

### **Disclosures**

None

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## **Learning Objectives**

- ldentify the factors that impact professional quality of life and wellbeing
- Define key terms, examine the literature, and describe the effects on healthcare workers
- Describe evidence-informed practices for active stress management and recovery

### Who Am I?

- Daughter to a hospital/retail pharmacist
- Pediatric Intensivist
- Associate Program Director of Professional Development and Wellbeing for Pediatric Residency and PICU Fellowship
- Recovering Perfectionist
- Aspiring podcaster
- Advocate, speaker, and writer on clinician mental health
- Amateur chef, pianist, and bibliophile
- Wife and mom to one human and one dog

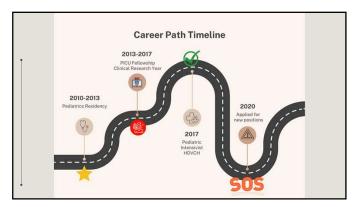


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Approximately 50% of all helping professionals are experiencing some form of significant distress that results from their work.

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Before you can lead others, Before you can help others, You have to discover yourself. -Daniel Goleman



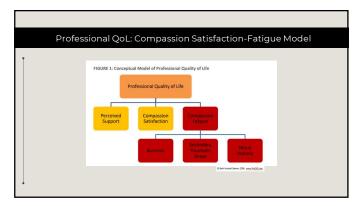
# Open Self Information about yourself that you and others know. Hidden Self Information you don't know but others know about you. Unknown Self Information you know about yourself that neither you or others know.

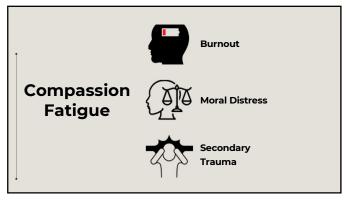
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# Causes of my early career burnout Lack of mentorship and development Didn't understand my own values, purpose, and growth opportunities Lack of boundaries Poor self-care practices Perfectionism







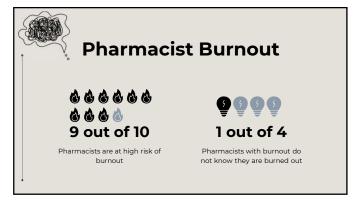


## Chronic occupational distress characterized by:

**Burnout** 

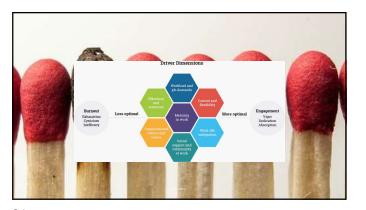
emotional exhaustion feelings of depersonalization career dissatisfaction

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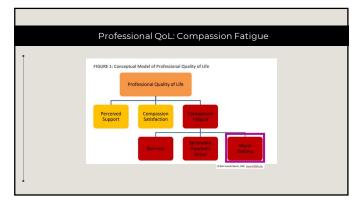


PROFESSIONAL QUALITY OF LIFE SCALE FOR H  As a health worker working in difficult frumentation or pandems status the lives of your potients and enterciacles. As you want have found, you can lifted you in potien and negative ways, fellow are some statement health works, both possible and negative.	ons, you r compa	have d	rect cor	you help		
Consider each statement about your <u>gearnet week allhaetion</u> . Or cle the number that most accurately effects how trequently you have experienced that which just the IEEE 85 899.	1	1	1	1	1	
1, Lam happy that I choose to work in healthcare.	(15)	(2)	- (3)	141	1881	
2. At times I have had to do things that go against my personal values.	(1)	(Q1	(1)	(4)	(5)	
3. Security of my work, I have unwanted, districting thoughts.	(33)	(2)	030	(4)	(20	
4. These seen things at early that I believe to be morally errorg.	(1)	(2)	(30)	(4)	(5)	
5. I feet supported by my colleagues.	(1)	(2)	(3)	10]	(5)	
6. I feel energical by working with my agriculta-	(1)	(2)	(3)	141	01	
It is after find myself thinking about my patients when I am with my family.	(3)	(2)	0 (N)	(4)	(3)	
8. Administrative procedures and rules make my lob too hard.	(3)	(2)	(3)	14)	OIL	
At times, I have been unable to provide the care that I believe should:     New been provided.	(1)	(2)	(1)	(1)	(5)	
30. I think that I have been affected by the suffering I see at work.	(3)	(2)	(3)	(4)	(3)	(-)[-1]-1
3.5. My family supports me in my work in healthcare.	(0)	(2)	Other	(4)	01-1	
12. Recipies of the work, 1 feet arratous about many things.	(1)	623	(3)	143	CD	MOTOR NO. 40770
13. The people who make the docume that affect my job care about my selflering.	(1)	(2)	111	(4)	(1)	2000 Table
14. At times, I have felt ashamed of the choices I have made at work.	(3.)	(2)	(3)	(4)	(3)	1707414487
15.1 em unhappy at work.	(1)	(2)	Ott	[4]	Cit - 1	
26. I feet decreased because of the suffering I see at work.	(1)	(2)	(3)	161	(S)	Control Colored
<ol> <li>I am unhappy because I have observed health workers doing things that I believe are unethical.</li> </ol>	(1)	(2)	(1)	[0]	(5)	(E) (7 - C-2)
18. My manager cares about my personal wellbeing.	(3)	(2)	(3)	(4)	(5)	
25. My workload seems endiess.	(0)	(2)	(8)	[4]	CH	www.ProQOLorg
20. My workplace is an entremely harsh place to work.	(13)	(2)	(1)	(4)	(5)	
23.1 feet satisfied by my work in healthcare.	(1)	523	CN1	(14)	(3)	
22. Recipuse of my work, I have very little time for experional life.	(3)	(2)	(30)	(4)	D1	
23. I have people who I can talk to about my structure at work.	(0)	CDS	(0)	10	(3)	
24.1 belong I can make a difference through my work in healthcare.	(33)	(21	(3)	101	(3)	
25. I have close throats who support me in my work.	GI	623	00	10	(3)	
26. I avoid activities or situations that remind me of patients' suffering.	(33)	Q1	(3)	(4)	(3)	
27. I am proud of what I can do to help.	(0)	(2)	CB	(4)	Cit	
28. I feel responsible that I have not always been able to help people.	11.1	(2)	(3)	161	0)	
25. My work exhausts me.	G3.	(2)	<.00	141	(0)	
30. I first that my work in healthcare makes the world a better place.	(1)	(2)	(3)	(4)	(3)	
Tour CONTROL Of Control in Nation of The Internal (COS) (2002) In Advanced Quarter (COS) (2002) In		Moreon of	Per nor her self.			

# Burnout manifests in individuals, but it's fundamentally rooted in systems. Dr. Vivek Murthy Surgeon General of the United States







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## Moral Distress (Injury)

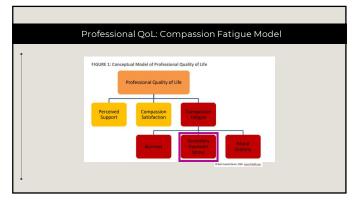
Impact of perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations

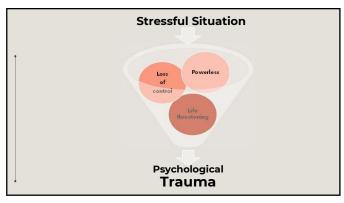
Psychological, biological, spiritual, behavioral and social

Distinguishing features: shame, guilt, feeling betrayed

Can be other-induced or self-induced







### **Secondary Trauma**

Indirect exposure to trauma through a firsthand account or narrative of a traumatic event

Also called "Vicarious Trauma"

Still called "Compassion Fatigue" in some literature

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	"Dose" of exposure – more patients / type of work
Risk	Socially or professionally isolated
factors for	Feel professionally compromised due to inadequate training
secondary	Fewer years in field
traumatic	Younger age
stress	Gender (women report more often)
	History of personal trauma
	Bride, B.E., Hatcher, S.S., & Humble, M.N. (2009).

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### **Eustress**

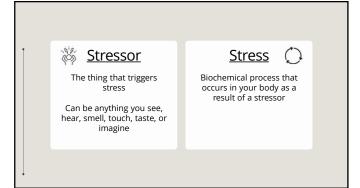
Positive form of stress that results in improvements in:

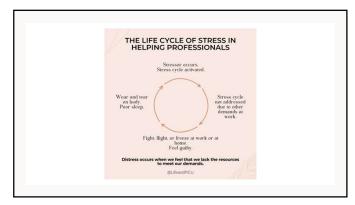
-health -motivation -performance

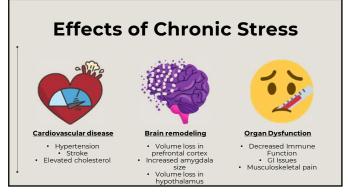
### **Distress**

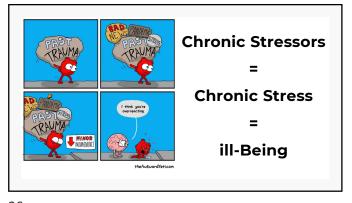
Negative form of psychological stress that people usually mean when they say "stress"

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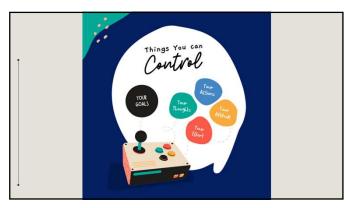
WELLNESS
IS NOT A
STATE OF
BEING.
IT'S A STATE OF
ACTION.

EMILY AND AMELIA NACOSK!
'BURNOUT'

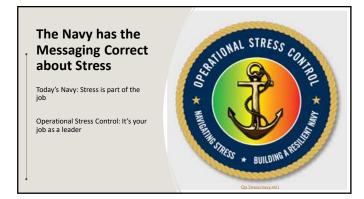
"Wellbeing = the active pursuit of activities, choices and lifestyles that lead to a state of holistic health."

Global Wellness Institute

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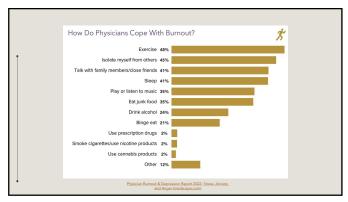


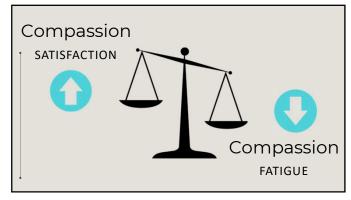
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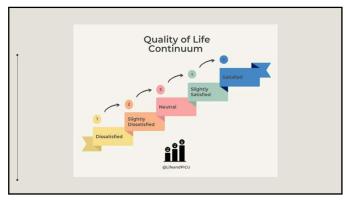


	n of Stress Mo			a is different ways. The
lights, and red a	s stop and remove fro the yellow and orang	om the source of tra ge zones, it may be	iuma. By intervening	
STAFF RESPONSE	READY	REACTING	INJURY	ILL
CONTRIBUTING FACTORS	Health maintenance and energy management	Any stress	Life threat, major loss, exhaustion	moral distress, severe
DESCRIPTION	Well-being and optimal functioning	Mild and transient stress or loss of function	More severe & pensistent distress or loss of function	Clinical mental disorders (e.g., posttraumatic stress disorder, depression) or unhealed stress injuries
FEATURES	Physically, mentally, and spiritually fit	Feeling imitable, anxious, down; loss of focus or motivation, trouble sleeping	Excessive guilt, sharne, blame; panic; loss of control over emotions; misconduct	Persistent symptoms that worsen over time: severe distress or social/occupational impairment
SUPPORT OPTIONS	Prevention: maintain self-care and resiliency practices	Peer support, psychological first aid or brief counseling	Brief professional mental health treatment and time off for recovery	Extended professional mental health treatment and time off for recovery
Continuum Model op stressaspx <sup>11</sup>		s, 2021. https://www.n	ned.navy.mil/sites/nmcp	rs in Distress: The Stress hc/Documents/LGuide/





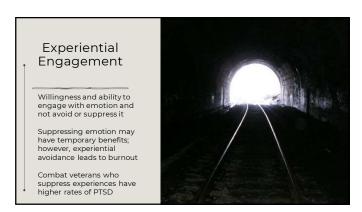




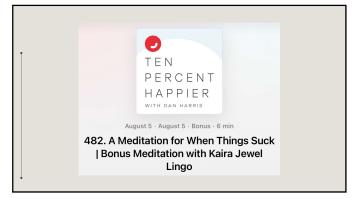














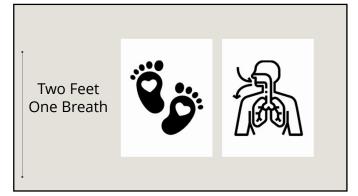
### Parasympathetic Recovery

Recognizing stress *in the moment* and intentionally activating a state of regulation to interrupt or complete the cycle

Countering the sympathetic response that arises in response to a stressor

**Brief** moment of mindfulness within the workday (**microbreak**)

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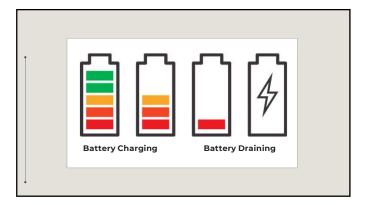


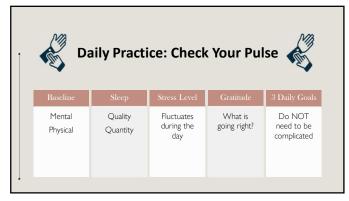
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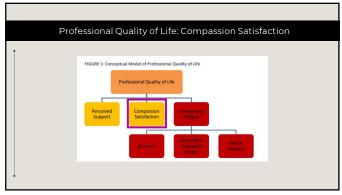


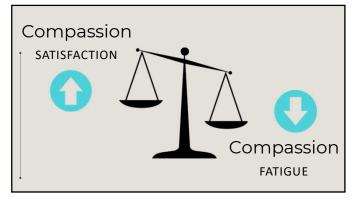




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#### **Operationalizing Active Stress** Management in Medicine Parasympathetic Experiential Recovery **Engagement** • Wellness Week Emails: Debriefs **Breathing exercises** • Didactics: Grief + shame Pet therapy curriculum, Schwartz • Social events (bonus = rounds with movement outside) · Social events: Women's Food with friends book club











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### Summary

Workplace distress is common and can result from chronic, unaddressed stress caused by secondary trauma and moral injury.

Systemic change is needed to address burnout.

Stress is a cycle that must be completed.  $\,$ 

Incorporating quick practices and microbreaks into our day can help us complete the cycle and prevent getting stuck in chronic stress.

If you feel stuck, reach out for help.

If you see someone struggling, reach out to help if you can. Otherwise, direct them to resources.



