Keeping Humans at the Center
Resilience in Health Care

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Director, CU SOM Resilience Program
Intentions

- Safe psychological space
- Building a culture of compassion
- Feeling of a deep sense of belonging – everyone matters
## Objectives

<table>
<thead>
<tr>
<th>Awareness</th>
<th>Skills</th>
<th>Strategies</th>
<th>Culture</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What are you experiencing?</td>
<td>• What specific practice did you learn?</td>
<td>• How might you incorporate those skills into day-to-day?</td>
<td>• What values are surfacing in these activities that will add to our systems?</td>
</tr>
</tbody>
</table>
Compassion Pod

• Set it up
  • 3 people you aren’t familiar with
  • Work with this pod over the day
  • Job is to take care of yourself, and also create space and care for the others

• Each person will talk for 2 minutes, the other two listen with intention, say “what else”
  • Why did you come to this conference today? What do you hope to get out of it?
Resilience In Health Care
Objectives

- Define resilience, burnout, and second victim among health care providers
- Discuss the physiologic effects of stress
- Review evidence based tools to promote resilience
What is Resilience?

Life is not about how fast you run or how high you climb but how well you bounce.

~Vivian Komori

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Resilience

- Resilience is the process of negotiating, managing and adapting to significant sources of stress or trauma.
- Assets and resources within the individual, their life and environment facilitate this capacity for adaptation and “bouncing back” in the face of adversity.
- Across the life course, the experience of resilience will vary.

### Broader consequences of working in a stressful environment

| Emotional Exhaustion | Depersonalization | Reduced sense of accomplishment and achievement |

Compassion Fatigue

- Direct Result of exposure to another persons trauma, Mirrors PTSD- Avoidance, numbness, hyper arousal

Second Victim

- Adverse clinical event occurs, Provider is traumatized by the event

Secondary Traumatic Stress

Symptoms and emotional responses resulting from work with persons experiencing trauma, thought to be synonymous with *compassion fatigue*

Closely parallels PTSD

## Symptoms of STS

<table>
<thead>
<tr>
<th></th>
<th>Arousal</th>
<th>Avoidance</th>
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</thead>
<tbody>
<tr>
<td>Fear/anxiety</td>
<td>Compulsive behavior</td>
<td>Procrastination</td>
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<tr>
<td></td>
<td></td>
<td>Dread</td>
</tr>
<tr>
<td>Obsessive thoughts</td>
<td>Poor concentration</td>
<td>Depression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hopeless</td>
</tr>
<tr>
<td>Sleep problems</td>
<td>Weight gain/loss</td>
<td>Self Rx</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Constriction</td>
</tr>
<tr>
<td>Irritability/easily</td>
<td>Somatization (HA, digestive, HTN)</td>
<td>Relational problems</td>
</tr>
<tr>
<td>angered</td>
<td></td>
<td>Diminishing self-care</td>
</tr>
<tr>
<td>Impulsive</td>
<td>Immune problems</td>
<td>Isolation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rumination</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Blame</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Entitlement</td>
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</table>
Prevalence

54% of Physicians report at least one symptom of burnout\textsuperscript{1}

50% of nurses are emotionally exhausted\textsuperscript{2}

2 in 3 have difficulty sleeping

1 in 4 are clinically depressed

<table>
<thead>
<tr>
<th>Social Workers</th>
<th>Interpreters</th>
<th>IT, Administration, Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>• About half the average working life compared to nurses(^1)</td>
<td>• Interpreters express <em>feelings of distress and burnout</em>(^2)</td>
<td>• Working in the pediatric health care setting is challenging for all disciplines</td>
</tr>
</tbody>
</table>

2. Journal of Psychological, Social and Behavioral Dimension 2016
Impact of Burnout in Health Care

Medical Error and Mortality\textsuperscript{1-3}

Impaired professionalism\textsuperscript{5,6}

Reduced patient satisfaction\textsuperscript{7}

Staff turnover and reduced hours\textsuperscript{8,12}

Depression and Suicidal Ideation\textsuperscript{9,10}

Motor vehicle crashes and near misses\textsuperscript{11}

\textsuperscript{1}\textit{JAMA} 296:1071, \textsuperscript{2}\textit{JAMA} 304:1173, \textsuperscript{3}\textit{JAMA} 302:1294, \textsuperscript{4}\textit{Annals IM} 136:358, \textsuperscript{5}\textit{Annals Surg} 251:995, \textsuperscript{6}\textit{JAMA} 306:952, \textsuperscript{7}\textit{Health Psych} 12:93, \textsuperscript{8}\textit{JACS} 212:421, \textsuperscript{9}\textit{Annals IM} 149:334, \textsuperscript{10}\textit{Arch Surg} 146:54, \textsuperscript{11}\textit{Mayo ClinProc} 2012, \textsuperscript{12}\textit{Mayo ClinProc} 2016
So what do we do about it?
Treatment of burnout solely as a disease or failure of individual practitioners is unlikely to be effective. Rather, the individual and system drivers of burnout also need to be addressed.
Key Drivers of Burnout and Engagement

Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout.

- Workload and Job Demands
- Control and Flexibility
- Meaning in Work
- Organization culture and values
- Efficiency and resources
- Social support and community at work
- Work-life integration

<table>
<thead>
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<th>9 Strategies</th>
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<tbody>
<tr>
<td>Acknowledge and assess the problem</td>
</tr>
<tr>
<td>Harness the power of leadership</td>
</tr>
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<td>Develop and implement targeted interventions</td>
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<tr>
<td>Cultivate community at work</td>
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<tr>
<td>Use rewards and incentives wisely</td>
</tr>
<tr>
<td>Align values and strengthen culture</td>
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<tr>
<td>Promote flexibility and work-life integration</td>
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<tr>
<td>Provide resources to promote resilience and self-care</td>
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<tr>
<td>Facilitate and fund organizational science</td>
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</table>

Drivers of Burnout\textsuperscript{1}

- Loss of Meaning in work
- Loss of Flexibility
- Workload and Inefficacy
- Work-life integration

Intrinsic Motivators\textsuperscript{2}

- Connection
- Purpose
- Mastery
- Autonomy

\textsuperscript{1}Swensent et al. *Journal of Healthcare Management*. 61:2 March/April 2016
\textsuperscript{2}Daniel Pink. *Drive*
# STRESS

The body’s response to a stressor or change that creates demands

<table>
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<tr>
<th>Eustress, Positive Stress</th>
<th>Distress, Chronic Stress</th>
</tr>
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<tr>
<td>• Motivates, focuses energy.</td>
<td>• Causes anxiety or concern.</td>
</tr>
<tr>
<td>• Is short-term.</td>
<td>• Can be short- or long-term.</td>
</tr>
<tr>
<td>• Is perceived as within our coping abilities.</td>
<td>• Is perceived as outside of our coping abilities.</td>
</tr>
<tr>
<td>• Feels exciting.</td>
<td>• Feels unpleasant.</td>
</tr>
<tr>
<td>• Improves performance.</td>
<td>• Decreases performance.</td>
</tr>
<tr>
<td></td>
<td>• Can lead to mental and physical problems.</td>
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Physiologic Response to Stress

- Fear
- Anxiety

Physical Response
- Cortisol
- Increased HR

Emotional Response
Diaphragmatic Breathing

• Expansion of the abdomen with each breath
• Inhale to count of 10, exhale to count of 10
• At least 3 breaths
Evidence based approaches to promote resilience

- Connecting to Values and Purpose
- Peer Support
- Mindfulness
- Joy and Gratitude at Work
Connecting with Joy and Gratitude at Work
What if joy in practice were a core metric of our health care system? What if every new policy and technology was assessed in part for its impact on the people who are doing the work?"

NEJM Catalyst
Christine Sinsky
AMA Vice President for Professional Satisfaction
IHI Framework for Improving Joy in Work

- Physical and Psychological Safety
- Meaning and Purpose
- Choice and Autonomy
- Recognition and Rewards
- Participative Management
- Camaraderie and Teamwork
- Daily Improvement
- Wellness and Resilience
- Real-Time Measurement

Those who see “life” as everything outside of work, necessitating “balance” implicitly assume that when you're at work, you’re not fully alive, a sad state of affairs for those of us who are in a profession that is capable of providing such deep rewards (and that takes up so much of our waking existence).”
What CAN We Do?

We can’t control the events

We can control our emotional response to those events
Between stimulus and response there is a **space**.

In that space is our power to choose our **response**.

In our response lies our growth and our **freedom**.

--Victor Frankl
What is your purpose?

**Purpose** provides a mission, set of values, integrity

| What are your **values**? | What do you **strive** for? | Why are you **doing** this? |
“Being with patients in these moments certainly had its emotional cost, but it also had its rewards. I don’t think I ever spent a minute of any day wondering why I did this work, or whether it was worth it. The call to protect life—and not merely life but another’s identity, it is perhaps not too much to say another’s soul—was obvious in its sacredness.”
If we spend even 20 percent of our work time in the activities that we regard as the most meaningful, we’re much less likely to be burned out, meaning that we’re more able to tolerate the difficult moments.
Purpose

• Work with your compassion pod
  • The speaker speaks, uninterrupted, the listeners’ job is to listen, only ask “what else?”

• Why do you do the work that you do? What brings you energy and joy?
“The negative screams at you, but the positive only whispers...”

-- Barbara Fredrickson

We are hardwired to remember the negative
For 7 days, reflect on the positive, and your role in bringing it about

Write down 3 good things every night—best time is right before sleep onset

Better sleep quality, positive interactions, see positive patterns after 4-5 days of doing this exercise
Three good things

Seligman, Steen, Park & Petersen, 2005
Replay the past 24 hours in your mind

• What surprised you?
• What touched you?
• What inspired you?
Random acts of Kindness

Doing a kindness produces the single most reliable momentary increase in well-being of any exercise that has been tested

Find one wholly unexpected kind thing to do tomorrow and just do it. Notice what happens to your mood.

-- Martin Seligman, 2011
We are all in this together!

Thank you!