Establishing Clinician Well-Being as A National Priority

Meeting 2

May 2, 2018

Victor J. Dzau

National Academy of Medicine
Action Collaborative on Clinician Well-Being and Resilience
400 physicians die by suicide each year, a rate more than 2x that of the general population.

Physician rates of depression remain alarmingly high at 39%.

24% of ICU nurses tested positive for symptoms of post-traumatic stress disorder.

How can we protect the health of the people who protect our own?

National Academy of Medicine
Action Collaborative on Clinician Well-Being and Resilience

Learn more at nam.edu/ClinicianWellBeing
A Multitude of Factors Drive Burnout

- Stigma and fear of vulnerability
- Regulatory environment
  - Reimbursement environment
- Digital health environment
- Organizational leadership
- Learning environment
- Culture of silence
Action Collaborative Goals

• Raise visibility of clinician burnout, depression, stress, and suicide

• Improve baseline understanding of challenges to clinician well-being

• Advance evidence-based, multidisciplinary solutions that will improve patient care by caring for the caregiver
Make up of the Collaborative

~60 participants representing:

• Medicine, nursing, pharmacy, dentistry
• Professional societies and membership organizations
• Government agencies
• Health IT vendors
• Large health care centers
• Payers
• Researchers
• Trainees
• Early career professionals
• Patient and consumer perspectives
Leadership Team

Victor J. Dzau, President, NAM, chair

Darrell G. Kirch, President and CEO, AAMC, co-chair

Thomas J. Nasca, CEO, ACGME and ACGME International, co-chair
Steering Committee

Victor J. Dzau, National Academy of Medicine
Darrell G. Kirch, Association of American Medical Colleges
Thomas J. Nasca, Accreditation Council for Graduate Medical Education

Steven Bird, Society for Academic Emergency Medicine
Neil Busis, American Academy of Neurology
Pamela Cipriano, American Nurses Association
Robert Harbaugh, Society of Neurological Surgeons
Art Hengerer, Federation of State Medical Boards
Sandeep Kishore, Icahn School of Medicine at Mount Sinai
Clifton Knight, American Academy of Family Physicians
Lois Margaret Nora, American Board of Medical Specialties
Daisy Smith, American College of Physicians
Working Groups

1. Research, Data, and Metrics
2. Conceptual Model
3. External Factors and Work Flow
4. Messaging and Communications
5. Publications and Art Show
Achievements in Year 1

• Launched in January 2017
• 36 sponsoring organizations, 120 network organizations
• 5 working groups
• Discussion paper, *Burnout Among Healthcare Professionals*
• Launched a national call for commitment: 150+ statements
• *Expressions of Clinician Well-Being* Art Show
• NEJM Perspective, *To Care is Human*
Progress in Year 2

• Clinician Well-Being Knowledge Hub
• Discussion papers
• Revised conceptual model
• Compilation of validated instruments to assess burnout
• Additional tools and resources in development
NAM Consensus Study

“Systems Approaches to Improve Patient Care by Supporting Clinician Well-Being”

Launching Spring 2018
Vision for the Future

• Evidence based solutions
• Leveraging networks of organizations committed to improving & implementing clinician well-being
• Grow the network to create a larger community of empowerment
• A campaign of systems change
Today’s Meeting Objectives

- Examine the effects of loneliness on clinician well-being and explore strategies to enhance human connection and community at work.
- Investigate how individuals and organizations can use art and the humanities for healing and well-being.
- Explore the causes and effects of anxiety, burnout, and depression on sub-populations and share promising solutions for creating connected environments.
- Consider models of work flow redesign to improve clinician well-being.
“the irony of loneliness is we all feel it at the same time

- together”

Rupi Kaur,
The Sun and Her Flowers
Poll Everywhere
Real time audience engagement

Moderators will display questions throughout the program

Participants in the room and on webcast can submit responses in real time using mobile phones or web browsers

Responses will automatically populate on the screen
Poll Everywhere
Real time audience engagement

You only have to join once – please do not text “WELLBEING2018” for every poll question

One-word answers

Open-ended vs. multiple choice questions
Connect to Poll Everywhere

By Phone:
Step 1: Text WELLBEING2018 to 22333
Step 2: Text your response to the question

By Computer:
Step 1: Go to PollEv.com/wellbeing2018
Step 2: Type your response to the question
What city are you joining us from today?
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<th>Role</th>
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When have you felt the loneliest?
What do you do to overcome your loneliness?
Expressions of Clinician Well-Being

- > 350 submissions
- 3 artists to present during public session
- 30 selected for pop-up gallery
- 100 selected for permanent digital gallery, launching today
Art Creation Activity

1. Of the work that I do in the health professions, this aspect keeps my heart in it:

2. I keep my heart in the health professions because:

3. I keep my heart in the health professions by:
Action Collaborative on Clinician Well-Being and Resilience

National Call for Commitment Statements

To provide an opportunity for organizations across the country to discuss and share plans of action to reverse clinician burnout and promote clinician well-being, the National Academy of Medicine (NAM) is collecting statements describing organizational goals or commitments to action.

To learn more and submit your own commitment statement, please click here.

Clinician well-being is essential for safe, high-quality patient care.

However, clinicians of all kinds, across all specialties and care settings, are experiencing alarming rates of burnout. Among the most telling of statistics, more than 50 percent of U.S. physicians report significant symptoms. Burnout is a syndrome characterized by a high degree of emotional exhaustion and depersonalization (i.e., cynicism), and a low sense of personal accomplishment at work.

Clinician burnout can have serious, wide-ranging consequences, from reduced job performance and high turnover rates to—in the most extreme cases—medical error and clinician suicide. On the other hand, clinician well-being supports improved patient-clinician relationships, a high-functioning care team, and an engaged and effective workforce. In other words, when we invest in clinician well-being, everyone wins.

Supporting clinician well-being requires sustained attention and action at organizational, state, and national levels, as well as investment in research and information-sharing to advance evidence-based solutions.
Thank You

For any questions, please be in touch with Charlee Alexander
ClinicianWellBeing@nas.edu
How would your rate the sense of community within your workplace or school?

- Very good
- Good
- Fair
- Poor
- Very poor
Questions for the keynote presenters?
Please respond to one of the three following prompts to help create a piece of art: 1) Of the work I do in the health profession, this aspect keeps my heart in it_____ ; 2) I keep my heart in the health profession because_____; or 3) I keep my heart in the health profession by_____
Questions for the working group presenters?
Questions for the "Diversity and inclusion: Research" panel?
What kinds of products or activities would you like to see more of from our working groups in the future? Discussion papers, webinars, online tools or modules, podcasts / videos, or something else?
Questions for the "Creating a diverse and inclusive environment" panel?
What has worked for you in your practice?
What are your suggestions for near-term improvements?
What are your suggestions for longer term improvements?
Questions for the breakout panelists?