Project Title: CPR² – Commitment to Positive Respectful Relationships

Name and Institution: Julie Story Byerley, MD, MPH, University of North Carolina

Collaborators: Clark Denniston, MD, Cam Enarson, MD, MBA, Anthony Lindsay, MD, Karen McCall

Background: Physician burnout is common and contributes to lapses in professional behavior which compromise optimal patient care and allow mistreatment of learners. At the 2014 AAMC “Learn, Serve, Lead”, these topics and their relationship were keynotes, inspiring leaders at the University of North Carolina School of Medicine to develop a campaign to address both.

Purpose: We aim to improve patient care and the learning environment through the deployment of a campaign highlighting the importance of respectful relationships. We intend to generate conversation among faculty, staff, and learners.

Methods/Approach: The Vice Dean for Education convened a broadly representative task force of eighteen individuals to develop strategies to concurrently improve the patient care and learning environment. The task force developed the following recommendations:

- UNC Healthcare and UNC School of Medicine should launch an initiative called CPR² (Commitment to Positive and Respectful Relationships) to call attention to professional behavior in engagement with both learners and patients
- Attach this initiative to “Commitment to Caring”, regarding patient satisfaction
- CPR² should be endorsed by senior leadership and implemented by established structures
- The initiative should be aspirational, stating goals for a thriving respectful climate
- This approach should articulate an expectation for respectful behaviors with recognition of the fact that environmental factors and burnout, as well as individual factors, contribute to lapses, similar to the approach used to address patient safety and medical errors
- Acknowledge productive individuals who have high patient satisfaction scores and concurrently high learner evaluation scores as role model clinician educators
- Acknowledge productive clinical teams and clinical settings who have high patient satisfaction scores and concurrently high learner evaluation scores as model clinical environments
- Mark the initiative with visible reminders such as lapel pins, posters, and graphic identifiers
- Introduce this in various groups and include in orientation
- Enhance the resources for skill development for relevant professional behaviors
- Expand resources to prevent and address burnout
- Survey the climate for each constituent group annually
- Develop an annual dashboard that is publicly displayed that marks trends in the climate

For the ELAM IAP, Dr. Byerley is working with system leaders to implement the recommendations in alignment with ongoing efforts.

Outcomes and Evaluation Strategy:

- Deployment of a campaign that specifically links patient satisfaction and appropriate treatment of learners to professional behavior
- Generation of an annual dashboard that compares national benchmarks on both patient satisfaction and scores from residents and students regarding the learning climate
- Improvement on the scores on the dashboard, to document long term success
CPR² – Commitment to Positive Respectful Relationships
Julie Story Byerley, MD MPH, University of North Carolina at Chapel Hill School of Medicine
Mentor: Cam Enarson, MD MBA
Collaborators: Clark Denniston, MD, B. Anthony Lindsay, MD, Karen McCall

Background
Physician burnout is common and contributes to lapses in professional behavior which can compromise optimal patient care and allow mistreatment of learners. At the 2014 AAMC “Learn, Serve, Lead”, these topics and their relationship were keynotes, inspiring leaders at the University of North Carolina School of Medicine to develop a campaign to improve the treatment of both patients and learners.

Purpose
We aim to improve patient care and the learning environment through the deployment of a campaign highlighting the importance of respectful relationships. We intend to generate conversation among faculty, staff, and learners regarding expectations for professionalism.

Methods
The Vice Dean for Education convened a broadly representative task force of eighteen individuals to develop strategies to concurrently improve the patient care and learning environment.

The task force developed a set of recommendations that the Vice Dean for Education is now working to implement.

Task Force Recommendations
- UNC Healthcare and UNC School of Medicine should launch an initiative called CPR² (Commitment to Positive and Respectful Relationships) to call attention to professional behavior in engagement with both learners and patients.
- Attach this initiative to “Commitment to Caring”, regarding patient satisfaction.
- CPR² should be endorsed by senior leadership and implemented by established structures.
- The initiative should be aspirational, stating goals for a thriving respectful climate. This approach should articulate an expectation for respectful behaviors with recognition of the fact that environmental factors and burnout, as well as individual factors, contribute to lapses (similar to the approach used to address patient safety).
- Acknowledge productive individuals who have high patient satisfaction scores and concurrently high learner evaluation scores as role model clinician educators.
- Acknowledge productive clinical teams and clinical settings who have high patient satisfaction scores and concurrently high learner evaluation scores as model clinical environments.
- Mark the initiative with visible reminders such as lapel pins and posters that include graphic identifiers.
- Introduce this in various constituent groups and include in orientation for new staff, residents, and students.
- Enhance the resources for skill development for relevant professional behaviors, especially communication.
- Expand resources to prevent and address burnout.
- Survey the climate for each constituent group annually.
- Develop an annual dashboard that is publicly displayed that marks trends in the climate.

Outcomes and Evaluation – Dashboard
A dashboard to be shared annually was developed of currently available markers of the climate.

<table>
<thead>
<tr>
<th>Group</th>
<th>Established Survey</th>
<th>Question on the survey</th>
<th>Latest results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>AAMC Faculty Forward Survey</td>
<td>Satisfied or very satisfied with your job?</td>
<td>Benchmark 2010, 73% (National 63%)</td>
</tr>
<tr>
<td>Faculty</td>
<td>AAMC Faculty Forward Survey</td>
<td>Likely or very likely to choose to work at UNC if they had to do it all over again?</td>
<td>Benchmark 2010, 70% (National 7%)</td>
</tr>
<tr>
<td>Residents</td>
<td>ACGME Resident Survey</td>
<td>Residents can raise concerns without fear</td>
<td>Benchmark 2014, 89% (National 80%)</td>
</tr>
<tr>
<td>Residents</td>
<td>ACGME Resident Survey</td>
<td>I am satisfied with the process to deal with problems and concerns</td>
<td>Benchmark 2014, 88% (National 80%)</td>
</tr>
<tr>
<td>Students</td>
<td>AMMC Graduation Questionnaire</td>
<td>Have you experienced a mistreatment behavior during medical school?</td>
<td>Benchmark 2014, 27% (National 39%)</td>
</tr>
<tr>
<td>Staff</td>
<td>AHRQ Hospital Survey on Patient Safety Culture</td>
<td>In this unit, people treat each other with respect?</td>
<td>Benchmark 2013, 82%</td>
</tr>
<tr>
<td>Staff</td>
<td>AHRQ Hospital Survey on Patient Safety Culture</td>
<td>Hospital units work well together to provide the best care for patients?</td>
<td>Benchmark 2013, 69%, (National 65%)</td>
</tr>
<tr>
<td>Patients</td>
<td>HCAHPS</td>
<td>Overall rating of hospital of 9-10</td>
<td>Benchmark 90%ile</td>
</tr>
</tbody>
</table>

Conclusions and Next Steps
- Through the task force work, SOM and HCS leadership understands that burnout relates to lapses in professionalism, compromising both patient care and the learning environment.
- The Health Care System communications team is now engaged in building an initiative to address the shared concerns.
- The next step is to clearly associate the graphic identifier with the campaign concept and educate the constituencies (students, residents, staff, and faculty).
- Conversation within each constituent group is important to generate buy in.
- Once all are informed, we will track and publicize the dashboard of markers that reflect our climate.

Acknowledgements
Task force members included:
- Julie Byerley, chair, Vice Dean for Education
- Alice Chauang, Chair, Professionalism Task Force
- Ben Dong, Student Representative
- Karen Dowd, Director, General Psychiatry Residency Program
- Clark Denniston, Executive Dean for Graduate Medical Education
- Cam Enarson, SVP, Chair, Department of Medicine
- Jen Grudziak, Resident Representative, General Surgery
- Charles Jeannette, Chair, Department of Pathology and Laboratory Medicine
- Maureen Kinman, Resident Representative, Medicine
- Mike Lin, Associate Professor, Orthopedics
- Tony Lindsey, Executive Associate Dean, Clinical Affairs & Chief Medical Officer
- Amanda McCarter, Chief Communications and Marketing Officer
- Jennifer McElroy, Nurse Manager, 7 Children's
- Eric McFarlin, Assistant Professor, Pediatrics
- Amanda Pratt, Student Representative
- Jennifer Siddle, Student Representative
- Maureen Kimani, Student Representative

Carolina Care®
Graphic identifier for the clinician wellness campaign including burnout management and CPR²

Presented at the 2016 ELAM® Leaders Forum