Cultivating a Community of Well-being

Kelly D. Holder, PhD
Chief Wellness Officer
Division of Biology & Medicine
Brown University
Well-being has been defined as a quality of life, which includes the absence of ill-being and the presence of positive physical, mental, social, and integrated well-being experienced in connection with activities and environments that allow physicians to develop their full potential across personal and work-life domains (Brady et al 2018).

https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4953.pdf

Personal Consequences of Burnout

Physical consequences
- Fatigue
- Exhaustion
- Risk for motor vehicle accidents

Psychological consequences
- Stress
- Disruptive behavior
- Mood disorders
- Depression
- Substance abuse
- Suicidality

What is Burnout?

Psychological construct consisting of 3 Elements:

- **Emotional Exhaustion**: feel emotionally drained and lack psychological reserves- “No gas in the tank.”

- **Depersonalization**: view patients/clients more as objects vs. people. Lack of empathy; impatience; uncaring

- **Reduced personal accomplishment/Lack of meaning**: “What I do doesn't matter.”

Causes of Burnout
Excessive workload
Inefficient work environment
Problems with work-life balance
Loss of autonomy/flexibility/control
Loss of meaning in work

Other Factors?

- Lack of resources
- Demands of working with administrators, colleagues, and students
- Challenges with funding agencies
- Institutional Review Boards
- Flow between clinical, research, and teaching environments

At the Intersection of Burnout, COVID and Systemic Racism

We must make our institutions actively antiracist, writes Deborah Saint-Phard, in order to bring about actual change and healing for each of us and our nation.

By Deborah Saint-Phard // December 18, 2020

Webinar: How Universities and Students Benefit from

Race, disadvantage and faculty experiences in academic medicine

Linda Reid 1, Lisa S Cooper, Physiology
Affiliation: 1 Harvard Medical School, Massachusetts, USA
PMID: 31599882 DOI: 10.1007/s11806-020-03757-7, July 2020

Doctors Grapple With Sexist & Racial Microaggressions, Making Them More Prone To Burnout: Study

Anuradha Varmaani Contributor
Healthcare
Anuradha writes about environmental health disparities & epidemiology

Mary Public Health Rev (Camb). 2021 Jun 1; Published in final edited form as
Published in final edited form as

Underrepresented Minority (URM) physician exploitation exacerbated by the COVID-19 pandemic: Implications to URM physician-faculty burnout and worsening health disparities

Nimosthale A. Adebowale, 1 Lori Z. Madorsky, 1 Jonathan Alhake, 1 Sharon L. Post, 1 Catharina A. O'Brien 1 and
Melissa A. Simon 1

Forbes
Wellness Hierarchy

<table>
<thead>
<tr>
<th>Title</th>
<th>Level</th>
<th>Key factors at level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heal Patients and Contribute</td>
<td>5</td>
<td>I have time, autonomy and resources to heal patients</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I have time to think and contribute</td>
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<tr>
<td>Appreciation</td>
<td>4</td>
<td>I am noticed and appreciated</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I am connected</td>
</tr>
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<td></td>
<td></td>
<td>My compensation reflects appreciation</td>
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<tr>
<td>Respect</td>
<td>3</td>
<td>There is a basic level of mutual respect and inclusion</td>
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<tr>
<td></td>
<td></td>
<td>My family time is respected</td>
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<tr>
<td></td>
<td></td>
<td>I am not hassled by IT, the EHR, or bureaucracy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Objects and processes work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Culture violations are addressed</td>
</tr>
<tr>
<td>Safety</td>
<td>2</td>
<td>I’m physically safe</td>
</tr>
<tr>
<td></td>
<td></td>
<td>My patients are safe</td>
</tr>
<tr>
<td></td>
<td></td>
<td>My job is secure &amp; future predictable</td>
</tr>
<tr>
<td>Basics</td>
<td>1</td>
<td>I’m hydrated, have access to food, and time to eat</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I’ve had enough sleep</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I have access to bathrooms</td>
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<tr>
<td></td>
<td></td>
<td>I have no depression or anxiety</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I am free of substance use</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I do not have suicidal thoughts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I have time and space to breast feed</td>
</tr>
</tbody>
</table>

Daniel E. Shapiro, Cathy Duquette, Lisa M. Abbott, Timothy Babineau, Amanda Pearl, Paul Haidet,
Beyond Burnout: A Physician Wellness Hierarchy Designed to Prioritize Interventions at the Systems Level,
The American Journal of Medicine, Volume 132, Issue 5, 2019, Pages 556-563.
Valid and Reliable Survey Instruments to Measure Burnout, Well-being, and Other Work Related Dimensions

Mashlach Burnout Inventory
Oldenburg Burnout Inventory
Single-Item Burnout Inventory
Copenhagen Burnout Inventory

The Stanford Professional Fulfillment Index
The Well-being Index
The Patient Health Questionnaire - 9

Division of Biology and Medicine

OVERVIEW (2021)

- 20 departments
- ~12 centers/institutes
- ~2500 faculty
- ~2000 students/trainees
- ~500 staff
- ~403 degrees awarded
- 8 teaching affiliates + Brown Physicians, Inc.; serving 1.6M people of diverse backgrounds
The Four Pillars

EDUCATION

RESEARCH

CLINICAL

COMMUNITY

EQUITY, DIVERSITY, INCLUSIVITY, WELLNESS, AND SOCIAL RESPONSIBILITY
Mission

The mission of the Chief Wellness Officer is to promote wellness as a core competency for students, faculty, and staff. The Chief Wellness Officer serves in an advisory and supportive role to the Division of Biology and Medicine community by offering timely and progressive interventions to improve well-being by impacting local culture, systems, policies, and environment.

Vision

Create an institutional culture in which our community members do not have to sacrifice their own well-being to serve others.

Values

Work in this office will be guided by the belief and commitment to: compassion, diversity and inclusion, social justice, integrity, and respect.
Chief Wellness Officer
Goals for 2022 - 2023

- Study and Understand the Organization
- Continue Undergraduate Medical Education Wellness Efforts
- Build a Wellness Team

OHSU Faculty Dev
How are you address system-level factors that contribute to burnout/turnover/decrease in well-being for faculty?

1. Listen
2. Identify through assessment
3. Collaboration
What are the opportunities at the institution/school/department/division/team level to support faculty well-being and satisfaction?

1. Creation of wellbeing leadership with institutional support
2. Collaboration with HR for necessary personal support
3. Faculty Development
4. Peer Support
5. Talk about it
What work are you doing with students that implicate changes or programs for faculty?

1. Wellness and Mental Health Assessment for all medical students
2. Wellness and Learning Environment Rounds
3. Curricular Integration
Opportunities

Assessment & Application

- Measuring Burnout
- Department Wellness Consultations

Supporting Wellness & Mental Health

- Strengthen Medical School & Graduate Student Resources
- GME & Faculty Peer Support & Commensality Groups
- Increase access to care for GME & Faculty
- Improve access to self assessment for community

Wellness Curriculum

- Embedding Wellness into medical school curriculum
- Accessible GME wellness curriculum & programming
- Wellness-Centered Leadership training for faculty and staff
SUCCESSES

Suicide Prevention Programming
Mental Health & Wellness Community Fair
Collaboration between Brown & Hospital Systems for Wellness Assessment
A Seat at the Table
Division of Biology & Medicine Leadership
Medical Curriculum Committee
Clerkship Directors Meeting
Lifespan GME Council
Lifespan Mental Wellbeing Committee
Care New England Educational Meeting