

Disclosure

- No relevant financial relationship related to this continuing education activity
- No off-label uses of medications will be described in this presentation

Outline

- Explain why clinician burnout is a patient care and healthcare workforce problem that needs addressing;
- Discuss what is known about burnout in the pharmacy workforce;
- Describe the National Academy of Medicine Clinician Well-Being and Resilience Action Collaborative; and
- Identify strategies to impact well-being and resilience in pharmacists, pharmacy residents, student pharmacists and pharmacy technicians.

Engaged Workforce: What it is and what it isn't

It is

- Emotional commitment to the organization
- Focus on mission and goals
- Discretionary effort
- ...the key to activating a high performing workforce

It Isn't

- Employee happiness
- Employee satisfaction
- Zero burdens or stress



Forbes. What is employee engagement? Available at:
<https://www.forbes.com/sites/kevinkruse/2012/06/22/employee-engagement-what-and-why/#2f96dd37f37>. Accessed August 14, 2018.

Engagement: a Workforce Goal

"To win the marketplace you must first win the workplace"

~ Doug Conant, Former Campbell's Soup CEO

Statistics:

- 70 % of U.S. employees report feeling unengaged
- In a study of engagement & burnout (n=1000)
 - Optimally engaged (40%): high engagement & low burnout
 - High resources (support, recognition), self-efficacy, low demands (low cumbersome bureaucracy), recovery from stress
 - Engaged-exhausted (20%): high engagement & high burnout
 - Simultaneous experiences of high engagement & burnout risk higher frustration and employee turnover

Outcomes:

- Greater productivity, higher quality of work, increased safety, employee retention

Harvard Business Review. 1 in 5 highly engaged employees is at risk of burnout. February 2, 2018.

Healthcare Workforce Burnout as a Patient Care Problem



Journal of the American Association of Nurse Practitioners

RESEARCH

Physical health of entering graduates to support science

Harvard Business Review

Burnout at Work Isn't Just About Exhaustion. It's Also About Loss

by Emma S. June 28, 2017

VIEWPOINT

Addressing Physician Burnout: The Way Forward

Tait D. Shanafelt, MD, Mayo Clinic, Rochester, Minnesota.

Lotte N. Dyrbye, MD, MHPE, Mayo Clinic, Rochester, Minnesota.

Colin P. West, MD, PhD, Mayo Clinic, Rochester, Minnesota.

The US health care delivery system and the field of medicine have experienced tremendous change over the last decade. At the system level, narrowing of insurance networks, employed physicians, and financial pressures have resulted in greater expectations regarding productivity, increased workload, and reduced physician autonomy. Physicians also have to navigate a rapidly expanding medical knowledge base, more onerous maintenance of certification requirements, increased clerical burden associated with the introduction of electronic health records

Agency for Healthcare Research and Quality

PSNet

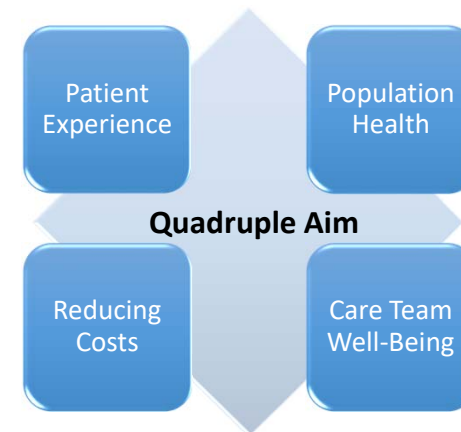
Home Topics Issues WebM&M Cases Perspectives

Perspectives on Safety February 2018

Burnout Among Health Professionals: Effect on Patient Safety

by Audrey London, PhD

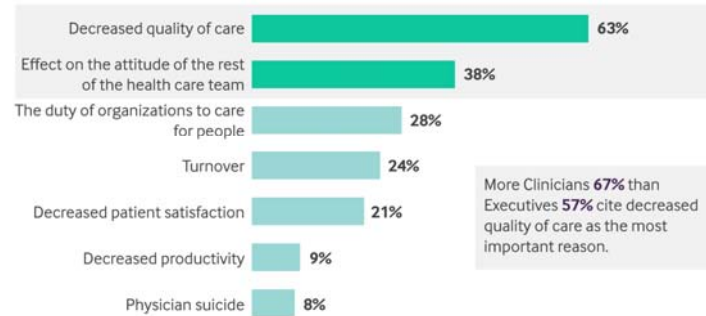
From the Triple Aim to the Quadruple Aim



Bodenheimer T, Sinsky C. From triple aim to quadruple aim: care of the patient requires care of the provider. Ann Fam Med. 2014;12(6):573-6.

Decreased Quality of Care Is the Top Reason to Address Physician Burnout

What are the top two most important reasons to address physician burnout?



Base = 570 (multiple responses)

Swensen S, Shanafelt, Mohta NS. Leadership survey: Why physician burnout is endemic, and how health care must respond. NEJM Catalyst. December 8, 2016. Available at: <https://catalyst.nejm.org/physician-burnout-endemic-healthcare-respond/>

Burnout

Medical Error

Bi-directional relationship

- Higher levels of burnout associated with increased odds of reporting a medical error in subsequent 3 months
- Self-perceived medical error associated with worsening burnout & depressive symptoms

Shanafelt Ann Surg 2009; Balch J Am Coll Surg 213; West JAMA 2006, 2009; Jones J Appl Psychol 1988; Cimiotti Am J Infect Control 2012; Welp Front Psychol 2015; Welp Crit Care 2016

Burnout and Patient Safety: Summary of the Evidence

- Introduction: Evaluation of association between healthcare staff wellbeing, burnout, and patient safety
- Methods: Systematic Review
- Results: 46 studies included
 - Significant correlation between poor wellbeing in health care professionals and worse patient safety (n=16)
 - Significant association between burnout and patient safety (n=21)
- Conclusion: Studies show correlation between burnout and lower patient safety; more studies needed to determine causality

Hall LH, Johnson J, Watt I, et al. Healthcare staff wellbeing, burnout, and patient safety: A systematic review. PLoS ONE. 2016; 11(7): e0159015

Health Care Costs

- ↑ Medical Errors
- ↑ Absenteeism
- ↑ Malpractice claims
- ↓ Job productivity
- ↑ Turnover
 - 1.2-1.3 x salary (\$82-\$88,000 per RN in 2007)
 - \$500,000 to >\$1 million
- ↑ Referrals
- ↑ Ordering

Jones J Nurs Am 2008; Fibuch Physician Leadersh J 2015; Buchbinder Am J Manag Care 1999; Kushnir, Fam Pract 2014; Bachman Soc Sci Med 1999; Parker J Behav Med 1995; Toppinen-Tanner Behav Med 2005; Hilton J Occup Environ Med 2009

How have you seen burnout impact patient care?

Burnout in the Pharmacy Workforce



What is Stress?

- Stress is a physical, mental, or emotional factor that causes bodily or mental tension.
- Eustress is moderate or normal psychological stress considered to be beneficial for the experiencer
 - Motivates, focuses energy, is short-term, perceived as within our coping abilities, feels exciting, & improves performance
- Distress is extreme anxiety, sorrow, or pain
 - Can be short-or long-term, feels unpleasant, considered outside of our coping ability, decreases performance, may lead to mental & physical problems



<https://www.medicinenet.com/script/main/art.asp?articlekey=20104>

A Careful Balance



What is Burnout?

• Syndrome of:

- Emotional exhaustion
- Depersonalization (e.g., cynicism)
- Low personal accomplishment



Maslach, C., S. E. Jackson, et al. (1996). Maslach Burnout Inventory Manual. Palo Alto, CA, Consulting Psychologists Press.

Identify Burnout



Valid and Reliable Survey Instruments to Measure Burnout

A key organizational strategy to improving clinician well-being is to measure it, develop and implement interventions, and then re-measure it. A variety of dimensions of clinician well-being can be measured including burnout, engagement, and professional satisfaction. Below is a summary of established tools to measure burnout. Each tool has advantages and disadvantages and some are more appropriate for specific populations or settings. This information is being provided by the [Research, Data, and Metrics Working Group](#) of the National Academy of Medicine [Action Collaborative on Clinician Well-Being and Resilience](#).

Click on each item for an overview of each valid and reliable instrument to measure burnout, self-being, and other work-related dimensions.

By group

▶ **Maslach Burnout Inventory – Human Services Survey for Medical Personnel**

▶ **Oldenburg Inventory**

▶ **Physician Work-Life Study's Single-Item**

▶ **Copenhagen Burnout Inventory**

Composite Well-Being

▶ **Well-Being Index**

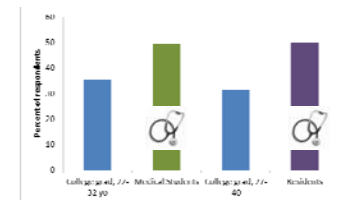
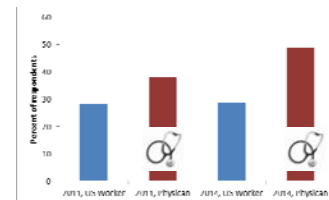
<https://nam.edu/valid-reliable-survey-instruments-measure-burnout-well-work-related-dimensions/>

Maslach Burnout Inventory – Human Services Survey Tool

• Medical Personnel

- Emotional exhaustion
 - Measures feelings of being emotionally overextended and exhausted by one's work
 - I feel emotionally drained from my work
- Depersonalization
 - Measures an unfeeling and impersonal response toward patients
 - I don't really care what happens to some patients
- Personal Accomplishment
 - Measures feelings of competence and successful achievement in one's work
 - I have accomplished many worthwhile things in this job
- Response options (frequency): never, a few times a year or less, once a month or less, a few times a month, once a week, a few times a week, every day

High Prevalence of Burnout

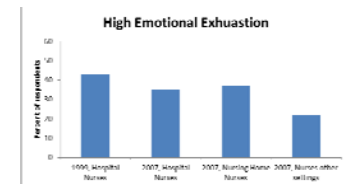


Medicine

- 2014, 6880 physicians, all specialties, all practice types
- 2012, 5521 medical students & residents

Nursing

- 1999, >10,000 inpatient RN
- 2007, 68,000 nurses



Aiken JAMA 2002;288; McHugh Health Aff 2011;30; Dyrbye Acad Med 89(3): 443-451; Shanafelt MCP 2015;90:1600

Burnout: Pharmacy Residents

Study Overview

- Stress and negative affect levels surveyed in PGY1 & PGY2s (n=524, 27.7% response)
- Those working > 60 hours/week reported higher levels of perceived stress and elevated depression, hostility, and dysphoria
- Perceived stress for pharmacy residents was 19.06 ± 5.9
 - 14.2 ± 6.2 in 18-29 year old health adults
 - 20.3 ± 7.4 in cardiology medical residents

Takeaways

- 10-item Perceived Stress Scale is a free, validated tool to assess stress among pharmacy residents
- Hostility was highest in PGY2
- When pressures of being overworked > resident's ability to cope, well-being is in danger

Le HM, Young SD. Evaluation of stress experienced by pharmacy residents. *AJHP*.2017;74:599-604

Burnout: Clinical Pharmacists

- Jones and colleagues measured clinical pharmacist burnout (n=974)
 - Nearly $\frac{3}{4}$ included respondents are certified by BPS
 - More than half completed residency training
 - 61.2% overall burnout rate; 52.9% high emotional exhaustion
 - Characteristics of burned out clinical pharmacists:
 - Less likely to have children (p=0.002)
 - More likely to work more median hours (p<0.001)
 - More likely to have attained BPS certification (p=0.005)
 - No difference observed in practice area, hospital setting

Jones GM, Roe NM. Factors Associated With Burnout Among US Hospital Clinical Pharmacy Practitioners: Results of a Nationwide Pilot Survey. *Hosp Pharm*.2017;52:11:742-51.

Drivers of Burnout in Healthcare Professionals

Risk Factors Associated With Burnout
Am J Health-Syst Pharm. 2017; 74:e576-81

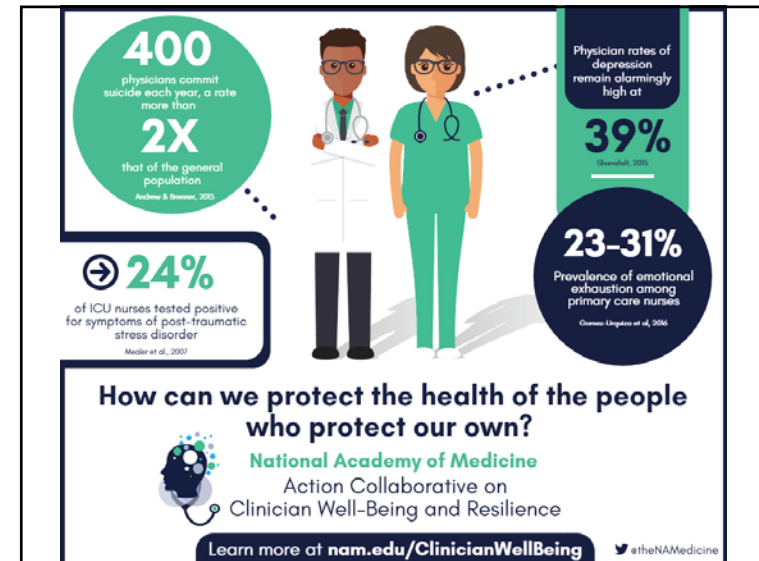
Risk Factor	Example
Workload	Job demands exceeding human limits; limited time to rest, recover, and restore.
Control	Role conflict; absence of direction in the workplace
Reward	Inadequate financial, institutional, or social reward in the workplace; lack of recognition
Community	Inadequate opportunity for quality social interaction at work; inadequate development of teams
Fairness	Perception of equity from an organization or leadership
Values	Organizational values are incongruous with an individual's personal values or beliefs
Job-person incongruity	Personality does not fit or is misaligned with job expectations and coping abilities

National Academy of Medicine Action Collaborative Clinician Well-Being and Resilience



National Academy of Sciences

- Founded in March, 1863
- Private, nonprofit organization of the country's leading researchers
- National Academy of Medicine
 - Formed in 1970 to advise the nation on medical & health issues
 - Dr. Victor Dzau is President



PERSPECTIVE

COLLECTIVELY CONFRONTING THE CLINICIAN-BURNOUT CRISIS

To Care Is Human — Collectively Confronting the Clinician-Burnout Crisis

Victor J. Dzau, M.D., Darrell G. Kirch, M.D., and Thomas J. Nasca, M.D.

“Through collective action and targeted investment, we can not only reduce burnout and promote well-being, but also help clinicians carry out the sacred mission that drew them to the healing professions – providing the very best care to patients”

Dzau VJ, Kirch DG, Nasca TJ. To care is human – collectively confronting the clinician-burnout crisis. NEJM.2018;378(4):312-314.

Action Collaborative Goals

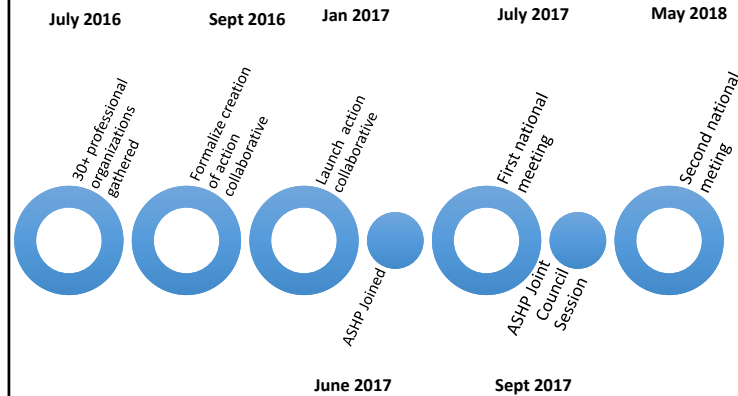
NAM

- Improve baseline understanding across organizations of challenges to clinician well-being
- Raise visibility of clinician stress and burnout
- Advance evidence-based, multidisciplinary solutions to reverse these trends, leading to improvements in patient care by caring for the caregiver

ASHP

- Improve patient outcomes through optimal medication use
- Identify mechanisms to improve and sustain pharmacy workforce well-being and resilience
- Deploy pharmacy workforce to support multidisciplinary solutions for improving healthcare workforce well-being and resilience

Action Collaborative Timeline



American Society of Health-System Pharmacists

- Vision
 - Medication use will be optimal, safe, and effective for all people all of the time
- Membership Organization
 - Established 1942
 - 45,000 members



ASHP Vision & Strategic Plan



Strategic Plan

Goal 4: Objectives

- Our Patients and Their Care
 - Goal 4: Improve Patient Care by Enhancing the Well-Being and Resilience of Pharmacists, Student Pharmacists, and Pharmacy Technicians
- Our Members and Partners
- Our People and Performance
- Engage in major national initiatives
- Facilitate the development of education
- Improve the well-being and resilience in postgraduate pharmacy residency training
- Foster research

ASHP Policy Positions, 1982–2018 2018 Policy Positions

1825

CLINICIAN WELL-BEING AND RESILIENCE

Source: Council on Education and Workforce Development

To affirm that burnout adversely affects an individual's well-being and healthcare outcomes; further,

To acknowledge that the healthcare workforce encounters unique stressors throughout their education, training, and careers that contribute to burnout; further,

To declare that healthcare workforce well-being and resilience requires shared responsibility among healthcare team members and between individuals and organizations; further,

To encourage individuals to embrace well-being and resilience as a personal responsibility that should be supported by organizational culture; further,

To encourage the development of programs aimed at prevention, recognition, and treatment of burnout, and to support participation in these programs; further,

To encourage education and research on stress, burnout, and well-being; further,

To collaborate with other professions and stakeholders to identify effective preventive and treatment strategies at an individual, organizational, and system level.

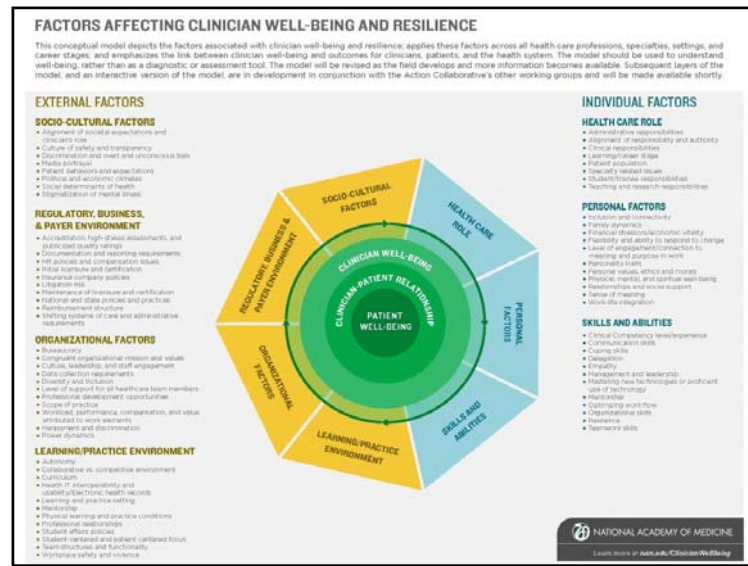
Collaborative Composition & Commitments

- 36 sponsoring organizations, 100 network organizations:
 - Professional organizations
 - Government
 - Technology and EHR vendors
 - Large health care centers
 - Payors
- 130 commitment statements
 - To provide an opportunity for organizations across the country discuss and share plans of action to reverse clinician burnout and promote clinician well-being.
 - <https://nam.edu/initiatives/clinician-resilience-and-well-being/commitment-statements-clinician-well-being/>

Creating An All-Encompassing Model

- ✓ Broad enough to define the issue across all healthcare professions
- ✓ Satisfactorily encompasses multiple environments (education, practice)
- ✓ Satisfactorily encompasses multiple stages of development of the health professional
- ✓ Satisfactorily encompasses system and individual issues in ways that are helpful toward developing a solution (e.g. defining without stigmatizing)
- ✓ Lends itself to being a tool for diagnosis, explanation, treatment
- ✓ Serves as a taxonomy for organizing other elements/tools developed as part of this NAM Collaborative

Brigham T, Barden C, Legreid Dopp, A, Hengerer A, et al. A journey to Construct an all-encompassing conceptual model of factors affecting clinician well-being and resilience. National Academy of Medicine, 2018.



Strategies to Impact Well-Being and Resilience

ashp
pharmacists advancing healthcare®

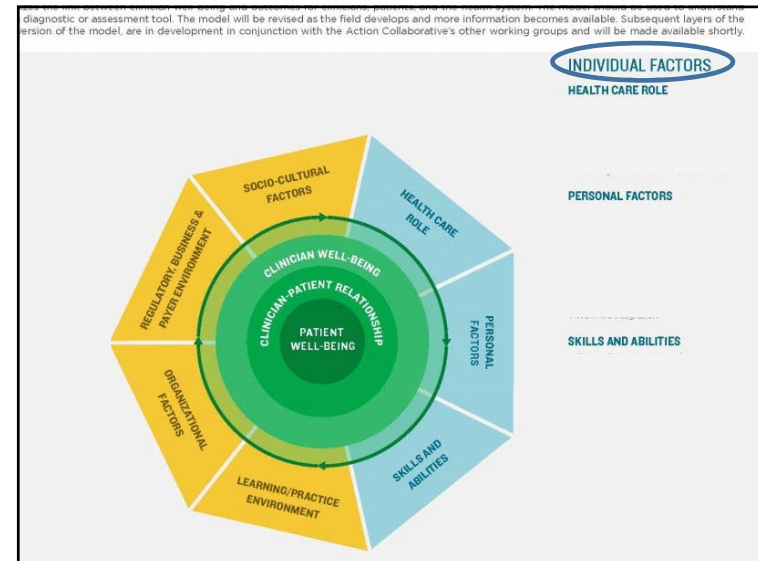
Clinician Well-being and Resilience

•Well-being

- The presence of positive emotions and moods.
- The absence of negative emotions.
- Satisfaction with life, fulfillment and positive functioning.
- Physical well-being is also viewed as critical to overall well-being.

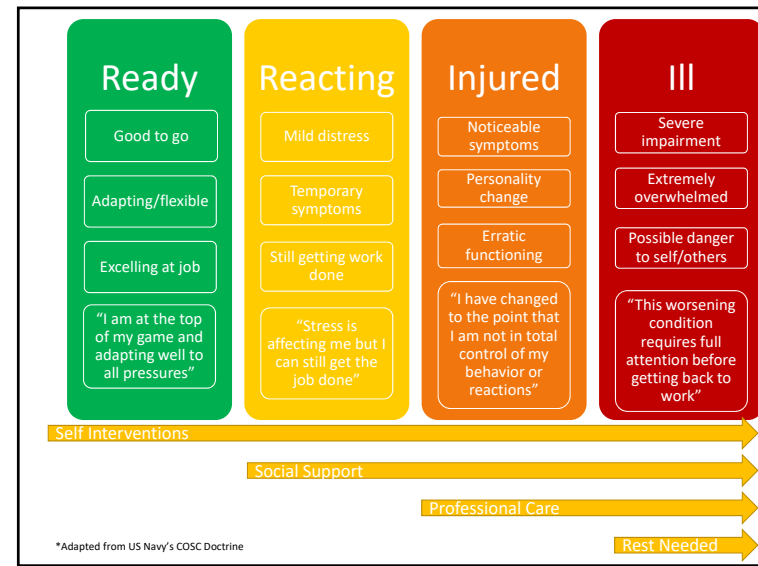
•Resilience

- Set of individual skills, behaviors, and attitudes that contribute to personal physical, emotional, and social well-being, including the prevention of burnout.



Resilience & Coping Skills

- Bounce back from adversity, uncertainty, risk or failure, and adapt to changing and stressful life demands
- Hope, optimism, self-efficacy
- Perseverance and passion for long term goals (Grit)



Mitigating Stress

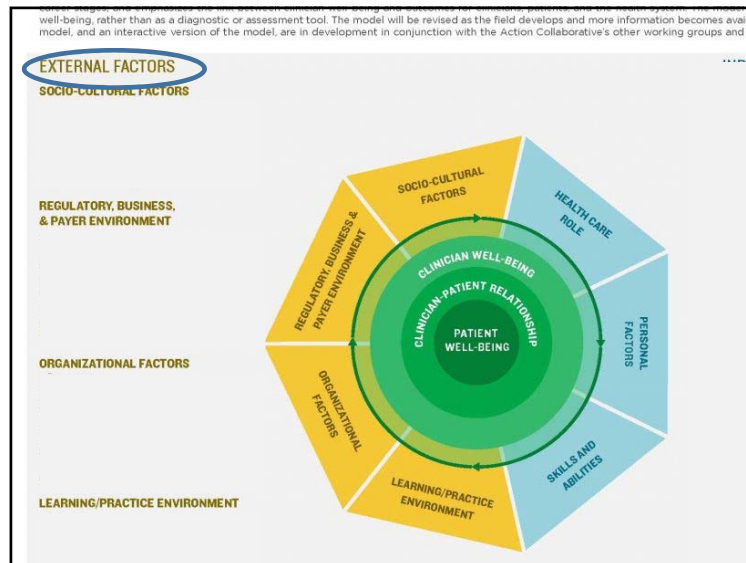
Self-Care Techniques

- **Monitor** personal stress indicators (sleep, eating, agitation, etc)
- **Decompress** with healthy transitions (teatime, yoga, journal, breathwork, music)
- **Record** three good experiences from the day, savor those positive moments and plan for good experiences tomorrow
- **Speak** with trusted people, maintain social connections

Resiliency Competencies

- Awareness
 - Noticing the right information
 - Sensations, thoughts, environments
- Regulation
 - Of self and others' stress reactions and emotions
- Leadership
 - Toward meaningful personal and team actions

What is one strategy that you (individual) are going to employ to support well-being and resilience?



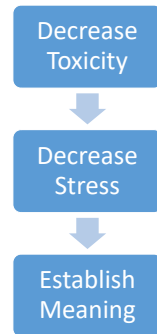
Strategies to Alleviate Burnout in Healthcare Professionals

Risk Factors Associated With Burnout
Am J Health-Syst Pharm. 2017; 74:e576-81

Risk Factor	Strategy to Alleviate Risk
Workload	Permitting time at the workplace to recover from a stressful event
Control	Clearly defined roles and expectations from organizational leadership
Reward	Identify suitable rewards to recognize achievements, provide opportunities to teach or mentor trainees
Community	Promote participation in professional organizations
Fairness	Transparency in decision-making
Values	Align personal expectations with organizational goals
Job-person incongruity	Evaluate and align job responsibilities with personal and professional expectations

Executive Leadership Strategies

- Acknowledge & assess the issue
- Identify impediments
- Harness the power of leadership
- Implement system approaches
- Cultivate community
- Use rewards & incentives wisely
- Align values & strengthen culture
- Promote flexibility and work-life integration
- Provide resources to promote self-care
- Use improvement science to test



1. Shanafelt TD, Noseworthy JH. Executive leadership and physician well-being: Nine Organizational Strategies to promote engagement and reduce burnout. Mayo Clin Proc. 2017;92(1):129-146. 2. Perlo J, Balik B, Swensen S, Kabcenell A, Landsman J, Feeley D. JHI Framework for Improving Joy in Work. JHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017.

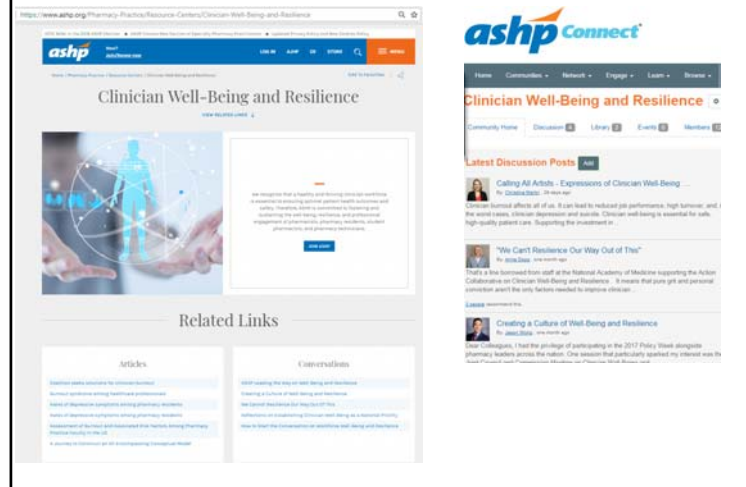
What is one strategy you think your supervisor/institution can employ to support well-being and resilience?

Looking ahead

Educate Yourself on Burnout

- Webinars
 - [Extinguishing the Burnout: Yourself and Your Team](#)
 - [Tame the Flames of Burnout: Tools for Building Resilience in Your Workforce](#)
 - [Leadership Burnout and Strategies for Burnout Prevention](#)
- More Resilience sessions planned for:
 - 2018 National Pharmacy Preceptors Conference
 - Creating a Culture of Resident Well-Being
 - Building Resilience in Residency Training It Takes a Village
 - Fueling Your Fire Identifying and Managing Preceptor Burnout
 - 2018 Conference for Pharmacy Leaders
 - Workforce Resilience Developing an Open and Successful Environment
 - 2018 Midyear Clinical Meeting

Educate Yourself & Join the Conversation



ashp Connect

Clinician Well-Being and Resilience

Latest Discussion Posts

- Calling All Adults - Expressions of Clinician Well-Being ...
- "We Can't Resilience Our Way Out of This"
- Creating a Culture of Well-Being and Resilience

Related Links

Articles

- Resilience takes practice for the clinical pharmacist
- Resilience: A key to success in the pharmacy profession
- Resilience: A key to success in the pharmacy profession
- Resilience: A key to success in the pharmacy profession
- Resilience: A key to success in the pharmacy profession

Conversations

- ASHP leading the way on well-being and resilience
- Creating a culture of well-being and resilience
- Resilience: A key to success in the pharmacy profession
- Resilience: A key to success in the pharmacy profession
- Resilience: A key to success in the pharmacy profession

Follow the conversation:
nam.edu/ClinicianWellBeing
[#ClinicianWellBeing](https://twitter.com/ClinicianWellBeing)



NATIONAL ACADEMY OF MEDICINE

Action Collaborative on Clinician Well-Being and Resilience

Every year in the United States, about 400 physicians take their own lives — a rate more than double that of the general population. Physicians experience high rates of depression, burnout, and poor work-life balance. These phenomenon cut across all ages, stages, and career paths — from trainees to senior practitioners, and these challenges are not unique to physicians, nurses and other clinicians experience similar effects on performance, health, and well-being.

Bottom line: The people we rely on to keep us healthy may not be healthy themselves. This fact is not only worrying in and of itself — it also has serious implications for patients. Clinician burnout has been linked to increased medical errors and patient dissatisfaction. How can we ensure that our care workforce is healthy, resilient, and functioning at its highest capacity?

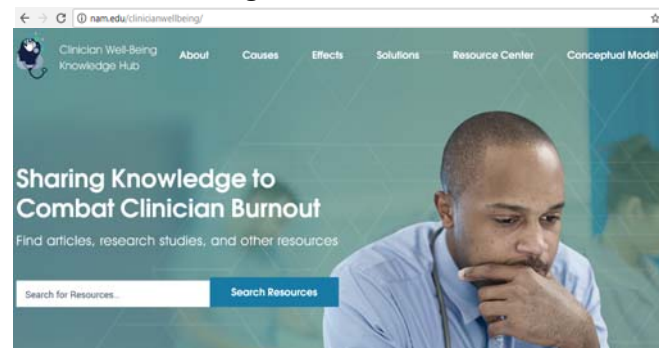
About the Initiative

And improving clinician well-being and resilience across organizations and policy-making bodies. This "action science-based knowledge, to (1) assess and understand the trends in clinician stress, burnout, coping, and resilience, and (2) develop, test, and implement strategies to improve clinician well-being and resilience across organizations and policy-making bodies."

Subscribe to our mailing list and receive the latest updates on this initiative

Share your thoughts using #ClinicianWellBeing

NAM Knowledge Hub



Clinician Well-Being Knowledge Hub

About Causes Effects Solutions Resource Center Conceptual Model

Sharing Knowledge to Combat Clinician Burnout

Find articles, research studies, and other resources

Search for Resources

Search Resources

nam.edu/clinicianwellbeing

What is one strategy that ASHP could consider to support well-being and resilience in the pharmacy workforce?

Questions?
Ideas?
Considerations?



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