

ABSTRACT: 2017 ELAM Institutional Action Project Symposium

Project Title: Physician Well-Being Index Survey To Establish Benchmarks for Faculty Burnout
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Collaborators and Mentors: Richard DiCarlo MD

Background, Significance of project: Louisiana State University School of Medicine at New Orleans participated in the Faculty Forward Initiative in the fall of 2015. This faculty engagement survey, a measurement of global satisfaction and retention, revealed 12% of our faculty were dissatisfied or very dissatisfied. While this percentage was similar to peer institutions, it introduced the possibility that faculty burnout was a potential cause of dissatisfaction. One tool to investigate the incidence of faculty burnout is the Physician Well-Being Index (PWBI). This validated tool developed by Mayo Clinic physicians evaluates components of distress. Publications demonstrate correlation of PWBI scores with career satisfaction, self-reported medical errors and aim to leave their current practice.

Purpose/Objectives: The objectives were as follows. 1.To provide LSUSOMNO faculty with information about their individual wellness compared to a large cohort of other medical professionals and provide relevant online resources specific to their unique challenges. 2.To provide LSUSOMNO information on prevalence of faculty in distress placing them at risk for adverse consequences. Also, to determine if specific factors could be identified as associated with the well-being index score.

Methods/Approach: Before launch of the PWBI, there was determination of 1.optimal demographic questions balancing interest in maximizing survey data and individual's concerns about anonymity and 2.content and scheduling of introductory emails to faculty. To improve participation, the PWBI was initially presented to basic science and clinical chairs and informational emails were sent to faculty about the PWBI. PWBI was described as an anonymous nine question interactive online survey where individual data were compared to normative data from 6880 practicing physicians. Faculty could track their well-being index over time and receive online resources specific to their challenges. The PWBI includes questions on gender and years since medical school graduation. LSUSOMNO added questions identifying the specific department, whether part or full time faculty, and geographic location of work. There are seven yes no questions and two questions with a 1 to 7 disagree to agree score about "meaningfulness of work" and whether "there is enough time for my personal/family life". The individual receives feedback of their well-being index compared to a physician group on, "career satisfaction, risk your distress level may contribute to a medical error, mental quality of life, sense of meaning in work, severity of fatigue, prevalence of suicidal ideation." The institution has real time access to anonymous summary reports including well-being scores of faculty compared to national benchmarks or specific demographic questions, as well as change of faculty scores over time.

Outcomes and Evaluation Strategy: 650 LSUSOMNO faculty received the PWBI. Initial results will be presented.

Conclusion with Statement of impact/potential impact: The PWBI provides information about faculty wellness, which should facilitate subsequent development of interventions such as mindfulness training to improve well-being. Challenges in the implementation of a faculty wellness survey will be discussed.

Physician Well-Being Index Survey To Establish Benchmarks Faculty Burnout



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Project Summary/Abstract

Physician burnout, a common manifestation of physician distress, is defined as a “syndrome of emotional exhaustion and depersonalization that leads to decreased effectiveness at work”.¹ Consequences of burnout may be professional, such as quality of medical care and job satisfaction or personal, such as stress and depression. Burnout has been reported in 30% to 45% of US physicians². The Physician Well-Being Index (PWBI) developed by physicians at Mayo Clinic to evaluate components of distress was validated in approximately 7000 US physicians. Publications demonstrate the correlation of PWBI scores with career satisfaction, self-reported medical errors and aim to leave their current practice. We administered the PWBI to full and part time faculty at the Louisiana State University School of Medicine in New Orleans (LSUSOM) to determine prevalence of faculty in distress placing them at risk for adverse consequences.

Institutional Report >

Purpose/Objectives

- To provide LSUSOM faculty with information about their individual wellness compared to a large cohort of other medical professionals and provide online resources specific to their challenges
- To provide LSUSOM mean faculty PWBI scores compared to physician cohort and determine if specific demographic factors are associated with PWBI such as gender, department or practice location

Methods

PWBI was introduced to leadership and faculty through informational emails and face to face meetings. LSUSOM IRB exempted the project from review. This anonymous survey with 9 questions was emailed to 601 part time and full time clinical and basic science faculty. Demographic questions included gender, years after medical or graduate school, department and practice location.

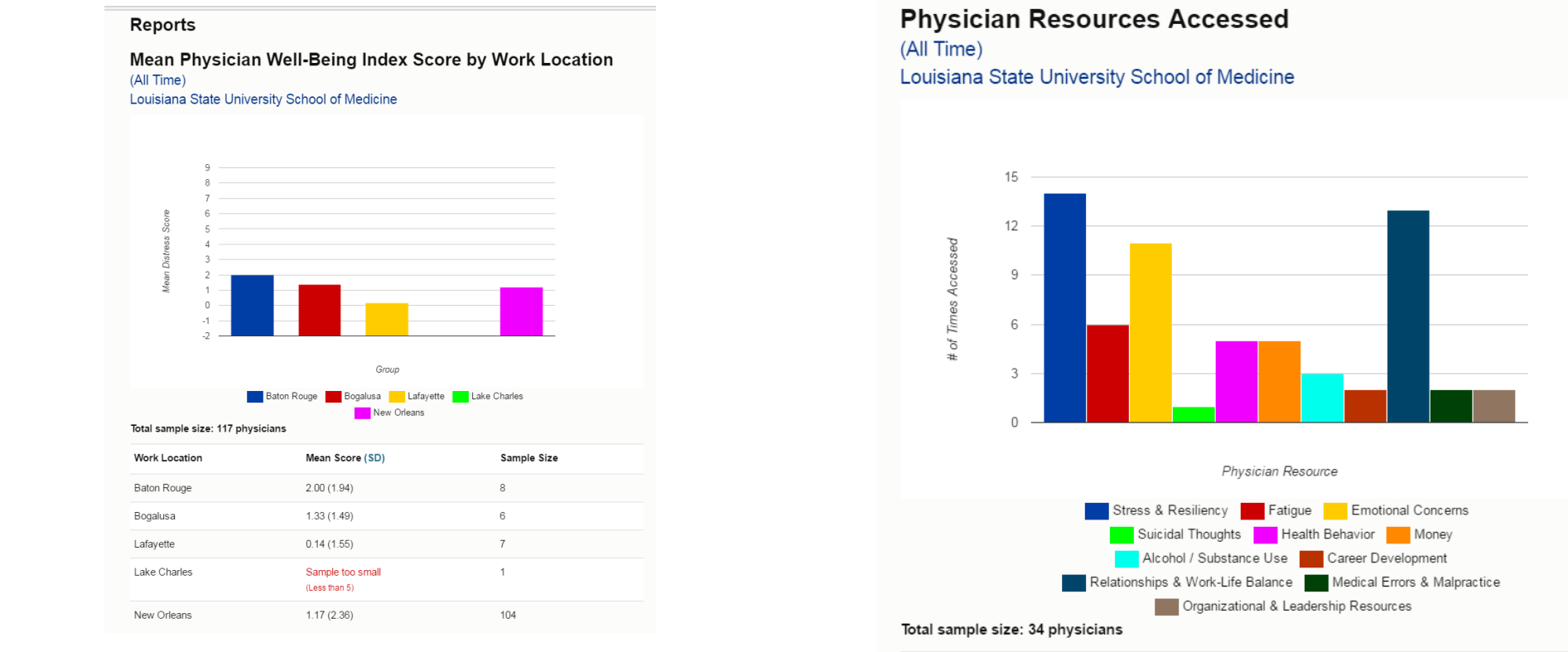
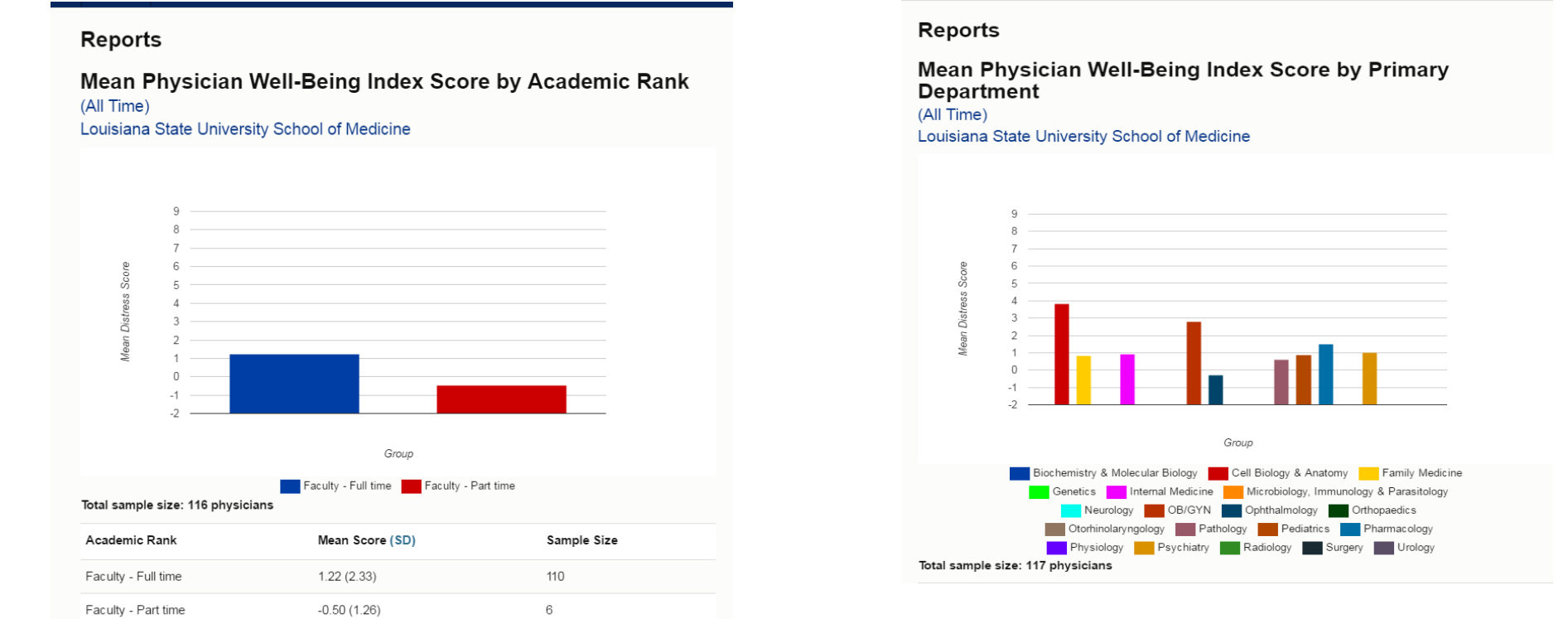
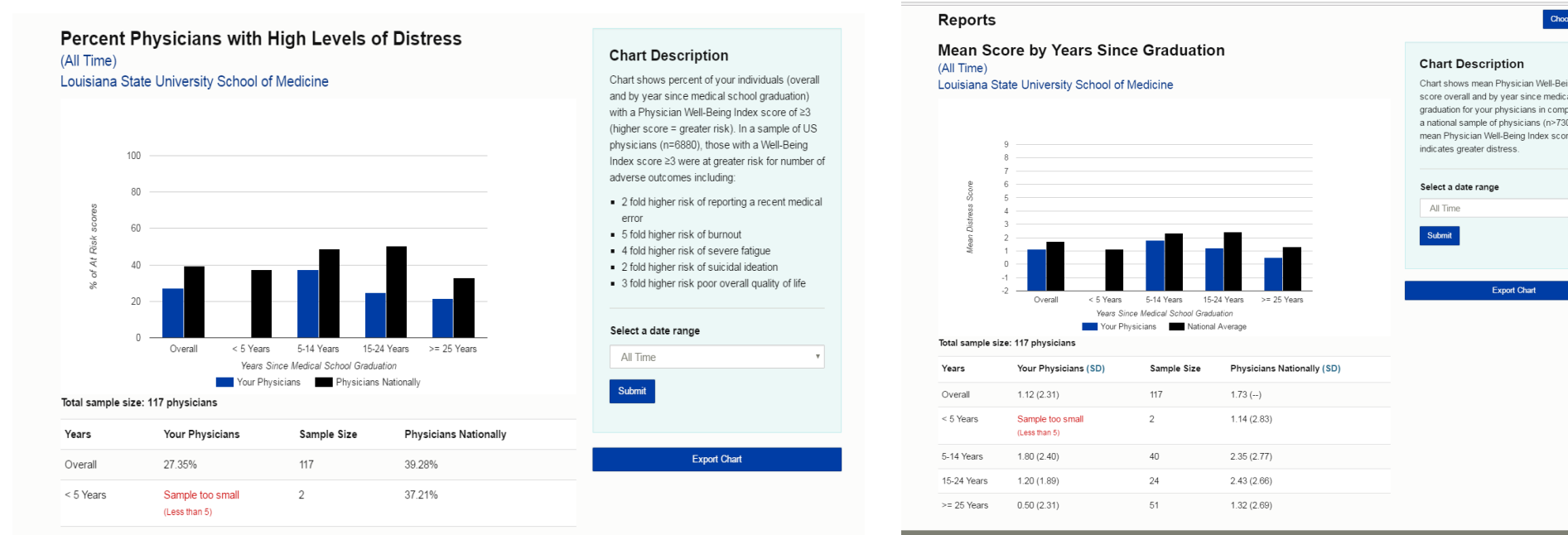
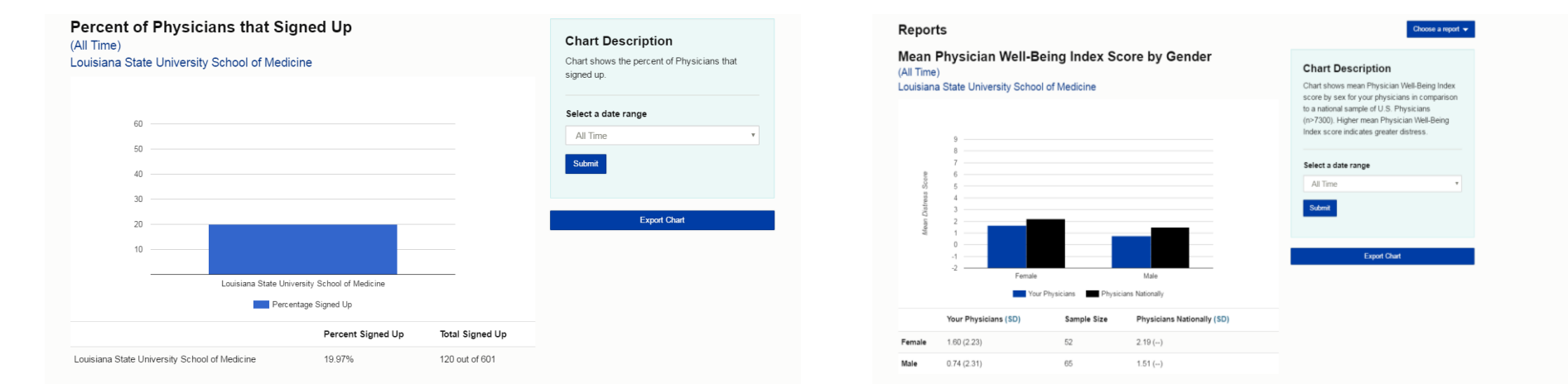
The survey consisted of 9 questions

Seven yes, no questions were-“During the past month have you felt burned out from your work, have you worried that your work is hardening you emotionally, have you often been bothered by feeling down, depressed or hopeless, have you fallen asleep while stopped in traffic or driving, have you felt that all things you had to do were piling up so high that you could not overcome them, have you been bothered by emotional problems, has your physical health interfered with your ability to do your daily work at home and/or away from home”.

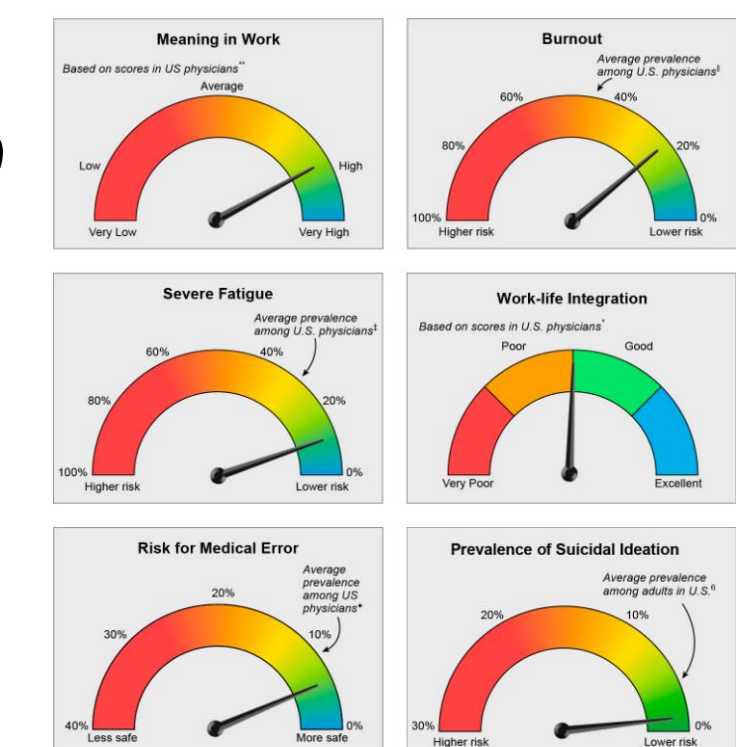
Two questions requested a 1 to 7 level of agreement-“the work I do is meaningful to me, and my work schedule leaves me enough time for my personal/family life.”

Information was collected in real time. To maintain anonymity, 5 to 10 responses were required to generate an institutional report by gender, department or years since receiving medical/graduate degree. Distinct reports were generated for the individual and the institution.

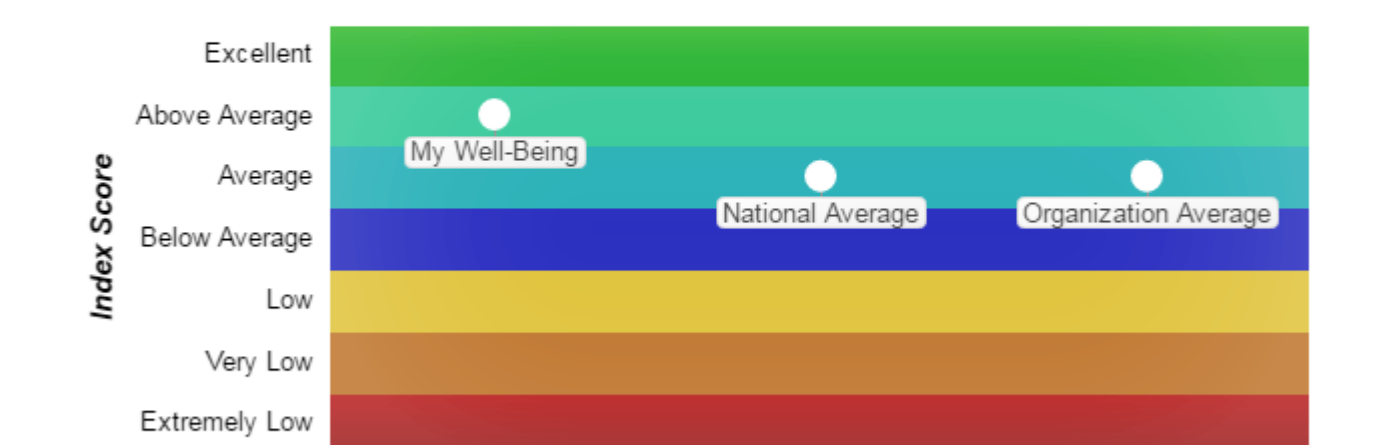
The individual was provided with access to a variety of local and national online resources.



Individual Report >



Compare your Well-Being Index score against the national average and the average for Louisiana State University School of Medicine



This report is generated when at least 100 fellow Physicians from Louisiana State University School of Medicine have assessed.

Outcomes and Evaluation Strategy:

601 faculty received the PWBI. One week later 120, (19.97%) had completed the survey. 27.35% of LSUSOM faculty compared to 39.28% physicians nationally, had high levels of distress. Female faculty had higher mean distress score (1.60) than males (.74). Both were less than mean scores for physicians nationally. 34 (28.4%) of those taking the survey accessed physician resources, most commonly accessed were those on stress and resiliency (14), and relationships and work-life balance (13). Least commonly accessed was that on suicidal thoughts (1).

Discussion

These are the one week results of this ongoing survey. The institutional decision to include both basic science and clinical faculty created challenges because the comparative group was only physicians. There were 6 basic science departments and 16 clinical departments of which 10 had both basic scientists and clinicians (family medicine, internal medicine, neurology, neurosurgery, ophthalmology, otolaryngology, pathology, pediatrics and psychiatry) and 4 had only clinicians (anesthesiology, dermatology, ob/gyn, orthopedics). There were no similarly sized studies with a comparative group of basic science researchers. Offering the survey to all faculty endorsed that wellness of our basic science faculty was as important to us as our clinical faculty. Basic science faculty were also provided with relevant resources. The lack of a normative group for the basic scientists made interpretation of both individual and merged clinical/basic scientist mean PWBI scores more confounding.

Results of the PWBI are preliminary as increased faculty participation is expected with time. Early results demonstrate favorable scores of faculty wellness at LSUSOM compared to national physician norms. The introduction of the PWBI is facilitating dialogue on faculty wellness through meetings with leadership and faculty. Anonymity of the survey prevents institutional identification of those faculty in high distress.

Summary

The PWBI can provide the individual and the institution with information about faculty wellness and burnout. We await increased faculty participation to increase institutional data. A visiting speaker on wellness is scheduled in April, 2017. Interventions such as providing mindfulness training to faculty are being planned.

References:

- Maslach, C.; Jackson, S;Leiter, M. Maslach Burnout Inventory Manual. 3rd ed. Palo A lot, CA;Consulting Psychologists Press 1996
- Shanafelt TD, Kaups KL, Nelson H, Satele DV, Sloan JA, Oreskovich MR, Dyrbye LN. An Interactive Individualized Intervention to Promote Behavioral Change to Increase Personal Well-Being in US Surgeons. Ann Surg 2014; Jan; 259(1); 82-88.doi:10.1097

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