

CAREGIVER BURNOUT CONSORTIUM

The [Limeade Institute](#), in partnership with several healthcare organizations co-created the Caregiver Burnout Consortium to discuss new research, present case studies and share best practices around tackling employee burnout. All healthcare groups are welcome to join the series of quarterly webinars.

Foster a Culture of Change – Improve Resilience & Well-being

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OUR EXPERTS



Perry Gee, Ph.D., RN
Nurse Scientist
Dignity Health



Larita Howard
HR Manager
Dignity Health



Laura Hamill, Ph.D
Chief Science Officer
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HOW WE DEFINE BURNOUT

Burnout happens when a highly engaged employee begins to have low well-being without any support from their manager or organization. Caregivers tend to be at the intersection of feeling engaged and mission-driven but also over-stressed and under-supported. They are at risk for burnout, which leads to exhaustion, cynicism, inefficacy and poor patient care.

PART 1: NURSE BURNOUT IS A PROBLEM

Perry Gee, Ph.D., RN, Dignity Health Nurse Scientist

How big is the problem of nurse burnout?

A [large multi-state study](#) of 95,499 nurses showed:

- > 40% of hospital nurses reported burnout
 - 50% said they go home emotionally exhausted
 - 2 in 3 have problems sleeping
 - 1 in 4 may be clinically depressed
- (McHugh, Kutney-Lee, Cimiotti, Sloane, & Aiken, 2011)

Nurse Burnout Symptoms

Burnout is known as a “silent epidemic” and symptoms include:

- “Work behaviors and attitudes become negative in response to job strain” (Li et al., 2014)
- “Cynicism and ineffectiveness that is produced from the interplay of *individual and system factors*” (Lindell & Rushton, 2001)
- Depersonalization
- Emotional exhaustion
- Low sense of accomplishment
- Discrepancy between the ideals of the employee and the actual requirements of the job
- Nurse leaders may also experience the symptoms listed above but they impact the nurses who care for patients on the unit

(Moss et al., 2016)

Burnout Impact on Patients:

- Significant association between infections and nurse burnout N=7076 (Cimiotti, Aiken, Sloane, & Wu, 2012)
- Association between burnout and mortality and patient safety N=1425 (Welp, Meier, & Manser, 2014)
- Higher patient care loads lead to higher hospital re-admission rates (Tubbs-Cooley et al., 2013)

RESILIENCE IS AN ANTIDOTE FOR BURNOUT

Resilience is the ability to bounce back; adapting to stress or adversity; maintaining well-being in high levels of disruption.

What do we know about resilient nurses?

Resilience:

- Reduces emotional exhaustion (Rushton et al, 2015)
- Increases hope and decreases stress (Rushton et al, 2015)

- Resilient nurses have better focus and are more engaged (Sergeant & Laws-Chapman, 2012)
- Resilience can be modified or increased in nurses (Fredrickson et al, 2013)
- Development of resilience is based on a “synergy” between person and environment (Gillepsie, 2009)
- Resilience is associated with a reduction in nurse burnout, turnover and emotional exhaustion (Grafton, Gillespie, & Henderson, 2010; Mealer et al., 2012)

A key challenge for health professionals is striving for balance. Personal resilience coupled with a healthy workplace can lead to increased sense of purpose at work, control over practice, connection with others, a hopeful work environment and in turn, better patient care. Lack of hope is related to increased burnout risk.

Things to do now to foster resilience and refuel your workforce:

- **Mindfulness** — try an app like *Simply Being: Guided Meditation* or *Calm*, take a course, ask your chaplain for ways to implement mindfulness into your daily routine
- **Gratitude journaling** — daily or weekly, write down 3 things you’re thankful for
- **Make connections** — take a walk with a fellow practitioner, spend breacktime with others, start a 2-minute “nurse huddle” before each shift

PART 3: Q&A WITH LARITA HOWARD, HR MANAGER, DIGNITY HEALTH

Q: Why did Dignity Health decide to invest in an employee well-being and engagement program that includes ways to prevent burnout?

- Our biggest asset is our employees. As Dr. Gee mentioned, the cost for burnout is into the millions and has a direct impact on patient safety, injuries, patient satisfaction, and our level of professionalism. We did not want to build a program that only focused on the physical aspect of our employees, but a program that addressed the employee as whole. We expect our employees to bring not just their physical self to work but their whole self. This was no “lip service” initiative, we wanted to make sure employees knew that we authentically cared about them and their families as a whole. When employees know that we authentically care about them, then they will care about the organization, provide better patient care, and feel empowered to reach their full potential.

Q: Could you describe the approach you are taking to address issues like burnout and improve the employee experience, especially for caregivers?

- I’ve had the opportunity to not only partner with Dr. Hamill to bring more awareness to our leaders and provide a baseline as to where we were from a burnout perspective. I’m also

currently collaborating with our internal stakeholders at the corporate level such as Perry Gee, and corporate Learning & Organizational Development team to develop training and resources to help identify early signs of burnout.

Our *Personal Best* online well-being and employee engagement program is only one component of our employee engagement ecosystem. We have begun to partner with both internal and external partners in an effort to create best practices for both our caregivers and employees. We're also working to expand our efforts by creating an action-oriented approach through onsite training and adding hands-on learning curriculums to create engagement and connection as we address burnout. In fact, one of the pilot programs that is in the early stages is "Resilience for Leaders."

Q: Which aspects of this approach have worked the best?

- Collaboration and Stewardship are core values for Dignity Health. No particular person/department will have all the answers, but when we work together and partner on supporting the bigger goal, we can move mountains. I feel privileged to work with such a diverse group of talented individuals throughout our entire organization sharing the same goal and mission for our employees. So, it makes the work not just meaningful, but also fulfilling.

Q: Which aspects of this approach have not worked as well?

- Unknown silos. As with many organizations, silos aren't always intentional nonetheless they exist. I correlate this to the right hand not knowing what the left hand is doing. Solution: Get in front of the work that you're doing so that others can see your vision and know the "WHY". Attend leadership and operations meetings — use every opportunity available to talk about the vision and work that you're doing. You may be pleasantly surprised that other departments share your vision and might be working towards something similar. This is the perfect opportunity to build a focus group or help in leading a team toward meeting organizational goals.

Q: What are the biggest lessons you have learned from your work in this space?

- Bring your sense of humor, you're going to need it!
- Lifestyle changes do not happen overnight, so try not to focus on immediate ROI, but on outcomes. This is what helps set appropriate expectations but also enables you to focus better on short-term and long-term goals, and allows you to celebrate the small wins.
- Employees do not get burned out overnight, it occurs over time. So the more practical you are with what this change looks like the more realistic your goals will be.

Q: What's next for your work at Dignity Health?

- We are in the early stages of creating a **Well-being for Leaders Program** (from C-suite to front line), specially designed to support the well-being of our leaders, so that they can better support our employees. Burnout can look different for leaders and can span over various service lines, so this is a critical initiative. We are in the very early stage of hosting our

first internal annual **Leading Through Personal Best** Retreat. The focus of the retreat is to support, empower, and inspire our leaders to focus on their own well-being so that they can lead their team through being their personal best!

- We've also just rolled out our Personal Best Wellness Champion program. This program consists of 180 engaged employees that support the whole well-being approach for supporting our employees. They are our boots on the ground (and eyes and ears). They can provide a pulse check and feedback quicker than any scorecards or survey. We foster an environment of inclusiveness so we are very excited to have them champion and support whole well-being for Dignity Health.

Q: Anything else you would like to share with us?

- Remember engagement and burnout is not a single department issue – it plays a vital role in your organization's overall strategy and organizational well-being which is the necessary foundation for improving whole employee whole well-being and engagement.
- Be gentle with yourself and take care of YOU.

Thanks again for joining us for the second Caregiver Burnout Consortium webinar. We'll [post details](#) for the next meeting soon.