DAVID SKORTON: Good morning. Just giving everybody a chance to grab a seat. Great. Good morning, everyone. I am the President and CEO of the Association of American Medical Colleges and we are thrilled to have you here in person at this wonderful facility that was designed and made possible by my predecessor Darrell Kirch who you will hear from later. [ Applause ] on behalf of the whole AAMC family I am honored to host you at our headquarters and a warm welcome to those of you joining us virtually as well. The conversations with many academic medical centers or members, we continually hear that well-being of the healthcare workforce in general remains an ongoing challenge and perhaps the ongoing challenge of our time. This was certainly true well before the global pandemic and unnecessary and painful racial reckoning and all kinds of other pressures on the healthcare system and are people. Just one single example of many that we could cite, the tragic loss of Dr. Lorna Breen, who worked in one of the hospitals in New York Presbyterian the satellite that I was also a part of, a physician in New York who died by suicide in 2020. This hit home particularly for me because of my familiarity with that hospital and those who worked with Dr. Breen. Tragedy even for a single person is unacceptable. We are here today because we believe that and those we follow we believe it is not only unacceptable but avoidable and might sincerest gratitude for the National Academy of Medicine for the extensive effort in creating this action collaborative and moving forward with evidence-based multidisciplinary solutions to a very difficult problem. I am especially grateful to the co-leads of this effort including again my good friend and predecessor, Darrell Kirsch and a psychiatrist who has devoted much of his career toward advancing mental health issues for the country. Thank you for your leadership. Also my sincere gratitude to my colleague and friend who is co-chair of this collaborative along with Darrell and demonstrating the National Academy of Medicine commitment to clinician well-being and resilience and permit me to wax for a moment eloquence about Victor. It is a challenging job to be the head of a National Academy of Medicine. It is peopled by very distinguished individuals each one of which has a strong opinion about nearly everything. Victor has managed very very effectively to take into account those opinions and that individual wisdom and lead all of us forward with grace and compassion and strong execution. Congratulations for all you are doing, Victor. I ask you to come up now and I handed over to you to tell us about the national plan and thank you for being here at AAMC and thank you for all you do. My colleague, Victor Dzau. [ Applause ]

VICTOR DZAU: I paid David to be my publicist and he is so kind and certainly one of the nation's leaders in health and medicine in many ways other areas. So thank you for welcoming me into your home and thank you for your support and hear through Darrell Kirch and you have been the foundational support for this initiative and we would not be here without both of you and the entire organization. So Thank you. I would like to think the Surgeon General and Darrell Kirch and now Tom Nasca, and they are my cochairs and they have been wonderful colleagues to work with. On behalf of them I want to welcome all of you. And earlier we had a fire alarm and it was just when I was about to start in a closed session and I think everybody woke up and now you are here. But all of you know we are here to talk about parts of this mission and the criticality of your commitment and participation for this journey we have
started some six years ago. And going forward, we do have a long way to go and I thought it should be but it is not. Maybe we have done some changes and all of us know that but have we made a difference? I say yes, but not enough. Our journey is ahead of us. We are committed to, therefore, another phase of this. And I would like to institutionalize this entire issue for the nation and globally going forward.

>> Today, we want to welcome the public as well and I understand there are over 1500 registrants on Zoom and a few people in person. That is wonderful. We do need more attention to this issue. I was talking to Judy Woodruff not too long ago and saying you have to do a session on this. She is interested. So you may or may not know that she is about to retire but she is talking to us about how to get more national attention with this crisis we are faced with. But we are very fortunate to have the attention of Congress. This morning we have three people, leaders from Congress who send a message to us in this is by video but we have Ami Bera from California represented, David Joyce from Ohio and of course Senator Tim Kaine who has been such an important figure in this area. So we will hear from them, their messages and maybe how we have the attention of those in Congress. Now let's get some things done. And I have the video please.

Video Remarks by Ami Bera, David Joyce, and Tim Kaine

>> AMI BERA: I’m Congressman Ami Bera from California from California’s Seventh Congressional District. I’m also an internal medicine physician by training. I want to thank the National Academy of medicine for the incredible work with mental health pressures and a lot of this work occurred before the pandemic so this was pre-pandemic for we all know the pressures that doctors and nurses and other healthcare professionals have come under during the pandemic and the responsibilities placed on them. We do know that there is tremendous burnout and physician suicide. And many of them are starting to think about leaving the profession. And that will put an incredible strain on the remaining healthcare providers. We have to address this issue and focus on on mental health well-being and we have to do it and let's build resilience and let's make sure it is not a sign of weakness to reach out and ask for help. It is a sign of strength. Let's provide the resources and understand the strengths and pressures that doctors and nurses are under and other healthcare providers and let's address it because not only is taking care of our providers and doctors and nurses and healthcare professionals who care for us to medicine and it is right this the best way to care for our patients. Thank you and thank you for your work and be well and safe and be kind.

>> DAVID JOYCE: Hello everyone. I’m Congressman David Joyce. I’m celebrating the release of the National Academy of Medicine national plan for health workforce well-being. These past few years have been a stark reminder of healthcare workers not just delivering life-saving care but they willingly put themselves in harms way and is the cochair of the Congressional nursing Caucus I understand how important it is for doctors and nurses and physician assistants and every other individual who works in healthcare to receive the support they need to thrive in their professions and continue to provide high-quality care to the American people. That is why I have consistently championed legislation in this workforce from providing additional support for primary care providers and in medically disadvantaged communities to reauthorizing critical nursing workforce development programs. I will remain committed to trends in healthcare worker burnout and continue to fight for your needs here in Congress. I applaud
the work that the National Academy of Medicine is doing to prioritize the mental health and well-being of healthcare workers and look forward to working with you all as we turn recommendations into concrete policy solutions.

>>TIM KAINE: Senator Tim Kaine here. It is great to join you by video. Let me start by thanking the National Academy of Medicine and the action collaborative on clinician well-being and resilience for your important work on such a critical issue. I want to recognize the collaboratives for cochairs for their tremendous dedication, Dr. Victor Dzau, doctor Darrell courage, Doctors Rebecca Murphy and doctor Thomas [Indiscernible]. Physicians and other healthcare healers have long experienced high levels of stress and burnout. This was before the pandemic and COVID-19 has only worsened this problem and in the last few years it has shed light on just how serious this issue is. And while helping patients fight for their lives, many front-line healers have been coping with her own trauma, losing patience and colleagues and family members, being afraid for your own physical safety or the safety of the family members you go home to everyday. That is why I have been such a strong advocate for the mental health and well-being of our front line workers and other healthcare healers. Lookout for those who spend their lives looking out for other people. My legislation does just that. Lorna was from Charlottesville and she was a talented and dynamic emergency room physician serving on the front lines of the pandemic and supervising the emergency department in a hospital in New York City and tragically we lost her to suicide during the first weeks of the pandemic. She worked at a hospital flooded with cases and she was doing all she could to save her patients and she got COVID herself and went home to quarantine but then came back as soon as she could and probably too soon because she was so focused on trying to help others. What she saw when she returned, the scale of death and illness around her with people dying in hallways put her into a mental health till stream that cost her her life and it is a painful reminder of the damaging toll it has taken on providers. Lorna suffered from something very common during healthcare professionals even in best times and in deep stress interacting with patients day in and day out and helping them and worrying about them and celebrating them and praying for them, morning for them and asking yourself is there something I could have done differently. Over the last two years I have gotten to know her family and I have been honored to have worked with him on legislation that honors her and provides training resources needed so we can prevent and work to prevent suicides and other health issues among our wonderful and talented professionals and during this crisis in years to come. The Dr. Lorna Breen healthcare provider protection act provides a much needed investment in the mental health — mental health and front-line workers. I was pleased the American rescue plan included funding for provisions modeled by the bill and in January over $100 million in grants went to our hospitals and health systems and medical schools and other training schools and professional associations across the country to reduce burnout and promote well-being among healthcare workforce and particularly I am proud to say that in March the President signed the Dr. Lorna Breen Health Care Provider Protection Act into law. I was able to attend this signing ceremony in the Oval Office with her sister and brother-in-law, Jennifer and Corey and with Dr. Breen's mom and niece. The President was touched by their story and took time to learn more about her and her experience but also to learn about the efforts of this family and to turn a very very unspeakable tragedy into motivation to help others. I am so encouraged by the steps to make sure we are caring for those who care for us. But we do know so much more has to be done and that is why it is important to talk about Dr. Breen's experience and the experience of all other healthcare healers like her. But action
collaborative will lay out concrete steps that we can take to address the well-being of those who care for us. Thank you again for being tireless advocates for our healthcare workforce. [ Applause ]

Opening Remarks: Victor Dzau

VICTOR DZAU: You just heard from three of our legislative leaders who are clearly committed to this. I do believe that there is tremendous receptivity and support for this at time for this issue and I want to thank the Surgeon General who is pushing this issue and really in many ways ringing this to the attention of the nation and you hear later from him the advisory which he and the Vice President Harris was able to launch and make sure they have this. We have a lot of work to do. I am encouraged despite my earlier remark that things are moving. We do have a lot of work to do. For the next few minutes, I want to summarize where we are and particularly for the public and since we have public meeting non-members and many of them are also physicians and nurses, healthcare providers. And laypeople to listen to today's launch of the plan. So the plants vision is that patients are cared for by health workforce that are striving in an environment that fosters well-being as they improve health and then healthcare experience and then equity and achieve the aim. So we certainly recognize that this is an important part of that team and to achieve that we need a healthy workforce.

>> We are hoping to showcase today the national plan and it is a major milestone that is part of a coherent longitudinal movement that has been building over time with all of you. And particularly over the last six years, the collaborative structure we have gained many new partners. Some of you have been with us all six years and some have joined us. Everybody is welcome. The partnership is what it is about. This collaborative structure, we get more than 200 organizations that join the network since 2017. This creates a diverse community of stakeholders across the entire health ecosystem. We have more than 100 members like you across the sectors but since meeting and working groups, I know we have put you to work and it is great work. And a representative from CDC and CMS and the VA who have helped drive the national agenda. I think therefore the future is right for action. This national plan will help get everybody on the same page and an important next step toward a future where the health workforce can thrive for the health of the nation. So this plan reflects a lot of hard work and our co-chairs and the work of 14 student committee members and many of you and also the public comment period, which received I think well over 1000 comments that we all responded to in the due process we have gone through and the plan is multidisciplinary. And it is inclusive. You can download it at nam.edu/NationalPlan.  

>> What are the priority areas? There are seven. One is create sustained positive work in a learning environment and culture and we will hear from others later that it is a system issue and not an individual weakness so therefore creating a work environment and culture is absolutely important. We also have to invest in measuring assessment and strategies and research. It is all essential for us to move forward and to be able to know where we are and to know what to do and having strategy and resources backing it and to be able to measure progress. We do recognize as Senator Kane said, people are going through some significant mental health prices and during this period and then before. We have to address this and reduce stigma and of course there are many external factors that are in fact contributing to this problem. We have to address compliance and regulatory and policy barriers for daily work of our healthcare workers. Of course, technology. Making sure that tools are friendly and support
all the workers in the patient's and of course, as I said, this has to be institutionalized as a long-term value. Finally, we all believe in this. We have to recruit and retain a diverse and inclusive workforce because everybody can have a say and contribute and strive together.

>> That means we need a lot of you working on this. The very early in the plan I said to my team not only let's have action but let's have actors so people know what they need to do because everybody is committed to doing this. So if I were going to say what you want me to do? We have listed all of the answers here. There are 10 actor groups. By that, I mean this is not just you have to do this but we have to do this together. And we do encourage collaboration of different groups to implement plans laid out and actions laid out and of course, as you can see, all levels of government and health I.T. companies and healthcare workforce and this is not an exhaustive list and these are some of the key ones and we do get commitment from many sectors and that will make a huge difference moving forward.

>> The whole plan is meant to be done as you see and I guess you would call this the preliminary plan, although, as you heard, we will be formally launching this and it will be indexed and searchable and this is a complex system issue. We will have to look at how to move forward. This gives you an idea and in this case may be a positive working environment and the actors and actions and all of that and it is structured that way for an easy to read and easy to find report. And we have done this for every single priority area.

>> Here is what we need to do. We have to mobilize for a national movement and you will hear in the next session having everybody talk more deeply about what are the actions we need and I am really looking forward to this. And this is where it is. And we will be talking more later about what is the movement and what are the essential things we need to do moving forward and I will reserve those comments later but I will now turn it over to Christine Cassel and the three distinguished panelists and to Christine Sinsky, Christine Cassel, and Darrell Kirch into the next session. So please come up. Thank you.