



# BURNOUT WEBINAR SERIES

MAY 1, 2019

IPM EASTERN



# ASSOCIATION OF CLINICIANS FOR THE UNDERSERVED

Access to Care & Clinician Support

Recruitment & Retention

National  
Health  
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Training

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# WHO WE ARE

## Association of Clinicians for the Underserved



Funded by HRSA's Bureau of Primary Health Care

# STAR<sup>2</sup> CENTER

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# WEBINAR HOUSEKEEPING

We are  
Recording

Ask  
Questions

Have Fun

# JOY IN WORK: PART 2

## *WHAT YOU NEED TO KNOW ABOUT EMPLOYEE SATISFACTION AND TURNOVER*

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CHIEF NURSE PRACTITIONER OFFICER

# INTRODUCTION



**Cheryl Fattibene**



# OUR PARTNERS IN THIS WORK



**NATIONAL CENTER for  
INTERPROFESSIONAL  
PRACTICE and EDUCATION**





# OBJECTIVES

- Recap of Part I: define burnout, recognize signs and impact, PCMH framework
- Identify techniques to address burnout: organizational and personal strategies
- Identify specific leadership strategies for moving beyond burnout using SMART goals and short PDSA cycles of change
- Use Improvement science to set aims, establish, develop and track changes in the work environment



# WHAT IS BURNOUT?

Burnout is a state of chronic stress that leads to:

- physical and emotional exhaustion
- cynicism and detachment
- feelings of ineffectiveness and lack of accomplishment



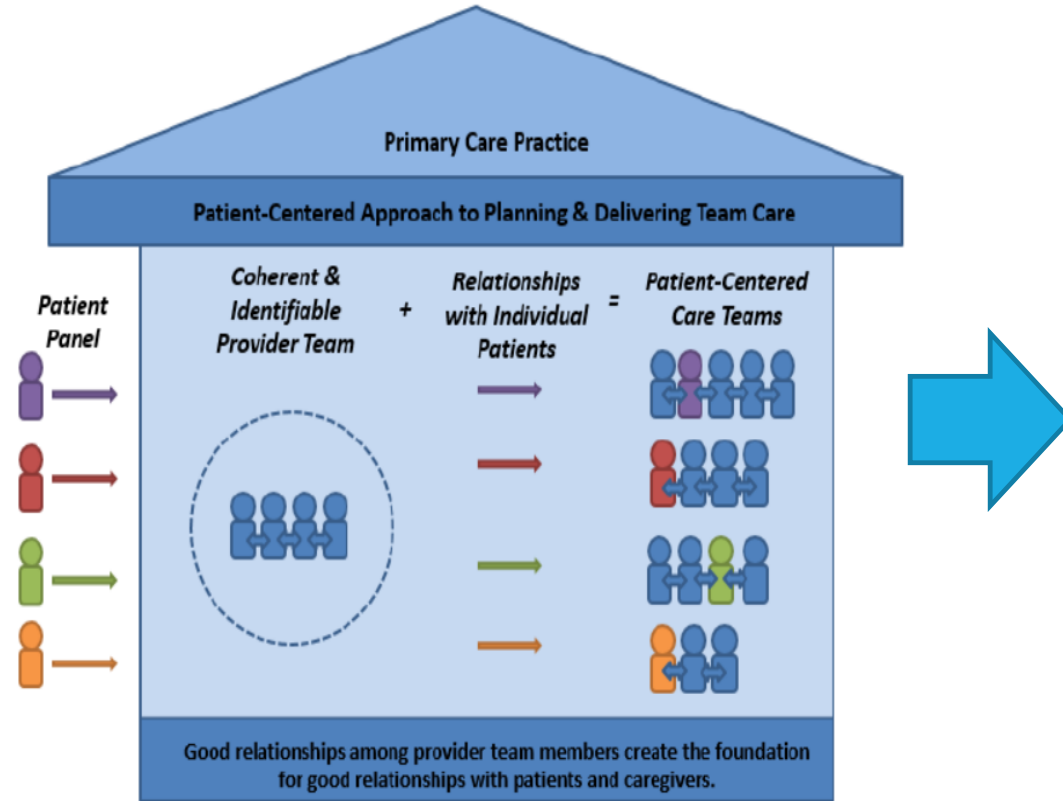
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# PCMH MODEL: ORGANIZATIONAL STRATEGY FOR MOVING BEYOND BURNOUT



# TEAM-BASED MODEL OF CARE

Figure 1. Conceptual blueprint for the provision of patient-centered team-based care



## NCQA Team-based Model of Care

1. Structure & Staff Responsibilities
2. External PCMH Collaborations
3. Patient/Family/Caregiver Involvement in Governance
4. Certified EHR System
5. Individual Patient Care Meetings/Communication
6. Involvement in Quality Improvement
7. Behavioral Health Care Manager
8. Medical Home Information

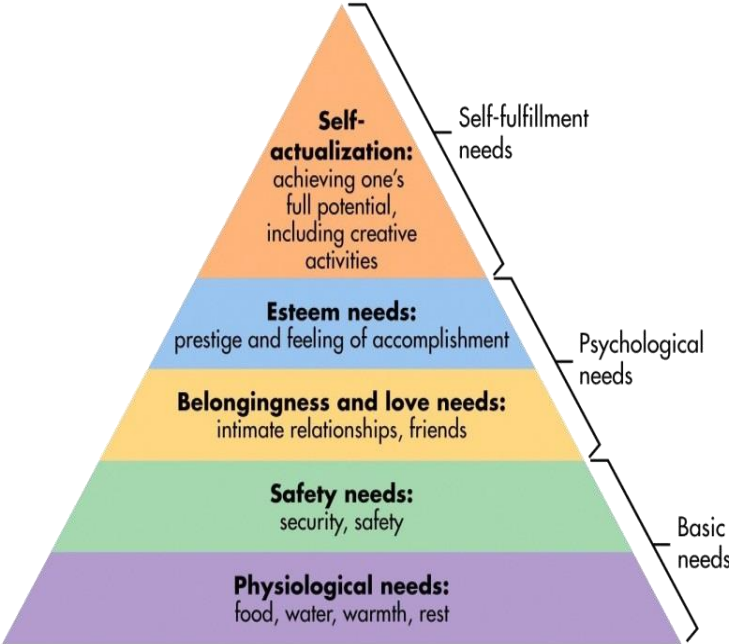


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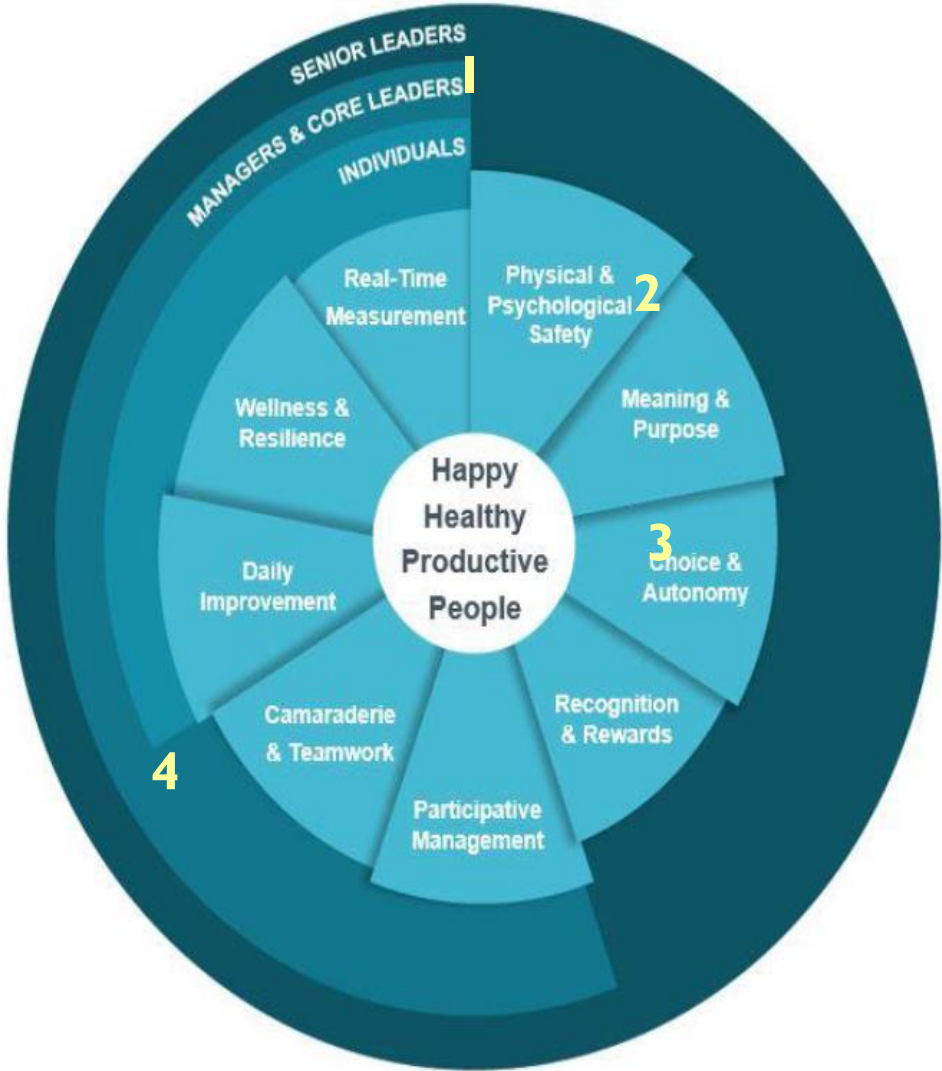
# PERSONAL STRATEGIES FOR MOVING BEYOND BURNOUT



Figure 2. IHI Framework for Improving Joy in Work



**Maslow's Hierarchy of Needs**



# DO A PERSONAL ASSESSMENT OF WELL-BEING

- Are you maintaining Maslow's hierarchy of needs?
- What is your passion?
- Are you doing what you love?
- What do you have the power to change?
- Where would you like to see yourself in the future?



# PROMOTE PERSONAL WELL-BEING

- Practice positive psychology
- Seek joy
- Honor your values
- Do what you love
- Assume best intentions
- Ergonomics evaluation
- Mindfulness
- Avoid cynicism
- Exercise
- Sleep
- Healthy eating





# TRUST AND SAFETY: THE BUILDING BLOCKS FOR CREATING A TEAM



- Participants were asked to stand at the base of a hill and estimate how steep the climb would be
- Hill appeared steeper to those alone than those accompanied by a friend
- Relationship quality mediated the effect (more supportive relationships worked better)

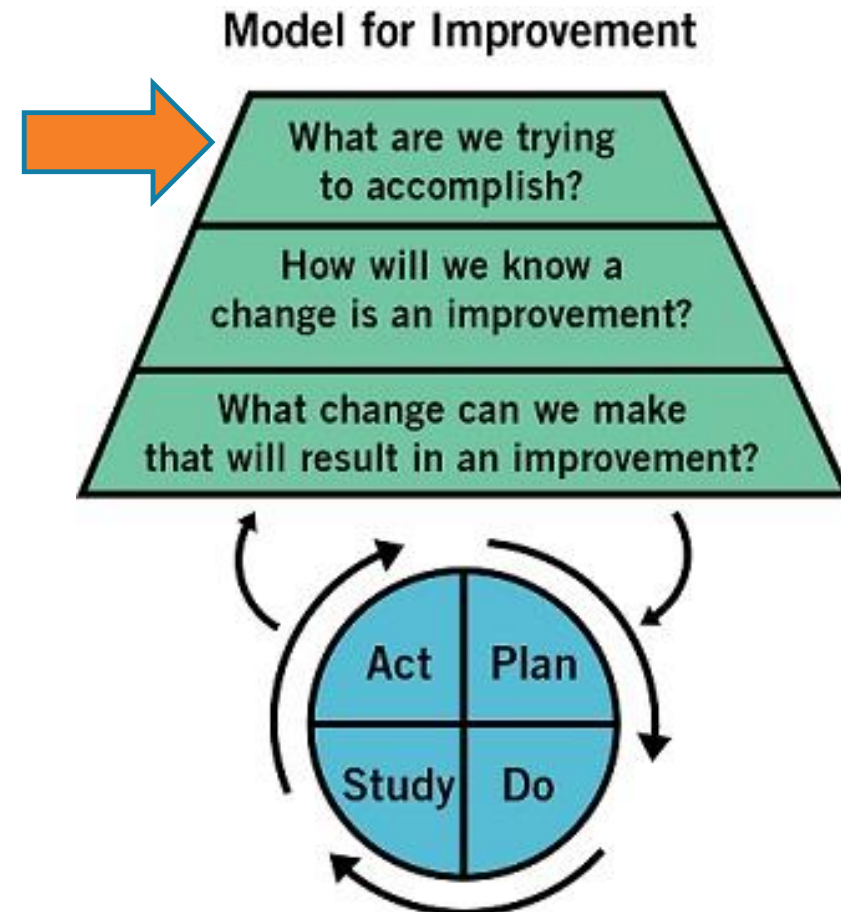
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# THE USE OF IMPROVEMENT SCIENCE TO CREATE CHANGE



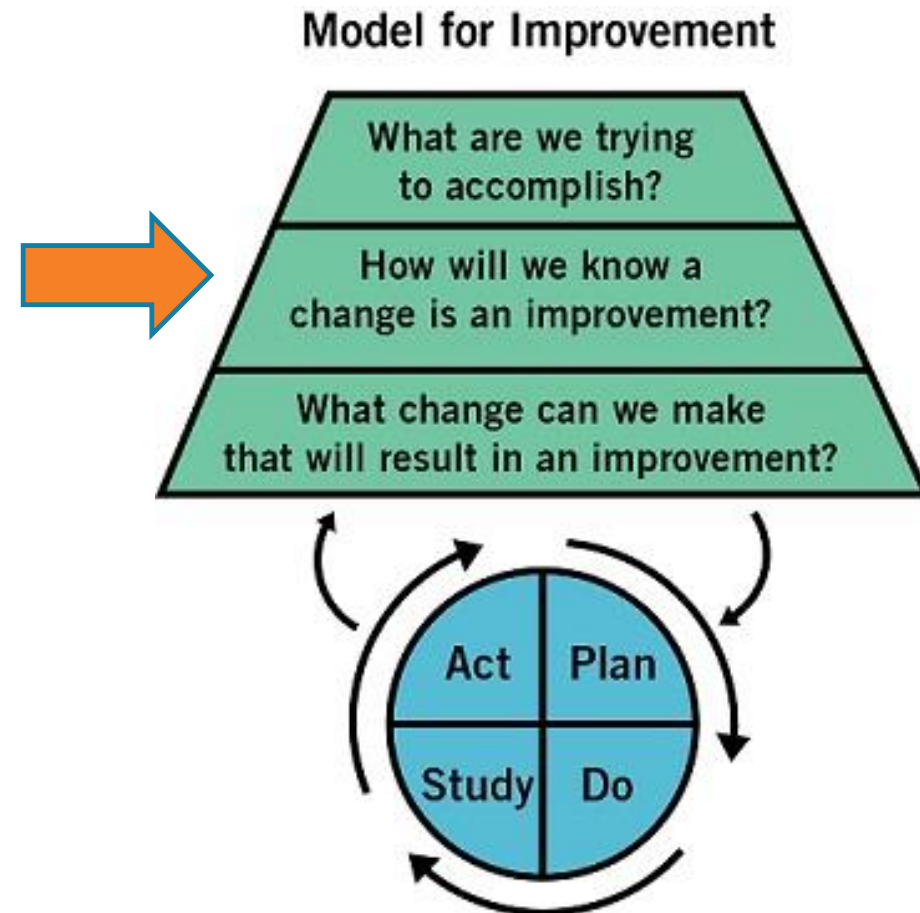
# STEPS FOR IMPROVEMENT: SET AN AIM

- How good?
- For whom?
- By when?



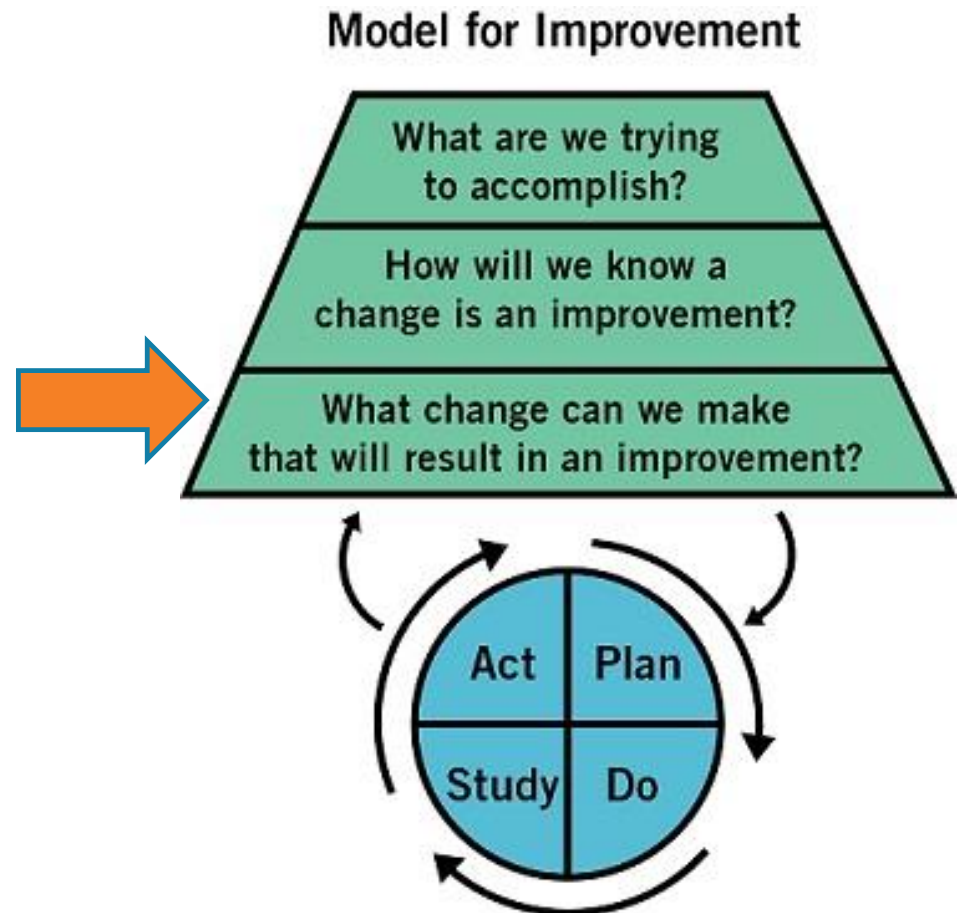
# ESTABLISH MEASURES TO TRACK

- Outcome measures
- Process measures
- Balancing measures



# DEVELOP CHANGES OVER TIME

- Process analysis tools
- Benchmarking
- Technological solutions
- Creative thinking
- Change concepts



# DO SMALL TESTS OF CHANGE OFTEN AND MAKE ADJUSTMENTS , REPEAT!

- Plan
  - Questions & predictions
  - Who/what/where/when?
- Do
  - Observe the test
  - Document results
- Study
  - Draw run charts
  - Analyze the data
- Act
  - Refine the change and plan for the next cycle



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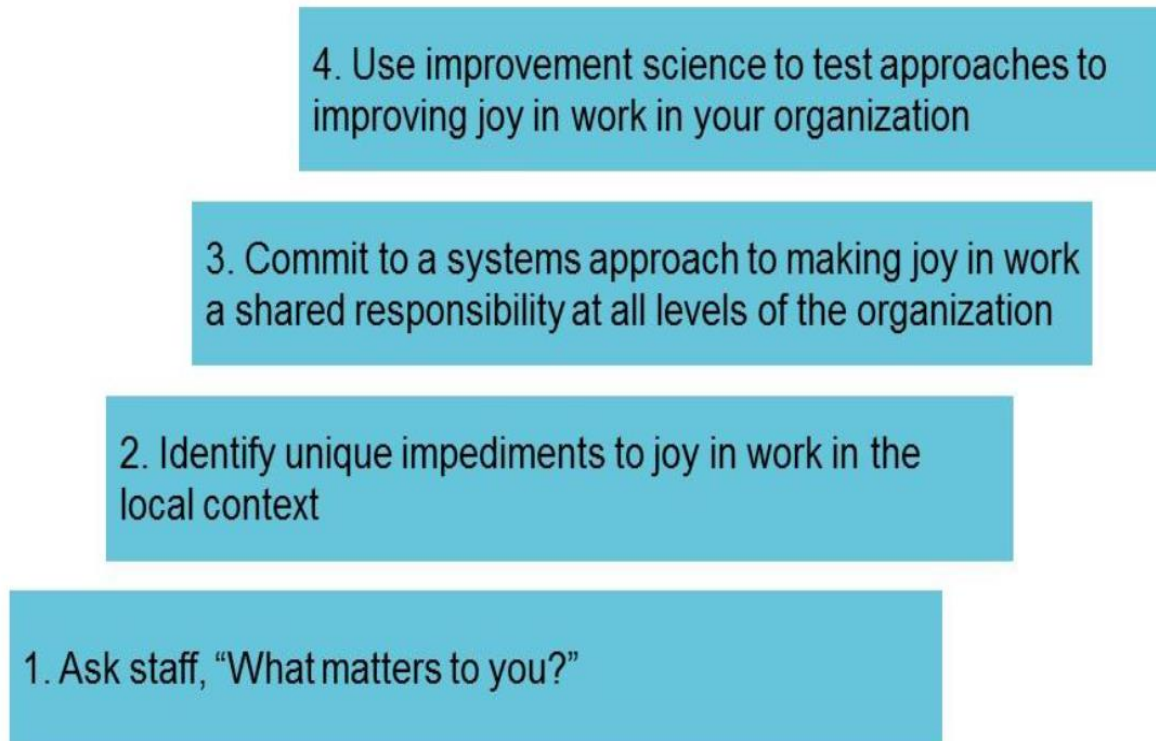
# LEADERSHIP STRATEGIES FOR MOVING BEYOND BURNOUT





# FINDING A PATH FORWARD

**Figure 1. Four Steps for Leaders**





# GETTING READY

- Prepare staff by using the “stay interview”
- Ensure leader capacity at all levels of the organization is engaged
- Ask for or designate a senior leader champion



# STEP 1. ASK STAFF, “WHAT KEEPS YOU HERE?”

## “Stay Interview”: one-on-one interviews with staff

- What opportunities for self-improvement would you like to have that go beyond your current role?
- What talents, interests or skills do you have that we haven't made the most of?
- What have you felt good about accomplishing in your job and in your time here?
- If you could change one thing about your job, team or company, what would it be?



## STEP 2. IDENTIFY UNIQUE IMPEDIMENTS TO JOY IN WORK IN THE LOCAL CONTEXT

- Build on “What matters?” to identify unique impediments that exist in daily work – the “pebbles in their shoes”.
- Set priorities and address them together

Steps 1 and 2 usually happen in the same conversation and continue over time.



## STEP 2. IDENTIFY UNIQUE IMPEDIMENTS TO JOY IN WORK IN THE LOCAL CONTEXT

### Examples to rollout...

1. Surveyed larger health setting of “what gets in the way?”
2. Gathered smaller group of *different* team member to use check marks to indicate “echoed” comments and to identify top priorities.

Created regular huddles, workgroups, or team meetings as forums for members to share “bright spots” and identify impediments.

1. Document and make the impediments visible, such as a “What Matters to You” communication board.
2. Post sticky notes that result from conversations.



## STEP 3. COMMIT TO A SYSTEMS APPROACH TO MAKING JOY IN WORK A SHARED RESPONSIBILITY

- Everyone has a role to play, but it's the job of leaders to make sure it gets done.
- Have a “champion” dedicated to ensure momentum and sustainability.

**Making a workplace joyful is the job of leaders and staff.**



## STEP 4. USE IMPROVEMENT SCIENCE TO TEST APPROACHES TO IMPROVING JOY IN

*“Improvement science focuses on systematically and rigorously exploring ‘what works’ to improve quality in healthcare and the best ways to measure and disseminate this to ensure positive change.”*

~ Health Foundation (2011)



# STEP 4. USE IMPROVEMENT SCIENCE TO TEST APPROACHES TO IMPROVING JOY IN WORK

## Key elements of improvement science

- Make sure the aim is clear and numerical (e.g. SMART)
- Start small and use data to refine successive tests
- Make sure the change idea works before spreading change
- Track results
- Improvement is participative and involves everyone: senior leaders, core leaders, individuals



# PRACTICAL STRATEGIES: SHARED MEASURABLE GOALS



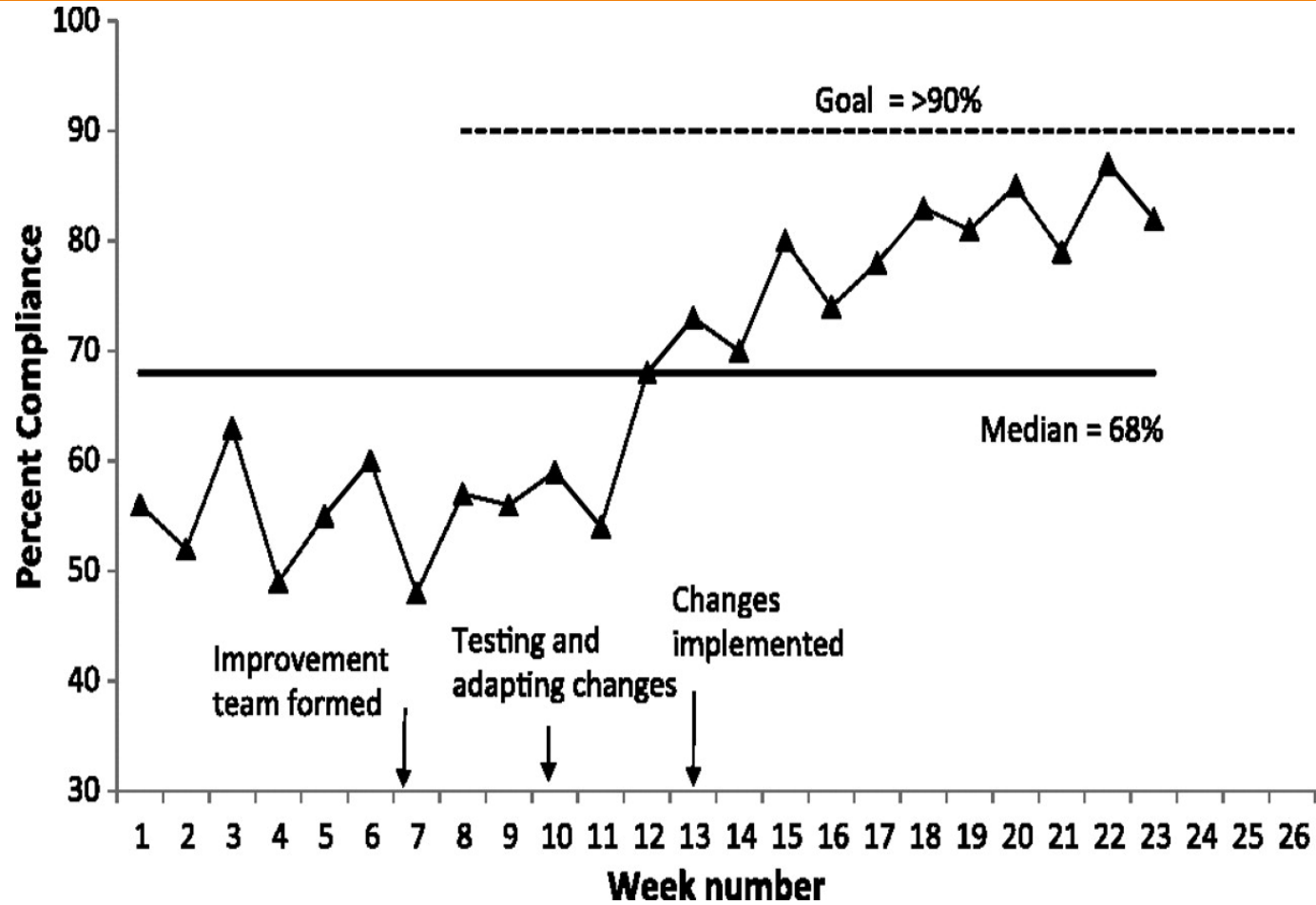
- Base goals on shared values and vision
- Use a SMART goals worksheet
- Match goals to your patient population
- Think broadly-engage all stakeholders in the goal setting process
- Use data you already have access to and track regularly (run charts)



Smart Goals	Goal #1	Goal #2
Specific (What , when, where and how?)		
Measurable (How will I measure it?)		
Attainable (Can I actually achieve this goal? )		
Realistic (Is this a realistic goal?)		
Timely (How often or when will goal be met?)		



# SAMPLE RUN CHART



# SUGGESTED CHANGES TO TRACK

1. Turnover
2. Absenteeism
3. Improved workflow
4. Staff and patient satisfaction scores
5. Improved time management
6. Decrease in provider errors
7. Improvement in specific quality metrics (eg. vaccine rates, no shows)
8. Numbers of prescriptions written



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# MEASURING JOY IN WORK



# MEASURING JOY IN WORK

## System-level measures

- Satisfaction, engagement, burnout, turnover, etc.

## Local level measures

- Occur more frequently (daily, weekly, or random)
- Can be tracked by staff themselves



# MEASURING JOY IN WORK: SURVEY TOOLS FOR A SYSTEM LEVEL APPROACH

System-level measures

- Net Promoter Score<sup>1</sup>
- \*Clinic Leadership Dimension Assessment<sup>2</sup>
- Safety Attitudes Questionnaire<sup>3</sup>
- \*AHRQ Safety Culture Surveys<sup>4</sup>
- Maslach Burnout Inventory<sup>5</sup>
- \*Mini Z Burnout Survey<sup>6</sup>

1. Reichheld FF. The one number you need to grow. *Harvard Business Review*. December 2003. <https://hbr.org/2003/12/the-one-number-you-need-to-grow>
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3. Sexton JB, Helmreich RL, Neilands TB, et al. The Safety Attitudes Questionnaire: Psychometric properties, benchmarking data, and emerging research. *BMC Health Services Research*. 2006 Apr;6:44
4. Agency for Healthcare Research and Quality. "Surveys on Patient Safety Culture." <https://www.ahrq.gov/professionals/quality-patient-safety/patientsafetyculture/index.html>
5. Maslach C, Jackson SE, Leiter M. *The Maslach Burnout Inventory Manual*. Palo Alto, CA: Consulting Psychologists Press; 1996
6. American Medical Association StepsForward. "Mini Z Burnout Survey." <https://www.stepsforward.org/modules/physician-burnout-survey>



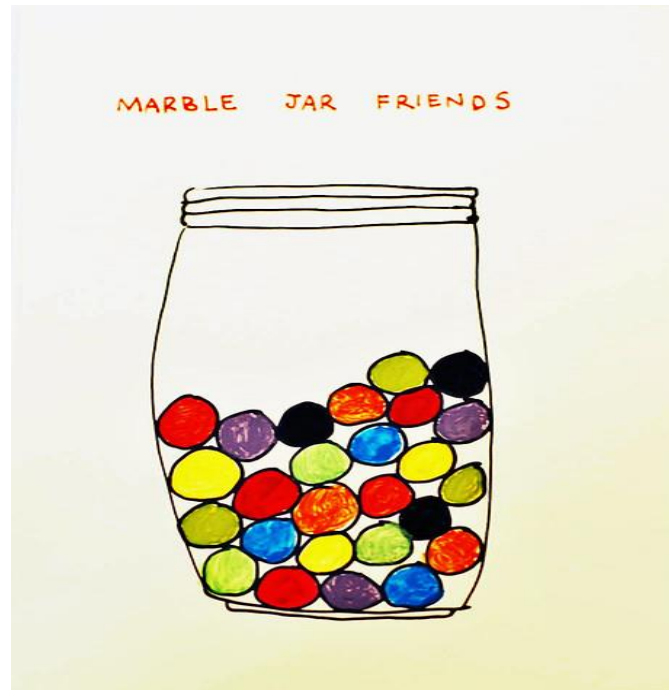
# MEASURING JOY IN WORK: LOCAL LEVEL SURVEY TOOLS

- Daily Visual Measure
- Three Questions Daily
- Pulse Survey



# MEASURING JOY IN WORK: DAILY VISUAL

- Daily Visual Measure



Local level measures



# MEASURING JOY IN WORK: THREE QUESTIONS

## Three Daily Questions:

- Am I treated with dignity and respect by everyone?
- Do I have what I need so I can make a contribution that gives meaning to my life?
- Am I recognized and thanked for what I do?



Leaders can use these questions as a basis for conversation in daily huddles or team meetings.



# MEASURING JOY IN WORK: PULSE SURVEY

- **Pulse Survey:** pulse surveys are short (10 questions or fewer) questionnaires on a 5-point Likert scale (“Strongly Agree” to “Strongly Disagree”) that are distributed monthly or quarterly (as opposed to annually).
- They provide the organization with frequent data to assess overall staff engagement and to see whether the efforts to improve joy in work are making a difference.

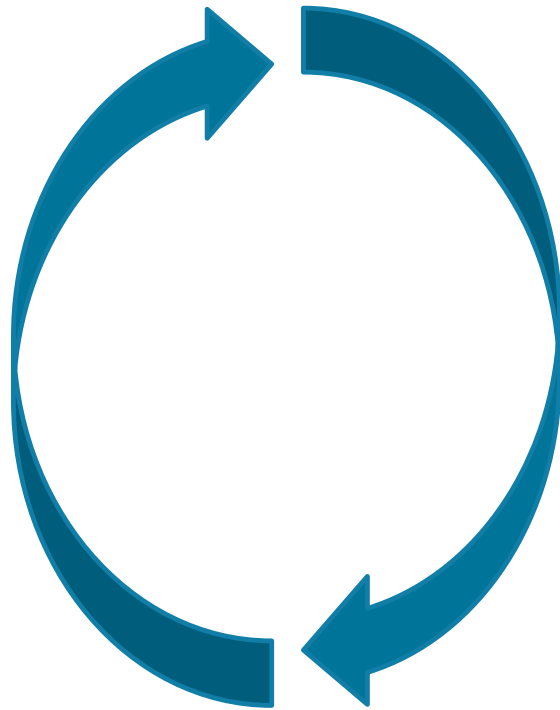


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# RECAP & CONCLUSION



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1. Burnout in healthcare is increasing at alarming rates, leading to: compromised patient safety; personal repercussions for clinicians and staff; and diminished bottom line for health settings.
2. Use of the Patient Centered Medical Home Model has protective factors to reduce burnout.
3. Improvement science drives maintenance and sustainability of employee engagement strategies used to address and reduce burnout.
4. Use both local and system level approaches/tools to assess the workplace and staff for maximal success in change management.



# THINGS TO CONSIDER TO MOVE BEYOND BURNOUT AND BACK TO “JOY”

- Organizational Strategies:
  - Team based care: move towards an inclusive team based care model/PHMH framework.
  - Work with your CQI/QI team; Identify at least 1 systemic and 1 local level quality metric being followed by your health center/team now that applies to improving patient or staff satisfaction
  - Create a SMART goal to address that QI metric with input from leadership and staff
  - Do 1 PDSA cycle on this issue (no more than 1-2 weeks). Bring results back to staff and leadership. If little or no change, change new strategy, SMART goals and redo .
  - Recommend use of the “Stay Interview” to leadership in additional to the Exit Interview.
- Personal Strategies:
  - Identify one “self-care” strategy and practice it weekly.
  - Keep a gratitude journal.
  - Identify one change that would bring back the “joy in work” for you personally and create a SMART goal to measure success. Conduct your own PDSA cycle to look for change.





# Questions





# CONTACT US!



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**THANK YOU!**

