

Washington Patient Safety Coalition
Foundation for Health Care Quality
Care for the Caregiver/Colleague

Compassion Mitigates Burnout

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Disclosure: Michael J. Goldberg

I do not have any relevant financial relationship(s) with any commercial interest that pertains to the content of my presentation.

Questions:

- What is burnout and why is it so bad?
- Why have we lagged so far behind business and industry in understanding burnout?
- Can neuroscience help us understand and respond to burnout?
- Is there a useful compassionate care/anti-burnout framework?

Burnout

Burnout is a mental state characterized by:

- **Emotional exhaustion**

“I am emotionally depleted by my work.”

- **Depersonalization**

“I see patients not as people.”

- **Decreased sense of personal accomplishment**

“I feel ineffective.”

- May appear to others as frustrated, cynical, and even callous.

By physician self-report, burnout is prevalent and seems to be getting worse:

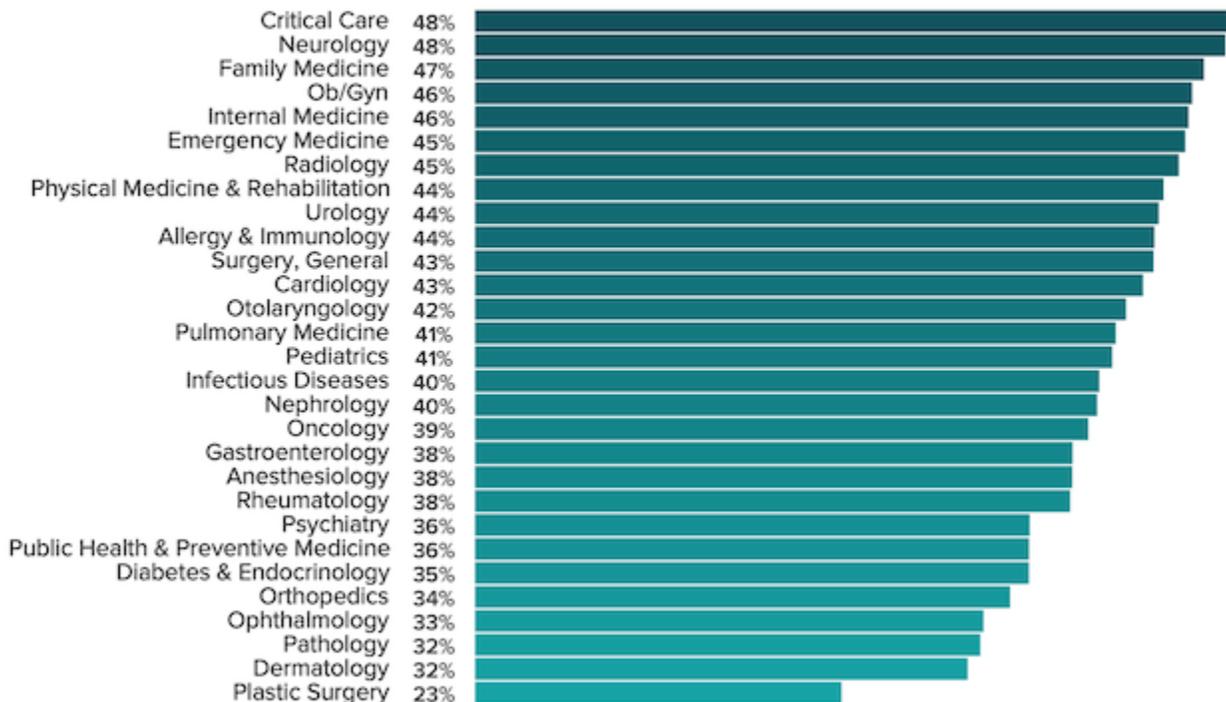
	<u>2011</u>	<u>2014</u>	<u>p</u>
Burnout symptoms	45%	54%	<.001
Satisfaction work/life	49%	41%	<.001

- Worsening occurred in all medical specialties.
- Minimal change in burnout and satisfaction in working US population over same time period.
- Physician burnout was more than twice that reported amongst workers in other fields.

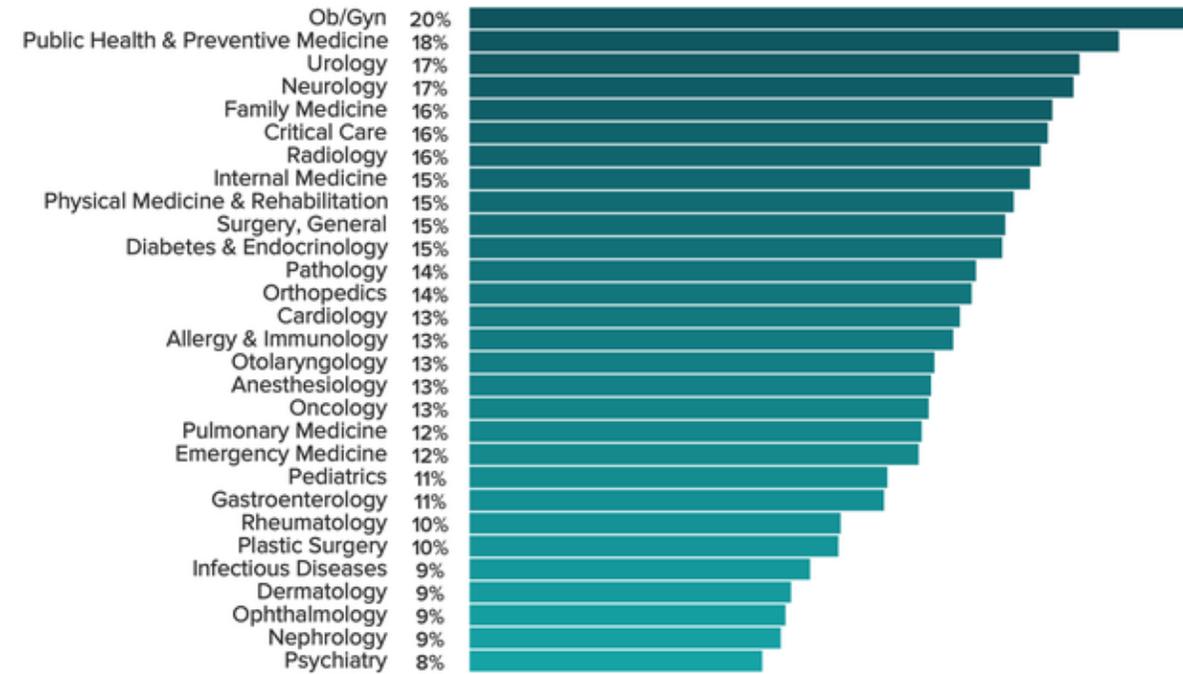
Medscape National Physician Burnout and Depression Report 2018

While burnout rates stayed about the same, the number reporting both burnout and depression symptoms increased.

Which Physicians Are Most Burned Out?



Which Physicians Experience Both Depression and Burnout?



No clinical caregiver is immune to burnout:

Up to 75% of medical residents report symptoms of burnout.

70% of general surgery residents reported symptoms of burnout

More than 35% of nurses report burnout or moral distress

We underestimate our personal burnout.

Do you feel emotionally burned out?

Are people in your work setting emotionally burned out?

The consequences of physician burnout for *patients* are well documented.

- Increased medical errors
- Diminished attentiveness
- Diminished empathy
- Diminished compassionate behaviors towards patients.

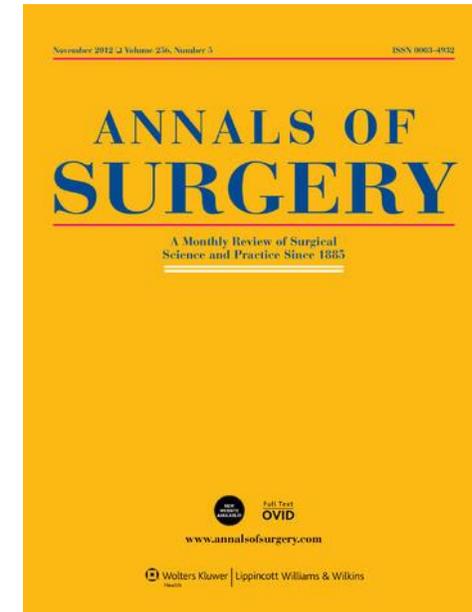
A Survey of 7905 American Surgeons

Shanafelt TD et. al. Annals of Surgery (2010) 251:995-1000

Completed a self-assessment of burnout.

Reported a major medical error in last 3 months.

Each 1 point increase in burnout was associated with an 11 % increase in likelihood of reporting a medical error.



Physician Burnout, Well-being, and Work Unit Safety Grades in Relationship to Reported Medical Errors

Tawfik DS, Profit J, Shanafelt TD et. al
Mayo Clin Proc 2018 (1-10) e-pub before print.

Surveyed 6695 Physicians

- Symptoms of burnout
- Rated hospital safety environment
- Reported a medical error

Physician burnout is at least equally responsible for medical errors as unsafe medical workplace conditions.





When surveyed 99% of patients, doctors, and nurses agree that compassionate care is important. BUT

In 2011, only 53% of patients and 58% of physicians, said that the healthcare system provided compassionate care.

In 2017 only 47% of physicians and 40% of nurses felt that the healthcare system provides compassionate care.



E. Toll “The cost of technology” JAMA 2012: 307:2497

The consequences of burnout for *physicians* and *nurses* can be even more dire!

Prevalence of Depression and Depressive Symptoms Among Resident Physicians.

Mata DA, Ramos MA, Bansal N, et. al.
JAMA (2015) 314, 2373-2383

- Meta analysis
- Prevalence 29 %
- Range 21-43 % depending on depression scale



The New York Times

THE DAILY BEAST



The Washington Post

The rate of physician suicide is increasing.
400 physicians die by suicide each year:

The equivalent of one entire Medical School

Annually, some 400 physicians die from suicide.

Relative to the general population, physicians have a lower mortality risk from cancer and heart disease.

But, they have a higher risk of dying from suicide.

Relative to all occupations and professions, the medical profession ranks near the top for death from suicide.



Both industry and retail businesses have long been aware of workforce **strain**

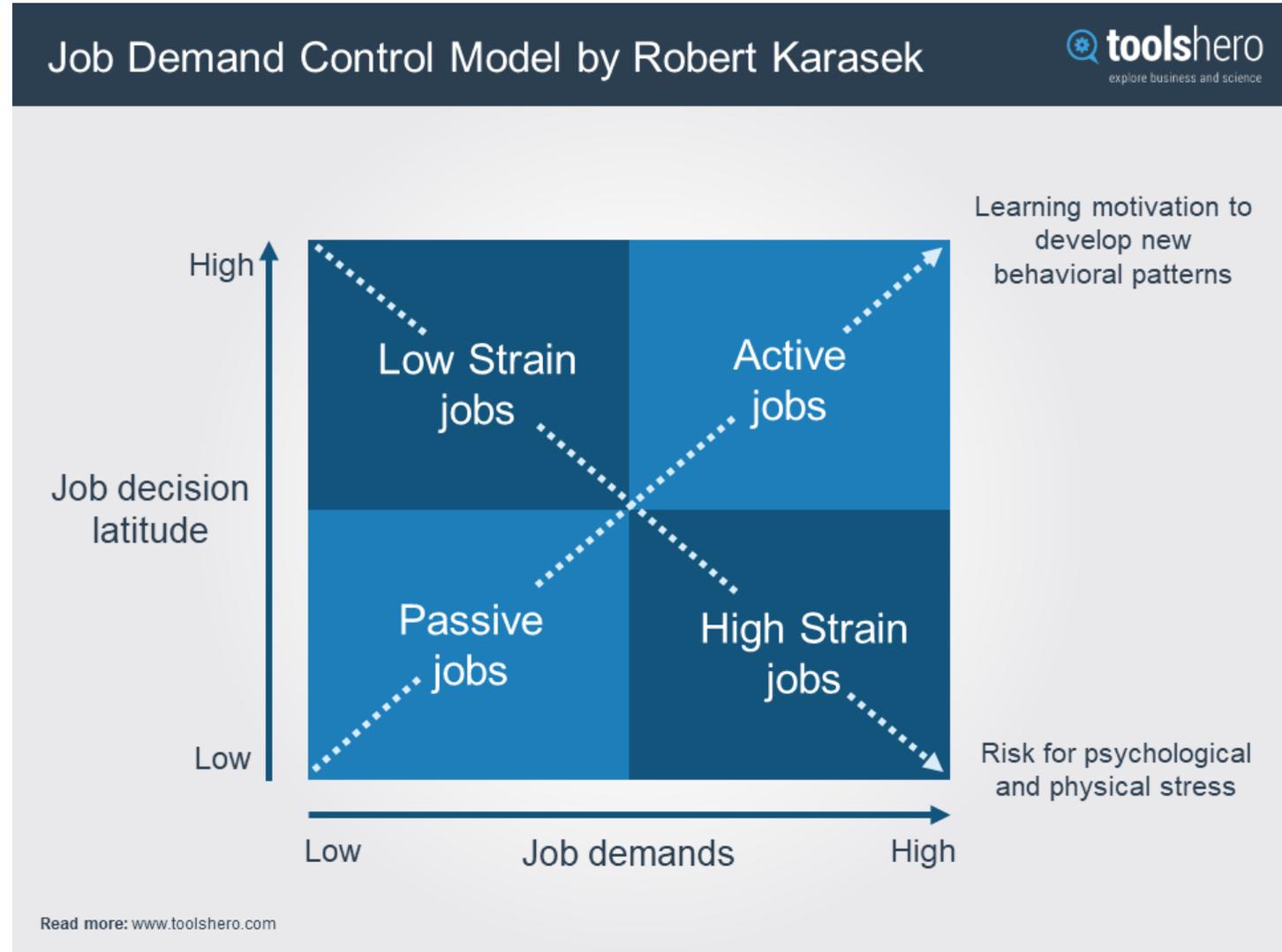
(Subsequently labelled: burnout; emotional exhaustion; moral distress; compassion fatigue; low engagement; poor safety culture)

1979

Robert A. Karasek, PhD

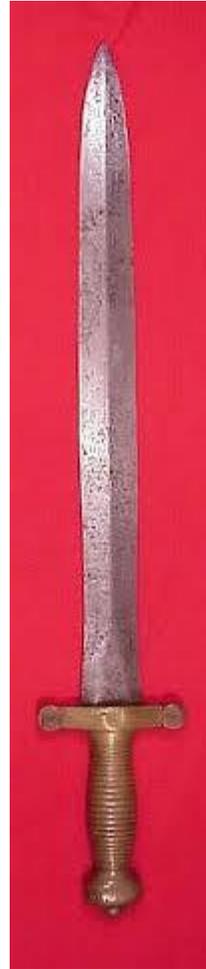
Industrial Engineering
Columbia University

Workplace strain is a function of how demanding a person's job is and how much control the person has over their responsibilities.



Clinical Standard Work

- Reduces variation
- Improves efficiency
- Reduces costs
- Improves safety
- Better work role definition



- Reduces flexibility
- Reduces control
- Reduces autonomy
- Preserves responsibility and accountability but with a lack of authority.

1981

Christina Maslach, PhD

Social Psychologist,

University of California, Berkeley



Burnout is not a problem of people but a problem of the social environment in which they work.

Burnout is caused by a chronic mismatch between people and their work setting.

- Workload (too much, wrong kind)
- Control (lack autonomy or control of resources)
- Reward (insufficient financial or social)
- Community (loss of positive connection)
- Fairness (inequity of workload, pay, promotion)
- Values (conflict with organizational values).

Allocation of physician time in ambulatory practice: A time and motion study in 4 specialties. C. Sinsky et. al. *Annls. Int. Medicine* (2016) 165:753-760

Internal Medicine, Family Medicine, Cardiology, Orthopaedics.

27%... Direct clinical face time

49%... EHR and desk work

1-2 hours each night... Pajama Time (mostly EHR)

4 September 2017 | *Annals of Internal Medicine* | Volume 167, Number 5
www.annals.org | ESTABLISHED IN 1957 BY THE AMERICAN COLLEGE OF PHYSICIANS

Annals of Internal Medicine



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IN THE CLINIC
Dyslipidemia ITCB-1

2001

Job Demands-Resources Model (JD-R)

E. Demerouti, A. Bakker, W. Schaufeli

Workforce strain results from increasing job demands while decreasing resources.

- Predictive of absenteeism, turnover, emotional exhaustion, burnout, personal health, and job engagement
- Studied in human services, industry, and transport

Medicine however, chose a different direction



Lean Manufacturing

Bring Toyota to Healthcare

lean manufacturing

Doing more with less by employing 'lean thinking.' Lean manufacturing involves never ending efforts to eliminate or ...



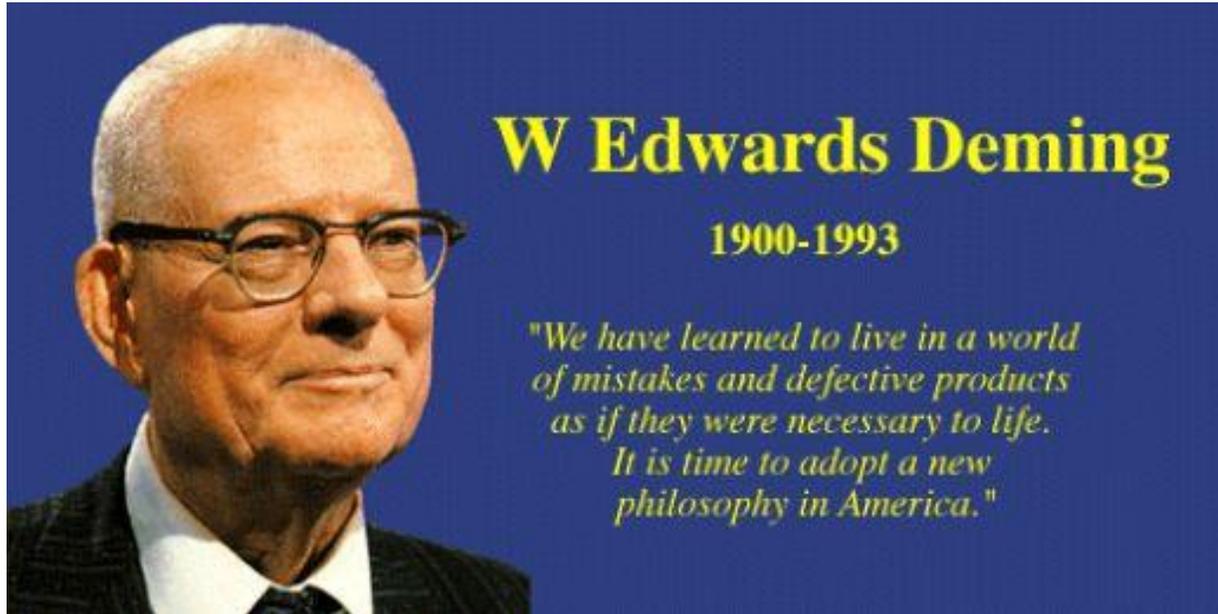
What industry process is a better model for healthcare?

Car Manufacturing



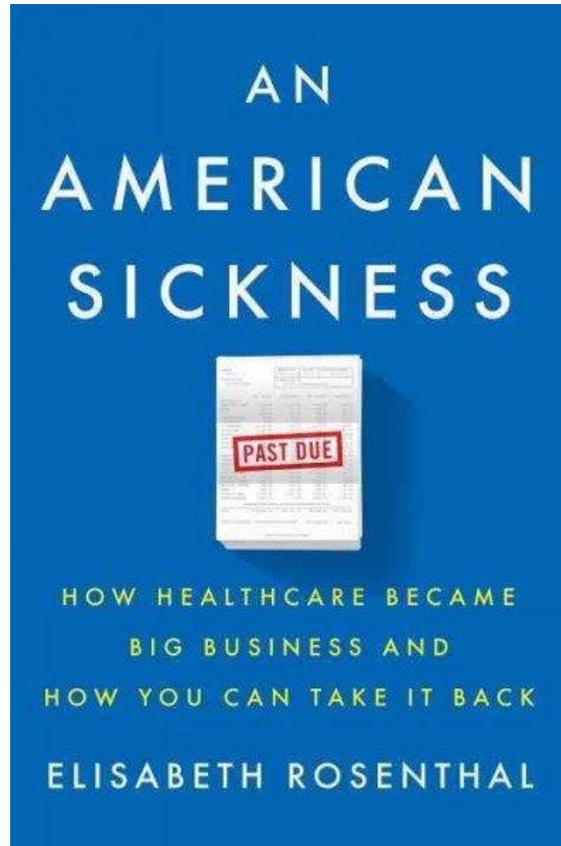
Baggage Claim





The Father of Total Quality Management

Bad systems bring out the worst in good people.



While we have become more like industry with billing, corporate practices, and efficiency, we have become less like industry with customer service and workforce well being.

1988

Howard Schultz

Founder and CEO Starbucks Coffee



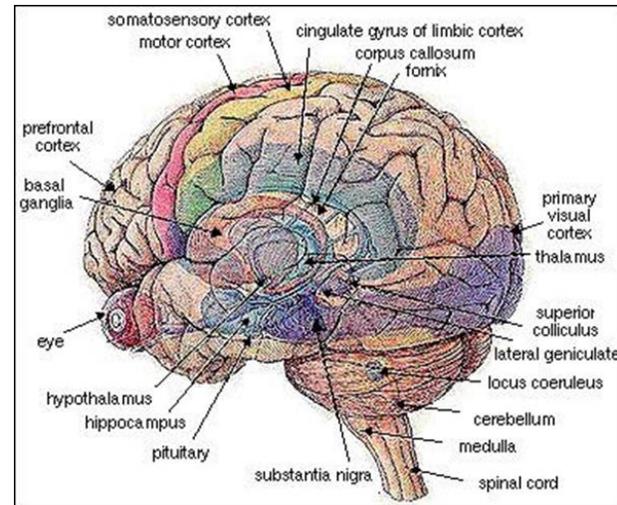
“ You can't expect your employees to exceed the expectations of your customers if you don't exceed the employees' expectations of management.”

The experience of the worker drives the experience of the customer

The experience of the clinician drives the experience of the patient and family.



The Social and Neuroscience Basis of Empathy and Compassion



We are hard wired!

Compassion:

Is the deep feeling that arises when confronted with another's suffering

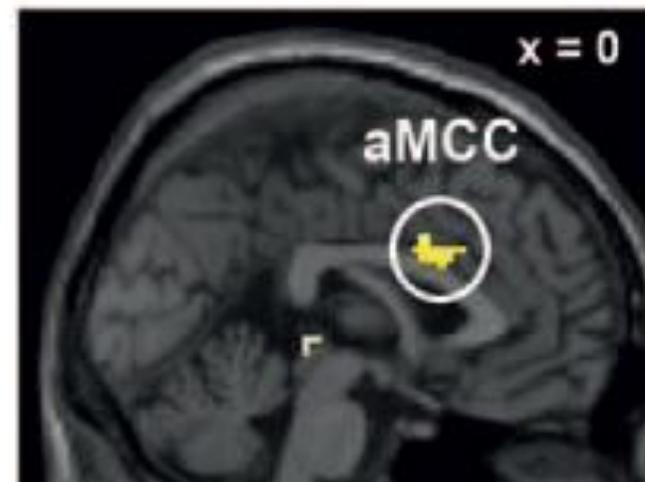
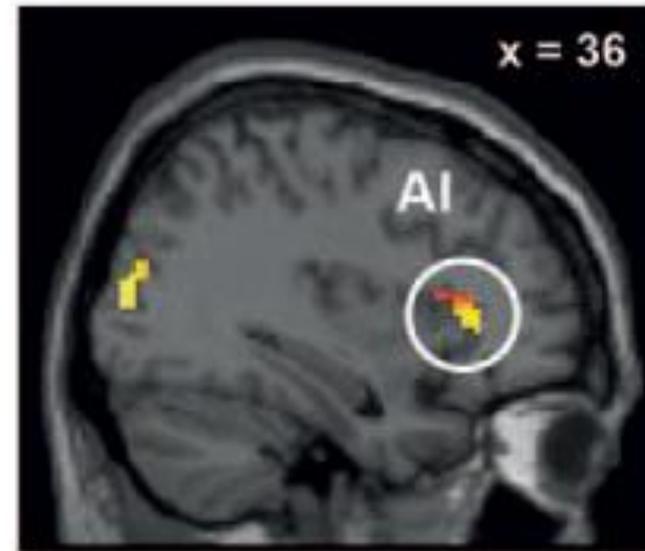
coupled with

A strong desire to alleviate that suffering

fMRI of empathy and compassion

- A core neural network involving anterior insula and anterior and middle cingulate.
- Empathy for others' pain activates regions involved with having a direct pain experience.
- Compassion activates areas involved with positive affect and reward.

**Bernhardt & Singer. The Neural Basis of Empathy.
Ann. Rev. Neurosci. (2012) 35 1-23**



My simpler view as to the cause of burnout:

Burnout occurs when you know what the patients need, but you are unable to give it to them.

- 10 more minutes in clinic or at the bedside
- A bit more patient education; tell them again
- Medications, tests, and services not covered by their insurance even after pre-authorization.
- Consultants not available till next November

*Compassion is the antidote for
burnout!*

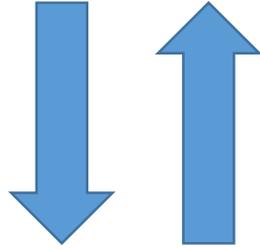
*And compassion is where we
should focus.*

Harvey Fineberg, MD, PhD
President, Institute of
Medicine 2013

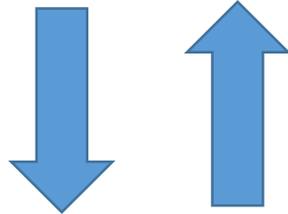


“The greatest inhibitor to individual caregivers showing compassion is that they themselves are disrespected, under stress, and not permitted to express their full professional engagement and responsibility.”

Leadership

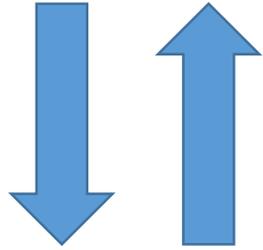


Team or Unit

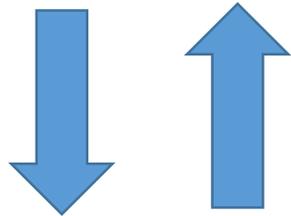


Caregiver

Leadership



Team or Unit



Caregiver

Increase Individual Resilience

(Making a stronger canary)

- Self help and easy to promote in conferences and seminars, and easy to teach.

Mindfulness exercises (breathing)

Personal health (nutrition and sleep)

Gratitude Journal / Three Good Things

Meditation (yoga)

- ***Places the burden on the caregiver***

Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis.

West, CP et. al. The Lancet (2016) 388: 2272-81

Effective approaches that reduce burnout scores:

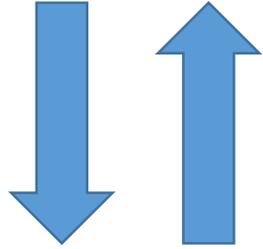
- Mindfulness
- Stress management
- Small group discussions



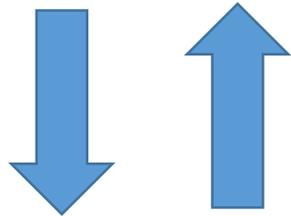
YES, personal resilience contributes to physician well-being.

- No amount of resilience can withstand a toxic or non-supportive environment.
- 80% of professional burnout is attributable to organizational factors (high workloads, workflow inefficiencies, EMR)
- We need systems of care that support our ability to connect with patients and families.

Leadership



Team or Unit



Caregiver

Implement programs that nourish Provider to Provider Compassion

“ There has to be an opportunity for caregivers to have an escape, to have their own humanity reaffirmed”

Harvey Feinberg, MD, PhD President IOM 2013.

Schwartz Rounds

Tea for the Soul

COMPASS (Colleagues Meeting to Promote And Sustain Satisfaction: Mayo Clinic).

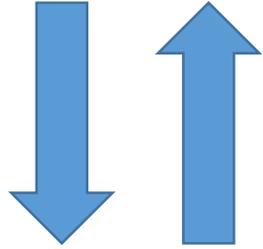
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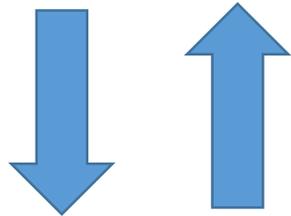
A multidisciplinary conference to share and talk about the experience of caring for patients.
Rather than the patient's story, it is the caregivers' story.



Leadership



Team or Unit



Caregiver

Leadership opportunities to support the delivery of compassionate care

- Monitor the emotional health of the workforce
- Policy after adverse events
- Address the Electronic Medical Record

Leadership opportunities to support the delivery of compassionate care

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A “Check-Up from the Neck-Up” Mental Health Screening Kiosks at Drexel University



Leadership opportunities to support the delivery of compassionate care

- Monitor the emotional health of the workforce
- **Policy after adverse events**
- Address the Electronic Medical Record

Managing Adverse Events An Airline Story



Managing Adverse Events A Hospital Story

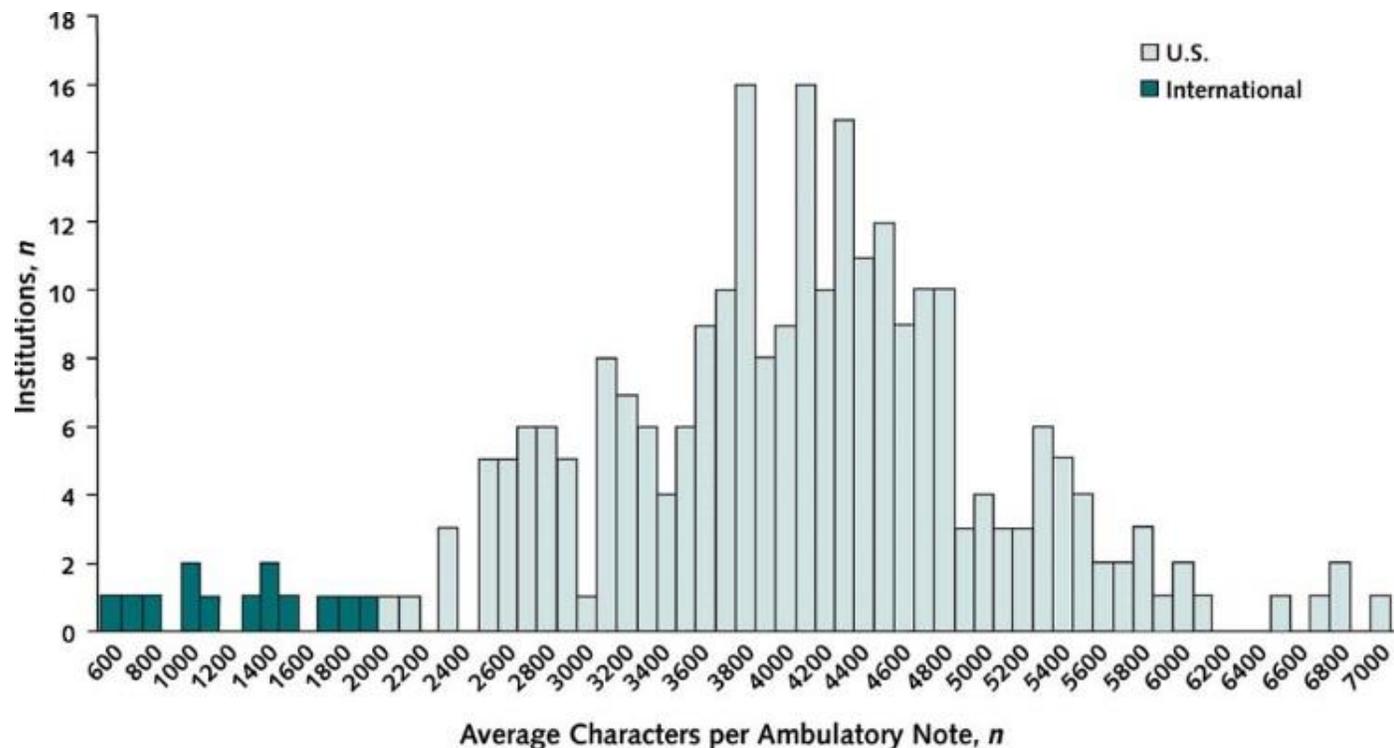


Leadership opportunities to support the delivery of compassionate care

- Monitor the emotional health of the workforce
- Policy after adverse events
- Address the Electronic Medical Record

Physician burnout in the electronic health record era: Are we ignoring the real cause.

Downing HL, Bates DW, Longhurst CA Ann Int Med 2018; 169:50-51



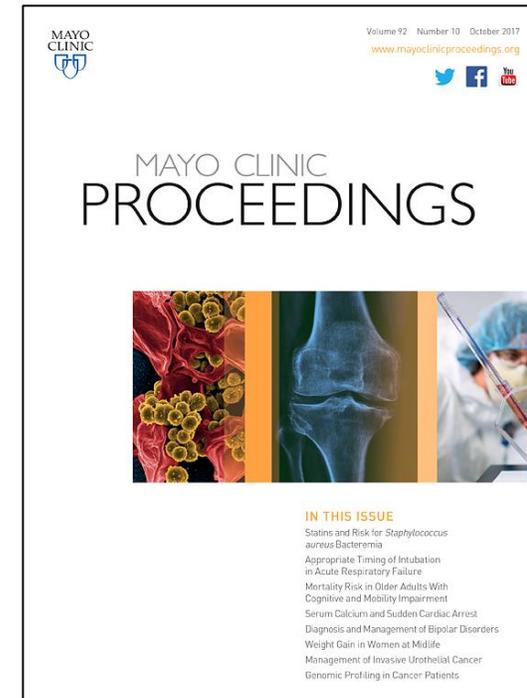
Clinical notes in the USA are 4 times longer than those in other countries due to reimbursement and compliance documentation requirements.

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

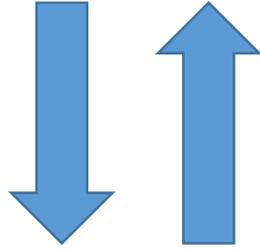
Tait Shanafelt and John Noseworthy

Mayo Clinic Proceedings

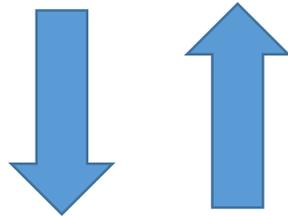
January 2017:92(1): 129-146



Leadership



Team or Unit



Caregiver

Is there a business model for compassion?

What matters most to hospitals?

Lowering Costs

Burnout affects efficiency and safety

Burnout increases employee turnover

Burnout causes MDs to go from full to part-time

Good Publicity

Patient satisfaction surveys (Picker, Press-Ganey, FES)

National rankings (US News & World Report)

The Business case for Investing in Physician Well-being

Shanafelt T., Goh J., Sinsky C. JAMA Intern Med Published on line September 25, 2017.

Costs to replace a physician:

Actual costs (direct and indirect)

Lost revenue during recruitment

Lost productivity once onboarded

Disruption to team

Disruption to patients

Academic Medical Centers are not immune.



Compassion Practices and HCAHPS: Does Rewarding and Supporting Workplace Compassion Influence Patient Perceptions?

Laura E. McClelland Ph.D.^{1,*} and Timothy
J. Vogus Ph.D.²

Health Services Research

[Volume 49, Issue 5](#), pages 1670–
1683, October 2014



*Compassion is the antidote for
burnout!*

*And compassion is where we
should focus.*