Wellbeing in Your Residency Program

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May 11, 2019
Disclosures

• No disclosures
Outline

• Who are we?
• Scope of the problem
• ACGME requirements
• CLER visit
• Our approach
• Next steps
• Resources
Who are we?

• 120 resident program
• MD, DO & IMG
• Partner Institutions
  – Residents & fellow employed by 3rd party
  – GME office oversees all programs
  – 3 primary hospital sites
Burnout affects our trainees

- Survey of 74% of all internal medicine residents
  - 51% reported at least 1 symptom of burnout
  - ~15% reported quality of life to be “somewhat bad” or “as bad as it can be”
  - ~33% reported dissatisfaction with work like balance
  - ~46% reported emotional exhaustion at least once weekly

Acknowledgement of Burnout

2015: held its first symposium on Physician Well Being

2017: Resident requirement: Competence in wellbeing

The ACGME Second Symposium on Physician Well-Being: Commitment to Change
ACGME 2019 Requirements*

- In conjunction with partner institution:
  - Minimize non-physician tasks
  - Attention to work demands
  - Evaluate workplace safety
  - Provide time for medical/dental appointments

*draft
ACGME 2019 Requirements*

• In conjunction with partner institution:
  – Educate, Monitor & Notify
    • Encourage reporting to PD or designated person
    • Provide tools for self-assessment
    • access to mental health service

• Within your program allow for leave
  – Policy & procedure to ensure patient care
  – Implemented without fear of repercussion

*draft
The Reciprocal Domains of Physician Well-Being

Chart illustrating the 3 domains of physician well-being, with each domain reciprocally influencing the others.

- Culture of Wellness
- Efficiency of Practice
- Personal Resilience

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CLER Visit
Our Path

- **July 2016** – Chosen as PIP
- **2017**
  - Retreat (2\(^{nd}\) & 3\(^{rd}\) years): focus on mindfulness, stress, cbt, physical activity, lifestyle modification
- **2018**
  - Wellness lunches (2 per site)
  - Retreat (2\(^{nd}\) & 3\(^{rd}\) years): focus on community and wellness activities
- **2019**
  - Wellness lunches (2) & breakfast
  - Retreat (2\(^{nd}\) and 3\(^{rd}\) years): focus on volunteerism
Self Care Retreat

Create S.M.A.R.T. Goals

- SPECIFIC
- MEASURABLE
- ACHIEVABLE
- REALISTIC
- TIMELY

Mind Full, or Mindful?

STRESS MANAGEMENT IN YOUR LIFE

- MEDITATION
- DEEP BREATHE
- EXERCISE
- GET MOVING
- TIME IN NATURE
- SLEEP WELL
- REDUCE CAFFEINE
- CONNECT SOCIALY
- JOIN A CLUB
- EAT WELL
- RELAXATION
- MAKE LISTS
- PRIORITIZE TASKS
Self & Surroundings Retreat
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Wellness Meals

- Replace existing commitment
- During work day
- “Good Food”
- Run by chiefs
- Faculty selected by residents
- No “agenda”
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MBI Breakdown by Question

- IM 1/2017 (n=63)
- IM 7/2017 (n=15)
- IM 10/2017 (n=80)
- IM 3/2018 (n=68)
- IM 10/2018 (N=75)
Counseling Services

• For FREE consultation and/or counseling services, Capital Area Health Consortium (CAHC) residents/fellows may contact any of the providers listed below.

• There is NO need to notify your Program Director, the CAHC or Anthem Blue Cross

• UConn’s Employee Assistance Program, Liz Robinson, LMFT, David Francis, LPC, Allyson Powell, LCSW
  195 Farmington Avenue – Suite 2000, Farmington
  860.679.2877

OR

• Mary Ayre, MD
  682 Prospect Street, Hartford
  860.233.1141
• Angela A. Cappiello, MD
  49 Welles Street, Suite 216, Glastonbury
  860.430.1997
• Eric Chamberlin, MD
  49 Welles Street, Suite 202, Glastonbury
  860.659.4010
• Alfred Herzog, MD
  200 Retreat Avenue, Hartford
  860.545.7877
• Lisabeth Johnston, APRN
  361 Park Road, West Hartford
  860.523.1101

To verify employment, please bring a current pay stub to each appointment. There is NO cost for this service.
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Our Efforts to Date
VI.C.1. The responsibility of the program, in partnership, to address well-being must include:

<table>
<thead>
<tr>
<th>VI.C.1.a) efforts to enhance meaning</th>
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<tbody>
<tr>
<td>protecting time with patients</td>
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<td>minimizing non-physician obligations</td>
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<td>providing administrative support</td>
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<td>promoting progressive autonomy and</td>
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<td>flexibility</td>
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<td>enhancing professional relationships</td>
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<th>VI.C.1.b) resident well-being</th>
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<tr>
<td>scheduling</td>
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<td>work intensity</td>
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<td>work compression</td>
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<th>VI.C.1.c) evaluating workplace safety data</th>
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<td>addressing the safety of residents and faculty members</td>
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<th>VI.C.1.d) policies and programs for well-being</th>
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<td>VI.C.1.d).(1) Opportunity to attend healthcare appointments</td>
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<th>VI.C.1.e) attention to</th>
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<td>burnout</td>
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<td>depression</td>
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<td>substance abuse</td>
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<td>means to assist</td>
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<td>educated to recognize</td>
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<tr>
<th>VI.C.1.e).(1) encourage alerting the PD</th>
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<td>Program</td>
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<th>VI.C.1.e).(2) provide tools for self-screening</th>
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<td>GME</td>
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<th>VI.C.1.e).(3) provide 24/7 access to mental health</th>
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<td>Consortium</td>
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<th>VI.C.2. Allow for Leave</th>
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<tr>
<td>VI.C.2.a) policy &amp; procedure for patient care</td>
</tr>
<tr>
<td>VI.C.2.b) implemented without fear</td>
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Next Step: Wellbeing Committee

- Membership: faculty, chiefs, residents
- Mission: engage in change
- Top Priorities
  - Best practice for medical appointments
  - Identify pain points at each site
  - Launch QI projects at each site
Promote Medical Appointments

QI Projects for pain points at all 3 hospitals

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Resources

• AMA Steps Forward
• ACP Wellbeing website: https://www.acponline.org/practice-resources/physician-well-being-and-professional-satisfaction
• UConn GME Wellness website: https://health.uconn.edu/graduate-medical-education/wellness/
Questions?

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