Addressing Burnout in the Healthcare Workforce: Building Resilience

Gail Nielsen
April 27, 2015
Objectives

Participants will be able to:

• Describe why it is important to address burnout
• Share examples of research, programs, and techniques for building resilience
• Use a “Snorkel” with work teams to begin removing frustration and building joy in work
Redefining Quality

Taking Care of our patients

Taking Care of Each Other

Taking Care of Ourselves
Taking Care of Ourselves

• Good/timely sleeping, eating and bodily functions
• Time for restoring self
• Focusing on the good; mitigating the bad
• Engaging with others in:
  – Celebrations of life and
  – Progress in our work together
Altruism, empathy, kind behavior, and helpfulness can be learned through our own awareness.
Donald M. Berwick, MD “H4”
Mindfulness changes your brain
December 2013, Orlando, April 2014, Paris

• Four Pillars of Human Flourishing*
  – Psychological resilience
  – Social support and cohesion
  – Exercise, movement, and sleep
  – Healthy exposure to substances in the diet and environment

*Wayne Jonas, Samueli Institute
How do we address burnout and stress in healthcare staff?
Burnout ≠ Lazy

Resilience = an individual's ability to overcome adversity
BURNOUT

ATTITUDES ARE CONTAGIOUS. MINE MIGHTKill YOU.
Burnout is common among physicians in the United States, with an estimated 30% to 40% experiencing burnout.
Table 4 | Nurse outcomes in 12 European countries and the US. Data are number of nurses reporting outcome/total number of nurses surveyed, and percentage

<table>
<thead>
<tr>
<th>Country</th>
<th>Reported ward to have poor or fair quality of care</th>
<th>Gave ward poor or failing safety grade</th>
<th>Regarded themselves to be burnt out</th>
<th>Dissatisfied with job</th>
<th>Intended to leave their job in the next year</th>
<th>Not confident that patients can manage own care after hospital discharge</th>
<th>Not confident that hospital management would resolve patients’ problems</th>
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<tbody>
<tr>
<td>Belgium</td>
<td>886/3167</td>
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<td>6</td>
<td>730/2938</td>
<td>25</td>
<td>680/3159</td>
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<td>England</td>
<td>540/2899</td>
<td>19</td>
<td>7</td>
<td>1138/2699</td>
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<td>1136/2904</td>
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<tr>
<td>Finland</td>
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<td>7</td>
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<td>23</td>
<td>232/1047</td>
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<td>Germany</td>
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<td>6</td>
<td>94/1506</td>
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<td>431/1430</td>
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<td>61/358</td>
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<td>246/315</td>
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<td>152/1389</td>
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<td>8</td>
<td>117/1385</td>
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<td>536/1293</td>
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<tr>
<td>Netherlands</td>
<td>756/2185</td>
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<td>6</td>
<td>123/2187</td>
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<td>211/2061</td>
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<td>Norway</td>
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<td>5</td>
<td>199/3712</td>
<td>82</td>
<td>823/3501</td>
<td>24</td>
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<tr>
<td>Poland</td>
<td>683/2581</td>
<td>26</td>
<td>18</td>
<td>463/2579</td>
<td>92</td>
<td>929/2321</td>
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<tr>
<td>Spain</td>
<td>897/2794</td>
<td>32</td>
<td>18</td>
<td>173/2784</td>
<td>78</td>
<td>787/2670</td>
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<tr>
<td>Sweden</td>
<td>2750/1051</td>
<td>27</td>
<td>11</td>
<td>1117/1035</td>
<td>27</td>
<td>2788/9477</td>
<td>29</td>
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<tr>
<td>Switzerland</td>
<td>324/1604</td>
<td>20</td>
<td>4</td>
<td>71/1606</td>
<td>22</td>
<td>228/1563</td>
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<tr>
<td>US</td>
<td>4196/316</td>
<td>16</td>
<td>6</td>
<td>1628/2672</td>
<td>91</td>
<td>9122/2727</td>
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</tr>
</tbody>
</table>
• Is burnout a reality in your life or work?

• Do you have a formal program underway?

• What interventions work
  – For you?
  – For your team?
HIGHLY ADOPTABLE IMPROVEMENT

A model and tool to address workload-capacity balance and perceived value amongst quality improvement projects

Christopher Hayes, M.D.
2013-14 Harkness Fellow
Workload Hypothesis

Change initiatives that do not add additional workload and have high perceived value are more likely to be adopted, cause less workplace burden and, achieve the intended outcomes.

© Chris Hayes 2014
www.highlyadoptableQI.com
Highly Adoptable Improvement

Timing the steps and processes involved in the intervention can give you an estimate of the additional workload. You can then reflect on the complexity of the intervention and ask:

1) Does it need all the proposed steps/processes?
2) Could steps/processes be simplified?
3) Could necessary equipment and technology be provided to reduce the workload associated with the steps?
4) Could other staff, providers or patient/families be involved to distribute the workload? Using LEAN tools can help identify other workflow steps that may have associated waste (or non-value added time), or could be modified to better incorporate the new work.

Slide by Chris Hayes 2014
www.highlyadoptableQI.com
What evidence of workload issues, if any, do you see in your workplace?
Reducing Impact of Negatives in our Experiences
Cultivating Positive Emotion: the 3 to 1 Ratio

“Please share three things that are going well around here, and one thing that could be better.” Make it about what you can do

“How can I help to remove barriers, so that the safety defects you are most concerned about can be better addressed?”

Slide adapted from Bryan Sexton PhD
How do we respond to colleagues in the workplace?

<table>
<thead>
<tr>
<th>Responding</th>
<th>What it sounds like</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Destructive</td>
<td>Finding the cloud in the silver lining</td>
</tr>
<tr>
<td>Passive Destructive</td>
<td>Not caring at all about their news</td>
</tr>
<tr>
<td>Passive Constructive</td>
<td>Not making a big deal about it</td>
</tr>
<tr>
<td>Active Constructive</td>
<td>Reacting positively, being interested and caring about their news</td>
</tr>
</tbody>
</table>

Active Constructive Responding: Gable et al, 2004
https://www.psych.rochester.edu/people/reis_harry/assets/pdf/GableReisImpettAsher_2004.pdf
Active Constructive Responding

Eye Contact / Smile / Touch / Laughter

• Overdone praise and positive feedback can make people feel uncomfortable or patronized

• Use questions which encourage others to talk about their good news and savor positive emotions

• Not easy? Try to ask at least three questions

• Insincerity is toxic

The ABCDE's of Good Listening
From the Comprehensive Airman Fitness Program

When someone shares good news:
- **A**ttend with genuine interest
- **B**e responsive to what is said
- **C**are about the other person
- **D**on’t interrupt
- **E**ncourage the person to say more

Source: Cacioppo, Reis, & Zautra, 2011

Three Good Things

Flourish

Martin E. P. Seligman

“A compelling view of a positive human future, for individuals, corporations, and nations, brilliantly told.”
—Tony Hsieh, author of Delivering Happiness and CEO of Zappos.com, Inc.
Intentionality: Teaching New Processes

OLD WAY
Teach & leave
• Static slides
• During busy staff meetings
• Teach in remote conference rooms

NEW WAY (TWI)
• Test to reliable process
• Specify the process
• Design education - with help aids
• Teach test group in workplace
• Stick around - can they do it?
• If needed, redesign education, process or both
• Teach the next group; can they do it as taught?

Gail A Nielsen 2012
How do people learn their jobs?

1. Identify key jobs
2. Break down by teacher**
   “Know what”
   “Know how”
   “Know why”
3. Teach one-on-one
4. “If the student hasn’t learned, the teacher hasn’t taught.”

** Supervisor

*“the way to get a person to quickly remember to do a job correctly, safely and conscientiously.” p. 73*
Help Mid-level Managers Coach

• Honor the current work through observation
• Understand that change is hard and uncomfortable
• Help people to know resistance to change is natural: it comes from fear of change
• Promote new skill development
• Build confidence to integrate the new habit into work patterns
• Manage relapses

adapted from www.teachbacktraining.org
The importance of happy staff

• Taking care of ourselves
• Taking care of each other
• Taking care of patients
• Bring systems thinking to the pursuit of well-being

• Reestablish your faith in and use of connectedness and interpersonal relationships
Engaging Front-line Staff in Innovation and Quality Improvement

“Snorkeling” – A modified version of the “Deep Dive”
IDEO – “The Deep Dive”

• IDEO is one of America’s Leading Design Firms
• IDEO’s special ingredients:
  – Teams
  – Culture
  – Methodology
The Snorkel:
Generating Ideas from Frontline Staff

• Harnesses creativity
• Liberates thinking
• Generates energy and enthusiasm
• Engages staff
• Helps move individuals past learned helplessness
• Focuses minds on the positive
• Supports action

Slide by Annette Bartley
Don’t start this process unless you intend to follow through; without follow-through it is just another failed exercise that contributes to burnout.

Follow through requires Support to the work team to:

• Do small tests of change
• Remove barriers outside the team’s control
• Celebrate progress
• Move on to address more of their ideas/challenge
Steps of the “Snorkel” (Modified for 1 Hour)

Propose a Design Challenge: How might we....?

Tell stories: what do we know about current context?

Brainstorm ideas for testing change

Select top ideas at tables

Prioritize ideas for development

Design first series of tests
Our Design Challenge

How might we:

grow our resilience to enable delivering the care we expect our family and friends to receive?
Storytelling

• In lieu of doing actual observations, use storytelling to “observe” actual experiences

• Recall an actual story or experience which relates to the specific design challenge (personal, friend or family member or work-related experience)
  
  ✓ *Who was involved?*
  ✓ *What happened?*
  ✓ *How did individuals feel and react?*

• Give an example
Brainstorming

Choose one or two “how might we scenarios….

- Offer ideas - include wild ideas
- Go for quantity – want more than 100 ideas
- Defer judgment
- Be visual – draw pictures
- One conversation at a time
- Build on ideas of others
- Stay focused on topic (“how might we…” design challenge)
Multi-voting to Select Top Ideas

• Cluster together similar ideas from brainstorming exercise

• Use 8 – 10 dots for each person to vote:
  ✓ What are your personal favorites?
  ✓ What idea would you most like to try on your unit?
  ✓ What idea do you think will have the biggest impact toward achieving the “how might we…”

• Participants can distribute their dots however they want — all on one idea, each dot on a separate idea, or anything in between

• Report out on favorite ideas (where there are most dots)
Matrix of Change Ideas

Sorting out where to start

Place concepts in matrix. Strive for easy, low-cost solutions.

Easy to Implement

Start with easy/low cost to build confidence and will

Difficult to Implement

Translate high-cost solutions into low-cost alternatives.

Low Cost

High Cost

Slide modified from original from Annette Bartley
How to construct a plan and small tests of change (PDSA)

**Plan:**
what you want to change?
what questions need answering?
who will do it? when? how? where? how long?

what will the data show if this test works?
make a prediction!!!
How to construct a small test of change (PDSA)

**Do:** carry out the test as designed; after completing the test, record what actually happened

**Study:** what did you learn? what did the results show compared to your prediction? any surprises?

**Act:** what will you do now? adopt, adapt or abandon

Slide by Annette Bartley
| PDSA Worksheet | Team Name: ________________  
| Cycle start date:________  
| Cycle end date:________ |

**PLAN:** Area to work on:
Describe the change you are testing and state the question you want this test to answer (If I do x will y happen?)
What do you predict the result will be?
What measure will you use to learn if this test is successful or has promise?
Plan for change or test: who, what, when, where
Data collection plan: who, what, when, where

**DO:** Report what happened when you carried out the test. Describe observations, findings, problems encountered, special circumstances.

**STUDY:** Compare your results to your predictions. What did you learn? Any surprises?

**ACT:** What will you do next? Adopt, adapt, or abandon the change?
Creating Action Plans

Aligning Forces for Quality: Transforming Care at the Bedside Workshop  
March 2-6, 2009  
Downtown Philadelphia Marriott, Philadelphia

**ACTION PLANNING FORM**

<table>
<thead>
<tr>
<th>Hospital:</th>
<th>Pilot Unit(s):</th>
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</table>

**Six Month Goal:**  
(recommend improving performance by 50% every six months)

**Changes to Test and Implement to Reach Your Aim:**

1.  
2.  
3.  
4.  
5.  

**Measure(s) to Monitor Progress**

1.  
2.  
3.  
4.  
5.  

<table>
<thead>
<tr>
<th>Plan for Testing Each of the Changes Listed Above</th>
<th>Person Accountable</th>
<th>Who Needs to be Involved?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe what you will need to do:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• get ready to test this change on your unit</td>
<td></td>
<td></td>
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<tr>
<td>• how you will carry out the test (include prediction)</td>
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<tbody>
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<th>June</th>
<th>July</th>
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<td>6 13 20 27</td>
<td>4 11 18 25</td>
<td>1 8 15 22 29</td>
<td>6 13 20 27</td>
</tr>
</tbody>
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Resilience Online slides and videos: Quick Links


• Schwartz Center Webinar Series on Clinical Resilience: Preventing Burnout, Promoting Compassion, Improving Quality of Care https://www.youtube.com/watch?v=5uuvzn7D1tM

• Schwartz Center: http://www.theschwartzcenter.org/past-webinars/clinician-resilience-preventing-burnout-promoting-compassion-improving-quality/

J Bryon Sexton, PhD Resilience Lectures Online

• Three Good Things  
  https://www.youtube.com/watch?v=hZ4aT_RVHCS

• Science of Safety: Safety as a System (at Texas Children’s, 2012)  
  https://www.youtube.com/watch?v=PsRaEsju6KA

• Slides: Healthcare Worker Resilience: The Intersection of Quality, Stress and Fatigue  
Online References for Chris Hayes: Highly Adoptable Healthcare

• Chris Hayes’ website at www.Highlyadoptable.webstarts.com

• Chris Hayes featured in an article “Doing things better without adding hours to the day” on www.HealthCanal.com (HealthCanal - Health News)

• http://www.healthcanal.com/life-style-fitness/57433-doing-things-better-without-adding-hours-to-the-day.html

• WIHI with Chris Hayes on burnout and its impact on sustainability: http://www.ihi.org/resources/Pages/AudioandVideo/WIHIIMaki ngQIMoreSustinnable.aspx
Resilience: Recommended Reading

• Flourish by Martin Seligman 2011
• Positivity: Top-Notch research reveals the 3 to 1 Ratio That Will Change Your Life by Barbara Fredrickson, PhD [Cultivating Positive Emotion: Ratio of positive to negative]
  o Top 5 Amygdala Triggers in the workplace: Condescension and lack of respect, Being held to unrealistic deadlines, Being treated unfairly, Being unappreciated, Feeling unheard
• Importance of Sleep:
Resilience Articles/Research: Medicine

- Dyrbye LN, Shanafelt TD. Physician Burnout: A Potential Threat to Successful Health Care Reform. JAMA, May 18, 2001 Vol 305, No.19
- Medscape the 2015 Physician Lifestyle Report: across all types of physicians surveyed, 46 percent described themselves as burned out, compared to 39.8 percent of doctors surveyed in 2013 for the 2014 report.
Resilience Articles/Research: Nursing