



Provider Well-Being: *We Need Not Always Be Heroes*

Sansea L. Jacobson, M.D.

Associate Professor of Psychiatry, University of Pittsburgh
2021 Virtual STAR Center Conference - Workshop #2-J
Friday, May 14th, 2021, 2:15-3:30 P.M.

Disclosures

No financial disclosures

STAR-Center Psychiatrist

Child & Adolescent Psychiatrist at the STAR-Center since 2007

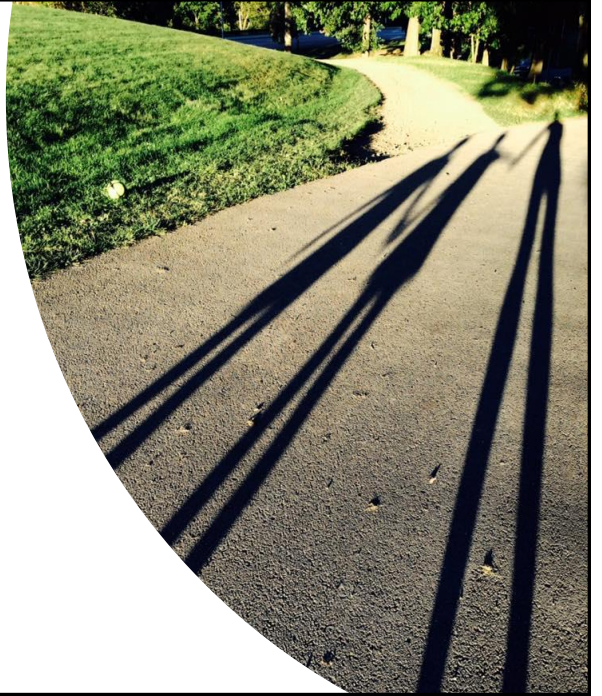
UPMC GME WELL Co-Chair

Co-lead the committee that supports the well-being of the 1700 residents across UPMC



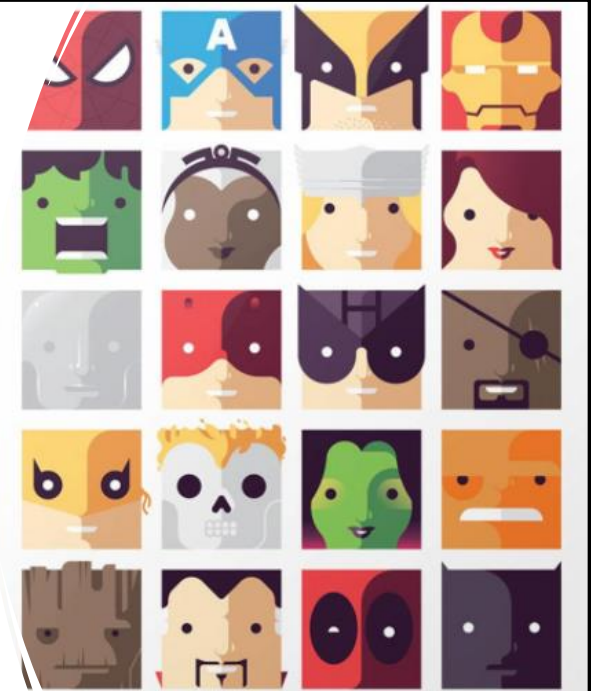
My Relevant Disclosures

- ✓ Single full-time working mom
- ✓ Have sought therapy for myself
- ✓ Wore a suit coat with pajama bottoms
- ✓ The word **wellness** makes me cringe



3

Who are you?



4

Please go to
www.menti.com

(Then enter the code in the chat)

5

Agenda

1. Why well-being?
2. Systems Solutions
3. Individual Solutions

6

Learning Objectives

1

List 3 negative outcomes related to unaddressed provider burnout

2

Describe the relationship between burnout, depression and suicide

3

Name a method or resources to help improve provider well-being

7

Part 1

BACKGROUND:
WHY WELL-BEING?

UPMC
LIFE
CHANGING
MEDICINE

8

8

Burnout

A state of mental and physical exhaustion related to work or caregiving activities



WHAT IS BURNOUT?

#1

EMOTIONAL EXHAUSTION

#2

DEPERSONALIZATION

#3

LOW SENSE OF
PERSONAL ACHIEVEMENT

WELLToolkit

9

Event or series of events that betrays one's deeply held values, morals and ideologies



Moral Injury



Disenchantment

(Trauma syndrome)

Event or series of events that cause unreasonable physical and emotional burdens



Burnout

(Stress phenomenon)

(Kamran-Morley, 2021)

10

I am not immune, and you aren't either.

11

Clinicians have shared and unique stressors

- **Acute stressors** (e.g. patient morbidity/mortality, medical error, system dissatisfaction, license restrictions, malpractice lawsuits)
- **Chronic stressors** (e.g. difficulty unplugging from job, workload compression, professional isolation)

Relationship problems
or domestic violence



Financial problems



General job problems
(concerns about job
security, increased
work demands, etc.)



License restriction



Being named as
defendant in a lawsuit



Professional isolation



12

Gender and Sexual Minority Burnout Factors

Physician Burnout Research (2019)

- **Gender Differences**
 - 48% women vs. 38% men experienced burnout
 - Women are more likely to suffer **emotional exhaustion**
 - Men are more likely to describe **depersonalization**
- **Sexual Minority Considerations**
 - **LGBTQ+ professionals** face additional unique challenges and discrimination that can exacerbate isolation and burnout

(Buis, NAM Discussion Paper, 2019)

WELLToolkit 

13

Burnout in Racial and Ethnic Minorities

Research shows that adverse experiences and feelings of isolation related to race correlate with burnout among minority students and may be related to increased attrition.

- In a 2018 JAMA study, three themes emerged:
 1. **Discrimination:** Experience of DAILY bias and microaggressions I the workplace
 2. **Minority Tax:** Being asked to serve as race/ethnicity “ambassadors” to help resolve issues of diversity
 3. **Identity:** Dichotomy between professional and personal identity

Osseo-Asare A, Balasuriya L, Huot SJ, et al. Minority Resident Physicians' Views on the Role of Race/Ethnicity in Their Training Experiences in the Workplace. JAMA Netw Open. 2018;1(5):e182723.

WELLToolkit 

14

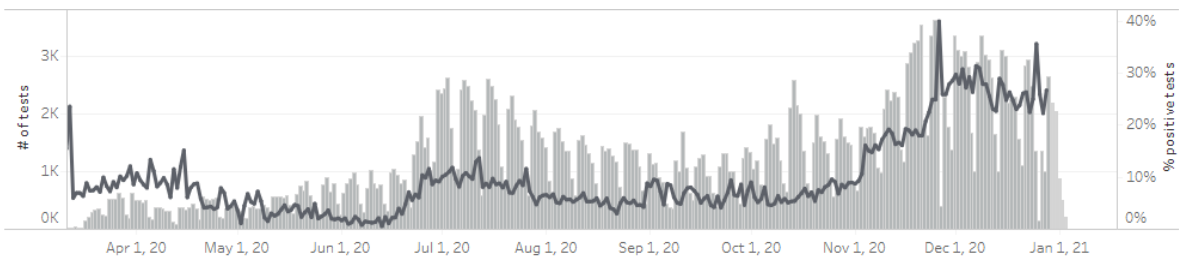
Contributors to and Consequences of Burnout



Burnout has many potential negative outcomes, and yet is **NOT** an independent risk factor for suicide without depression. (Menon, 2020)

*Based on scale 1-7, with 1 responses equal to "does not contribute at all" and 7 equal to "significantly contributes."
Source: Medscape Lifestyle Report 2016: Bias and Burnout; published Jan 13, 2016

15



And then there was COVID-19...



16

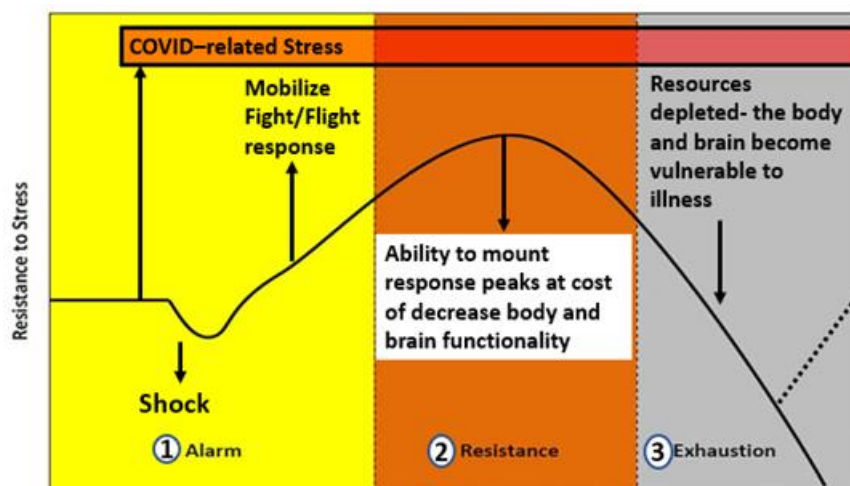


Pandemic stressors specific to healthcare:

- Anticipatory anxiety
- Concerns regarding PPE
- Increased isolation
- Secondary trauma
- Pregnancy and childcare
- Risk of exposure
- Career disruption
- Technology frustrations
- Work-home boundaries

17

Stages of Stress Response



Based on the Selye's Adaptation Model

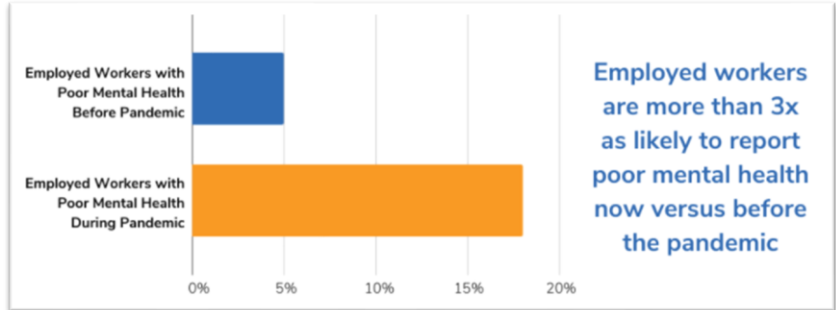
18

Employed Workers during COVID-19

A 2020 pandemic study of employed workers revealed that **42%** reported stress levels were HIGH or VERY HIGH.

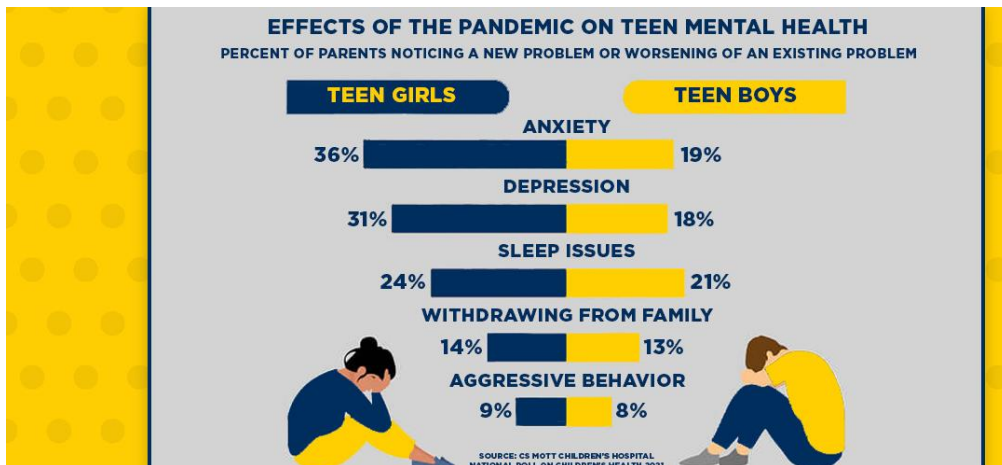
The top stressors:

- COVID-19
- Personal finances
- Current events
- Family health
- Economy
- Job responsibilities



<https://www.flexjobs.com/blog/post/flexjobs-mha-mental-health-workplace-pandemic/>

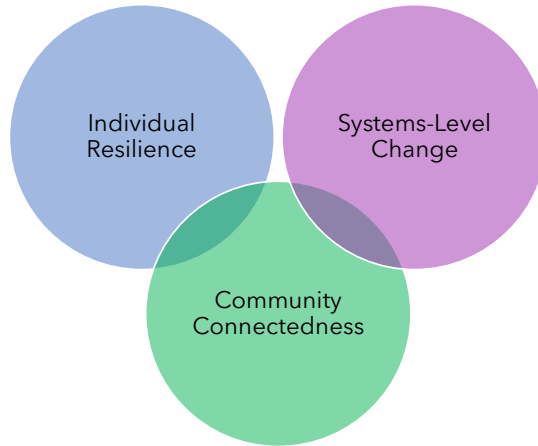
46% of parents say their teen has shown signs of a new or worsening mental health condition since the start of the pandemic



SOURCE: C.S. MOTT CHILDREN'S HOSPITAL NATIONAL POLL ON CHILDREN'S HEALTH 2021

2021 C.S. Mott Children's Hospital National Poll on Children's Health at Michigan Medicine

So what can we do?



21

Part 2

RESOURCES:
SYSTEMS-LEVEL

22

22

Only Your Boss Can Cure Your Burnout

People refer to various forms of malaise as “burnout,” but it’s technically a work problem. And only your employer can solve it.

OLGA KHAZAN MARCH 12, 2021



Don't let wellness initiatives be *lipstick on a pig!*

“We need to stop blaming individuals and treat burnout as a **SYSTEM** issue...” if it affects half our professionals, it is indirectly affecting half our patients...

-Tait Shanafelt, M.D.

23

VIEWPOINT

Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic

We must ask the questions to know the answers:

1. **Hear me**
2. **Protect me**
3. **Prepare me**
4. **Support me**
5. **Care for me**

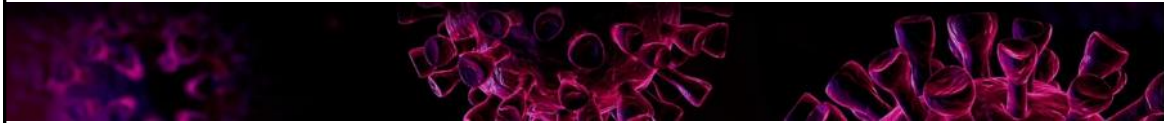
Table. Requests From Health Care Professionals to Their Organization During the Coronavirus Disease 2019 Pandemic

Request	Principal desire	Concerns	Key components of response
Hear me	Listen to and act on health care professionals' expert perspective and frontline experience and understand and address their concerns to the extent that organizations and leaders are able	Uncertainty whether leaders recognize the most pressing concerns of frontline health care professionals and whether local physician expertise regarding infection control, critical care, emergency medicine, and mental health is being appropriately harnessed to develop organization-specific responses	Create an array of input and feedback channels (listening groups, email suggestion box, town halls, leaders visiting hospital units) and make certain that the voice of health care professionals is part of the decision-making process
Protect me	Reduce the risk of health care professionals acquiring the infection and/or being a portal of transmission to family members	Concern about access to appropriate personal protective equipment, taking home infection to family members, and not having rapid access to testing through occupational health if needed	Provide adequate personal protective equipment, rapid access to occupational health with efficient evaluation and testing if symptoms warrant, information and resources to avoid taking the infection home to family members, and accommodation to health care professionals at high risk because of age or health conditions
Prepare me	Provide the training and support that allows provision of high-quality care to patients	Concern about not being able to provide competent nursing/medical care if deployed to new area (eg, all nurses will have to be intensive care unit nurses) and about rapidly changing information/communication challenges	Provide rapid training to support a basic, critical knowledge base and appropriate backup and access to experts
Support me	Provide support that acknowledges human limitations in a time of extreme work hours, uncertainty, and intense exposure to critically ill patients	Need for support for personal and family needs as work hours and demands increase and schools and daycare closures occur	Clear and unambiguous communication must acknowledge that everyone is experiencing novel challenges and decisions, everyone needs to rely on each other in this time, individuals should ask for help when they need it, no one needs to make difficult decisions alone, and we are all in this together
Care for me	Provide holistic support for the individual and their family should they need to be quarantined	Uncertainty that the organization will support/take care of personal or family needs if the health care professional develops infection	Provide support for physical needs, including access to healthy meals and hydration while working, lodging for individuals on rapid-cycle shifts who do not live in close proximity to the hospital, transportation assistance for sleep-deprived workers, and assistance with other tasks, and provide support for childcare needs Provide support for emotional and psychologic needs for all, including psychologic first aid deployed via webinars and delivered directly to each unit (topics may include dealing with anxiety and insomnia, practicing self-care, supporting each other, and support for moral distress), and provide individual support for those with greater distress Provide lodging support for individuals living apart from their families, support for tangible needs (eg, food, childcare), check-ins and emotional support, and paid time off if quarantine is necessary

Ripp, Trockel and Shanafelt. JAMA. April 7, 2020.

24

UPMC Well-Being in the face of COVID-19



Food

Giant Eagle (special curbside pick-up) and Whole Foods (dedicated shopping hours)



Housing

Lothrop Hall free temporary housing and local Hotels with discounted rates



Childcare

Parents of UPMC Yammer Group, Volunteers through PittMed, membership at Care.com



Support

Online resources on COVID, PPE, Critical Care info, Mental Health app and services for clinicians

<https://gmewellness.upmc.com>

depression

risk for violence

suicide

fatigue

substance use

burnout

WELLToolkit 

The Appreciative Inquiry

Appreciative Inquiry Guided Worksheet

Define Sample Question: What is working well for well-being in our work community?	
Discover <p style="font-size: xx-small;">Identify the best of "what is" and "what has been." Identify individual, program, and institutional strengths, and work well (or worked well in the past).</p>	
Dream <p style="font-size: xx-small;">Explore "what might be." Build upon what already works here or elsewhere. What would help us function as our highest, most effective, sustainable, efficient and meaningful best?</p>	
Design <p style="font-size: xx-small;">Make a choice about "what should be." Plan and prioritize ideas that we most important to us. What would be needed, and who do we need to engage?</p>	
Deliver <p style="font-size: xx-small;">Discuss "what will be." Create an action plan (i.e. consider making an intended bid) to support the innovation and ideas generated. How will we present this information and to whom?</p>	

27

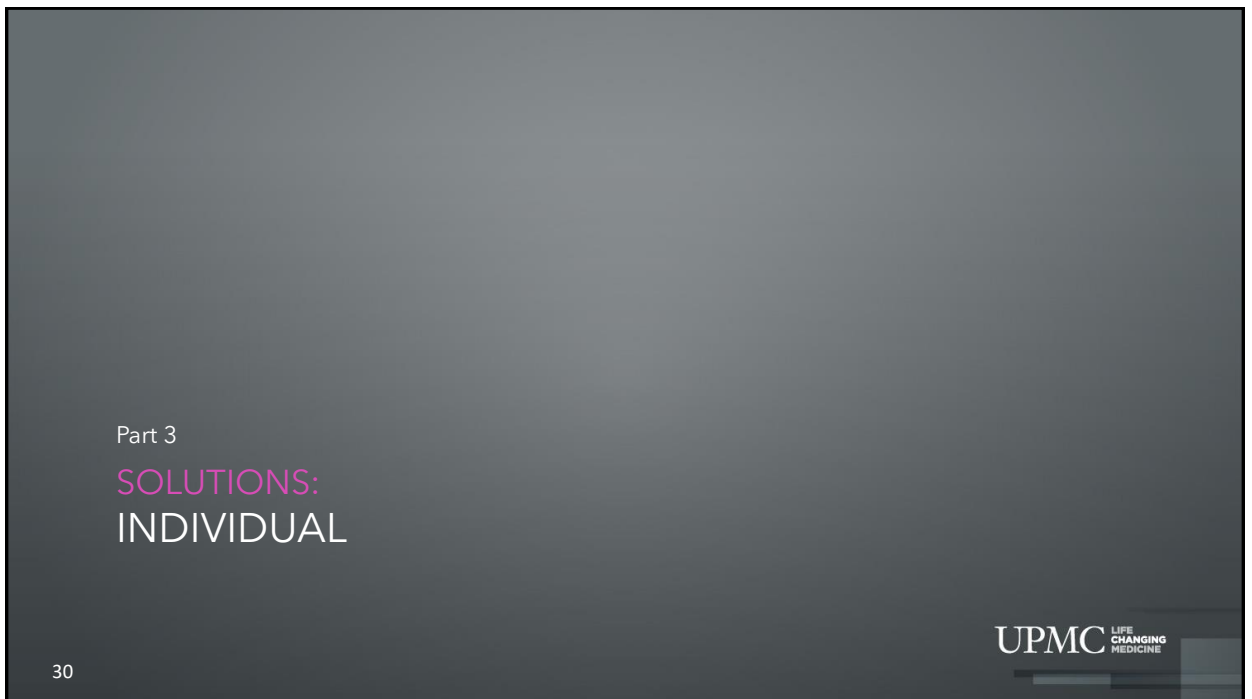
“What is working well for well-being in your current work community?”

AI Stage	Comments
Discover Identifying processes that work well. The best of "what is" and "what has been."	
Dream Building upon what already works well. Envision what else is needed/might work well in the future. Explore "what might be."	
Design Plan and prioritize ideas/innovations that would work well. Make choices about "what should be."	
Deliver Implement proposed design. Develop action plan. Support the innovation of "what will be."	

28



29



Part 3

SOLUTIONS:
INDIVIDUAL

UPMC LIFE CHANGING MEDICINE

30

30

The Science of Emotional Health



Define your day

How do I use my time? What TIME does my day end? What TIME do I check emails?



Revitalize Transitions

Start making an intentional change (i.e., clothes, lighting, setting, etc.) at the end of the workday



Self-Reflection

Ask yourself, "If I could freeze time, what would I do to feel more me?"



Guy Winch, PhD – TED Talk (2021)
<https://www.npr.org/programs/ted-radio-hour/985484885/revitalize>

UPMC
LIFE CHANGING MEDICINE

31

Exercise – My Values – Introduction

- Write down 5 words that best describe your values
 (words that most meaningfully reflect who you are at your core and who you aspire to be)
- Then rank the words in order of importance to you



WELLToolkit

32

Please write down 5 words that best capture your core VALUES (Choose from the list, or make up your own):

Honor	Intuition	Intimacy	Stability	Sustainability
Wisdom	Compassion	Sensuality	Security	Self-sufficiency
Integrity	Diversity	Play	Understanding	Independence
Peace	Experience	Fun	Intelligence	Interdependence
Beauty	Learning	Effort	Adventure	Leadership
Nesting	Loyalty	Productivity	Risk	Transcendence
Nurturance	Reliability	Health	Courage	Kindness
Balance	Order	Fitness	Power	Expansiveness
Faith	Respect	Freedom	Strength	Simplicity
Spirituality	Justice	Curiosity	Connectedness	Spontaneity
Love	Thoughtfulness	Openness	Citizenship	Comfort
Strength	Patience	Perseverance	Belonging	Warmth
Communication	Tolerance	Calm	Flow	Discipline
Self-expression	Serenity	Magic	Structure	
Imagination	Attentiveness	Wonder	Rhythm	
Creativity	Equality	Humor	Excitement	
Forgiveness	Caring	Organization	Wit	

TIP: If you have a difficult time, you might ask yourself, "Who would I be if this value were absent from my life?"

33

Exercise – My Values – Current Practice



□ Now that you have reflected on your values, think of ways that you already practice them

WELLToolkit 

34

Exercise – My Values – Next Steps

You are now primed to be more intentional in how you integrate your values into your daily life!



WELLToolkit 

35

What about screen time?



36

ZEF Scale

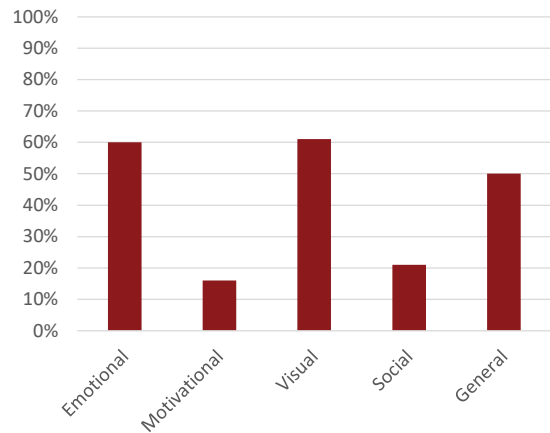
Zoom Exhaustion & Fatigue

- Measure from Stanford to quantify screen fatigue (Fauille, 2021)
- Scores range from 15 to 75
- **5 Subtypes** of screen fatigue:

1. **Emotional**
2. **Motivational**
3. **Visual**
4. **Social**
5. **General**

A Sample ZEF Score = 40

(32nd percentile for zoom fatigue)



Take the ZEF survey at: https://stanforduniversity.qualtrics.com/jfe/form/SV_5w2JruIAQzOgiTI

37

4 Causes for Zoom Fatigue

1. **Large Faces:** Excessive amounts of close-up eye contact is highly intense.
2. **Constant Mirroring:** Seeing yourself during video chats in real-time is fatiguing.
3. **Lack of Mobility:** Video chats dramatically reduce our usual body movements.
4. **Non-verbal Communication:** The cognitive load is much higher in video chats.



**VIRTUAL HUMAN
INTERACTION**
LAB
Stanford University

Bailenson JN. Nonverbal overload: A theoretical argument for the causes of Zoom Fatigue. *Technology, Mind, and Behavior* (2021).

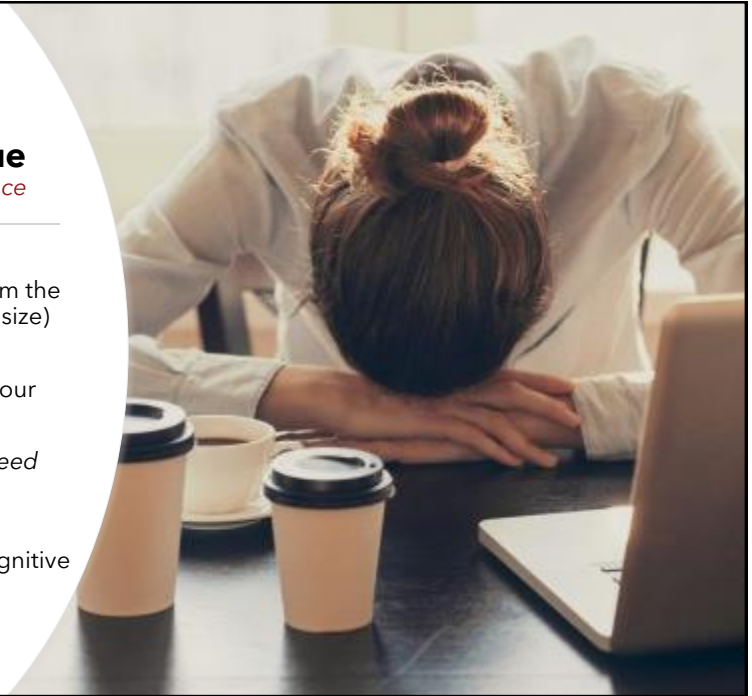
38

Solutions for Screen Fatigue

based on what we know from neuroscience

- 1. Reduce face sizes** (back away from the camera; decrease the zoom window size)
- 2. Hide Self-View** (once your face is properly framed, right-click to hide your own image)
- 3. Use Your Body** (when you don't need video, use the phone to allow walking/stretching/etc.)
- 4. Audio Only Breaks** (decrease cognitive load and use long-distance gaze)

<https://news.stanford.edu/2021/02/23/four-causes-zoom-fatigue-solutions/>



39

What about social media?

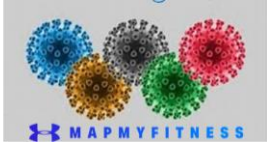
Researchers in Pittsburgh (Primack, 2017) demonstrated negative outcomes related to excessive use of social media in young adults:

For every **10%** increase in (-) experiences on social media → **13%** increase in loneliness
 For every **10%** increase in (+) experiences on social media → **NO** change in loneliness

Social media use for **>2 hours** a day → **DOUBLES** the risk of feeling socially isolated



40



Think about social connectedness

Research shows that passive use of screens can lead to loneliness.
So find ways to be **ACTIVE** and **INTERACTIVE!**

41



Screen-Life Balance

Schedule breaks. End early. Avoid screens during breaks. Decrease overall screen time.

42



To be seen,
see others

In these strange times, we
need to look out for each
other!

43



Break the culture of silence

8 out of 10 workers with a mental health condition say shame and stigma prevent them from seeking mental health care.

...A distressed colleague may not ask for help, but that doesn't mean it isn't wanted or needed.

<https://business.kaiserpermanente.org/insights/mental-health-workplace/stigma-at-work>

WELLToolkit 

44

Physician Self-Disclosure of Lived Experience Improves Mental Health Attitudes Among Medical Students: A Randomized Study

Andres Martin, Julie Chilton, Doron Gothelf and Doron Amsalem



91% of students surveyed **AGREED** or **STRONGLY AGREED** with the statement: "knowing individuals further along in their careers who struggled with mental health issues, got treatment, and are now doing well **would make me more likely to access care if I needed it.**"

WELLToolkit

45

Well-Being Resources for UPMC Residents & Fellows	
Lifecolutions Resident and Fellow Assistance Program	<ul style="list-style-type: none"> ✓ 24/7 confidential support for UPMC residents and fellows ✓ Support for stress, depression, anxiety, substance misuse, relationship problems, bereavement, etc. ✓ Referrals available for 24/7 or after-hours housing, legal services, financial counseling, etc. ✓ Support for students/fellows struggling with stress and anxiety using evidence-based self-guided activities and resources. Search "Well-Being" in UPMC MyUPMC or Google My Maps. Direct link address also provided.
CuBuddy	<ul style="list-style-type: none"> ✓ Confidential peer support 24/7 (24/7/365) ✓ Free, 24/7 confidential individual and/or group support for all UPMC residents and fellows ✓ Support for stress, depression, anxiety, substance misuse, relationship problems, bereavement, etc.
CBM ASAP	<ul style="list-style-type: none"> ✓ 24/7 confidential individual and/or group support for all UPMC residents and fellows ✓ Support for stress, depression, anxiety, substance misuse, relationship problems, bereavement, etc.
Physician for Professionals	<ul style="list-style-type: none"> ✓ 24/7 confidential peer support with a UPMC resident or fellow for any work-related stressor or wellness event.
Professionalism Concern Line	<ul style="list-style-type: none"> ✓ 24/7 confidential peer support with a UPMC resident or fellow for any work-related stressor or wellness event.
Physical Safety	<ul style="list-style-type: none"> ✓ Access to UPMC's 24/7 or 24/7/365 ✓ 24/7 confidential peer support with a UPMC resident or fellow for any work-related stressor or wellness event.
Crisis Resources	<ul style="list-style-type: none"> ✓ 24/7 confidential peer support with a UPMC resident or fellow for any work-related stressor or wellness event. ✓ 24/7 confidential peer support with a UPMC resident or fellow for any work-related stressor or wellness event.




Know where the help is

There are a myriad of ways we at UPMC can obtain free and confidential support. Do you know how to seek help for yourself?

46



47

<p>Thanks!</p>		<p>For more information:</p> <p>The WELL Website https://gmewellness.upmc.com</p> <p>Please email questions to:</p> <p>Sansea Jacobson, M.D. jacobsonsl@upmc.edu</p>
		

48

References

- Fauville, Geraldine and Luo, Mufan and Queiroz, Anna C. M. and Bailenson, Jeremy N. and Hancock, Jeff, Zoom Exhaustion & Fatigue Scale (February 15, 2021).
- Pollock A, Campbell P, Cheyne J, Cowie J, Davis B, McCallum J, McGill K, Elders A, Hagen S, McClurg D, Torrens C, Maxwell M. Interventions to support the resilience and mental health of frontline health and social care professionals during and after a disease outbreak, epidemic or pandemic: a mixed methods systematic review. *Cochrane Database Syst Rev*. 2020 Nov 5;11:CD013779.
- Shanafelt T, Ripp J, Trockel M. Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic. *JAMA*. 2020 Jun 2;323(21):2133-2134.
- Shanafelt TD, Noseworthy JH. Executive Leadership and Physician Wellbeing: Nine Organizational Strategies to Promote Engagement and Reduce Burnout. *Mayo Clin Proc* 2017; 92, 1: 129-146.