Beyond Burned Out to Beyond Burnout

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Health & Well-Being Services

November 18, 2021
Agenda

• Burnout Background
• Local Data and Drivers
• Beyond Burnout → Well-being
• Strategies, Resources, Tactics
• Discussion Questions
Everyone is Talking About Burnout

How to Recognize Burnout Before You’re Burned Out

Burnout Isn’t Just Exhaustion. Here’s How To Deal With It

What burnout really means, and what bosses and employees can do about it

5 Signs You’re Headed for Burnout at Work, and What You Can Do to Fix It
A record amount of Americans are quitting their jobs due to pandemic burnout

Everyone is Talking About Burnout

US public health workers leaving ‘in droves’ amid pandemic burnout

The New York Times

A Parallel Pandemic Hits Health Care Workers: Trauma and Exhaustion

Vaccines may be on the way, but many on the front lines are burned out. Has the government done enough to help alleviate their stress?

We Have All Hit a Wall

Confronting late-stage pandemic burnout, with everything from edibles to Exodus.
Characterized by

- Emotional exhaustion
  - feeling depleted

- Depersonalization
  - detachment, cynicism, irritability

- Low sense of personal accomplishment
  - feeling unproductive
Burnout is an Occupational Phenomenon

The Atlantic

POLITICS

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.
• Burnout included ICD-11 as an occupational phenomenon → not classified as a medical condition

• Burnout is defined as:
  ...a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed...

• It is characterized by three dimensions:
  • feelings of energy depletion or exhaustion;
  • increased mental distance from one’s job, or feelings of negativism or cynicism related to one's job; and
  • reduced professional efficacy.

• Burnout refers specifically to phenomena in the occupational context and should not be applied to describe experiences in other areas of life.
<table>
<thead>
<tr>
<th>Burnout</th>
<th>Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational syndrome</td>
<td>Clinical mental health diagnosis</td>
</tr>
<tr>
<td>Job demands/resources, work environment</td>
<td>Genetics, biochemistry, hormones, environmental factors</td>
</tr>
<tr>
<td>Changes in the work environment, coaching, breaks/time away</td>
<td>Pharmacologic and psychotherapy</td>
</tr>
<tr>
<td>Medical errors</td>
<td>Suicidal ideation</td>
</tr>
</tbody>
</table>

Adapted from Tait Shanafelt, American Conference on Physician Health and Stanford Medicine WellMD | WellPhD presentations, October 2021
Work System Factors include:

**Job Demands**
- Excessive workload, unmanageable work schedules, and inadequate staffing
- Administrative burden
- Workflow, interruptions, and distractions
- Inadequate technology usability
- Time pressure and encroachment on personal time
- Moral distress
- Patient factors

**Job Resources**
- Meaning and purpose in work
- Organizational culture
- Alignment of values and expectations
- Job control, flexibility, and autonomy
- Rewards
- Professional relationships and social support
- Work-life integration
Contributors of Burnout

Organizational-level
Leadership behaviors, decision-making, work expectations, culture

Work-level
Workload overload, inefficiencies, long hours, administrative burden/EHR; lack of autonomy, control or flexibility, lack of respect among colleagues

Individual-level
Self-criticism, over-commitment, coping strategies, work-home imbalance, no sleep or support
Consequences of Burnout

**Organizational-level**
Turnover, quality of care, patient satisfaction, safety; $500K-1 million for physicians, 1-2x salary of nurses

**Work-level**
Interpersonal conflict, decreased productivity, detachment from patients, loss of joy in work, professional dissatisfaction

**Individual-level**
Morale; physical, emotional and mental health; strained relationships, alcohol and substance abuse, isolation, suicidal ideation, neglecting personal needs
**Workplace Well-Being**

*Optimal quality of life and experience at work*

- Having **energy** for work, or feeling energized by it
- Feeling **connected** to people and purpose
- Having **flexibility** between work-home
- Experiencing **psychological safety**
  
  Able to speak up with your ideas, questions and concerns, or make mistakes, without fear; be full self at work
Beyond Burnout

1. Prioritize well-being as a core value & daily practice

2. Measure to improve our *quality* of life at work

3. Seek to understand root causes and system-level solutions

4. Invest in people, programs, and initiatives for well-being
Prioritize Well-Being as a Core Value & Daily Practice

Wellness Office

“The Wellness Office’s Mission, Vision and Goals are aligned with Michigan Medicine’s Core Values of Caring, Innovation, Inclusion, Integrity, and Teamwork.”
Prioritize Well-Being as a Core Value & Daily Practice

MHealthy
Model of Well-Being: Michigan Medicine and MHealthy

Workplace Well-Being

Overall Well-Being

ORGANIZATIONAL LEVEL
How we care for each other
Improve workplace environment
Psychological safety

INDIVIDUAL LEVEL
How we care for ourselves
Improve what we bring to work
Personal safety

WORK LEVEL
How we care for our patients
Improve how we work
Patient Safety

Physical
Emotional Mental
Spiritual
Economic
Environmental
Financial
Intellectual
Occupational
Social
Prioritizing – Ask Ourselves Each Day

• What effect will my actions and decisions today have on staff, faculty & learner well-being?

• What can I do (or stop doing) to facilitate the well-being of our staff, faculty, and learners?

• How can I take care of myself and each other each day?
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### Press Ganey

“Early warning system for burnout”

<table>
<thead>
<tr>
<th>Question</th>
<th>All Faculty</th>
<th>All Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am able to disconnect from work communications during my free time (emails/phone etc.)</td>
<td>28% Agree</td>
<td>65% Agree</td>
</tr>
<tr>
<td>I am able to free my mind from work when I am away from it.</td>
<td>32% Agree</td>
<td>58% Agree</td>
</tr>
<tr>
<td>I can enjoy my personal time without focusing on work matters.</td>
<td>39% Agree</td>
<td>65% Agree</td>
</tr>
<tr>
<td>I rarely lose sleep over work issues.</td>
<td>37% Agree</td>
<td>60% Agree</td>
</tr>
</tbody>
</table>
Key Domains of Well-Being

- Work-Home Flexibility
- Feeling Valued
- Psychological Safety
- Leadership Connection
- Professional Fulfillment
- Burnout
- Burnout Drivers
- Emotional & Mental Health

Diversity, Equity & Inclusion

Burnout: Organizational-level metric
Burnout Drivers: Faculty only for 2021
Emotional & Mental Health: Only on Wellness Office Survey
### Key Domains of Well-Being

<table>
<thead>
<tr>
<th>Domain</th>
<th>Faculty (%)</th>
<th>Staff (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Work-Home Flexibility</strong></td>
<td>41%</td>
<td>65%</td>
</tr>
<tr>
<td><em>I feel balanced between work, family, and personal growth.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Psychological Safety</strong></td>
<td>64%</td>
<td>64%</td>
</tr>
<tr>
<td><em>There is a climate of trust at Michigan Medicine.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Professional Fulfillment</strong></td>
<td>82%</td>
<td>78%</td>
</tr>
<tr>
<td><em>I’m contributing professionally (e.g., patient care, teaching, research, and leadership) in the ways I value most.</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Domain</th>
<th>Faculty (%)</th>
<th>Staff (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Feeling Valued</strong></td>
<td>65%</td>
<td>72%</td>
</tr>
<tr>
<td><em>Michigan Medicine treats faculty with respect.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Leadership Connection</strong></td>
<td>50%</td>
<td>67%</td>
</tr>
<tr>
<td><em>I can easily communicate any ideas and/or concerns I may have to Michigan Medicine leadership.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Burnout</strong></td>
<td>53%</td>
<td>48%</td>
</tr>
<tr>
<td><em>I have one or more symptoms of burnout (e.g., emotional exhaustion, depersonalization, or a low sense of personal accomplishment).</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Burnout Over Time*

*Burnout question varied slightly between surveys & groups
Overall, the University of Michigan actively supports a work culture and environment that promotes the health and well-being of its faculty and staff.

<table>
<thead>
<tr>
<th>Response</th>
<th>UMHS (N=6,304)</th>
<th>U-M (N=14,443)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>31.06%</td>
<td>45.73%</td>
</tr>
<tr>
<td>Agree</td>
<td>34.79%</td>
<td>45.20%</td>
</tr>
<tr>
<td>Slightly agree</td>
<td>15.45%</td>
<td>13.41%</td>
</tr>
<tr>
<td>Slightly disagree</td>
<td>3.85%</td>
<td>3.25%</td>
</tr>
<tr>
<td>Disagree</td>
<td>2.44%</td>
<td>2.13%</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>1.46%</td>
<td>1.22%</td>
</tr>
</tbody>
</table>
The person I report to is supportive of workplace health and well-being activities.

- **Strongly agree**: 31.06% (UMHS) vs. 43.87% (U-M)
- **Agree**: 15.45% (UMHS) vs. 39.52% (U-M)
- **Slightly agree**: 10.66% (UMHS) vs. 2.11% (U-M)
- **Slightly disagree**: 3.85% (UMHS) vs. 2.11% (U-M)
- **Disagree**: 2.44% (UMHS) vs. 2.34% (U-M)
- **Strongly disagree**: 1.46% (UMHS) vs. 1.50% (U-M)
In the past year, which of the following have been major sources of stress for you?

<table>
<thead>
<tr>
<th>Stress Source</th>
<th>UMHS (N=6,438)</th>
<th>U-M (N=14,743)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job responsibilities</td>
<td>33.32%</td>
<td>36.19%</td>
</tr>
<tr>
<td>Coping with too much to do</td>
<td>33.30%</td>
<td>35.32%</td>
</tr>
<tr>
<td>Finances loan mortgage</td>
<td>26.76%</td>
<td>24.76%</td>
</tr>
<tr>
<td>Family problem</td>
<td>19.99%</td>
<td>18.94%</td>
</tr>
<tr>
<td>Relationships at work</td>
<td>16.53%</td>
<td>17.49%</td>
</tr>
<tr>
<td>Other major source of stress</td>
<td>15.32%</td>
<td>14.91%</td>
</tr>
<tr>
<td>Illness or injury of loved one</td>
<td>14.66%</td>
<td>14.83%</td>
</tr>
<tr>
<td>Personal illness injury</td>
<td>13.09%</td>
<td>14.38%</td>
</tr>
<tr>
<td>Dealing with child care</td>
<td>11.37%</td>
<td>11.58%</td>
</tr>
<tr>
<td>Care of elderly parent</td>
<td>9.72%</td>
<td>10.51%</td>
</tr>
<tr>
<td>Death of a spouse, life partner or other loved one</td>
<td>8.09%</td>
<td>7.63%</td>
</tr>
<tr>
<td>Divorce or separation</td>
<td>3.70%</td>
<td>3.51%</td>
</tr>
<tr>
<td>Legal problem</td>
<td>1.93%</td>
<td>1.93%</td>
</tr>
</tbody>
</table>
1. Prioritize well-being as a core value & daily practice

2. Measure to improve our *quality* of life at work

3. **Seek to understand root causes and system-level solutions**

4. Invest in people, programs, and initiatives for well-being
“_______ contributes to my feelings of burnout or stress.”

<table>
<thead>
<tr>
<th></th>
<th>Email</th>
<th>Clerical Burden</th>
<th>MiChart</th>
<th>Insufficient Time for Meaningful Activities</th>
<th>In-Basket Messages</th>
<th>Productivity Requirements/Expectations</th>
<th>Lack of Flexible Work Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burnout Drivers: Faculty</td>
<td>68%</td>
<td>70%</td>
<td>65%</td>
<td>52%</td>
<td>64%</td>
<td>55%</td>
<td>33%</td>
</tr>
</tbody>
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WELLNESS OFFICE
IMPROVING HEALTH WHILE CARING FOR EACH OTHER
ORGANIZATIONAL-LEVEL  WORK-LEVEL  INDIVIDUAL-LEVEL
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M| MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN
Top Areas of Concern: Staff

1. My work unit/department is adequately staffed.
   • 46% of respondents agreed

2. The environment at this organization makes employees in my work unit/department want to go above and beyond what's expected of them.
   • 50% of respondents agreed

3. The amount of job stress I feel is reasonable.
   • 54% of respondents agreed
Beyond Burnout

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Promoting Well-Being

- Intentionally ensure **well-being is factored into decisions**
- Help teams **prioritize**
- Ask for **input**
- Allow some **control** (*self-determination*) in decision-making
- Incorporate **flexibility** where you can
- **Model** well-being behaviors
- **Ask** about well-being (including during annual reviews)
- Identify contributors of burnout, **measure** it
- **Share** your stories, talk about it
- Make it ok to **seek help**, make room for help, be the help
- Pause for acknowledgement, praise, **recognition**
- Know the **resources** that are available
Identifying Opportunities

Connecting the Data
- Review Survey Results
- Identify Strengths and Opportunities
- Connect to Others/Share Best Practices
- Connect to Programs and Resources

Department Leadership Meetings
Meeting individually to discuss well-being data, opportunities, and goals in more detail
Connecting to Programs and Resources

Wellness Office

Well-Being Grants
Wellness Advocate Network
Wellness Office Website
Well-Being Survey Tools and Dashboard
Faculty Associate Program

Toolkits & Trainings
Well-Being Help Center
Best Practices & Publications
<table>
<thead>
<tr>
<th>Year</th>
<th>Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2020-21</strong></td>
<td>Improving Workflow to Alleviate Physician Burnout (Drs. Nieves &amp; Oral, Internal Medicine)</td>
</tr>
<tr>
<td></td>
<td>Professional Development for Radiation Oncology and Medical Physician Trainees (Drs. Paradis &amp; Laucis, Radiology Oncology)</td>
</tr>
<tr>
<td></td>
<td>Improving Radiology Wellness Through Inclusive Imagery (Drs. Garver &amp; Joshi, Radiology)</td>
</tr>
<tr>
<td></td>
<td>Three Good Things (Dr. Gold, Family Medicine)</td>
</tr>
<tr>
<td></td>
<td>Ob-Gyn Wellness Book Club (Dr. Seewald, Ob-Gyn)</td>
</tr>
<tr>
<td></td>
<td>Overcoming Barriers to Participation in COMPASS a Peer-to-Peer Support Program (Dr. Marr, Internal Medicine)</td>
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<tr>
<td></td>
<td>Sustained Presence of High-Quality Nutrition Leads to Improved Provider Wellness (Dr. Amin, Internal Medicine)</td>
</tr>
<tr>
<td></td>
<td>Women in CVM Peer Mentorship Pilot (Dr. Gualano, Internal Medicine)</td>
</tr>
<tr>
<td><strong>2021-22</strong></td>
<td>Timeular: A Different Approach to Time Management, Productivity Tracking, and the Work/Life Balance (Courtney Oliver, Internal Medicine)</td>
</tr>
<tr>
<td></td>
<td>Improving Burnout and Wellbeing for Faculty, Staff and Learners with Positive Leadership Training (Drs. Garver &amp; Young, Radiology)</td>
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<tr>
<td></td>
<td>Adapting the Providers Share Workshop Methodology to Support COVID Caregivers (Dr. Harris, Ob-Gyn)</td>
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<tr>
<td></td>
<td>Parenting Stories at Michigan Medicine (Drs. Paradis &amp; Morgan, Radiation Oncology/Ob-Gyn)</td>
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<tr>
<td></td>
<td>Compassion Awareness Project (Sarah Thurston, ULAM)</td>
</tr>
<tr>
<td></td>
<td>Creating a Positive Organizational Culture with Storytelling (Drs. Garver &amp; Young, Radiology)</td>
</tr>
<tr>
<td>Name</td>
<td>Department</td>
</tr>
<tr>
<td>--------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Dr. Anita Amin</td>
<td>IM - Hosp Med</td>
</tr>
<tr>
<td>Dr. Kris Chrouser</td>
<td>Urology</td>
</tr>
<tr>
<td>Dr. Helen Morgan</td>
<td>OB/GYN</td>
</tr>
<tr>
<td>Dr. Laura Owens</td>
<td>OB/GYN</td>
</tr>
<tr>
<td>Dr. Gurjit Sandhu</td>
<td>Surgery</td>
</tr>
<tr>
<td>Dr. Raf Rizk</td>
<td>IM - GI</td>
</tr>
</tbody>
</table>
Burnout Toolkit
and Reflection Guides
Connecting to Programs and Resources

OCWR & FASCCO
MHealthy

Mental Health Counseling
Supervisor/leader Consults
Support Groups
Educational presentations and programs

COMPASS Peer Support Network
Stress Resilience Rounds
Debriefing support after impactful events
Crisis Support Resources
Stress First Aid

Programming
Resource Coach, Financial well-being, Online programs and tools, Ergonomic Grants
Alcohol Management, Tobacco Treatment, Physical Activity, Healthy Eating

Culture of Connection Leadership Training
MHealthy Champions
Wellness Grants
Focused Partnerships
Health and Culture Surveys

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IMPROVING HEALTH WHILE CARING FOR EACH OTHER
ORGANIZATIONAL-LEVEL WORK-LEVEL INDIVIDUAL-LEVEL
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• Well-being is more than the absence of burnout
• Individual resilience important but not enough
• Well-being requires organization-level strategies and good partnerships
• Well-being needs everyone, everyone needs well-being
• Tailor solutions at local levels based on data
• Start with self-compassion, this is a lot
• Know some improvements will take time
• Our values will get us there
Organizational Commitment

welnessoffice.med.umich.edu/inaugural-report
hr.umich.edu/sites/default/files/2020-mhealthy-annual-report.pdf
“Mattering”

• People want to be asked what really matters
• Know they matter
• You matter!
Beyond Burnout
Workplace Well-Being

1. From an organizational-level, how might U-M better support faculty and staff in addressing burnout (i.e., systems, policies, practices, etc.)?

2. From a “work” or unit/department-level, how might U-M better support faculty and staff in addressing burnout? (i.e., local/team leaders, unit level interventions, etc.)

3. Based on what you heard today, from an individual-level, how might U-M better support faculty and staff who are experiencing burnout?
What Can Well-Being Sound Like?

My direct supervisor is present and I feel she listens to what I have to say. I enjoy my job, 99% is because of her.

I feel thoroughly supported not only in my current role, but also in as many personal facets as can be impacted by professional interactions.

Very positive and engaging environment. Strong foundation of trust and respect for one another.

I feel that I am supported by Leadership to ask questions and bring up issues that arise.

Our management really listens to their employees and is extremely supportive in all aspects of our lives. They genuinely care about us and our physical and mental well being.

I really enjoy working with my direct supervisor. She takes great care in promoting patient safety and treating others with respect. I feel that my concerns are always heard.

The difference on our unit is we are a team, we help each other. We recognize when someone is overwhelmed and step in and help.