Burnout: From Wildfire to Flame

Presenters: Carolyn Trumper, Emma Folz

Facilitators: Runell Viray, Sandra Owen

@CCHL_CCLS   #CWHLC2023
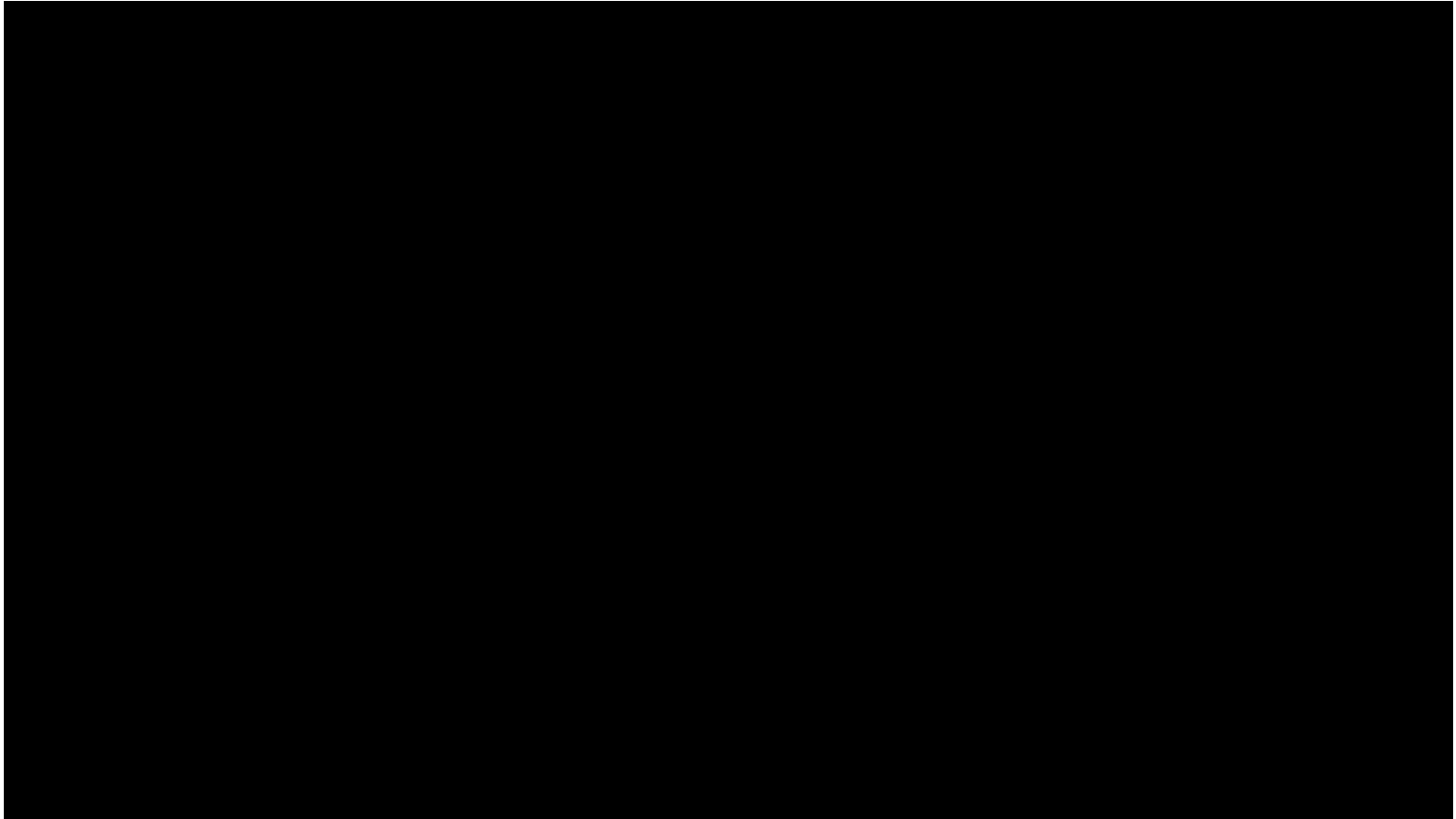
Burnout – Definition

Exhaustion

Energy Depletion

Feeling Negative Towards Career

Reduced Professional Productivity

World Health Organization - Burn-out an "occupational phenomenon": International Classification of Diseases (who.int)

Recommendations to Executive

Caring for people who care for people

Acknowledge

Measure

Our People
Improving How We Work

Our Leaders
Leading Self and Others

Our People for Our Patients:

Organizational Approaches for Tackling Burnout

Alberta Health Services

Wonder Garden – Where Innovation Grows
Emma Folz, Dr. Sarah Hall, Sandra Owen,
Carolyn Trumper, Runell Viray. 2022

Early Work - One Team's Journey

Acknowledged – Message from Leadership

Measured Burnout – MBI Survey*

Facilitated Discussions

Co-Designing Solutions

*Maslach, C., Jackson, S.E.,Leiter, M.P.(c 1986 - 2018).Maslach Burnout Inventory Manual 4th Edition. Mind and Garden Inc.

MBI Survey – Leaders and Program

LEADERS' RESULTS

MBI	RESULT
Burnt Out (Exhaustion, Cynicism)	45.4%
Overextended (Exhaustion)	32.2%
Ineffective (Personal Efficacy)	7.2%
Disengaged (Cynicism)	0%
Engaged	15.1 %

PROGRAM RESULTS

MBI	Rural Acute	Regional Hospital	AMH/ Public Health	Continuing Care
Burnout	47.4	50	41.5	45.1
Exhaustion	23.7	27.3	36.6	37.3
Ineffective	7.9	4.5	9.8	5.9
Disengaged	0	0	0	0
Engaged	21.1	18.2	12.2	11.8

Institutional interventions are more powerful than individual ones and show greater effectiveness in improving burnout

IHI (2021) – Factors that Drive Joy at Work

1. **Physical and phycological safety**

2. Recognition and reward

3. Meaning and purpose

4. Choice and autonomy

5. Participative management

6. Camaraderie and teamwork

7. Daily improvement

8. Realtime measurement

9. Wellness and resilience

Devon Partnership NHS
NHS Trust
Supporting you to live well

Joy in Work

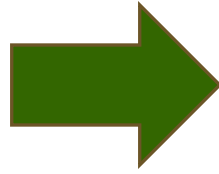# Lead Self and Others

Use Organization's Resources

Trauma Informed Leader

Leader Rounding

Change the Conversation

Group Activity: From Wildfire to Flame

Factors Contributing to Burnout

Societal and Cultural	Health Care system	Organizational	Workplace and Learning Environment
Politicization of science and public health	Limitations from provincial legislation and regulation	Lack of leadership support Biased and discriminatory structures and practices	Limited flexibility , autonomy and voice Lack of a culture of collaboration and vulnerability
Structured racism and health inequities	Misaligned reimbursement policies	Disconnect between values and key decisions	Limited time with patients and colleagues
Mental health stigma Health misinformation	Burdensome administrative paperwork	Excessive workload and work hours	Absence of focus on HCW well being
Unrealistic expectations of HCW	Poor care coordination Lack of human centered technology	Barriers to mental health and substance abuse care	Harassment, violence and discrimination

US Surgeon General 2022

Consequences of Burnout to an Organization

....

Early retirement	Travel nurses	Delayed procedures	Delayed treatments
Decreasing FTE	Increased workplace violence from public	Rural healthcare Conservation of Resources model	Closed beds Increase staffing turnover
HCW leaving professions	Continuing Care loss of 15% of total workforce	Access to care challenges in urban and rural	Closed departments
Increased sick time	Increased absences and disability claims	Patient Safety	Increased staffing costs

TRIZ Exercise – Creative Destruction

A Liberating Structure

STEP 01

Ask the group to...

"Make a list of all you can do to make sure that you achieve the worst result imaginable with respect to decreasing burnout in your organization

STEP 02

Go down the list and ask...

"Is there anything that we are currently doing that in any way resembles this item?."
Make a 2nd list of all the counter-productive activities identified.

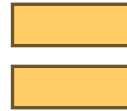*(Tip – brutal honesty is required when developing 2nd list)*

STEP 03

Go through the items on the 2nd list...

Support the team in deciding what first steps will help them stop they know creates undesirable results.
Prioritize the teams' actions based on impact and effort.

Sharing Ideas

Acknowledgements

- AHS Sponsors:
  - Executive: Sean Chilton, Dr. Francois Belanger
  - Project: Mona Sikal, Dr. Mircea Fagarasanu, Dr. Sharron Spicer, Jennifer Yelland
- AHS Design Lab
  - Joshua McCutcheon
  - Mark Yiu
- Photo Credits
  - Dr. Heather Patterson Instagram
    @heather.l.Patterson
  - AHS Health and Business Plan
  - AHS Our People Story Booklet
  - AHS Our People Strategy 2.0

Burnout: From Wildfire to Flame

Questions?

References

1 . Rehder, K., Adair, K. C., & Sexton, J. B. (2021). The Science of Health Care Worker Burnout: Assessing and Improving Health Care Worker Well-Being. Archives of Pathology & Laboratory Medicine, 145(9), 1095–1109.

2. Kelly, L. A., Gee, P. M., & Butler, R. J. (2021). Impact of nurse burnout on organizational and position turnover. Nursing Outlook, 69(1), 96–102.

3. Sexton, J. B., Adair, K. C., Leonard, M. W., Frankel, T. C., Proulx, J., Watson, S. R., Magnus, B., Bogan, B., Jamal, M., Schwendimann, R., & Frankel, A. S. (2018). Providing feedback following Leadership WalkRounds is associated with better patient safety culture, higher employee engagement and lower burnout. BMJ Quality and Safety, 27(4), 261–270.

4. Maslach, C., Jackson, S.E.,Leiter, M.P.(c 1986 - 2018).Maslach Burnout Inventory Manual 4th Edition. Mind and Garden Inc.

5. U.S. Surgeon General (2022). Addressing Health Worker Burnout: the U.S. Surgeon General's Advisory on Building a Thriving Health Workforce, 1-76.

6. Howell, B. A. M. (2021). Battling Burnout at the Frontlines of Health Care Amid COVID-19. AACN Advanced Critical Care, 32(2), 195–203. https://doi.org/10.4037/AACNACC2021454

References

7. Wong, A. H., Sabounchi, N. S., Roncallo, H. R., Ray, J. M., & Heckmann, R. (2022). A qualitative system dynamics model for effects of workplace violence and clinician burnout on agitation management in the emergency department. BMC Health Services Research, 22(1), 1–12. 6.

8. Bayliss, A. (2019). Commentary: An investigation into the relationships between bullying, discrimination, burnout and patient safety in nurses and midwives: Is burnout a mediator? [References].

9.Godfrey, C., Rodgers, J., GC, P., Alsius, A., Ross-WHite, A., Belin, S., & Sears, K. (2021). Healthcare Provider Burnout: A Rapid Scoping Review. SPOR Evidence Alliance.

10. Perlo J, Balik B, Swensen S, et al. Joy at Work. Cambridge, MA: Institute for Healthcare Improvement; 2017.

11. Garcia, C. de L., Abreu, L. C. de, Ramos, J. L. S., Castro, C. F. D. de, Smiderle, F. R. N., Santos, J. A. Dos, & Bezerra, I. M. P. (2019). Influence of Burnout on Patient Safety: Systematic Review and Meta-Analysis. In Medicina (Kaunas, Lithuania).