Department of Pediatrics
Faculty Meeting
September 29, 2020

Topic:
Wellbeing in the Face of Adversity
Speakers: Mary Leonard, Felice Su, Julie Collier
Meaghan Beattie, MD  
Clinical Assistant Professor  
Division of Cardiology

Anjuli Sinha Campbell  
Clinical Assistant Professor  
Division of Cardiology
Hamsika Chandreskar, MD
Clinical Instructor
Division of Cardiology

Sean Cooney, MD
Clinical Instructor
Division of Cardiology
William Goodyer, MD, PhD
Instructor
Division of Cardiology

Jessica Jones, MD
Clinical Instructor
Division of Cardiology
Jerin Jose, MD
Clinical Instructor
Division of Cardiology

Raymond Lejano, MD
Clinical Assistant Professor
Division of Hospital Medicine
ANNOUNCEMENT

Anna Gloyn, PhD
Department of Pediatrics Associate Chair for Basic Science Research

#International Women’s Day 2018
Assistant Professor Promotions

- Hannah Bassett
  Hospital Medicine
- Whitney Chadwick
  Hospital Medicine
- Fatima Eskandar-Afshari
  Neonatology
- Mohammad Hasan
  Neonatology
- Eunice Koh
  Critical Care
- Gayatri Madduri
  Hospital Medicine
- Tristan Nichols
  Hospital Medicine
- Lisa Patel
  Hospital Medicine
- Carmin Powell
  Hospital Medicine
- Anoop Rao
  Neonatology
- Vivian Sun
  Hospital Medicine
- Ekaterina Vaisberg
  Hospital Medicine
- Nichole Wang
  Neonatology
Associate Professor Promotions

- David Ansel
  *Developmental-Behavioral*

- Lisa Bain
  *Neonatology*

- Malathi Balasundaram
  *Neonatology*

- MyMy Buu
  *Pulmonary Medicine*

- Christina Buysse
  *Developmental - Behavioral*

- Ritu Chitkara
  *Neonatology*

- Adam Frymoyer
  *Neonatology*

- Monica Grover
  *Endocrinology*

- Anna Lin
  *Hospital Medicine*

- Stephanie Miller
  *Neonatology*

- Melissa Scala
  *Neonatology*

- Amit Singh
  *Hospital Medicine*

- Nivedita Srinivas
  *Hospital Medicine*

- Lindsay Stevens
  *General Pediatrics*

- Elizabeth Talley
  *Nephrology*

- Marie Wang
  *Hospital Medicine*

- Nicole Yamada
  *Neonatology*

- Eric Zee
  *Pulmonary Medicine*
Professor Promotions

- Manuel Amieva  
  Infectious Diseases
- David Axelrod  
  Cardiology
- Sumit Bhargava  
  Pulmonary Medicine
- Rebecca Blankenburg  
  Hospital Medicine
- Sonia Bonifacio  
  Neonatology
- Jennifer Carlson  
  Adolescent Medicine
- Abanti Chaudhuri  
  Neonatology
- Sharon Chen  
  Infectious Diseases
- Saraswati Kache  
  Critical Care
- Angelle Desiree LeBeaud  
  Infectious Diseases
- Melanie Manning  
  Genetics
- Diana Naranjo  
  Endocrinology
- Natalie Pageler  
  Critical Care
- Jonathan Palma  
  Neonatology
- Dharshi Sivakumar  
  Neonatology
- Andrew Shin  
  Cardiology
- Felice Su  
  Critical Care
Stanford School of Medicine Office of MD Admissions:
• 6800 applications received
• 470 candidates interviewed
• 90 students will matriculate
ANNOUNCING OUR NEW SEMINAR SERIES!

CME Credit Available

Learn more on our website:
pediatrics.stanford.edu/
covidinchildren

COVID-19 IN CHILDREN SEMINAR SERIES

THURSDAYS, 12-1PM

COVID-19 IN CHILDREN: A CONVERSATION WITH
BONNIE MALDONADO, PHILIP PIZZO & CHARLES PROBER
October 1 | Thursday | 12 - 1pm | Zoom
This virtual event will highlight innovative workshops developed by our residents and fellows with their educational mentors who have participated in the 2019-2020 cohort of the Leadership Education in Advancing Diversity Program. All are welcome to participate!
4 Exciting Maternal & Child Health Sessions

- Emerging Stem Cell and Gene Therapies
- Scientific Advances in Diversity, Health Equity, and Social Justice
- The COVID-19 Pandemic and Innovations in School-Age Learning
- Groundbreaking Research from Rising Scientists

Virtual Stanford Maternal and Child Health Research Institute Symposium
FRIDAY, NOVEMBER 6, 2020
Online Poster Viewing Nov. 2-6 | Interactive Poster Sessions Nov. 6

REGISTER NOW!
https://mchri-symposium.eventbrite.com
SCH Clinical Research Intake Portal

med.stanford.edu/mchri/crso/crso-resources

Allows hospital to assess resources needed early during study activation

• Determine operational feasibility
• Plan for hospital staffing/training
• Build SCH costs into study budgets
Hospital Training for SoM Staff Working in SCH

To ensure SoM staff working in SCH are trained on hospital safety and emergency protocols

New HealthStream training will be required:

• Emergency preparedness & codes
• Fire & life safety
• Infection prevention & control
• PCARES
The escalating costs of advanced education and training in medicine and clinical specialties are forcing some scientists to abandon their research careers for higher-paying private industry or private practice careers.

Established by Congress and designed to recruit and retain highly qualified health professionals into biomedical or biobehavioral research careers.

The LRPs counteract that financial pressure by repaying up to $50,000 annually of a researcher's qualified educational debt in return for a commitment to engage in NIH mission-relevant research (not retroactive).

Although organized around broad research areas, the LRPs were never intended to fund research projects. Rather, LRP awards are based on an applicant's potential to build and sustain a research career. The program is portable.
LRP Eligibility Criteria

- Must engage in NIH mission-relevant research
- Conducting qualifying research that represents 50 percent or more of total level of effort and consumes an average of at least 20 hours per week during each quarterly service period.
- Two-year awards; can be renewed.
- Eligibility
  - Residents, postdoctoral fellows, MD fellows, Instructors and Asst Professors
  - US citizen or permanent resident
  - Qualifying educational debt: Debt to institutional base salary ratio of > 20%
- Evaluation Criteria
  - Applicant’s potential to pursue a career in research, including the proposed research activities, mentoring and institutional resources.
- Deadlines
  - Online Application Period: September 1 to November 20, 2020
  - Stanford Internal forms must be authorized by your Department DFA
Guide to the NIH Extramural Loan Repayment Program – Info Session & Panel Discussion

Thursday, October 8, 2020 9-10:30 AM

More info: https://grantwriting.stanford.edu/lrp/
Policy in pediatric nephrology: successes, failures, and the impact on disparities

Jill R. Krissberg¹ • Scott M. Sutherland¹ • Lisa J. Chamberlain² • Paul H. Wise³

Received: 13 May 2020 / Revised: 10 July 2020 / Accepted: 2 September 2020 © IPNA 2020

Abstract
Pediatric nephrology has a history rooted in pediatric advocacy and has made numerous contributions to child health policy affecting pediatric kidney diseases. Despite this progress, profound social disparities remain for marginalized and socially vulnerable children with kidney disease. Different risk factors, such as genetic predisposition, environmental factors, social risk factors, or health care access influence the emergence and progression of pediatric kidney disease, as well as access to life-saving interventions, leading to disparate outcomes. This review will summarize the breadth of literature on social determinants of health in children with kidney disease worldwide and highlight policy-based initiatives that mitigate the adverse social factors to generate greater equity in pediatric kidney disease.

Keywords Advocacy • Policy • Health disparities • Marginalized populations

Pediatric Nephrology
GI Advocacy

Led by: Noelle Ebel, Brian Richter and Lisa Chamberlain

- Mission statement of SPLIT CHANGED to include: advocacy on behalf of all children for equal access to transplant evaluation, organ allocation and equal outcomes after transplantation

- Anti-racism curriculum developed for international SPLIT centers

- Stanford has joined a multi-center study examining social determinants of health for liver transplant recipients

Noelle: nebel@stanford.edu  @NoelleEbelMD
SB 793 (California ban on flavored tobacco) was signed into law on Aug. 28
Vaccines For Children Influenza Excellence Award

Gardner Packard Children’s Health Center and the Complex Primary Care Clinic
Increasing Voter Registration
A Seat at the Table: Centering the Voices of Gun Violence Survivors

Kamaal A. Jones, MD

The following is the winning submission from the Fourth Annual Section on Pediatric Trainees Essay Competition. This year's competition was informed by the 2019–2020 Section on Pediatric Trainees Advocacy Campaign: Protect Kids – Trainees for Firearm Safety. We asked writers to share their experiences as pediatric trainee advocates for gun violence prevention and were impressed by the breadth of entries we received from around the country. The winning essay by Dr Kamaal Jones was focused on amplifying the voice of gun violence survivors. Dr Jones eloquently implores us to offer gun violence survivors “A Seat at the Table,” so that our policies may be shaped by survivors’ lived

Won the National AAP Section of Pediatric Trainees Inaugural Essay Writing Competition Will be published in Pediatrics in October
Placeholder for MD Admissions 5-minute presentation
The three departments with the highest response rates for faculty and the three departments with the highest response rates for trainees will receive $50 per respondent to be used for wellness-related activities. The Department will match the last and current year funds.

Deadline October 13th
More information about the survey can be found at: http://wellmd.stanford.edu/survey.html.
Wellbeing in the Face of Adversity
Dept of Pediatrics
Stanford Pediatrics Advancing Anti-Racism Coalition (SPAARC) Mission Statement

To promote a culture of anti-racism in the Stanford Department of Pediatrics through immediate action, development of nimble systems, and longitudinal commitment to ongoing work, engagement, and progress towards equity.

Dept of Peds URM and Gender Distributions

<table>
<thead>
<tr>
<th>Group</th>
<th>URM %</th>
<th>Women %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents</td>
<td>31%</td>
<td>71%</td>
</tr>
<tr>
<td>Post-docs</td>
<td>12%</td>
<td>60%</td>
</tr>
<tr>
<td>Fellows</td>
<td>17%</td>
<td>69%</td>
</tr>
<tr>
<td>Faculty</td>
<td>8.6%</td>
<td>63.3%</td>
</tr>
<tr>
<td>Staff</td>
<td>15.8%</td>
<td>82.7%</td>
</tr>
</tbody>
</table>

102 Residents
123 Fellows
81 Post-docs
384 Faculty
423 Staff
Themes and launched action items identified through facilitated small group listening sessions and the Delphi survey method with faculty, staff and learners

New Associate Chair for Diversity, Equity and Inclusion

**Faculty, Staff Recruitment & Advancement**
- Use bias mitigating strategies for reviewing CVs
- Signing bonuses for URM professionals

**Racism, HR, & Measuring**
- Create clear policies & processes to address racism
- Create metrics to evaluate and report the state of anti-racism

**Training**
- Training for all DoP members on microaggressions & effective allyship
- Provide opportunities to discuss medical racism

**Leadership Representation**
- Create leadership roles within organization
- Increase representation of URM in leadership roles

**Communication**
- Hold DoP town halls or grand rounds to discuss medical racism/racial health disparities
- Include portraits and imagery celebrating diversity in DoP spaces

**Local Community Engagement & Research**
- Increase mentorship of URM youth across the medical pipeline
- Increase funding for community engagement and community-based participatory research

**Staff Engagement**
- Increase opportunities for staff to raise voice & participate in department-wide initiatives

---

Dr. Caroline Okorie
Weichen Ling
Dr. Elizabeth Talley
Lauren Figg
Dr. Baraka Floyd
Dr. Allison Guerin
Dr. Kim Hoang
Kewana Nichols
Dr. Lahia Yemane
Brian Richter
Dr. Ananta Addala
Melanie Ramirez
Dr. Lisa Chamberlain
Tiyasha De Pinto
FY20 Patient Days
Excluding Nursery

[Chart showing FY20 patient days from September 19 to August 20, with actual, budget, and new forecast lines.]

Stanford Children's Health
Lucile Packard Children's Hospital
Stanford
Interminable Meetings Found Ineffective for Treatment of COVID-19


ABSTRACT

BACKGROUND

Since December 2019, when coronavirus disease 2019 (Covid-19) first emerged in Wuhan city, hospital administrators have attempted to fight the spread of this global pandemic with use of interminable meetings, but little is known about their anti-viral efficacy.

METHODS

We performed an adaptive design block randomized trial of Interminable Meetings (IM) versus Getting Out Of My Way and Letting Me Do My Job (GOMWLMDMJ). Hospitals were randomized to either GOMWLMDMJ or standard of care. Primary endpoints included time to actually care for patients, median stupid questions per unit hour, and level of clinician sardonically anger.

RESULTS

Over a median of 2.8 months of follow up IM was found to be ineffective for curing COVID-19. No patient centered outcome was found to be improved by IM. The primary outcome event (actual patient care) increased by 133.5% in the GOMWLMDMJ group, and 942 of 978 (96.3%) administrators were found to have little or little-to-nothing to do. Waiting my time was found to decrease significantly: RR 0.66; 95% confidence interval [CI], 0.42 to 0.78; P=0.001.

28-day mortality was found to strongly favor a GOMWLMDMJ strategy (hazard ratio, 1.90; 95% CI, 1.83 to 1.97; P<0.001), as was hospital LOS. 6 and 12 hazard ratios, 1.42; 95% CI, 1.10 to 1.84; P=0.007, and ill-conceived mandates by people who have not seen a patient in years were decreased by 89.3% (CI, 76.5% to 111.4%); P=0.02.

Of note powerpoint slide usage decreased significantly RR 0.44 confidence interval [CI], 0.42 to 0.76; P=0.001 as did time spent listening to some blowhard jabber on about some leadership book he once read while muted while trying to accomplish an actual task 3.2 hours CI, 1.1 to 8.6; P=0.03.

CONCLUSIONS

Interminable Meetings were found uniformly ineffective to the treatment of COVID-19. As such their continued role in treatment of the widening SARS-CoV-2 global pandemic should be minimized in favor of actual medicine. Manuscript was written while listening to some blowhard jabber on about some leadership book he once read while muted. ClinicalTrials.gov number, NCT06049216

The authors' full names, academic degrees, and affiliations are listed in the Appendix. Address reprint requests to Dr. Zhong at the State Key Laboratory of Respiratory Disease, National Clinical Research Center for Respiratory Disease, Guangzhou Institute of Respiratory Health, First Affiliated Hospital of Guangzhou Medical University, 151 Yanjiang Rd., Guangzhou, Guangdong, China, or at nanshen@vip.163.com.

*A list of investigators in the China Medical Treatment Expert Group for Covid 19 study is provided in the Supplementary Appendix, available at NEJM.org.

Drs. Guan, Ni, Yu Hu, W. Liang, Ou, He, L. Liu, Shan, Lei, Hui, Du, L. Li, Zeng, and Yuen contributed equally to this article.

This article was published on February 28, 2020, and last updated on March 6, 2020, at NEJM.org.

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Pediatric Wellbeing Champions

Jonathan Avila
Adolescent Med

Joseph Hernandez
Allergy/Immunology

Ritu Asija
Cardiology

Beth Kaufmann
Cardiology

Daniel Tawfik
Critical Care Med

Lynne Huffman
Developmental-Behavioral

Monica Grover
Endocrinology

Clara Lo
Hematology-Oncology

Ami Shah
Stem Cell Transplant

Marwa Haija
Gastroenterology

Lindsay Stevens
General Pediatrics

Dena Matalon
Genetics

Jessica Gold
Hospitalist Med

Xin She
Hospitalist Med

Hayley Gans
Infectious Disease

Lisa Bain
Neonatology

Ritu Chitkara
Neonatology

Cynthia Wong
Nephrology

Caroline Okorie
Pulmonary Med

Joyce Hsu
Rheumatology
**Stanford’s WellMD Professional Fulfillment Model**

**Culture of Wellness**
Organizational work environment, values and behaviors that promote self-care, personal and professional growth, and compassion for ourselves, our colleagues and our patients.

**Efficiency of Practice**
Workplace systems, processes and practices that promote safety, quality, effectiveness, positive patient and colleague interactions and work-life balance.

**Personal Resilience**
Individual skills, behaviors and attitudes that contribute to physical, emotional and professional well-being.
### Strengths

<table>
<thead>
<tr>
<th>Culture</th>
</tr>
</thead>
</table>
| • Wellness imbedded into daily huddles & division meetings  
• Divisions adapting to individual needs developing flexible care models to accommodate challenges in work-life integration  
• Zoom attendance has increased faculty participation in some areas leading to more meaningful group decisions making and social connections |

<table>
<thead>
<tr>
<th>Operational Efficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telemedicine rolled out quickly, well designed and remains a strong aspect of clinical care</td>
</tr>
</tbody>
</table>

### Resilience

Tremendous resilience demonstrated by individuals to adapt to multiple adversities throughout the summer
<table>
<thead>
<tr>
<th>Challenges</th>
<th>Culture</th>
<th>Efficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• High burden on junior faculty</td>
<td>• Pandemic has magnified existing inefficiencies</td>
</tr>
<tr>
<td></td>
<td>• Zoom fatigue</td>
<td>• Access to support variable</td>
</tr>
<tr>
<td></td>
<td>• Difficult to support social interactions</td>
<td>• Inadequate administrative &amp; clinical support for telehealth visits</td>
</tr>
<tr>
<td></td>
<td>&amp; wellness remotely</td>
<td>• Overcensus and high demand</td>
</tr>
<tr>
<td>Resilience</td>
<td>• Isolation</td>
<td>• Distance learning</td>
</tr>
<tr>
<td></td>
<td>• COVID risk &amp; exposure</td>
<td>• Juggling multiple roles</td>
</tr>
<tr>
<td></td>
<td>• Stalled career development</td>
<td></td>
</tr>
</tbody>
</table>
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Ritu Chitkara
Neonatology

Cynthia Wong
Nephrology

Caroline Okorie
Pulmonary Med

Joyce Hsu
Rheumatology
Ideas & Solutions
Efficiency of Practice
Ambulatory Transformation Team Workstreams

- Tripartite Mission: Education/Research
  - Becky Blankenburg, MD
  - Tanja Gruber, MD
  - David Maahs, MD

- Operational Workforce Implications
  - Scott Sutherland, MD
  - Cameron D’Alpe
  - Natalie Pageler, MD
  - Other members from previous clinical workstreams

- Patient Experience
  - Liz Uhlhorn, Admin Director for Patient Experience
  - Sean Bohmer, Patient Experience
  - Jill Sullivan
  - Yasser El-Sayed, MD

- Revenue and Reimbursement
  - Dana Haering, CFO

- Clinical Quality in Ambulatory Transformation & Virtual Care
  - Lane Donnelly, CQO
  - David Larson, MD

- Provider Experience and Wellness
  - Tait Shanafelt, MD
  - Tzielan Lee, MD
  - Carolyn Ford-Hemann

- Promoting Health Equity
  - Lisa Chamberlain, MD
  - Rick Majzun, COO
  - Leslie Truong
  - Christy Sandborg, MD
Pre-Visit Optimization Work In Progress

- Standardize Scheduling Decision Tree
- Maximize Direct Scheduling
- Consolidate Appointment Reminders
- Maximize eCheck-In
- Implement “I’m Here”
- Standardize Tech Check
- Standardize Visit Intake

Virtual Visit

In Person Visit

New Standard Work and Staff/Provider Responsibilities
Improving Wellness Culture
Resilience & Fostering Growth
Julie Collier, PhD
Director of the Office of Professional Fulfillment and Resilience
Stanford Children's Health
SCH Resilience & Well-Being in The Time of COVID

• Naming and framing
  • Calling out buckets of stress/anxiety
    • General COVID stress (e.g., prolonged uncertainty, changing PPE, virtual schooling, loss of social connections, zoom fatigue)
    • COVID+ patient care anxiety
    • Racial justice issues/community unrest
    • Wildfires
    • Election
  
• Help to frame experience
  • Our “psychological surge capacity” is depleted
  • We are all beginners at this; expecting a lot of ourselves to think we’d be managing this well
  • “Ambiguous losses”—loss of connections, freedom to go/do what we want, rituals (graduations, weddings, etc.)

• Message importance of self-compassion
Post-Traumatic Growth: Fostering a Growth Mindset in Times of Adversity

Julie Collier, Ph.D. & Sarah Johnson, MSOD
Kintsugi
Post-Traumatic Growth

• Positive psychological change that is experienced as a result of the struggle with highly challenging life circumstances.

• 7 areas of growth:
  • Greater appreciation of life
  • Greater appreciation and strengthening of close relationships
  • Increased compassion and altruism
  • Identification of new possibilities or a purpose in life
  • Greater awareness and utilization of personal strengths
  • Enhanced spiritual development
  • Creative growth
Post-Traumatic Growth

• Turning adversity into advantage—key is the extent to which we explore our thoughts and feelings surrounding the event.

• Cognitive exploration: defined as a general curiosity about information and a tendency toward complexity and flexibility in information processing—enables us to be curious about confusing situations, increasing the likelihood that we will find new meaning in the seemingly incomprehensible.
“When we are no longer able to change our situation, we are challenged to change ourselves.”

--Victor Frankl
A Team Exercise in Story Telling and Story Listening

1. Acknowledge the Impact
2. Envision the Future
3. Create a Narrative Compass

An Exercise to Help Your Team Overcome the Trauma of the Pandemic
By: Lisa Zigarmi & Davia Larson
September 1, 2020
Acknowledge the Impact

Two personal story prompts, an anecdote or story for each:

• *What is the greatest loss you’ve experienced during COVID-19?*

• *What is the greatest gain you’ve experienced during COVID-19?*
Envision the Future

• What are you learning about yourself during COVID-19?

• What would it look like if you applied your learnings going forward?
Create a Narrative Compass

Two words that compress our story into a succinct guide and help to integrate new self-knowledge into daily work.

- What two words or short phrases will remind you how to apply your learning?
  
  e.g., “kind and consistent
  “focused and fearless”
  “loosen up and let go”
If we don’t allow ourselves to feel what we are going through, then we miss the change that’s waiting for us.

--Christine D’Ercole
Wellness Resources For Pediatrics Faculty and Staff

https://med.stanford.edu/pediatrics/wellness-resources.html

New Slack Channels for parents
• #peds-parents-pre-k-thru-5th-grade
• #peds-parents-6th-grade-thru-8th-grade
• #peds-parents-9th-grade-and-beyond

Our HR team is here to help!
Shawna McManus: smcmanus@Stanford.edu
Director, Academic Affairs & HR Strategies
Joe Noonan: noonanj@Stanford.edu
Associate Director, Human Resources
Tiyasha DePinto: tdepinto@Stanford.edu
Human Resources Manager
Physician Support Services for Challenging Times

• **Faculty Staff Help Center** — Professional counseling for individuals, couples and families to address both work and personal issues
  - 10 free sessions per topic
  - [https://cardinalatwork.stanford.edu/faculty-staff-help-center](https://cardinalatwork.stanford.edu/faculty-staff-help-center)

• **HIP Coaching for Health Care Clinicians** — Certified health and wellness coaches to help you navigate difficult situations at home or work, identify and achieve your goals, and practice self-advocacy and self-compassion
  - $350 for 3 one-hour sessions, $650 for 6 one-hour sessions
  - Approved for STAP and EA (tuition reimbursement) funds

• **WellConnect** — Confidential mental health referral and consultation. Now expanded to cover all physicians (faculty, fellows, and residents)
  - Contact (650) 724-1395 or [wellconnect@stanford.edu](mailto:wellconnect@stanford.edu)

• **Physician Support Network (PRN)** — Confidential conversation with a trained colleague
  - [https://wellmd.stanford.edu/get-help/prn-support.html](https://wellmd.stanford.edu/get-help/prn-support.html)
Department of Pediatrics Call for Solutions

Please help us by contributing your ideas to support wellness in the Department of Pediatrics

Click on this QR code or the hyperlink below to access a Qualtrics survey to share your ideas.

https://stanforduniversity.qualtrics.com/jfe/form/SV_1yTsf96szBSZ7OB
Department of Pediatrics Call for Solutions to Promote Wellness

Please help us brainstorm ways to build actionable solutions to promote a culture of wellness.

What suggestions do you have to improve operational efficiency in the Department of Pediatrics and LPCH (i.e. solutions to reduce inefficiencies and friction)?

What suggestions do you have to promote a culture of wellness (i.e. practices to improve work environment and promote compassion for ourselves)?

What suggestions do you have to promote personal resilience (i.e. empower ourselves to step away and make a wellness choice)?

Anything else to share?