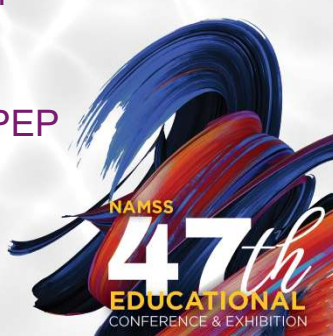


## Breaking the Silence Surrounding MSP Burnout

**Susan Diaz, C.P.C.S., C.P.M.S.M.**  
M.S.P. Member, CPEP Board of Directors  
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New York Presbyterian Hospital System

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Director, Outreach and Communication, CPEP

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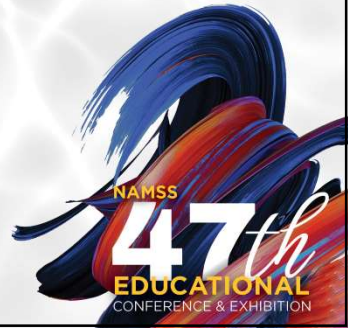


The bottom right corner features a smaller version of the event logo, which includes the text "NAMSS 47th EDUCATIONAL CONFERENCE & EXHIBITION" overlaid on the same colorful brushstroke background.

## Disclosure Statement for NAMSS 23 Conference

Speakers have no relevant financial relationships to disclose

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## Stress vs Burnout: Words Matter

### *Internal and External*

- Stay away from default phrases that do not accurately convey what you need, feel, or expect.
  - Stress = a lot to do; busy, busy, busy but there is movement, progress.
  - Burnout = overwhelming, paralyzing, stuck.

## Stress vs Burnout

Stress	Burnout
Characterized by over-engagement.	Characterized by disengagement.
Produces urgency and hyperactivity.	Produces helplessness and hopelessness.
Loss of energy.	Loss of motivation, ideals, and hope.
Leads to anxiety disorders.	Leads to detachment and depression.
May kill you prematurely	May make life seem like not worth living

<https://www.helpguide.org/articles/stress/burnout-prevention-and-recovery.htm>

## Conditions related to increased health care worker stress

- Reduction in force from staff falling ill, layoffs and furloughs.
- Pressure to maintain up-to-date knowledge and track fluctuating policies and procedures.
- Fatigue from longer shifts and altered sleep patterns.
- Moral distress from experiencing conditions incongruent with normal professional and ethical responsibility.
- Physical exhaustion, dehydration, eating unhealthy foods or eating at irregular times.

<https://www.jointcommission.org/-/media/tjc/newsletters/quick-safety-54-promoting-hcw-well-being-during-crisis-6-4-20-final.pdf>  
Accessed 7/18/2023

## Stress and Burnout in Healthcare

- Stress, burnout and depression among physicians is well documented and receives a great deal of attention
- Medscape 2023 Report on Burnout and Depression
  - 9,175 respondents across 29 specialties
  - Reported overall burnout increased from 42% in 2018 to 53% in 2023
  - Reported depression increased from 15% to 23% over the same period

<https://www.medscape.com/slideshow/2023-lifestyle-burnout-6016058>  
Accessed 7/18/2023



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## Stress and Burnout in Non-Physicians

- 2020 survey of over 1,100 healthcare workers across the U.S. (93% non-physicians)
- 86% reported experiencing anxiety, 76% reported exhaustion and burnout, and 75% said they were overwhelmed.
- Symptoms included trouble with sleep, exhaustion, and work-related dread.
- Crucially, 39% felt like they received inadequate emotional support.

<https://mhanational.org/mental-health-healthcare-workers-covid-19>  
Accessed 7/17/2023



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## **Stress and Burnout in Medical Services Professionals**

- 92% of respondents reported stress and/or burnout at work
- 64% indicated and/or burnout had a strong/severe impact on their life, while 27% indicated it had a moderate impact on their life
  - 9% reported it had little or no impact on their life
- 64% of respondents said burnout had a negative effect on their relationships

## **MSP Survey: How have stress and/or burnout affected your life?**

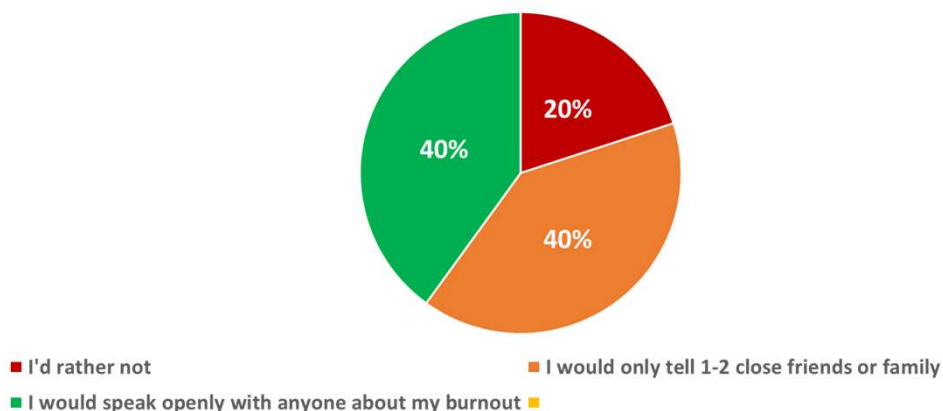
- “Hard to sleep, daily anxiety, feelings of being overwhelmed, unable to concentrate, feeling that I couldn't perform even simple tasks”
- “Tired, disinterested in work and hobbies”
- “Increased absenteeism; Never feeling like I've done "enough" during the work day”
- “Extended work hours, including weekends, left me tired (emotionally and mentally), with little to no work-life balance, which causes resentment at times”
- “Got divorced due to working 80+ hours a week”

## MSP Survey: What contributes most to your stress and/burnout

- “Constant shifting of priorities;” “constant deadlines;” “never-ending deadlines;” “unrealistic expectations regarding the volume of work;” “Working in a constant state of urgency”
- “Lack of resources (reduction in force);” “Hospital leadership... providing no support;” “Administration not appreciating our role”
- “Dealing with disruptive physician behavior;” “unlearned leadership at the executive level and physician leadership”

## Stigma about burnout still exists

How do you feel about telling others about your burnout?





## What factors prevent you from seeking help?

- “The time, perceived implications, resources, cost. We have EAP but that can't solve the issues.”
- “No one listen to your problems. Learned to deal with stress.”
- “Time, cost.”
- “We have EAP, but taking time during a business day and telling your boss you're seeking help isn't something I'm comfortable with.
  - *“I'm on my 7th boss in 9 years”*

## What could your institution do to help reduce your stress/burnout that they are not currently doing?

- “The answer they don't want to hear – more FTEs.”
- “Appropriately staff the MSO based on providers and not patient beds.”
- “Provide more work-life balance (i.e. allow some work from home) and support through resources (human capital, etc.)”
- “Offer financial incentives for health/well-being; massage, meditation, fitness.”
- “Value the department, resources, staffing, and pay us at the same level as other departments.”

## Resources & Strategies for Individuals

### **MSP Survey: Are there any self-care practices you have found that have been particularly helpful to you?**

- “Drinking a hot cup of tea all day long!!!”
- “Walking or exercise.”
- “Obtained support from an Licensed Clinical Social Worker.”
- “Listening to positive podcasts on my way into work, trying to disconnect from emails on the weekends and at night, delegating when I can. Trying to carve out time for family and a personal life.”
- “Stretch Lab membership, meditation, exercise.”
- “Faith, devotions, weekend fun/entertainment.”



## If you are not burned out, what keeps you on an even keel? What advice would you give?

- “Try to keep in mind that your career doesn't need to define you.”
- “Talk out problems or situations with other MSP's. Go to a NAMSS gathering.”
- “Keep your work at work. Turn it off in the evenings and weekends.”
- “Just breathe and manage issues up as frequently that you can as this journey isn't one that we have to single handedly manage.”

## General Tips on Taking Care of Yourself

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• Accept that there are events that you cannot control.</li> <li>• Cultivate a positive attitude.</li> <li>• Engage in mindfulness practices.</li> <li>• Learn and practice relaxation strategies.</li> <li>• Practice assertiveness skills.</li> <li>• Take care of your body through movement and nutrition.</li> </ul> | <ul style="list-style-type: none"> <li>• Reflect on what brings meaning and joy to your life.</li> <li>• Develop time and task management skills</li> <li>• Get enough rest and sleep.</li> <li>• Don't rely on alcohol, drugs, or compulsive behaviors to reduce stress.</li> <li>• Take a personal day to regroup</li> <li>• Set boundaries.</li> </ul> |
|--|---|

<https://cohwcovidsupport.org/stress>

## Practicing Gratitude

- Gratitude is strongly and consistently associated with greater happiness.
- Gratitude helps people:
  - Feel more positive emotions.
  - Relish good experiences.
  - Improve their health.
  - Deal with adversity.
  - Build strong relationships.

<https://www.health.harvard.edu/healthbeat/giving-thanks-can-make-you-happier>

## Techniques for Practicing Gratitude

- Gratitude Journal
  - Write down three things each day for which you are grateful
- Gratitude Jar
  - Write down three things each day for which you are grateful on small pieces of paper and put them in a jar
    - Soon, like Winnie the Pooh, you have a jar of sweet things to enjoy!
- Share your gratitude with others

<https://www.mindful.org/an-introduction-to-mindful-gratitude/>

## Questions to Generate Gratitude

- Micro Gratitude
  - What went unexpectedly well at work/school this week?
  - What went well in someone else's life for which I'm grateful?
- Gratitude Savoring
  - What do I appreciate about the view outside the window of my home/office?

*<https://healthy.iu.edu/doc/worklife/gratitude-practices1.pdf>, Accessed 8/8/2023*

## Questions to Generate Gratitude

- Interpersonal Gratitude
  - Who makes me feel like I truly matter?
  - Who took the initiative to talk with me or help me at work this week?
- Redemptive Gratitude: Thinking about a Difficult Experience in your Life
  - In what ways is my life better now? What have I learned to appreciate as a result of this stressful experience?

*<https://healthy.iu.edu/doc/worklife/gratitude-practices1.pdf>, Accessed 8/8/2023*

## Questions to Generate Gratitude

- Macro Gratitude
  - Who or what changed my life for the better?
  - What is something I can easily do that I now realize others struggle with?
  - What aspects of my spiritual life am I grateful for?
- Cultural Gratitude
  - In what ways have my culture been a source of strength for me?
  - In what ways have my cultural group contributed to society?

*<https://healthy.iu.edu/doc/worklife/gratitude-practices1.pdf>, Accessed 8/8/2023*

## Resources & Strategies for Leaders

## Joint Commission Statement on Removing Barriers to Mental Health Care for Clinicians and Health Care Staff

- “The Joint Commission supports the removal of any barriers that inhibit clinicians and health care staff from accessing mental health care services, **including eliminating policies that reinforce stigma and fear about the professional consequences of seeking mental health treatment.**”

*<https://www.jointcommission.org/-/media/tjc/documents/covid19/statement-on-removing-barriers-to-mental-health-care-for-clinicians-and-health-care-staff.pdf>  
Accessed 7/31/2023*



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## Managers and Leaders: Supporting Your Staff

- Communicate regularly
  - Keep communication honest, sincere, and empathetic. Ensure information is current and accessible to help demystify rumors
- Model behaviors that promote self-monitoring
  - For example, at the beginning of the work day or beginning of staff meetings, lead a few minutes of reflection
- Encourage sharing of concerns
  - Create a psychologically safe environment for sharing concerns with management and express gratitude for staff's contributions
  - Empower staff to share strategies toward improvement and problem-solving

*<https://www.jointcommission.org/-/media/tjc/newsletters/quick-safety-54-promoting-hcw-well-being-during-crisis-6-4-20-final.pdf>  
Accessed 7/18/2023*



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## Managers and Leaders: Supporting Your Staff

- Demonstrate value of staff and share positive feedback
  - Communicate expectations compassionately and in a non-threatening and non-punitive manner
  - Share positive news including kudos when appropriate
  - Respect staff's time off, limit information overload
- Orient staff to psychosocial resources
  - Educate staff on available psychosocial support resources and services and how to access them
- Encourage peer support
  - A.K.A., the Buddy System

<https://www.jointcommission.org/-/media/tjc/newsletters/quick-safety-54-promoting-hcw-well-being-during-crisis-6-4-20-final.pdf>  
Accessed 7/18/2023



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## Professional Quality of Life Scale for Healthcare

### Easy to use tool for self evaluation

- Compassion Satisfaction
- Perceived Support
- Burnout
- Secondary Traumatic Stress
- Moral Distress

PROQOL Health, Version 1  
5/1/2001

**PROFESSIONAL QUALITY OF LIFE SCALE FOR HEALTH WORKERS**

As a health worker working in difficult humanitarian or pandemic situations, you have direct contact with the lives of your patients and beneficiaries. As you may have found, your compassion for those you help can affect you in positive and negative ways. Below are some statements about your experiences as a health worker, both positive and negative.

Consider each statement about your current work situation. Circle the number that most accurately reflects how frequently you have experienced these things in the last 30 days.

	Never	Rarely	Sometimes	Often	Very Often
1. I am happy that I choose to work in healthcare.	(1)	(2)	(3)	(4)	(5)
2. At times I have had to do things that go against my personal values.	(1)	(2)	(3)	(4)	(5)
3. Because of my work, I have unwanted, distressing thoughts.	(1)	(2)	(3)	(4)	(5)
4. I have seen things at work that I believe to be morally wrong.	(1)	(2)	(3)	(4)	(5)
5. I feel supported by my colleagues.	(1)	(2)	(3)	(4)	(5)
6. I feel energized by working with my patients.	(1)	(2)	(3)	(4)	(5)
7. I often find myself thinking about my patients when I am with my family.	(1)	(2)	(3)	(4)	(5)
8. Administrative procedures and rules make my job too hard.	(1)	(2)	(3)	(4)	(5)
9. At times, I have been unable to provide the care that I believe should have been provided.	(1)	(2)	(3)	(4)	(5)
10. I think that I have been affected by the suffering I see at work.	(1)	(2)	(3)	(4)	(5)
11. My family supports me in my work in healthcare.	(1)	(2)	(3)	(4)	(5)
12. Because of my work, I feel anxious about many things.	(1)	(2)	(3)	(4)	(5)
13. The people who make the decisions that affect my job care about my wellbeing.	(1)	(2)	(3)	(4)	(5)
14. At times, I have felt ashamed of the choices I have made at work.	(1)	(2)	(3)	(4)	(5)
15. I am unhappy at work.	(1)	(2)	(3)	(4)	(5)
16. I feel depressed because of the suffering I see at work.	(1)	(2)	(3)	(4)	(5)
17. I am unhappy because I have observed health workers doing things that I believe are unethical.	(1)	(2)	(3)	(4)	(5)
18. My manager cares about my personal wellbeing.	(1)	(2)	(3)	(4)	(5)
19. My workload seems endless.	(1)	(2)	(3)	(4)	(5)
20. My workplace is an extremely harsh place to work.	(1)	(2)	(3)	(4)	(5)
21. I feel satisfied by my work in healthcare.	(1)	(2)	(3)	(4)	(5)
22. Because of my work, I have very little time for a personal life.	(1)	(2)	(3)	(4)	(5)
23. I have people who I can talk to about my struggles at work.	(1)	(2)	(3)	(4)	(5)
24. I believe I can make a difference through my work in healthcare.	(1)	(2)	(3)	(4)	(5)
25. I have close friends who support me in my work.	(1)	(2)	(3)	(4)	(5)
26. I avoid activities or situations that remind me of patients' suffering.	(1)	(2)	(3)	(4)	(5)
27. I am proud of what I can do to help.	(1)	(2)	(3)	(4)	(5)
28. I feel responsible that I have not always been able to help people.	(1)	(2)	(3)	(4)	(5)
29. My work exhausts me.	(1)	(2)	(3)	(4)	(5)
30. I feel that my work in healthcare makes the world a better place.	(1)	(2)	(3)	(4)	(5)

THE CENTER FOR VICTIMS OF TORTURE  
Center for Victims of Torture (CVT) (2021). Professional Quality of Life: Health Workers, Version 1. This tool may be freely copied or republished as long as the author is credited. No changes are made, and (c) it is not sold. Partially funded by the United States Government.

### Compassion Satisfaction and Perceived Support

- High scores demonstrate strengths

### Burnout, Secondary Traumatic Stress, Moral Distress

- High scores demonstrate vulnerabilities



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## The Buddy System

- Originally adopted by the military
- Now promoted by the National Institute of Occupational Safety and Health
  - <https://www.cdc.gov/vhf/ebola/pdf/buddy-system.pdf>
- “Buddies” support their partner’s safety and well-being in two main areas:
  - Personal safety (alert to personal hazards and stressors)
  - Resilience (manage stress to prevent burnout)

## Effective buddies do...

- Engage in active listening with their buddy
- Actively communicate with their buddy to understand their perspective
- Reach out to a buddy who may be struggling
- Offer help with practical needs or finding services
- Get help if they have reason to believe your buddy may be a threat to themselves or to others

*<https://www.cdc.gov/vhf/ebola/pdf/buddy-system.pdf>  
Accessed 8/1/2023*

## Effective buddies don't...

- Offer clinical diagnosis or treatment
- Take on the role of a therapist
- Pass judgment on people or decisions
- Pry or demand that a buddy discuss problems

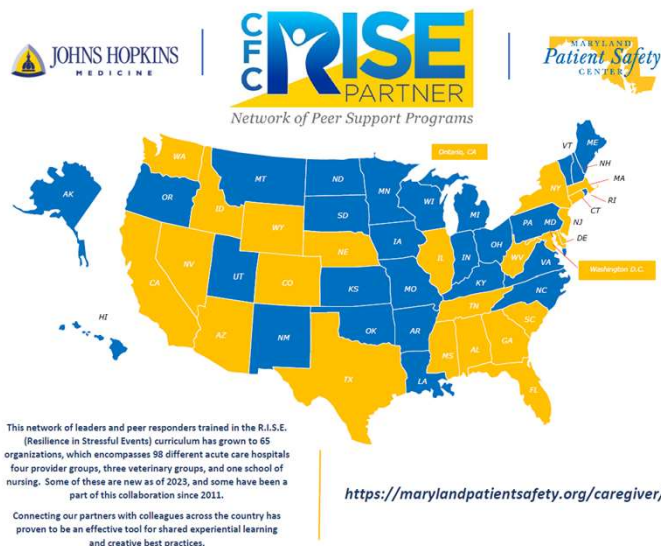
<https://www.cdc.gov/vhf/ebola/pdf/buddy-system.pdf>  
Accessed 8/1/2023

## Thinking Big: The RISE Program

### *Resilience in Stressful Events*

- RISE is a program of the Johns Hopkins University Health and the Armstrong Center for Patient Safety and Quality and the Maryland Patient Safety Center.
- Timely, confidential, non-judgmental **peer-to-peer support program** for employees who have experienced stressful events
- Open to **ALL** employees – not just clinicians

## Thinking Big: The RISE Program



## Thinking Big: The RISE Program

### *Resilience in Stressful Events*

- Example of a RISE intervention
  - Person in need reaches out through pager system or other platforms
  - Team of peer counselors on call 24/7
  - Initial response within 30 minutes, actual encounter same day
  - Peer counselor's job is to fully, actively listen and allow the person in need to tap into their own resiliency
    - *Don't judge, don't pry, don't try to "fix"*

## Getting a RISE Program Off the Ground

- Preparation Phase: Can take 6 – 18 months
  - Assess organizational staff needs
  - Engage key stakeholders
  - Form a workgroup and schedule regular meetings
  - Identify a coordinator (.3 - .5 FTEs)
  - Recruit and train responders
  - Internal marketing/awareness program

## Getting a RISE Program Off the Ground

- Action Phase
  - Market to all employees
  - Identify and respond to victims of stressful events
    - Create responders assignments
    - Create call system for responders
    - Track calls
  - Conduct regular debriefing meetings
    - Download after calls and learn from each case

## Getting a RISE Program Off the Ground

- Sustain and Maintain Phase
  - Continually communicate with and educate responders
  - Continue to engage with leaders and staff
  - Continue to generate awareness across the organization

## Financial Justification for RISE

- Implementation of the RISE Program has been shown to reduce turnover and excess time off
- 2017 study published in the Journal of Patient Safety reported that a large hospital (1,000 beds) could save \$1.8 million per year by implementing the RISE program
  - Based on savings from reduced nursing turnover minus cost of administering the program

Moran D, Wu A, Connors C, et al. Cost-Benefit Analysis of a Support Program for Nursing Staff. *J Patient Saf.* 2020 Dec;16(4):e250-e254.

## Tools and Resources

- Colorado Healthcare Ethics Resource
  - <https://cohcwcovidsupport.org/>
- Professional Quality of Life Scale for Health Workers
  - [https://img1.wsimg.com/blobby/go/dfc1e1a0-a1db-4456-9391-18746725179b/downloads/ProQOL%20Health%20-%20Ver%201\\_branded.pdf?ver=1690574904160](https://img1.wsimg.com/blobby/go/dfc1e1a0-a1db-4456-9391-18746725179b/downloads/ProQOL%20Health%20-%20Ver%201_branded.pdf?ver=1690574904160)
- Joint Commission Quick Safety Issue 54: Promoting psychosocial well-being of health care staff during crisis
  - <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-issue-54/>

## Tools and Resources

- Gratitude Practices
  - <https://healthy.iu.edu/doc/worklife/gratitude-practices1.pdf>