Burnout & the Healthcare Professional

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I, and my immediate family, DO NOT have any relevant financial relationships with any commercial interests.
Learning Objectives

• List tools to improve satisfaction with provider professional and personal life.

• Integrate evidence-based strategies to increase provider professional satisfaction.
The common challenges in practice

• Managing one’s own life transitions and stressors
• addressing vulnerabilities with reactions to difficult patient interactions
• addressing complaints or potential law suits
• managing dependent patients and maintaining healthy boundaries
• workload concerns, time management, efficiency
• work-life balance
• and still avoiding...
Continuum of Clinician Health

Individual  Organization

Well-being  Burnout  Impairment
Causes of Burnout

- Imposter Syndrome: Am I good enough
- Compulsivity: A normal clinician trait
- Psychology of postponement
- Hidden agenda: clinical ‘productivity’ gets rewarded more than emotional wellbeing
Burnout Prevention Measures

• Increase self-awareness, mindfulness training, maintaining a good work-life balance, healthy interpersonal boundaries.

• Reduce stress, learn effective leadership and delegation skills, focus on work activities with the most meaning. Use your team to help.
Consequences of Burnout

- Unreached potential as healers
- Not present for patients
- Reduced patient and clinician satisfaction
- Staff turnover
- Inefficiency
Self Care Checklist: Do you?

• Get a good night’s sleep most of the time?
• Eat and drink moderately and healthfully?
• Have regular exercise built into your life?
• Support your practice with consultation and peer support group activities at least once per month?
• Know your reactions and seek therapy as needed?
Practice what you preach

- Take a vacation each year, time off with friends or family
- Have activities or hobbies not related to your work
- Have quality time with family and friends
- Have someone you share your joys and concerns with
Supporting a Colleague

• Let colleague share their experience
• Provide practical support (call, shared duties)
• Be patient and allow for silence
• Express appreciation for sharing.
• Discuss some coping strategies -- plans.
• Do they have a support system? Is it accessible?
• Ask if it's okay to follow up.
• Provide a resource list (if applicable).
• When in doubt, refer.
**Death of a patient - phases:**
*(disease, accident, suicide)*

- Information, protection and support, sympathy, empathy, allow time to recover from the initial shock.
- Channels for the expression of feelings, team meetings, supervision, staff discussion (self-blame, overwork, withdrawal, critical remarks discouraged)
- A case review/conference where appropriate (treatment, policy and training can be formally reviewed)
- Prevention: Identify whom you would turn to for support if a patient dies, or commits suicide (practice partner, trusted colleague).
Sudden Illness/Accident of Clinician?

- Have a plan for coverage ahead
- Take time in listening to patient reactions, offer reassurance of continuity of care.
- Share the load of any ill or deceased clinician.
Possible areas of distress

- Depression
- Suicidal behavior
- Substance abuse
- Sexual misconduct
Coping strategies to avoid burnout and distress (1)

• Setting boundaries
• Using humor
• Maintain a positive focus
• Find ways to be creative
• Healthy escapes from the office
• Exercising
• Asserting your own rights and needs
• Getting involved in other professional activities
• Reaching out for nurturing relationships
• Venting
• Refocusing on the rewards of medicine
Coping strategies to avoid burnout and distress (2)

- Relaxing
- Attending clinical conferences/CE
- Renewing your sense of spirituality/mission
- Improving work environment
- Undergoing personal therapy
- Utilize professional consultation or peer support groups
- Making organizational changes at the practice
- Take a moment to prepare mentally and clinically for each patient visit.
- Delegate
- Maintain a flexible attitude with changing health care demands
Some strategies to reduce the load

• Make use of partnerships and teamwork
• Assess your values and manage your time
• Be assertive
• Clarify workflow goals
• Establish your goals and institutional needs
• Simplify
Continuum of Clinician Health

Well-being  Burnout  Impairment

Individual  Organization
Impairment

• The inability of a clinician to practice with reasonable skill and safety to patients

• Due to
  – chemical dependency
  – physical illness
  – mental illness
Duty to Report

• ORS 676.150 (January 1, 2010)
  – Law requires licensees of all health professions to report prohibited or unprofessional conduct of other health licensees to their professional licensing boards within 10 days.
  – All mental health professionals, physicians, nurses, dentists, pharmacy specialists, massage therapists, natropaths, dieticians....
    » www.AMHA-OR.org
Treatment of Impaired Clinicians

- 15% of physicians impaired
- 10-15% of all healthcare professionals impaired
- Higher rates of abuse with benzodiazepines and opiates in healthcare professionals
  — Baldisseri, 2007
Barriers to Seeking Treatment

- Suppression
- Denial
- Shame

- ACCA Survey (2008)
Other Critical Issues

- Identification
- Treatment-intensive inpatient management and follow-up care
- Impairment, diversion, monitoring statewide program
- Legal issues—reporting requirements of each state
Potential Outcomes if Untreated

- Loss of license
- Health Problems
- Death
Outcomes if Treated

• High recovery rates
  – 75-95% success rate at 2-5 years
  – Success rate increase with increased monitoring

• Seppala, Berge (2010)
International Perspective

• Israel Intervention program
• Physicians addiction to alcohol or drugs rare
• Mental illness-50% of those examined
  • Bar-el, Kalian, Knobler, Lerner, Knobler (1997)
Science of Happiness

• Authentic Happiness website

• Positive Psychology
  – http://www.positivepsychology.org/index.html

• Positive Organizational Scholarship
  – http://www.centerforpos.org/

• International Positive Psychology Association
  – http://www.ippanetwork.org/
Science of Happiness


Impact of mindfulness training

- 70 primary care physicians in Rochester
- Intensive educational program in mindfulness
- Significant outcomes
  - Improvements in mindfulness
  - Burnout reduced
  - Mood disturbance decreased
  - Empathy toward patients increased
  - Improvement in personality factors of conscientiousness and emotional stability

Krasner MS, et al. JAMA 2009;302:1284-1293
Implications of clinician well-being for organizations

- Relates to patient satisfaction
- Affects recruitment and retention of clinicians
- Increases productivity
- Prevents impairment
- Increases patient safety and reduces errors
- Optimizes utilization (tests, referrals)
What makes a good app: (telehealth.org\blog)?

- Is it useful? Does it satisfy a need?
- Is it practical, meet work-flow use?
- Can it be reflected in other devices?
Mobile Applications: Health Apps (2)

What makes a good app: (telehealth.org\blog)?

- Security is important, HIPPA and state compliance
- Validity, does the APP measure what it’s supposed to measure (over time).
- Are there risks associated with it’s use.
- Benefits and harms, explain to patients.
Mobile Applications: Health Apps (3)

- 72% of users are looking on-line for health information.
- There are 150,000 health apps. 10% are wearable devices.
- Will be increasingly more relevant to your practice (with shrinking clinical time). Just pick a few with which you are comfortable.
- Training might be needed for use and evaluation in treatment.
The proliferation of APPS (1):

- Agree to relax, diaphragmatic breathing
- Buddha’s Brain, Rick Hanson
- Military APPS, free BREATHE2RELAX, PTSD
- Ted talk [https://www.superbetter.com](https://www.superbetter.com)
- Acceptance and Commitment APP, Happiness trap “ACT COMPANION”
  - www.youtube.com/watch?v=ODIFhOKahmk
- SLEEP CYCLE
- Buddhify
- iChill
- Insight Timer
- MINDFULNESS
- PAIN CARE
The proliferation of APPS (2)

- Calm-guided mindfulness stress reduction, free
- Personal Zen-stress reducer
- Super Better-increasing resilience
- Bipolar-Disorder Connect
- Happier
- Headspace.com-simple meditation, free
- BaluePenguin.com-free source of info and tools for consumer spending decisions Refuge
- Recovery- Buddhist path to recovering from addiction
- Watch your back: How the back pain industry is costing us more and giving us less
  and what you can do to inform and empower yourself, Richard Deyo, MD
- Buddhism Brain-Rick Hanson, The Foundations of well-being costs
- Kaiser, Audio to go-free relaxation pod casts on pain, sleep
- UCLA-Center for Mindfulness, resources and app lists
Training considerations

- Measurements of wellness
- Integration of training and retreats
- Measuring trainee wellness as a program
- Use of a wellbeing committee
Other considerations

- Personal philosophy, influence/control
- Managing medical mistakes
- Dealing with failure/shame
Example of a wellness program

Resources for professionals

“Medical Society of Metropolitan Portland Wellness Program: A program to support the wellbeing of any physician in the state. Eight confidential therapy appointments are available per client at no cost. Please call the wellness line at (503) 764-5663.”