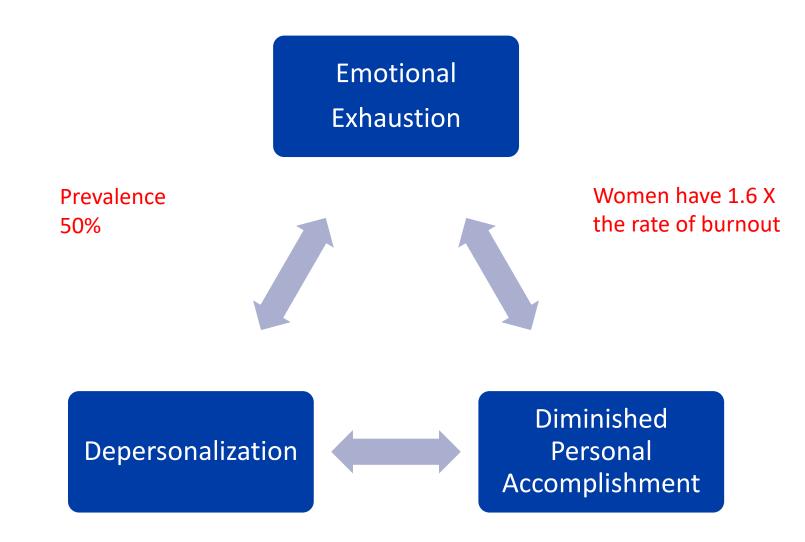
Fighting Burnout With Humanism

Susan Maltser, DO May 16, 2019

Northwell Health™

Burnout





West, C. P., Dyrbye, L. N., Erwin, P. J., & Shanafelt, T. D. (2016). Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis. *The Lancet*, *388*(10057), 2272-2281.

Burnout and Care Quality: The Link Gets Stronger

Patient Safety Incidents Suboptimal Care Outcomes Low Professionalism Lower Patient Satisfaction

> Panagioti, M., Geraghty, K., Johnson, J., Zhou, A., Panagopoulou, E., Chew-Graham, C., ... & Esmail, A. (2018). Association between physician burnout and patient safety, professionalism, and patient satisfaction: a systematic review and meta-analysis. *JAMA internal medicine*, *178*(10), 1317-1331.



	and the second				
	inter sib south	/pubmed/30449463			P-1
		publica/30443403			
Favorites		s 🖸 How To 🗹			
	And the second second second	S HOW TO C			No. of Concession, Name
	Med.gov	PubMed	✓ [New York Contraction
	Library of Medicine titutes of Health		Advanced		
Format	Abstract -				
Soins. 2	018 Nov;63(830):	15-55. doi: 10.1016/j.soin	.2018.09.002.		
L'hu	manisme	comme préver	ntion de la souf	france au travai	il.
	in French]				
🕀 Au	thor informat	tion			
PMID:	30449463 DOI:	10.1016/j.soin.2018.09.00	12		
		Free full text			
F	➤ 24				
Put	lication types	, MeSH terms			
Lin	kOut - more r				
	nout - more n	esources			

Attitudes of Highly Humanistic Physicians

1." Approaching patients with a sense of humility and real curiosity about their lives, especially toward those patients to whom it may seem difficult to relate

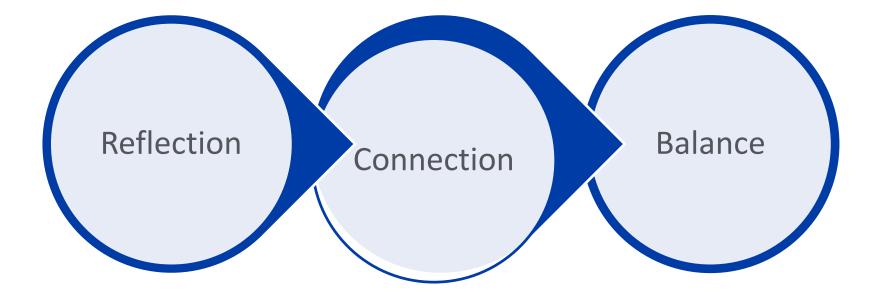
2. Treating their patients as they themselves would wish to be treated

3. Seeing their role as not merely taking care of the medical aspect of their patients, but also helping their patients through life struggles— 'being there with and for the patient."



Chou, Carol M., MD; Kellom, Katherine; Shea, Judy A., PhD Academic Medicine: <u>September 2014 - Volume</u> Month Day, Ye&9 - Issue 9 - p 1252–1258

Habits of Highly Humanistic Physicians



Chou, Carol M., MD; Kellom, Katherine; Shea, Judy A., PhD Academic Medicine: <u>September 2014 - Volume 89 - Issue 9 - p</u> <u>1252–1258</u>



Humanities in Medical School

Positive Qualities

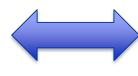
Empathy

Tolerance of Ambiguity

Wisdom

Emotional Intelligence

Self Efficacy

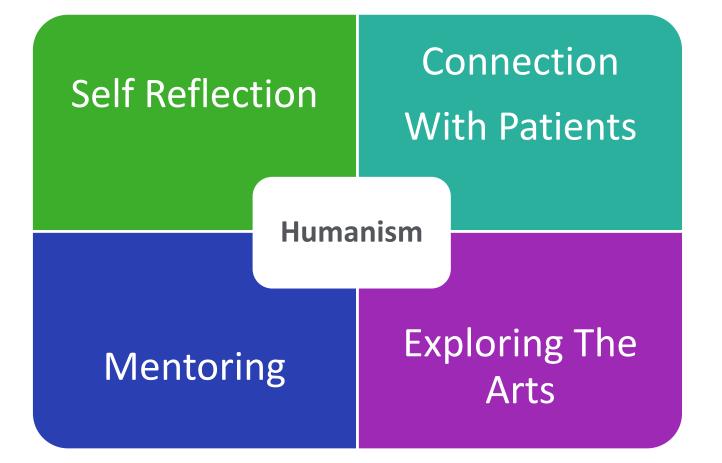


Art Music Visual Arts Theater

Tulane University. (2018, January 30). Arts and humanities in medical school promote empathy and inoculate against burnout. *ScienceDaily*.



Humanism Curriculum





Tackling The Burnout Problem





Designing and Implementing a Medical Humanities Longitudinal MS4 Elective

Alice Fornari, EdD, RDN

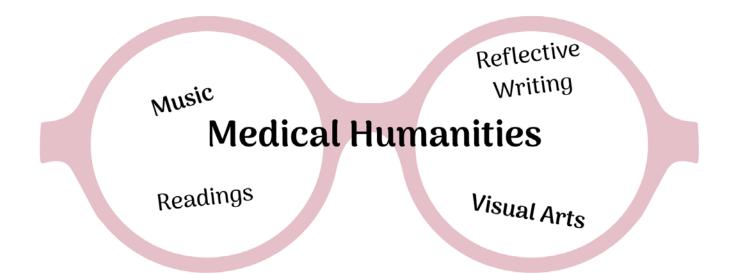
Vice President, Faculty Development, Associate Dean of Educational Skills Development, Donald and Barbara Zucker School of Medicine at Hofstra/Northwell (E)Verybody has a secrete world inside of them. All of the people of the world, I mean everybody. No matter how dull and boring they are on the outside, inside of them they've all go unimaginable, magnificent, wonderful, stupid, amazing worlds. Not just one world. Hundreds of them. Thousands maybe.

-Neil Gaiman

Overall Goal of the Experience

The goal of this elective is to help students develop their capacities for continuous reflection and improvement by creating a community of practice. Students will honor patients' stories by seeking to understand their perspectives about the impact of illness on their lives. They will practice effective communication skills by building and sharing coherent narratives. By working to locate themselves within their own stories and those of others, students will learn to more effectively process their clinical experiences and practice reflections as a skill for meaning-making and self-understanding throughout their careers.





Through the lens of medical humanities readings, visual arts, music and reflective writing we develop student's capacities for continuous reflection and improvement by creating a community of practice



ر**ک**

Synthesize clinical experiences into coherent narratives by creating written reflections

Cultivate compassion, empathy, and respect for diverse social and cultural perspectives while sharing patient stories

Collaborate and communicate effectively as part of a supportive peer group

Practice written reflection as a sustainable method to promote personal and professional development and to prevent burnout

Course Logistics:

Narrative	24	Faculty	Course	Course
Perspective and	Sessions		Content	Evaluation
Reflective Writing: An Elective in Health Humanities for MS4 Students Longitudinal (July-March)	15 Required 2 hours face to face at a central location or by call in Weekly assigned Reading In-session prompts	MD's Chaplains NP's PhD's EdD's	Art Music Poetry Stories Ted Talks Graphic Novels Museum Lectures Books	MBI Burnout & Resilience Scales Pre and Post Student Exit Interview Faculty evaluation



A few words on creating a safe space....



This SOM elective course focuses on introspection. The work you share will be personal, for *you* and will be the subject of your study during our time together. Vulnerability is a vital part of the process, because through it we are able to identify with the universal human qualities in one another's experiences. But it takes tremendous courage to be vulnerable in front of others, especially your peers. You are strong, intelligent people who will not always agree with one another. As long as you commit to responding with respect and compassion – especially when you disagree – then our classroom will be a safe space for everyone to share



Sample prompts

Write about a time you had to trustWhere are you from?Write about something that connects you to workWhat do you carry with you?Write about your name?Describe a patient you've met who sticks in your memoryWrite about a time you wished you said more to a patient





MBI Burnout & Connor Davidson Resilience Scale Pre & Post Course Evaluation

Maslach Burnout Inventory

Recognized as the leading measure of burnout, the Maslach Burnout Inventory TM (MBI) is validated by the extensive research that has been conducted in the more than 35 years since its initial publication been conducted in the more than 35 years since its initial publication

MBI-Human Services Survey for Medical Personnel - MBI-HSS (MP): The MBI-HSS (MP) is derived from the Human Services Survey specifically for Medical Personnel.

The MBI-HSS (MP) addresses three scales:

Emotional Exhaustion measures feelings of being emotionally overextended and exhausted by one's work.

Depersonalization measures an unfeeling and impersonal response toward patients.

Personal Accomplishment measures feelings of competence and successful achievement in one's work

Connor Davidson Resilience Scale

The **CD-RISC 2** is based on items 1 and 8 (score range from 0-8), and was developed as a measure of "bounce-back" and adaptability by the original authors (Vaishnavi et al, 2007). In a general population survey of US adults, mean CD-RISC 2 score was 6.91, while lower scores were observed in psychiatric groups with depression (5.12), GAD (4.96) and PTSD (4.70) (Vaishnavi et al, 2007) and in survivors of the Southeast Asian Tsunami of 2004 (4.67) (Irmansyah et al, 2010).

Maslach Burnout Inventory Scale

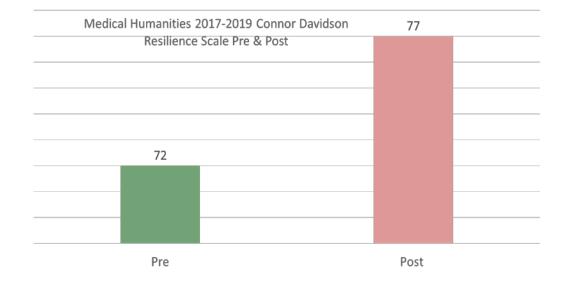
24 22 10 8 Emotional Exhaustion De-Personalization Personal Accomplishment Pre Post

Medical Humanities Pre and Post MBI 2017-2019

- Small decrease in Emotional Exhaustion
- Small decrease in De- Personalization
- Increase in Personal Accomplishment

Student (N=25)

Connor Davidson Resilience Scale



- Scale 1- 100 higher score= higher resiliency
- Increase in Resilience

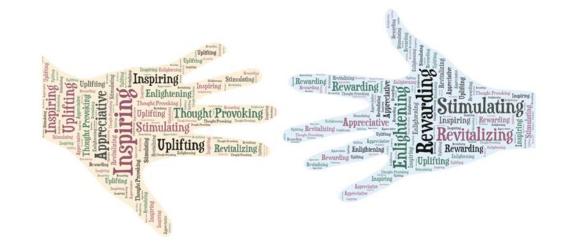


Faculty Survey Evaluation Data

Did this course meet faculty expectations?

N=9 said "yes"

- Inspiring
- Rewarding
- Stimulating
- Enlightening
- Appreciate
- Revitalizing
- Thought Provoking
- Uplifting





Student Exit Interviews

Overall, this elective was valuable for my medical education? N=13/15 Agreed or Strongly Agreed

- "Enlightening"
- "Provocative"
- "Therapeutic"
- "Cathartic"
- "Reflective"
- "Relaxing"
- "Extensive"
- "Provocative"
- "Eye Opening"

The Way It Is

There's a thread you follow. It goes among things that change.

But it doesn't change.

People wonder about what you are pursing.

You have to explain about the thread.

But it is hard for others to see.

While you hold it you can't get lost.

Tragedies happen; people get hurt

or die; and you suffer and get old.

Nothing you do can stop time's unfolding.

You don't ever let go of the thread.



William Stafford

Modified MAP-IT Program to Enhance Professionalism in Pathology Residents

Michael Esposito, MD May 16, 2019

Northwell Health™

Background



A core ACGME competency is

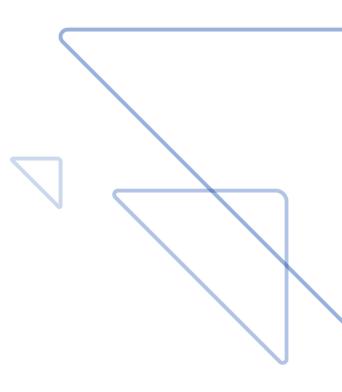
professionalism. However, there are no definite guidelines for developing a curriculum in professionalism in residency training. The MAP IT program (mentoring and professionalism in training) was developed to promote humanism as a core value in the professional development of health care professionals in our health system. The pathology residency program utilized a modified version of the MAP-IT program to satisfy the ACGME professionalism competency.



Methods



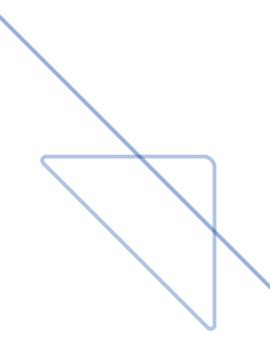
- •18 residents/3 fellows in 3 groups of 7
- •Facilitators=Graduates of system MAP-IT 1st cohort
- •Five 90 min sessions over 6 months





Modified MAP-IT curriculum

- Appreciative Inquiry and Active Role Modeling
- Conflict Resolution
- Team Building
- Feedback
- Mindfulness and Physician Wellness
- System MAP-IT resources



Feedback



• "the cone in the box representing the different viewpoints on the same issue reinforced the concept that conflicts are not always black and white. The idea that the other person also may have a story to tell was illuminating. It reminded me to **think about the other person's perspective when dealing with conflict**."

•One participant commented on the appreciative inquiry session as "**reflecting on why we do a lot of things right as a team** can give a lot of encouragement" especially in challenging situations.

•One participant found "meditation to be a very relaxing method" which gave her a "**sense of well-being**"

•A senior resident " was really touched by the stories shared, and felt inspired to make a greater effort to **get to know my colleagues better.**"

•One participant felt that the MAP IT sessions helped them "understand the intricacies of work place relationships, ways of effective, respectful and productive communication and professionalism in the workplace".





Conclusion



•A modified MAP-IT program provides a curriculum that satisfies ACGME requirements for the professionalism and IPCS competencies

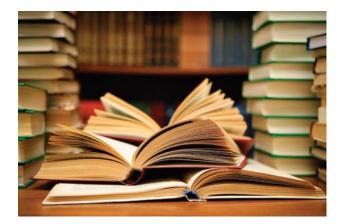
•This program strengthens physician well being and promotes camaraderie between residents through the sharing of stories



Northwell Health™

A humanism oriented book club, and the role of book clubs in medical training.

Naomi Kaplan, MBBS May 16, 2019



Objectives:

 describe a humanism-focused, PM&R based book club.

- delve into how are other programs, specialties, and countries are using the book club format to provide a holistic approach to medicine and medical training.

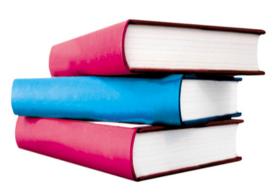


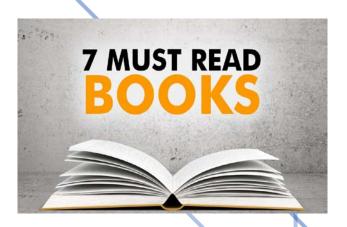


- 3 core members: 2 attending physicians, 1 resident physician

- At least 4 other attendings, and 3 additional residents have participated in a book club meeting.
- Virtually all female physicians for all 3 years.













Cutting for Stone- Abraham Verghese The Spirit Catches You and You Fall **Down-Anne Fadiman** A Man Called Ove- Fredrik Backman **Five Days at Memorial- Sheri Fink** Man's Search for Meaning- Viktor Frankl **The Power- Naomi Alderman Awakenings- Oliver Sacks** In Shock- Rana Awdish The Midwife- Jennifer Worth What the Eyes Don't See: A Story of Crisis, Resistance, and Hope in an **American City- Mona Hanna-Attisha**



Main themes:

- Finding meaning in life
- Finding meaning in work
- The physician role
- Physician leadership
- Physicians as patients
- Patient and physician expectations of each other

- The role for empathy and humanism in the clinical environment

- Ethical dilemmas

"It is our belief that the best medical care is patient and family centered and based on considerations of a holistic and humanistic view of a patient's illness."

"[Poetry] allows us to get to know our house staff in a different and perhaps more meaningful fashion..."

"Physicians are pulled in many, many directions..."

"...essential to have a creative outlet to reduce stress and maintain perspective and balance"

Twitter.com/doctorsbookclub

thwell Health[®]



http://www.brownim.org/2/arts-humanities-in-residency/





- "Synoptic philosophy sets out to see everything and see it as a whole. It is an attempt to view everything in the largest possible way..." (Jonathan Dolhenty, Ph.D)





South London and Maudsley NHS Foundation Trust





How do book clubs contribute to medicine and medical training?







Northwell Health™ Finding Meaning In Medicine: Application in an OB/GYN Residency Program

Kristen Demertzis, Ph.D., ABPP-CN May 16, 2019

Background



Finding Meaning In Medicine (FMIM)

- Developed by Rachel Remen, M.D. at UCSF's Institute For The Study of Health and Illness
- Two-session program adapted from Healer's Art curriculum for medical students
- Implemented at medical schools and hospitals nationally
- Some of content incorporated into MAP-IT program



Goals of FMIM:

thwell Health[®]

- 1. Provide a safe space for sharing, generous listening, contemplation, and reflection
- 2. Engage in mindfulness and other reflective guided activities (e.g., writing a personal mission statement, sharing an object with the group that holds professional significance) that:
 - Explore and connect us to the meaning underlying our work
 - Enhance our commitment to humanistic values in work
 - Deepen our sense of professional community and shared meaning within medicine

Methods



- 8 residents/2 faculty members per session
- Facilitators=2 facilitators who completed FMIM training
- 1st session: 90 minutes
- 2nd session: 120 minutes
- sessions separated by 2 weeks
- sessions during protected time



Modified FMIM Curriculum

- Session 1: Meaning and Medicine
 -group mindfulness exercise
 -seed talk on power of meaning to change experience
 -experiential exercise (bring in and discuss object connected to
 meaning of work)
 -reflections on session/closing comments
- Session 2: Service as a Way of Life
 -seed talk on service as a way of life
 -sharing and reflecting on calling to medicine and desire to serve
 -writing exercise (personal mission statement)
 -sharing personal mission statements with group
 -closing comments

Data



Resident Quantitative Data

These sessions provided an opportunity to reflect on/connect to some of the elements that inspire me as a physician in training	x=4.33 (SD=0.67)
Writing a personal mission statement that included help phrasing was a meaningful exercise	x=4.17 (SD=0.57)
Sharing with the group the professional significant of the object I brought to the first session was a meaningful activity	x=3.84 (SD=1.0)
I learned about my co-residents through these sessions	x=4.17 (SD=0.17)
I felt comfortable to be open and share with the group during these sessions	x=4.17 (SD=0.57)
I felt more connected to some of my co-residents during these sessions	x=4.17 (SD=0.17)
Participating in activities like this can enhance respect, understanding, and working relationships among residents	x=4.0 (SD=0.80)
Having attendings from the department participate in the sessions enhanced the experience.	x=4.17 (SD=0.57)
Having sessions like this helps deepen/sustain my connection to the meaning underlying my work.	x=4.0 (SD=0.80)
1=strongly disagree; 5=strongly agree	

Includes residents who completed both sessions (n=6)

Northwell Health

Resident Qualitative Feedback

- Feedback included:
 - appreciating providing a safe forum to share and be vulnerable with one another
 - FMIM helping the residents understand one another better; have an increased level of appreciation and respect for one another
 - allowing them to process how they view their role and meaning to patients, families, and colleagues and who they aspire to be
 - reconnecting them with why they have entered medicine



Faculty Qualitative Feedback

- Admiration for how the residents expressed their humility and commitment to the meaning underlying their work
- Appreciation for the residency program protecting time in the residents' schedules for these types of initiatives and involving faculty
- Finding meaning in participating in the exercises and sharing their reflections with the group
- Enhanced commitment to supporting the professional development of the residents
- Increased knowledge about the residents as individuals that can be applied to being a more effective mentor/preceptor

orthwell Health^{*}

Conclusions



- A two-session FMIM program was perceived as beneficial for connecting residents with one another, to participating faculty, and to the humanistic underpinnings of their work.
- Faculty also noted similar benefits.
- This program can enhance culture of a residency program and be part of a multipronged approach to facilitating wellness and mitigating burnout

