How to Incorporate Resident Burnout Prevention into the Residency Curriculum

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Objectives

At the completion of this workshop, learners will be able to:

• Determine what residency programs can additionally do to promote wellness and prevent resident burnout

• Implement changes in a resident's experience at residency programs based on the data reviewed during this session

• Influence future research on the resident burnout prevention
Facts about Resident Wellness

• 29% meet criteria for a **depression**
• 8.7% w/ **suicidal ideation** in the last 12 months
• 46.4 - 96.5% report **abuse during training**
• 37-40% report **family/relationship problems**

Facts about Resident Wellness

• 50 - 70% screen positive for **burnout**
• Resident burnout rates between specialties
  – General Surgery (89%)
  – Radiology (85%)
  – Internal Medicine (79%)
  – Psychiatry (70%)
  – Pediatrics (53%)
  – **Family Medicine (50%)**
  – Pathology (48%)
When Residents Become Attendings….

Why are we at risk?

- Structure of Medical Education
- Stigma of Mental Illness
- Barriers to Seeking Treatment
- Sleep Deprivation
- Learner Mistreatment
- Personality Characteristics
- Debt
- Lack of Mentors
Impacts of Impaired Wellness

- Unprofessional conduct
- Decreased empathy
- Increased risk substance abuse, suicidal ideation, other mental health conditions
- Relationship difficulties
- Potential lasting implications for patient care

But don’t worry, there is hope!
Student and Resident Workshop on Burnout Prevention at AAFP National Conference

Findings from National Conference

- A one hour workshop performed at 3 different occasions during the conference
  - 3 unique sets of participants
- Over 100 attendees in total
  - Mostly students and residents
  - Some program directors
- Group Discussion focused on:
  - Eliciting participants’ stories of times when their wellness was impacted by their training environment
  - Coping techniques employed by participants
  - Institutional/program resources and barriers
Key Findings from Group Discussions

• Students/residents used a number of techniques to stay well:
  – Exercise/health maintenance
  – Engaging social networks (family, friends, etc)
  – Wellness focused exercises (meditation, massage, deliberate mindfulness)
  – Time “away” from school/residency
    • E.g. travel, volunteering, playing music, leisure activity, etc.

Key Findings from Group Discussions

• Students/residents identified a number of barriers in maintaining their well-being:
  – The “culture” of medicine
    • Sense of oppressive hierarchy
    • Unhealthy competition with fellow students/residents
    • Perceived inflexibility in schedule or attendance expectations
  – LACK OF TIME!
    • To complete assignment, study for exams, see patients and write notes
  – Rigor of school/training
    • Maintaining grades, # hours each day spent studying or working on wards/in clinic
Key Findings from Group Discussions

• Students/residents described institutional or program-level resources to promote wellness:
  – Counseling resources
  – Gym access
  – Specific wellness activities (e.g. time-off, retreats, workshops, etc)
  – Peer-to-peer and group mentorships

Key Findings from Group Discussions

• Students/residents shared thoughts on how they as individuals could enhance learning experiences of themselves and peers:
  – Culture change through openness, transparency, and constructive feedback
  – Engagement with discussions that promote wellness in the training environment
  – Mindfulness
    • Including knowledge of one’s limits and increased engagement with available wellness services
What are your thoughts about the student and resident perspective on burnout prevention?

One Example

- Carl R. Darnall Army Medical Center FM Residency Program
- Fort Hood, Texas
- 6/6/6 Program
Wellness Program

Vision and Mission

CRDAMC Family Medicine Residency Program
PATIENTS FIRST, LEARNING ALWAYS

VISION
We are honored to serve and committed to be a model residency for the Army. We strive to be the home of choice for patients, residents, students, faculty, and staff. We go all-out to develop Soldier Family Physicians with the values and abilities to provide outstanding patient care and excel in accomplishing the Army’s mission.

MISSION
The CRDAMC Family Medicine Residency trains Family Physicians in a supportive team environment, provides evidence-based patient centered care to Soldiers, Retired Warriors, and their families, serves the Army and medical communities, assures wellness for all members of the team, and develops the AMEDD’s future leaders.

Wellness Program

• Vision and Mission
• Wellness = 1 of 5 Residency Goals
Wellness Program

- Vision and Mission
- Wellness = 1 of 5 Residency Goals
- Burnout Assessment
- Wellness Champions
- Social Events
  - Frequent dinners
  - Multiple yearly traditions

Wellness Program (cont.)

- Monthly resident awards
- Quarterly curricular wellness activities
- Annual retreat
- Weekly intern support meetings
- Weekly sports
- Community Service
- Move to Health course
Wellness Didactic Series

- Sleep
- Cognitive behavioral therapy
- Burnout prevention
- Exercise
- Nutrition
- Mindfulness

Outcomes

- Resident perception
- Faculty perception
- MBI
Small Group Discussion and Report Back to Large Group

Please...

Complete the session evaluation.

Thank you.