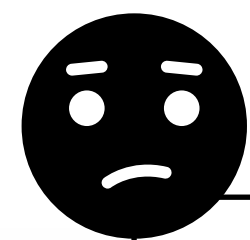


# Creating welcoming communities to improve retention and decrease burnout

Kristin Hahn-Cover, MD, FACP



## Background

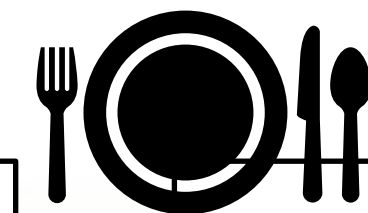
Department of Medicine (DOM) strategic priority: **retention and recruitment**

- Turnover in Hospital Medicine 25% annually vs. median rate 8% in academic hospitalist groups (SHM)
- Impact on learners in Internal Medicine
- Faculty interest in education – bottom quartile (student and resident surveys - 2021)
- 7% of Internal Medicine residents responded as likely to stay if offered a position

### 2021 Wellness and Burnout Dashboards

Hospitalist faculty

DOM clinician educators



## Methods and Evaluation

COMPASS small-group intervention (West, Shanafelt)

- Groups of 6-10 met for a meal every 2 weeks x 6 months
- 15 minutes for facilitated discussion, 45 for conversation

### MU-DOM intervention

- Invited 26 Hospitalist faculty and advanced practice providers (all divisions) hired since 2019
- Developed two surveys from single-item burnout question, measures of social isolation, and questions about team function



## Discussion

We expect intervention to build community and improve clinician well-being through “cultivating individual and team relationships”

- By inviting people hired in the last 3 years, we expect positive impact on turnover (**retention**)
- Meal expense ~\$200 per participant < 1% of expense related to turnover of one physician
- By engaging Hospitalists, we expect additional positive impact for learners (**improve clinical learning environment, recruitment**)

“You cannot change any society unless you take responsibility for it; unless you see yourself as belonging to it and responsible for changing it” – Grace Lee Boggs



## Purpose and Objectives

- Increase % of providers who remain 3+ years from hire
- Objective 1: Start 3 small groups involving at least 2 divisions
- Objective 2: Develop and refine surveys to assess benefits of small groups to participants
- Objective 3: After completion, participants will report stable-increased likelihood to remain for the next year



## Results

- 16 individuals (62%) accepted invitations
- Baseline surveys - % selecting 3 least-favorable scores (of 5)
- 45% - “I feel like a stranger to those around me”
- 27% - “I have learned about my coworkers individually”
- 27% - “I feel like I belong here”



## Next Steps

- Complete current pilot phase with 3 groups (Sept.)
- Post-session surveys – refine discussion topics
- Post-participation surveys – assess change from baseline
- If measures of burnout and social isolation improve, **expand** intervention within DOM, and present to Office of Clinician Well-Being and other SOM leaders



School of Medicine  
University of Missouri

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- West CP, Drybye LN, Rabatin JT, Call TG, Davidson JH, Multari A, Romanski SA, Henriksen Hellyer JM, Sloan JA, Shanafelt TD. Intervention to promote physician well-being, job satisfaction, and professionalism: a randomized clinical trial. *JAMA Intern Med.* 2014;174(4):527-533.
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- Shanafelt T, Trockel M, Rodriguez A, Logan D. Wellness-centered leadership: equipping health care leaders to cultivate physician well-being and professional fulfillment. *Acad Med.* 2021;96:641–651.
- Sinsky C, Shanafelt T, Murphy ML, de Vries P, Bohman B, Olson K, Vender RJ, Strongwater S, Linzer M. Creating the organizational foundation for joy in medicine: organizational changes lead to physician satisfaction. *AMA STEPSforward* 2017; <https://edhub.ama-assn.org/steps-forward/module/2702510>.

## **ABSTRACT: 2022 ELAM Institutional Action Project**

**Project Title:** Creating welcoming communities to improve retention and decrease burnout

**Name and Institution:** Kristin Hahn-Cover MD, FACP, University of Missouri School of Medicine

**Collaborators and Mentors:** Catherine Messick Jones MD, Stephen Keithahn MD, Craig Rooney PhD

**Topic Category:** Faculty Development

**Background, Significance of Project:** In our department, recruitment and retention are challenging. Annual Hospitalist turnover has been 25% for the last 3 years, compared to median rate of 8% in academic groups (*2020 State of Hospital Medicine Report*, SHM). Turnover is costly, with recruitment expenses, lost opportunities to expand services, and increased workload for remaining physicians. Hospitalist satisfaction and engagement also affect learners, who have scored faculty low on interest in education. In Wellness and Burnout Dashboards results from 2021, only 7% of Internal Medicine residents stated they would stay if offered a faculty position. In a recruiting event poll, this was often explained by “I have had mixed impressions of faculty satisfaction and that worries me.” In faculty Wellness and Burnout Dashboards, 22% of Hospitalists reported they were likely to leave in the next year. Significant levels of burnout were reported by 62% of Hospitalists and 55% of clinical faculty in the department.

Colin West, Tait Shanafelt and colleagues developed and reported a successful small-group intervention (COMPASS) with Hospitalist physicians, which they then spread to all physicians in their organization, “to encourage collegiality, shared experience, connectedness, mutual support, and meaning in work....” AMA STEPSforward module, *Creating the Organizational foundation for Joy in Medicine*, identifies “social support and community at work” as a key driver of burnout and engagement in physicians, citing the COMPASS model as a “success story.”

**Purpose/Objectives:** Increase the % of clinical providers who remain in full-time (>75%) positions longer than 3 years from hire. 1) Start 3 small groups based on the COMPASS model; 2) Assess benefits to participants; 3) Improve reported “likelihood to remain” of participants.

**Methods/Approach/Evaluation Strategy:** Following the COMPASS model, we formed pilot groups from Hospitalist faculty and APP (all divisions), with defined discussion themes and prompts. Boxed lunches are provided on-site, and sessions are facilitated by more senior faculty. Surveys were formed from a single-item burnout question, measures of social isolation, and questions about team function. A 10-item survey was delivered before the first session and will be repeated after the last; 4-item surveys are delivered after each session.

**Outcomes/Results:** Groups extend from March through September 2022. 16 of 26 individuals (62%) accepted invitations. In pre-course surveys, 45% of respondents selected one of the 3 least-favorable scores (of 5) to the statement “I feel like a stranger to those around me.”

**Discussion/Conclusion with Statement of Impact/Potential Impact:** We seek to improve recruitment and retention of physicians and APP in Department of Medicine through “cultivating individual and team relationships.” If measures of burnout and social isolation improve, we will expand the intervention by forming additional groups. With estimated physician turnover cost at 2-3 times annual salary, retaining one physician from our pilot group would have more than 150x return in expense reduction.