Department of Pediatrics
Faculty Meeting
April 2017

TOPIC: Physician Wellness Survey
Announcements

• Louanne Hudgens, MD, MPH
  • Elected President of the American College of Medical Genetics & Genomics
Chris Almond, MD, MPH

- Awarded $9.4M grant from the DoD to conduct a multi-center RCT investigating whether everolimus can reduce complications in pediatric heart transplantation
- The QSU will support the Data Coordinating Center
- Co-Investigators
  - Seth Hollander, MD
  - Joanne Lee, PhD
  - Scott Sutherland, MD
Announcements

Gail Wright, MD, PhD

- Named the Erin Hoffman Endowed Director of the Single Ventricle Program
Announcements

🌟 Matt Porteus, MD

- Awarded inaugural Chan Zuckerberg Initiative Grant for his studies of genome editing as curative therapies for genetics diseases
Division of SCTRM

- Received IND to use T regulatory cells to prevent GVHD after transplantation in children with hematologic malignancy.
2016 Physician Wellness Survey Results: Improving Professional Wellness

Presentation to Department of Pediatrics
April 17, 2017

Christy Sandborg MD and Dan Murphy MD
on behalf of the Stanford WellMD Center
What we would like to accomplish

3 MAJOR GOALS:

1. Presentation of data from 2016 Physician Wellness Survey
2. How we might use this data to improve the professional wellness* of our physician workforce
3. Most importantly---enough time for discussion about how to move forward

*Professional Wellness----our new approach to shifting the dialogue from “physician burn-out” to focusing on addressing the core drivers of physicians fulfillment in their work---joy in medicine
What is professional fulfillment and resilience?

**Professional Fulfillment:** Happiness or meaningfulness, self-worth, self-efficacy, and satisfaction at work.

*Cohesion between one’s work life and one’s intrinsic values and motivations*

  - Autonomy – Mastery - Purpose
  - Joy in medicine
  - Intrinsic motivations vs extrinsic incentives

**Joy in Medicine/Bliss/Flow**

Berenson and Rice, Health Services Research 2016,
What is Burnout?

BURNOUT*

- Emotional exhaustion
- Depersonalization
- Cynicism

*Maslach Burnout Inventory

- Compassion fatigue, low energy and interest
- Loss of empathy with patients and coworkers
- Loss of trust in “system”
- Loss of confidence, guilt, ineffectiveness
Stanford Wellness Survey 2013 and 2016 comparison

- Custom survey developed by Stanford physician wellness team
- All SHC and LPCH Medical Staff members included
- 2016 response rate 54% (1281 out of 2392) compared to 2013 rate of 35% (831 out of 2384)

Stanford data is in line with national trends—Shanafelt et al Mayo burnout surveys:
- 2011 burn-out = 45%
- 2014 burn-out = 54%
Comparison of burn-out and professional fulfillment between all Stanford Medicine and the Department of Pediatrics by academic line

<table>
<thead>
<tr>
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<th>All Stanford Medicine MDs</th>
<th>Department of Pediatrics</th>
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<tr>
<td>% Physicians who are burned-out</td>
<td></td>
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<tr>
<td>CE</td>
<td>37% 39%</td>
<td>36% 29%</td>
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<tr>
<td>MCL</td>
<td>23% 18%</td>
<td>19% 13%</td>
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<tr>
<td>UTL</td>
<td>12% 11%</td>
<td>17% 8%</td>
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<tr>
<td>Community</td>
<td>33% 27%</td>
<td>30% 30%</td>
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</table>

% Physicians who are burned-out
- Faculty with clinical focus (CE & MCL)
- Early to mid-career greater than senior

% Physicians who are highly professionally fulfilled
- Faculty with research focus (UTL)
- Community physicians
Burnout & Professional Fulfillment Rates among Women & Men in 2016 (n > 1200)

- **Burnout**
  - Total: 33%
  - Men: 28%
  - Women: 39%

- **High Professional Fulfillment**
  - Total: 17%
  - Men: 20%
  - Women: 13%
Burnout & Professional Fulfillment Rates among Women & Men in 2016 (n ≈ 200)

- **Burnout**
  - Total: 33%
  - Men: 22%
  - Women: 38%

- **High Professional Fulfillment**
  - Total: 13%
  - Men: 13%
  - Women: 13%
Department of Pediatrics Burnout Rates vs Other Departments

- All child health specialists at LPCH: 36%
- Department of Pediatrics: 33%
- Average of all SOM Departments: 33%
High Professional Fulfillment for Department of Pediatrics vs other Departments

- All child health specialists at LPCH: 16%
- Average of all SOM Departments: 13%
- Department of Pediatrics: 13%
1. **Burn-out is known to cause increased medical errors, decreased patient satisfaction and decreased team morale**

2. **Burned-out physicians leave at twice the rate as physicians without burnout**

Characteristics of physicians who left within 2 years after 2013 Survey:

- **BURNED-OUT**: 21%
- **NO BURN-OUT**: 10%

**Financial Impact:** Based on the 2016 survey, 70 physicians may leave Stanford due to burnout with an estimated loss of $17,500,000 to $70,000,000 ($250,000-$1,000,000/physician depending on rank and line)

*Reducing burnout to half, may save $8,750,000 to $35,000,000 over 2 years*

3. **Burned-out physicians are 2.3 times more likely to receive high numbers of unsolicited patient complaints, a measure correlated with increased malpractice risk.** *(Data are based on Vanderbilt’s multicenter PARS Program that identifies physicians at high-risk for malpractice claims)*
Drivers of Burn-out

1. Strongest Drivers of Burnout
   I. Low Self-Compassion
   II. Sleep-Related Impairment
   III. Low Meaningfulness of Clinical Work

2. Associated with lower leadership support
   I. Low Perceived Appreciation
   II. Poor Control of Schedule
   III. Low Peer Support
   *All three were associated with lower Leadership Support*

3. Efficiency of Practice
   I. Perceived Negative EHR Experience
Prevalence of Burnout by Self-Compassion

- Lowest Quartile (n=350): 60%
- Second Quartile (n=318): 36%
- Third Quartile (n=277): 23%
- Highest Quartile (n=298): 10%
Drivers of Professional Fulfillment

1. **Strongest Driver of Fulfillment**
   - I. Perceived Appreciation
   - II. Personal/Organizational Values Alignment
   - III. Peer Support
   
   *All three were associated with Leadership Support*

2. **Personal Resilience**
   - I. Meaningfulness of Clinical Care
   - II. Self-Compassion
   - III. Low Sleep-Related Impairment

3. **Efficiency of Practice**
   - I. High Perception of EHR Helpfulness
Effective Leadership Support Drives High Fulfillment

High Professional Fulfillment, by Quartiles of Perceived Leadership Support

- Lowest quartile (n=258): 9%
- Second quartile (n=310): 11%
- Third quartile (n=226): 16%
- Highest quartile LQ (n=292): 29%

Average: 17%
Which Leadership Questions Are Action Items?

My immediate supervisor:
• Holds career development conversations with me
• Empowers me to do my job
• Encourages me to suggest ideas for improvement
• Treats me with respect and dignity
• Provides helpful feedback and coaching on my performance
• Recognizes me for a job well done
• Keeps me informed about changes taking place at Stanford
• Encourages me to develop my talents and skills
• Overall, how satisfied are you with your immediate supervisor?

(derived from Shanafelt et al, 2015)
Leadership Support and Professional Fulfillment

- 40% of professional fulfillment is driven by appreciation, values alignment and peer support.
- Support from immediate supervisors (e.g., Division Chiefs and Chairs) was correlated with all 3 measures.
Potential Wellness Strategies Rankings

• **Highest ranked strategies (>60% agreed)**
  – Promote leadership traits associated with professional satisfaction
  – Recognize and support of physician wellness from leaders
  – More flexibility in scheduling clinical work
  – Empower physicians and staff to re-engineer clinical processes
  – Increased physician involvement in decisions regarding training, selection and management of support staff
  – Free healthy snacks, conveniently located

• **Ranked by 50-60%**
  – Increase collegiality and mutual support
  – Documentation assistance (eg., scribes)
  – Positive psychology approaches to emphasize learning not blaming
WellMD Model of Professional Wellness

1. Culture of Wellness
2. Personal Resilience
3. Efficiency of Practice

WellMD Center Leadership
Interim Director: Bryan Bohman MD
Mickey Trockel MD PhD
Maryam Hamidi PhD
Mary Lou Murphy MS
Patty De Vries MS

WellMD Steering/Advisory Committee
Bryan Bohman MD
Mickey Trockel MD PhD
Rebecca Smith-Coggins MD
Dana Welle DO JD
Daniel Murphy MD
Christy Sandborg MD
Mimi Albert MPH

Decanal Oversight: Norm Rizk and Denny Lund
1. Culture of Wellness:
   - Leadership engagement and development to assist in the development of a culture that demonstrates support and appreciation for physicians and prioritizes their professional health

2. Efficiency of Practice
   - Wellness advocacy for process improvements that facilitate efficiency of physicians’ practice while helping all members of the health care team practice at the top of their licensure

3. Personal Resilience
   - Creation of programs and tools to promotes and evaluate self-compassion and improved sleep quality, working toward precision health for Stanford physicians
Next steps for WellMD Center leadership: How we will move the needle--now

• **Culture of Wellness:**
  – Share survey data with Chairs and Division Chiefs
  – Coaching to leadership qualities and individual/team
  – Peer support, appreciation, values alignment
  – *Design process across Stanford Medicine to ensure accountability for improvements in professional wellness*

• **Efficiency of Practice**
  – Frontline physician engagement in improvement activities related to clinical, research or other domains
  – Performance improvement initiatives for decreasing burden of physician non-value added work in clinical enterprises

• **Personal Resilience**
  – Personal resilience strategies and tools
  – Identify the elements of your work that you are most passionate about—(joy, bliss, meaning)
Current resources and pilot programs

- WellMD website [https://wellmd.stanford.edu](https://wellmd.stanford.edu)
  - Resources – personal resilience strategies and trainings, healthy lifestyle
  - Resources for physicians with stress and burnout
  - Links to anonymous validated tools for stress, burnout, emotional intelligence, happiness, depression, etc

- Physician Wellness Committee (previously called SCPSS)


- Department of Pediatrics ongoing pilot study of small teams of early and mid-career faculty within individual divisions to facilitate solving local thorny problems of their choice
Next Steps: Building the WellMD Center

• Recruitment of the leader of the WellMD Center
• Build academic research and educational programs around professional wellness
  – Continue leadership of the Physician Wellness Academic Evaluation Consortium*
  – Participation in national and international conferences
    • Stanford WellMD Center hosting inaugural 2017 American Conference on Physician Wellness in San Francisco
    • AMA Joy in Medicine for CMOs, COOs, CXOs
  – Research programs: 18 peer reviewed publications in 2014-2016 from members of the Stanford Wellness Committee and the WellMD Center

*Current members: CHOP, Boston Medical Center, Christiana Care at Jefferson University. Brigham & Womens in process
Department of Pediatrics Survey Response Rate

Total

Pediatrics
Physicians who took the 2013 survey are now more burned out and less professionally fulfilled in 2016.

*Changes in Burnout and High Professional Fulfillment in the same group* of physicians who took both the 2013 and 2016 surveys

- **Burnout:**
  - 2013: 26%
  - 2016: 39%

- **High Professional Fulfillment:**
  - 2013: 24%
  - 2016: 14%

*Compares only subset of physicians who agreed to be tracked longitudinally n=472). Note higher percentage of burnout overall in this subset compared to total of 33% burnout.
Physicians reporting burnout, by faculty line and gender, 2016

- Clinician Educator: 32% Male, 40% Female
- Med Center Line: 31% Male, 46% Female
- University Tenure Line: 24% Male, 22% Female
- Adjunct Clinical Faculty or Community Physician: 12% Male, 26% Female
High Professional Fulfillment, by faculty line and gender, 2016

- Clinician Educator
  - Male: 12%
  - Female: 11%

- Med Center Line
  - Male: 21%
  - Female: 11%

- University Tenure Line
  - Male: 36%
  - Female: 22%

- Adjunct Clinical Faculty or Community Physician
  - Male: 33%
  - Female: 26%
Culture of Wellness Strategies Rated Highly

- Strategies to promote leadership traits associated with improved professional satisfaction (70% all others, 66% pediatrics)
- Clear recognition and support of importance of physician wellness from leaders (68% all others, 63% pediatrics)
- Allowing more flexibility in scheduling of clinical work (68% all others, 60% pediatrics)
- Strategies to increase collegiality and mutual supportiveness in our medical community (64% all others, 54% pediatrics)
Efficiency of Practice Strategies Rated Highly

- **Empower physicians and staff to re-engineer clinical processes and flows:** 66% (All Others), 63% (Pediatrics)
- **Increased physician involvement in decisions regarding training, selection, and management of support staff:** 66% (All Others), 59% (Pediatrics)
- **Documentation assistance (e.g. scribes):** 55% (All Others), 49% (Pediatrics)
- **Improved EPIC rapid-response help:** 41% (All Others), 35% (Pediatrics)
- **One-on-one EPIC coaching:** 38% (All Others), 34% (Pediatrics)
Personal Resilience Strategies Rated Highly

- Free, healthy, conveniently located snacks for physicians: 64% (All Others), 59% (Pediatrics)
- Positive psychology strategies to emphasize learning from mistakes more than blaming self or others: 51% (All Others), 45% (Pediatrics)
- A place to take a short nap: 41% (All Others), 40% (Pediatrics)
- Mindfulness meditation resources (e.g. courses, spaces to meditate, apps): 40% (All Others), 35% (Pediatrics)
- Individual evidence based strategies to improve sleep for optimal performance: 39% (All Others), 31% (Pediatrics)