



Healthcare Workforce Stress, Burnout, and Resiliency

June 17, 2022

CDR Sharyl Trail, PsyD
Deputy Regional Administrator – Region 6 Dallas
Office of Intergovernmental and External Affairs

Vision: Healthy Communities, Healthy People



A little bit about your presenter.....

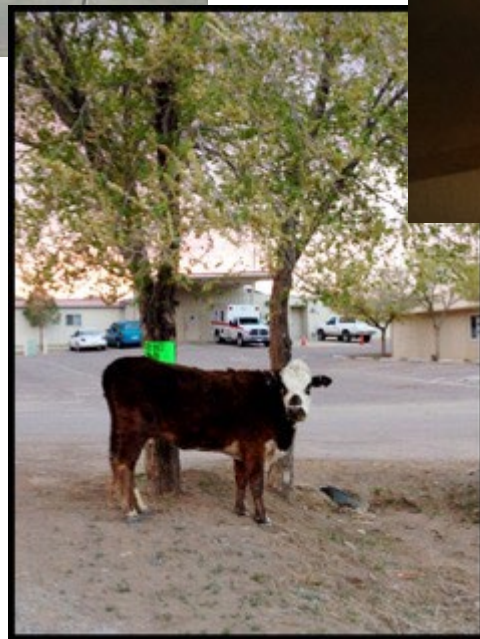
- Licensed Clinical Psychologist
- HRSA Region 6 Deputy Regional Administrator - May 2021
- 12 years as a psychologist Officer in the US Public Health Service Commissioned Corps.
- Clinician, clinical supervisor, and healthcare administrator at four FQHC look-a-like Indian Health Service PC clinics. NHSC Loan Award Recipient
- Deployed multiple times to natural disasters and COVID response providing Force Health Protection



Zuni, NM – Staff Psychologist



Alamo Navajo, NM – BH Director/Clinician



Klamath Tribal Health, KF OR – BH Director/Clinician



Oneida Nation Green Bay, WI – Dir. Of Training/Clinician



Agenda

- Burnout Assessment
- Institute on Healthcare Improvement (IHI)
 - Joy in Work Model
- Resiliency
 - “It’s *NOT* About Bouncing Back”



New Release: Surgeon General's Report



- [Health Worker Burnout — Current Priorities of the U.S. Surgeon General \(hhs.gov\)](https://www.hhs.gov/health-worker-burnout)

Burnout

- Burn-out is a **SYNDROME** conceptualized as resulting from **chronic workplace stress** that has **not been successfully managed** (World Health Organization, 2019).



Burnout: Multidimensional

- Characteristics of burnout include:
 - Emotional exhaustion – **Wore out** (*both physical and emotional manifestations*)
 - Depersonalization – **Checked out** (*uncaring feelings/hostility toward colleagues and patients; do least amount possible*)
 - Reduced sense of accomplishment and effectiveness – **Bummed Out**

(Maslach, 2003; Newell & MacNeil, 2010, pp. 59; Skinner, 2015, pp. 132-133; WHO, 2019)

- Burnout is the “Canary in the coal mine” – Resiliency is *NOT* about making the bird tougher.



Maslach Burnout Inventory (MBI)

- Measures burnout as defined by the World Health Organization (WHO) and in the ICD-11.
- Can be used to assess specific groups in addition to general use:
 - Medical personnel
 - Human service workers
 - Educators
 - Students
- Using the MBI and AWS together assists in measuring the extent and likely cause of burnout.
- [Maslach Burnout Inventory \(MBI\) - Assessments, Tests | Mind Garden - Mind Garden](#)
- [Valid and Reliable Survey Instruments to Measure Burnout, Well-Being, and Other Work-Related Dimensions - National Academy of Medicine \(nam.edu\)](#)



Areas of Worklife Survey (AWS) Maslach

- Created to assess employees' perceptions of work setting qualities that play a role in whether they experience work engagement or burnout.
- Six domains related to the work environment are assessed:
 - Workload
 - Control
 - Reward
 - Community
 - Fairness
 - Values
- Using the MBI and AWS together assists in measuring the extent and likely cause of burnout.
- [Physician Burnout Solutions - Mind Garden](#)



Muffin Rage – Dr. Jillian Horton

- “I often speak to groups of healthcare workers about burnout, and whenever I tell this story I only half-jokingly describe the phenomenon as “muffin rage.” **Muffin rage is what we feel when there is a vast chasm between our actual needs and what another person or an institution *thinks* we need.”**
- “As a healthcare worker, I regularly see my peers on the pandemic front line explode like fireworks when management makes superficial offerings such as lunch-hour “resilience training” or providing a website link to a video on meditation as a way to compensate for overwork and related stress.”
- “The irony is that some of these approaches might actually ease our suffering, but they don’t replace our basic needs for sleep, for reasonable working conditions, for physical and psychological safety. **The offering is palliative when what we are seeking is a cure.**”
- [Op-Ed: Burned-out healthcare workers and 'muffin rage' - Los Angeles Times \(latimes.com\)](https://www.latimes.com/health/la-he-muffin-rage-2020-04-23)



Moral Resilience – Transforming Moral Suffering in Healthcare

- **INTEGRITY – The Anchor of Moral Resilience**

- Cynda Hylton Rushton
- Individual/Employee Strategies

- Know our fundamental values
- Cultivate Mindful Awareness and Self-Attunement
- Cultivate Reflection and Insight
- Develop Moral Efficacy
- Self-Stewardship
- Transformational Learning

Moral Resilience – Transforming Moral Suffering in Healthcare

- **INTEGRITY – The Anchor of Moral Resilience**

- Cynda Hylton Rushton
- Sustainable systems for ethical practice

- Partial Response
 - Tactics (fast paced clinical improvements)
 - Policy and clinical culture
 - Personal Development
- Conscious Full Spectrum Response
 - Be
 - Understand
 - Act

Institute for Healthcare Improvement (IHI) Joy in Work Resources

- IHI Framework for Improving Joy in Work
- Conversation and Action Guide to Support Staff Well-Being and Joy in Work
- Psychological PPE: Promote Health Care Workforce Mental Health and Well-Being

[Joy in Work | IHI - Institute for Healthcare Improvement](#)

IHI Framework for Improving Joy in Work

- Infusing Meaning, Purpose, Connection, and Safety



WHITE PAPER

IHI Framework for Improving Joy in Work



AN IHI RESOURCE

20 University Road, Cambridge, MA 02138 • ihi.org

How to Cite This Paper: Finkelstein, J., Balk, B., Swenson, S., Kohnert, A., Landman, J., Finkelstein, D. *IHI Framework for Improving Joy in Work*. IHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017. (Available at <https://www.ihi.org>)



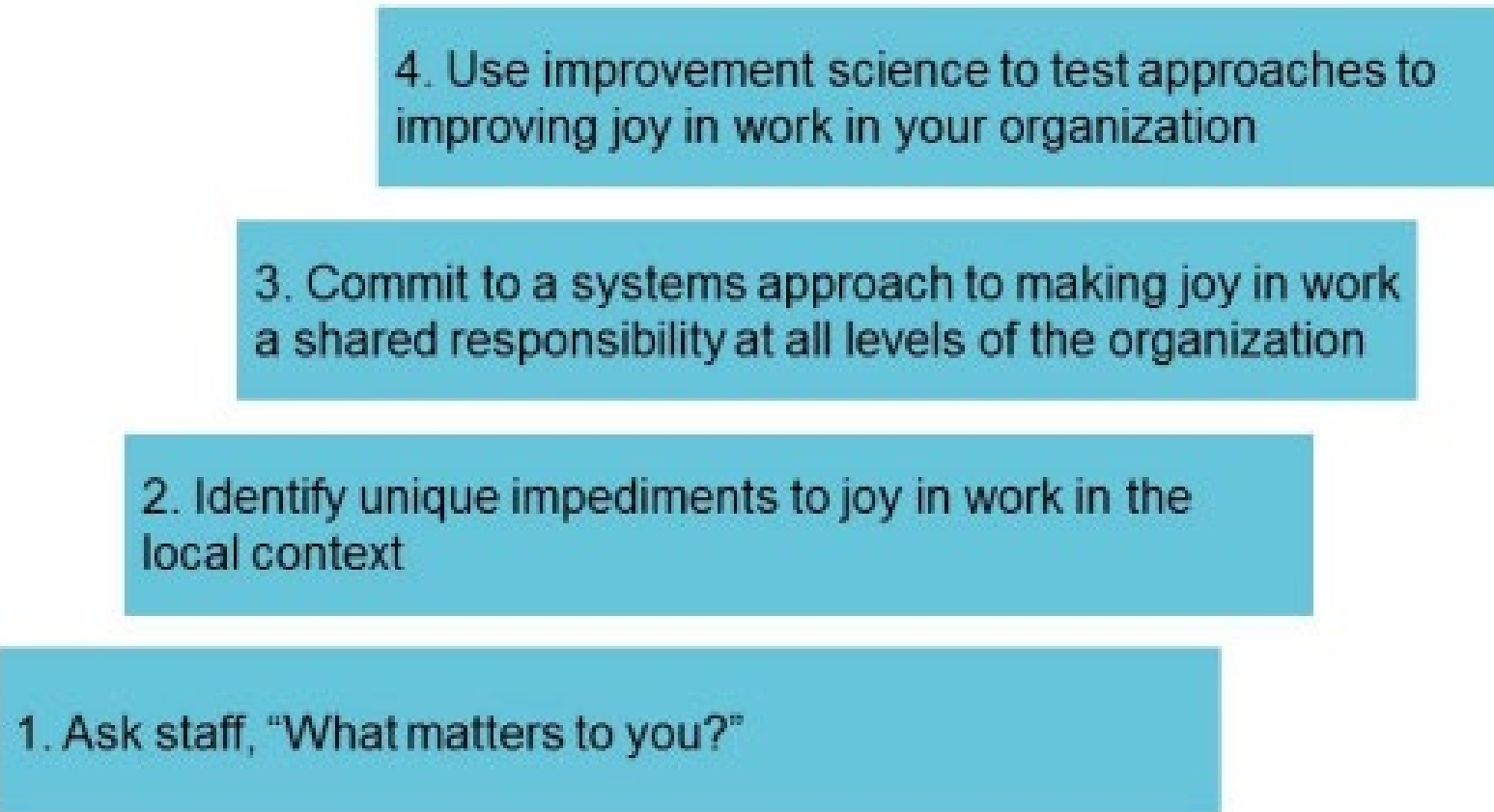
The importance of joy in work (the “why”) – Aspirational Goal

- This assets-based approach to improvement enables people to look at issues from different perspectives, which often leads to designing more innovative solutions.
- The focus on joy in work is about **more than the absence of burnout. Joy is about connections to meaning and purpose.** By focusing on joy through this lens, health care leaders can reduce burnout, while simultaneously building the resilience health care workers rely on each day.



Four Steps for Healthcare Leaders to Improve Employee Engagement

Figure 1. Four Steps for Leaders



Step 1: Ask staff, “What matters to you?”

- Identify what contributes to, or detracts from, joy in work for staff, which will vary by individual
- By understanding what truly matters to staff, it’s possible to identify and remove barriers to joy.
- Identify the unique local and organizational opportunities to improve joy in work.
- Teams have found success with using communication boards, surveys, regular staff meetings or more informal meetings to engage, inform, and listen.
- ☐ What makes for a good day for you? ☐ What makes you proud to work here? ☐ When we are at our best, what does that look like?



Step 2: Identify unique impediments to joy in work in the local context

- Identify frustrations they experience during the work day, the “pebbles” in their shoes
- What gets in the way of a good day? What makes for a bad day?
- Identify system-level impediments to joy in work for an organization, department, program, clinic, or team.
- Build a comprehensive understanding of what doesn’t contribute to joy in work in the organization.
- Address the psychological needs of humans.
- How to address the “rocks” and “boulders”



Step 3: Commit to a systems approach to making joy in work a shared responsibility at all levels of the organization

- Although improving the workplace is the job of leaders, everyone from senior executive leaders to clinical and administrative staff has a role to play.
- From creating effective systems to building teams to bolstering one's own resilience and supporting a positive culture, each person contributes.
- Improving joy in work is directly linked to the skills of leaders at all levels.
- Organizations cannot just delegate responsibility for joy in work to the Human Resources department; it is everyone's job.
- It is most important to note that although there is a shared responsibility, not everyone does everything.



Step 4: Use improvement science to test approaches to improving joy in work in your organization

- There are many ways to take a systems approach to improving joy in work. The aim is to make the change process rewarding and effective.
- Using principles of improvement science, organizations can determine if the changes they test are leading to improvement; if they are effective in different programs, departments, and clinics; and if they are sustainable.
- In IHI's prototype initiative, teams used the Model for Improvement or another improvement method that was standard in their organization.
- In all cases, the teams set an aim for their work, decided on measures that would tell them if they were making progress, and selected components of the Framework for Improving Joy in Work as areas in which to test changes.



IHI Joy in Work Framework – Nine Components



Nine Components to Enhance Employees' Contentment and Satisfaction with Work

- **Physical and Psychological Safety**
- **Meaning and Purpose**
- **Choice and Autonomy**
- **Recognition and Rewards**
- **Participative Management ***
- **Camaraderie and Teamwork ***
- **Daily Improvement ***
- **Wellness and Resilience ***
- **Real-Time Measurement ***



Contact Information

CDR Sharyl Trail, PsyD

Deputy Regional Administrator

Office of Intergovernmental and External Affairs (IEA)

Health Resources and Services Administration (HRSA)

Region 6 – Dallas, TX

Email: strail@hrsa.gov



Connect with HRSA

Learn more about our agency at:

www.HRSA.gov



[Sign up for the HRSA eNews](#)

FOLLOW US:

