

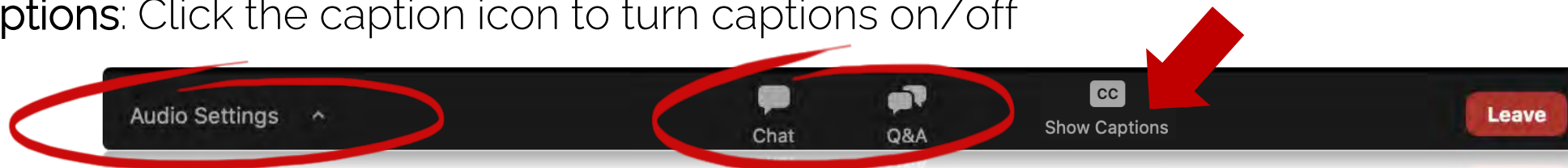
Caring for the Workforce: Five Strategic Areas to Address Well-Being in Healthcare

November 2, 2023



Housekeeping

- All participants are muted.
- **Audio Settings:** ability to select your speakers and adjust your volume.
- **Chat:** for sharing of ideas, interacting with speakers and attendees; not for promoting services and products. Make sure you choose 'Everyone' in the dropdown in the chat box.
- **Q&A:** for submitting questions to review at the end of the webinar
- **Captions:** Click the caption icon to turn captions on/off



- Receive follow up email tomorrow with webinar slides, recording and link to survey.

Comments shared in chats do not reflect the opinion or position of The Beryl Institute, but those of individual participants. People found misusing the chat function or engaging in uncivil or disruptive ways via chat may be removed from the session at our discretion.



Moderator

Terri Ipsen, CPXP

Director, Content | The Beryl Institute
Editorial Coordinator | Patient Experience Journal



Rhonda Stark

VISN 12 Chief Well-Being Officer
Department of Veterans Affairs



Christina Bowen, MD, ABOIM, DipACLM

Chief Wellbeing Officer
ECU Health



Tiffani Darling

Director, Office of Well-Being
Northwestern Medicine



Julie Kennedy Oehlert, DNP, RN

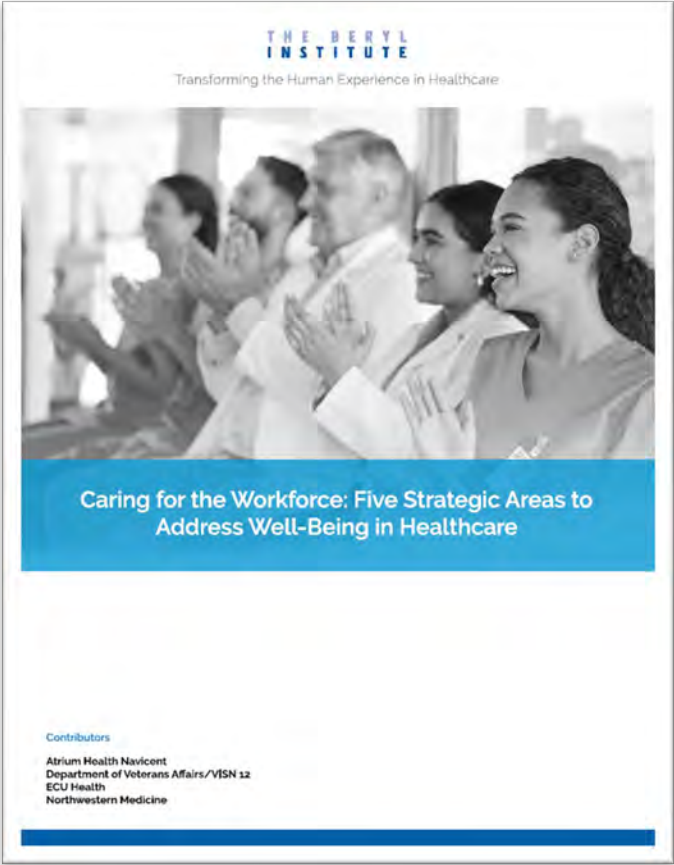
Chief Experience and Brand Officer
ECU Health



Mary Hoey, DNP, RN, MBA, CPXP

Nurse Scientist
Atrium Health Navicent

Caring for the Workforce: Five Strategic Areas to Address Well-being in Healthcare



Caring for the Workforce

Community Inquiry

1. What are up to three ways you are addressing workforce well-being in your organization?
2. What are the top outcomes you have seen as a result of those practices?
3. To what extent does your experience department directly lead efforts to address workforce wellbeing?
(Always, To a Great Extent, Somewhat, Very Little, Not at All)



Caring for the Workforce

Paper Highlights

- What are organizations doing to address workforce well-being?



72%
PX Departments
Leading Efforts

Caring for the Workforce

Impact and Outcomes

Improvements were found in three areas:

Staff Engagement



Experience Scores



Organization Culture





Case Study #1



Code Lavendar



Julie Kennedy Oehlert, DNP, Chief Experience Officer

Christina Bowen, MD Chief Well-being Officer

ECU Health Serves Communities in Eastern North Carolina



● ECU Health hospital locations



- ECU Health is a not-for-profit 1,708-bed academic, rural health system serving more than 1.4 million people in 29 counties in eastern North Carolina.
- The system consists of nine hospital locations, 180 clinics and almost 14,000 team members.
- The Medical Center in Greenville, NC is the flagship hospital. It is a Level 1 Trauma Center and serves as the teaching hospital for the Brody School of Medicine at East Carolina University.



Emotional

Managing your feelings to allow you to meet the challenges and joys of everyday life.

Environmental

Creating a pleasant and healthy environment.

Financial

Having a healthy relationship with money and feeling satisfied with your current financial situation.

Intellectual

Participating in mentally engaging, creative endeavors that expand knowledge and skills.

Physical

Taking charge of your own health including nutrition, physical activity, medical care and sleep.

Social

Cultivating a sense of connection and belonging with others.

Spiritual

Finding a sense of purpose and meaning in life.

Code Lavender

Support for ECU Health team members to help them thrive



A holistic care response framework to assist healthcare teams in need of well-being support during times of increased emotional stress or after a distressing event.

Lavender Rounds

Tangible and experiential self-care and emotional support for all members of the team. Includes a mobile station with snacks, aromatherapy, and self-care gifts.

[Office of Well-being and EAP](#)

Critical Incident Response

Confidential, supportive consultation and group sessions for all members of the team following traumatic/distressing events.

[Employee Assistance Program](#)

Listening Circles

Sharing stories in response to a work experience, promoting understanding, connection and support for all members of the team.

[Office of Well-being and EAP](#)

Well-being Rounds

Department and unit visits to provide well-being resources and a brief check-in with all members of the team.

[Office of Well-being and EAP](#)

Well-being Pop-ups

Well-being check-ins for all members of the team to identify strengths, and find opportunities to enhance self-care and life-work balance.

[Office of Well-being and EAP](#)

Team Building and Professional Development

Custom team events and coaching tailored to all team members' unique needs and challenges.

[Organization and Leadership Development](#)

Physician/APP Peer Support

Well-being support for ECU Health and ECU physicians and credentialed providers undergoing professional or litigation stress.

[EAP, Office of Well-Being, Risk Management](#)

Caring for the Caregiver Peer Support

Emotional support for all members of the team, provided by a peer, following a distressing or traumatic workplace event.

[Employee Assistance Program](#)

Office of Experience

Offerings for all team members to promote and strengthen positive well-being experiences such as empathy, gratitude, heart felt apology and hospitality.

[Office of Experience](#)

Customized Well-being Workshops

Educational resource to support team members' professional, mental health and emotional well-being.

[Employee Assistance Program](#)

Spiritual Support

Connecting all members of the team with spiritual guidance to help navigate difficult situations.

[Chaplains](#)

Workplace Aggression Reporting

On the intranet, visit Resources/Report Workplace Aggression.

[Office of Experience](#)

To initiate Code Lavender:

Wellbeing@ecuhealth.org
EAP: 252-847-4357



Listening Circles



Well-being Pop-ups



- **Overview:** For team members to assess their current state of well-being.
- **Access:** Team leaders reach out with the intention to support their team's well-being.
- **Structure:** Coordinate with the leader to allow for a 10 min. check-in on the unit.
- **Process:** Review the well-being wheel and have the participant rate their overall well-being.



Overview: Well-being Rounds



Types of Rounds:

- Mindfulness Rounds
- Gratitude Rounds
- Emotional Support Rounds (stress relief, grief, moral distress, emotional well-being)

Process:

- Leaders round with EAP team and the Chief Well-being Officer.
- Focus on high acuity, high census departments, units, and units experiencing challenges.
- On the spot emotional support offered.



Lavender Rounds



- Lavender cart
- Snacks
- Self-care gifts
- Aromatherapy
- Professional support—
Compassion, care,
appreciation, gratitude
and curiosity



Outcomes

- 40% increase in EAP utilization
- Improved team member resilience index from 46th to 63rd percentile ranking related to team members' ability to decompress and disconnect from work
- Improved physician overall alignment and engagement post-3-day well-being workshop



Key Takeaways

- Make asking for support easy
- Allow for opportunities to bring support to the unit or clinic
- Create space for listening
- Partner with Employee Assistance Program



Thank you.



VISN 12 ***Listen, Sort, Empower***

Rhonda Stark

VISN 12 Chief Well-Being Officer

November 2, 2023

**You are about
to enter an**



**EMPOWERMENT
ZONE**



VA Great Lakes Health Care System, with its Veteran Integrated Network Office 12 (VISN) in Chicago, 8 medical centers, 40 outpatient clinics, eight nursing homes, and seven domiciliaries offer health care services to almost 800,000 Veterans who reside within its four-state (Illinois, Michigan's Upper Peninsula, Wisconsin, and Northwest Indiana)

Mission: The VA Great Lakes Health Care System strives to provide comprehensive, integrated healthcare services that cater to the needs of America's veterans. This is achieved through excellent value, service, education, and research. They aim to be an employer of choice characterized by exceptional accountability.

Vision: To continuously improve their services to provide high-quality healthcare that is convenient, responsive, and affordable for veterans.

Chief Well-Being Officer Blueprint

Personal Resiliency



Strengthen Mental Health Support

Efficiency of Practice



Address Inefficiencies



Optimize Meeting Practices



Optimize TMS Training

Culture of Wellness



Strengthen Culture of Servant Leadership



Maximize Use of HR Policies/Flexibilities



Copyright © 2016 Board of Trustees of the Leland Stanford Junior University. All rights reserved.



Listen Sort Empower (LSE) can impact in a number of these priority areas

What Humans Need to Thrive

Psychological Safety

Allows staff to bring their frustrations forward in a constructive and safe environment

Camaraderie and Social Connectedness

Staff come together to work collaboratively to improve team dynamics and build community to support each other

Agency

Provides an opportunity for staff to identify frustrations they have the power to change

Meaning and Purpose

Empowers staff to make changes to their work environment to aspire towards joy in practice and professional fulfillment



Listen-Sort-Empower: What is it?



Swensen S MD. *AMA Steps Forward 2020*.

<https://edhub.ama-assn.org/steps-forward/module/2767765>

What does *Executive Leadership* care about most?

- ✓ Retaining their workforce
- ✓ Engaging their staff
- ✓ Decreasing staff turnout
- ✓ Increasing professional thriving
- ✓ Meeting metrics (patient satisfaction, safety measures, access)
- ✓ Decreasing staff burnout



LISTEN



SORT



EMPOWER

WIIFM

LSE Supports	How
Increasing psychological safety within the team	Non-judgmental sharing of experiences within the workplace
Increasing sense of control for front-line staff over their work environment at the team level	Solution-based development of pilot interventions to address local opportunities for improvement (LOFIs) and guiding the team to focus on the opportunities within the team's control
Intentional relationship building between staff (team) and leadership (team leader and CWO)	1) Candid conversations about the current status of the team held with the primary purpose of co-creating solutions to the challenges within local control 2) Increased visible support from executive leadership (including CWO) for practice efficiency improvements initiated by the staff
Intentional professional development of leadership skills at the facilitator and team leader level	Increased visible and practical support of the team leader through leadership development and executive sponsorship from the CWO
Increasing practice efficiency	As LOFIs are addressed at the team level, practice efficiency of the team increases, which supports professional fulfilment

What do Team Leaders care about most?

- ✓ Having staff that are engaged and find meaning and purpose in their work
- ✓ Having staff that are flexible to assist with other duties as the team requires
- ✓ Having enough staff to complete their job responsibilities
- ✓ Having staff with skills and talents to fulfill responsibilities
- ✓ Having staff who are team players and who care about and support each other
- ✓ Having staff that are committed to Veterans and the mission of VA

WIIFM

LSE Supports	How
Empowering the front-line to lead change and shifting the architect for generating and implementing solutions to staff challenges from the organization/leadership to the team members (with team leader support) leads to greater staff buy-in for the proposed change.	The structure of LSE sessions allows for the team to discuss LOFIs, determine which LOFIs are within the team's local control, prioritize LOFIs to address, and co-create and implement a new process for the selected LOFI. Team members are integral in all phases of LSE and direct and lead the outcome.
The intentional discussion of pebbles in the workplace allows an opportunity for the concerns of the staff to be heard.	The Listen session is a time where the team discusses the pebbles that negatively impact their day in a constructive and psychologically safe environment.
Increasing a staff's sense of control	Sorting the pebbles and highlighting LOFIs that are within the team's sphere of influence gives the team a sense of control over their work environment.
Increasing a team's sense of camaraderie	The co-creation of solutions, in the form of pilot interventions, improves the staff's work environment.

Why is LSE valuable to your teams?



Actions taken to 'tee up'

SUCCESS

*32 trained
&
mentoring
available*

NETWORK

INNOVATION

LATION



Listen-Sort-Empower (LSE) FAQs

What is LSE?

Listen-Sort-Empower (LSE) is a team-based approach to addressing the root causes of professional burnout. Over three sessions, participants use collaborative problem solving to identify the everyday frictions (called "pebbles") embedded in their work processes (Session 1: Listen). Participants then prioritize the pebbles they have the control and resources to address (Session 2: Sort). Finally, participants pilot new processes to remove the pebbles one at a time with support from their leaders (Session 3: Empower).

Why should I participate in LSE?

LSE is founded on the belief that systems and behaviors—not people—are the source of many practice problems. This approach brings team members together to collectively identify and address the daily challenges that arise in one's work. Through LSE, leaders support and champion team members as trusted partners in the improvement process.

Who can participate in LSE?

The LSE approach can be used by teams, including those that span work units, as long as all involved leaders support the participation and the team members are ready to collaboratively address challenges in their day-to-day workflow.

How much time does LSE take?

Each of the three LSE sessions can be completed in one hour and the sessions can be spread out over the course of several weeks. Although LSE sessions can take place during regularly scheduled team meetings, it is recommended that the team receive protected time to complete each of the three sessions.

Where do the LSE sessions take place?

LSE sessions can be held in person, virtually or as hybrid meetings. If participation is virtual, it is recommended that all participants keep their cameras turned on to encourage active engagement during the LSE session.

Who leads the LSE sessions?

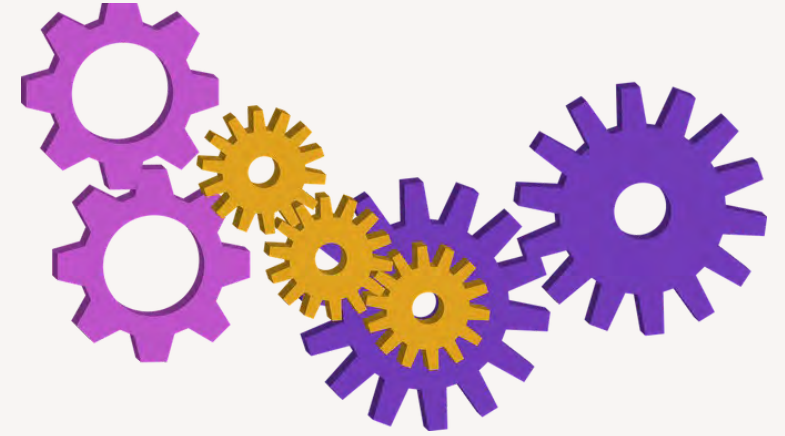
The LSE facilitator is responsible for organizing and leading Session 1: Listen. Note: the LSE facilitator does not have to be a member of the LSE team. The LSE facilitator and team leader share responsibility for leading Session 2: Sort and Session 3: Empower. The LSE team members determine which pebbles are within their control to address, which pebble should be addressed first and then develop a pilot intervention to tackle the pebble(s).



Chief Well-Being Officer (CWO) Program LSE Guide



The Ripple Effect of Spread



- VISN QMO team ~ April 2022
- VISN CNO team ~ April 2022 & August 2023
- VISN DND team ~ July & December 2022
- Oak Lawn CBOC nursing team ~ May 2022
- VISN 12 Veteran Experience/Patient Advocate strategic planning meeting ~ Sept 2022 & Sept 2023
- VISN 12 Whole Health Clinical Directors, Employee WH Coordinators and WH Program Managers strategic planning meeting ~ Sept 2022
- VISN 12 Pain Committee ~ Feb 2023
- Jesse Brown HRO Team Training ~ January 2023
- Hines Patient Advocates ~ May 2023
- Jesse Brown Medical Service Assistants ~ April 2023
- Tomah Ambulatory Care Clinical Pharmacists ~ September 20
- Federal Healthcare Center (FHJCC TBD)

OUTCOMES:

VISN Office *PEBBLES* Removed

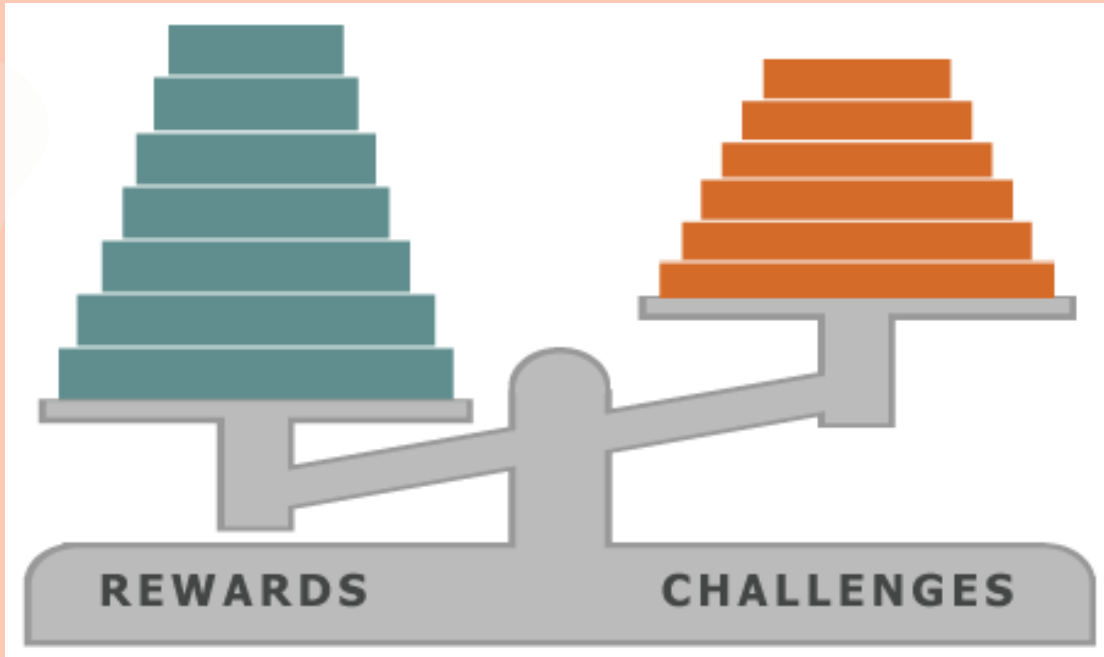


- Focus Fridays (Oct 1, 2023, kick-off)
- VISN 12 orientation program established (CNO/QMO). Sept 29, 2022, kick-off
- VISN 12 84th Street travel and purchasing support (CNO), November 2022
- VISN 12 SharePoint site (VLDP) (DND, CNO), May 2023
- Meaningful use of time in office/F2f Staff meetings; Food celebrations, CNO Leadership @ 84th (CNO, DND), Oct 2022
- VISN 12 Employee Whole Health SharePoint site revamped (VISN Whole Health), October 2022
- Pass the torch education session/write-ups (CNO), September 2022
- White noise sound machines (CNO), December 2022)
- 84th street conference room equipment/OIT (CNO), December 2022
- VISN electronic calendar of events (Nurses week/ VA2k walk) (CNO), rolled out April 2023
- ICARE Recognition @ VISN Staff meeting (CNO), started April 2023
- Service Awards @ VISN Staff meeting (CNO), started April 2023 Kick-off



Medical Center Pebbles Removed

Seeing is believing!



Oak Lawn CBOC NM sends weekly nurse recruitment updates to staff

Oak Lawn CBOC NM sends ADPCS shining star highlights

MSA SOPs reviewed for CT/OT, unplanned leave and call offs

Develop a MSA Ward Administration Recognition Program

Refresh MSA supervisor training

Communicate status of MSA recruitments to supervisors

Convert MSA TEAMS meetings to face to face, where appropriate

Discontinued practice of overbooking/reducing dbl checking schedules (Pharmacy)

Stop transferring calls for scheduling (Pharmacy)

Review coverage process for improvements to include surrogating or floats (Pharmacy)

Use of Task Board Huddle on Teams Whole Health Clinical Directors

Take Aways



Case Study #3



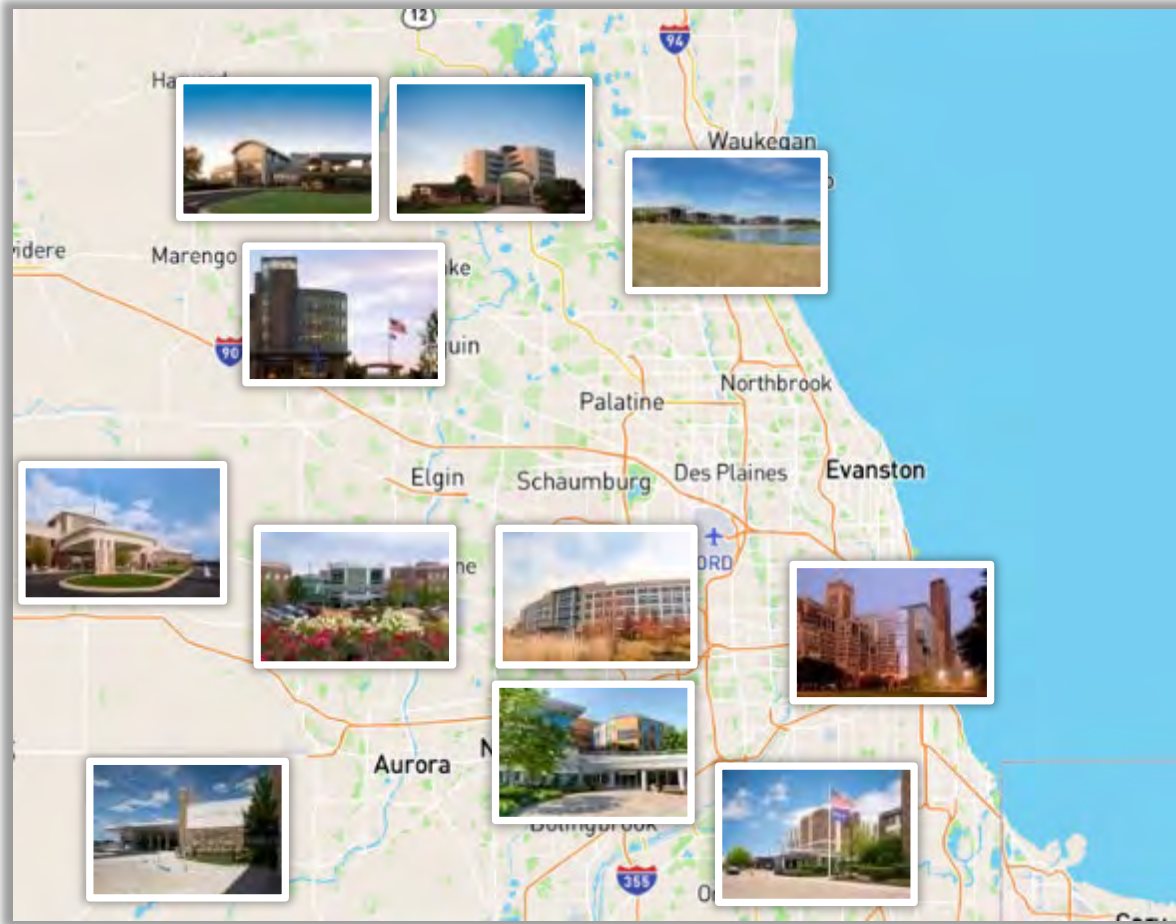
“IGNITING a Fire on Well-Being”

Overview of Northwestern Medicine’s IGNITE Employee Groups Program

Tiffani Darling, MNA
Director Office of Well-Being
Northwestern Medicine

Introduction to Northwestern Medicine

Chicago's Premier Academic Health System



Northwestern Medicine is a premier integrated academic health system where the *patient comes first*.

- 11 hospitals, two medical groups and more than 200 ambulatory sites across Chicago and Northern Illinois
- More than 33,000 employees and 5,000 aligned physicians
- Northwestern Medicine scientists received \$610 million in funding for research awards in 2021
- Approximately \$1.148 billion in community benefit programs in FY 21



IGNITE Employee Groups: Program Overview

Inspiring Togetherness, Growth, Networking, Improvement, and Engagement

- IGNITE groups are NM-sponsored, peer-led meetings with the goal of encouraging collegiality, shared experience, connection, and meaning in work to improve and support professional well-being.
- 8-10 colleagues led by a trained colleague facilitator who meet 6 times over 6 months, enjoy a meal together on NM, and have open discussions prompted by a provided question or topic.
- Discussion prompts connect to the US Surgeon General's Framework for Workplace Mental Health and Well-Being.

IGNITE Groups Help Reduce Isolation and Enhance Workplace Connections

Why the need?

- Nearly 40% of the US report being lonely. Loneliness from social isolation or exhaustion impacts organizations through decreased job satisfaction, increased missed work days and voluntary turnover.
- Pandemic created a barrier to employees developing professional relationships in the workplace.
- Wellbeing can be enhanced by supporting meaningful connections.
- Lower isolation reduces intention to leave by 10x.*
- A person with high isolation has a 59% increased likelihood of screening positive for burnout than a person with low isolation.*
- People that have high isolation are 2x more likely to have low satisfaction than those with low isolation.*

Initial NM COMPASS Physician Pilot Results

- After COMPASS meetings, physicians had more colleagues they felt close to such that they could call on for help.
- Trend toward physicians being less likely to leave the practice.
- 100% thought the program was worthwhile, felt more connected to peers, and would recommend the program to their peers.



* Data from Dr. Megan Kosirog NM SOW "COMPASS" project results

IGNITE Prompts Facilitate Discussion Around the Surgeon General's Workplace Mental Health and Well-Being Framework

- Framework for Mental Health and Wellbeing includes five essential human needs that create the foundation for a mentally strong workplace
- *“A healthy workforce is the foundation for thriving organizations and healthier communities”* – Surgeon General Dr. Vivek Murthy

Example: Session 3 Prompt- Mattering at Work

- ❖ Think about a time you received meaningful appreciation at work. What made it meaningful to you?



The US Surgeon General Framework for Workforce Mental Health and Well-Being

IGNITE Groups Operations



Step 1

- Volunteer to be an IGNITE group facilitator
 - Submit the IGNITE Group interest form including the “job family” for which you want to start the group
 - Groups can have co-facilitators



Step 2

- Facilitator attends a 30 min virtual training session
 - Training covers meeting ground rules, discussion prompts, facilitation tips, recruiting, scheduling, and meal ordering logistics



Step 3

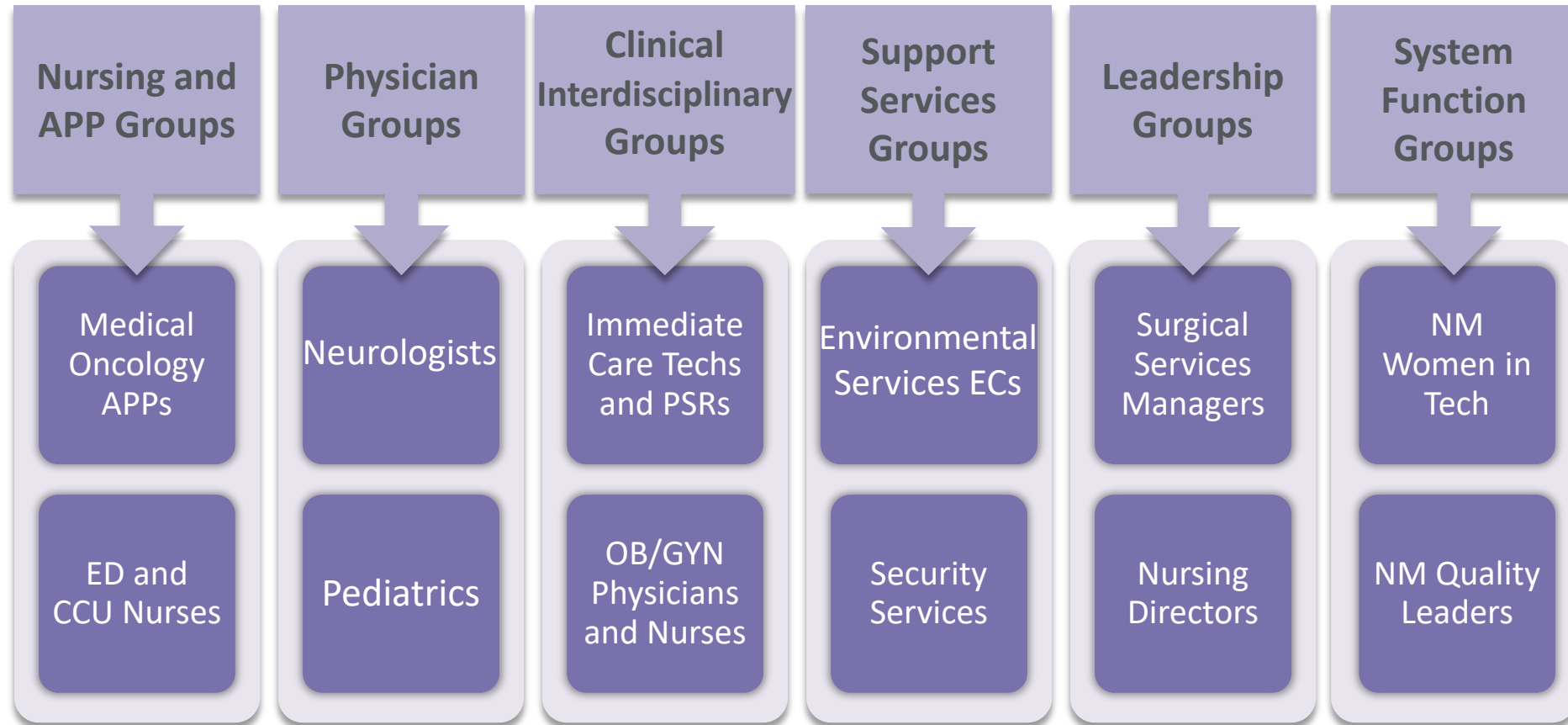
- Facilitator recruits 8-10 IGNITE group members
 - Flyers and recruiting tools available for facilitators to use in recruitment



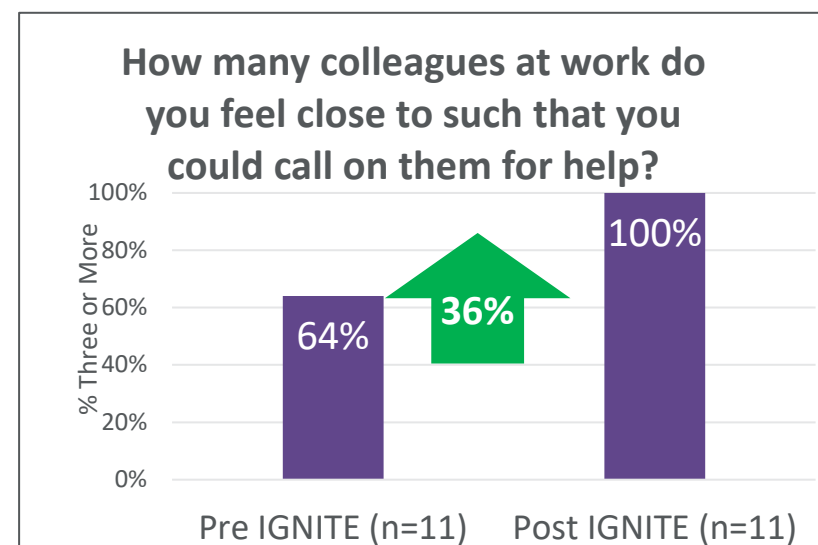
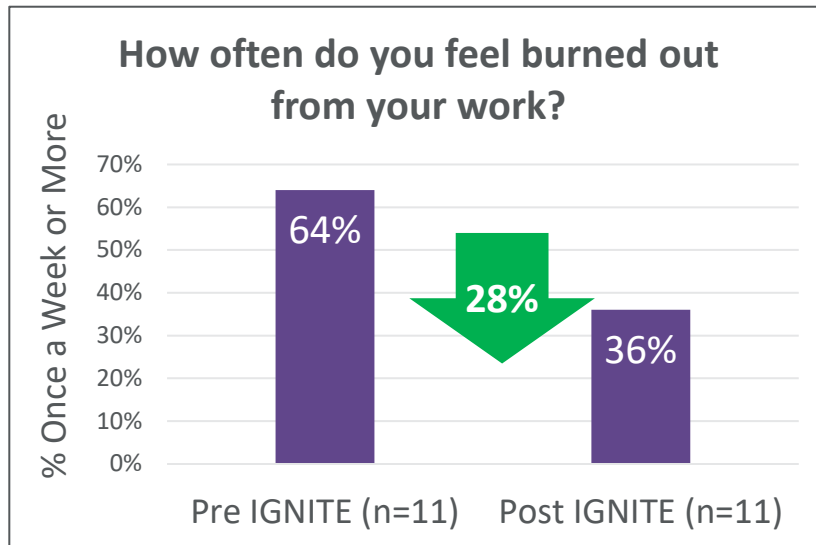
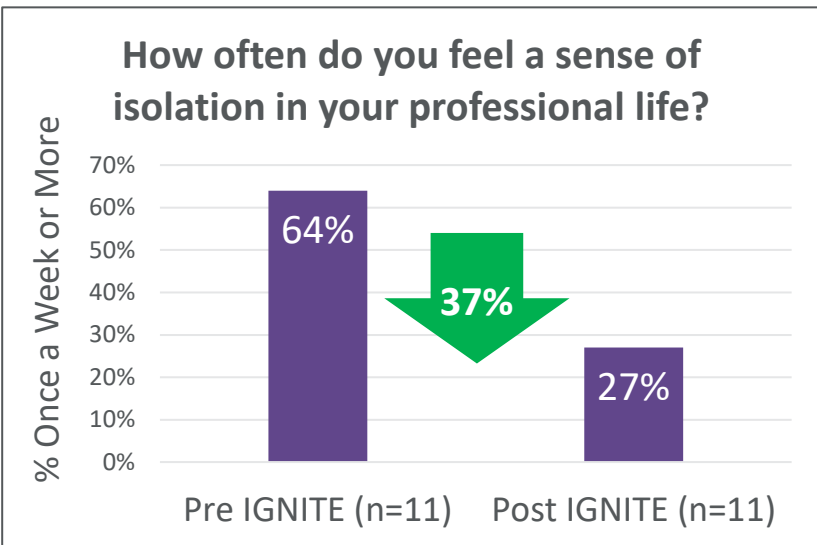
Step 4

- Facilitator schedules and kicks off the first IGNITE group meeting!
 - 6 meetings within 6 months
 - Submit meal request form before each meeting

More than 70 IGNITE Groups Have Formed since Launching in February 2023



Participating in IGNITE Positively Contributes to Key Well-Being Metrics



Question	% Agree or Strongly Agree
After participating in an IGNITE Group, I feel more connected to my peers.	100%
IGNITE Group meetings are worthwhile.	100%
The prompts for each IGNITE meeting were valuable in understanding the different components of workplace mental health.	94%
I would recommend the IGNITE Program to my peers.	100%
Would you be willing to serve as an IGNITE group facilitator in the future?	69%

“I so appreciated being part of this program! I'm naturally a **very introverted individual** – I struggle with **"organically" connecting** with people outside my team and growing my network. This was such a great way to connect with others, to share joys and burdens, and to really feel like part of something bigger. Thank you :)”

“I really enjoyed the program. **Being an Exec Assistant can be lonely sometimes as most departments don't have multiple EA's on staff** so this was a nice way to connect with my peers and discuss the trivial issues and things we come across. It was helpful to socialize in person over lunch with people who understand the job and the stressors that come along with it. Loved it!”

“This was a great way to **connect with peers in-person as opposed to just Teams or email**. It was valuable to gather feedback/information from folks in the same role going through like obstacles/challenges, nice to brainstorm ideas. Left the group with a sense of comradery and with even more of a connection to NM. Great Program!”

Unique Aspects that Add Value to Organizational Well-Being Efforts

- Low effort way to engage well-being “naysayers.”
- Great initial intervention for identified “hot spots” for burnout.
- Program available for entire workforce. Opportunity for interdisciplinary collaboration and team building.
- Participants go on to serve as facilitators - fly wheel effect. Word of mouth alone markets the program.
- Allows for collaboration and coordination with internal partners/ departments- i.e., food and nutrition, D&I, etc.



Tiffani Darling
Director, Office of Well-Being
Northwestern Memorial HealthCare
tdarling@nm.org

Thank you.

Case Study #4



Atrium Health.

Beneath their Tough Shell: Ensuring the Well-being of Medical Residents

Mary Hoey, DNP, RN, MBA, NPD-BC, CPXP.

Atrium Health Navicent – Macon, Georgia

- 637 bed, Level I Trauma Center; Academic; 4th time Magnet Designated hospital
- Part of Advocate Health
- 3rd largest nonprofit health system in USA
- Personalized care in 53 specialties at more than 50 facilities throughout the region
- Vision: To be the first and best choice for care
- Mission: To improve health, elevate hope and advance healing - for all



Meet Our Team



Dr. Sarah Choo-Yick



Kerisia Wasztyl, LMFT



Kamran Azimi, PhD candidate



Kim Meeks, MS, MLIS



Mary Hoey, DNP



Dr. Andel Higgins -Resident

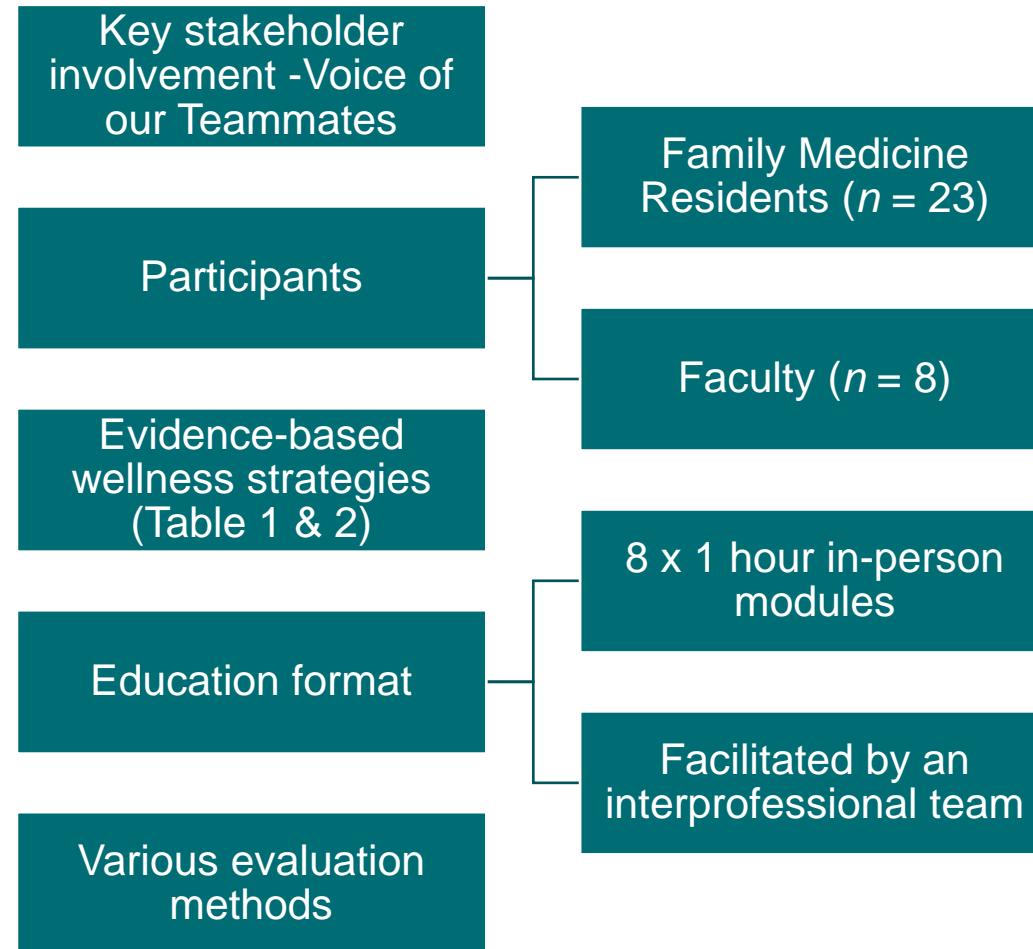


Trigger for the Intervention

- Burnout among healthcare clinicians 26-75%¹
- Graduate Medical Education Wellness Committee goal:

Transform and elevate wellness through education.

Intervention: Development of a Culture of Wellness Curriculum



Frameworks And Evaluation Tools used

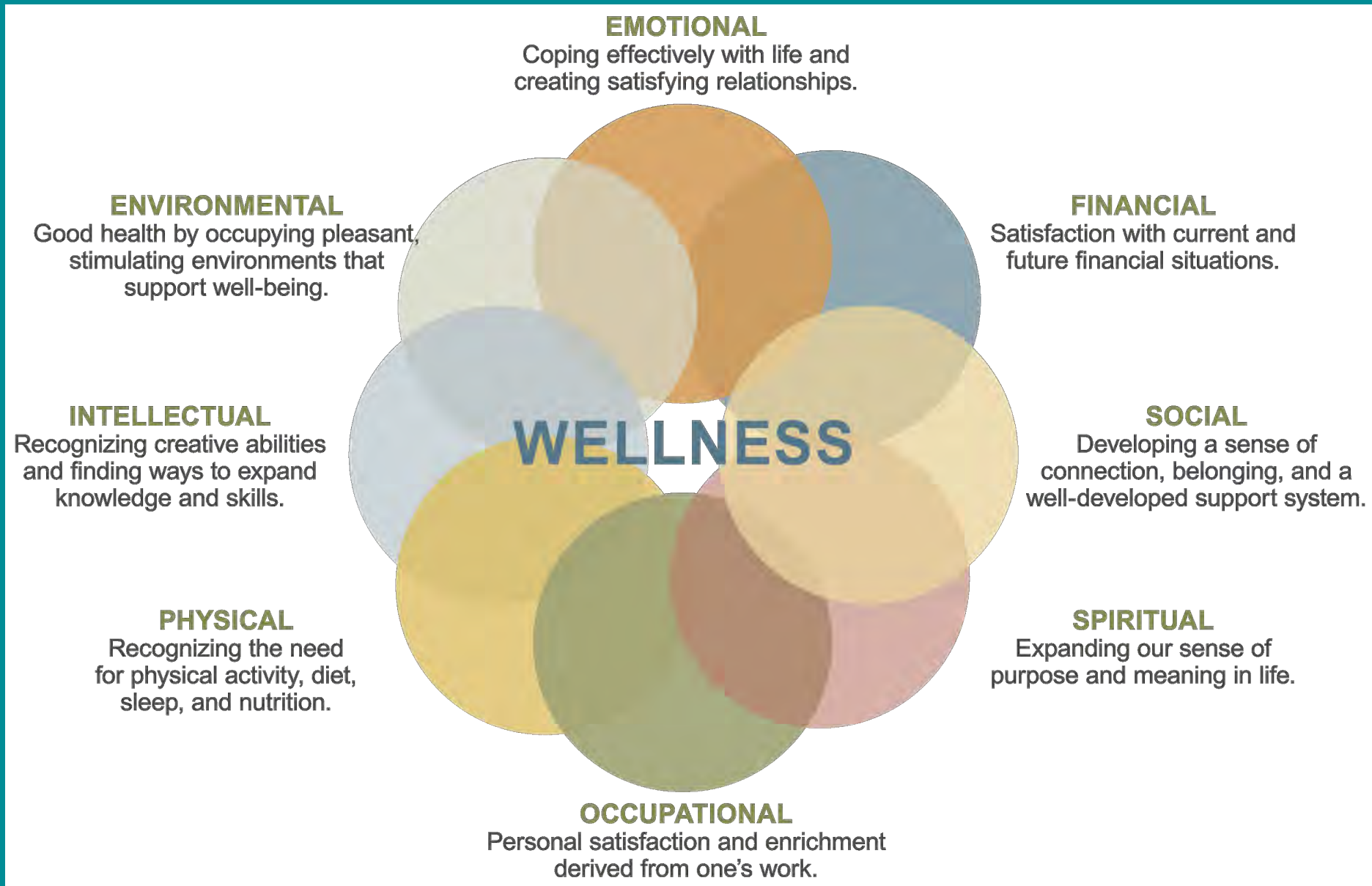
Human-Centered
Design²

Wellness in 8
Dimensions Model³

Adult learning
Theory⁴

Kirkpatrick's
Evaluation Model⁵

Survey (12 items) –
that measured
various dimensions
of well-being over 3
time-points^{6,7,8}



Wellness in 8 Dimensions Model Image. Used with permission from Dr Peggy Swarbrick, Collaborative Support Programs of New Jersey, Inc.

Table 1. Content Wellness Curriculum based on the Eight Dimensions of Wellness

Module #	Wellness Strategy	Dimensions of Wellness
1	Meaning & Purpose	Physical, Spiritual & Occupational Well-being
2	Mindfulness & Self-reflection	Physical & Spiritual Well-being
3	Resilience Training	Physical & Emotional Well-being
4	Emotional Intelligence & the Science of Change	Physical, Emotional & Intellectual Well-being
5	Time Management & Decision Making	Physical, Occupational & Intellectual Well-being
6	Cognitive Reframing & Affirmations	Physical & Intellectual Well-being
7	Appreciative Inquiry & Gratitude	Physical & Social Well-being
8	Cultivate a Healthy Work Environment	Physical, Social & Environmental Well-being

Table 2. Session Format

Session Format	Time
Mindfulness exercise	5 minutes
PHIP aka Personal Health Improvement Project Check-in. PHIP is based on SMART goal and linked to Physical dimension of well-being	10 minutes
Facilitated Discussion of Wellness Strategy Part A: slide presentation with open discussion Part B: interactive activity	15 minutes 15 minutes
Questions/answers/comments	15 minutes
Total	60 minutes

*S: Specific, M: Measurable, A: Achievable, R: Realistic, T: Time-bound

Exceptions: Session # 1 included Time 1 (T1) survey completed prior to the start of the curriculum, and a brief introduction on defining well-being & burnout. Session # 8 included Time 2 (T2) survey at the end of the curriculum.

Results



61.9% completed over half the sessions



Significant improvement in their overall quality of life, mental, and emotional well-being



73.3% reported the wellness strategies learned were important for their personal wellness



86% reported moderate to extreme confidence in applying them



Over 86% were using the strategies on a daily to monthly basis, six months later



93% agreed the curriculum should be included as an elective or mandatory didactic.



Source: iStock-1191133165

Table 3. Time 1 & Time 2 Survey Results

Wellbeing Outcome	T1	T2	% Change	P-Value
Quality of life during past week (1-10 point scale - Higher values reflect better well-being)				
Overall quality of Life	7.0	7.8	12%	0.028*
Mental (intellectual) well-being	6.8	7.8	15%	0.025*
Physical well-being	6.4	6.8	7%	0.160
Emotional well-being	6.5	7.5	17%	0.003*
Level of social activity	6.4	7.1	11%	0.128
Spiritual well-being	7.1	8.0	13%	0.101
Perceived stress in the last month (1–5 point Likert scale)				
Unable to control the important things in life	2.9	2.8	-3%	0.338
Confident about ability to handle personal problems	3.5	4.2	18%	0.104
Things were going your way	3.5	4.0	16%	0.041*
Inability in overcoming difficulties	2.5	2.0	-19%	0.088*
Burnout over the last month (Yes-No scale: percent of participants who selected "No")	18% (2)	36% (4)	18%	0.353
Mindfulness over the last month (1-5 point Likert scale)	3.1	3.5	15%	0.008*

Table 4. Evaluation of Implementation and Adoption of Wellness Strategies at 6 Months

Question	Scale	% of Responses
How important are the wellbeing strategies learned to your personal wellness currently?	Not at all Somehow Moderately Very Extremely	6.7% 20% 40% 13.3% 20%
How confident are you in your ability to apply the wellbeing strategies learned?	Not at all Somehow Moderately Very Extremely	6.7% 6.7% 33.3% 33.3% 20%
What was the most valuable takeaway from the course?	“Being able to apply what I’ve learned to my personal life” “Mindfulness” “Recognizing burnout and strategies to both avoid and correct” “Discussing different stressors and personal strategies with other residents” “Breath”	

Participants' Quotes

- *“Help(ed) with being cognizant of my own mental wellness when performing a career that carries a high degree of stress daily.”*
- *“I loved the journals... It just reminds me to slow down and enjoy the time and things around me.”*
- *“Emotional intelligence is beneficial and can be learned and improved.”*
- *“Learning to use self-positive words.”*



Lessons Learned

Dedicated time for physicians

Psychological safety

Education format for engagement

- Small chunks of information, interactive, storytelling

Interprofessional education

Effective leadership & communication essential

Need to provide a hybrid option for participation

Adhere to copyright requirement for using images, etc.

References

1. Shanafelt TD, West CP, Sinsky C, et al. Changes in burnout and satisfaction with work-life integration in physicians and the general US working population between 2011 and 2017. *Mayo Clin Proc.* 2019;94(9):1681-1694.
2. IDEO. Human-Centered Design Toolkit: An open-source toolkit to inspire and new solutions in the developing world. Chicago: IDEO, 2011. <https://www.designkit.org/methods.html>. Accessed -June 30, 2021.
3. Swarbrick M. A wellness approach. *Psychiatr. Rehabil. J.* 2006;29(4): 311-314.
4. Kiely R, Sandmann LR, Truluck J. Adult learning theory and the pursuit of adult degrees. *New dir. adult cont. educ.* 2004;103: 17-30.
5. Kirkpatrick JD, Kirkpatrick WK. Kirkpatrick's *Four Levels of Training Evaluation*. Alexandria, VA: Association for Talent Development; 2016.
6. Thomas MR, Dyrbye LN, Huntington JL, et al. How do distress and well-being relate to medical student empathy? A multicenter study. *J Gen Intern Med.* 2007;22(2):177-183. doi:10.1007/s11606-006-0039-6
7. Warttig SL, Forshaw MJ, South J, White AK. New, normative, English-sample data for the Short Form Perceived Stress Scale (PSS-4). *J Health Psychol.* 2013;18(12):1617-1628. doi:10.1177/1359105313508346
8. West CP, Dyrbye LN, Satele DV, Sloan JA, Shanafelt TD. Concurrent validity of single-item measures of emotional exhaustion and depersonalization in burnout assessment. *J Gen Intern Med.* 2012;27(11):1445-1452.

Thank you.

Mary Hoey, DNP, MBA, RN, NPD-BC, CPXP

*Nurse Scientist
Nursing Administration
Atrium Health Navicent*

Mary.Hoey@AtriumHealth.org

777 Hemlock Street
Macon, GA 31201
O: (478) 633-2046 C: (478) 538-4046



Atrium Health
Navicent

Caring for the Workforce

Takeaways from Today's Webinar

1. Make well-being part of your strategic planning and budgeting.
2. Know the signs of burnout and take proactive steps to mitigate them.
3. Partner with other departments to integrate well-being into daily standard operations.
4. Teach your employees what a healthy work environment looks like and how to create cultures of wellness.
5. Ensure your policies and procedures support employees in navigating the pressures of their professional and personal lives.



Caring for the Workforce: Five Strategic Areas to Address Well-Being in Healthcare



Scan the QR code to access the PX Paper

Upcoming Events & Programs

WEBINARS

November 7 | Unexpected Healers

November 14 | **PX Marketplace** - Aligning Volunteer Programs with the Changing Landscape of Healthcare *(complimentary)*

November 28 | Learning Programs to Support Your Organization's Experience Strategy *(complimentary)*

November 30 | **Headliner** - Amplifying the Voices of Those with Lived Experience: The Key to Transforming Healthcare *(complimentary)*

CONNECTION CALLS/PX CHATS

November 6 | Patient Advocacy Community Connection Call – Leader Rounding

November 15 | Lost Belongings Workgroup

November 17 | PX Chat: Structuring Your PX Efforts



Access our vast library
of on demand patient
experience webinars.

*Webinars are included in membership
with the Institute.*



Thank You