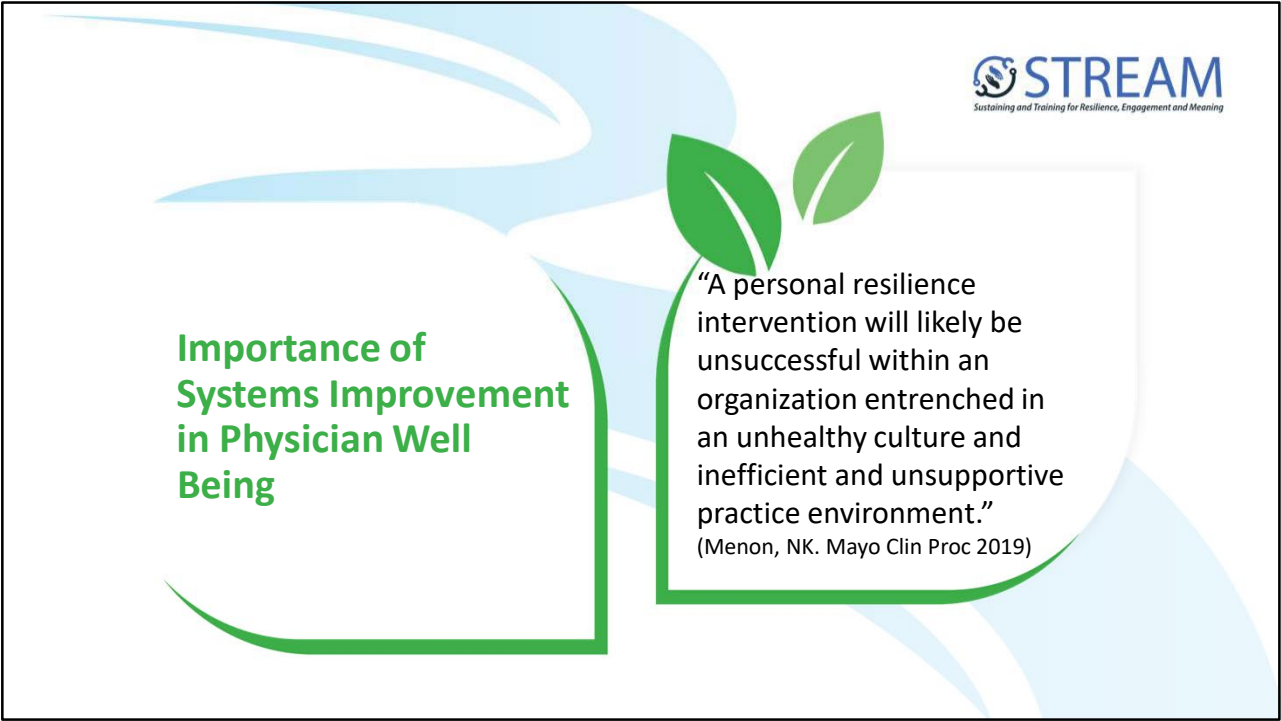

18



Importance of Systems Improvement in Physician Well Being

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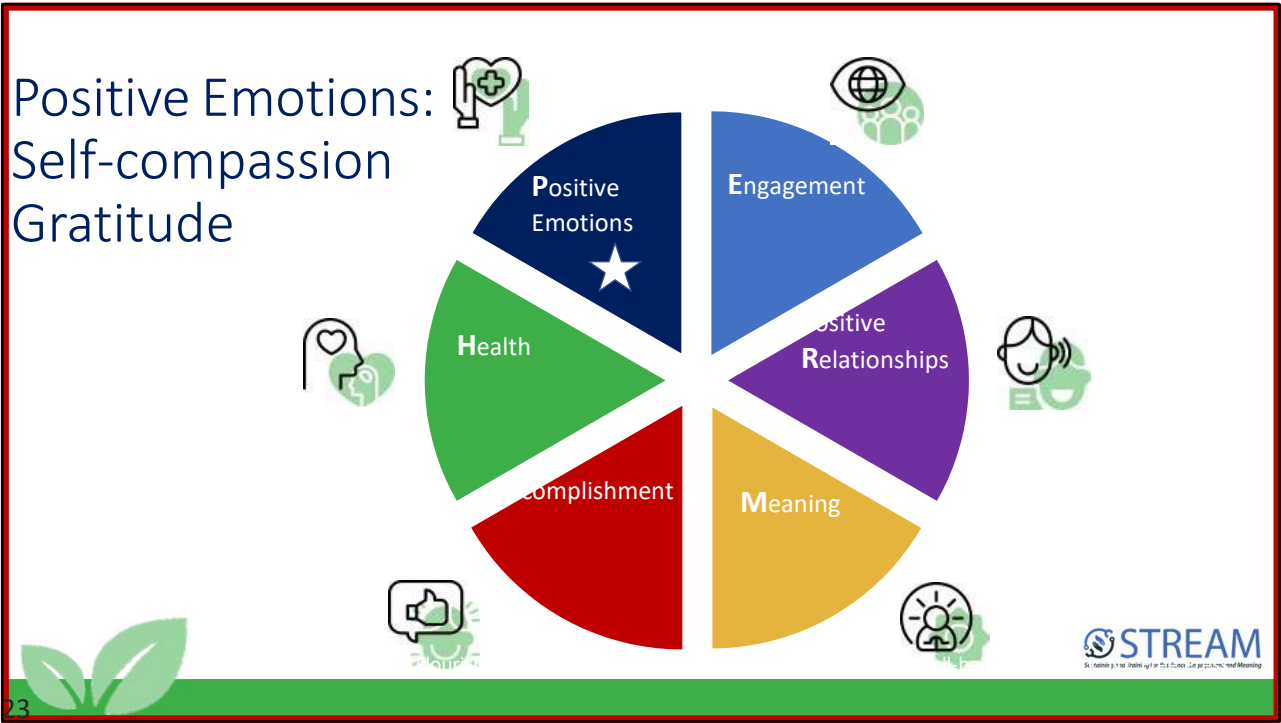
21

Strategies to Address Negative Aspects Medicine

- **Self-compassion**
- **Gratitude**
- **Create a culture of caring and sense of community**
- **Emotional debriefing, share our stories and vulnerability**
- **Therapy/Treatment**



22




Sustaining and Training for Resilience, Engagement and Meaning

Self-Compassion

- Way to minimize self-criticism and self-judgement that is counter productive
- Support ourselves at times of suffering
- “Treat ourselves as we would treat a friend”




Neff, KD. *Self and Identity* 2003

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Expressing Gratitude



- A "life orientation towards noting and appreciating the positive in life"
- Research has shown associations between gratitude and increased self-esteem and empathy
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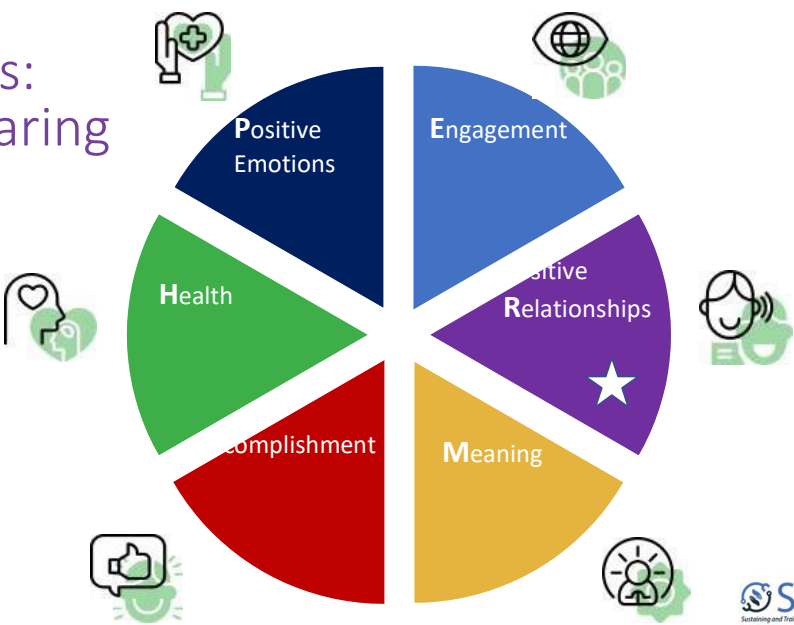


- Journaling (3 things)
- Questions to pose to family at dinner to reflect on the day
- Team huddles
- Expressing gratitude to patients/ colleagues/ friends/family members



27

Relationships: Culture of Caring Debriefing

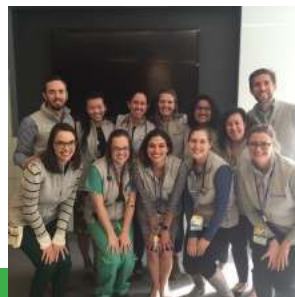


-Seligman, M. E. P. (2011). Flourish: A visionary new understanding of happiness and well-being. New York, NY: Free Press.

28

Social Support: Create a Culture of Caring within Your Team/Community

- **Respect the dignity of every person**
- Work colleagues as “family” - find your tribe
- Value other perspectives
- Resolve conflicts
- Be willing to be vulnerable - Tell our stories
- **Connection with colleagues is important!**



STREAM
Sustaining and Training for Resilience, Engagement and Meaning

29

Culture of Caring: Individual Approaches

- Check in on how everyone is doing along the way
- What language or code to assess: How are you?
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- Reach out to those who may be struggling
- Take time to talk, send a card, note, email
- Requires trust and receptiveness for honest disclosures

STREAM
Sustaining and Training for Resilience, Engagement and Meaning

30



STREAM
Sustaining and Training for Resilience, Engagement and Meaning

Debriefing: Discussion of Challenging Experiences


- 'Debriefing' comes from the military
- Acknowledge and articulate emotional impact; "moral injury"
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Debriefing/Relational Pauses

- How is our work affecting us as human beings?
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- Validates normal responses to distressing situations
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STREAM
Sustaining and Training for Resilience, Engagement and Meaning

Barton MA et al. *Harvard Business Review*, April 04, 2022

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**The Power of Being Vulnerable:
The Physician as a Person**

Humanity and humility share the same Latin roots.

“The power of being vulnerable, of opening up and letting patients and colleagues see your imperfect humanity, apologizing, having tears, and sharing moments of pain cannot be overstated and further reinforces the physician as person.”

-Dagnone JD. Can Med Educ J 2017



33

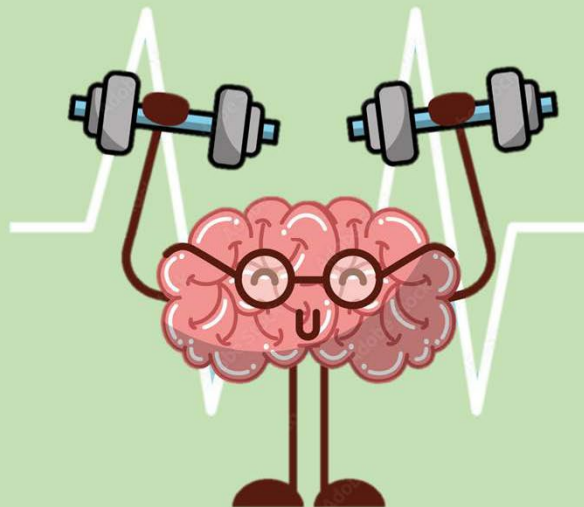
“We have an obligation as educators to share with learners how we have coped with feelings of anger, anguish, shame or uncertainty in caring for patients.”



Novack DH, Acad Med 1999

34

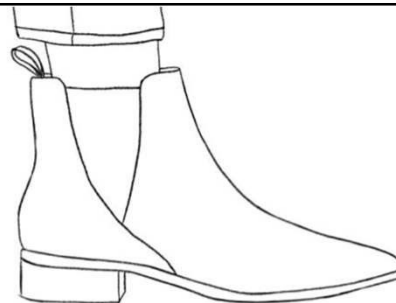
Approaching A Colleague



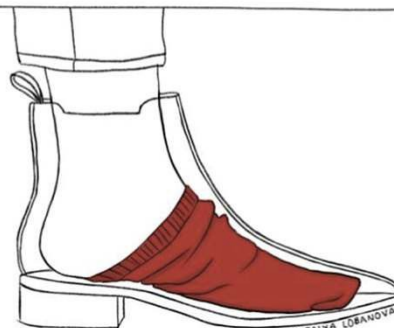
35

Trust Your Gut If Concerned About A Colleague

HOW I
LOOK ON
THE
OUTSIDE



HOW I
FEEL
ON THE
INSIDE



36

Importance of Reaching Out

- Support and connection matter
- Have a conversation
- You can ask directly about suicidal thoughts
- Just because someone is thinking about suicide does not mean they are at risk of acting on thoughts
- Together - you can make a plan



Care--Ask--Listen

Coffee chat

"I'm concerned because I noticed... and I'm here to support you."

"I'd like to learn more about what you've been experiencing."

"When you say __, it makes me wonder if you've had thoughts about ending your life."

You will not make someone suicidal by asking about it

You might miss an opportunity to save someone's life by not asking



Supportive Actions for a Colleague

- You can encourage the person to seek MH support
- Remind them ISP counselor is there to dialog anonymously
- Check back in with them later that day or later in the week
- If you're not sure if they are at imminent risk of self-harm, get guidance from 988 Lifeline- for distressed individuals or the helping person
- Your role isn't to be their doctor/therapist, but to be a caring colleague/mentor
- Circle back if you remain concerned



39

Break Out Group Simulations: Approaching a Colleague

- "Would you be up for getting coffee/snack/meal?"
- Then, in private:
 - *"I've noticed you haven't seemed yourself lately. Are you ok?"*
 - *"I'm concerned because I noticed... and I'm here to support you."*
 - *"There is no judgment here, in fact I'm here to support you."*
 - *"Mainly I'd like to learn more about what you're experiencing, if you're comfortable sharing about it."*
 - *"When you say ___, it makes me wonder if you've had thoughts about ending your life."*
- Practice active listening skills.....



40

Roles:

**CONCERNED COLLEAGUE POTENTIALLY
STRUGGLING COLLEAGUE OBSERVER**

41





PARTNER ACTIVITY: Approaching a Colleague

- “Would you be up for getting coffee/snack/meal?”
 - Then, in private:
 - *“I’ve noticed you haven’t seemed yourself lately. Are you ok?”*
 - *“I’m concerned because I noticed... and I’m here to support you.”*
 - *“There is no judgment here, in fact I’m here to support you.”*
 - *“Mainly I’d like to learn more about what you’re experiencing, if you’re comfortable sharing about it.”*
 - *“When you say __, it makes me wonder if you’ve had thoughts about ending your life.”*
 - Practice active listening skills.....
- 7 minutes

42

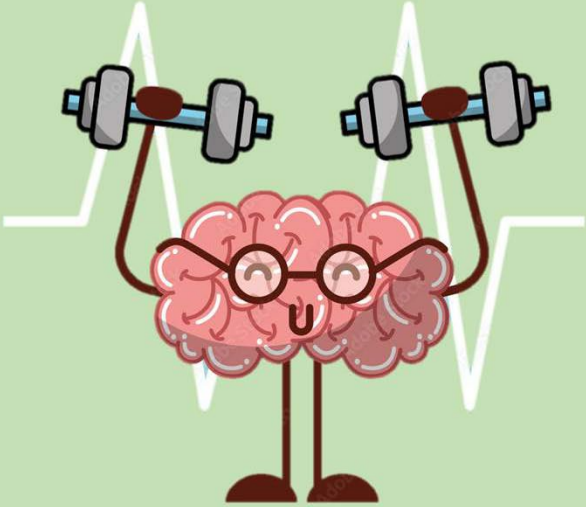


*How did it feel to reach out?
How did it feel to have someone
reach out to you?*

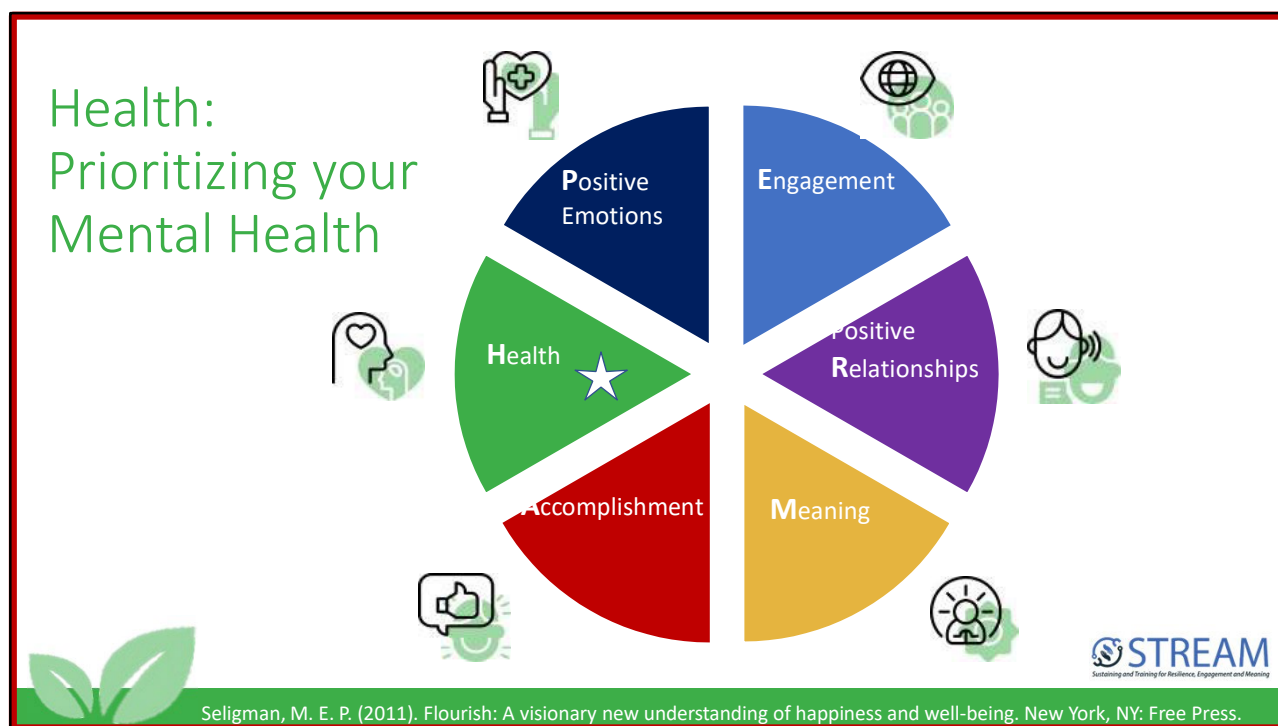


43

Developing Your Own Well-Being



44



45

Access to Medical and Mental Health Providers

- Need to **destigmatize** seeking help to optimize health
- Reflect on the results of your ISP survey
- Know how to access services at your institution
- Targeted education against self prescribing
- Confidential referrals
- Offer work coverage for appointments



46

Dignity in Mental Health

- Safeguard the well-being of people with mental health conditions.
- Liberating people(colleagues) from self-stigma, low confidence, low self-esteem, withdrawal and social isolation.
- “We will achieve dignity for mental health when communities, families and individuals have the confidence to seek help for mental health without fear and inhibition”.

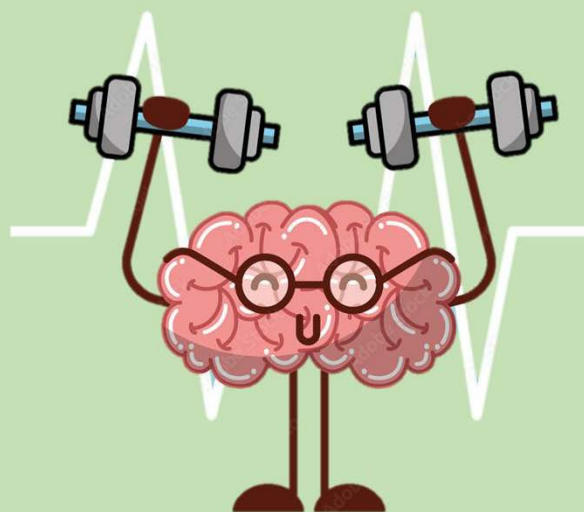


World Health
Organization

STREAM
Sustaining and Training for Resilience, Engagement and Meaning

47

Mental Health as a Vital Sign:
Your Well-Being Plan



48

Design and Commit to Your Well-Being Plan

- Writing down goals and sharing with a colleague makes us more likely to reach those goals
- Identify at least 1 goal that you will commit to achieving
 - When you note signs of distress
 - To maintain and optimize your mental health
- “Accountability buddy”- choose someone to periodically share your goals bidirectionally



Serwint JR et al. *Pediatrics* 2016

49



PARTNER ACTIVITY: Your Well-Being Plan

Work for 5 minutes individually
on your well-being plan

Share with a partner one strategy
you want to implement

8 minutes



50



Mental Health as a Vital Sign

Well-Being Plan

1) Self-reflect and identify your individual signals of distress

- Examples: irritability, temper flares, withdrawal or isolation from others, anxiety, depression, sleep changes, Others?
WHAT ARE YOURS?

2) Design your well-being plan


- a) Strategies when you note increasing signals of distress
- b) Strategies for everyday to optimize and maintain mental health

3) Who can you identify as your Accountability Buddy?

51




Participation in additional STREAM modules can offer additional strategies for your Well-Being Plan



Connecting with Joy and Meaning in Medicine



Beyond Surviving: Plan to Thrive

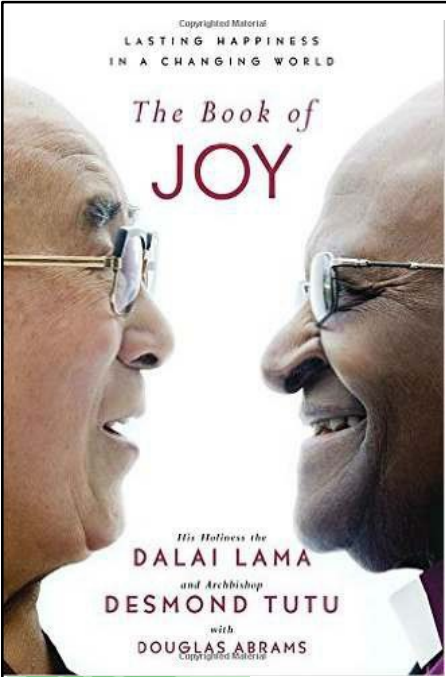


Building Resilience: Practical Approaches for Growth



Collaborating to Improve Your Work

52



Attention to Self-Care is Not
Self-Centered

“If we don’t take care
of ourselves, we
cannot survive”



Dalai Lama, Desmond Tutu, [BookofJoy](#)

53

We Are at a Critical Juncture:

What is one thing to which you will commit to
optimize your mental health and that of our community of pediatrics?

Be part of the solution!

- Individual
- Systems Improvement
- Leadership
- Patient advocacy
- Change policy
- Research science



54

Summary

- Mental health is foundational for us, personally and professionally
- Suicide is a health issue and can be prevented
- Mental health is a key vital sign
- *Know your unique signals, drivers, nourishers*
- We can make a difference for colleagues
- Establish your individual **Well-Being plan** and adopt an accountability partner



55

NationalCrisisResources

Call/text/chat 988, the Suicide and Crisis Lifeline (Nat'l Suicide Prevention Lifeline 800-273-8255)

Crisis Text Line, Text TALK to 741741

ClinicianSupport

Physician Support Line 888-409-0141 physiciansupportline.com

Emotional PPE Project emotionalppe.org

Therapy Aid therapyaid.org/




AFSPResources

<https://afsp.org/physician>



56



Don't Just Survive, Aim to Thrive




57


Thank you!

- INSERT QR code



58





Strive to Thrive: Optimizing Your Well-Being

Christine Yu Moutier, MD
Chief Medical Officer, AFSP

Janet Serwint, MD
Professor Pediatrics & Public Health,
Johns Hopkins

1





Connecting with Joy and
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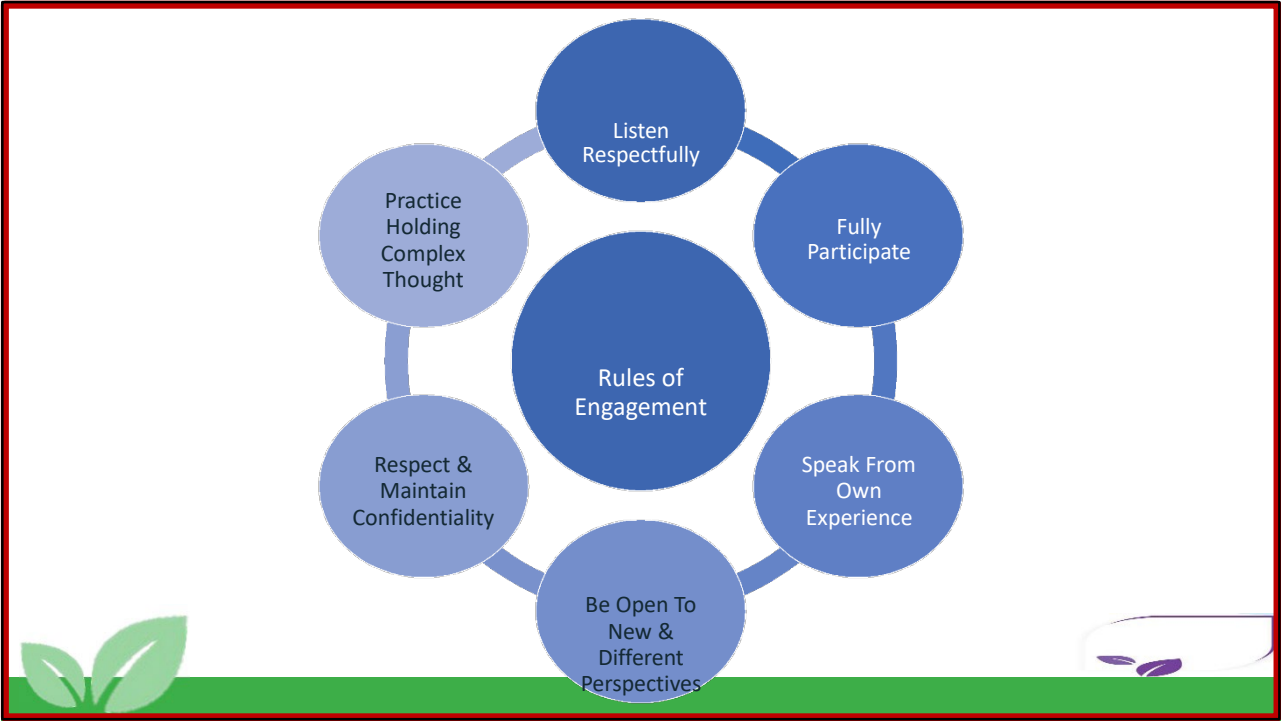


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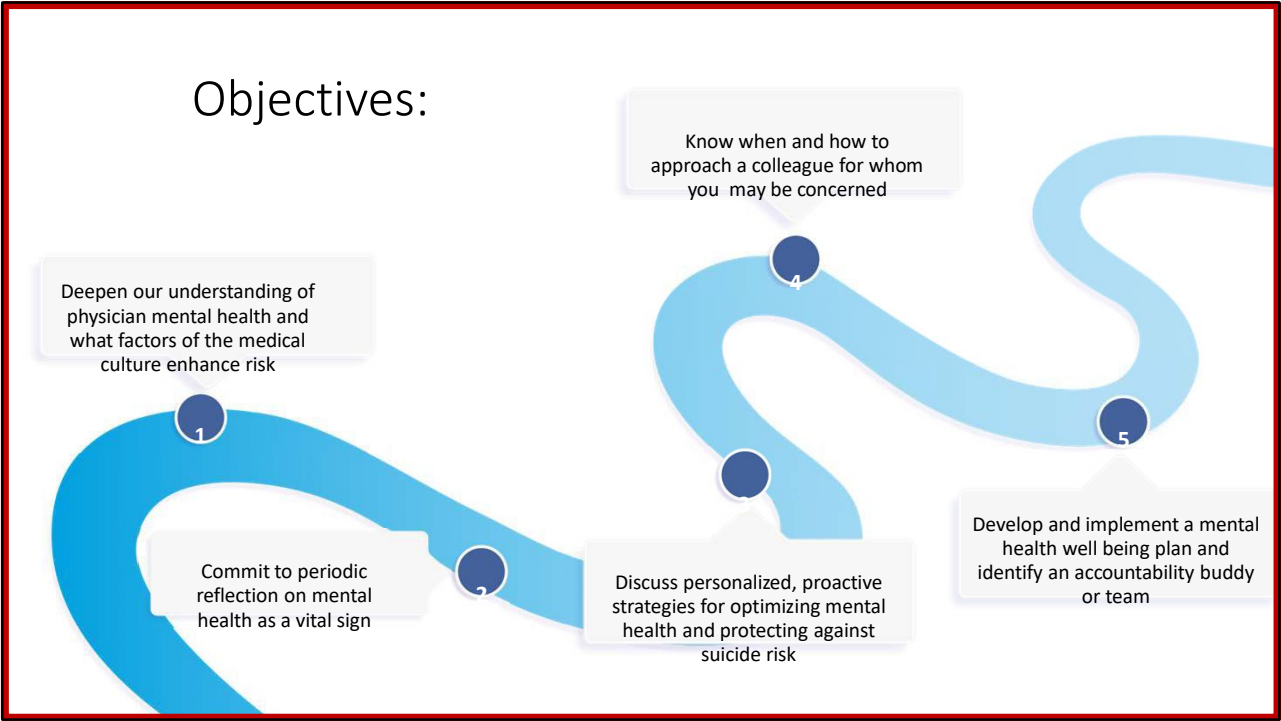


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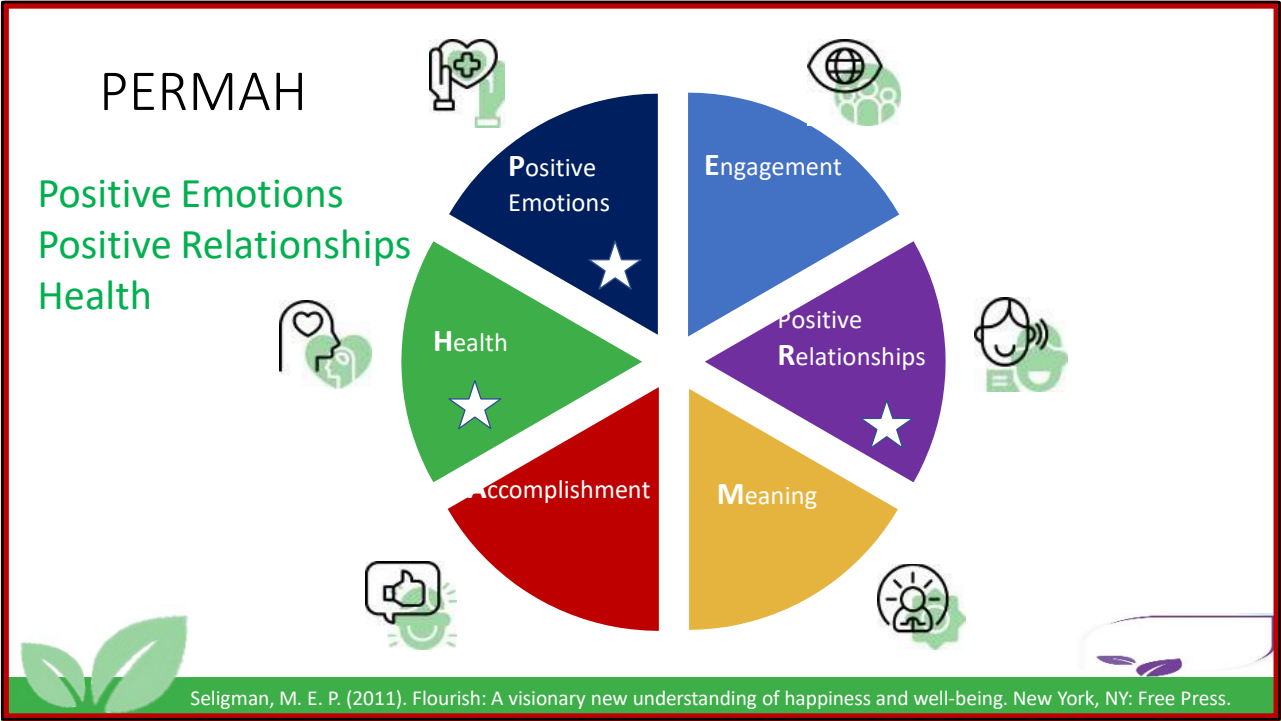




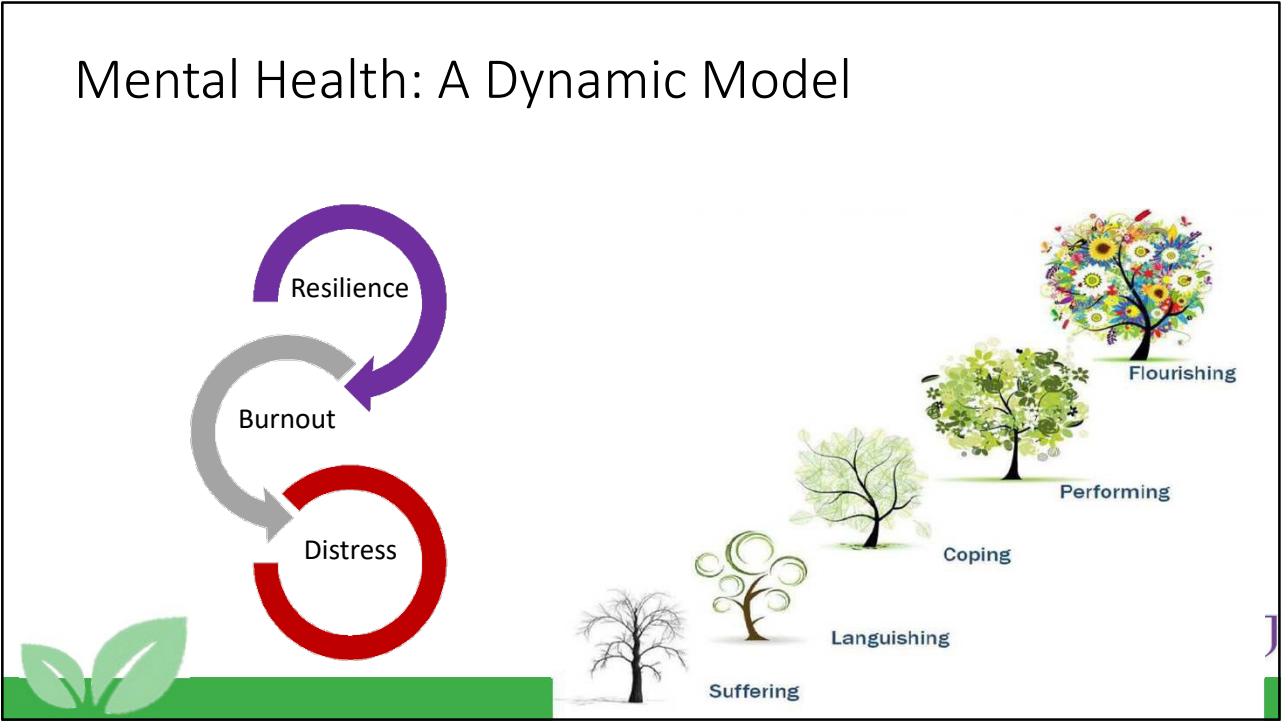
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5



6

Physician Mental Health & Distress: Reflection on Mental Health as a Vital Sign

7

Positive Aspects of the Culture of Medicine

- Humanism as a foundational principle
- Working to serve others to provide excellent care
- Achieving the highest ethical and professional standards
- Contributing to something larger than oneself



Michalsak-Smith. *AMA J Ethics* 2015; Thomas LR. *JAMA* 2018

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Negative Aspects of Medical Culture May Contribute to Personal Attributes that Increase Risk

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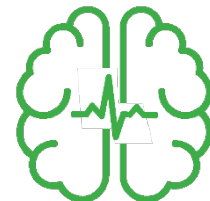
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GROUP ACTIVITY

Mental Health as a Vital Sign Discussion

- **Vital sign definition:** clinical measurements that indicate the state of a patient's essential body functions

3 minutes

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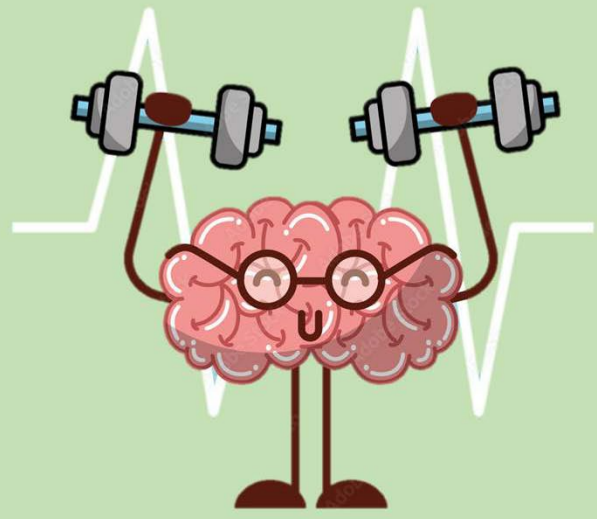
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3 minutes



17

Optimizing Mental
Health



18

Therapy/Tx

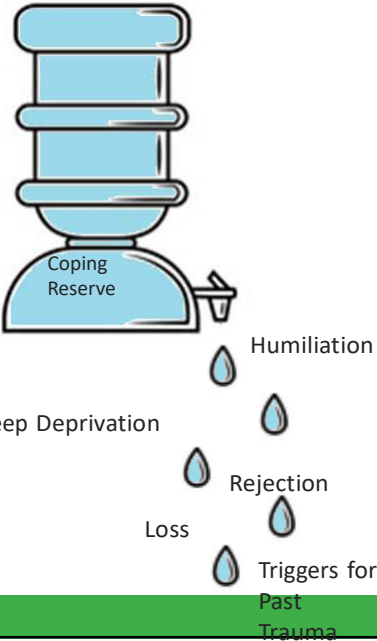
Culture of Caring

Gratitude

Self-Compassion

Emotional Debriefing


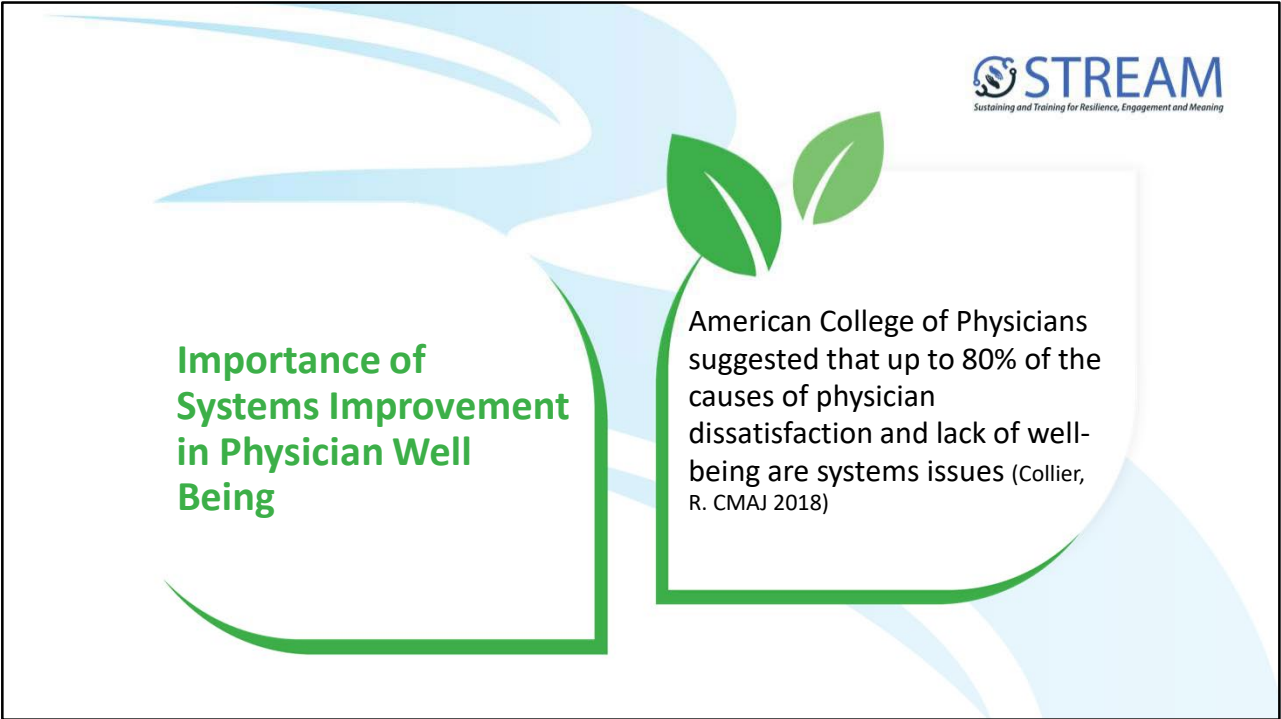
Psychological PPE



WellnessReservoir

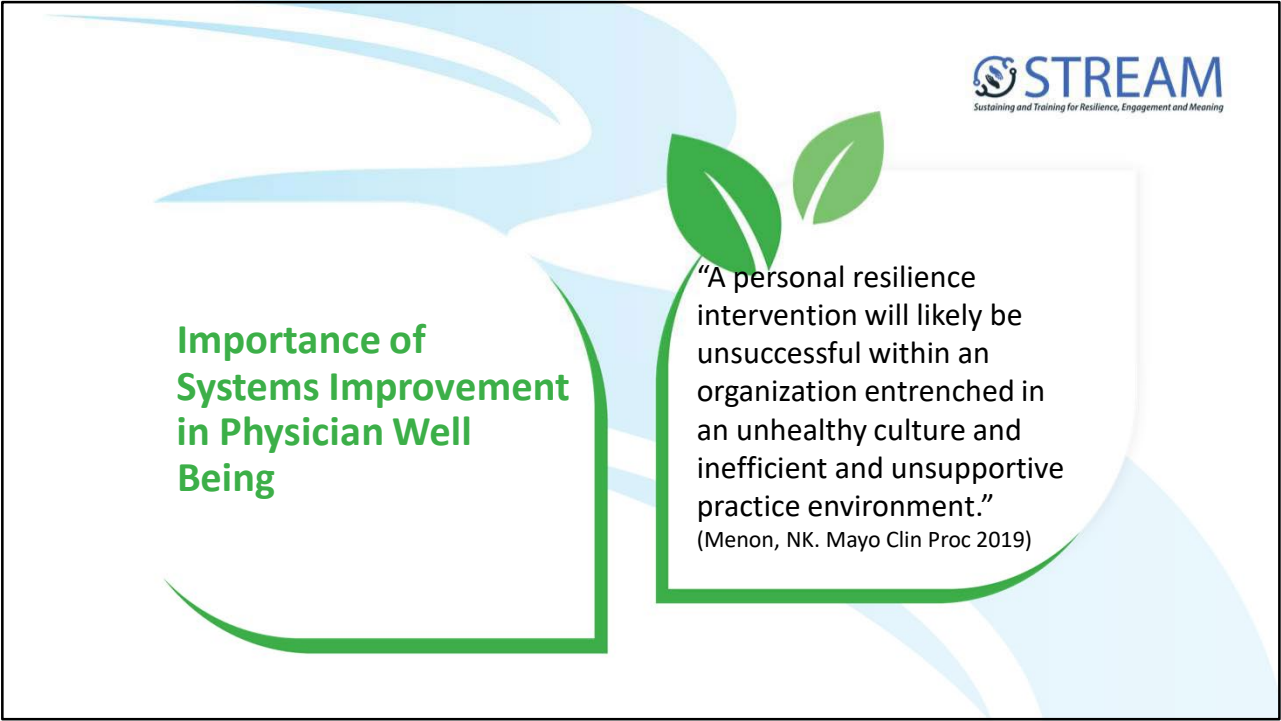

What *drains* your reservoir and what *fills* it?

Dunn, Isiewicz, Moutier. Acad Psychiatry 2008



Importance of Systems Improvement in Physician Well Being

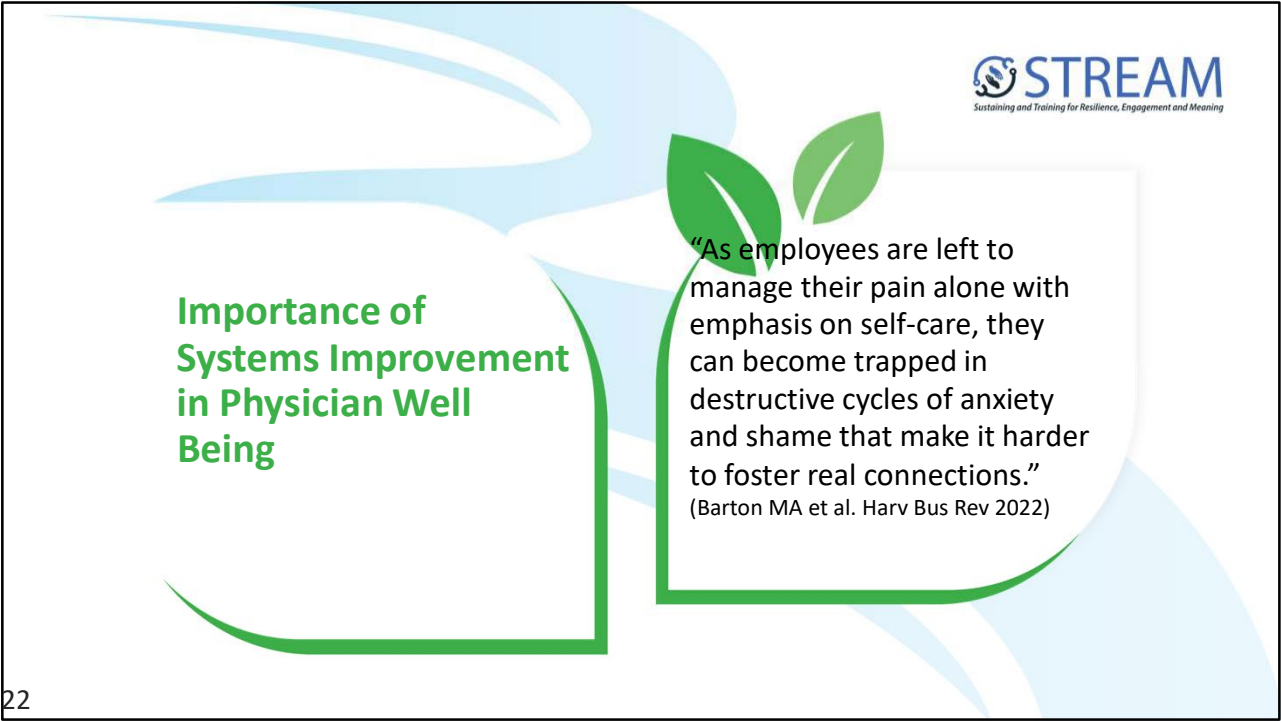

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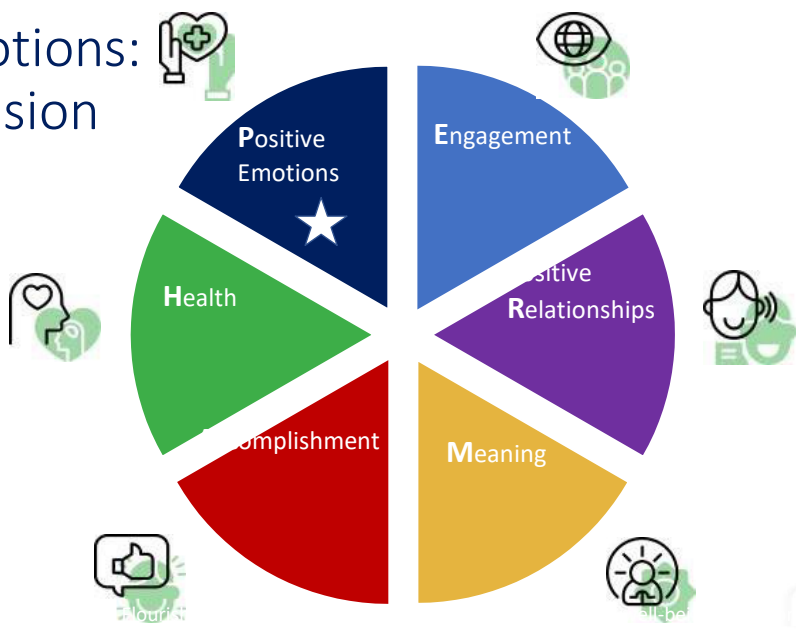
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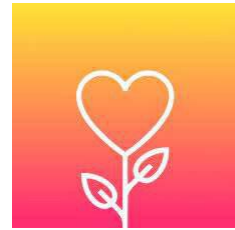
28



INDIVIDUAL ACTIVITY: Intentional Gratitude

- 3 question gratitude journal
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-<http://www.rachelremen.com>



Gratitude Happiness
Journal App

2 minutes

29

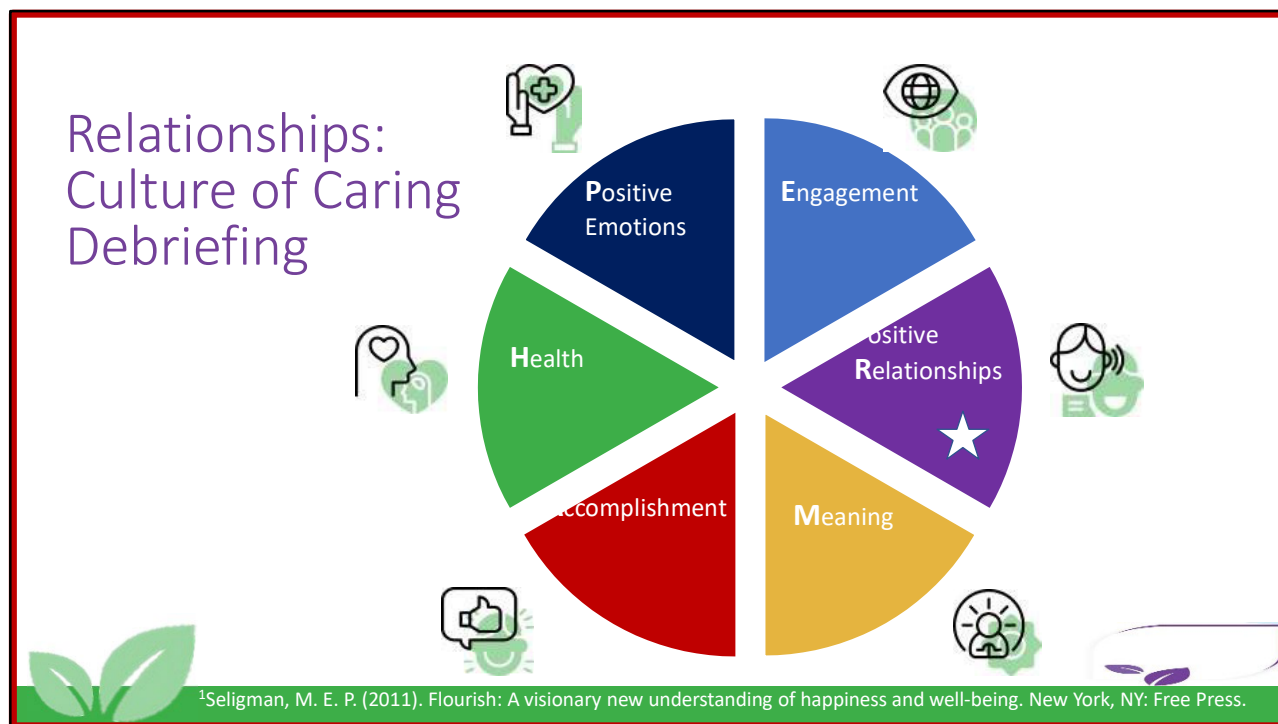


PARTNER ACTIVITY: Culture of Gratitude

How can you incorporate gratitude at work?

5 minutes

30



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The Power of Being Vulnerable: The Physician as a Person

Humanity and humility share the same Latin roots.

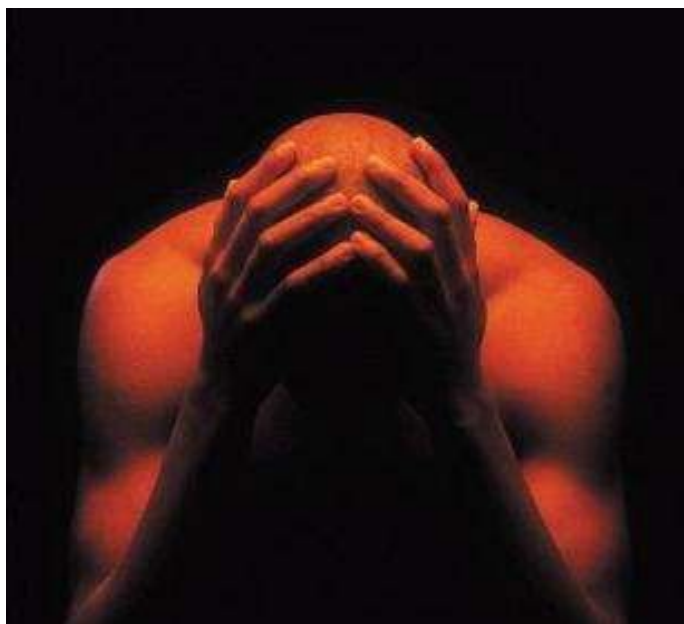
“The power of being vulnerable, of opening up and letting patients and colleagues see your imperfect humanity, apologizing, having tears, and sharing moments of pain cannot be overstated and further reinforces the physician as person.”

-Dagnone JD. *Can Med Educ J* 2017



36

“We have an obligation as educators to share with learners how we have coped with feelings of anger, anguish, shame or uncertainty in caring for patients.”



Novack DH, *Acad Med* 1999

37



GROUP ACTIVITY: Culture of Caring

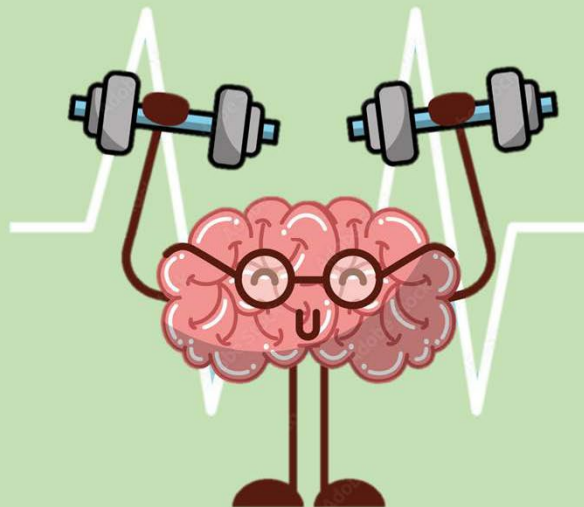
What actions can you take to create a caring, supportive environment for all?

4 minutes



38

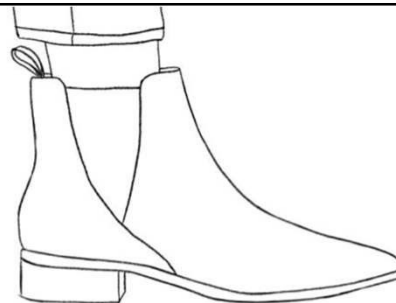
Approaching A Colleague



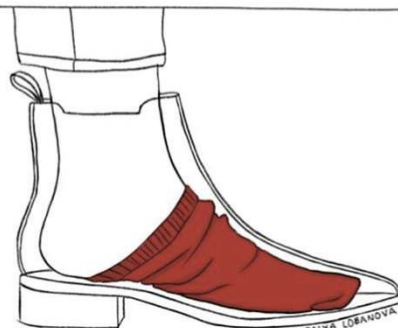
39

Trust Your Gut If Concerned About A Colleague

HOW I
LOOK ON
THE
OUTSIDE



HOW I
FEEL
ON THE
INSIDE



40

Importance of Reaching Out

- Support and connection matter
- Have a conversation
- You can ask directly about suicidal thoughts
- Just because someone is thinking about suicide does not mean they are at risk of acting on thoughts
- Together - you can make a plan

41



GROUP ACTIVITY: Experience with Reaching Out

- Have you ever noticed a colleague who is behaving out of character
- Have you ever approached a colleague who you think may be struggling?

4 minutes

42

Care--Ask--Listen

Coffee chat

"I'm concerned because I noticed... and I'm here to support you."

"I'd like to learn more about what you've been experiencing."

"When you say __, it makes me wonder if you've had thoughts about ending your life."

You will not make someone suicidal by asking about it

You might miss an opportunity to save someone's life by not asking



43

Break Out Group Simulations: Approaching a Colleague

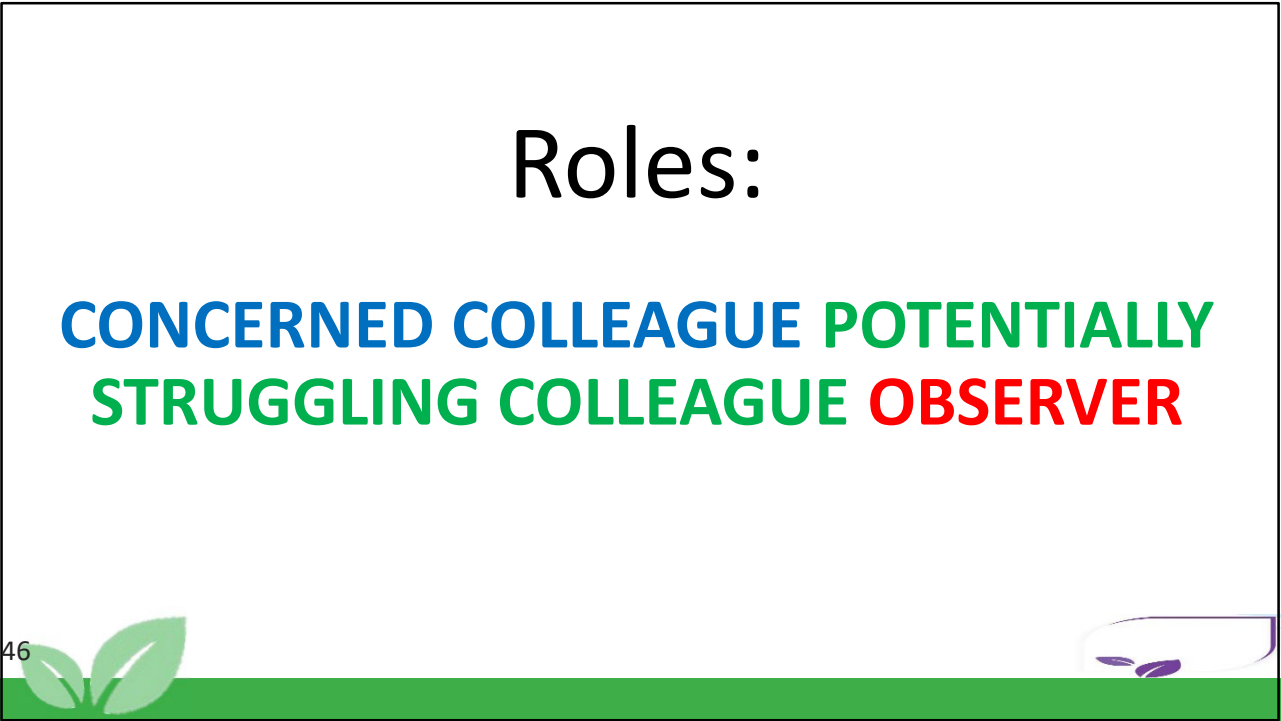
- "Would you be up for getting coffee/snack/meal?"
- Then, in private:
 - *"I've noticed you haven't seemed yourself lately. Are you ok?"*
 - *"I'm concerned because I noticed... and I'm here to support you."*
 - *"There is no judgment here, in fact I'm here to support you."*
 - *"Mainly I'd like to learn more about what you're experiencing, if you're comfortable sharing about it."*
 - *"When you say __, it makes me wonder if you've had thoughts about ending your life."*
- Practice active listening skills.....



44



45



46



PARTNER ACTIVITY: Approaching a Colleague

- “Would you be up for getting coffee/snack/meal?”
- Then, in private:
 - *“I’ve noticed you haven’t seemed yourself lately. Are you ok?”*
 - *“I’m concerned because I noticed... and I’m here to support you.”*
 - *“There is no judgment here, in fact I’m here to support you.”*
 - *“Mainly I’d like to learn more about what you’re experiencing, if you’re comfortable sharing about it.”*
 - *“When you say __, it makes me wonder if you’ve had thoughts about ending your life.”*
- Practice active listening skills.....

7 minutes

47

*How did it feel to reach out?
How did it feel to have someone
reach out to you?*

48



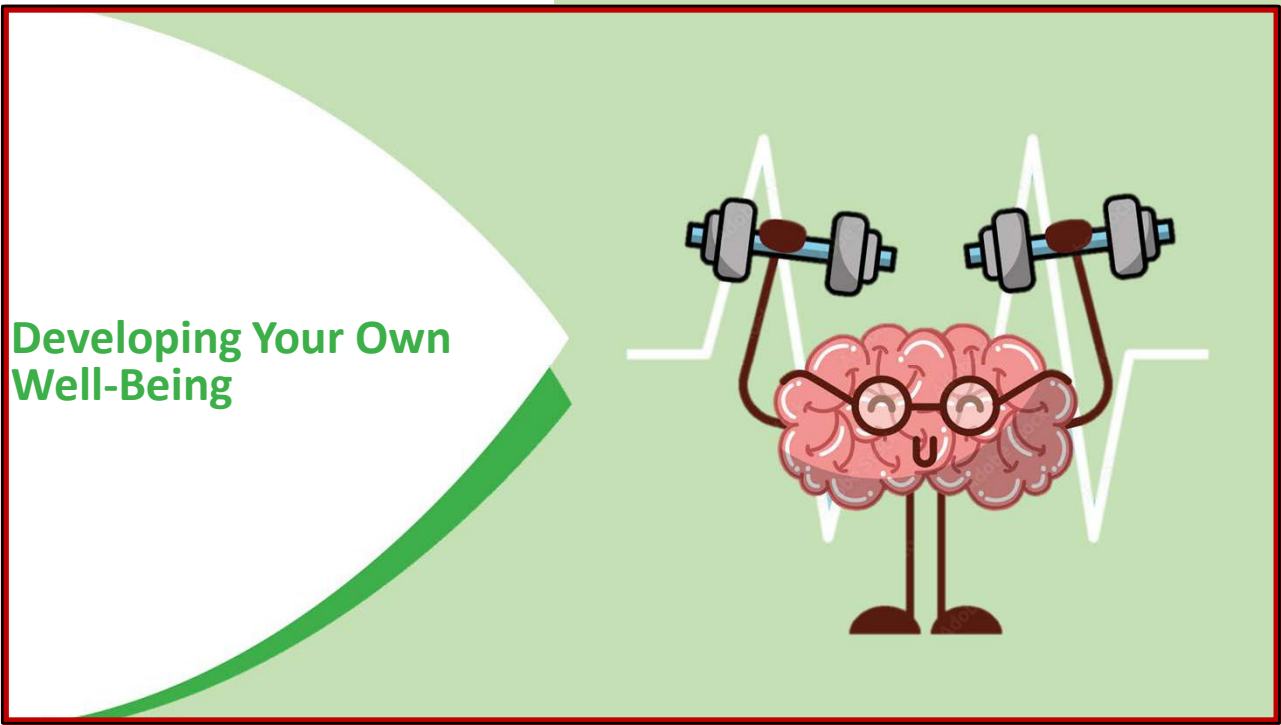
49

Supportive Actions for a Colleague

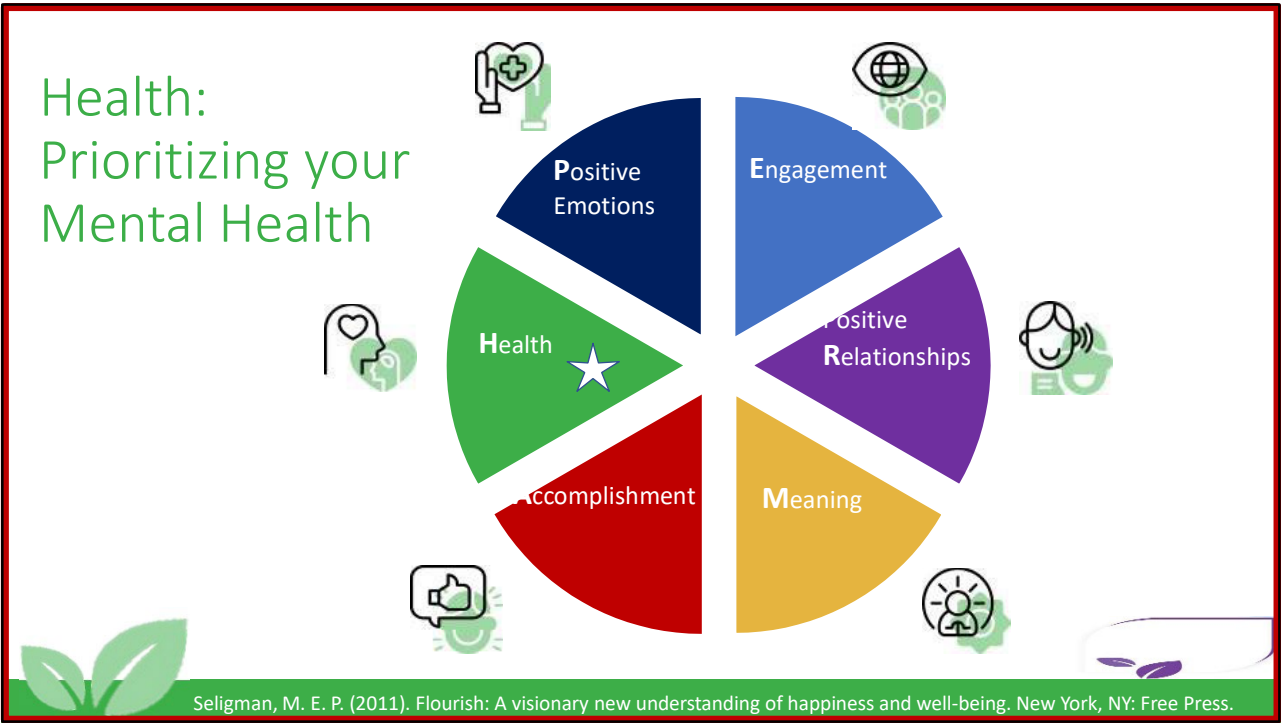
- You can encourage the person to seek MH support
- Remind them ISP counselor is there to dialog anonymously
- Check back in with them later that day or later in the week
- If you're not sure if they are at imminent risk of self-harm, get guidance from 988 Lifeline- for distressed individuals or the helping person
- Your role isn't to be their doctor/therapist, but to be a caring colleague/mentor
- Circle back if you remain concerned



50



51



52

Access to Medical and Mental Health Providers

- Need to **destigmatize** seeking help to optimize health
- Reflect on the results of your ISP survey
- Know how to access services at your institution
- Targeted education against self prescribing
- Confidential referrals
- Offer work coverage for appointments

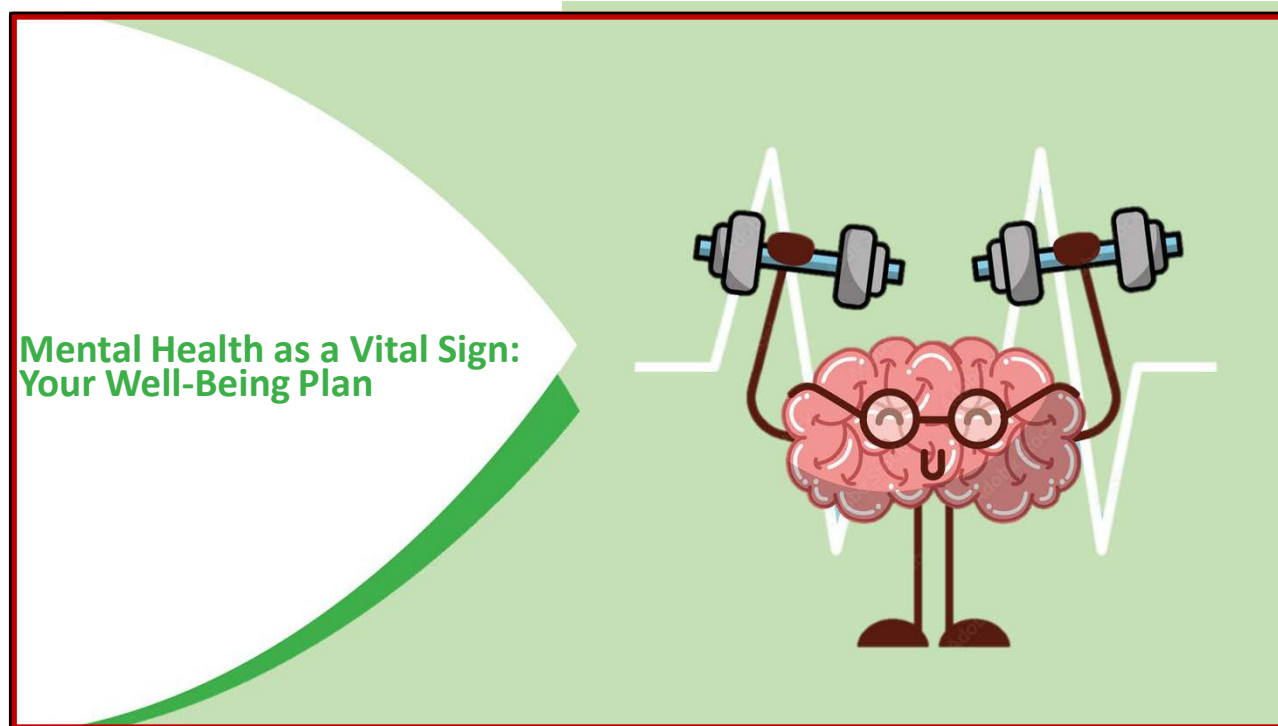
53

Dignity in Mental Health

- Safeguard the well-being of people with mental health conditions.
- Liberating people(colleagues) from self-stigma, low confidence, low self-esteem, withdrawal and social isolation.
- “We will achieve dignity for mental health when communities, families and individuals have the confidence to seek help for mental health without fear and inhibition”.



54



55

Design and Commit to Your Well-Being Plan

- Writing down goals and sharing with a colleague makes us more likely to reach those goals
- Identify at least 1 goal that you will commit to achieving
 - When you note signs of distress
 - To maintain and optimize your mental health
- “Accountability buddy” - choose someone to periodically share your goals bidirectionally



Servint JR et al. *Pediatrics* 2016

56



Mental Health as a Vital Sign

Well-Being Plan

- 1) Self-reflect and identify your individual signals of distress**
 - Examples: irritability, temper flares, withdrawal or isolation from others, anxiety, depression, sleep changes, Others?
WHAT ARE YOURS?
- 2) Design your well-being plan**
 - a) Strategies when you note increasing signals of distress
 - b) Strategies for everyday to optimize and maintain mental health
- 3) Who can you identify as your Accountability Buddy?**



57



PARTNER ACTIVITY: Your Well-Being Plan

Work for 5 minutes individually
on your well-being plan

Share with a partner one strategy
you want to implement

8 minutes



58

Participation in additional STREAM modules can offer additional strategies for your Well-Being Plan



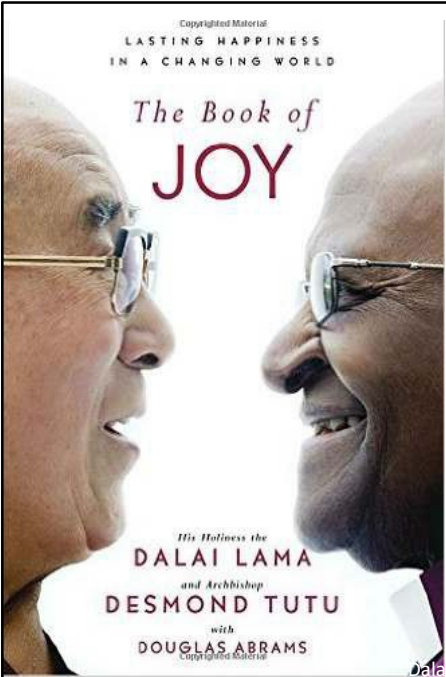
Connecting with Joy and Meaning in Medicine

Beyond Surviving: Plan to Thrive

Building Resilience: Practical Approaches for Growth

Collaborating to Improve Your Work

59



Attention to Self-Care is Not
Self-Centered

“If we don’t take care
of ourselves, we
cannot survive”

60

We Are at a Critical Juncture:

What is one thing to which you will commit to optimize your mental health and that of our community of pediatrics?

Be part of the solution!

- Individual
- Systems Improvement
- Leadership
- Patient advocacy
- Change policy
- Research science



61

Summary



- Mental health is foundational for us, personally and professionally
- Suicide is a health issue and can be prevented
- Mental health is a key vital sign
- *Know your unique signals, drivers, nourishers*
- We can make a difference for colleagues
- Establish your individual **Well-Being plan** and adopt an accountability partner

62

NationalCrisisResources
Call/text/chat 988, the Suicide and Crisis Lifeline(Natl Suicide Prevention Lifeline 800-273-8255)
Crisis Text Line, Text TALK to 741741

ClinicianSupport
Physician Support Line 888-409-0141 physiciansupportline.com
Emotional PPE Project emotionalppe.org
Therapy Aid therapyaid.org/

AFSPResources
<https://afsp.org/physician>



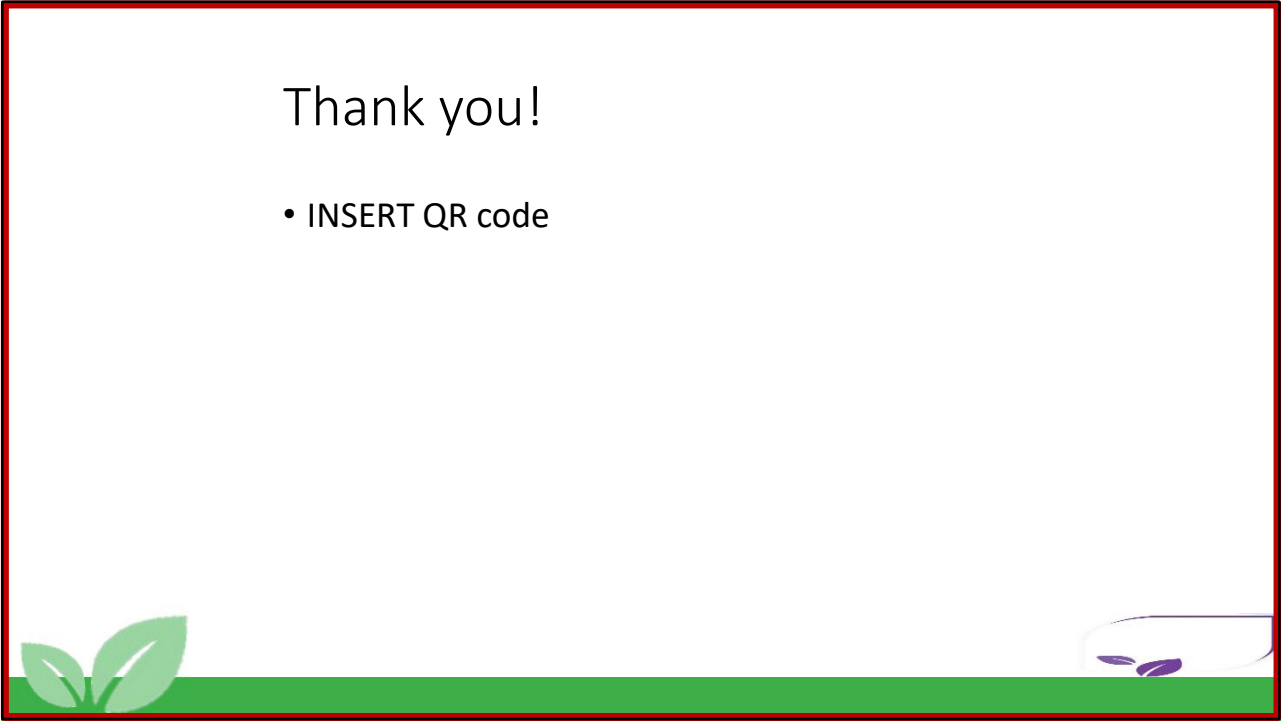
63

Don't Just Survive:
Aim to thrive





64





Resilience: Flourish

Dr. Jennifer Reese
Dr. Amy Sass

1





Connecting with Joy and
Meaning in Medicine



Beyond Surviving:
Plan to Thrive



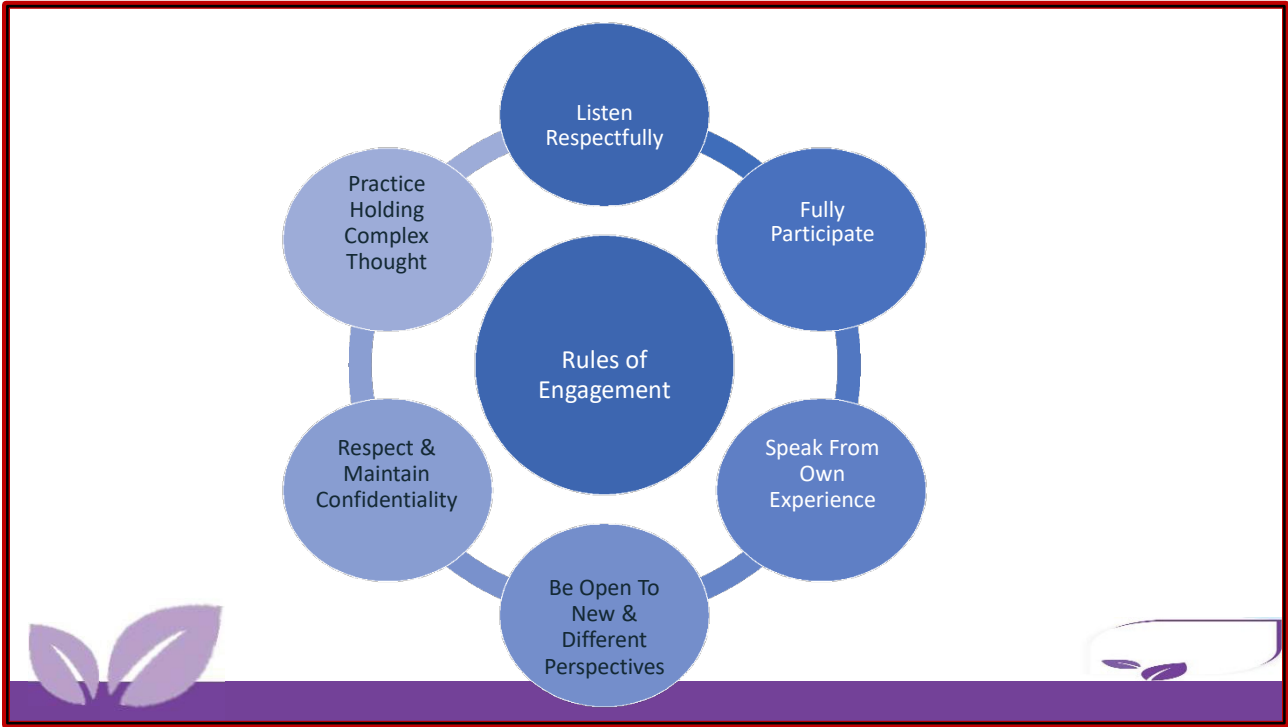
Building Resilience:
Practical Approaches for
Growth



Collaborating to
Improve Your Work



2



3



4

Belonging

- How do we use resilience to increase our sense of belonging



5

Introduction to Total Well-Being



6

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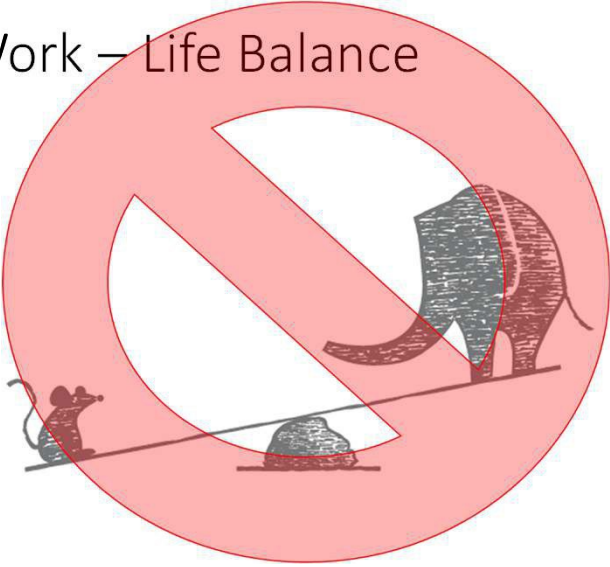
7

Work – Life Balance


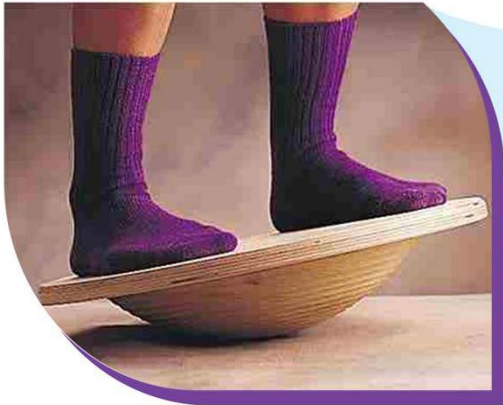


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MYTH: Work – Life Balance



9



Life balance is more like a “WOBBLE BOARD”

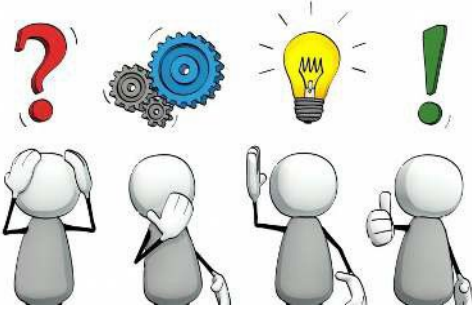


10

Think back:

When is a time when you were at your best?

- What were you doing?
- Who was around you?
- Where were you?
- What about that time (*or about you*) made you at your best?
- Listener's job is to listen for the qualities that they hear.

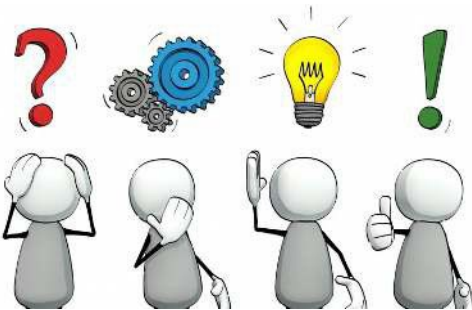


NOTE: Adaptation of "Best Possible Future Self Exercise"



PARTNER ACTIVITY: When is a time when you were at your best?

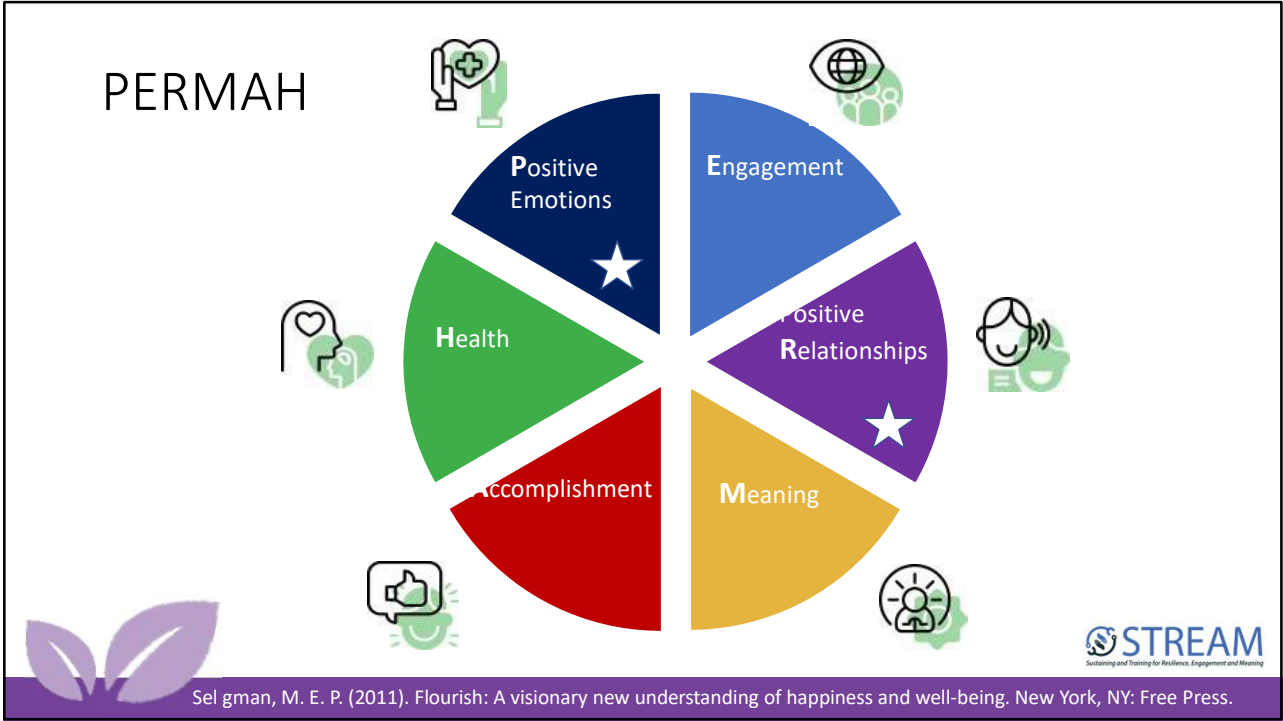
- What were you doing?
- Who was around you?
- Where were you?
- What about that time (*or about you*) made you at your best?
- Listener's job is to listen for the qualities that they hear.



4 minutes



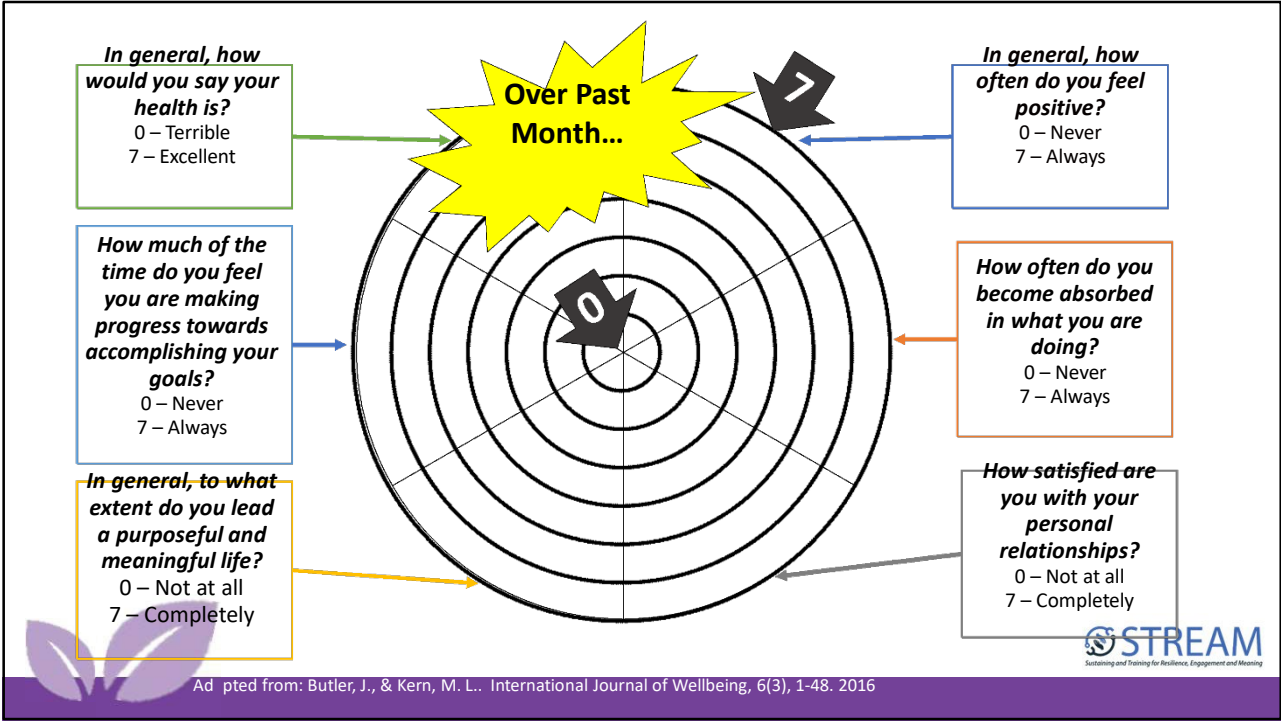
NOTE: Adaptation of "Best Possible Future Self Exercise"



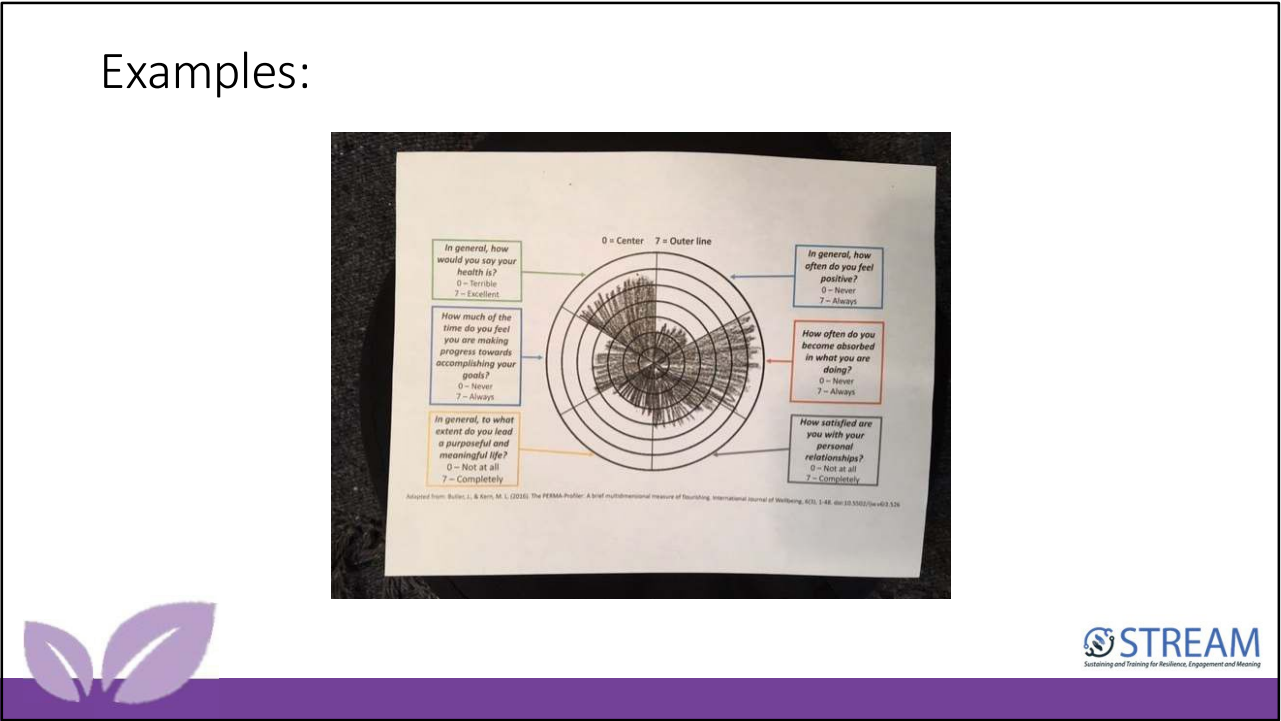
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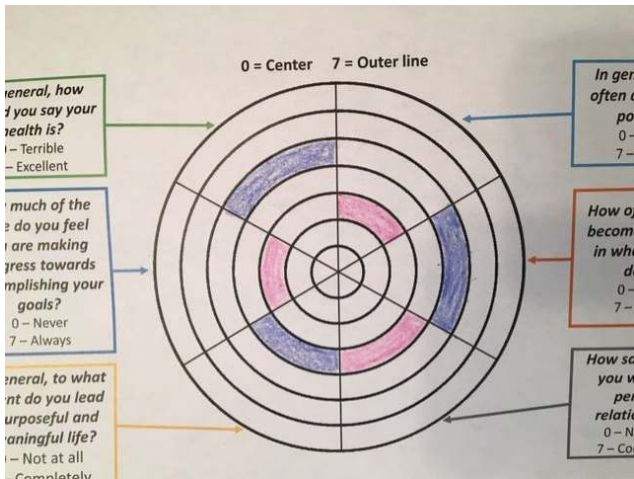


15



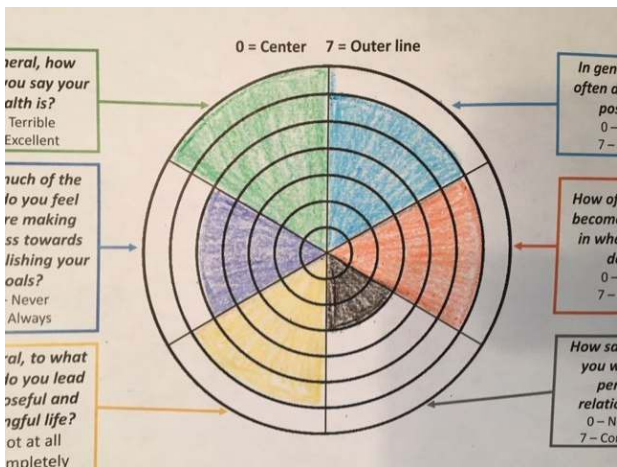
16

Examples:



17

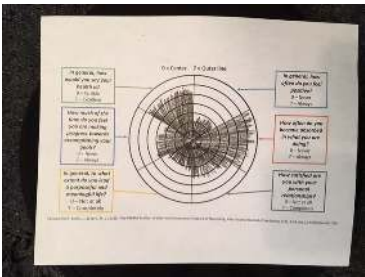
Examples:



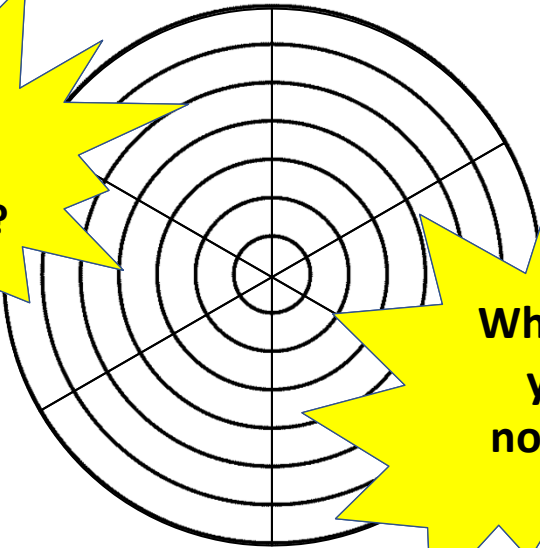
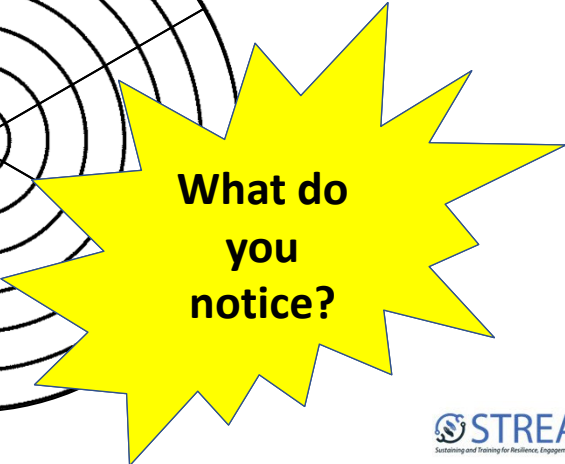
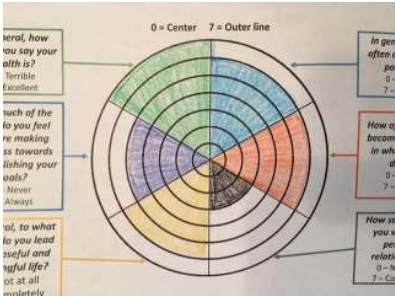
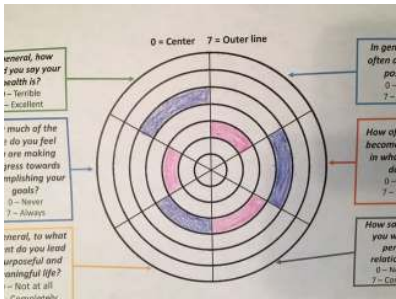
18



INDIVIDUAL ACTIVITY: PERMAH Wheel



6 minutes



What's Next ...

1. How much time do you have to devote to one or two of these areas?
5-10 mins / 30 mins / 1 hour
2. What specifically would you be doing in one or two important domains?
3. When specifically can you do these things?

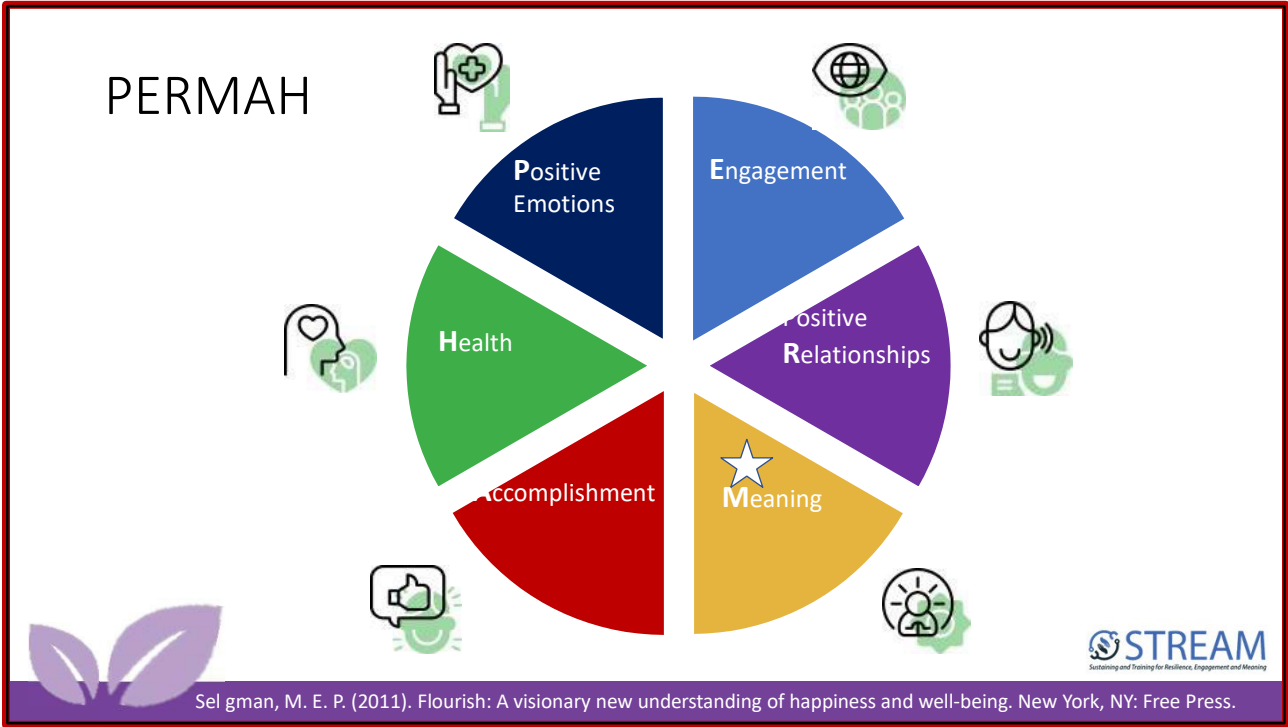


21

Finding Your Values Compass



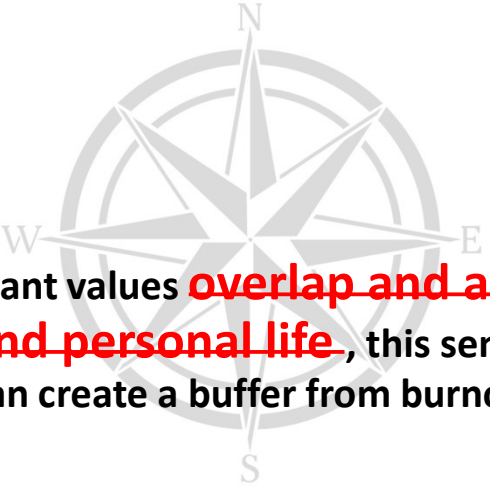
22





23



24



When important values ~~overlap and are felt~~ in both ~~workplace and personal life~~, this sense of congruence can create a buffer from burnout.



Veage, S. et al. *Journal of Contextual Behavioral Science* 3, 258–264. 2014



25

Work Domain

- Competency
- **Accomplishment**
- **Honesty**
- **Accepting others**
- Fulfill obligations
- Solving problems
- **Wisdom**
- Ambition
- Curiosity
- Justice for others
- **Better person**
- **Feel good about self**

Life Domain

- Loving relationships
- **Honesty**
- **Accepting others**
- **Better person**
- **Feel good about self**
- Genuine friendships
- Loyalty
- **Wisdom**
- Security
- **Accomplishment**
- Helping others



26

Values Clarification

- ***Deep down inside***, what's important to you?
- ***What*** sort of ***qualities*** do you want to cultivate as a person?
- ***How do you want to be*** in your relationships with others?
- They are about ***how you want to behave*** towards your friends, your family, yourself, your environment, your work, etc.

27

Values* not same as Goals

- ***Values = guiding principles and general life directions*** that ***give meaning*** to our actions

Examples:

- Be a **loving, caring, supportive partner** = **VALUE** that involves ongoing action
- Want to **get married** = **GOAL** that can be 'crossed off' the list or achieved
- Want a **better job** = **GOAL**. Once you've got it - goal achieved
- Want to **fully apply yourself at work, contribute your best, and engage fully** in what you're doing = **VALUE** that involves ongoing action.

**Not everyone has the same values, and this is not a test to see whether you have the "correct" ones.*

28



29

The graphic for the partner activity includes a puzzle piece icon, a title, a list of questions for the speaker and listener, a 4-minute duration, and decorative elements like a compass rose and a plant.

PARTNER ACTIVITY: Values Clarification

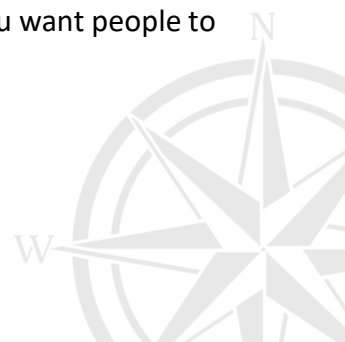
- Speaker, answer these questions
 - Why do you do the work that you do?
 - What brings you energy and joy?
 - Who do you most admire, why? What traits that they have would you like to emulate or be known for?
 - What would you want people to say about you at your retirement party?
- Listener, write down the *VALUES* that you hear
- Debrief
 - What Values did you hear?

4 minutes

30

Values Clarification

- Speaker, answer these questions
 - Why do you do the work that you do?
 - What brings you energy and joy?
 - Who do you most admire, why? What traits that they have would you like to emulate or be known for?
 - Imagine you are at your retirement party—what would you want people to say about you?
- Listener, write down the *VALUES* that you hear
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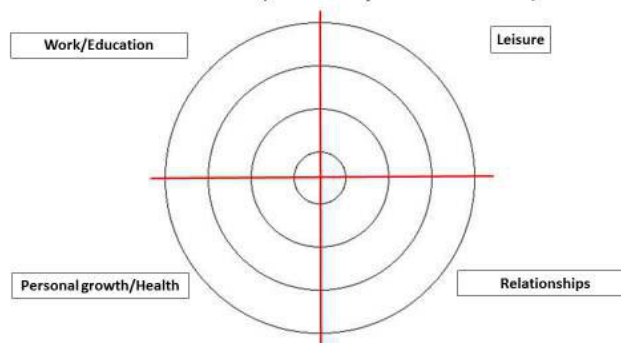
31

Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Values Clarification (Bullseye Exercise)



Lund ren, et al. (2012) The Bull's-Eye Values Survey: A Psychometric Evaluation Cognitive and Behavioral Practice, 19 (4) 518-526.

32

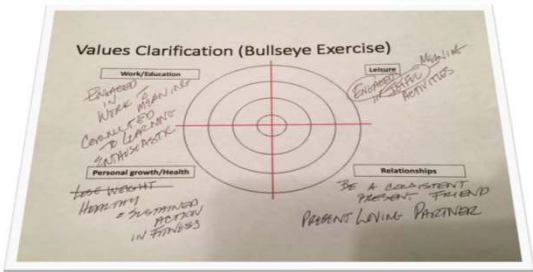
Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Examples of Values

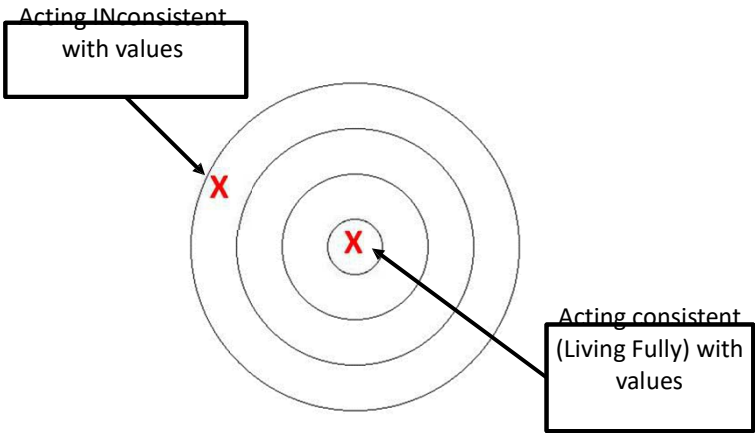
- Joy
- Integrity
- Challenge
- Leadership
- Dependability
- Meaning
- Understanding
- Humor
- Trust
- Connection
- Respect
- Community
- Compassion
- Empathy
- Caring
- Justice
- Equity



Step 2:

Determine what feels ON Target versus OFF Target

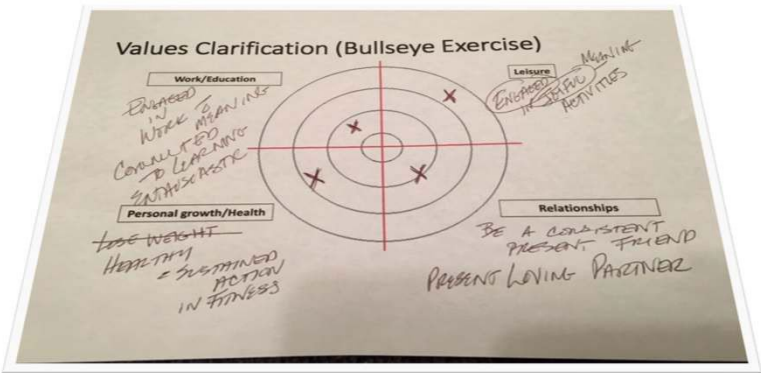
HINT: You can feel when things are ON Target



Step 2:

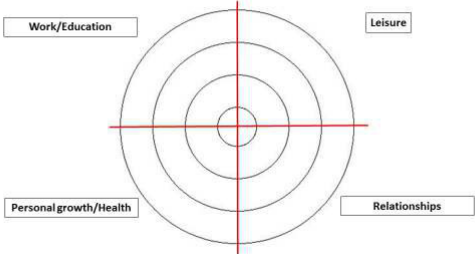
Determine what feels ON Target versus OFF Target

HINT: You can feel when things are ON Target



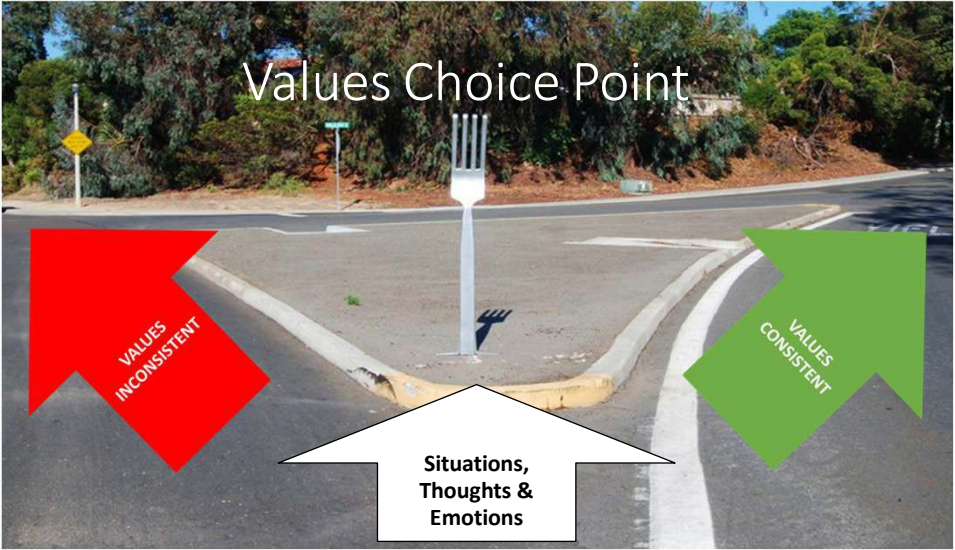
INDIVIDUAL ACTIVITY: Values Bullseye

Values Clarification (Bullseye Exercise)





7 minutes





The diagram shows a road fork with a silver fork stuck in the ground at the junction. A red arrow points left, labeled 'VALUES INCONSISTENT'. A green arrow points right, labeled 'VALUES CONSISTENT'. A white arrow points up from the bottom, labeled 'Situations, Thoughts & Emotions'. The title 'Values Choice Point' is at the top.





Sustaining and Training for Resilience, Engagement and Meaning

R. (2017) Choic Point 2.0 From Bailey, Ciarrochi & Harris (2013) The Weight Escape: How to Stop Dieting and Start Living, Boulder, CO, Shambhala Press

37

Connecting with your values

- You can continue reflecting with your worksheet on steps 3 and 4 to consider ways to change and grow



Sustaining and Training for Resilience, Engagement and Meaning

38

For further consideration

Step 3:

- **Determine what OBSTACLES might be getting in your way?**
- **Are these obstacles *Internal* (“inside the skin”) or *External* (“outside the skin”)?**
- **How powerful are these obstacles?**

1 2 3 4 5 6 7 8 9 10

*Doesn't prevent
me at all*

*Prevents me
completely*



39

• Step 4: Valued-Based Action Plan

- **Choose 1 values-consistent action** you are willing to try
- Think about how you might move or overcome the barrier(s) that you identified
- What is the first step you will take to make a change

• Small achievable

- Sustained over time
- Consistent with goals
- Natural Ebb and Flow



40

flourish

1 : to *grow luxuriantly*

2 a : to *achieve success*

b : to be in a *state of activity or production*

c : to *reach a height* of development or influence

3 : to *make bold and sweeping gestures*



ish

41

Thank you!

- INSERT QR CODE



42





Resilience: Flourish

Dr. Jennifer Reese
Dr. Amy Sass

1





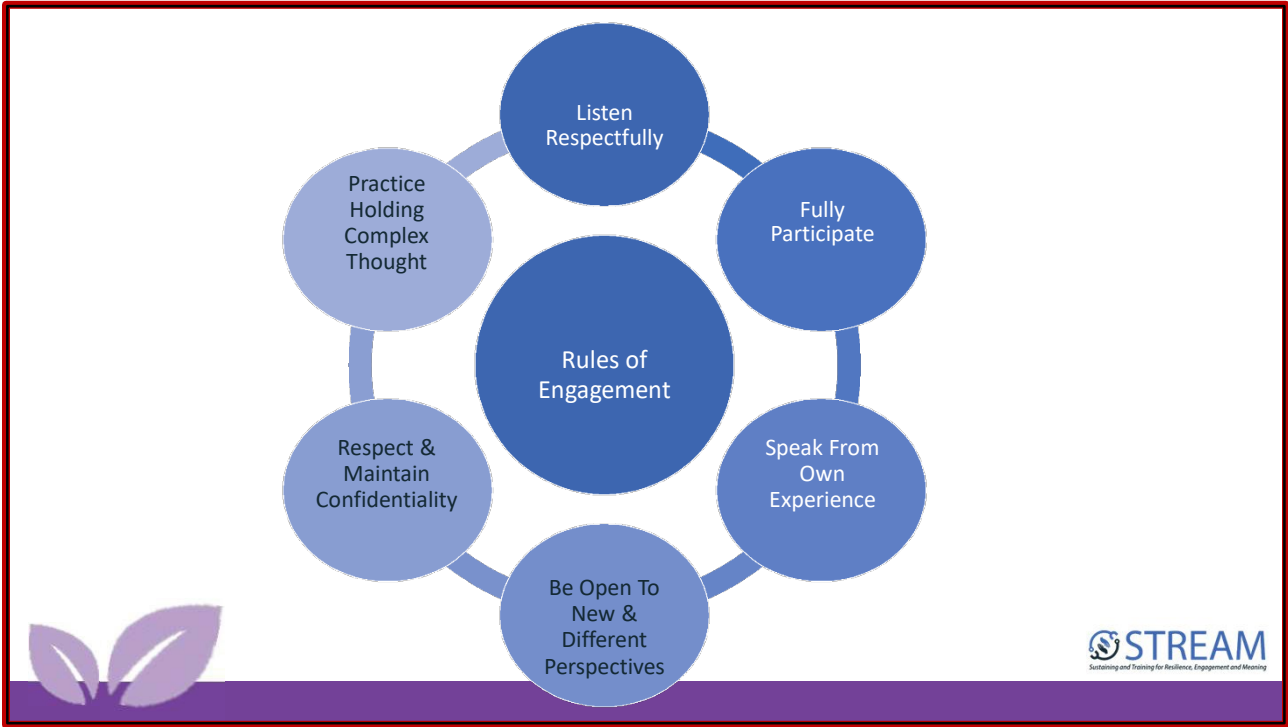
Connecting with Joy and
Meaning in Medicine

Beyond Surviving:
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Building Resilience:
Practical Approaches for
Growth

Collaborating to
Improve Your Work

2



3



4

Belonging

- How do we use resilience to increase our sense of belonging



5

Introduction to Total Well-Being



6

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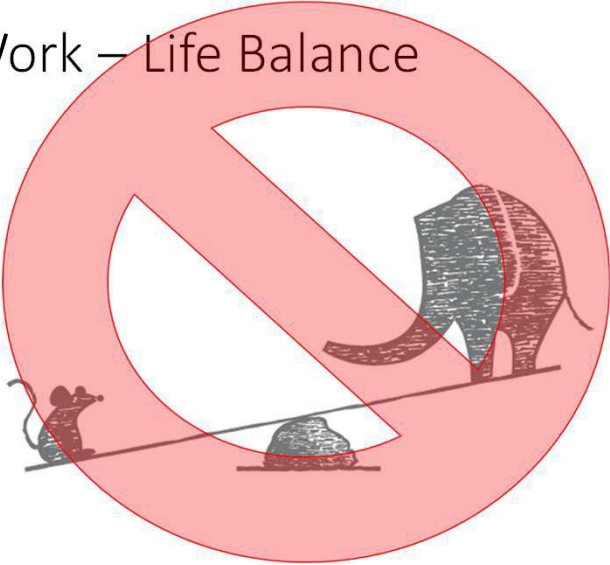
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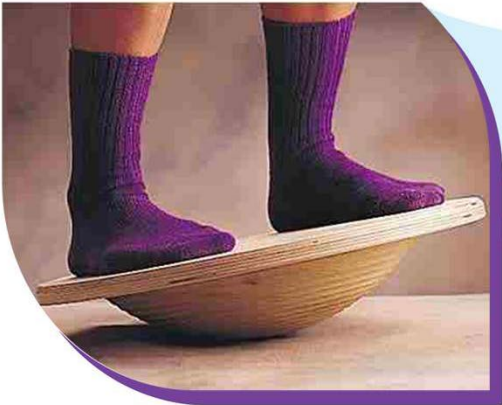
Work – Life Balance




MYTH: Work – Life Balance



9



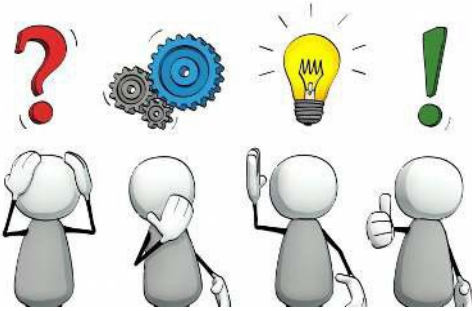


Life balance is more like a “WOBBLE BOARD”

10

Think back:
When is a time when you were at
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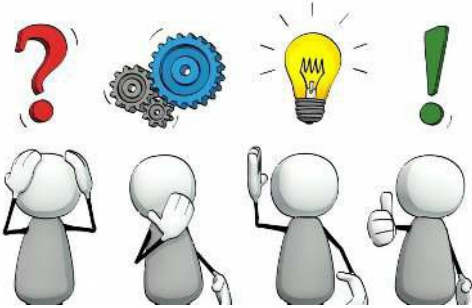


NOTE: Adaptation of "Best Possible Future Self Exercise"



PARTNER ACTIVITY:
When is a time when you were at your best?


- What were you doing?
- Who was around you?
- Where were you?
- What about that time (*or about you*) made you at your best?
- Listener's job is to listen for the qualities that they hear.



4 minutes



NOTE: Adaptation of "Best Possible Future Self Exercise"



What

An assessment of your own PERMA-H categories

Why

An opportunity for self-reflection

13

In general, how would you say your health is?
0 – Terrible
7 – Excellent

How much of the time do you feel you are making progress towards accomplishing your goals?
0 – Never
7 – Always


In general, to what extent do you lead a purposeful and meaningful life?
0 – Not at all
7 – Completely

In general, how often do you feel positive?
0 – Never
7 – Always

How often do you become absorbed in what you are doing?
0 – Never
7 – Always

How satisfied are you with your personal relationships?
0 – Not at all
7 – Completely

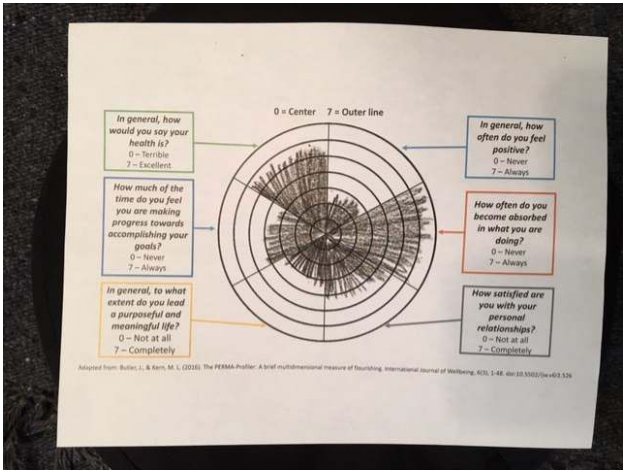
Over Past Month...



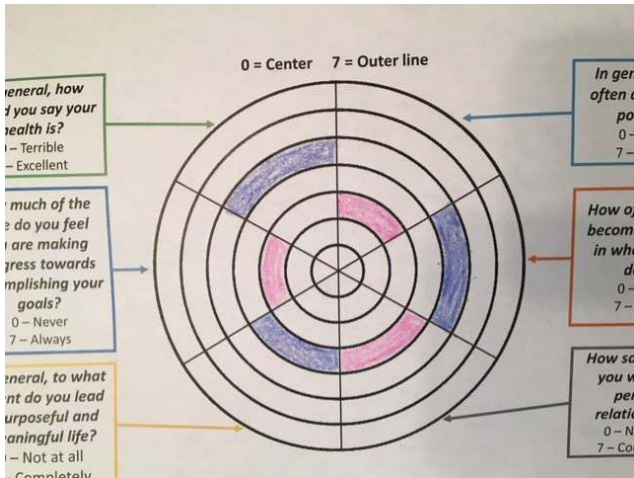
Ad pted from: Butler, J., & Kern, M. L.. International Journal of Wellbeing, 6(3), 1-48. 2016

14

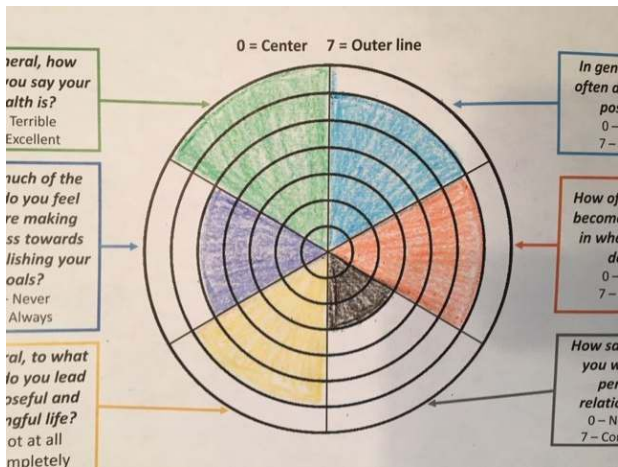
Examples:



Examples:



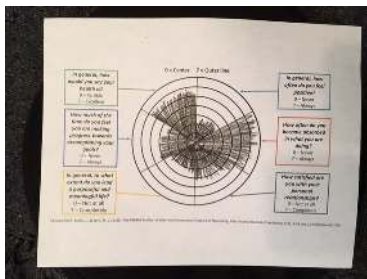
Examples:



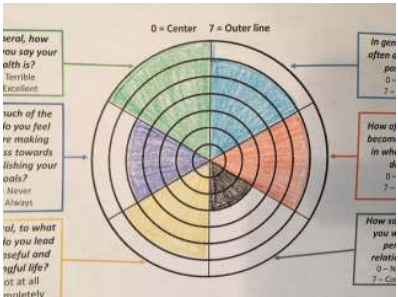
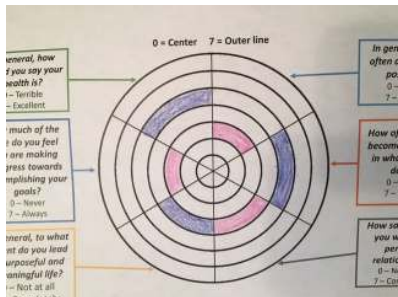
17



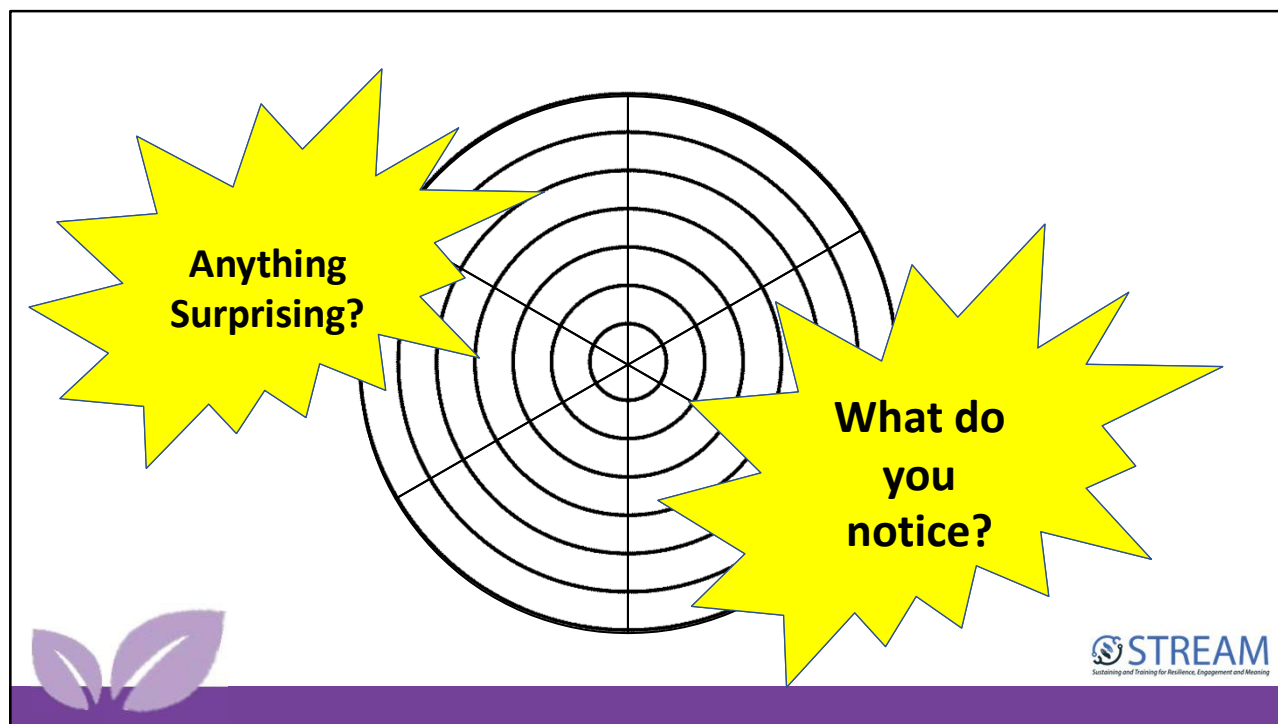
INDIVIDUAL ACTIVITY: PERMAH Wheel



6 minutes



18



19

What's Next ...

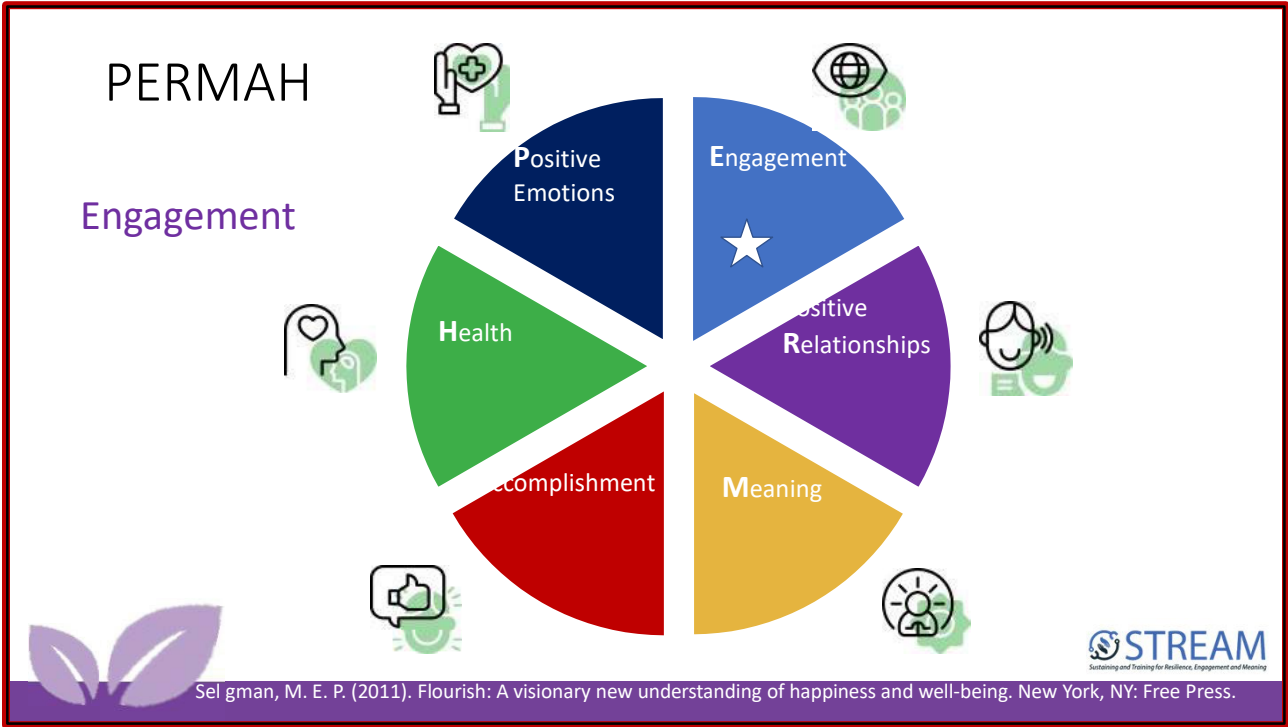
1. How much time do you have to devote to one or two of these areas?
5-10 mins / 30 mins / 1 hour
2. What specifically would you be doing in one or two important domains?
3. When specifically can you do these things?



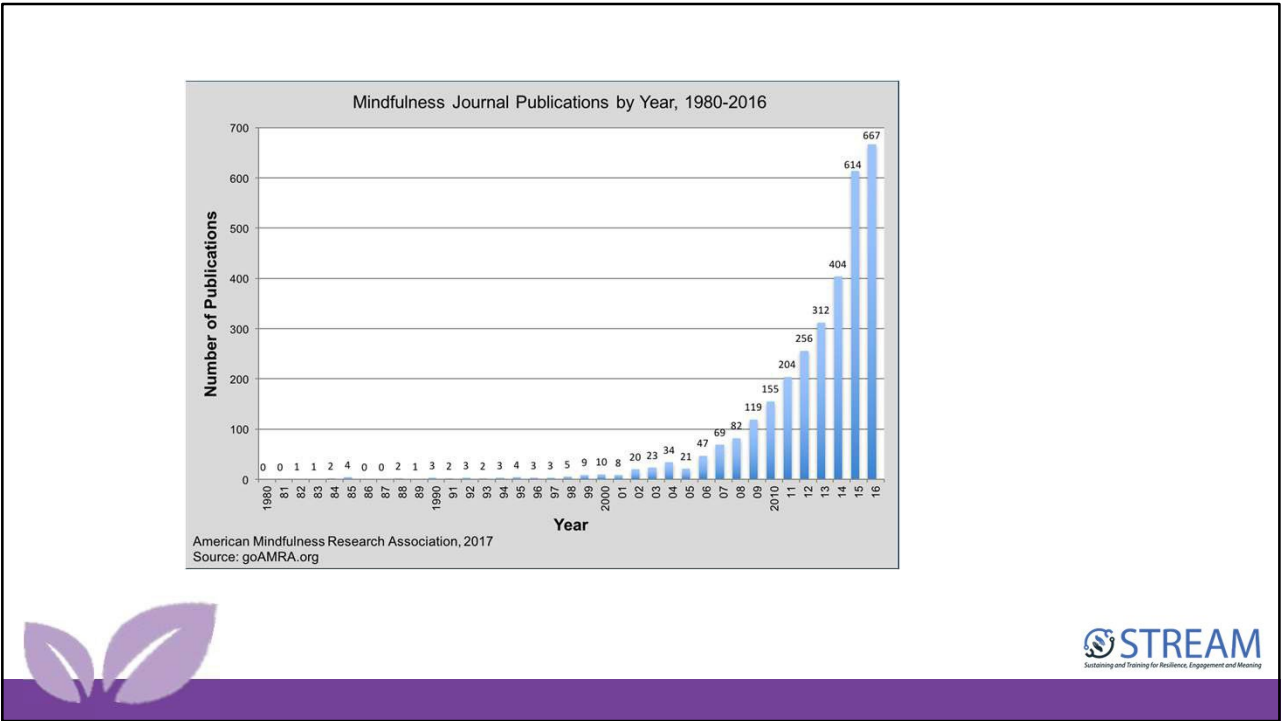
20



21



22



23

A MEDITATION BENEFIT

Grow More Brain

Researchers from several universities explored whether meditation might bring about structural changes in brain tissue. Using magnetic resonance imaging, they found that 20 experienced practitioners of one type of Buddhist meditation had a greater volume of brain tissue in the prefrontal cortex (Brodman areas 9 and 10) and the insula than a control group did (graphs). These regions play a role in processing attention, sensory information and internal bodily sensations. Future long-term studies will be needed to confirm this finding.

Legend: ● Meditation participants, ● Control participants

Graphs show Cortical Thickness (mm) vs Age for Brodmann areas 9 and 10, and the Insula.

Neuroscience of Meditation

Sara Lazar, Ph.D.

Associate Researcher in Psychiatry, Massachusetts General Hospital
Assistant Professor in Psychology, Harvard Medical School

How Meditation Can Reshape Our Brains:

Sara Lazar at TEDxCambridge 2011

<https://www.youtube.com/watch?v=m8rRzTtP7Tc>

https://scholar.harvard.edu/sara_lazar/home

24

Neuroscience of Mindfulness and Meditation



- Activates neural structures involved in **attention and control of the autonomic nervous system**;
- **Meditation experience is associated with increased cortical thickness**; gray matter density
- **Reduced amygdala activity** and increased activity in brain regions implicated in **attentional deployment**

Richard J. Davidson, PhD Center for Healthy Minds at the University of Wisconsin–Madison; <https://centerhealthyminds.org/science/overview>

25

But what IS Mindfulness?

*“Mindfulness is awareness that arises through **paying attention, on purpose, in the present moment, non-judgmentally**”*

Jon Kabat-Zinn



26

Multi-tasking, cellphones & mind wandering



"In conclusion, a human mind is a wandering mind, and a wandering mind is an unhappy mind."

~Killingsworth & Gilbert, 2010

"Brain Drain: The Mere Presence of One's Own Smartphone Reduces Available Cognitive Capacity"

~ Ward, Duke, Gneezy & Bos, 2017



27

Assess your levels of Mindfulness

(Note if anything hits home)

- I am preoccupied by the future.
- I can tolerate emotional pain.
- I can accept the things I cannot change.
- I am preoccupied by the past.
- I try to notice my thoughts without judging them.
- I am able to accept the thoughts and feelings I have.
- I am able to focus on the present moment.



28



Mindfulness in *action*
... moment by moment



GROUP ACTIVITY: Steph Curry Video

3 minutes

- What do you notice?



Mindfulness Practice



31

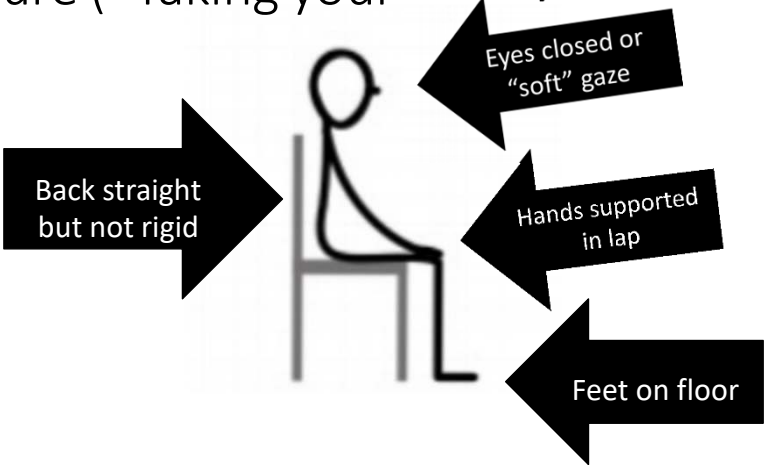
Exercise 1: Three Step Process

- 1) Posture (Seated and Standing)
- 2) Breath
- 3) Present Moment Awareness



32

1) Posture ("Taking your seat")





Back straight but not rigid

Eyes closed or "soft" gaze

Hands supported in lap



Feet on floor



33

2) Breath

**Breath is
your Anchor**



34

3) Present Moment Awareness

**Process of Coming Back
to Present with Breath as Anchor
Again and Again and Again**



Post-Exercise “Noticing”



**Posture
Thoughts
Emotions
Tightness tension
Other sensations**



What are some opportunities to incorporate mindfulness into work-flow and team operations?

Hand washing

Before entering room

Before stressful interaction



After stressful interaction

Before/after shift

Start of meeting



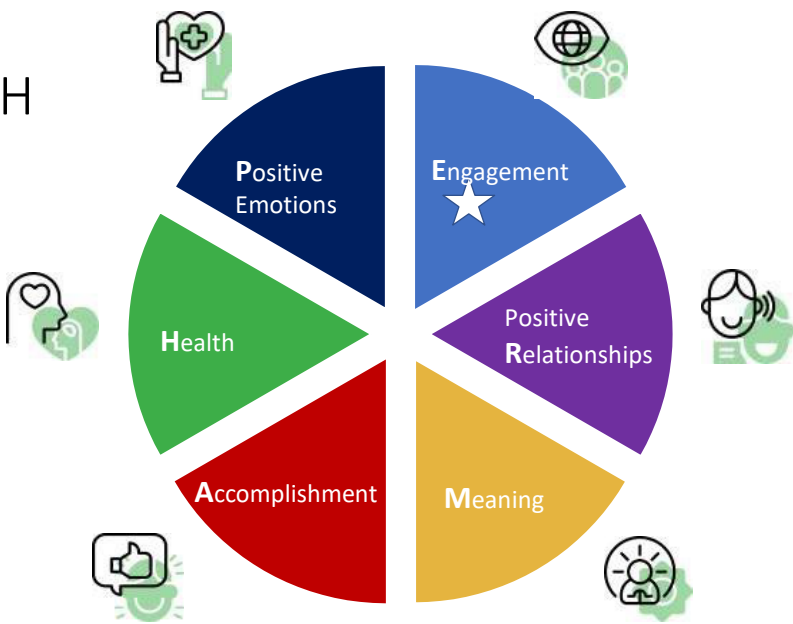
Start of rounds or during rounds

Debriefing (codes, etc.)



37

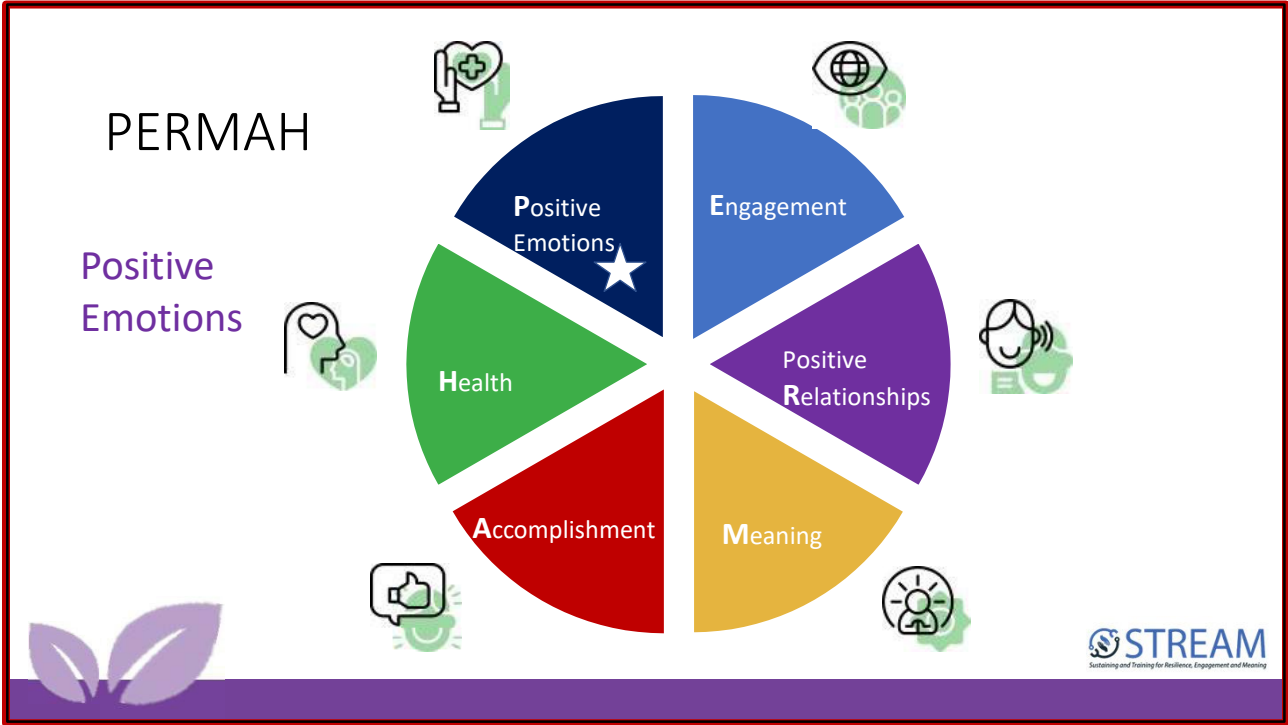
PERMAH



38



39





40

Flourishing Positivity Ratio

This scale consists of a number of words that describe different feelings and emotions.
Read each item and then place the appropriate answer next to that word.
Indicate to what extent you have felt this way during the past week.

1 = Very slightly or not at all 2- A little 3=Moderately 4= Quite a bit 5= Extremely

| | | |
|------------|--|--|
| Interested | | |
| Distressed | | |
| Excited | | |
| Upset | | |
| Strong | | |





41

Flourishing Positivity Ratio

| | | |
|---------|------------|------------|
| Jittery | | |
| Active | | |
| Afraid | | |
| Total | P = | N = |

1) Sum P and N columns

2) Flourishing Positivity Ratio: P total / N total = Ratio



42



INDIVIDUAL ACTIVITY: Flourishing Ratio

- Spreadsheet was emailed to you
- Or utilize the worksheet

3 minutes

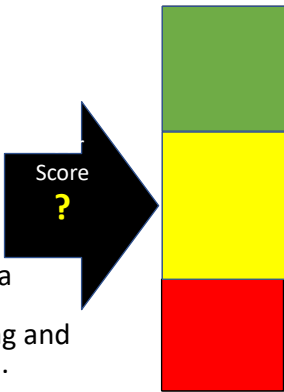


43

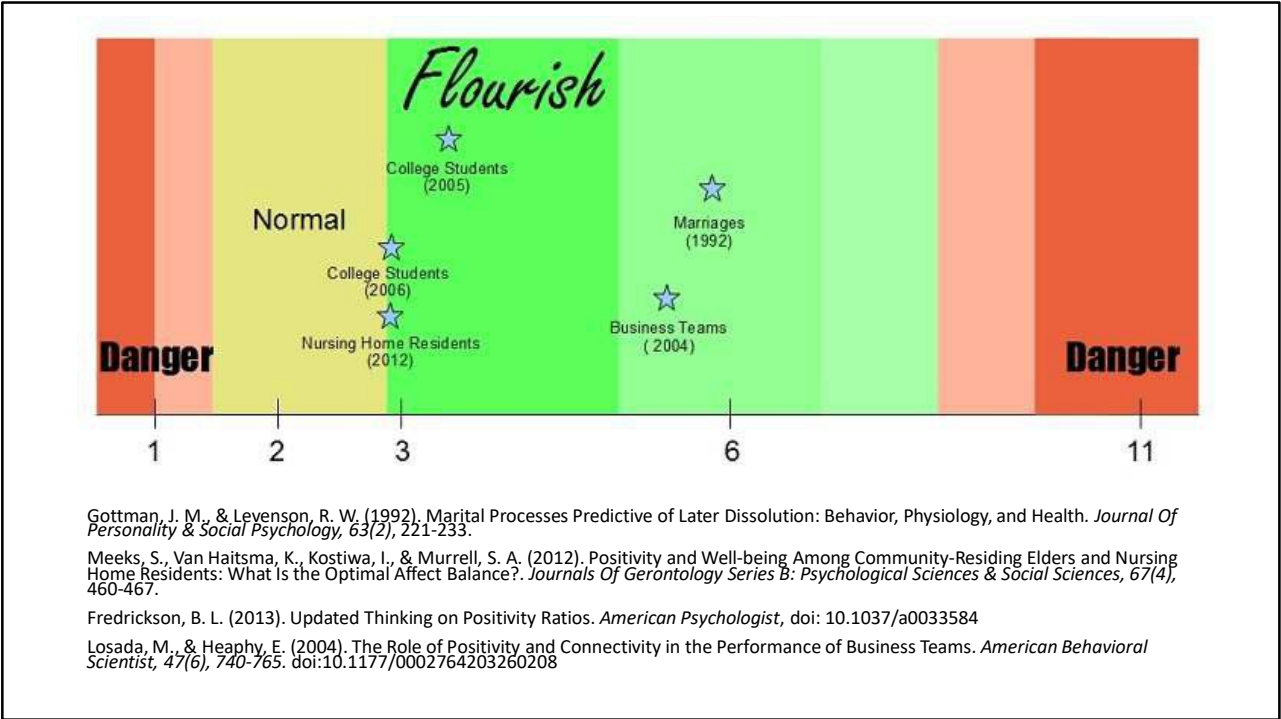
Flourishing Positivity Index

The “Flourishing” positivity index is the ratio of **Positive to Negative** emotion [Gloria & Steinhardt, 2013; Fredrickson, 2013, 2009]

- Those who have a ratio of greater than 2.9 (**Green Zone**) are described as flourishing.
- Those whose ratio falls below 2.9 (**Yellow Zone**) but higher than 1.0 are described as languishing (75% of CU Anschutz Respondents landed here)
- A ratio of under 1.0 (**Red Zone**) indicates that there may be a need to stop and take a closer look at how someone is feeling and functioning in areas of their lives that are important to them.



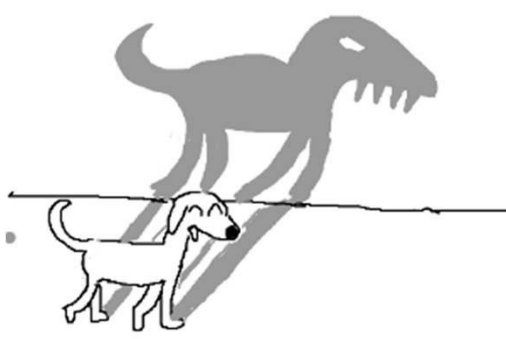
44




45

Positive and Negative emotions – now what?

46



“The ***negative screams*** at you but the *positive only whispers*”
 ~Barbara L. Fredrickson, Ph.D.




47

Stress

- Our brains at positive work better than they do at negative, neutral or stressed¹
- What happens with stress response?
 - Flight or fight
 - Higher cortical functioning shuts down
- How might we mitigate that?
 - Parasympathetic response
 - Activate positive emotion (authentically)

¹The Happiness Advantage: The Seven Principles of Positive Psychology That Fuel Success and Performance at Work. Shawn Achor. 2010

https://www.ted.com/talks/shawn_achor_the_happy_secret_to_better_work?language=en



48








**The average person
complains 30
times/day
(1.875/waking
hour)**

49

Let's talk about venting







50

YJ(1)



GROUP ACTIVITY: Venting Discussion

- What are the pros and cons of venting?

5 minutes



51

Debrief

Venting

- Negative downward spiral
- “join in”...add to the story
- How do you feel?

Support

- Solicit input
- Validate/empathize
- Seek the positive
- Active listening



52

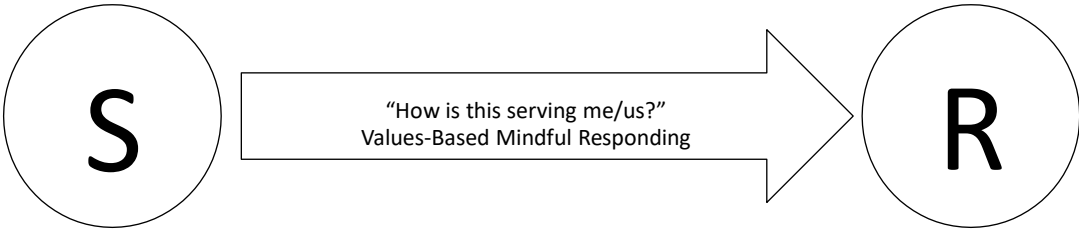
Post-Traumatic Growth

Recovery from trauma allows space for new growth





53

The PAUSE

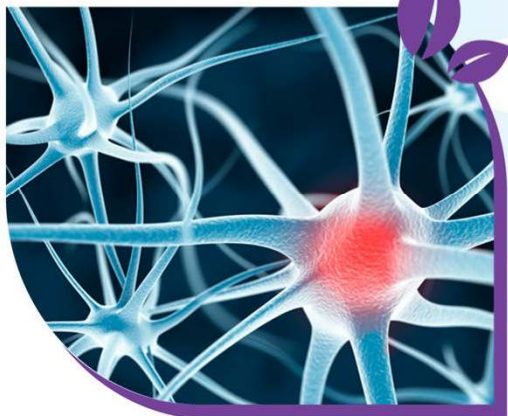



“Between stimulus (S) and response (R) there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom.”

~Viktor E. Frankl



54

Complaining or Positivity = Learned Response

“an increase in synaptic efficacy arises from a presynaptic cell's repeated and persistent stimulation of a postsynaptic cell.



...synaptic plasticity, the adaptation of brain neurons during the learning process.”

Hebbian Theory

55

Positive Psychology

- Psychological well-being is viewed as not only absence of mental disorder but also presence of positive psychological resources (positive affect, life satisfaction, happiness)...etc.
- Positive Psychology Interventions are treatment methods or intentional activities that aim to cultivate positive feelings, behaviors, or cognitions
- Positive Psychology Interventions significantly enhance well-being and decrease depression

Lyubomirsky and Sin. Journal of Clinical Psychology: In Session, Vol. 65(5), 467-487 (2009)

56

Positive Psychology Interventions

- Writing gratitude letters
- Practicing optimistic thinking
- Replaying positive experiences (3 good things)
- Socializing



PARTNER ACTIVITY: Active Listening Exercise

- What is energizing you right now (Inside or outside of work)?
- What are you doing to take care of yourself?

4 minutes



Three Good Things...

PART 1

- Every day for **ONE WEEK**
- **Write down three good things that happened**
- Can be small in “importance”

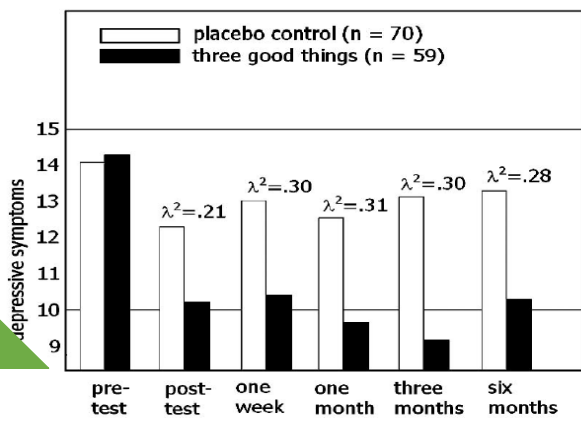
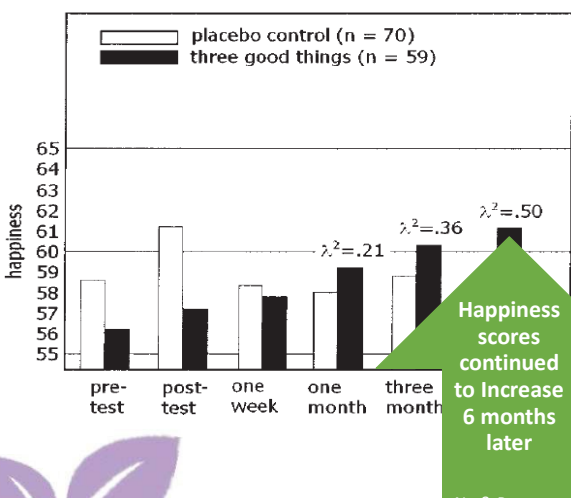
PART 2

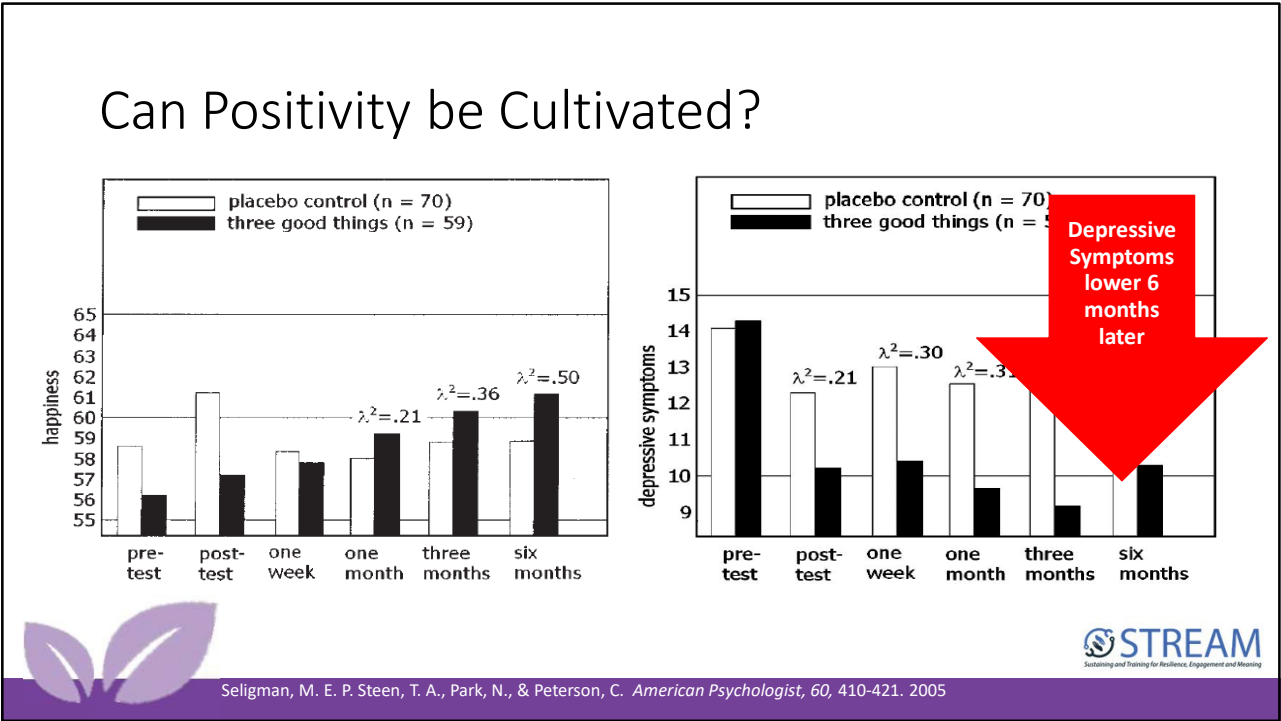
- Next to each Good Thing write about one of the following:
- **Why did this good thing happen?**
- **What did this mean to you?**
- **How can you have more of this good thing in the future?**



Seligman, M. E. P. Steen, T. A., Park, N., & Peterson, C. *American Psychologist*, 60, 410-421. 2005.

Can Positivity be Cultivated?





61

How can positivity be cultivated within your team?

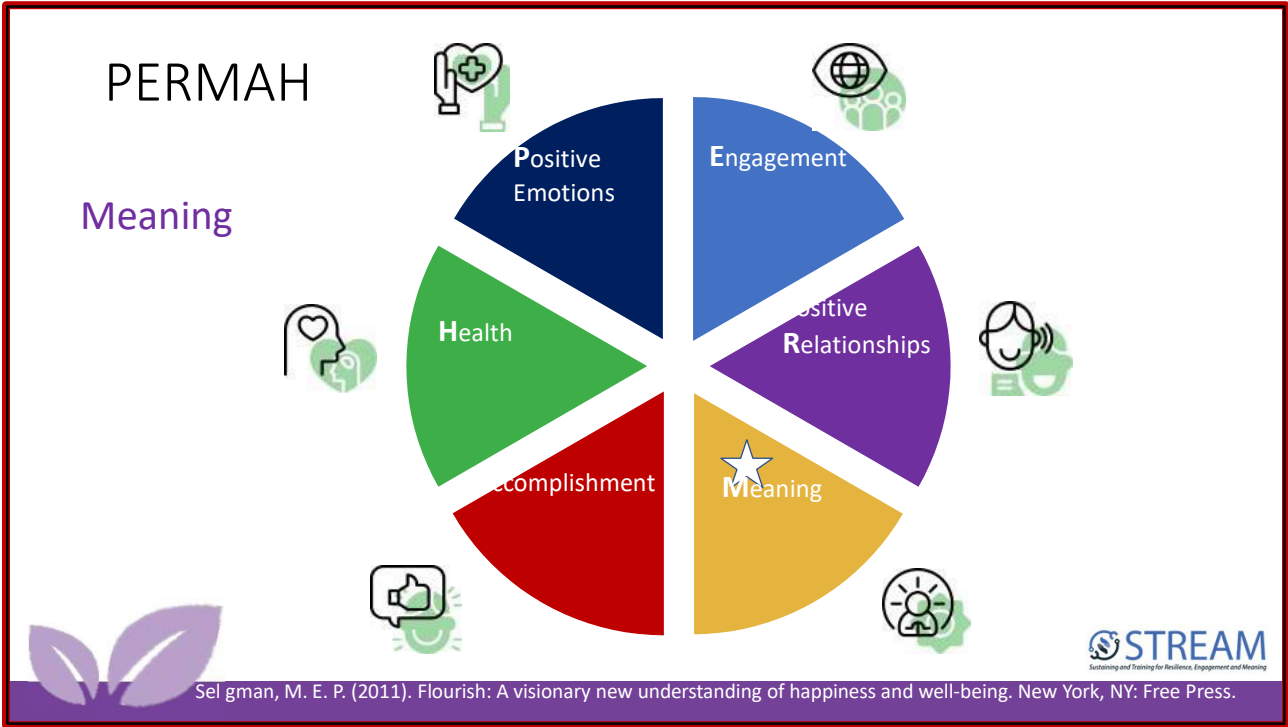
- Huddles
- Recognition/kudos boards
- End of shift 3 good things
- Start meetings with positive story
- Accountability to break “venting cycles”

STREAM
Sustaining and Training for Resilience, Engagement and Meaning

62



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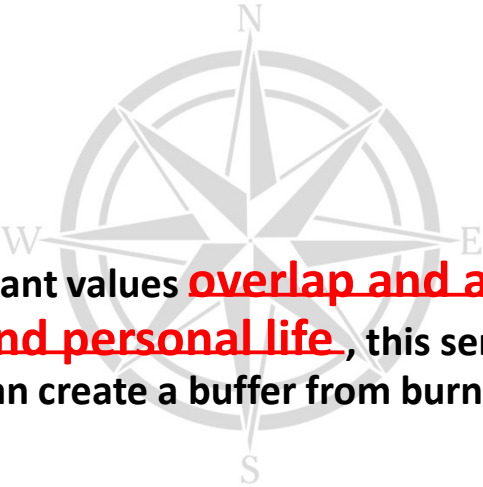


64



Values Serve Us as our “True North”

65



When important values **overlap and are felt** in both **workplace and personal life**, this sense of congruence can create a buffer from burnout.

Veage, S. et al. *Journal of Contextual Behavioral Science* 3, 258–264. 2014

66

Values Clarification

- ***Deep down inside***, what's important to you?
- ***What*** sort of ***qualities*** do you want to cultivate as a person?
- ***How do you want to be*** in your relationships with others?
- They are about ***how you want to behave*** towards your friends, your family, yourself, your environment, your work, etc.

67

Work Domain

- Competency
- **Accomplishment**
- **Honesty**
- **Accepting others**
- Fulfill obligations
- Solving problems
- **Wisdom**
- Ambition
- Curiosity
- Justice for others
- **Better person**
- **Feel good about self**

Life Domain

- Loving relationships
- **Honesty**
- **Accepting others**
- **Better person**
- **Feel good about self**
- Genuine friendships
- Loyalty
- **Wisdom**
- Security
- **Accomplishment**
- Helping others

68

Values* not same as Goals

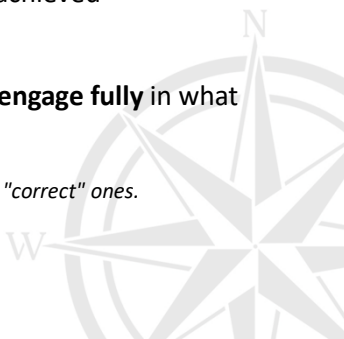
- **Values = guiding principles and general life directions** that **give meaning** to our actions

Examples:

- Be a **loving, caring, supportive partner** = **VALUE** that involves ongoing action
- Want to **get married** = **GOAL** that can be 'crossed off' the list or achieved

- Want a **better job** = **GOAL**. Once you've got it - goal achieved
- Want to **fully apply yourself at work, contribute your best, and engage fully** in what you're doing = **VALUE** that involves ongoing action.

**Not everyone has the same values, and this is not a test to see whether you have the "correct" ones.*





Sustaining and Training for Resilience, Engagement and Meaning

What

A values clarification exercise

Why

When we spend more time doing things that align with our values, it protects against burnout



PARTNER ACTIVITY: Values Clarification

- Speaker, answer these questions
 - Why do you do the work that you do?
 - What brings you energy and joy?
 - Who do you most admire, why? What traits that they have would you like to emulate or be known for?
 - What would you want people to say about you at your retirement party?
- Listener, write down the *VALUES* that you hear
- Debrief
 - What Values did you hear?

4 minutes



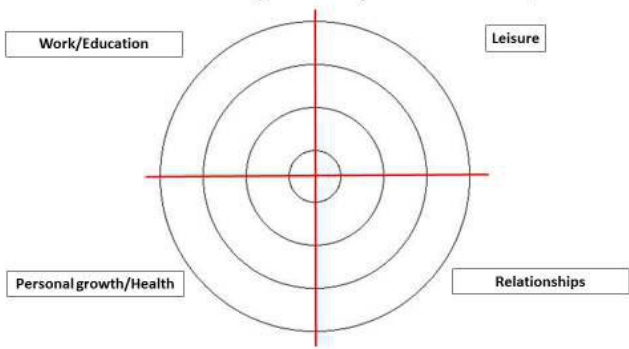
71

Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Values Clarification (Bullseye Exercise)



Lund ren, et al. (2012) The Bull's-Eye Values Survey: A Psychometric Evaluation Cognitive and Behavioral Practice, 19 (4) 518-526.

72

Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Examples of Values

Joy
Integrity
Challenge
Leadership
Dependability
Meaning
Understanding
Humor
Trust
Connection
Respect
Community
Compassion
Empathy
Caring
Justice
Equity

73

Step 2:

Determine what feels ON Target versus OFF Target

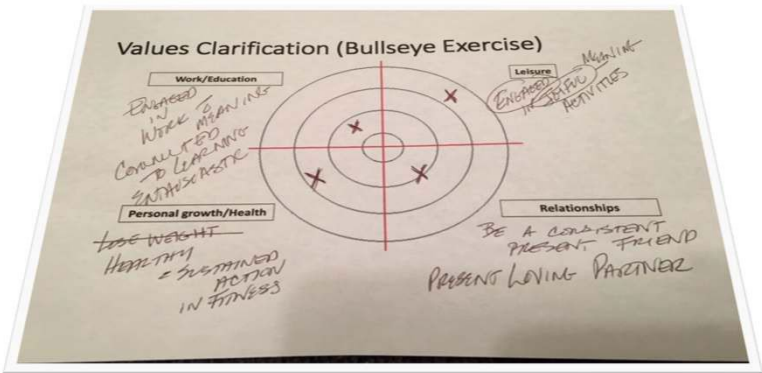
HINT: You can feel when things are ON Target

74

Step 2:

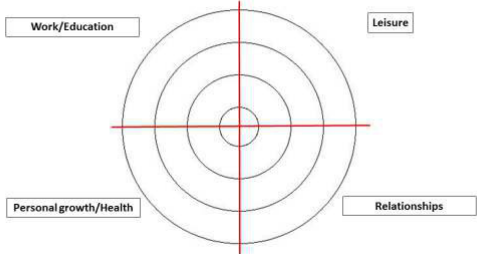
Determine what feels ON Target versus OFF Target

HINT: You can feel when things are ON Target



INDIVIDUAL ACTIVITY: Values Bullseye

Values Clarification (Bullseye Exercise)



7 minutes



Values Choice Point

VALUES INCONSISTENT

VALUES CONSISTENT

Situations, Thoughts & Emotions

R. (2017) Choic Point 2.0 From Bailey, Ciarrochi & Harris (2013) The Weight Escape: How to Stop Dieting and Start Living, Boulder, CO, Shambhala Press

77

Connecting with your values

- You can continue reflecting with your worksheet on steps 3 and 4 to consider ways to change and grow

78

For further consideration

Step 3:

- **Determine what OBSTACLES might be getting in your way?**
- **Are these obstacles *Internal* (“inside the skin”) or *External* (“outside the skin”)?**
- **How powerful are these obstacles?**

1 2 3 4 5 6 7 8 9 10

*Doesn't prevent
me at all*

*Prevents me
completely*



79

• Step 4: Valued-Based Action Plan

- **Choose 1 values-consistent action** you are willing to try
- Think about how you might move or overcome the barrier(s) that you identified
- What is the first step you will take to make a change

• Small achievable

- Sustained over time
- Consistent with goals
- Natural Ebb and Flow



80

flourish

1 : to *grow luxuriantly*

2 a : to *achieve success*

b : to be in a *state of activity or production*

c : to *reach a height* of development or influence

3 : to *make bold and sweeping gestures*





81

Thank you!

• INSERT QR CODE



82



Engagement with Peers to Improve Systems

Dr. Suzanne Reed & Dr. John Mahan

1





Connecting with Joy and
Meaning in Medicine



Beyond Surviving:
Plan to Thrive



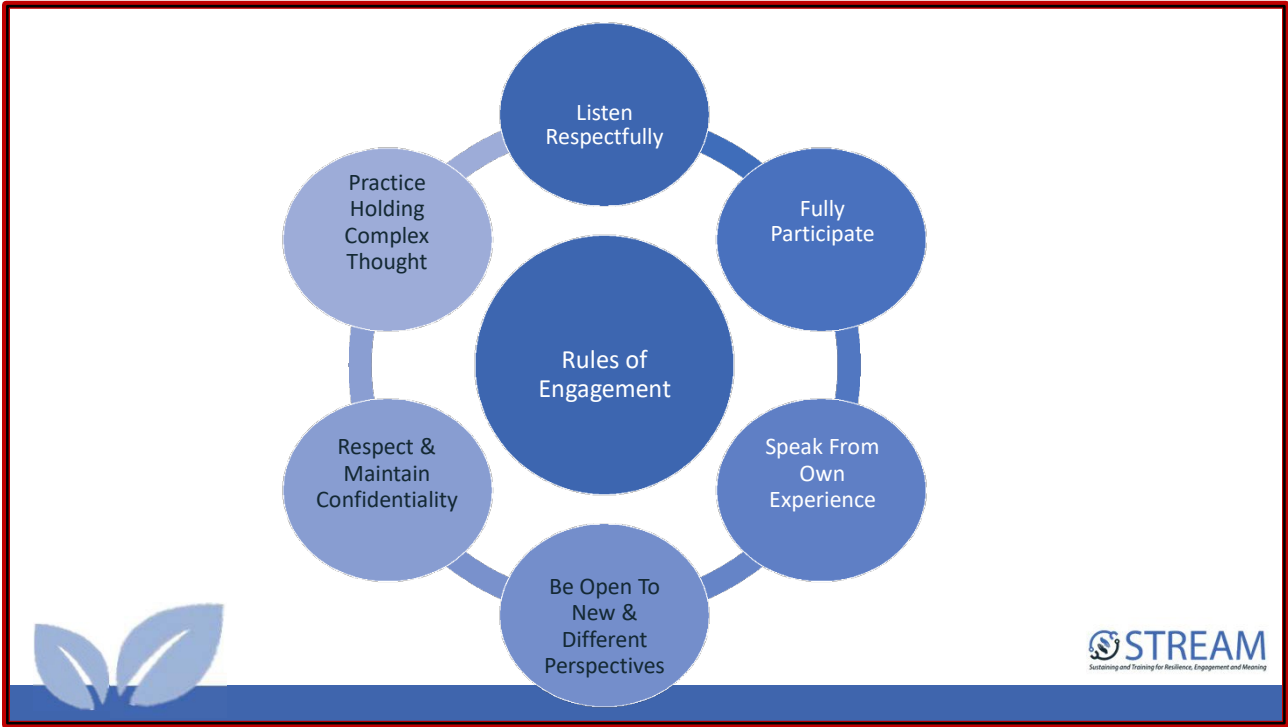
Building Resilience:
Practical Approaches for
Growth



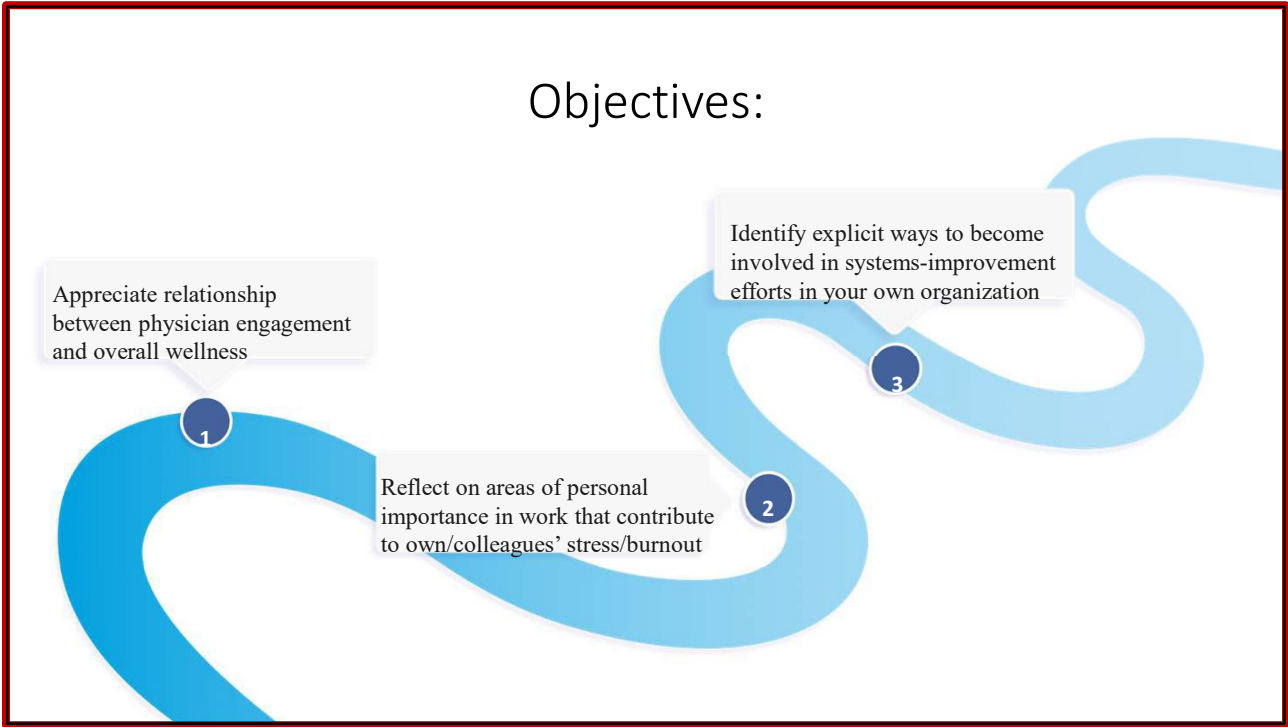
Collaborating to
Improve Your Work



2



3



4



Equity and Engagement

True equity involves providing help and resources as they are needed, not necessarily providing the same to everyone.

Collaborating to improve your work environment and process can help us ensure that everyone, health care professionals and patients/families, have what they need to be successful and thrive.



5

Does Engagement make a difference to well-being?



6

Did someone say “engagement?”

Hi, My Name Is
Medicine

I can't hear (or
move) because of
this giant bear
covering my ears
(and crushing me)

7

What is Engagement?

1. Engagement in Work

U

- Among physicians with high levels of
- burnout, engaged physicians -
- **more satisfied with career and more**

2. E

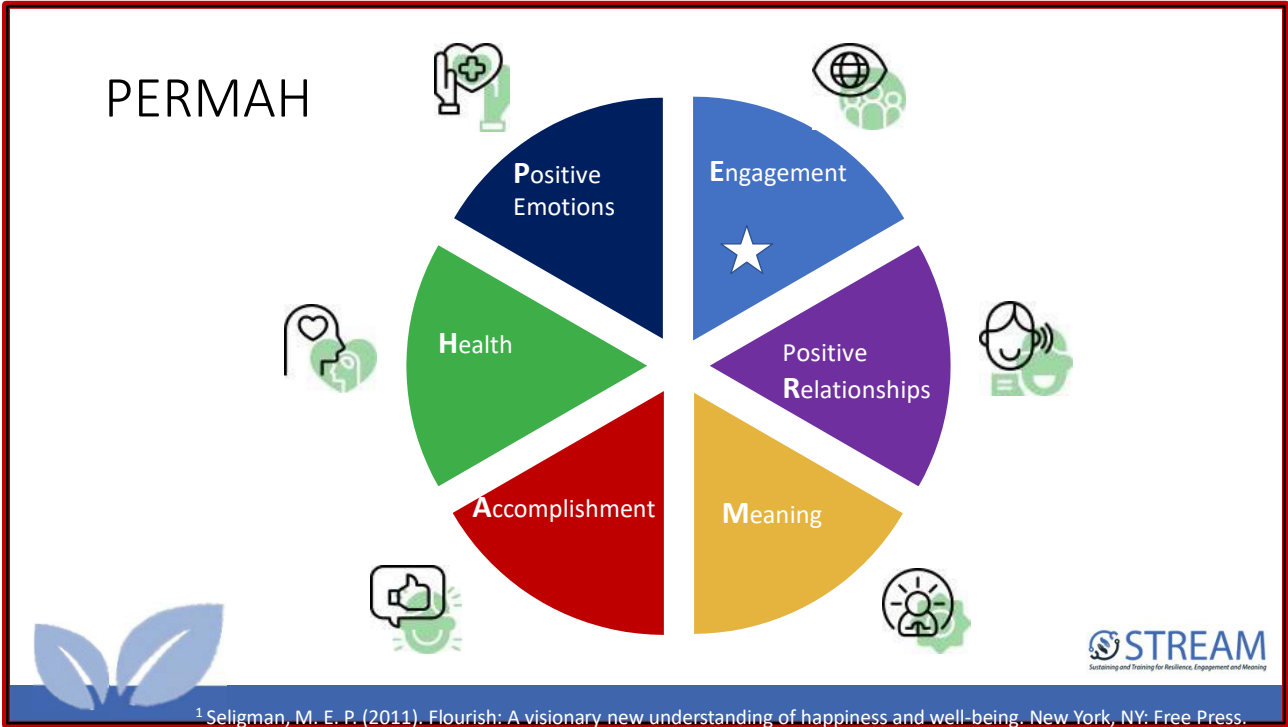
In

likely to stay in current position

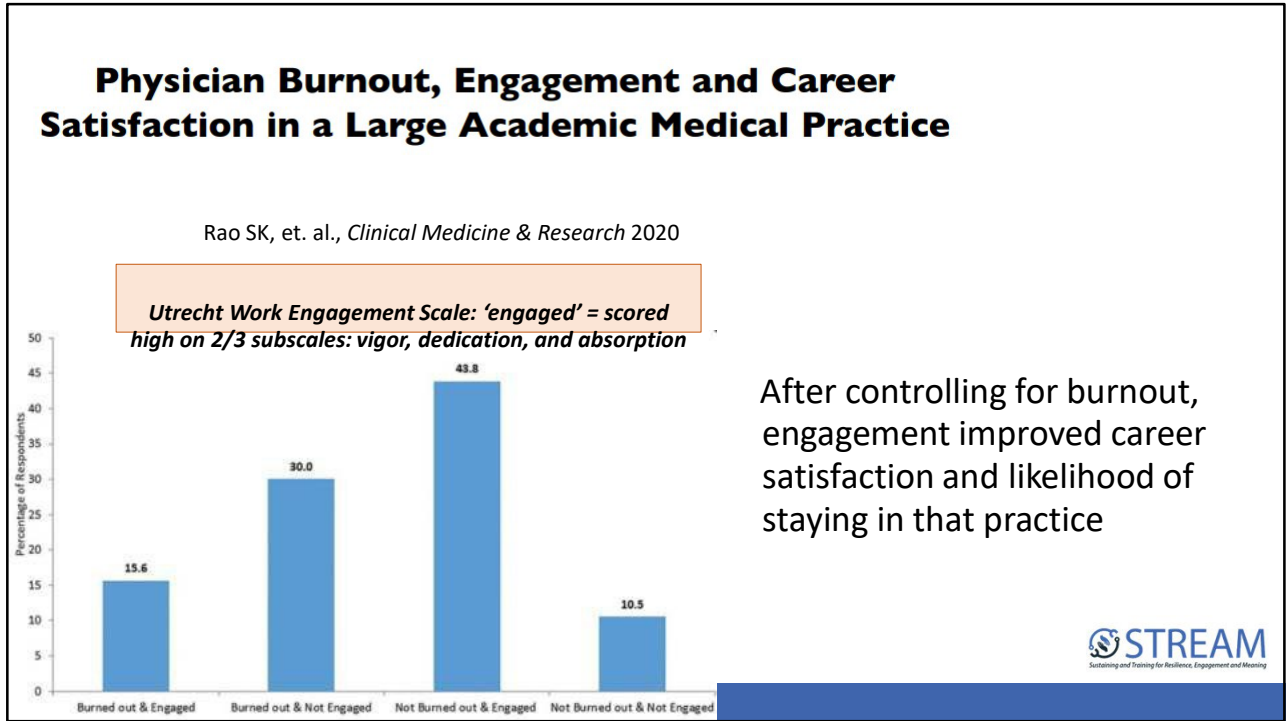
nal

activities

8



9



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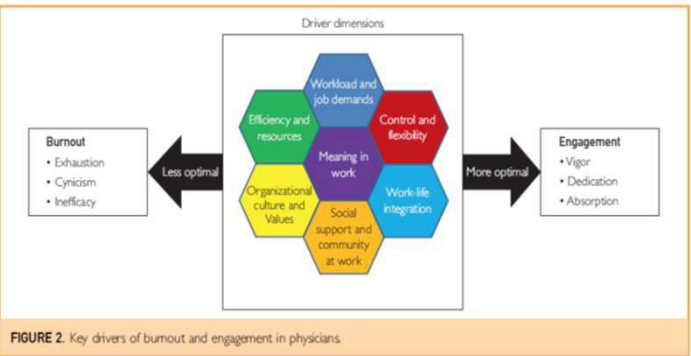
Improving the Work Environment

- Excess clerical burden, inefficient workflows, inadequate staffing among most **prominent** contributors to physician stress
- Studies have demonstrated physicians with high EHR task load have
 - ↑ Burnout
 - ↑ Intent to leave pracGce
 - ↓ Job saGsfacGon
- Scribes =>10-fold increase in physician satisfaction; no change patient satisfaction Gidwani. *Ann Fam Med* 2017



11

Moving Away from Engagement as Happenstance



SPECIAL ARTICLE

Executive Leadership and Physician Well-being: CrossMark
Nine Organizational Strategies to Promote Engagement and Reduce Burnout
Tait D. Shanafelt, MD, and John H. Noseworthy, MD, CEO

Mayo Clin Proc 2017

- **Engagement** (vigor, dedication, absorption in work) as antidote to **Burnout**
- Organizations and Leaders can implement effective interventions to promote engagement



12



13



14

Typical Stressors for Physicians

- Inefficient EMR, too much time spent in documentation
- Too much secretarial work
- Lack of respect from patients
- Lack of respect from leadership
- Healthcare inequities
- Lack of job flexibility
- (relative) Low pay in pediatrics
- Idea of “checking boxes” (business of medicine)
- Personal responsibilities outside of work



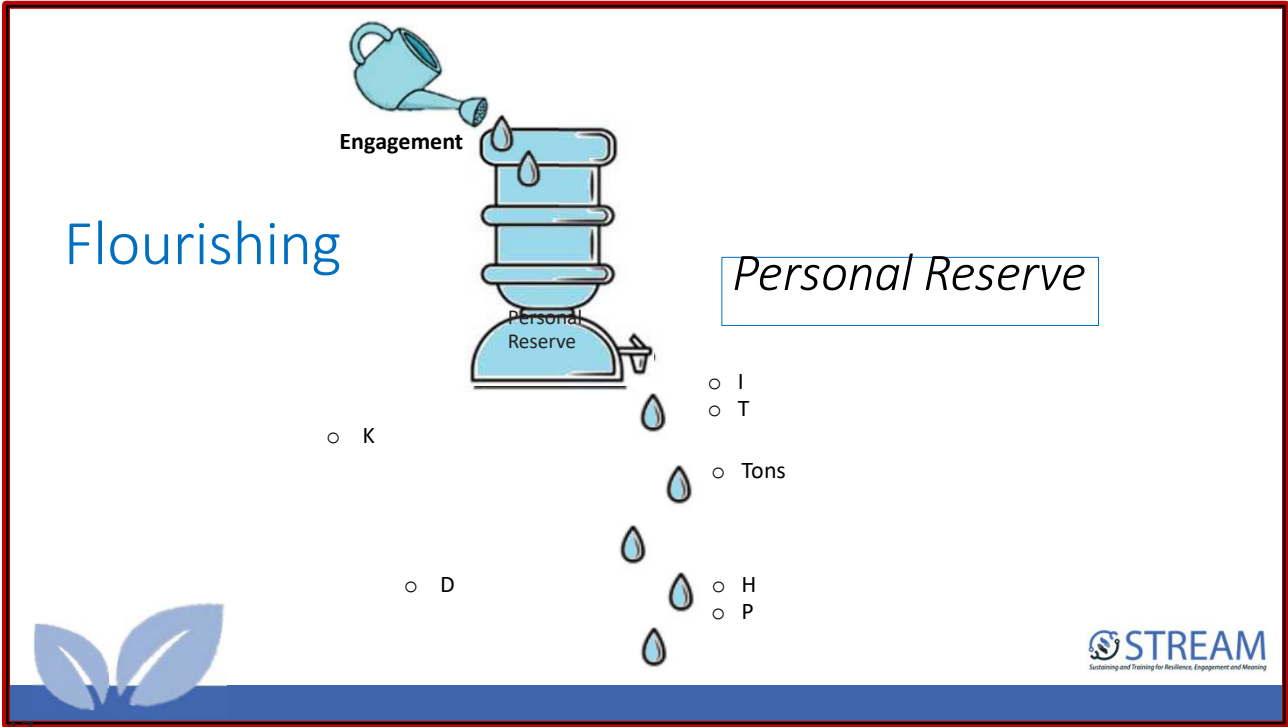
15

Stressors: What you said


INSERT LIST FROM GROUP



16




17



is too big (hairy, oppressive, etc)
to fix!

We're the stakeholders

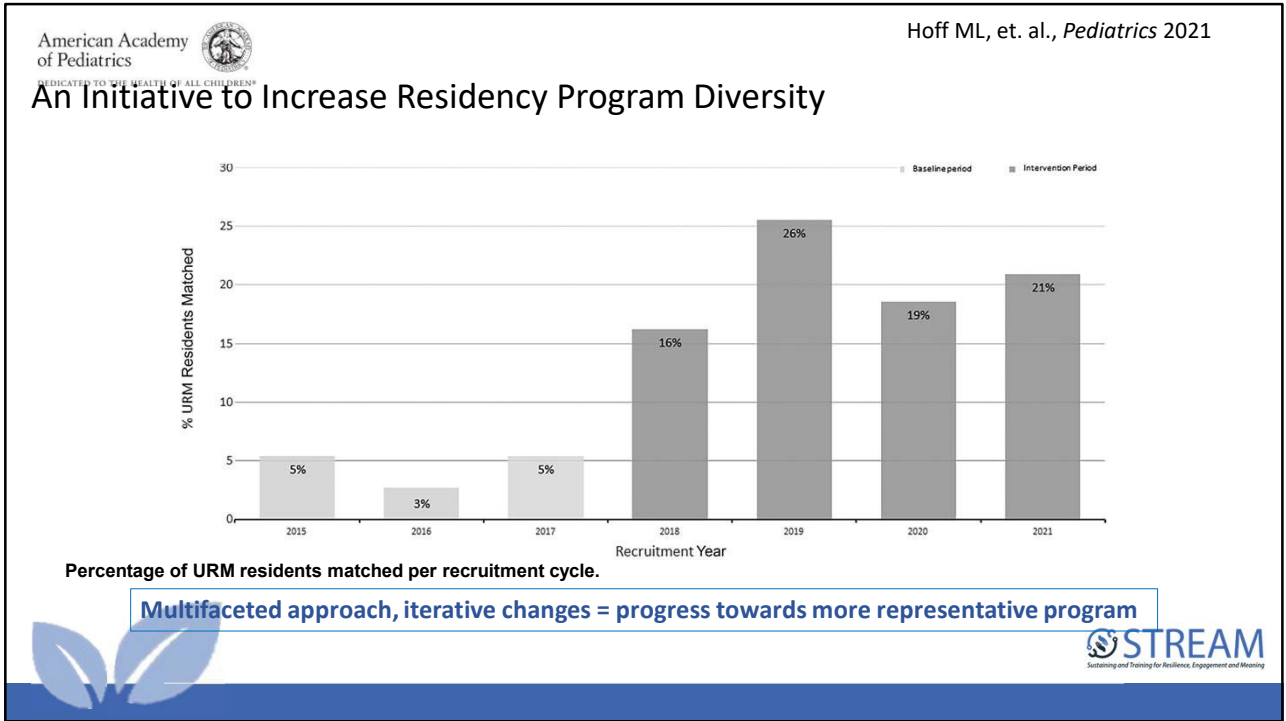
Medicine IS ours, and it SHOULD
and CAN be a place and
profession that works better for
physicians



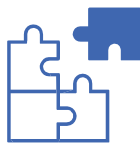
18



19



20



GROUP ACTIVITY: Other Examples of Engagement in Action

- **Bronchiolitis Clinical Pathway Design Group**
- **Inpatient Admission Optimization Task Force**
- **QI Project to Improve Vaccination Rates in Primary Care**
- **Departmental Mentorship Committee**
- **Volunteer to Trial New Scheduling Program for Faculty/Residents**

3 minutes



21

Keys to Success

1. Engage in something you care about
2. Engage with colleagues who care about the issue
 - Helpful to include those with differing perspectives
3. Enlist support/sponsorship of your boss
4. Start small AND meaningful



22


Engagement Practice

What:

To practice collaborating to improve workplace efficiency

Why:

To start to understand how it feels to be involved in the process of system change




23

Engagement Practice

Small Groups (Work on 1 case)

When you get into your group:

1. Assign a scribe
2. Review Worksheet
3. Choose a spokesperson
4. You have 12 minutes to review scenario and generate action plan (2 discrete plans, with associated steps)



24

Sample Case: Hitting RVU target

An important goal of your institutional leadership is to assist faculty to generate necessary clinical income. To receive the incentive plan, the division to meet/exceed the 75%ile RVU target (prorated for clinical FTEs) for the entire group.

You are in a group of 16 faculty.

Generate action-oriented solutions for positive engagement in this issue



25

Sample Case: Hitting RVU target

Potential Actions:

- 1. lobby for no RVU targets (propose alternatives)
- 2. make EMR more capable of achieving appropriate RVU per encounter
- 3. hire a coder to accurately capture billing
- 4. hire scribes to permit faculty to maximize clinical pace
- 5. adjust assignments in group to increase group’s chance to make >75% RVU targets
- 6. provide transparency to group about individual efforts through frequent feedback




26

5


Sample Case: Hitting RVU target


Consider 3 (or more) potential solutions to the issue presented. Use the “Step” boxes to consider the explicit steps or action items needed to accomplish the solution. Use the example below to guide you.

| Possible Solutions | On a scale of 1 (not at all invested) to 10 (very invested), how invested is my institution likely to be in this issue AND solution? | Step 1 | Step 2 | Step 3 |
|--------------------|--|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |



27



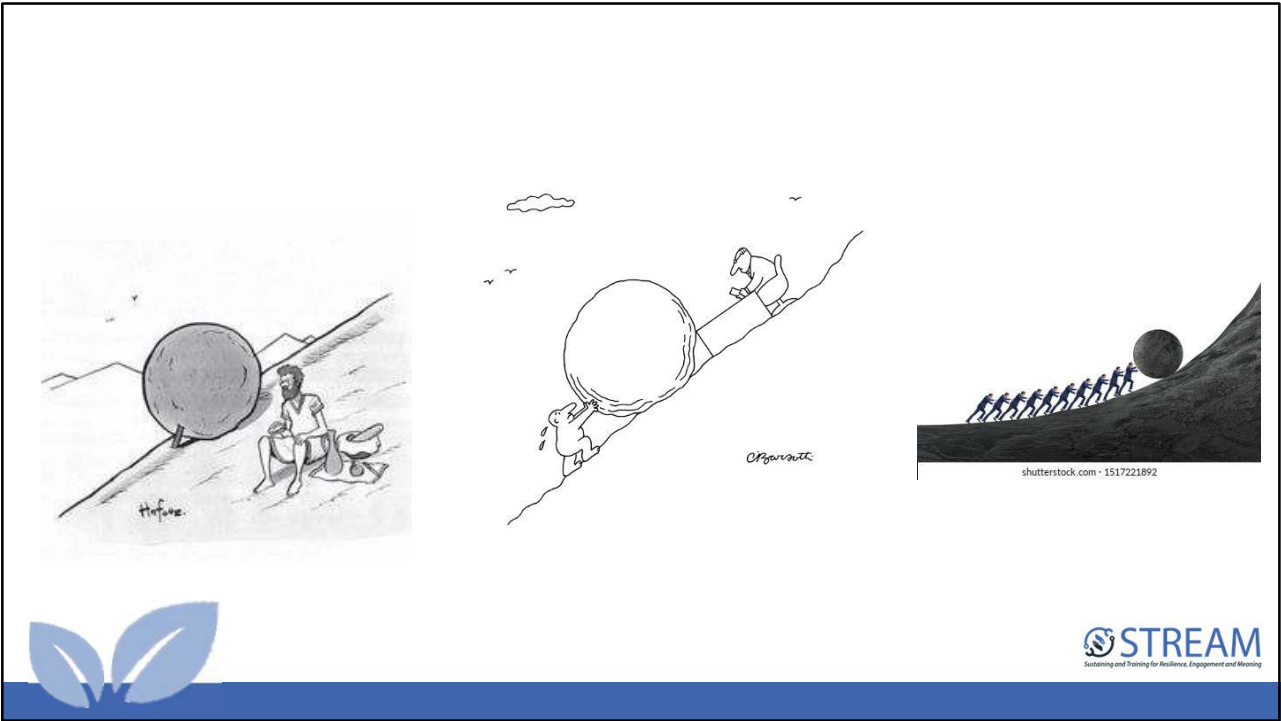


One Last Note

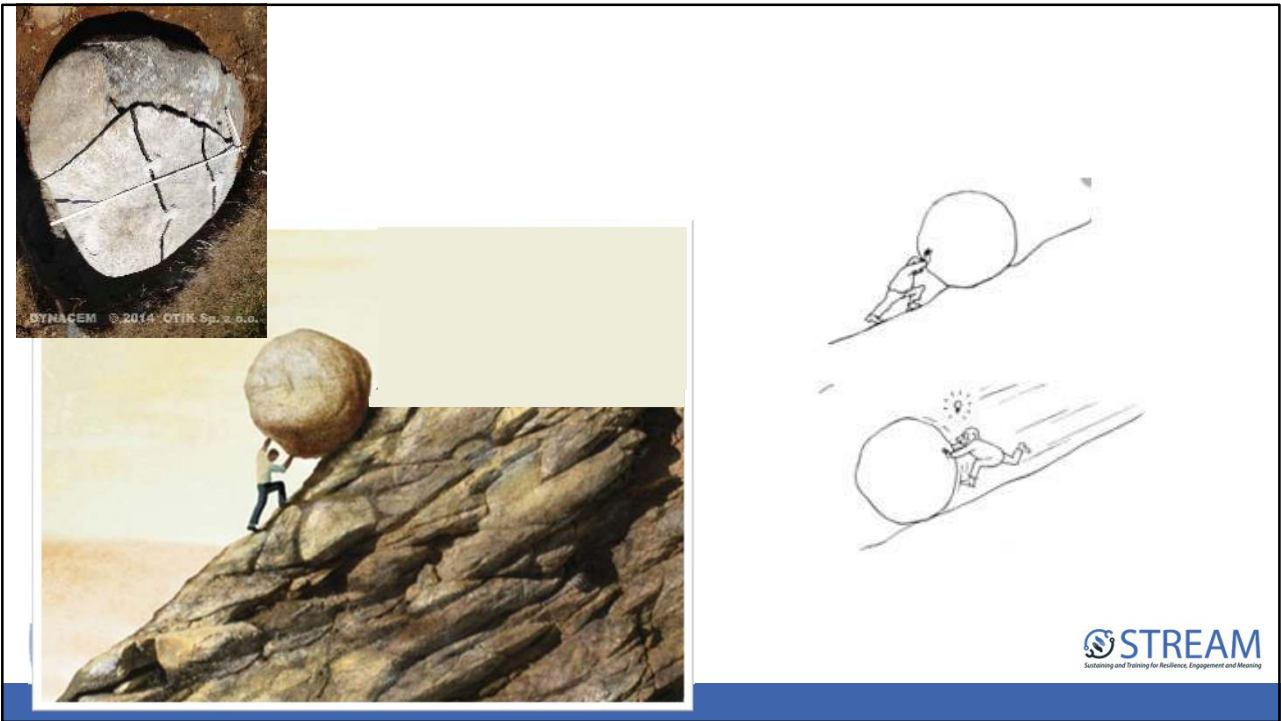
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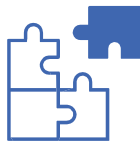
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30



31



SMALL GROUP ACTIVITY: Engagement in Action

Small Groups of 2-4 (Work on 1 case)

1. Assign a scribe
2. Review Worksheet
3. Choose a spokesperson
4. Review the scenario and generate action plan (2 discrete plans, with associated steps)

Remember: Try to keep an open mind!

12 minutes



32

DEBRIEF

Let’s hear from YOU:


What solutions did you generate and how did it feel to work on these?





33

Commitment to Action: Personal Reflection

What can I do in the next 6 months to increase engagement in something I care about?





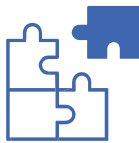
34

Keys to Success

- 1. Engage in something you care about
- 2. Engage with colleagues who care about the issue
 - Helpful to include those with differing perspectives
- 3. Enlist support/sponsorship of your boss
- 4. Start small AND meaningful



35





INDIVIDUAL ACTIVITY: Commitment to Action for Engagement

- Identify an action item(s) and **write 1-2 down**
- Set up personal reminder for 3-6 months from now

3 minutes



36





Summary

- Physician burnout, resilience and wellness: personal and social constructs
- Physician ‘un-wellness’ negatively impacts patient care and physician engagement/retention
- Physician engagement with peers in improving systems can positively impact on physician thriving

37

Thank You!

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38

References

- Douglas M, Coaman E, Eden AR, et al. (2021). Lower Likelihood of Burnout Among Family Physicians From Underrepresented Racial-Ethnic Groups. *Ann Fam Med.* 19:342-350.
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Engagement with Peers to Improve Systems

Dr. Suzanne Reed & Dr. John Mahan

1





Connecting with Joy and
Meaning in Medicine



Beyond Surviving:
Plan to Thrive

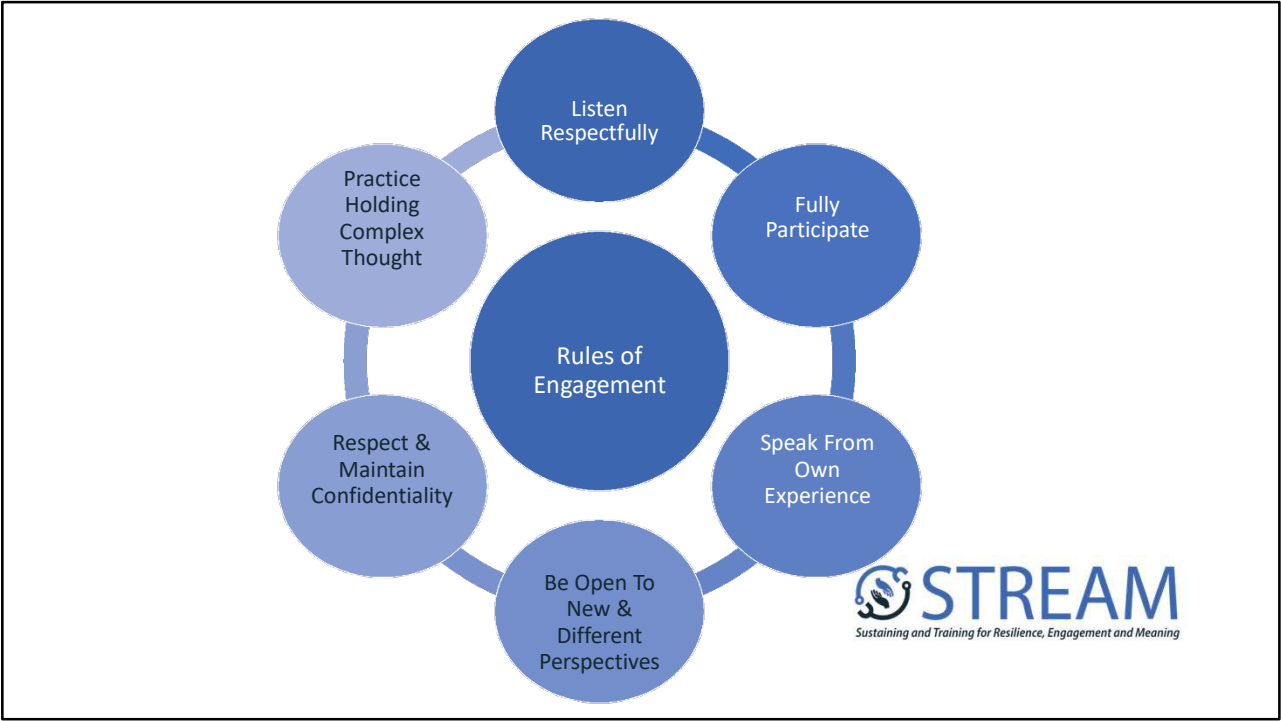


Building Resilience:
Practical Approaches for
Growth

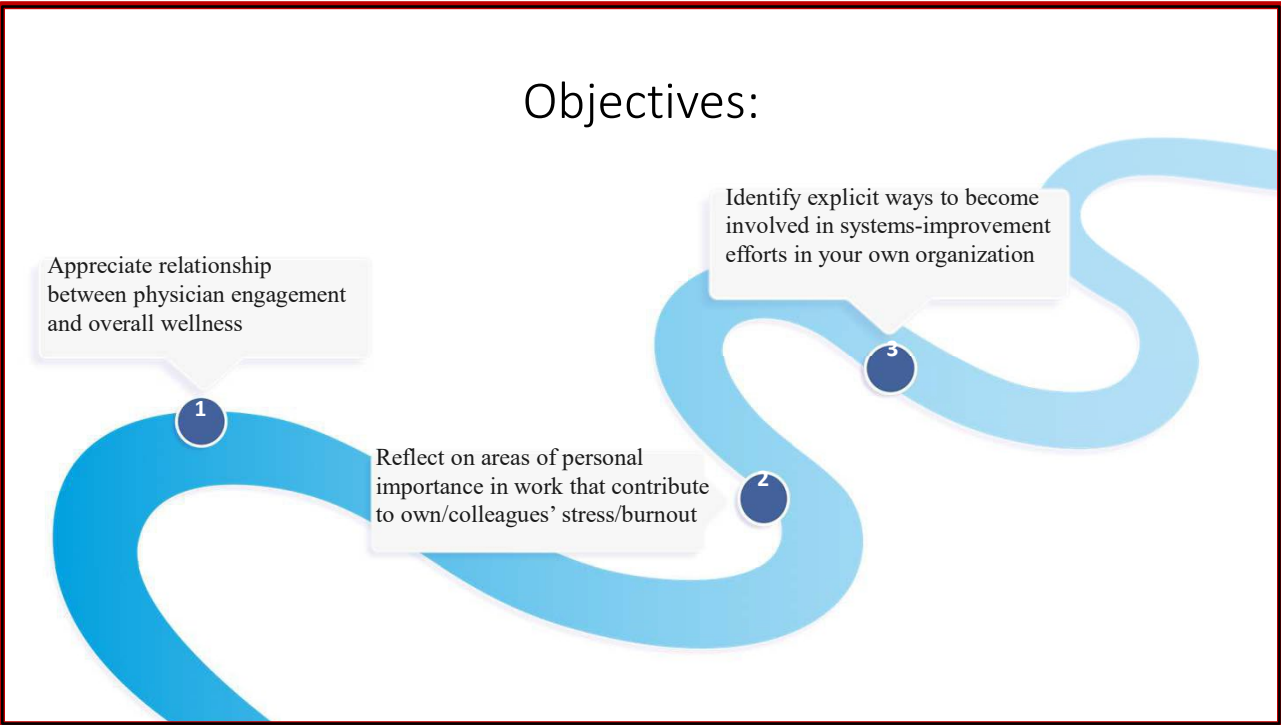


Collaborating to
Improve Your Work

2



3



4



Equity and Engagement

True equity involves providing help and resources as they are needed, not necessarily providing the same to everyone.

Collaborating to improve your work environment and process can help us ensure that everyone, health care professionals and patients/families, have what they need to be successful and thrive.



5

Does Engagement make a difference to well-being?



6

Did someone say “engagement?”

Hi, My Name Is Medicine

I can't hear (or move) because of this giant bear covering my ears (and crushing me)

7

What is Engagement?

1. Engagement in Work

U

- Among physicians with high levels of
- burnout, engaged physicians -
- *more satisfied with career and more*

2. E

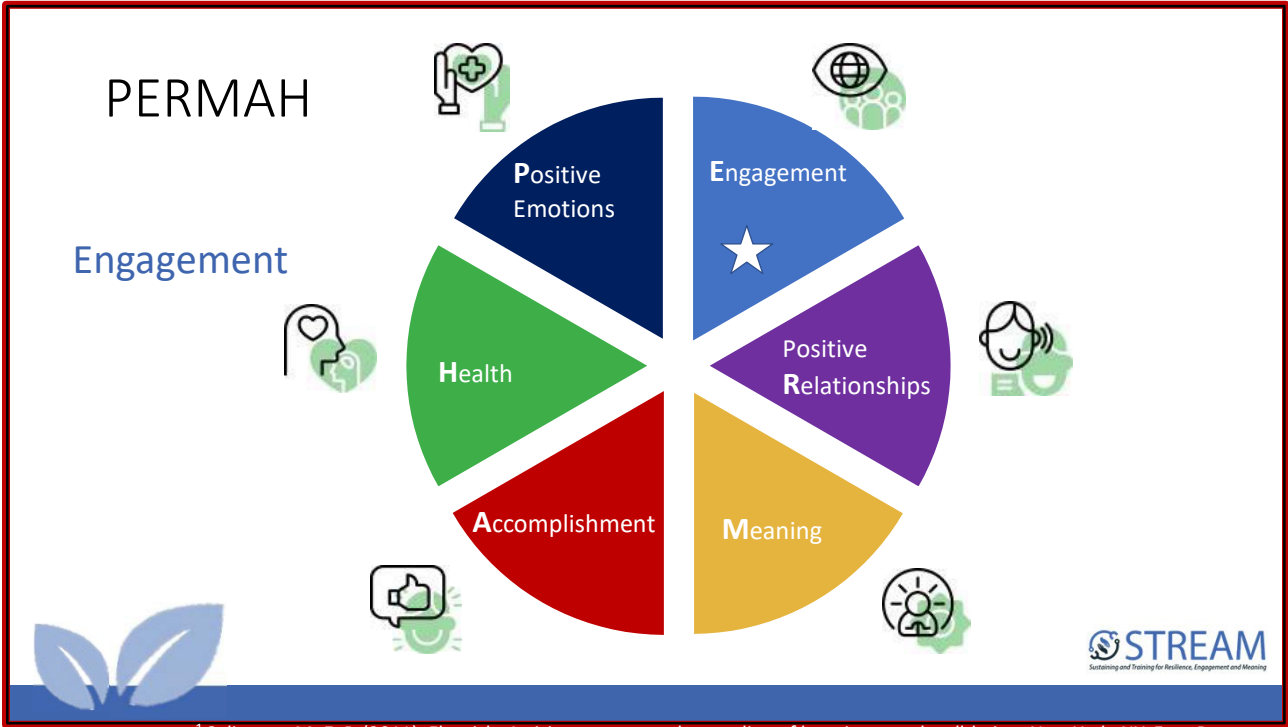
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likely to stay in current position

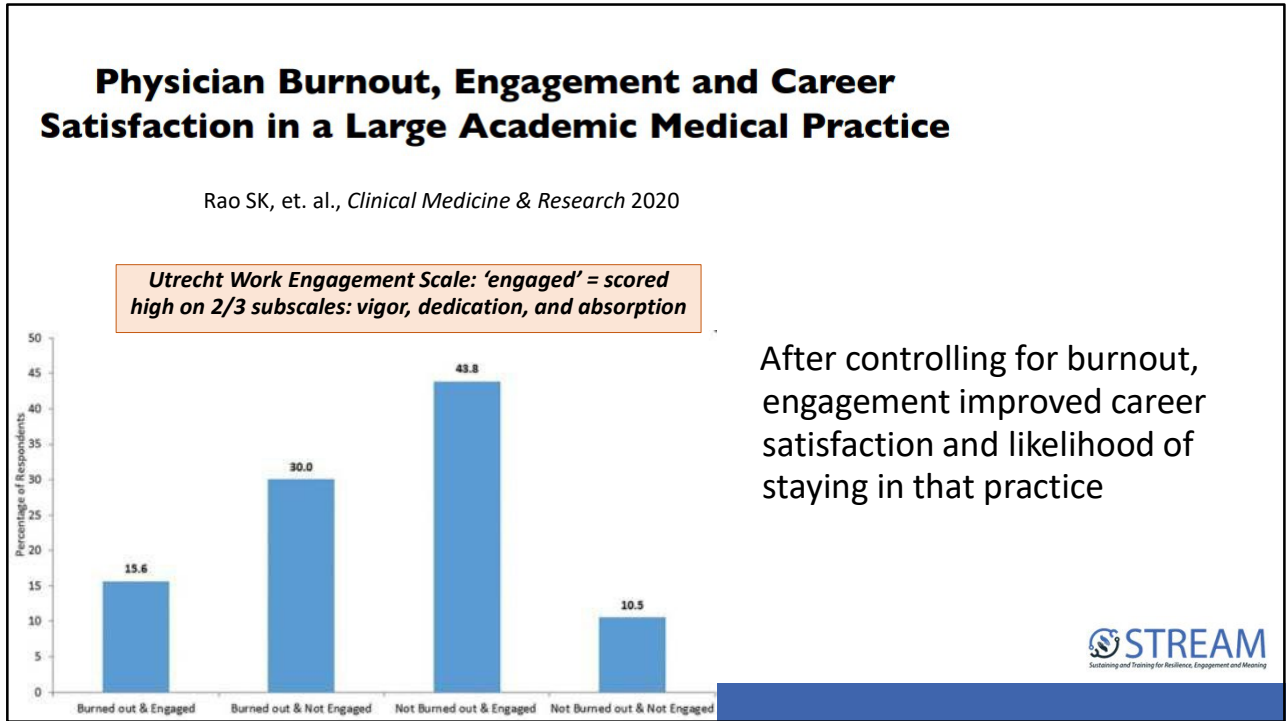
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activities

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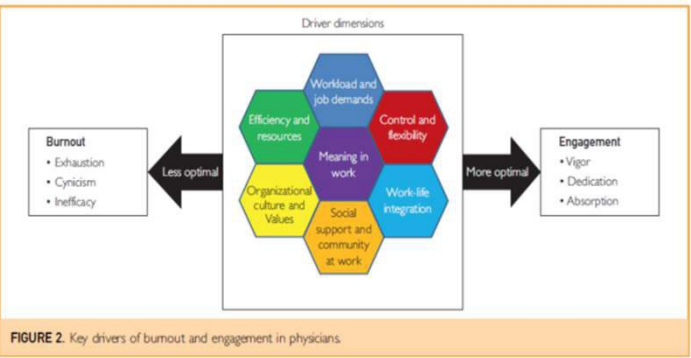
Improving the Work Environment

- Excess clerical burden, inefficient workflows, inadequate staffing among most **prominent** contributors to physician stress
- Studies have demonstrated physicians with high EHR task load have
 - ↑ Burnout
 - ↑ Intent to leave pracGce
 - ↓ Job saGsfacGon
- Scribes =>10-fold increase in physician satisfaction; no change patient satisfaction Gidwani. *Ann Fam Med* 2017



11

Moving Away from Engagement as Happenstance



SPECIAL ARTICLE

Executive Leadership and Physician Well-being: CrossMark
Nine Organizational Strategies to Promote Engagement and Reduce Burnout
Tait D. Shanafelt, MD, and John H. Noseworthy, MD, CEO

Mayo Clin Proc 2017

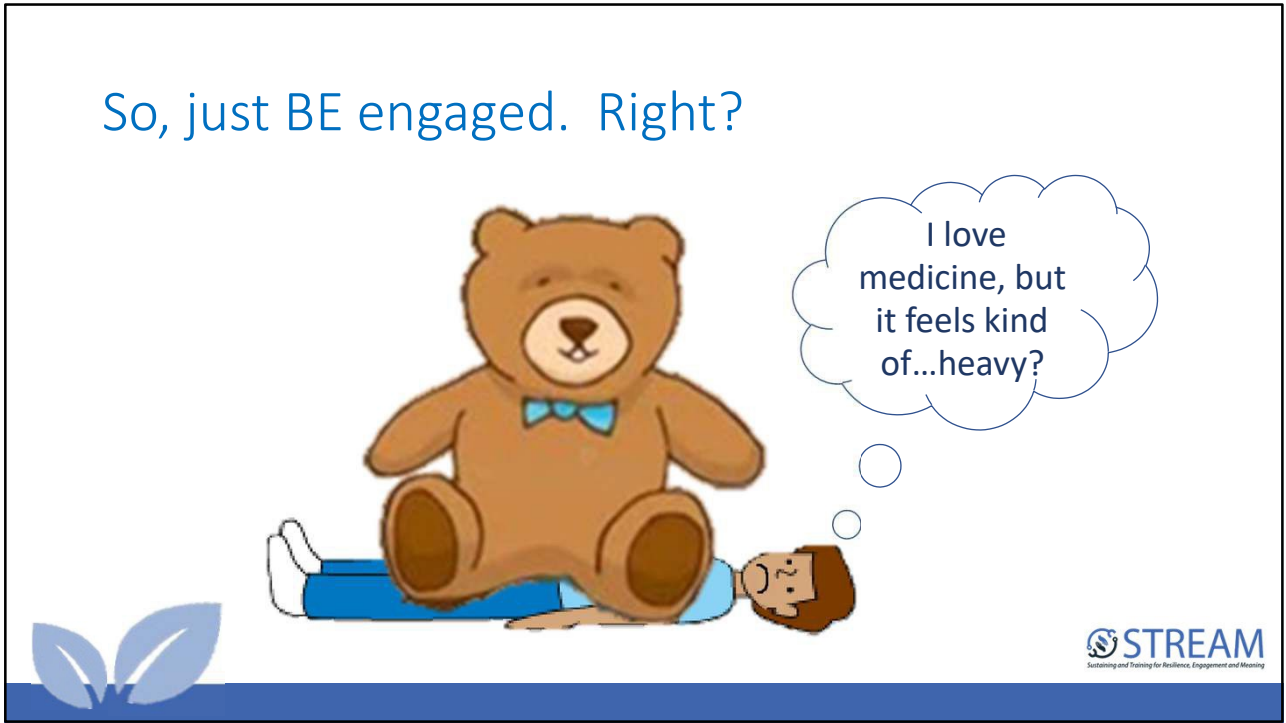
- **Engagement** (vigor, dedication, absorption in work) as antidote to **Burnout**
- Organizations and Leaders can implement effective interventions to promote engagement



12



13



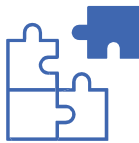
14

Typical Stressors for Physicians

- Inefficient EMR, too much time spent in documentation
- Too much secretarial work
- Lack of respect from patients
- Lack of respect from leadership
- Healthcare inequities
- Lack of job flexibility
- (relative) Low pay in pediatrics
- Idea of “checking boxes” (business of medicine)
- Personal responsibilities outside of work



15



SMALL GROUP ACTIVITY: What are your stressors?

- Break into groups of 2-4
- Compose a list of the top 5 stressors that contribute to your burnout



5-7 minutes



16

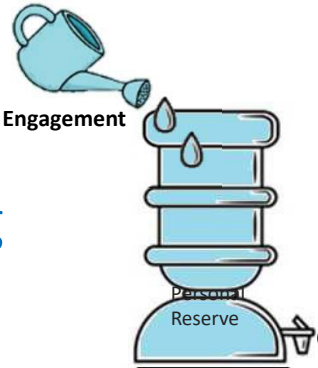
DEBRIEF

What is on your stressor list?



17



Flourishing



Personal Reserve

- Inefficient EMR
- Too much secretarial work
- Tons of time in documentation that is not high yield
- Healthcare inequities
- Personal responsibilities outside of work

- Knowing EMR doesn't matter to providing good patient care
- Difficulty finding what you need in the EMR



18



What now?

We know there are stressors.....you have identified plenty of them

Let’s explore ways address them



19



is too big (hairy, oppressive, etc) to fix!

We’re the stakeholders

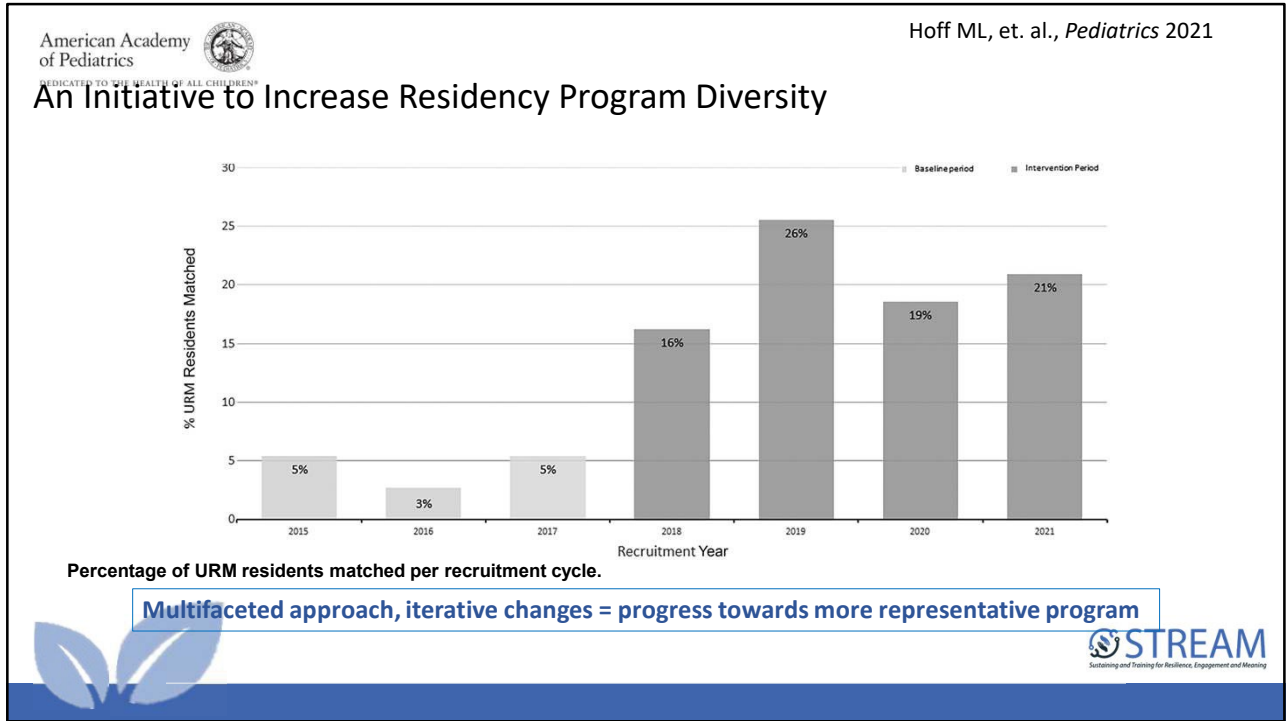
Medicine IS ours, and it SHOULD and CAN be a place and profession that works better for physicians



20



21



22



GROUP ACTIVITY: Other Examples of Engagement in Action

- **Bronchiolitis Clinical Pathway Design Group**
- **Inpatient Admission Optimization Task Force**
- **QI Project to Improve Vaccination Rates in Primary Care**
- **Departmental Mentorship Committee**
- **Volunteer to Trial New Scheduling Program for Faculty/Residents**

3 minutes



23

Keys to Success

1. Engage in something you care about
2. Engage with colleagues who care about the issue
 - Helpful to include those with differing perspectives
3. Enlist support/sponsorship of your boss
4. Start small AND meaningful



24


Engagement Practice

What:

To practice collaborating to improve workplace efficiency

Why:

To start to understand how it feels to be involved in the process of system change




25

Engagement Practice

Small Groups (Work on 1 case)

When you get into your group:

1. Assign a scribe
2. Review Worksheet
3. Choose a spokesperson
4. You have 12 minutes to review scenario and generate action plan (2 discrete plans, with associated steps)



26

Sample Case: Hitting RVU target

An important goal of your institutional leadership is to assist faculty to generate necessary clinical income. To receive the incentive plan, the division to meet/exceed the 75thile RVU target (prorated for clinical FTEs) for the entire group.

You are in a group of 16 faculty.

Generate action-oriented solutions for positive engagement in this issue



27

Sample Case: Hitting RVU target

Potential Actions:

1. lobby for no RVU targets (propose alternatives)
2. make EMR more capable of achieving appropriate RVU per encounter
3. hire a coder to accurately capture billing
4. hire scribes to permit faculty to maximize clinical pace
5. adjust assignments in group to increase group's chance to make >75% RVU targets
6. provide transparency to group about individual efforts through frequent feedback




28


5


Sample Case: Hitting RVU target

Consider 3 (or more) potential solutions to the issue presented. Use the “Step” boxes to consider the explicit steps or action items needed to accomplish the solution. Use the example below to guide you.

| Possible Solutions | On a scale of 1 (not at all invested) to 10 (very invested), how invested is my institution likely to be in this issue AND solution? | Step 1 | Step 2 | Step 3 |
|--------------------|--|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |



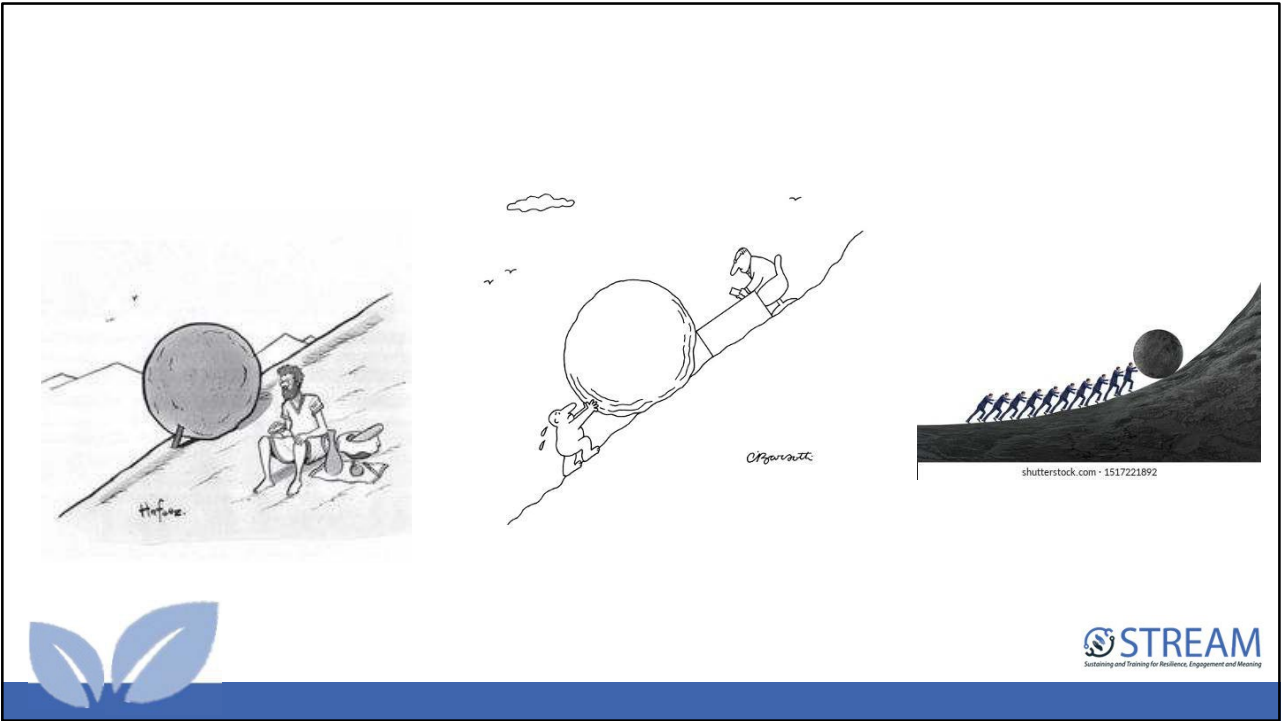




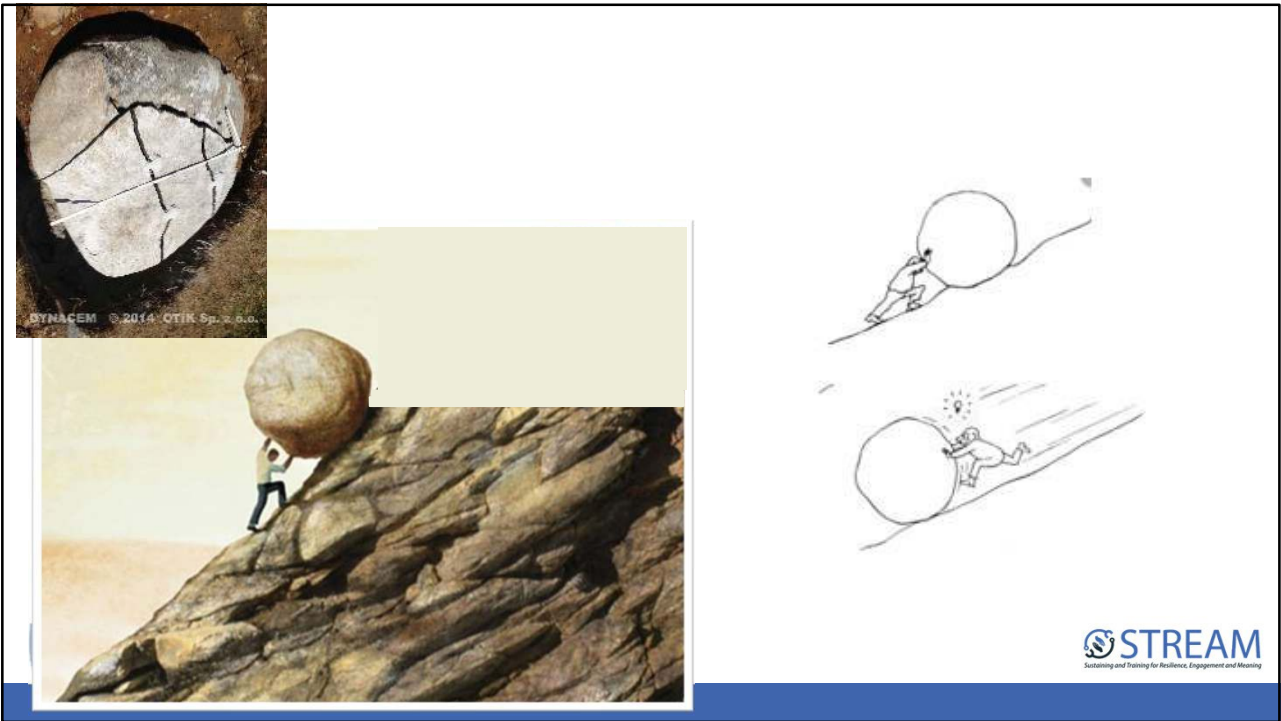
One Last Note



31



32



33



SMALL GROUP ACTIVITY: Engagement in Action

Small Groups of 2-4 (Work on 1 case)

1. Assign a scribe
2. Review Worksheet
3. Choose a spokesperson
4. Review the scenario and generate action plan (2 discrete plans, with associated steps)

Remember: Try to keep an open mind!

12 minutes



34

DEBRIEF

Let’s hear from YOU:

What solutions did you generate and how did it feel to work on these?





35

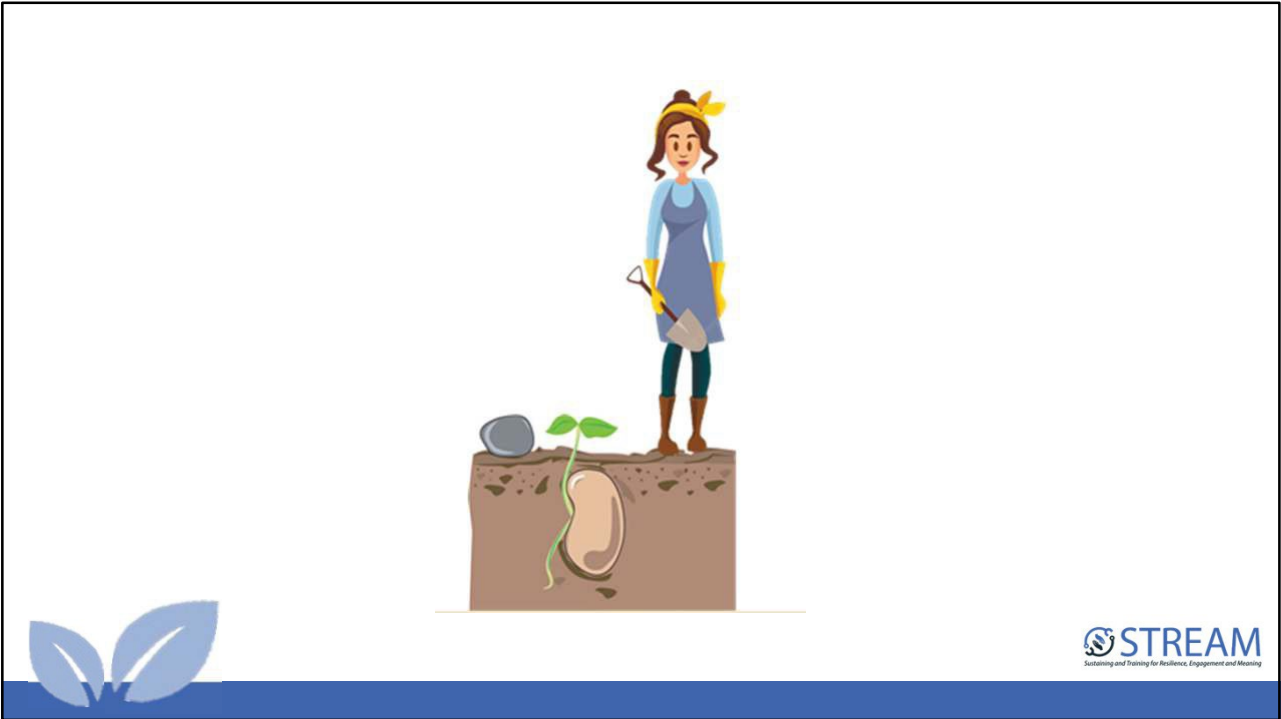




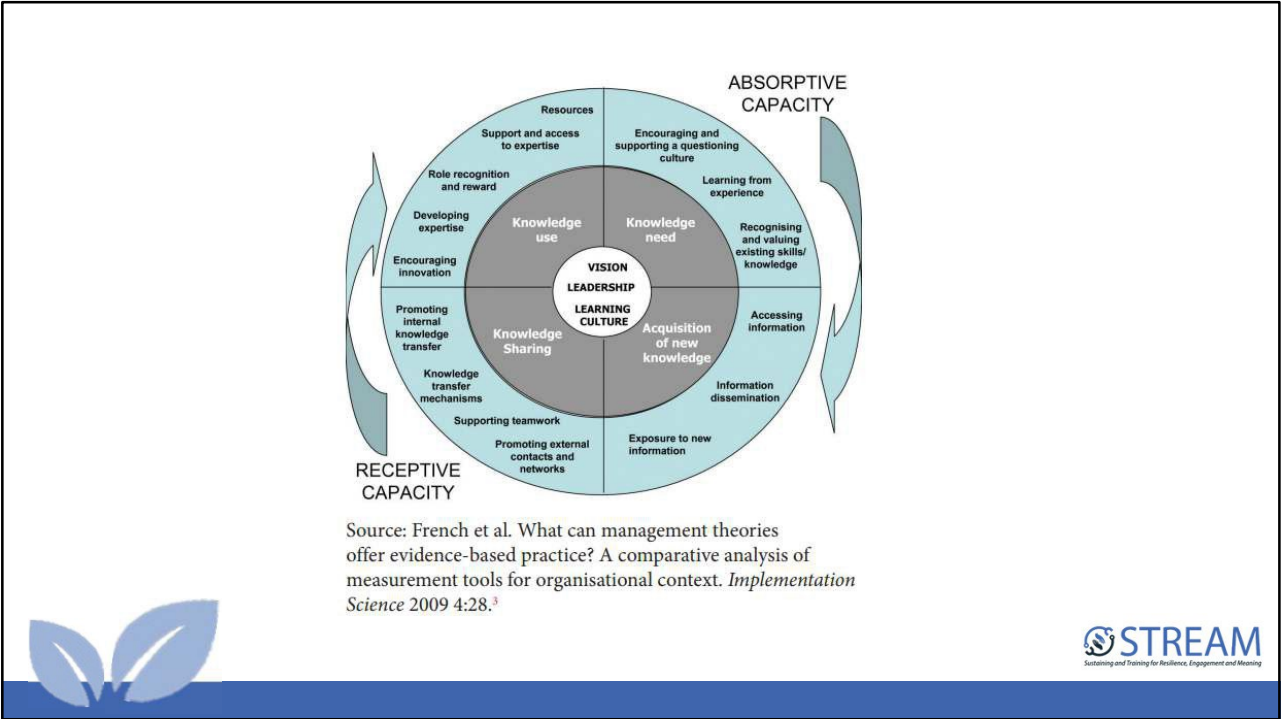
Context and Engagement



36



37



38



39

Exploring your own engagement ideas



• **PERSONAL REFLECTION:** Use the provided worksheet to identify

• An area for collaborating to improve your work

• A few colleagues who could join you in this work

• A potential sponsor for this project

Pair Share



40



PARTNER ACTIVITY: Personal Engagement

Personal reflection for 5 minutes

- An area for collaborating to improve your work
- A few colleagues who could join you in this work
- A potential sponsor for this project

Pair Share for 5-8 minutes





41

Keys to Success

1. Engage in something you care about
2. Engage with colleagues who care about the issue
 - Helpful to include those with differing perspectives
3. Enlist support/sponsorship of your boss
4. Start small AND meaningful



42





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- Physician burnout, resilience and wellness: personal and social constructs
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Reflecting on Joy

Diane Rawlins MA Mollie
Grow MD MPH Richard
Shugerman MD
Maneesh Batra MD MPH

1





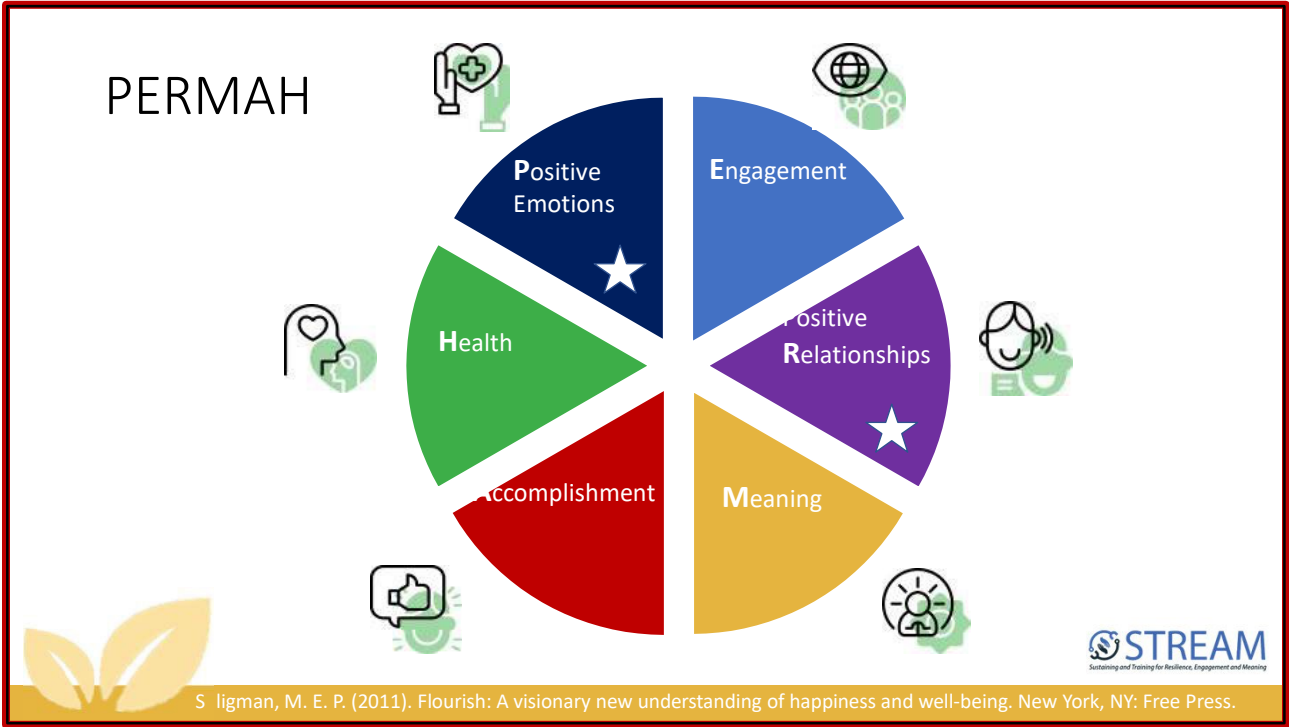
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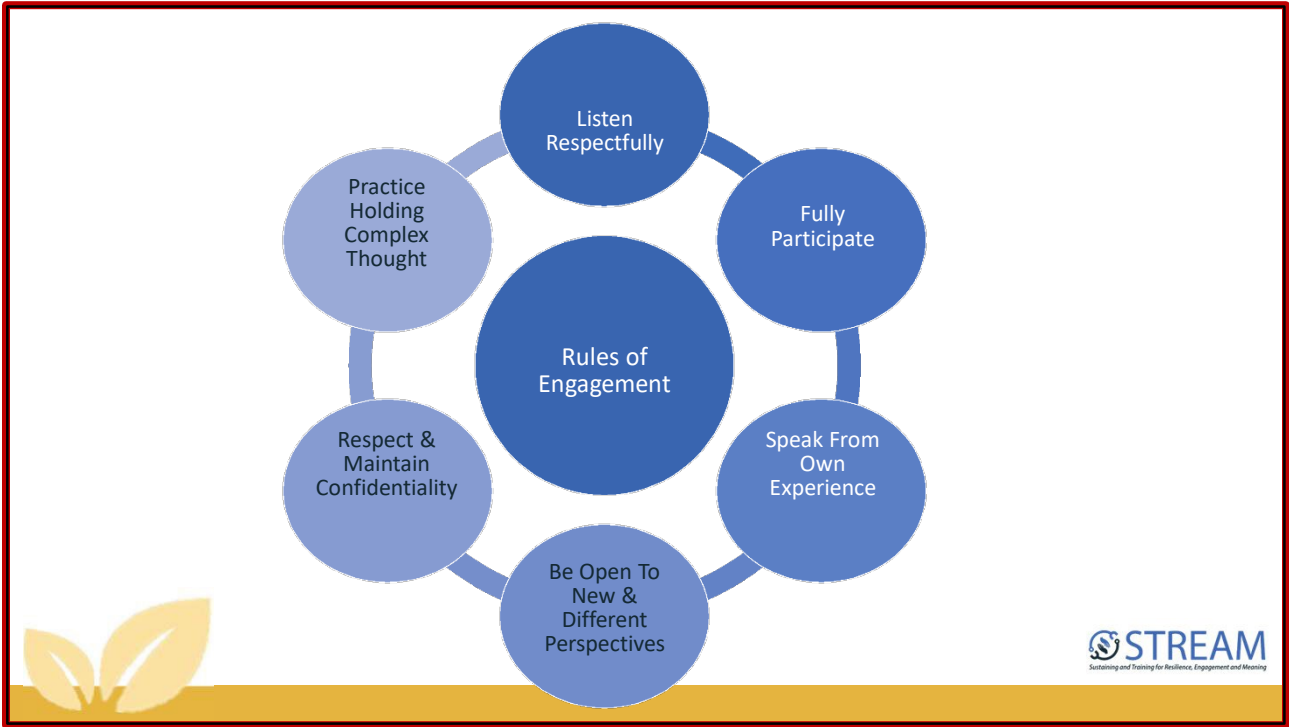
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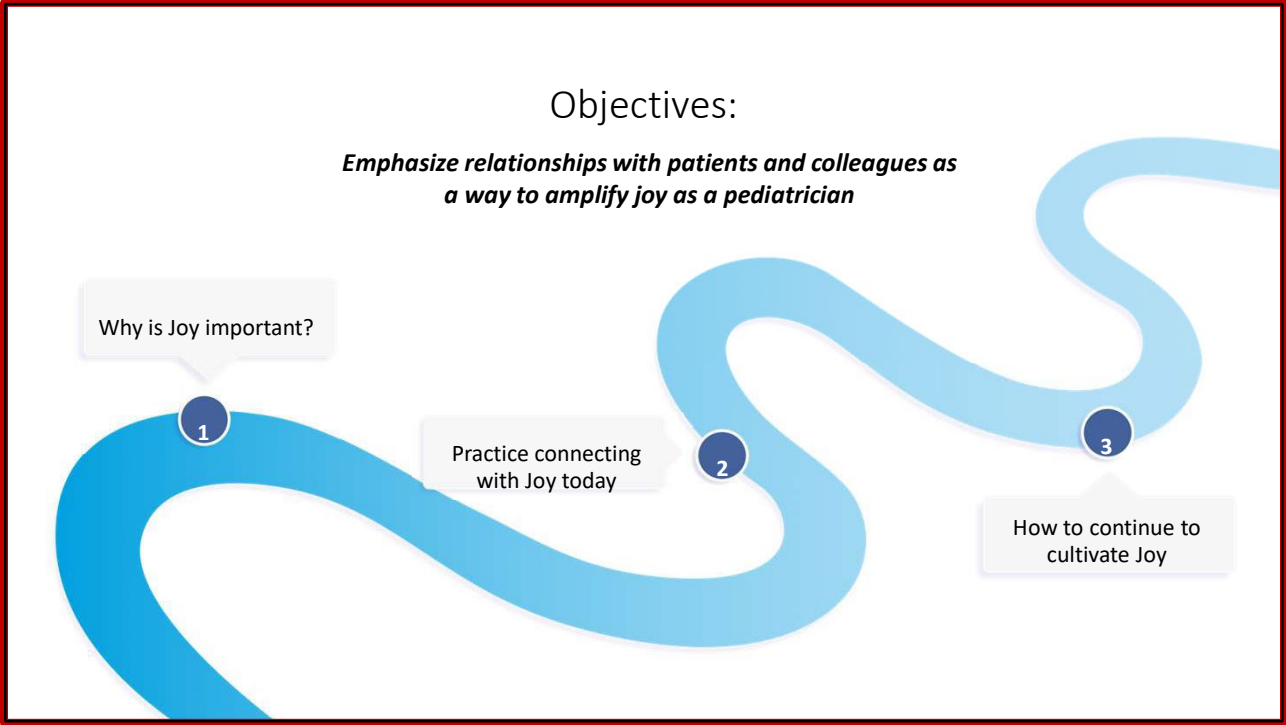
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5

Joy and Inclusion

- We actively seek to promote inclusion through our connections.
- We welcome all to fully participate and benefit from cultivating a sense of well-being in our professional work
- This concept should not be exclusive to those afforded particular privileges
- Including all identities in experiencing joy and meaning through our stories and reflections allows us to grow, and to celebrate and deepen our connections to our patients, colleagues and our profession



6



7

Invitation and welcome

“What if joy is not only entangled with pain, or suffering, or sorrow, but is also what emerges from how we care for each other through these things? What if joy, instead of refuge or relief from heartbreak, is what effloresces from us as we help each other carry our heartbreaks?”

-Ross Gay “Inciting Joy”

The book cover for "Inciting Joy" by Ross Gay. It features a portrait of Ross Gay on the left and the title "INCITING JOY" in large, bold, blue letters on the right, with "ESSAYS" written below it. The cover is decorated with pink and yellow flowers. Text on the cover includes "NEW YORK TIMES BESTSELLING AUTHOR OF THE BOOK OF DELICIOUS" and "ROSS GAY".

The STREAM logo, featuring a circular icon with a stylized 'S' and the word "STREAM" in blue, with the tagline "Sustaining and Training for Resilience, Engagement and Meaning" below it.

8



PARTNER ACTIVITY:
Reflect on a moment of positive connection with someone recently

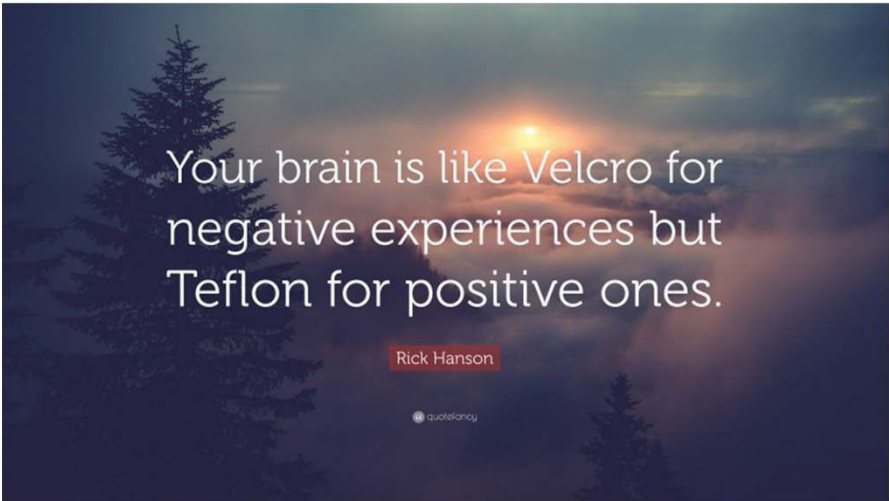
- Think about who you shared that moment with and share what made it *joyful*.

4 minutes




Positive impact of Joy







Your brain is like Velcro for negative experiences but Teflon for positive ones.

Rick Hanson

 quoteoftheday



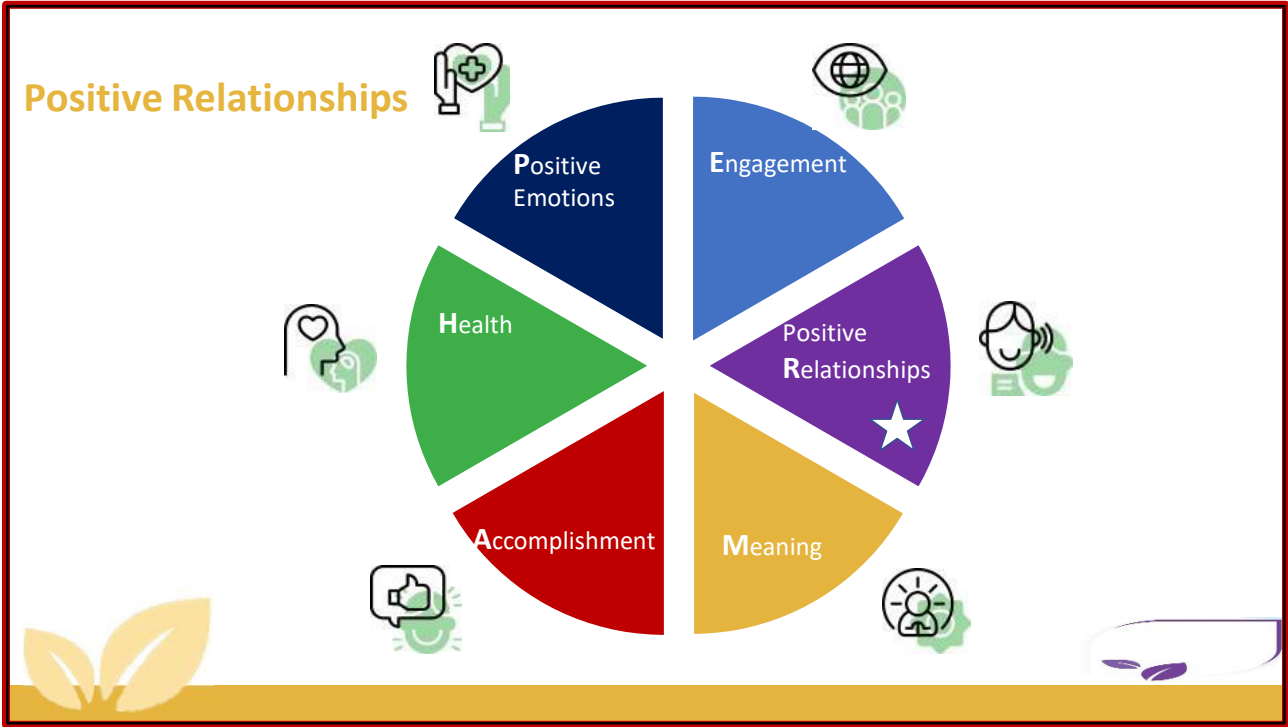
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Neurons that fire together...
wire together...



12



13

Relationships – meaning & joy

- Our patients and their families
- Our colleagues

14

Patient relationships



- “Strong relationships with patients also benefit the health of physicians.”
– Dugdale LS, 2017
- Within pediatrics, our calling to serve children and the connections with their joy and resilience drew many of us to our profession
- In our best connections, we create moments of mutual delight



15

Colleague relationships

- “Interpersonal relationships may serve a buffering role against stress by providing social support. Multiple studies have found that positive support from colleagues lowers the risk of burnout among clinicians.”
 - National Academy of Sciences. “Taking Action Against Clinician Burnout”, 2019
- Our brains’ mirror neurons - we experience “emotional contagion.”
- “Feeling better after interacting with happy individuals” was associated with lower risk of burnout among physicians.
 - Pettitta et al, 2017



16



PARTNER ACTIVITY: Reflection on connecting with moments of joy

- Reflect on a meaningful connection with a patient or colleague
 - What were the joy moments of “mutual delight” you shared
 - Why was it meaningful to you
 - What allowed you to experience that connection at that time (e.g., setting, your frame of mind)
- **Reflect and write for 5 minutes**
- **Pair-share for 10 minutes (5 min for each person)**



17

DEBRIEF

- Any moments of mutual delight you’d like to share briefly?
- Any reflections on what allowed you to experience those moments?
- Surprises or insights?

Each of our stories unique and important.



18



19

Cultivating Joy in our work through relationships: *keeping this going*

- How do we connect with joy in relationships day-to-day?
- How do we recognize those joy moments
 - Make ourselves a little more Velcro for those!

At the bottom left of the slide is a yellow leaf icon. At the bottom right is a small purple seed icon.

20

Everyday strategies

- Meetings – build in time for personal sharing, check-ins
- Junior mentor time before department faculty meetings
- Peer mentor groups / writing groups
- Engaging with each other in improving systems
- Stairwell / hallway conversations
- Celebrations - Birthdays and Retirements
- Expressing gratitude for each other



21



GROUP ACTIVITY: Making Space for Joy

- How do we overcome our natural negativity bias and be more Velcro to moments?
- When you have a joyful experience how do you help yourself absorb, acknowledge, and/or metabolize that joy?
- What can we do collectively to intentionally make space to recognize and celebrate joy moments?



22



23

Wrap Up – Joy and Meaning

- Knowing our own story and each other's stories
- Recognize how relationships nourish us
- Practice makes progress!
 - Curiosity
 - Vulnerability
 - Gratitude

"There is no hope of joy except in human relations"
-Antoine de Saint Exupery

The slide features a decorative yellow leaf graphic in the bottom left corner and a small, stylized purple flower graphic in the bottom right corner. The entire content is enclosed within a black rectangular border.

24

Turning to One Another

Margaret Wheatley, 2002

There is no power greater than a community discovering what it cares about.

Ask “What’s possible?” not “What’s wrong?” Keep asking.

Notice what you care about.

Assume that many others share your dreams.

Be brave enough to start a conversation that matters.

Talk to people you know. Talk to
people you don’t know. Talk to
people you never talk to.

Be intrigued by the differences you hear.

Expect to be surprised. Treasure
curiosity more than certainty.



Invite in everybody who cares to work on what’s possible.

Acknowledge that everyone is an expert about something.

Know that creative solutions come from new connections.



Remember, you don’t fear people whose story you know.


Real listening always brings people closer together. Trust
that meaningful conversations can change your world. Rely
on human goodness. Stay together.



Thank You!


- INSERT QR CODE





Joy and Meaning

Diane Rawlins MA Mollie
Grow MD MPH Richard
Shugerman MD
Maneesh Batra MD MPH



1



Connecting with Joy and
Meaning in Medicine



Beyond Surviving:
Plan to Thrive



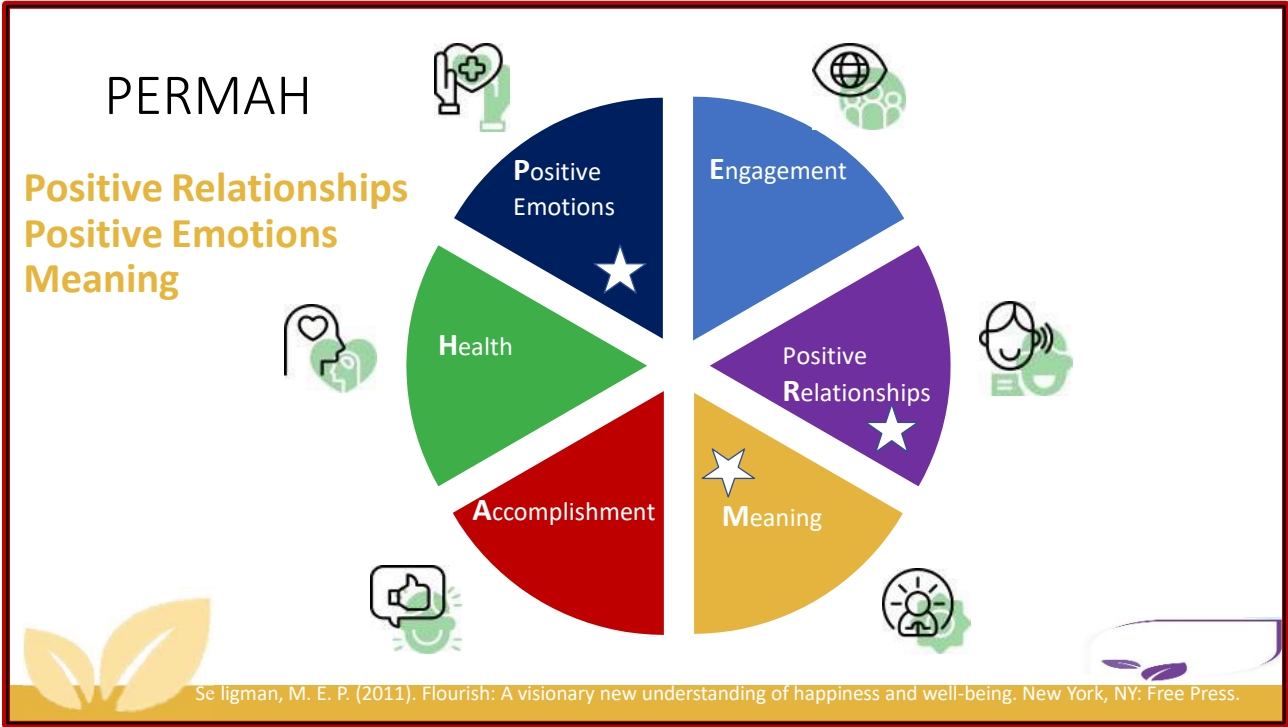
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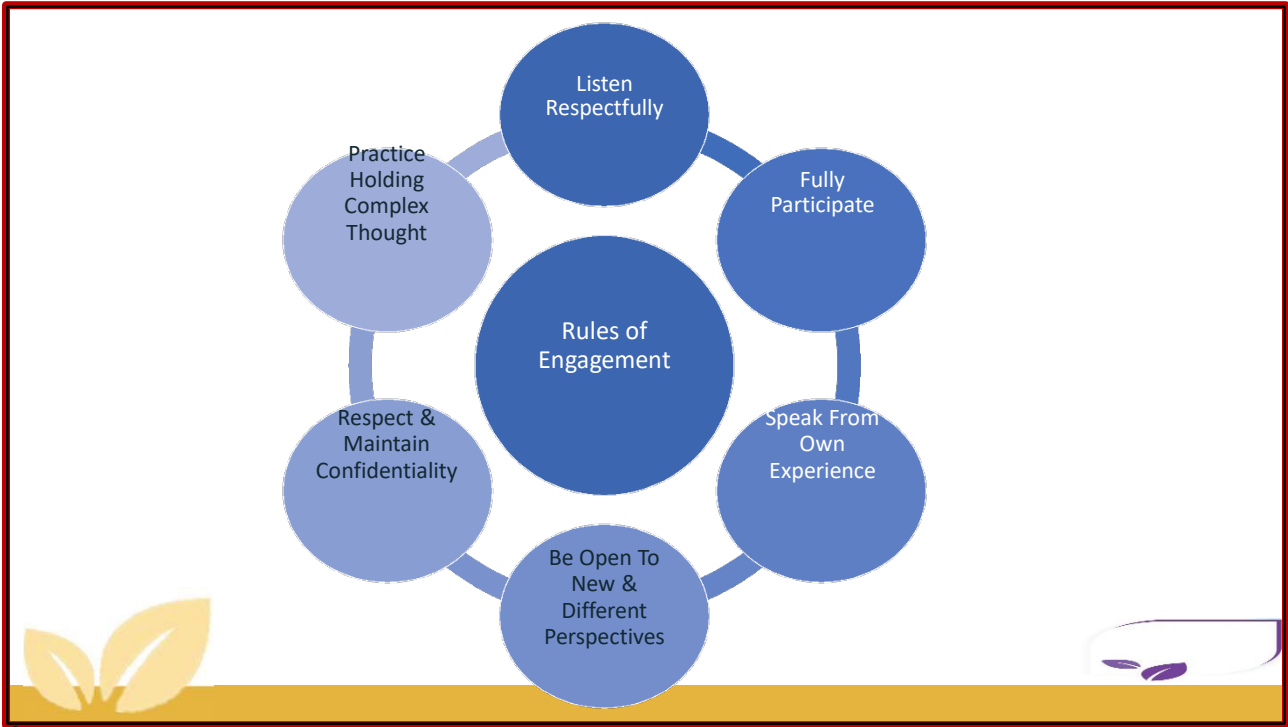
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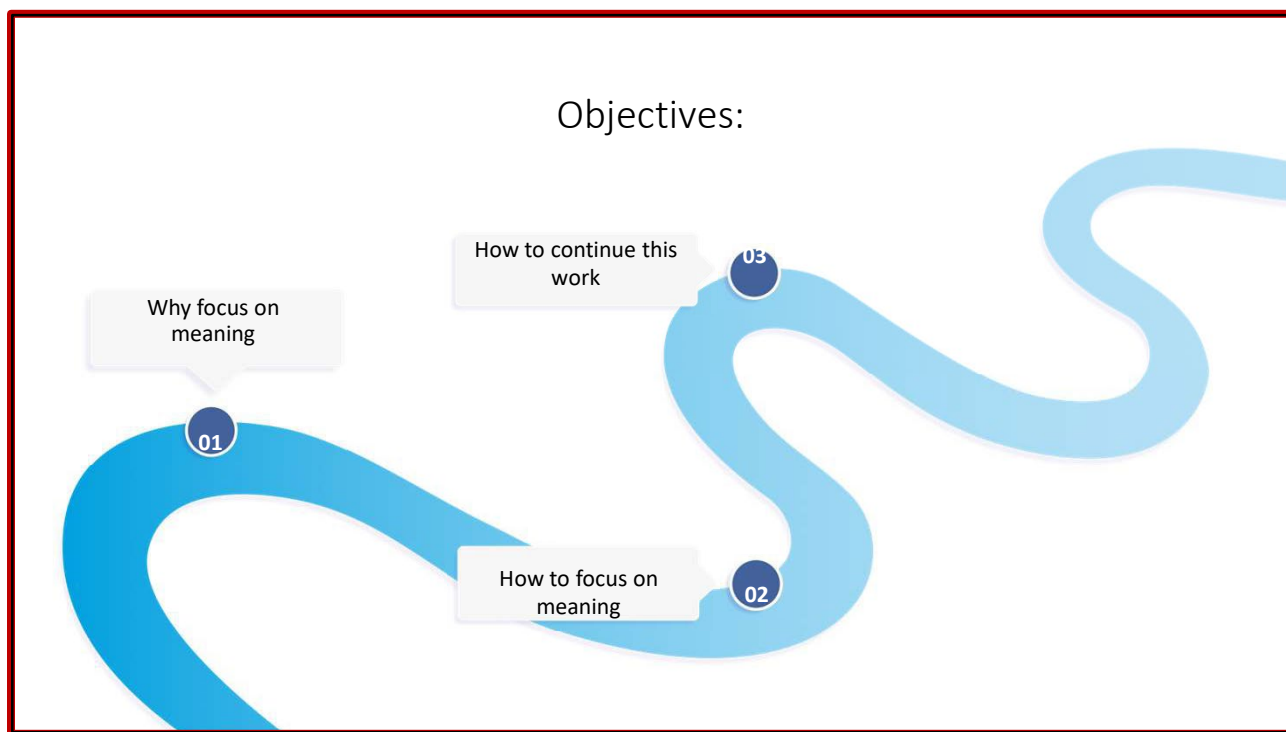
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5

Meaning and Inclusion

- We actively seek to promote inclusion through our connections.
- We welcome all to fully participate and benefit from cultivating a sense of well-being in our professional work
- This concept should not be exclusive to those afforded particular privileges
- Including all identities in experiencing joy and meaning through our stories and reflections allows us to grow, and to celebrate and deepen our connections to our patients, colleagues and our profession





6



PARTNER ACTIVITY: Everyday Meaning

Share with a partner where you find meaning in your life and work

3 minutes



7



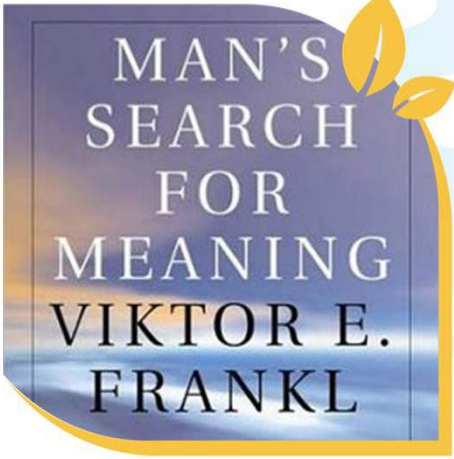

STREAM
Sustaining and Training for Resilience, Engagement and Meaning

Why focus on meaning?






8

Why focus on meaning?

- The search for a life's meaning is the central human motivational force
 - “The lesson one could learn in Auschwitz and in other concentration camps in the final analysis was: Those who were oriented toward a meaning to be fulfilled by them in the future were most likely to survive.” Victor Frankl
- Participation in meaningful activities correlated with reduced risk of burnout

9

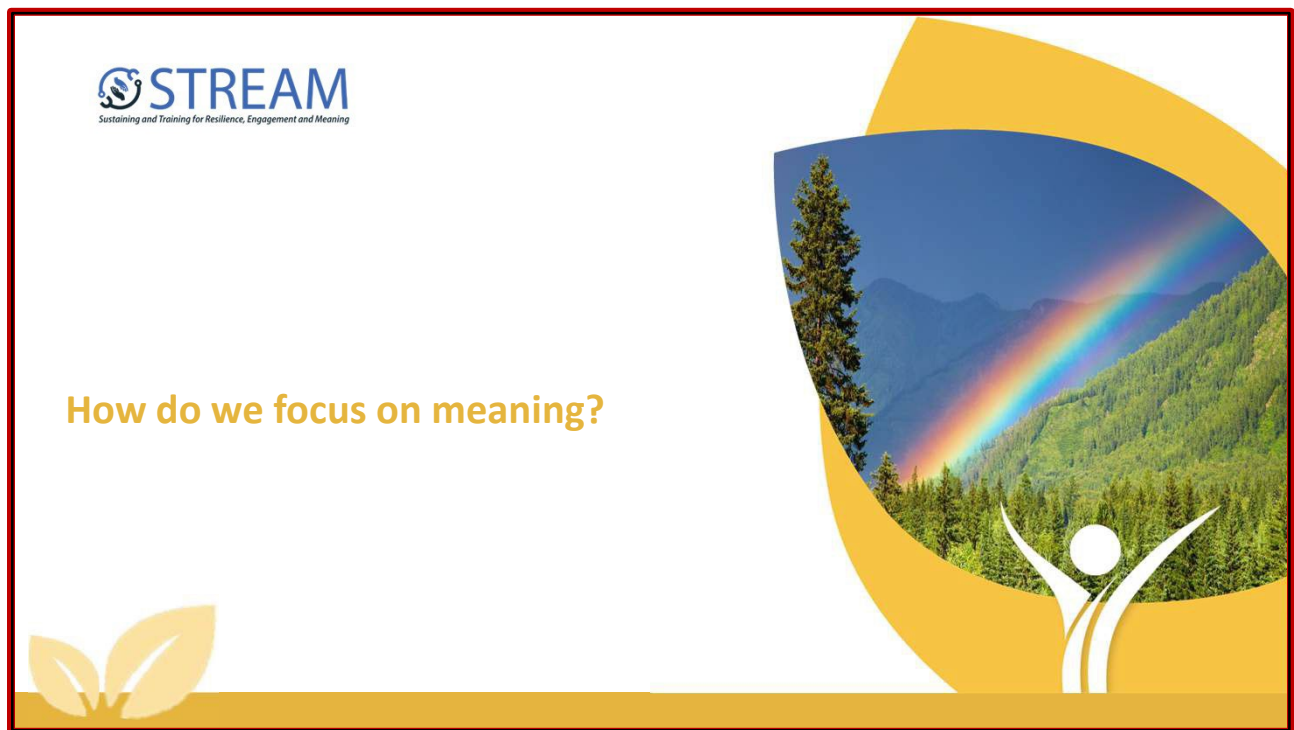


Benefits of knowing our purpose

- Having a sense of purpose is a strong predictor of health and well-being
 - Greater longevity
 - Lower rates of heart attack and stroke
 - Slower pace of cognitive decline
- Having a sense of purpose helps us hold steady through times of stress and challenge

Burrow, Anthony L., and Patrick L. Hill, eds. *The Ecology of Purposeful Living Across the Lifespan*. Cham, Switzerland: Springer Nature, 2020.
<https://hiddenbrain.org/podcast/cultivating-your-purpose/>

10



11

How to focus on meaning and purpose

- Google “meaning in medicine”
 - The Healer’s Art – Rachel Naomi Remen
 - Finding Meaning in Medicine – Baylor College of Medicine
 - Pediatric Residents' Perspectives on Humanism – Stanford University
 - “Thriving in Scrubs” – Podcast
- Virtually all re-connect physicians with meaning through stories
 - That’s where the gold is.



12

Question

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.



13



What is reflective practice?



14

What is reflective Practice

- Reflective practice is a continuous learning process where individuals recall their own actions as a source of personal development and professional improvement
- Reflective practice asserts that experience alone does not necessarily lead to learning, but that it is reflecting on what one has experienced that leads to learning and personal growth



15



Why Reflective Practice?

- To understand why and how we got here
- To reconnect with our path and purpose
- To strengthen our spirit
- To make meaning through our stories



16



PARTNER ACTIVITY: Reflect/Pair Share

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.

Take a few minutes to remember one of these moments.

What happened? How did the story unfold?

What did you learn about what has meaning for you?

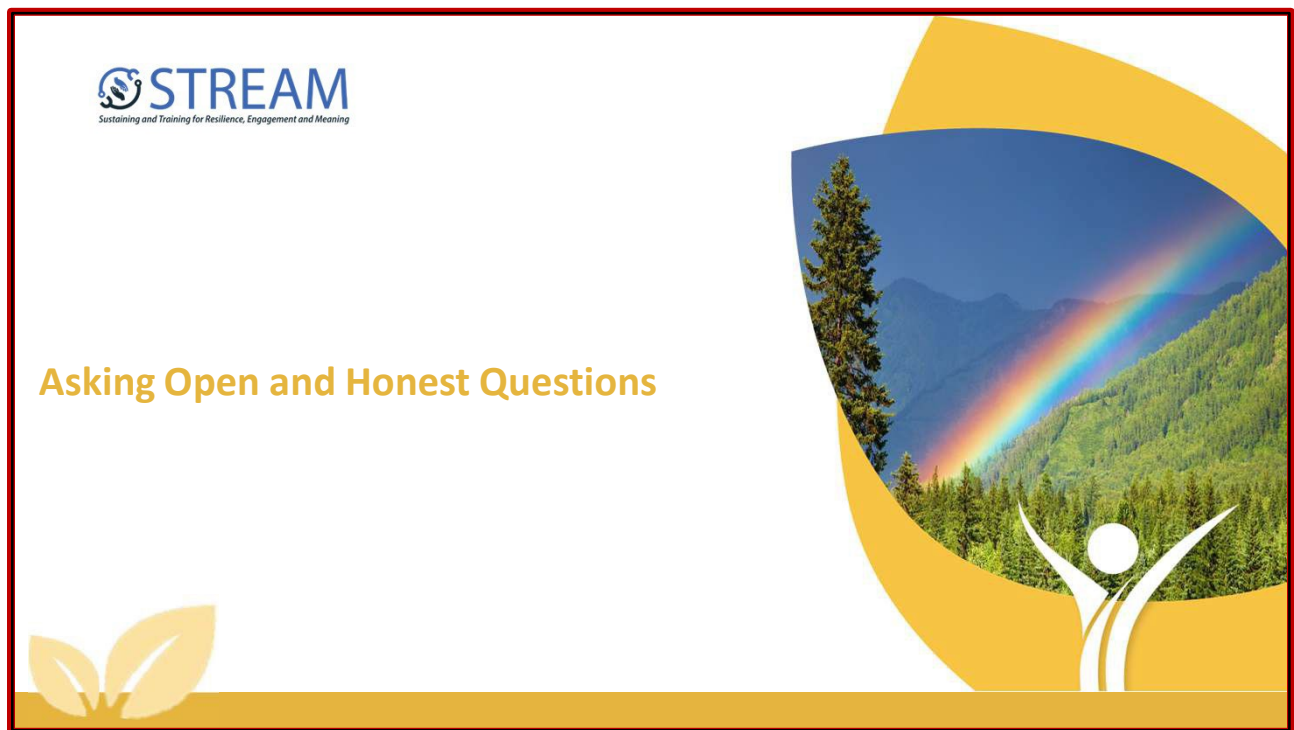
5 minutes: Write a few notes alone, **10 minutes:** Pair/Share (5 min ea)

17

Large group debrief

- Please write a few words in the chat about how it felt to share and listen to each others' stories.
- What did you learn about what has meaning for you?
- Any thoughts on ways you can stay connected to what is meaningful to you as you go about your day?



18




19

Go beneath the surface

- Ask open and honest questions
- We do this in patient history
 - Gain valuable information
 - In this context, it will invite people deeper into their own thoughts
- Something you don't know the answer to





20



PARTNER ACTIVITY: Asking Open Questions

- Ask your partner 1 open question to help them go deeper into their story of meaning

3 minutes



21



STREAM
Sustaining and Training for Resilience, Engagement and Meaning

How to continue this work





22

Opportunities for further practice

- On your own:
 - Try journaling
 - Write about a meaningful moment at the end of each day or week
- With colleagues:
 - Schedule a walking meeting with a trusted colleague once a month to talk about these issues
 - Start a quarterly journal club in your division to engage others who share this interest





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Thank You!

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Reflecting on Joy

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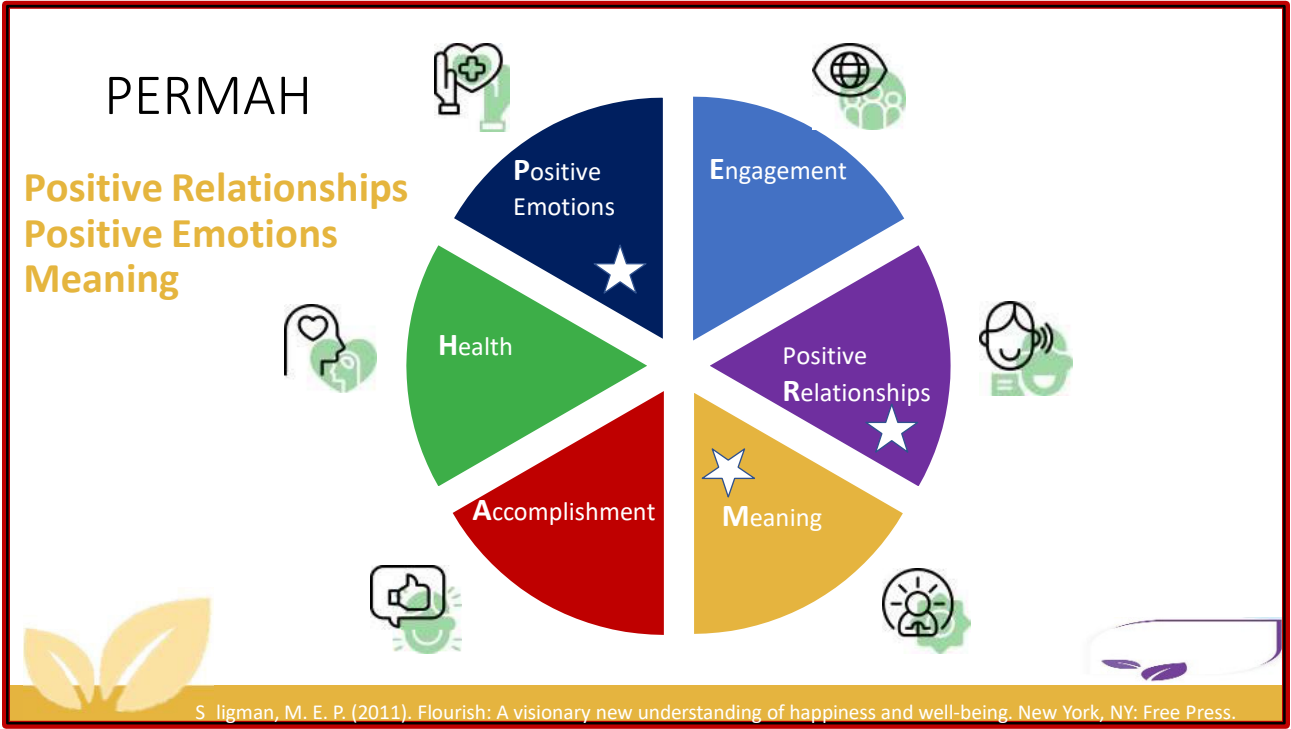
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Beyond Surviving:
Plan to Thrive

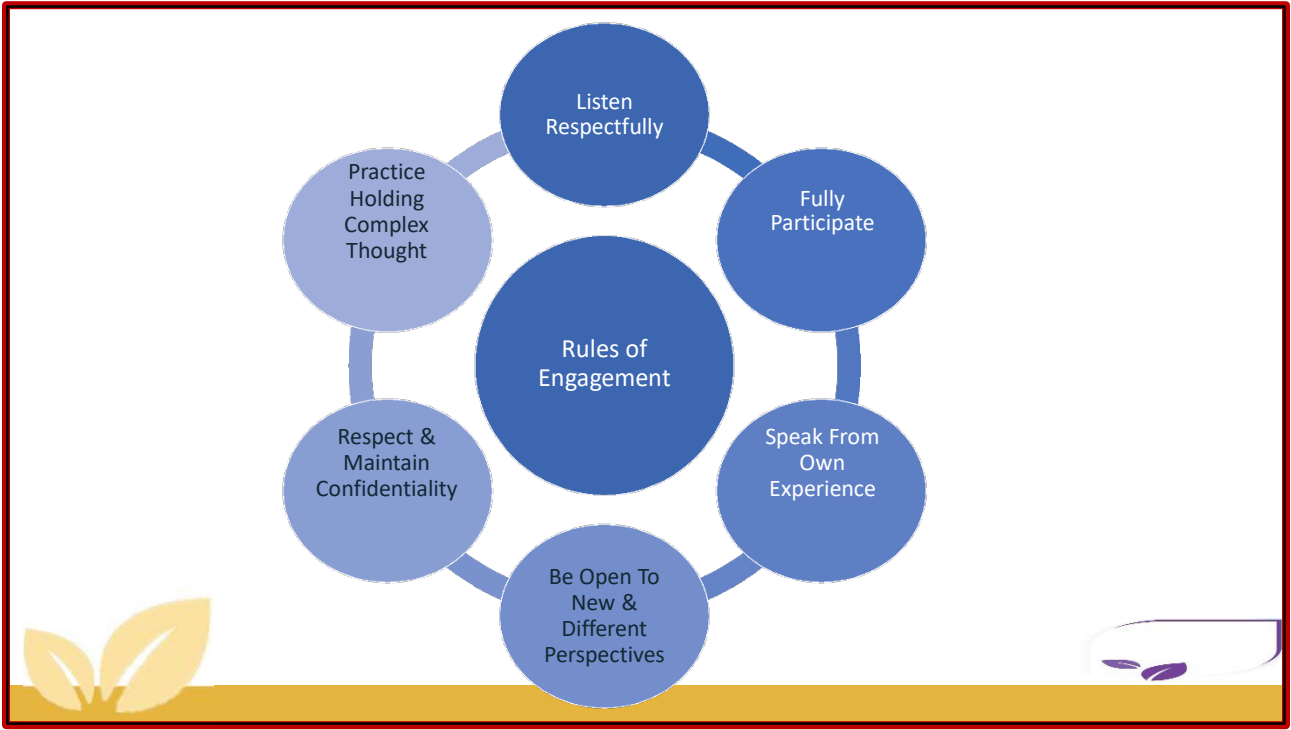
Building Resilience:
Practical Approaches for
Growth

Collaborating to
Improve Your Work

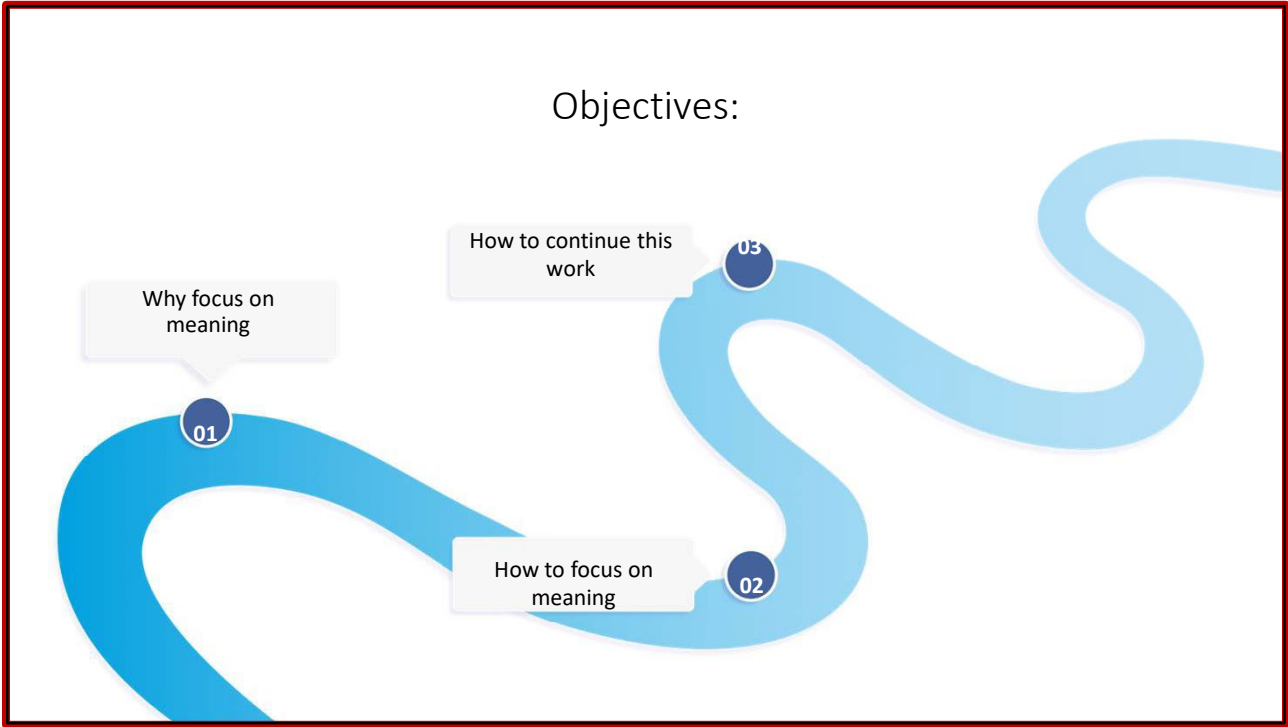
2



3



4




5

Meaning and Inclusion

- We actively seek to promote inclusion through our connections.
- We welcome all to fully participate and benefit from cultivating a sense of well-being in our professional work
- This concept should not be exclusive to those afforded particular privileges
- Including all identities in experiencing joy and meaning through our stories and reflections allows us to grow, and to celebrate and deepen our connections to our patients, colleagues and our profession

At the bottom left, there is a stylized yellow plant with two leaves. At the bottom right, there is a stylized purple leaf.


6




PARTNER ACTIVITY: Everyday Meaning

Share with a partner where you find meaning in your life and work

3 minutes





7


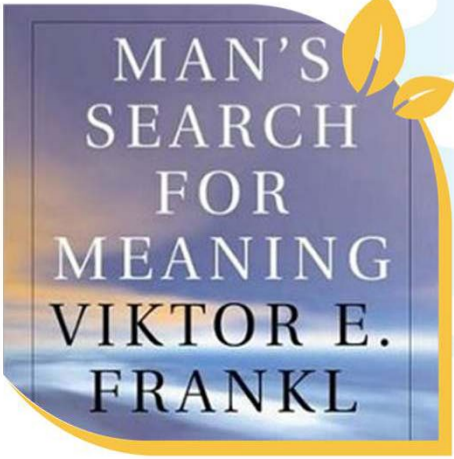


Why focus on meaning?






8



Why focus on meaning?

- The search for a life's meaning is the central human motivational force
 - “The lesson one could learn in Auschwitz and in other concentration camps in the final analysis was: Those who were oriented toward a meaning to be fulfilled by them in the future were most likely to survive.” Victor Frankl
- Participation in meaningful activities correlated with reduced risk of burnout

9

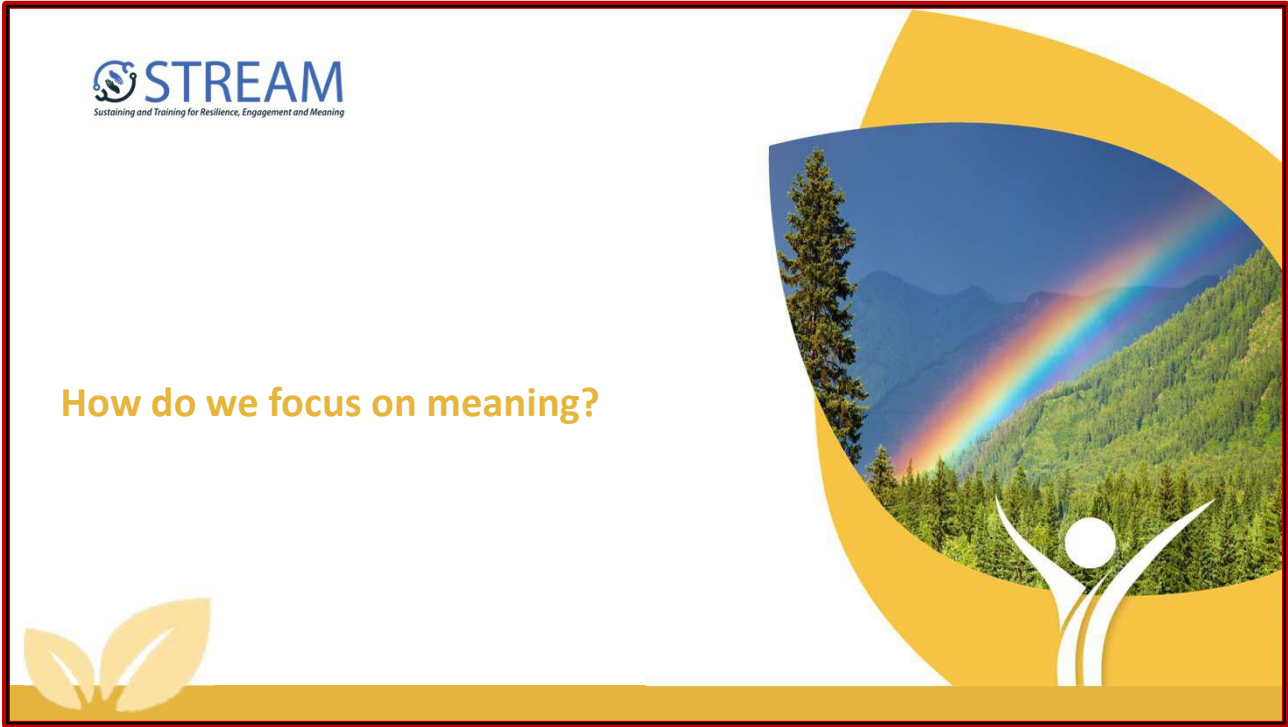


Benefits of knowing our purpose

- Having a sense of purpose is a strong predictor of health and well-being
 - Greater longevity
 - Lower rates of heart attack and stroke
 - Slower pace of cognitive decline
- Having a sense of purpose helps us hold steady through times of stress and challenge


Burrow, Anthony L., and Patrick L. Hill, eds. *The Ecology of Purposeful Living Across the Lifespan*. Cham, Switzerland: Springer Nature, 2020.
<https://hiddenbrain.org/podcast/cultivating-your-purpose/>

10





11

How to focus on meaning and purpose



- Google “meaning in medicine”
 - The Healer’s Art – Rachel Naomi Remen
 - Finding Meaning in Medicine – Baylor College of Medicine
 - Pediatric Residents' Perspectives on Humanism – Stanford University
 - “Thriving in Scrubs” – Podcast
- Virtually all re-connect physicians with meaning through stories
 - That’s where the gold is.



12

Question

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.



13



What is reflective practice?



14

What is reflective Practice

- Reflective practice is a continuous learning process where individuals recall their own actions as a source of personal development and professional improvement
- Reflective practice asserts that experience alone does not necessarily lead to learning, but that it is reflecting on what one has experienced that leads to learning and personal growth



15



Why Reflective Practice?

- To understand why and how we got here
- To reconnect with our path and purpose
- To strengthen our spirit
- To make meaning through our stories



16



PARTNER ACTIVITY: Reflect/Pair Share

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.

Take a few minutes to remember one of these moments.

What happened? How did the story unfold?

What did you learn about what has meaning for you?

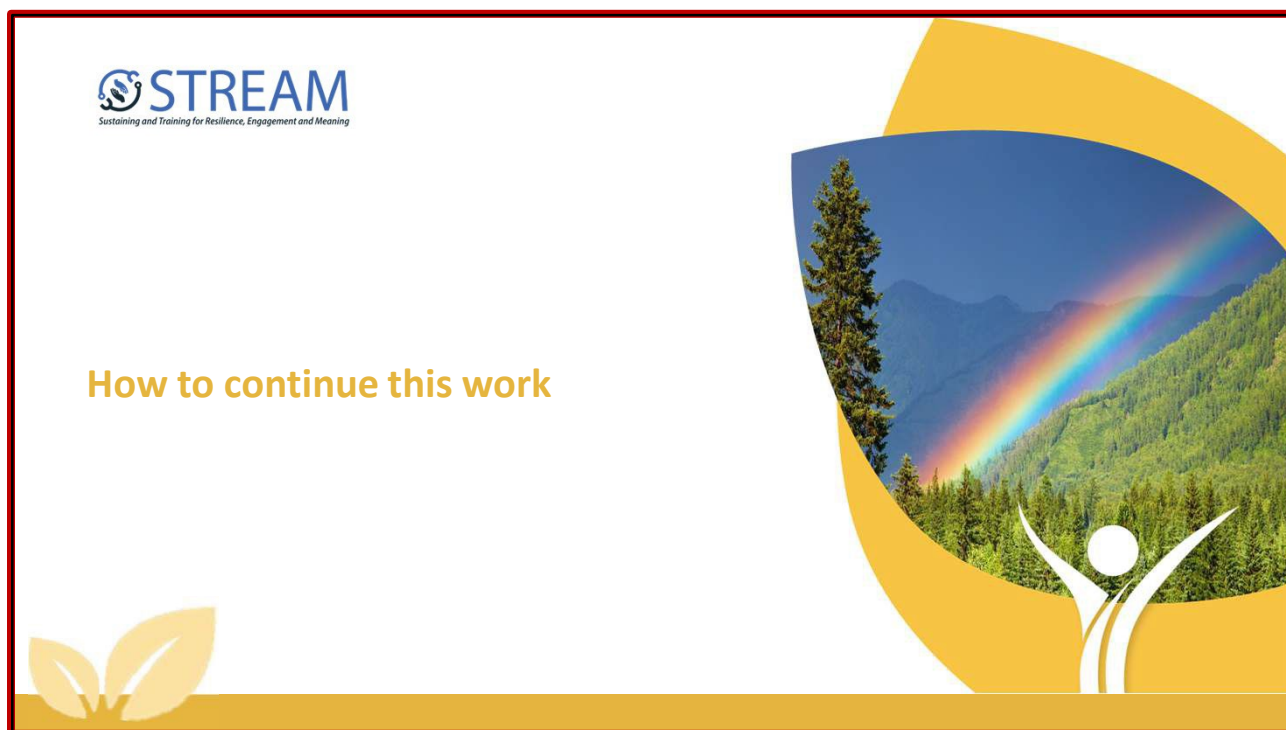
5 minutes: Write a few notes alone, **10 minutes:** Pair/Share (5 min ea)

17

Large group debrief

- Please write a few words in the chat about how it felt to share and listen to each others' stories.
- What did you learn about what has meaning for you?
- Any thoughts on ways you can stay connected to what is meaningful to you as you go about your day?



18



19

Opportunities for further practice

- On your own:
 - Try journaling
 - Write about a meaningful moment at the end of each day or week
- With colleagues:
 - Schedule a walking meeting with a trusted colleague once a month to talk about these issues
 - Start a quarterly journal club in your division to engage others who share this interest



20



21

Invitation and welcome

“What if joy is not only entangled with pain, or suffering, or sorrow, but is also what emerges from how we care for each other through these things? What if joy, instead of refuge or relief from heartbreak, is what effloresces from us as we help each other carry our heartbreaks?”

-Ross Gay “Inciting Joy”

22



PARTNER ACTIVITY:

Reflect on a moment of positive connection with someone recently

- Think about who you shared that moment with and share what made it *joyful*.

4 minutes



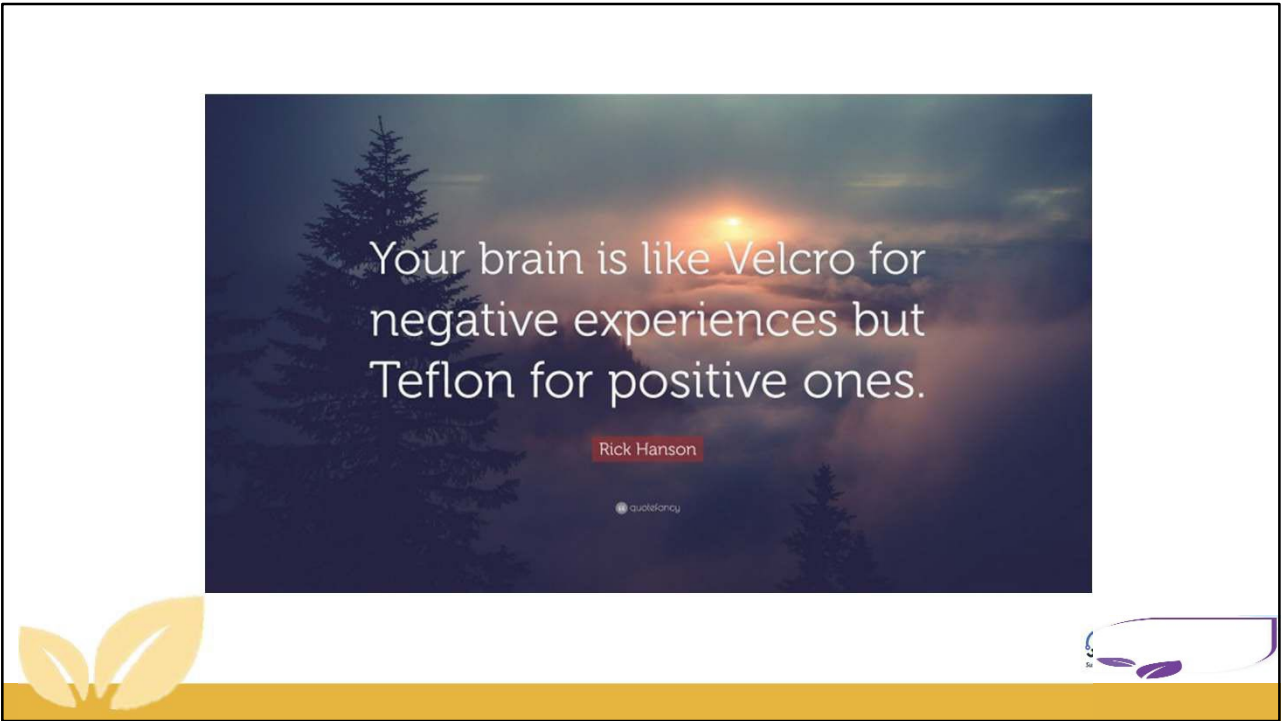
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Positive impact of Joy



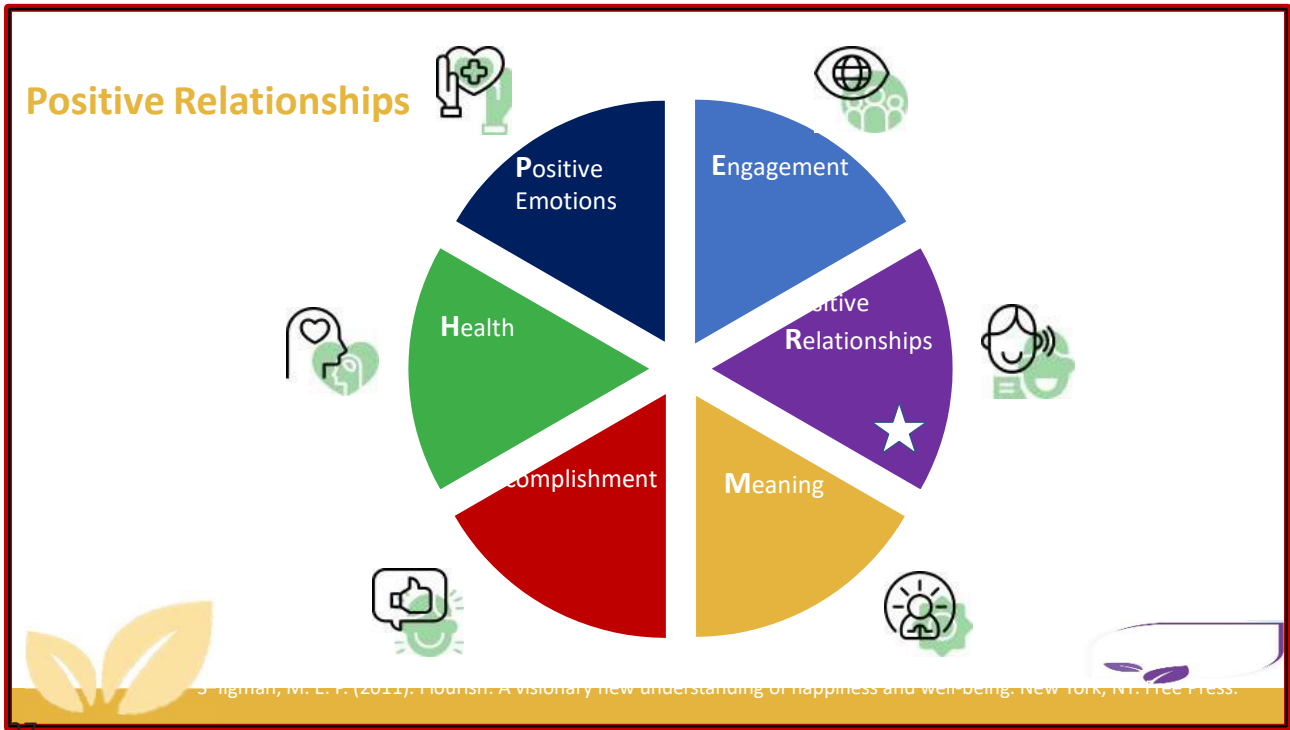
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25



26



27

Relationships – meaning & joy

- Our patients and their families
- Our colleagues

28

Patient relationships



- “Strong relationships with patients also benefit the health of physicians.”
– Dugdale LS, 2017
- Within pediatrics, our calling to serve children and the connections with their joy and resilience drew many of us to our profession
- In our best connections, we create moments of mutual delight



29

Colleague relationships

- “Interpersonal relationships may serve a buffering role against stress by providing social support. Multiple studies have found that positive support from colleagues lowers the risk of burnout among clinicians.”
 - National Academy of Sciences. “Taking Action Against Clinician Burnout”, 2019
- Our brains’ mirror neurons - we experience “emotional contagion.”
- “Feeling better after interacting with happy individuals” was associated with lower risk of burnout among physicians.
 - Pettitta et al, 2017



30



INDIVIDUAL ACTIVITY: Reflection on connecting with moments of joy

- Reflect on a meaningful connection with a patient or colleague
 - What were the joy moments of “mutual delight” you shared
 - Why was it meaningful to you
 - What allowed you to experience that connection at that time (e.g., setting, your frame of mind)
- **Reflect and write for 5 minutes**



31

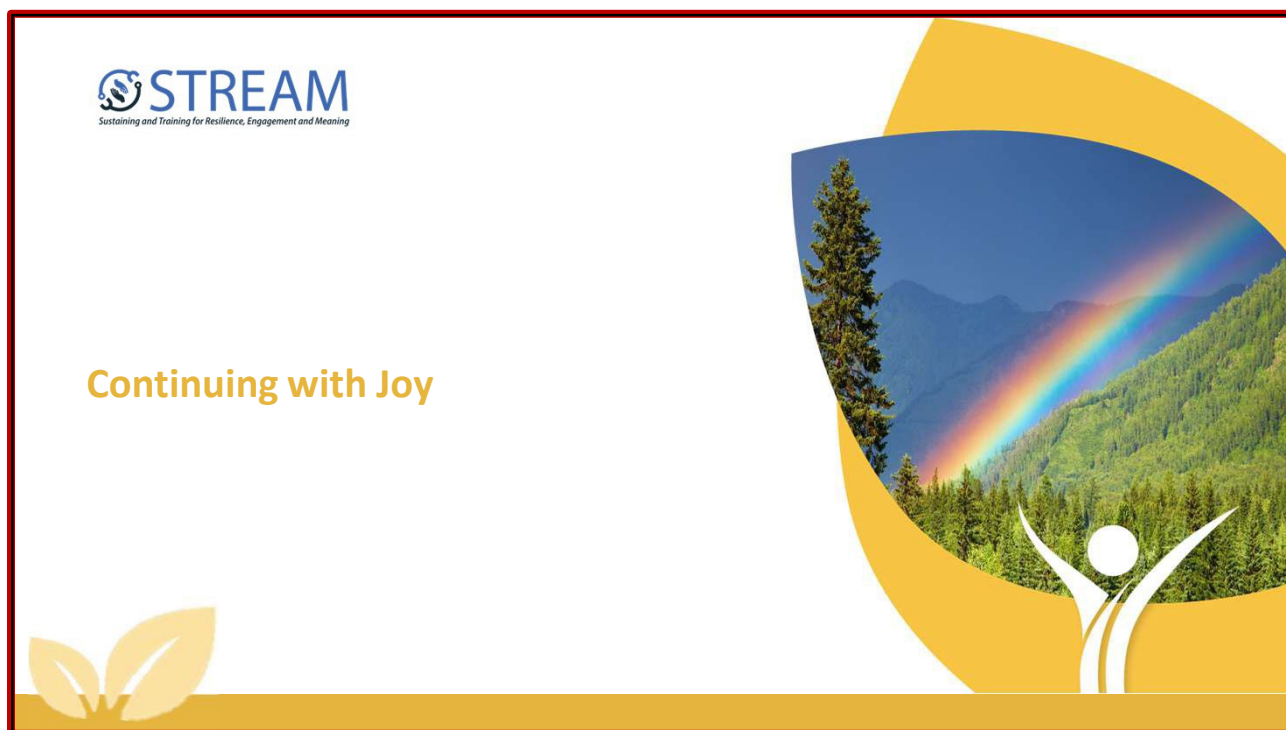
DEBRIEF

- Any moments of mutual delight you’d like to share briefly?
- Any reflections on what allowed you to experience those moments?
- Surprises or insights?

Each of our stories unique and important.



32



33

Cultivating Joy in our work through relationships: *keeping this going*

- How do we connect with joy in relationships day-to-day?
- How do we recognize those joy moments
 - Make ourselves a little more Velcro for those!



34

Everyday strategies

- Meetings – build in time for personal sharing, check-ins
- Junior mentor time before department faculty meetings
- Peer mentor groups / writing groups
- Engaging with each other in improving systems
- Stairwell / hallway conversations
- Celebrations - Birthdays and Retirements
- Expressing gratitude for each other



GROUP ACTIVITY: Making Space for Joy

- How do we overcome our natural negativity bias and be more Velcro to moments?
- When you have a joyful experience how do you help yourself absorb, acknowledge, and/or metabolize that joy?
- What can we do collectively to intentionally make space to recognize and celebrate joy moments?







37

Wrap Up – Joy and Meaning

- Knowing our own story and each other's stories
- Recognize how relationships nourish us
- Practice makes progress!
 - Curiosity
 - Vulnerability
 - Gratitude

"There is no hope of joy except in human relations"
-Antoine de Saint Exupery



38

Turning to One Another

Margaret Wheatley, 2002

There is no power greater than a community discovering what it cares about.

Ask “What’s possible?” not “What’s wrong?” Keep asking.

Notice what you care about.

Assume that many others share your dreams.

Be brave enough to start a conversation that matters.

Talk to people you know. Talk to
people you don’t know. Talk to
people you never talk to.

Be intrigued by the differences you hear.

Expect to be surprised. Treasure
curiosity more than certainty.



Invite in everybody who cares to work on what’s possible.

Acknowledge that everyone is an expert about something.

Know that creative solutions come from new connections.



Remember, you don’t fear people whose story you know.

Real listening always brings people closer together. Trust
that meaningful conversations can change your world. Rely
on human goodness. Stay together.



Thank You!

- INSERT QR CODE





Well-Being (for 60 and 90 minute)

Practice Session for Break Out Room-

Instructions: Quickly determine roles. If 3 in break out room, one to assume role of **CONCERNED COLLEAGUE**, another of **POTENTIALLY STRUGGLING COLLEAGUE** and 3rd of **OBSERVER**. If 2 in break out room, then assume roles as **CONCERNED COLLEAGUE** and **POTENTIALLY STRUGGLING COLLEAGUE**.

PLEASE ONLY READ YOUR ROLE BELOW. YOU WILL HAVE A TOTAL OF 7 MINUTES TO PARTICIPATE IN THE ROLE AND THEN DEBRIEF. YOU WILL BE GIVEN A 2 MINUTE WARNING THROUGH THE BANNER MESSAGING WHEN YOU SHOULD HAVE STARTED THE DEBRIEFING PROCESS.

CONCERNED COLLEAGUE

The goal of this role play is to express support, to practice active listening skills and assess if your colleague could benefit from mental health support/treatment.

You have always found your colleague to have a positive attitude, and be engaging. Over the past 2 weeks you have noticed that they seem to become frustrated more easily, have a more negative attitude towards staff and parents, and to spend more time alone.

Today on rounds when a parent expressed frustration to the team about how long the work up was taking for their child, your colleague walked out of the room saying, "I give up, nothing is good enough even though you try your best. I've had it." You are concerned that they may be struggling and want to reach out and offer support and determine if there may be a more serious mental health concern going on.

You have invited him/her for coffee and are now meeting with him/her.

Here are some pointers from the Mental Health as a Vital Sign presentation:

Coffee chat conversation prompts:

"I'm concerned because I noticed... and I'm here to support you."

"I'd like to learn more about what you've been experiencing in order to be a supportive colleague to you."

"When you say ____, it makes me wonder if you've had thoughts about ending your life."

Remember:

- You will not make someone suicidal by asking about suicidal thoughts.

- You might miss an opportunity to save someone's life by not asking.

If you meet with some resistance or minimization. Perhaps remind your colleague that you are reaching out because you care about them, NOT because they are not performing well, and you mean this to be a safe, judgment-free zone.

Another approach is to share if you've received mental health support or treatment in the past to imply that it's a sign of strength not weakness to get help, and that mental health concerns are important to address.

POTENTIALLY STRUGGLING COLLEAGUE

You have usually enjoyed your work as a pediatrician or pediatric resident, and are known to, have a positive attitude and to enjoy spending time with colleagues. 2 weeks ago your mother who had been diagnosed with breast cancer earlier this year and is receiving chemotherapy is currently in the hospital with pneumonia. She is in a different state and while your father and sibling are there, you feel conflicted because you are quite close to her and want to be there too. You haven't shared this information with anyone at work.

You have noticed that over the past 2 weeks you are a bit shorter tempered and haven't wanted to socialize with your colleagues. Today at the end of rounds, the mother of one of your patients expressed frustration with you and the team as it was taking longer than she had expected to have the work of her child. You walked out of the room stating, "I give up, nothing is good enough even though you try your best. I've had it." You are struggling to keep it all together, having trouble sleeping and not feeling yourself.

One of your colleagues has now asked you to take a coffee break. You agree although all you want to do is get your work done.

- If he/she begins by asking you how you are, state you are fine and no worries. You are somewhat concerned that he/she is meeting with you because you aren't doing your job effectively.
- If he/she gives more specific examples of why they are worried, be open to sharing some of your stressors, e.g. about your mom, or the changes you've noticed in your sleep, irritability etc. And be open to what they suggest to you.

OBSERVER:

Your role is to observe the encounter and jot down observations. At the end of the encounter, ask the CONCERNED COLLEAGUE what they thought went well, what were the challenges, then ask the POTENTIALLY STRUGGLING COLLEAGUE the same questions. Then end by sharing your observations/insights.



Mental Health as a Vital Sign Well-Being Plan



1) Self-reflect and identify your individual signals of distress

- Examples: irritability, temper flares, withdrawal or isolation from others, anxiety, depression, sleep changes, Others?
WHAT ARE YOURS?

2) Design your well-being plan

- a) Strategies when you note increasing signals of distress

- b) Strategies for everyday to optimize and maintain mental health

3) Who can you identify as your Accountability Buddy?



Engagement 90-Minute

For your case:

Step 1: Choose a scribe

Step 2: Choose a spokesperson

Step 3: Consider 2 (or more) potential solutions to the issue presented. Use the “Step” boxes to consider the explicit steps or action items needed to accomplish the solution. Use the example below to guide you.

Step 4: Be prepared to share with the larger group!

Example Case: Hitting your RVU target

An important goal of your institutional leadership is to assist faculty to generate necessary clinical income. To receive the incentive plan, the division to meet/exceed the 75thile RVU target (prorated for clinical FTEs) for the entire group.

You are in a group of 16 faculty.

Generate action-oriented solutions for positive engagement in this issue

Possible solutions: lobby for no RVU targets; make EMR more capable of achieving appropriate RVU per encounter; hire a coder to accurately capture billing; hire scribes to permit faculty to maximize clinical pace; adjust assignments inside group; provide transparency to group about individual efforts for frequent feedback/reminder

| Possible Solutions | <i>On a scale of 1 (not invested at all) to 10 (very invested), how invested is my institution likely to be in this issue AND solution?</i> | Step 1 | Step 2 | Step 3 |
|--------------------------|---|---|--|---|
| Lobby for no RVU targets | | Develop a “no RVU targets” advocacy group | Research how faculty at comparator institutions are assisted to achieve necessary RVUs | Propose several options to leadership after defining preferences of faculty group |

Engagement, Case 1: Late Day Admissions

The afternoons on the inpatient wards are increasingly busy, with many nursing calls, patient issues, and an additional stressor of frequent late admissions from subspecialty clinics. Progress notes must be completed each day, the midst of these other demands. This adversely affects evening handovers, and residents are consistently staying late to finish tasks and notes at the end of the workday. Faculty seeing patients in clinic, residents on the inpatient service, and nursing staff are frequently stressed by these admissions, and worry about errors due to so many conflicting responsibilities.

- You are in an institution of ~1000 trainees and faculty
- Generate action-oriented solutions for positive engagement in this issue.

| Possible Solutions | <i>On a scale of 1 (not invested at all) to 10 (very invested), how invested is my institution likely to be in this issue AND solution?</i> | Step 1 | Step 2 | Step 3 |
|--------------------|---|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |

Engagement, Case 2: Lack of social work staff in outpatient clinics

Your institution has identified diversity, equity, and inclusion as an important priority of the institution, and addressing health disparities in your patient population in particular. Many residents and faculty recognize the inequities that patient's experience are due to social determinants of health, and that to address these inequities in a meaningful manner, it will take more attention and personnel devoted to these issues.

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|--------------------|---|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |

Engagement, Case 3: Making the EHR work better for physicians

Multiple physician groups (among faculty and residents) have identified inefficiencies in the institution's EHR as a major stressor and there seems to be some willingness from hospital leadership to help address this issue. While the challenge seems daunting, leadership has turned to physicians and asked them to help in this concern.

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- Generate action-oriented solutions for positive engagement in this issue.

| Possible Solutions | <i>On a scale of 1 (not invested at all) to 10 (very invested), how invested is my institution likely to be in this issue AND solution?</i> | Step 1 | Step 2 | Step 3 |
|--------------------|---|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |

Personal Reflection

What is something you feel is important to improve?

Who could you enlist to join you in making this improvement?

Who will need to sponsor this activity?



Engagement 60-minute

For your case:

Step 1: Choose a scribe

Step 2: Choose a spokesperson

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|--------------------|---|--------|--------|--------|
| 1. | | | | |
| 2. | | | | |



Resilience

Introduction to Total Well-Being

COLUMN1

In general, how would you say your health is?

0 – Terrible
7 – Excellent

How much of the time do you feel you are making progress towards accomplishing your goals?

0 – Never
7 – Always

In general, to what extent do you lead a purposeful and meaningful life?

0 – Not at all
7 – Completely

In general, how often do you feel positive?

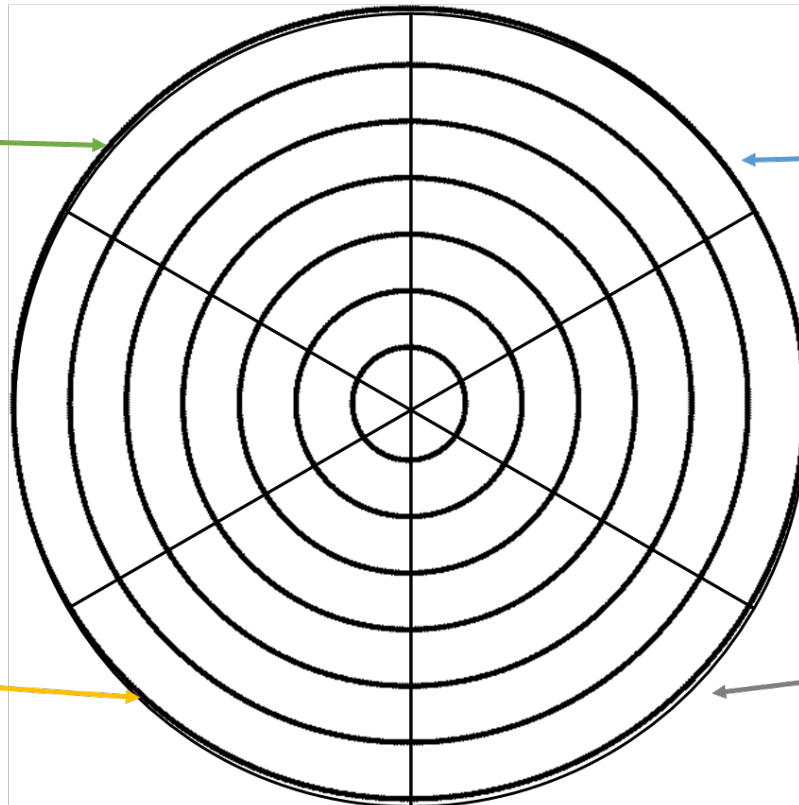
0 – Never
7 – Always

How often do you become absorbed in what you are doing?

0 – Never
7 – Always

How satisfied are you with your personal relationships?

0 – Not at all
7 – Completely



What's next?

1. **How much time** do you have to devote to one or two of the above areas?

5-10 mins / 30 mins / 1 hour

2. **What specifically** would you be doing in one or two important domains?
3. **When specifically** can you do these things?

Not Pollyanna: Positive AND Negative Emotion

Flourishing Ratio

| | | |
|--|--------|--------|
| This scale consists of a number of words that describe different feelings and emotions. Read each item and then place the appropriate answer next to that word. | | |
| Indicate to what extent you have felt this way <u>during the past week</u> | | |
| <i>Place your rating in the white box. Do not put a number in the black box.</i> | | |
| 1 = Very slightly or not at all 2= A little 3=Moderately 4= Quite a bit 5= Extremely | | |
| Feeling | Rating | Rating |
| Interested | | |
| Distressed | | |
| Excited | | |
| Upset | | |
| Strong | | |
| Guilty | | |
| Scared | | |
| Hostile | | |
| Enthusiastic | | |
| Proud | | |
| Irritable | | |
| Alert | | |
| Ashamed | | |
| Inspired | | |
| Nervous | | |
| Determined | | |
| Attentive | | |
| Jittery | | |
| Active | | |
| Afraid | | |
| Totals | | |
| | | |
| | | |
| Flourishing Positivity Ratio | | |

Values Compass

Values Clarification

Work/Education

- 1.
- 2.
- 3.
- 4.

Leisure

- 1.
- 2.
- 3.
- 4.

Personal growth/Health

- 1.
- 2.
- 3.
- 4.

Relationships

- 1.
- 2.
- 3.
- 4.

Competency
Accomplishment
Honesty
Accepting other
Fulfill obligation
Solving problems
Wisdom
Ambition
Curiosity
Justice for other
Better person
Feeling good about self
Loving relationships
Genuine friendships
Loyalty security
Helping others

Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Step 2:

Determine what feels ON Target versus OFF Target

HINT: You can feel when things are ON Target

Step 3:

- Determine what **OBSTACLES** might be getting in your way?

- Are these obstacles *Internal* (“inside the skin”) or *External* (“outside the skin”)?

- How **powerful** are these obstacles?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|

*Doesn't prevent
me at all*

*Prevents me
completely*

• Step 4: Valued-Based Action Plan

- Choose 1 **values-consistent action** you are willing to try
- Think about how you might move or overcome the barrier(s) that you identified
- What is the first step you will take to make a change

• Small achievable

- Sustained over time
- Consistent with goals
- Natural Ebb and Flow

My values-consistent action is... _____

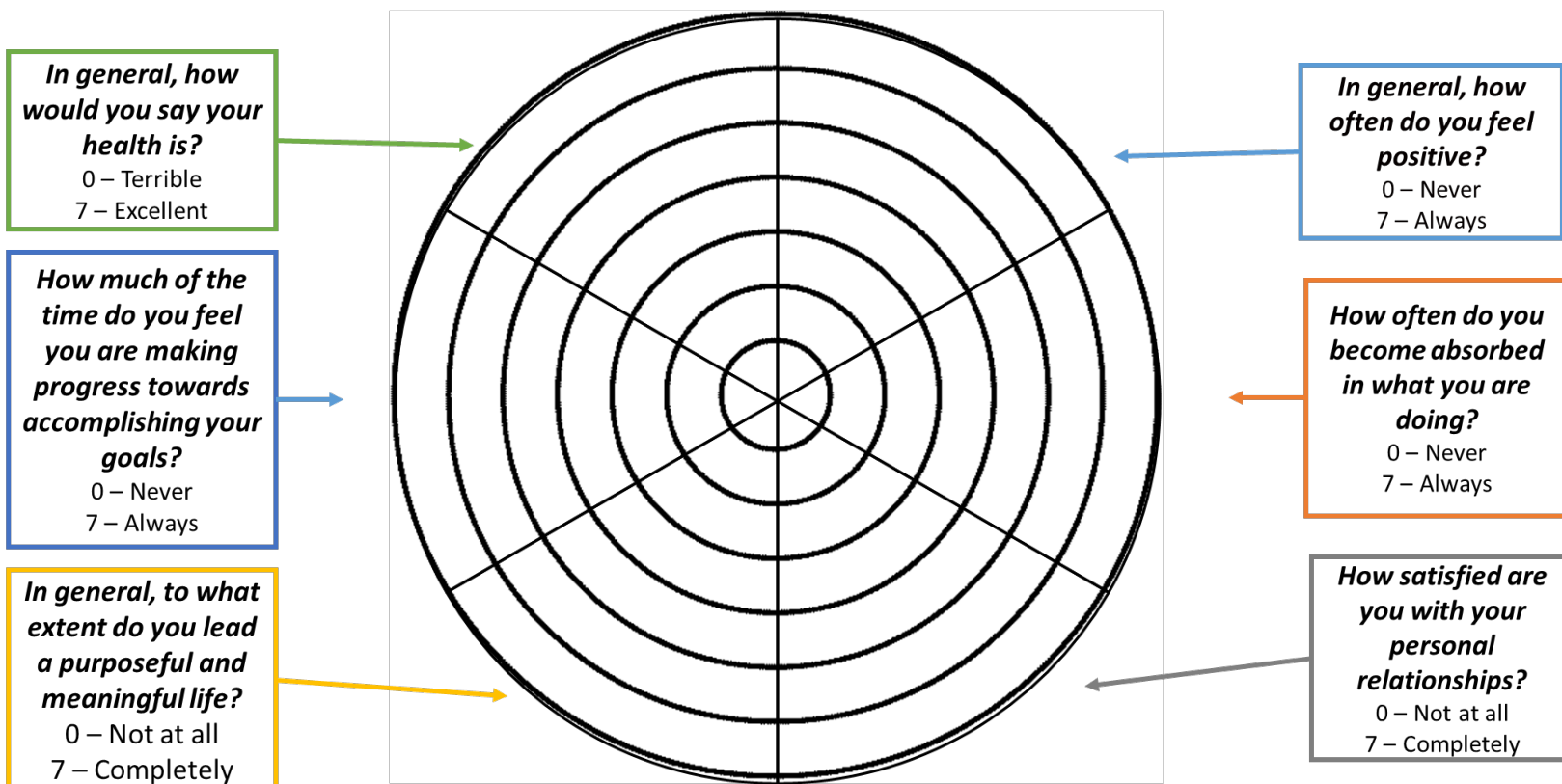
The first step I will take to make a change is...



Resilience 60 minute

Introduction to Total Well-Being

COLUMN1



What's next?

4. **How much time** do you have to devote to one or two of the above areas?

5-10 mins / 30 mins / 1 hour

5. **What specifically** would you be doing in one or two important domains?
6. **When specifically** can you do these things?

Values Compass

Values Clarification

The diagram consists of a central target with four concentric circles and a red crosshair. The four quadrants are labeled as follows:

- Work/Education** (top-left, blue border):
 - 1.
 - 2.
 - 3.
 - 4.
- Leisure** (top-right, green border):
 - 1.
 - 2.
 - 3.
 - 4.
- Personal growth/Health** (bottom-left, orange border):
 - 1.
 - 2.
 - 3.
 - 4.
- Relationships** (bottom-right, yellow border):
 - 1.
 - 2.
 - 3.
 - 4.

A list of 20 values is provided on the right side of the diagram:

- Competency
- Accomplishment
- Honesty
- Accepting other
- Fulfill obligation
- Solving problems
- Wisdom
- Ambition
- Curiosity
- Justice for other
- Better person
- Feel good about self
- Loving relationships
- Genuine friendships
- Loyalty security
- Helping others

Step 1:

Write down your values in these 4 areas of life.

Think in terms of general life directions, rather than in terms of specific goals

Step 2:

Determine what feels ON Target versus OFF Target

HINT: You can feel when things are ON Target

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- Determine what **OBSTACLES** might be getting in your way?

- Are these obstacles **Internal** (“inside the skin”) or **External** (“outside the skin”)?

- How **powerful** are these obstacles?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|

*Doesn't prevent
me at all*

*Prevents me
completely*

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- Choose 1 **values-consistent action** you are willing to try
- Think about how you might move or overcome the barrier(s) that you identified
- What is the first step you will take to make a change

• Small achievable

- Sustained over time
- Consistent with goals
- Natural Ebb and Flow

My values-consistent action is... _____

The first step I will take to make a change is...



Joy and Meaning

Question:

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.

Take a few minutes to remember one of these moments.

What happened? How did the story unfold?

What did you learn about what has meaning for you?

Use the space below to write down your answer

Reflect on a moment of positive connection with someone recently

Think about who you shared that moment with and what made it joyful.

What is one word that describes the feeling of that connection?

Use the space below to write down your answer.

Reflect on a meaningful connection with a patient or colleague

What were the joy moments of “mutual delight” you shared?

Why was it meaningful to you?

What allowed you to experience that connection at that time (e.g., setting, your frame of mind)?

Use the space below to write down your answer.

Turning to One Another

Margaret Wheatley, 2002

There is no power greater than a community discovering what it cares about.

Ask “What’s possible?” not “What’s wrong?” Keep asking.

Notice what you care about.

Assume that many others share your dreams.

Be brave enough to start a conversation that matters.

Talk to people you know.

Talk to people you don’t know.

Talk to people you never talk to.

Be intrigued by the differences you hear.

Expect to be surprised.

Treasure curiosity more than certainty.

Invite in everybody who cares to work on what’s possible.

Acknowledge that everyone is an expert about something.

Know that creative solutions come from new connections.

Remember, you don’t fear people whose story you know.

Real listening always brings people closer together.

Trust that meaningful conversations can change your world.

Rely on human goodness. Stay together.



Meaning

Question:

As you look back on your life, try to recall key moments or events that helped you develop a deeper understanding of your purpose. These might be influential teachers or readings, opportunities that were offered or denied to you, doors that opened or closed, decisions you made or did not make, tough challenges or exciting realizations.

Take a few minutes to remember one of these moments.

What happened? How did the story unfold?

What did you learn about what has meaning for you?

Use the space below to write down your answer.

Homework Questions:

Today has been one small step, opening a door for further reflection.

Between today and our next class please consider these questions:

In your day-to-day life, what can you do to notice the events that have meaning for you?

What are the clues that let you know you have made that connection?



Reflect on a moment of positive connection with someone recently

Think about who you shared that moment with and what made it joyful.

What is one word that describes the feeling of that connection?

Use the space below to write down your answer.

Reflect on a meaningful connection with a patient or colleague

What were the joy moments of “mutual delight” you shared?

Why was it meaningful to you?

What allowed you to experience that connection at that time (e.g., setting, your frame of mind)?

Use the space below to write down your answer.

Turning to One Another

Margaret Wheatley, 2002

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Real listening always brings people closer together.

Trust that meaningful conversations can change your world.

Rely on human goodness. Stay together.

KEY RESOURCES

The purpose of these resources is to give you some background material related to each pillar so that you are more familiar with each topic. The links to articles and references will take you to the source document.

Well-Being

Cultivating the joy of medicine: A focus on intrinsic factors and the meaning of our work

Serwint

Abstract

Physician burnout is at epidemic levels. In our role as healers, the concepts of humanism and relief of suffering are central themes in our work, yet burnout and depersonalization can threaten these values. While working to mitigate burnout, we need to move towards a focus on health and well-being and develop preventive strategies to cultivate resilience. This manuscript discusses the intrinsic factors that motivate us to be physicians: medicine as a calling, finding meaning in our work, and seeking joy in practice. Some strategies that enhance our resilience will be discussed including individual reflective practices, in addition to organizational strategies such as creating team mission statements, and participating in debriefing, Balint groups, and Schwartz Rounds. All of these practices provide opportunities to acknowledge the emotional impact of our care of patients and to focus on our values and the meaning of our work. Strategies to cultivate joy in practice are presented alongside a framework from the Institute for Healthcare Improvement to guide organizations.

[Cultivating the joy of medicine: A focus on intrinsic factors and the meaning of our work - PubMed \(nih.gov\)](#)

Key Points

1. Journeying with patients through their suffering is one of the most rewarding privileges of our vocation, yet it can also be the source of our own suffering if there are not adequate opportunities to reflect on, process, and seek the support of colleagues around these challenging experiences.
2. A sense of calling is still a motivating factor for many who enter the medical field and this sense of calling must be protected and preserved for the benefit of both physicians and their patients.
3. Humanism is foundational to the practice of medicine and may protect physicians from burnout. Both intrinsic and organizational factors play a role in sustaining humanism and enhancing a sense of calling and purpose for health care professionals. A return to joy in medicine is essential to sustain individual physicians over the career span and to ensure the health of the medical profession as a whole.

Implementing Emotional Debriefing in Pediatric Clinical Education

Osta et al

Abstract

Challenging situations and intense emotions are inherent to clinical practice. Failure to address these emotions has been associated with health care provider burnout. One way to combat this burnout and increase resilience is participation in emotional debriefing. Although there are many models of emotional debriefings, these are not commonly performed in clinical practice. We provide a guide for implementing emotional debriefing training utilizing the American Academy of Pediatrics Resilience Curriculum into clinical training programs, with a focus on preparing senior residents and fellows to act as debriefing facilitators. Senior residents and fellows can provide in-the-moment emotional debriefing which allows for greater health care provider participation, including medical students and other pediatric trainees. Training of senior residents and fellows may allow more frequent emotional debriefing and in turn may help to improve the resilience of pediatricians when they face challenging situations in clinical practice.

[Implementing Emotional Debriefing in Pediatric Clinical Education - PubMed \(nih.gov\)](#)

Key Points

1. Multiple studies demonstrate that emotional debriefing can reduce medical provider burnout and promote resilience.^{1,11-13} Bateman et al¹³ reported that Wrap-ups, which included multidisciplinary debriefing after a pediatric patient death, alleviated the stress of providers involved.

The AAP Resilience in the Face of Grief and Loss Curriculum

Serwint et al

Abstract

A career in pediatrics can bring great joy and satisfaction. It can also be challenging and lead some providers to manifest burnout and depression. A curriculum designed to help pediatric health providers acquire resilience and adaptive skills may be a key element in transforming times of anxiety and grief into rewarding professional experiences. The need for this curriculum

was identified by the American Academy of Pediatrics Section on Medical Students, Residents and Fellowship Trainees. A working group of educators developed this curriculum to address the professional attitudes, knowledge, and skills essential to thrive despite the many stressors inevitable in clinical care. Fourteen modules incorporating adult learning theory were developed. The first 2 sections of the curriculum address the knowledge and skills to approach disclosure of life-altering diagnoses, and the second 2 sections focus on the provider's responses to difficult patient care experiences and their needs to develop strategies to maintain their own well-being. This curriculum addresses the intellectual and emotional characteristics patient care medical professionals need to provide high-quality, compassionate care while also addressing active and intentional ways to maintain personal wellness and resilience.

Key Points

1. This role demands self-reflection, including the ability to deal with change, empathize with patients and families, and accept fallibility. To maintain resilience, it is essential to have exposure to strategies to recognize these risks and incorporate programmatic and individual strategies for wellness

[The AAP Resilience in the Face of Grief and Loss Curriculum - PubMed \(nih.gov\)](#)

[Resilience Curriculum: Resilience in the face of grief and loss \(aap.org\)](#)

Engagement

Physician Burnout, Engagement and Career Satisfaction in a Large Academic Medical Practice

Rao et al

Abstract

Objective: To determine (1) if engagement among physicians impacted plans to stay in current role and job satisfaction, (2) what factors impact engagement and burnout, and (3) the relationship between engagement and burnout. Burnout has been described as a syndrome characterized by depersonalization, emotional exhaustion, and a sense of low personal accomplishment resulting in decreased effectiveness at work. Engagement may be regarded as the antonym to burnout and has been described as a connection to one's work characterized by dedication, vigor, and absorption.

Design: We extracted data from an academic practice-wide survey conducted at two time-points and evaluated physician burnout and engagement. We used the Maslach Burnout Inventory and the Utrecht Work Engagement Scale to evaluate the association between burnout and engagement and the impact of engagement on mitigating the effect of burnout in a large physician academic faculty practice.

Setting: Large academic practice **PARTICIPANTS:** Academic physicians **METHODS:** The authors conducted a hospital-wide physician practice survey in 2014 and 2017 assessing physician burnout and engagement.

Results: Of eligible physicians (n=1882), 92.0% completed a survey. High levels of engagement and burnout were shown in 59.5% and 45.6%, respectively. Compared to physicians with high levels of engagement and low levels of burnout, physicians with low engagement and low burnout were less satisfied with their career (OR=0.20, 95% CI=0.11-0.35) and less likely to stay in their current role (OR=0.52, 95% CI= 0.37-0.73). Among physicians with high levels of burnout, highly engaged physicians were more satisfied (OR=0.21; 95% CI=0.12-0.36 vs OR=0.08; 95% CI=0.05-0.12) and more likely to stay in their career (OR=0.34; 95% CI=0.25-0.45 vs OR=0.27; 95% CI=0.21-0.34) than non-engaged physicians.

Conclusion: Engaged physicians have higher career satisfaction. There are many actionable ways to improve engagement.

[Physician Burnout, Engagement and Career Satisfaction in a Large Academic Medical Practice - PubMed \(nih.gov\)](#)

Key Points

1. We found that engaged physicians at our organization, regardless of their level of burnout, have higher levels of career satisfaction and are more likely to stay in their current role.
2. Although physicians with low levels of burnout and low levels of engagement fared better than those who were burned out, physicians who were not burned out but reported high levels of engagement were twice as satisfied with their careers as those with low levels of both burnout and engagement

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

Shanafelt







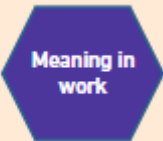




Abstract

These are challenging times for health care executives. The health care field is experiencing unprecedented changes that threaten the survival of many health care organizations. To successfully navigate these challenges, health care executives need committed and productive physicians working in collaboration with organization leaders. Unfortunately, national studies suggest that at least 50% of US physicians are experiencing professional burnout, indicating that most executives face this challenge with a disillusioned physician workforce. Burnout is a syndrome characterized by exhaustion, cynicism, and reduced effectiveness. Physician burnout has been shown to influence quality of care, patient safety, physician turnover, and patient satisfaction. Although burnout is a system issue, most institutions operate under the erroneous framework that burnout and professional satisfaction are solely the responsibility of the individual physician. Engagement is the positive antithesis of burnout and is characterized by vigor, dedication, and absorption in work. There is a strong business case for organizations to invest in efforts to reduce physician burnout and promote engagement. Herein, we summarize 9 organizational strategies to promote physician engagement and describe how we have operationalized some of these approaches at Mayo Clinic. Our experience demonstrates that deliberate, sustained, and comprehensive efforts by the organization to reduce burnout and promote engagement can make a difference. Many effective interventions are relatively inexpensive, and small investments can have a large impact. Leadership and sustained attention from the highest level of the organization are the keys to making progress.

[Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout - PubMed \(nih.gov\)](#)

Key Points

1. Physicians were considered 'engaged' if they scored high on two of three subscales: vigor, dedication, and absorption.

| Drivers of burnout and engagement in physicians |  Individual factors |  Work unit factors |  Organization factors |  National factors |
|--|---|---|--|---|
|  Workload and job demands | <ul style="list-style-type: none"> • Specialty • Practice location • Decision to increase work to increase income | <ul style="list-style-type: none"> • Productivity expectations • Team structure • Efficiency • Use of allied health professionals | <ul style="list-style-type: none"> • Productivity targets • Method of compensation <ul style="list-style-type: none"> - Salary - Productivity based • Payer mix | <ul style="list-style-type: none"> • Structure reimbursement <ul style="list-style-type: none"> - Medicare/Medicaid - Bundled payments - Documentation requirements |
|  Efficiency and resources | <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 |
|  Meaning in work | <ul style="list-style-type: none"> • Self-awareness of most personally meaningful aspect of work • Ability to shape career to focus on interests • Doctor-patient relationships • Personal recognition of positive events at work | <ul style="list-style-type: none"> • Match of work to talents and interests of individuals • Opportunities for involvement <ul style="list-style-type: none"> - Education - Research - Leadership | <ul style="list-style-type: none"> • Organizational culture • Practice environment • Opportunities for professional development | <ul style="list-style-type: none"> • Evolving supervisory role of physicians (potentially less direct patient contact) • Reduced funding <ul style="list-style-type: none"> - Research - Education • Regulations that increase clerical work |
|  Culture and values | <ul style="list-style-type: none"> • Personal values • Professional values • Level of altruism • Moral compass/ethics • Commitment to organization | <ul style="list-style-type: none"> • Behavior of work unit leader • Work unit norms and expectations • Equity/fairness | <ul style="list-style-type: none"> • Organization's mission <ul style="list-style-type: none"> - Service/quality vs profit • Organization's values • Behavior of senior leaders • Communication/messaging • Organizational norms and expectations • Just culture | <ul style="list-style-type: none"> • System of coverage for uninsured • Structure reimbursement <ul style="list-style-type: none"> - What is rewarded • Regulations |
|  Control and flexibility | <ul style="list-style-type: none"> • Personality • Assertiveness • Intentionality | <ul style="list-style-type: none"> • Degree of flexibility: <ul style="list-style-type: none"> - Control of physician calendars - Clinic start/end times - Vacation scheduling - Call schedule | <ul style="list-style-type: none"> • Scheduling system • Policies • Affiliations that restrict referrals • Rigid application practice guidelines | <ul style="list-style-type: none"> • Precertifications for tests/treatments • Insurance networks that restrict referrals • Practice guidelines |
|  Social support and community at work | <ul style="list-style-type: none"> • Personality traits • Length of service • Relationship-building skills | <ul style="list-style-type: none"> • Collegiality in practice environment • Physical configuration of work unit space • Social gatherings to promote community • Team structure | <ul style="list-style-type: none"> • Collegiality across the organization • Physician lounge • Strategies to build community • Social gatherings | <ul style="list-style-type: none"> • Support and community created by Medical/specialty societies |
|  Work-life integration | <ul style="list-style-type: none"> • Priorities and values • Personal characteristics <ul style="list-style-type: none"> - Spouse/partner - Children/dependents - Health issues | <ul style="list-style-type: none"> • Call schedule • Structure night/weekend coverage • Cross-coverage for time away • Expectations/role models | <ul style="list-style-type: none"> • Vacation policies • Sick/medical leave • Policies <ul style="list-style-type: none"> - Part-time work - Flexible scheduling • Expectations/role models | <ul style="list-style-type: none"> • Requirements for: <ul style="list-style-type: none"> - Maintenance certification - Licensing • Regulations that increase clerical work |

An Initiative to Increase Residency Program Diversity

Hoff et al

Abstract

A physician workforce that reflects the patient population is associated with improved patient outcomes and promotes health equity. Notwithstanding, racial and ethnic disparities persist within US medical schools, making some individuals underrepresented in medicine (URM). We sought to increase the percentage of URM residents who matched into our pediatric residency programs from a baseline of 5% to 35% to achieve demographic parity with our patients. We developed a multifaceted approach using multiple iterative tests of change, with the primary strategy being increased visibility of URM trainees and faculty to residency applicants. Strategies included applicant interviews with URM faculty, interview dinners with URM residents, visibility at academic conferences for URM trainees, development of targeted marketing materials, and a visiting student program supported by networking with URM residents. The primary outcome measure was the percentage of matched residents in the categorical pediatrics, child neurology, and medical genetics training programs who identified as URM. The percentage of URM residents increased to 16% (6 of 37) in 2018, 26% (11 of 43) in 2019, 19% (8 of 43) in 2020, and 21% (9 of 43) in 2021 (a four-year average of 22% URM residents; $P = .0002$). This progress toward a more representative residency program was met by challenges, such as pipeline concerns, the minority tax, and recruitment during a pandemic. We were able to implement small, low-resource strategies that had a large cumulative impact and could be implemented in other residency programs. Specific tactics and challenges encountered are discussed in this special article.

[An Initiative to Increase Residency Program Diversity - PubMed \(nih.gov\)](#)

Key Points

1. Methods - Strategies included applicant interviews with URM faculty, interview dinners with URM residents, visibility at academic conferences for URM trainees, development of targeted marketing materials, and a visiting student program supported by networking with URM residents.
2. A physician workforce that reflects the patient population is associated with improved patient outcomes and promotes health equity. Notwithstanding, racial and ethnic disparities persist within US medical schools, making some individuals underrepresented in medicine (URM).
3. The primary outcome measure was the percentage of matched residents in the categorical pediatrics, child neurology, and medical genetics training programs who identified as URM. The percentage of URM residents increased to 16% (6 of 37) in 2018, 26% (11 of 43) in 2019, 19% (8 of 43) in 2020, and 21% (9 of 43) in 2021 (a four-year average of 22% URM residents; $P = .0002$).

Resilience

Flourish: A visionary new understanding of happiness and well-being.

Seligman

Summary

“This book will help you flourish.” With this unprecedented promise, internationally esteemed psychologist Martin Seligman begins *Flourish*, his first book in ten years—and the first to present his dynamic new concept of what well-being really is. Traditionally, the goal of psychology has been to relieve human suffering, but the goal of the Positive Psychology movement, which Dr. Seligman has led for fifteen years, is different—it’s about actually raising the bar for the human condition. *Flourish* builds on Dr. Seligman’s game-changing work on optimism, motivation, and character to show how to get the most out of life, unveiling an electrifying new theory of what makes a good life—for individuals, for communities, and for nations. In a fascinating evolution of thought and practice, *Flourish* refines what Positive Psychology is all about. While certainly a part of well-being, happiness alone doesn’t give life meaning. Seligman now asks, What is it that enables you to cultivate your talents, to build deep, lasting relationships with others, to feel pleasure, and to contribute meaningfully to the world? In a word, what is it that allows you to flourish? “Well-being” takes the stage front and center, and Happiness (or Positive Emotion) becomes one of the five pillars of Positive Psychology, along with Engagement, Relationships, Meaning, and Accomplishment—or PERMA, the permanent building blocks for a life of profound fulfillment. Thought-provoking in its implications for education, economics, therapy, medicine, and public policy—the very fabric of society—*Flourish* tells inspiring stories of Positive Psychology in action, including how the entire U.S. Army is now trained in emotional resilience; how innovative schools can educate for fulfillment in life and not just for workplace success; and how corporations can improve performance at the same time as they raise employee well-being. With interactive exercises to help readers explore their own attitudes and aims, *Flourish* is a watershed in the understanding of happiness as well as a tool for getting the most out of life. On the cutting edge of a science that has changed millions of lives, Dr. Seligman now creates the ultimate extension and capstone of his bestselling classics, *Authentic Happiness* and *Learned Optimism*.

[Flourish: A Visionary New Understanding of Happiness and Well-Being by Martin E.P. Seligman | Goodreads](#)

Value congruence, importance and success and in the workplace: Links with well-being and burnout amongst mental health practitioners

Veage et al

Abstract

Living according to one's personal values has implications for wellbeing, and incongruence between personal and workplace values has been associated with burnout. Using the SGP Card Sorting Task (Ciarrochi & Bailey, 2008), this study explored mental health practitioners' personal life values and personal work-related values, and their relationships with wellbeing and burnout. Congruence between life and work-related values was related to wellbeing and perceived accomplishment at work. Those whose personal values were consistent with the commonly-shared values of a caring profession experienced lower burnout and higher personal wellbeing. Successfully pursuing one's work values predicted lower burnout and greater wellbeing. Honesty, clearly defined work, competence and meeting obligations were associated with lower burnout and higher wellbeing. Acceptance of others and helping others were associated with lower burnout. The implications for recovery-oriented practice are noted. Values clarification exercises may invigorate the sense of meaning in practitioners' work, increasing wellbeing and reducing staff burnout.

Key Points

1. For all variables, when successful pursuit of work values was controlled for, successful pursuit of life values became non-significant. Thus, successful pursuit of work values more reliably predicted burnout and wellbeing than successful pursuit of life values
2. Successful pursuit of work values, rather than life values, was found to be more important in predicting burnout, especially in the areas of emotional exhaustion and personal accomplishment

Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: a practice-friendly meta-analysis

Sin & Lyubomirsky

Abstract

Do positive psychology interventions—that is, treatment methods or intentional activities aimed at cultivating positive feelings, positive behaviors, or positive cognitions—enhance well-being and ameliorate depressive symptoms? A meta-analysis of 51 such interventions with 4,266 individuals was conducted to address this question and to provide practical guidance to clinicians. The results revealed that positive psychology interventions do indeed significantly enhance well-being (mean $r=.29$) and decrease depressive symptoms (mean $r=.31$). In addition, several factors were found to impact the effectiveness of positive psychology interventions, including the depression status, self-selection, and age of participants, as well as the format and

duration of the interventions. Accordingly, clinicians should be encouraged to incorporate positive psychology techniques into their clinical work, particularly for treating clients who are depressed, relatively older, or highly motivated to improve. Our findings also suggest that clinicians would do well to deliver positive psychology interventions as individual (versus group) therapy and for relatively longer periods of time.

[Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: a practice-friendly meta-analysis - PubMed \(nih.gov\)](#)

Key Points

1. Overall, PPIs were indeed significantly more effective than comparison groups for boosting well-being and for ameliorating depression.

Joy & Meaning

Man's Search for Meaning

Frankl

Summary

Psychiatrist Viktor Frankl's memoir has riveted generations of readers with its descriptions of life in Nazi death camps and its lessons for spiritual survival. Based on his own experience and the stories of his patients, Frankl argues that we cannot avoid suffering but we can choose how to cope with it, find meaning in it, and move forward with renewed purpose. At the heart of his theory, known as logotherapy, is a conviction that the primary human drive is not pleasure but the pursuit of what we find meaningful. Man's Search for Meaning has become one of the most influential books in America; it continues to inspire us all to find significance in the very act of living.

[Man's Search for Meaning by Viktor E. Frankl | Goodreads](#)

Re-Enchanting Medicine

Dugdale

Key Points

1. The burnout level among physicians is nothing short of a crisis for the medical field in the United States. Although I have no numbers to prove it, the histories my patients and I share make it clear to me that to reduce physician burnout and re-enchant medicine we need to reestablish the importance of the relationship between patient and physician. Therein lies the magic.

[Re-Enchanting Medicine - PubMed \(nih.gov\)](#)

<https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2633259>

Taking Action against Clinician Burnout

National Academy of Sciences

Excerpt

Patient-centered, high-quality health care relies on the well-being, health, and safety of health care clinicians. However, alarmingly high rates of clinician burnout in the United States are

detrimental to the quality of care being provided, harmful to individuals in the workforce, and costly. It is important to take a systemic approach to address burnout that focuses on the structure, organization, and culture of health care. Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being builds upon two groundbreaking reports from the past twenty years, To Err Is Human: Building a Safer Health System and Crossing the Quality Chasm: A New Health System for the 21st Century, which both called attention to the issues around patient safety and quality of care. This report explores the extent, consequences, and contributing factors of clinician burnout and provides a framework for a systems approach to clinician burnout and professional well-being, a research agenda to advance clinician well-being, and recommendations for the field.

Key Points

1. Optimize time with colleagues when we can.
2. Moment to moment interactions form foundation of relationships – we all have negative ones that we have to deal with, and lots of potential positive ones in pediatrics – perhaps vast majority are, can we refine our abilities to recognize and focus on those? And if we can do this at times, we potentially have the capacity to lift each other up – highlighting joy, being positive, appreciative.
3. We have a choice for how we show up. Taking time to understand peoples' stories, has the potential to change and evolve those relationships that are difficult or challenging – when we understand others, we connect with them differently.

[Factors Contributing to Clinician Burnout and Professional Well-Being - Taking Action Against Clinician Burnout - NCBI Bookshelf \(nih.gov\)](#)

[Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being - PubMed \(nih.gov\)](#)

Facilitation Rubric

| Domain | Description | Comment |
|---------------------|--|---------|
| Safety | <ul style="list-style-type: none"> • Uses ground rules (rules of engagement slide) to create a safe space • Supports engagement with the content • Encourages participation in the discussion • Mitigates emotional size | |
| Facilitation | <ul style="list-style-type: none"> • Asks thought provoking questions • Questions encourage interaction • Manages activities so there is adequate time | |
| Interaction | <ul style="list-style-type: none"> • Connects with participants. • Listens to participants • Encourages all voices to be heard | |
| Outcomes | <ul style="list-style-type: none"> • Provides time and space for participants to plan to apply learning • Encourages development of SMART goals. | |