

Zeroing in on wellness solutions: where to begin?

Department-level strategies to address burnout

Medical Staff Associations across BC are exploring ways to ease long-standing organization and system-level factors that impact physician wellness.

The Vancouver Physician Staff Association (VPSA) representing 1,900+ physician members is using a promising approach that breaks down the challenge in a manageable way. It encourages department-level wellness solutions that are customized and relevant to the unique challenges experienced by each specialty area.

The work draws on Dr. Tait Shanafelt and Dr. Stephen Swensen's organizational strategies to reduce burnout.

The Vancouver group has dedicated Facility Engagement funding to engage its large contingent of members, departments, and divisions in these strategies. The approach can also be customized to other sites where the funding is not readily available.



ORGANIZATIONAL DRIVERS OF PHYSICIAN BURNOUT *

- excessive workloads
- inefficient work processes
- clerical burdens
- work-home conflicts
- lack of input or control with respect to issues affecting work
- organizational support structures
- leadership culture

* Dr. Tait Shanafelt, Chief Wellness Officer, Stanford Medicine

Breaking down a manageable strategy: 3 parts

1

Harness leadership and engagement

Vancouver Coastal Health (VCH) and the Vancouver Physician Staff Association (VPSA) joined forces in 2019 in the Vancouver Acute/ Vancouver Community (VA/VC) Physician Wellness Steering Committee to assess the level of burnout among physicians, to find its causes, and to develop collaborative solutions.

2

Acknowledge and assess the problem

VA/VC surveyed their 1,900-plus physician members to understand what drives physician burnout and how that is different in every department. They analyzed the results, and are arranging further meetings with department and division heads to determine next steps.

3

Target manageable interventions

Department and division heads can review their survey results and access engagement funding to further discover specific burdens/barriers impeding physician wellness in their specialty area. From there, they are identifying wellness champions to develop and lead data-driven interventions specific to their needs.

Harnessing the strategy in the Emergency Department

The Vancouver General Hospital Emergency Department (ED) was quick to respond to use its findings to address burnout rates among members – reported to be 75%.



DR. ZAFRINA POONJA



DR. KA WAI CHEUNG



DR. HEATHER LINDSAY



DR. CHRIS LEE

Four physicians volunteered as wellness champions: ED physician and steering committee co-chairs Dr. Zafrina Poonja and Dr. Ka Wai Cheung; and department heads Dr. Heather Lindsay and Dr. Chris Lee.

An interdisciplinary wellness team that includes the physicians and nursing leadership meets once a month.

An ED-level departmental survey assessing physician wellness was conducted, with the nursing team also planning its own departmental survey.

Dr. Zafrina Poonja: Shifting mindsets

"Our group had the highest response rate to the survey. We knew burnout was prevalent before the pandemic and that it was only going to get worse with COVID-19. Our burnout rate has skyrocketed over the past 18 months. The department realizes it needs to recover from its baseline rate plus the added stresses of the pandemic. We need to act now to ensure recovery."

"Our role is to try to understand the best way to advocate for our own physicians in a challenging environment. We need to shift the mindset to realize that when we look after ourselves better, we can better look after our patients. This needs to be done in a holistic way: as individuals; as a department; and advocating for the rest of the system. We need to identify and voice our concerns."

Dr. Ka Wai Cheung: Identifying issues

"Every physician is in some way a wellness champion. Every shift, my colleagues and I are identifying issues to look into and finding appropriate ways to address these. We've all experienced burnout and know there are things that can be done. Some are easier than others; we've also identified systemic areas that will require more work."



VA/VC WELLNESS SURVEY

October 2020

1,949

Number of physicians surveyed

24%

Survey response rate

51%

Reported burnout rate

67

Number of VGH Emergency Department physicians

85%

Survey response rate

49%

Reported burnout rate

75%

Reported burnout rate in internal Emergency Department survey taken April 2021

Focused interventions

The group identified and started work on multiple improvement initiatives in the workplace to support ED physician wellness. Examples include:

- improving the relationship between ED physicians and consultants
- arranging more streamlined outpatient clinics
- changing how shifts are scheduled

Further plans to explore include:

- optimizing space within the department that the group feels it can address
- applying for funding to address some of the deeper systemic issues that are drivers of burnout (e.g., workload) and identifying champions to lead these

Dr. Poonja:

"Some radiology processes were not efficient from our perspective. We organized a meeting with the department and now things are running more smoothly."

Staying on track

The work continues. Some further interventions may be within the control of the department, while others require change at organizational and system levels.

Dr. Poonja:

"We use Dr. Tait Shanafelt and Dr. Stephen Swensen's list of drivers of burnout to assess how we're doing. We're doing well in terms of a sense of community within our group; we have a number of interventions in place for this. Patient load and administrative work are higher burnout drivers for us. Our survey has provided us with specific examples of this and we're looking to categorize these results to see what we can take on."

"I tell myself how much worse things would be if we hadn't taken these steps."

"Prioritizing physician safety and care would enhance everyone's care. Wellness is definitely a big priority for my department, and I'm encouraged that VCH seems to be stepping up."

Dr. Cheung:

"Burnout has been a systemic problem for healthcare providers for a long time, but the stresses of COVID have been an extra burden. As frontline workers, we're often the first to feel the burden but we don't need to stay silent. There is a lot that can be done. We can tackle this head on to the benefit of our colleagues and our patients."



Vancouver Acute / Vancouver Community wellness strategy

Addressing organizational drivers of burnout*



1 Engage leaders, site, health authority to establish leadership, structure, and process

- Leverage engagement structures to bring together a leadership group
- Commit to proactively promoting wellness as an organizational priority
- Agree on an actionable strategy

2 Assess burnout and wellness across your local organization and teams

Ask: How are you doing?

- Surveys, meetings: collect data / establish benchmarks for organizational and department-level wellness
- Discover your own local drivers of burnout and needs
- Move on to further localize the strategy, recognizing that workflows, teamwork, experiences and burdens are distinct among different specialities and disciplines

3 Break down findings by department / division / teams

- Identify local leaders close to the work environment who can empower teams to make changes (e.g. Department/Division Heads)
- Further assess the current state at the department level: review data, additional surveys, discussions
- Identify and prioritize the local areas of greatest need that impede wellness

Ask: What is unique to us?



4 Plan focused, manageable interventions within your control (Emergency Department example)



- Identify physician peer champions
- Engage unit teams and colleagues
- Focus on 2 or 3 high impact opportunities / organizational barriers that are within your control to change and will improve the work environment
- Develop tactics to advance those changes and commit to making them

Ask: what do we have the power to change?

A more streamlined process for...
Changing shifts for...
Improving relationships with...



5 Measure and build

- Commit to a small group of changes
- Measure progress and communicate
- Build on the momentum to address further changes to improve the work environment
- Engage organizational leaders in broader discussions about systemic challenges that are not within your control to change

Learn more

* This strategy draws on Dr. Stephen Swensen and Dr. Tait Shanafelt's work: **Mayo Clinic Strategies to Reduce Burnout: 12 Actions to Create the Ideal Workplace**

Borrow an e-book version for up to one week through the College of Physicians and Surgeons of BC (you will need your login details).