

# Optimizing Professional Wellness: Navigating Workplace Experiences in Healthcare

**Ishwaria M. Subbiah, M.D., M.S.**

Executive Director, Cancer Care Equity and Professional Wellness, SCRI  
Medical Director, Supportive Care Oncology, Health Equity, and Professional Well-being  
The US Oncology Network

ishwaria.subbiah@scri.com @ishwariaMD

**SCRI**

Sarah Cannon  
Research Institute

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# Today's Roadmap

1 ..... Establish the Framework for Healthcare Professional Well-being

2 ..... Measuring Professional Well-being

3 ..... Taking Action and Future Planning

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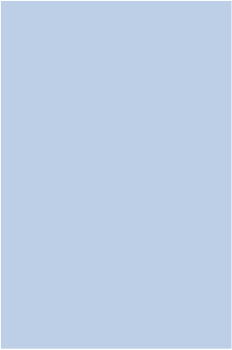
# Framework for Healthcare Professional Well-being

Describe a data-driven Clinician Well-being framework to level-set our dialogue across the Network

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# Data-driven Framework for Clinician Well-being

## **Burnout Consistently High in Multidisciplinary Team Members**



2014 study: 45% of oncologists overall including 51% of oncologists in private practice, were burnt out (emotional exhaustion, depersonalization)



2019 study: 53% of medical oncology PAs report burnout – the highest of all PA specialties



6,940 oncology nurses: emotional exhaustion 32%, depersonalization 21%, and (DP), personal accomplishment 26%

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# Data-driven Framework for Clinician Well-being

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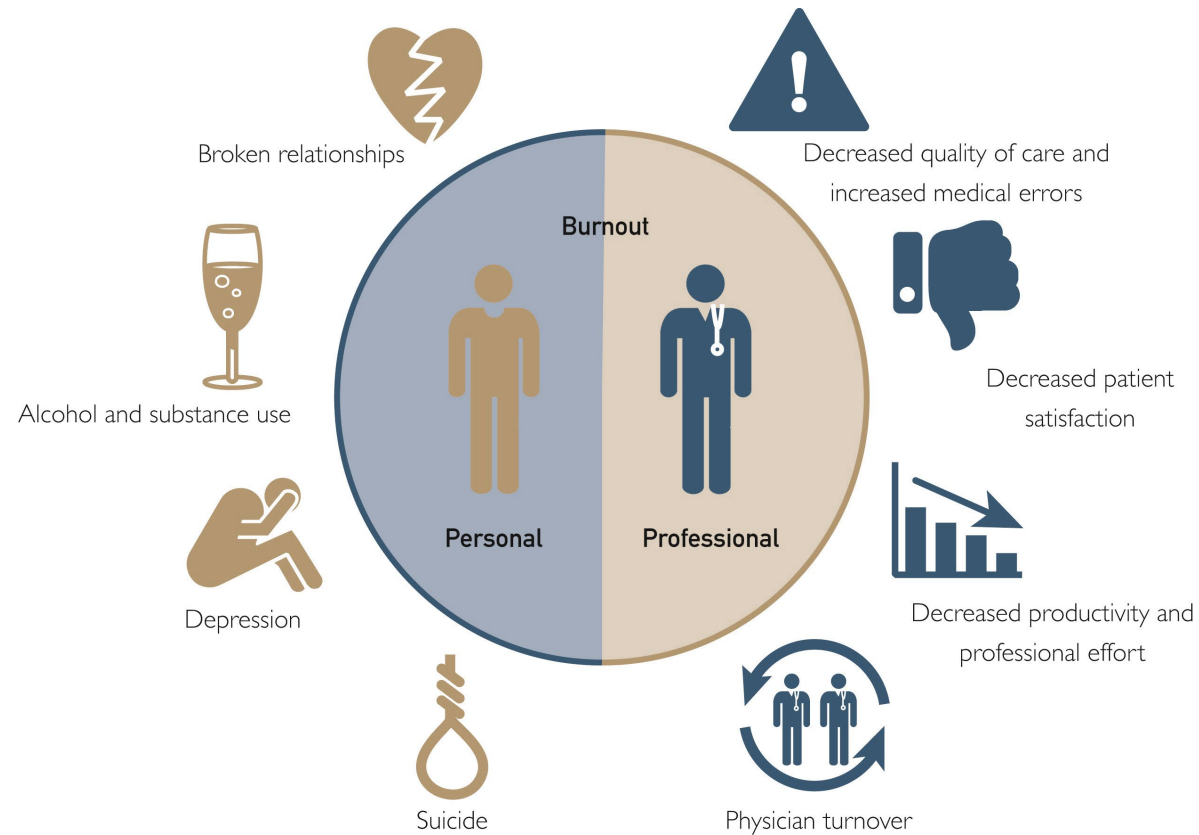
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# Data-driven Framework for Clinician Well-being

## Repercussions of Burnout in Healthcare



"While burnout  
*manifests in*  
***individuals,***  
*it originates*  
*in*  
***systems.***"

*Dr. Christine Sinsky, M.D.  
Vice President of Professional Satisfaction  
AMA*





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# Data-driven Framework for Clinician Well-being Moving Beyond Personal Resilience

## Medicine does not have a resiliency deficit

- Compared resilience and burnout in the US working population
- Findings: Medical professionals had **significantly higher resilience scores** than the general employed population
- Each **one-point increase** in resilience score was associated with **36% lower odds** of overall burnout

The screenshot shows the top portion of a research article. At the top left is the 'JAMA Network Open' logo. To the right is a lock icon. Below the logo is the text 'Original Investigation | Psychiatry'. The main title of the article is 'Resilience and Burnout Among Physicians and the General US Working Population'. Below the title are the authors' names: Colin P. West, MD, PhD; Liselotte N. Dyrbye, MD, MHPE; Christine Sinsky, MD; Mickey Trockel, MD, PhD; Michael Tutty, PhD; Laurence Nedelec, PhD; Lindsey E. Carlsare, MBA; Tait D. Shanafelt, MD. There are two sections: 'Abstract' and 'Key Points'. The 'Abstract' section starts with 'IMPORTANCE' and discusses physician burnout and resilience training. The 'Key Points' section has a 'Question' about physician resilience compared to US workers.

- However, **29%** of physicians **with the highest possible resilience score** still experienced **burnout**.



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# Data-driven Framework for Clinician Well-being Recognizing the Impact of 'Feeling Valued'

Figure 2. Variation in Burnout Trends by Key Aggravators and Mitigators

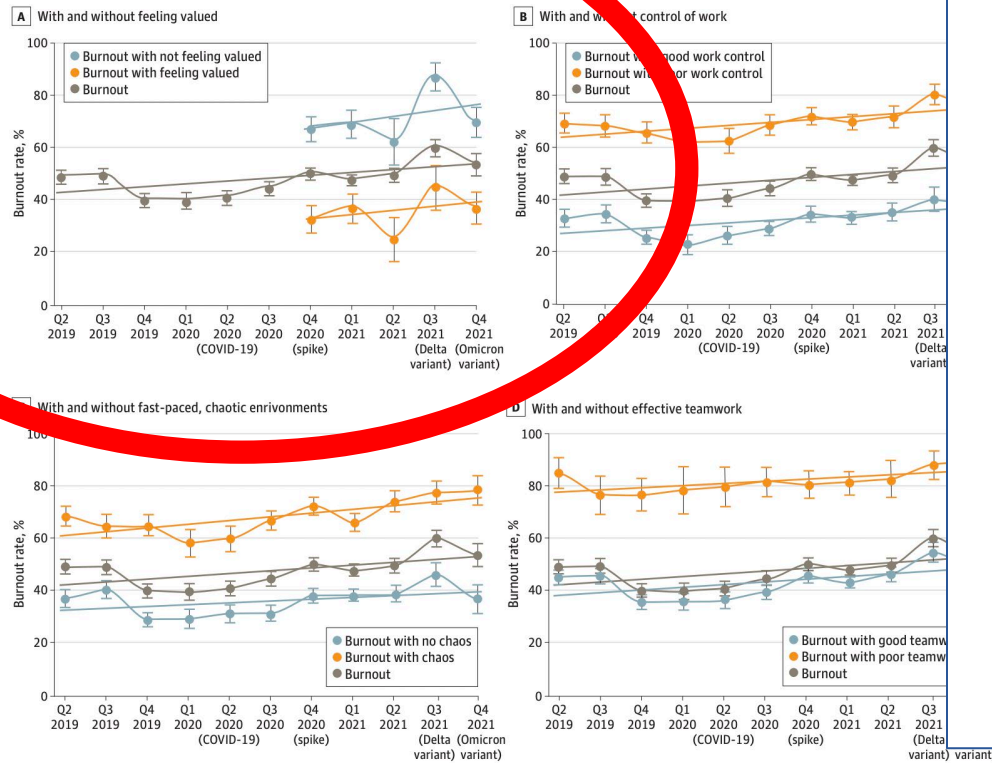
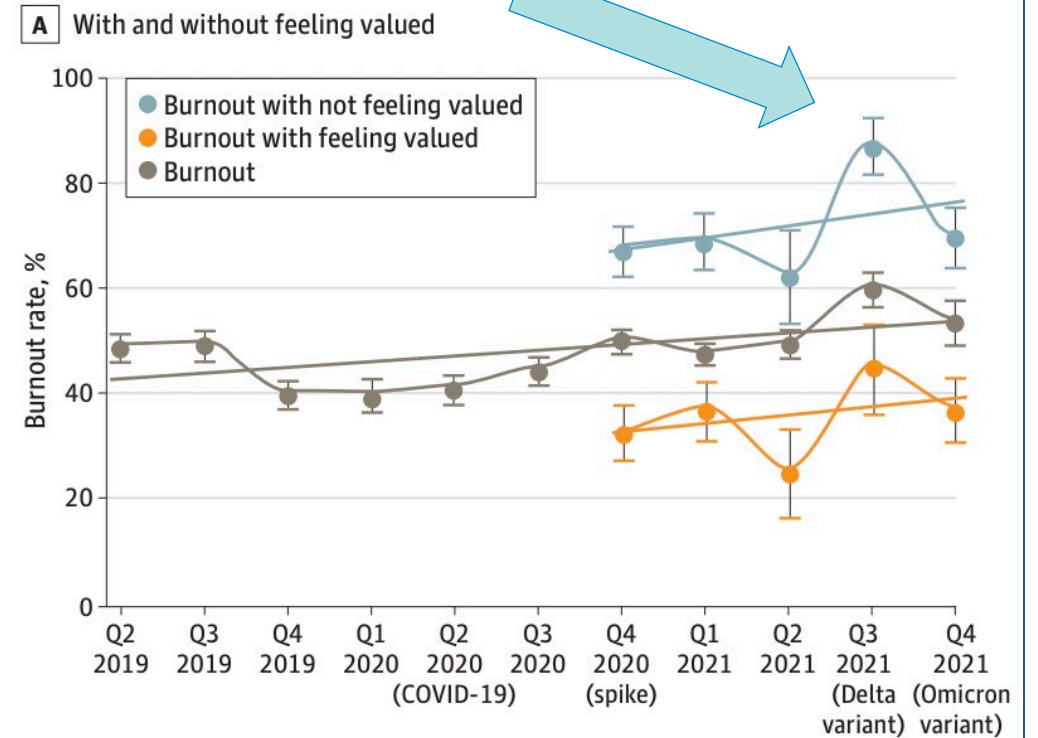


Figure 2. Variation in Burnout Trends by Key Aggravators and Mitigators



Linzer M, Jin JO, Shah P, et al. Trends in Clinician Burnout With Associated Mitigating and Aggravating Factors During the COVID-19 Pandemic. JAMA Health Forum. 2022;3(11):e224163. doi:10.1001/jamahealthforum.2022.4163

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# Data-driven Framework for Clinician Well-being

## Adopting an Evidence-Based Framework

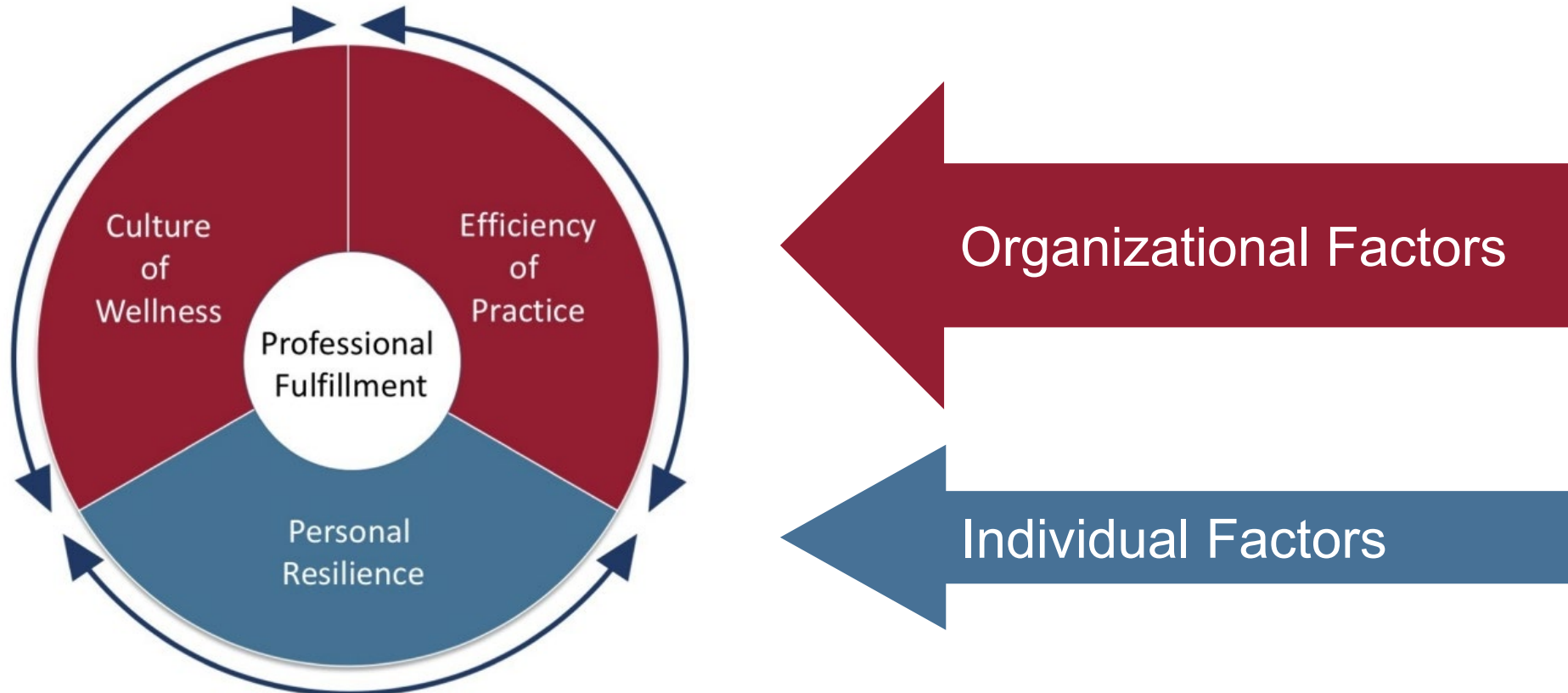
The Stanford Model of Professional Fulfillment



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# Data-driven Framework for Clinician Well-being

## Adopting an Evidence-Based Framework

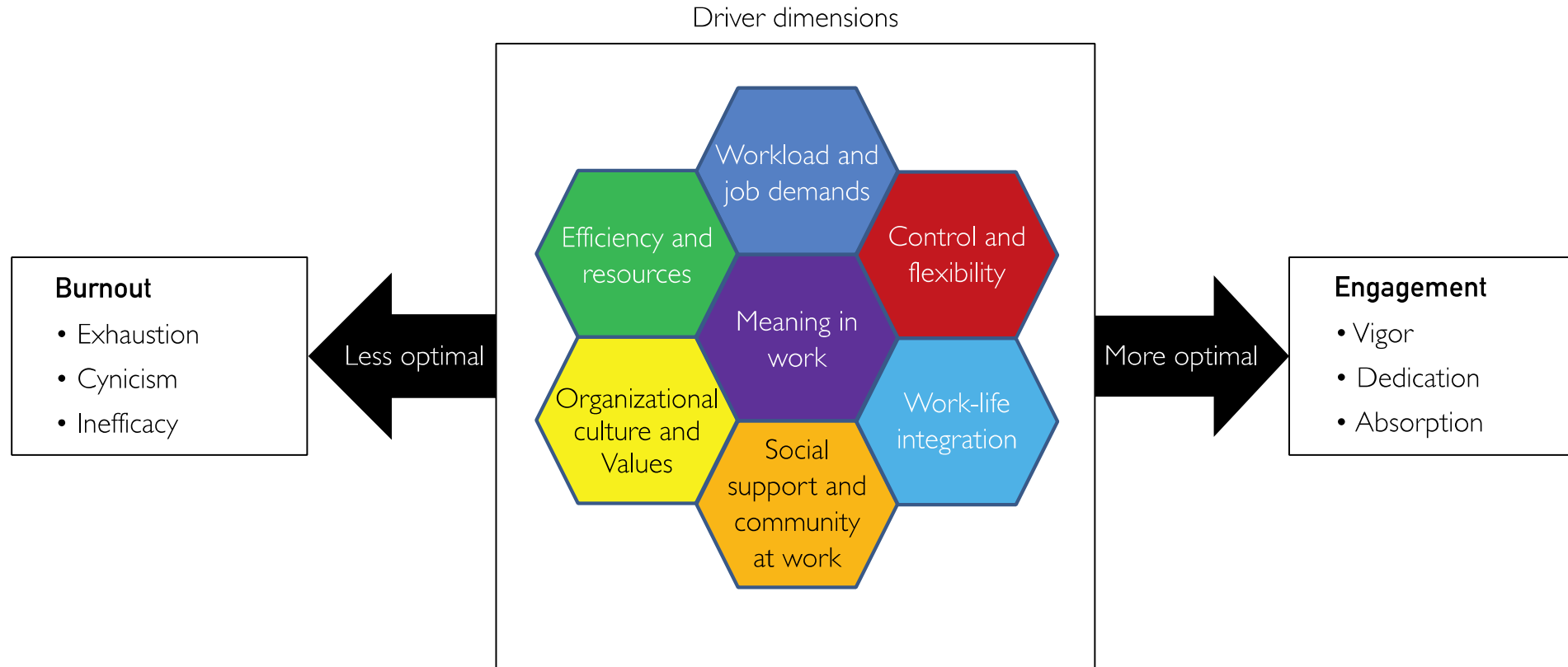


The Stanford Model of Professional Fulfillment

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# Data-driven Framework for Clinician Well-being

## Adopting an Evidence-Based Framework



## Looking at the drivers through the lens of actionability

# One Size Does Not Fit Most

# Personalized Precision Medicine-Wellness

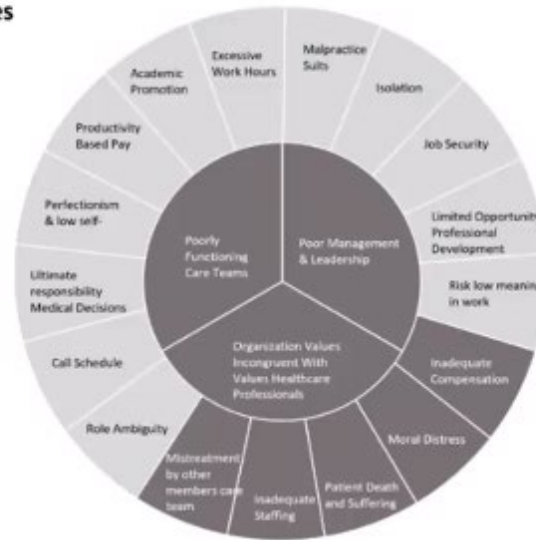
Physicians



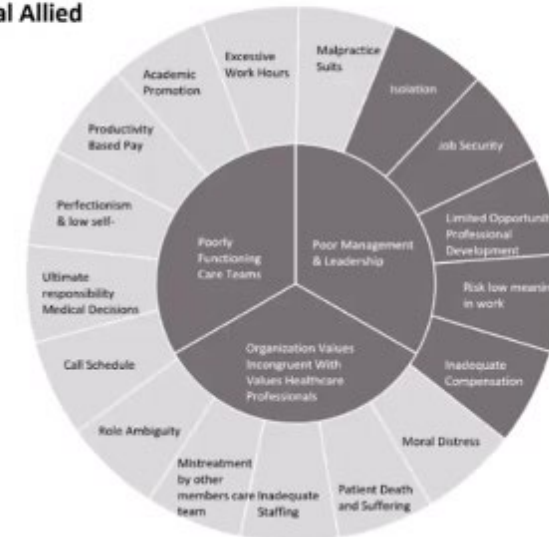
Advanced Practice Providers



Nurses



Non-Clinical Allied Health





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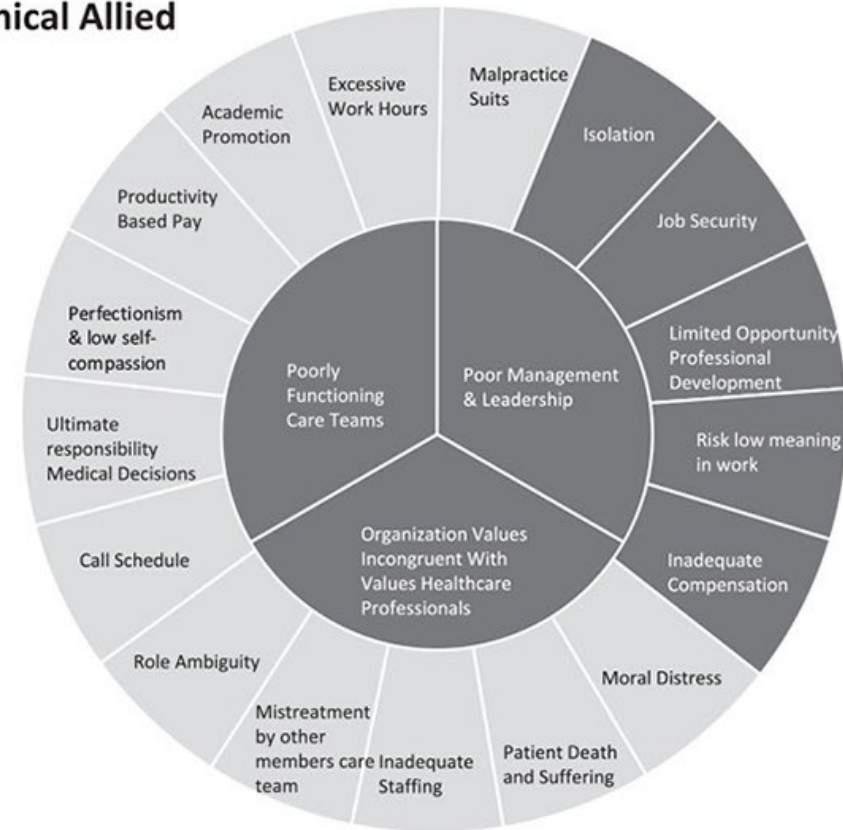
# Data-driven Framework for Clinician Well-being

## Relative Importance of Drivers by Occupation

### Nurses



### Non-Clinical Allied Health



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# Data-driven Framework for Clinician Well-being

## Relative Importance of Drivers by Occupation

### Physicians



### Advanced Practice Providers





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# Data-driven Framework for Clinician Well-being

## Shifting the Approach from Reactive to Proactive

Education	Prevention	Treatment	Disciplinary
<p><b>a. On Health &amp; impairment</b></p> <ul style="list-style-type: none"> <li>Faculty development (professional life)</li> <li>Faculty Health (life at Continuing education)</li> <li>Medical Association Physician Health/Wellness Com. (CME)</li> </ul> <p><b>b. On Stress, physical activity &amp; Health</b></p> <ul style="list-style-type: none"> <li>Human Resources (HR) Wellness &amp; Recognition Team</li> <li>Nutrition Services (HR) Wellness &amp; nutrition: groups or individual</li> </ul> <p><b>c. On financial and retirement</b></p> <ul style="list-style-type: none"> <li>HR retirement seminars</li> </ul> <p>General: NOT Individualized</p>	<p><b>a. Support during distress, before impairment</b></p> <ul style="list-style-type: none"> <li>1:1 Peer to peer support</li> <li><u>Peer Assistance</u> committee</li> <li>Ombuds Office (work/life balance)</li> </ul> <p><b>b. On Conflict Resolution</b></p> <ul style="list-style-type: none"> <li>Ombuds office</li> </ul>	<p><b>Treatment &amp; potential impairment</b></p> <p><b>a. Inside</b></p> <ul style="list-style-type: none"> <li>Employee Health &amp; Wellbeing</li> <li>Employee Assistance Program (EAP) Mental Health/Substance Use/Disabilities</li> <li>Post-treatment monitoring at EAP</li> </ul> <p><b>b. Outside</b></p> <ul style="list-style-type: none"> <li>Local Psychiatrist/mental Health Providers</li> <li>County Medical Society Physician Com.</li> <li>Physician Health Program</li> <li>Physician Health &amp; Wellness Committee</li> <li>Local treatment</li> <li>Out of state: Hazelden/Talbot</li> </ul>	<p><b>Impaired Professional</b></p> <p><b>a. Medical Board</b></p> <p><b>b. Monitoring</b></p> <p>State Board of Pharmacy. Impaired pharmacy professionals: Professional Recovery Network (PRN)</p>
	<p><b>Individualized</b> <b>Private</b> <b>Confidential</b></p> <p><b>No Records (Non-discoverable)</b></p> <p><b>Not reportable, unless impaired</b></p>	<p><b>Individualized</b> <b>Not Private</b> <b>Confidential</b></p> <p><b>Records kept (discoverable)</b></p> <p><b>Reportable, if impaired</b></p>	<p><b>Individualized</b> <b>Not Private</b> <b>Not Confidential</b></p> <p><b>Records kept (discoverable)</b></p> <p><b>Reportable &amp; monitor</b></p>

2

# Measuring Healthcare Professional Well-being

Examine the ways to measure workplace well-being that are validated and actionable

2

# Measuring Healthcare Professional Well-being

## Feedback-driven Approach To Clinician Well-being

### Maintaining Core Values



#### PERSONALIZATION

Align initiatives with actual needs

Integrate survey feedback into initiatives



#### TRANSPARENCY

Increase visibility across the organization of Wellbeing priorities and services



#### SIMPLICITY

Phase out non-value-added activities to streamline day-to-day work life



#### AUTHENTICITY

Ensure workplace experience aligns with the organizational culture and Core Values



#### RESPONSIVENESS

Maintain closed loop communications

Ensure platform for open communication

2

## Measuring Healthcare Professional Well-being

# Defining Each Evidence-Based Dimension



The Stanford Model of Professional Fulfillment

### Culture of Wellness

Describes the organizational work environment, values and behaviors that promote personal and professional growth, self-care, and compassion for self and others

#### Key success factors of this dimension include:

- Leadership support, commitment, and accountability for wellness
- Infrastructure and resources to support wellness
- Regular measurement of professional well-being
- Recognition and appreciation
- Fairness and inclusiveness
- Transparency and values alignment

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# Measuring Healthcare Professional Well-being

## Defining Each Evidence-Based Dimension



The Stanford Model of Professional Fulfillment

### Efficiency of Practice

Describes the workplace systems, processes, and practices that promote safety, quality, effectiveness, positive patient and colleague interactions, and work-life balance.

#### Key success factors include:

- Identification and redesign of inefficient work
- Physician involvement in clinical processes redesign
- Teamwork models of practice
- Workspace design for interpersonal proximity & improved communication
- Efficient communication methods to minimize e-mail burden
- Streamline EHR, other IT interfaces
- Realistic staffing and scheduling that recognizes predictable absences

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# Measuring Healthcare Professional Well-being

## Defining Each Evidence-Based Dimension



The Stanford Model of Professional Fulfillment

### Personal Resilience

Describes how the individual still plays a critical role. Personal Resilience refers to the individual skills, behaviors, and attitudes that contribute to physical, emotional, and professional well-being.

#### Key success factors include:

- Self-care assessment and support systems
- Safety net systems for crisis interventions
- Worksite evidence-based health promotion
- Encouragement of peer support
- Financial management counseling
- Life-needs support mechanisms (e.g., child and elder care, after-hours meals, and more)

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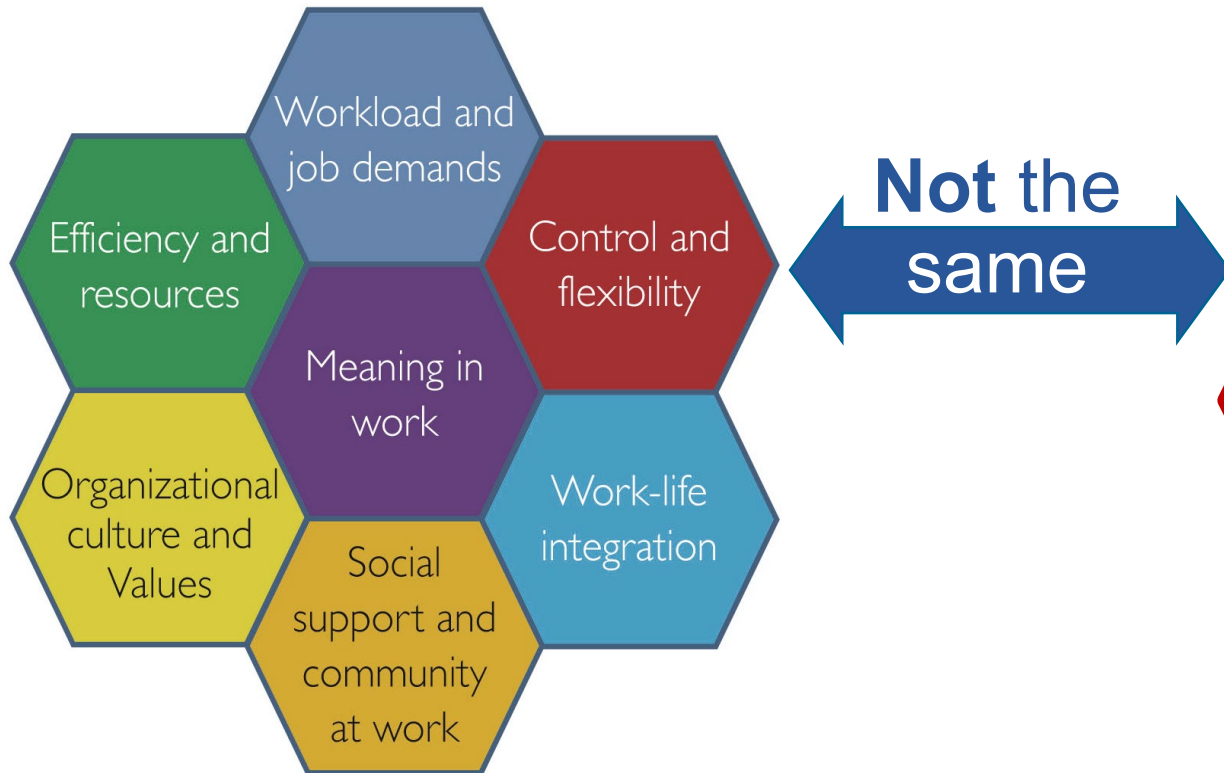
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# Measuring Healthcare Professional Well-being

## Feedback-driven Approach To Clinician Well-being



Not the same



















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## Measuring Healthcare Professional Well-being

# MATRIX OF DRIVERS OF BURNOUT IN HEALTHCARE PROFESSIONALS

Drivers of burnout and engagement in physicians	Individual factors	Work unit factors	Organization factors	National factors
 <p><b>Workload and job demands</b></p>	<ul style="list-style-type: none"> <li>• Specialty</li> <li>• Practice location</li> <li>• Decision to increase work to increase income</li> </ul>	<ul style="list-style-type: none"> <li>• Productivity expectations</li> <li>• Team structure</li> <li>• Efficiency</li> <li>• Use of allied health professionals</li> </ul>	<ul style="list-style-type: none"> <li>• Productivity targets</li> <li>• Method of compensation               <ul style="list-style-type: none"> <li>- Salary</li> <li>- Productivity based</li> </ul> </li> <li>• Payer mix</li> </ul>	<ul style="list-style-type: none"> <li>• Structure reimbursement               <ul style="list-style-type: none"> <li>- Medicare/Medicaid</li> <li>- Bundled payments</li> <li>- Documentation requirements</li> </ul> </li> </ul>
 <p><b>Efficiency and resources</b></p>	<ul style="list-style-type: none"> <li>• Experience</li> <li>• Ability to prioritize</li> <li>• Personal efficiency</li> <li>• Organizational skills</li> <li>• Willingness to delegate</li> <li>• Ability to say "no"</li> </ul>	<ul style="list-style-type: none"> <li>• Availability of support staff and their experience</li> <li>• Patient check-in efficiency/process</li> <li>• Use of scribes</li> <li>• Team huddles</li> <li>• Use of allied health professionals</li> </ul>	<ul style="list-style-type: none"> <li>• Integration of care</li> <li>• Use of patient portal</li> <li>• Institutional efficiency:               <ul style="list-style-type: none"> <li>- EHR</li> <li>- Appointment system</li> <li>- Ordering systems</li> </ul> </li> <li>• How regulations interpreted and applied</li> </ul>	<ul style="list-style-type: none"> <li>• Integration of care               <ul style="list-style-type: none"> <li>- Requirements for:                   <ul style="list-style-type: none"> <li>- Electronic prescribing</li> <li>- Medication reconciliation</li> <li>- Meaningful use of EHR</li> </ul> </li> </ul> </li> <li>• Certification agency facility regulations (JCAHO)</li> <li>• Precertifications for tests/treatments</li> </ul>
 <p><b>Meaning in work</b></p>	<ul style="list-style-type: none"> <li>• Self-awareness of most personally meaningful aspect of work</li> <li>• Ability to shape career to focus on interests</li> <li>• Doctor-patient relationships</li> <li>• Personal recognition of positive events at work</li> </ul>	<ul style="list-style-type: none"> <li>• Match of work to talents and interests of individuals</li> <li>• Opportunities for involvement               <ul style="list-style-type: none"> <li>- Education</li> <li>- Research</li> <li>- Leadership</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Organizational culture</li> <li>• Practice environment</li> <li>• Opportunities for professional development</li> </ul>	<ul style="list-style-type: none"> <li>• Evolving supervisory role of physicians (potentially less direct patient contact)</li> <li>• Reduced funding               <ul style="list-style-type: none"> <li>- Research</li> <li>- Education</li> </ul> </li> <li>• Regulations that increase clerical work</li> </ul>
 <p><b>Culture and values</b></p>	<ul style="list-style-type: none"> <li>• Personal values</li> <li>• Professional values</li> <li>• Level of altruism</li> <li>• Moral compass/ethics</li> <li>• Commitment to organization</li> </ul>	<ul style="list-style-type: none"> <li>• Behavior of work unit leader</li> <li>• Work unit norms and expectations</li> <li>• Equity/fairness</li> </ul>	<ul style="list-style-type: none"> <li>• Organization's mission               <ul style="list-style-type: none"> <li>- Service/quality vs profit</li> </ul> </li> <li>• Organization's values</li> <li>• Behavior of senior leaders</li> <li>• Communication/messaging</li> <li>• Organizational norms and expectations</li> <li>• Just culture</li> </ul>	<ul style="list-style-type: none"> <li>• System of coverage for uninsured</li> <li>• Structure reimbursement               <ul style="list-style-type: none"> <li>- What is rewarded</li> </ul> </li> <li>• Regulations</li> </ul>
 <p><b>Control and flexibility</b></p>	<ul style="list-style-type: none"> <li>• Personality</li> <li>• Assertiveness</li> <li>• Intentionality</li> </ul>	<ul style="list-style-type: none"> <li>• Degree of flexibility:               <ul style="list-style-type: none"> <li>- Control of physician calendars</li> <li>- Clinic start/end times</li> <li>- Vacation scheduling</li> <li>- Call schedule</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Scheduling system</li> <li>• Policies</li> <li>• Affiliations that restrict referrals</li> <li>• Rigid application practice guidelines</li> </ul>	<ul style="list-style-type: none"> <li>• Precertifications for tests/treatments</li> <li>• Insurance networks that restrict referrals</li> <li>• Practice guidelines</li> </ul>
 <p><b>Social support and community at work</b></p>	<ul style="list-style-type: none"> <li>• Personality traits</li> <li>• Length of service</li> <li>• Relationship-building skills</li> </ul>	<ul style="list-style-type: none"> <li>• Collegiality in practice environment</li> <li>• Physical configuration of work unit space</li> <li>• Social gatherings to promote community</li> <li>• Team structure</li> </ul>	<ul style="list-style-type: none"> <li>• Collegiality across the organization</li> <li>• Physician lounge</li> <li>• Strategies to build community</li> <li>• Social gatherings</li> </ul>	<ul style="list-style-type: none"> <li>• Support and community created by Medical/specialty societies</li> </ul>
 <p><b>Work-life integration</b></p>	<ul style="list-style-type: none"> <li>• Priorities and values</li> <li>• Personal characteristics               <ul style="list-style-type: none"> <li>- Spouse/partner</li> <li>- Children/dependents</li> <li>- Health issues</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Call schedule</li> <li>• Structure night/weekend coverage</li> <li>• Cross-coverage for time away</li> <li>• Expectations/role models</li> </ul>	<ul style="list-style-type: none"> <li>• Vacation policies</li> <li>• Sick/medical leave</li> <li>• Policies               <ul style="list-style-type: none"> <li>- Part-time work</li> <li>- Flexible scheduling</li> </ul> </li> <li>• Expectations/role models</li> </ul>	<ul style="list-style-type: none"> <li>• Requirements for:               <ul style="list-style-type: none"> <li>- Maintenance certification</li> <li>- Licensing</li> </ul> </li> <li>• Regulations that increase clerical work</li> </ul>

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# Measuring Healthcare Professional Well-being Actionable Drivers with Validated Measures & Tools



## Examples: Measuring Personal-Organizational Values Alignment

How true are the following statements about conditions in your practice setting (i.e., your principal practice site)?

	Not At All True	Somewhat True	Moderately True	Very True	Completely True
My input is valued in important administrative decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our organizational goals and values fit well with my goals and values	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Administration values my clinical work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*JAMA Netw Open. 2021;4(2):e2035622. doi:10.1001/jamanetworkopen.2020.35622*

3

## Taking Action as an Organization

Establish our unified approach as a practice, health system, state for an action-centered clinician well-being strategy across multidisciplinary professionals

3

Taking Action as an Organization

## First, Establish Consensus on the Following Evidence-Based Statements



Burnout is prevalent in healthcare professionals.



The well-being of healthcare professionals impacts quality of care.



Healthcare professionals' distress costs organizations a lot of money.



Greater personal resilience is not the solution.



Different occupations and disciplines have unique needs.



Evidence and tactics are available to address the problem.



Interventions work.

# Clinical Wellbeing Strategy Pillars

## 1. Establish our shared commitment to clinician well-being

- Raise awareness to our professional wellbeing framework
- Cultivate solutions-focused mindsets

## 2. Measure consistently to show impact over time

- Prioritize actionable areas of the professional well-being

## 3. Support action

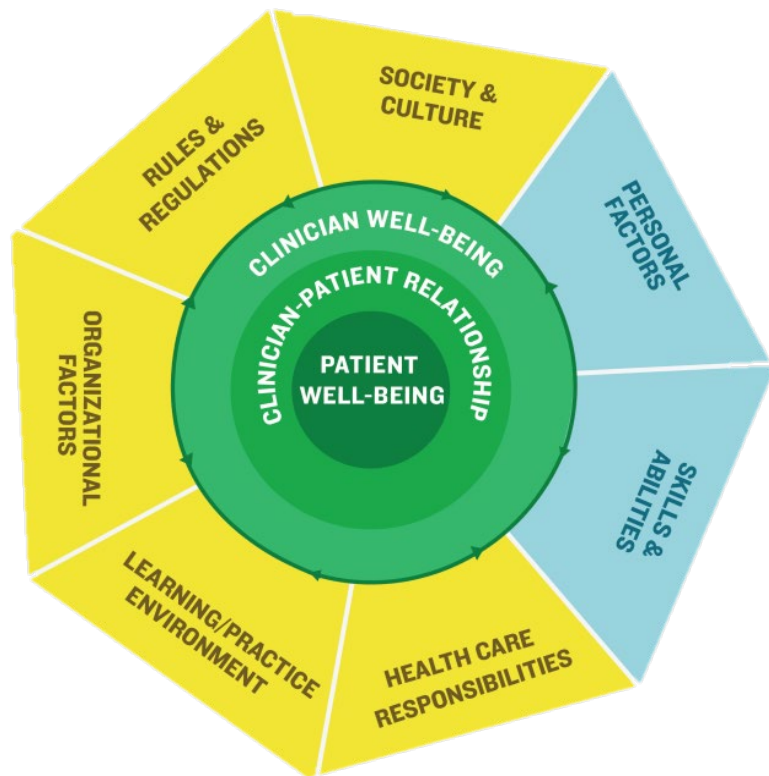
- Share end-to-end guidance for practice-, network-level action
- Don't lose sight of the unique needs by roles within teams



3

# Taking Action as an Organization Adapting Evidence-based Framework

- Leverage the work done to date



Drivers of burnout and engagement in physicians	Individual factors	Work unit factors	Organization factors	National factors
<ul style="list-style-type: none"> <li>Workload and job demands</li> </ul>	<ul style="list-style-type: none"> <li>Specialty</li> <li>Practice location</li> <li>Decision to increase work to increase income</li> </ul>	<ul style="list-style-type: none"> <li>Productivity expectations</li> <li>Team structure</li> <li>Efficiency</li> <li>Use of allied health professionals</li> </ul>	<ul style="list-style-type: none"> <li>Productivity targets</li> <li>Method of compensation</li> <li>Salary</li> <li>Productivity based</li> <li>Payer mix</li> </ul>	<ul style="list-style-type: none"> <li>Structure reimbursement</li> <li>Medicare/Medicaid</li> <li>Bundled payments</li> <li>Documentation requirements</li> </ul>
<ul style="list-style-type: none"> <li>Efficiency and resources</li> </ul>	<ul style="list-style-type: none"> <li>Experience</li> <li>Ability to prioritize</li> <li>Personal efficiency</li> </ul>	<ul style="list-style-type: none"> <li>Availability of support staff and their experience</li> <li>Medication reconciliation</li> <li>Meaningful use of EHR</li> <li>Certification agency facility regulations (JC/AHO)</li> <li>Precertifications for tests/treatments</li> </ul>	<ul style="list-style-type: none"> <li>Integration of care</li> <li>Use of patient portal</li> <li>Institutional efficiency</li> </ul>	<ul style="list-style-type: none"> <li>Integration of care</li> <li>Requirements for:                             <ul style="list-style-type: none"> <li>Electronic prescribing</li> <li>EHR</li> <li>Appoint</li> <li>Order</li> <li>How reg interpret</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>Meaning in work</li> </ul>	<ul style="list-style-type: none"> <li>Evolving supervisory role of physicians (potentially less direct patient contact)</li> <li>Reduced funding</li> <li>Research</li> <li>Education</li> <li>Regulations that increase clerical work</li> </ul>	<ul style="list-style-type: none"> <li>Self-awareness of most personally meaningful aspect of work</li> <li>Ability to shape career to focus on interests</li> <li>Doctor-patient relationships</li> <li>Personal recognition of positive events at work</li> </ul>	<ul style="list-style-type: none"> <li>Match of work to talents and interests of individuals</li> <li>Opportunities for involvement</li> <li>Education</li> <li>Research</li> <li>Leadership</li> </ul>	<ul style="list-style-type: none"> <li>Organizational culture</li> <li>Practice</li> <li>Professional development</li> </ul>
<ul style="list-style-type: none"> <li>Culture and values</li> </ul>	<ul style="list-style-type: none"> <li>System of coverage for uninsured</li> <li>Organization's values</li> <li>Behavior of senior leaders</li> <li>Communication/messaging</li> <li>Organizational norms and expectations</li> <li>Just culture</li> </ul>	<ul style="list-style-type: none"> <li>Personal values</li> <li>Professional values</li> <li>Structure reimbursement</li> <li>What is rewarded</li> <li>Regulations</li> </ul>	<ul style="list-style-type: none"> <li>Behavior of work unit leader</li> <li>Level of altruism</li> <li>Moral compass/ethic</li> <li>Commitment to organization</li> </ul>	<ul style="list-style-type: none"> <li>Service</li> </ul>
<ul style="list-style-type: none"> <li>Control and flexibility</li> </ul>	<ul style="list-style-type: none"> <li>Degree of flexibility:                             <ul style="list-style-type: none"> <li>Control of physician calendars</li> <li>Clinic start/end times</li> <li>Vacation scheduling</li> <li>Call schedule</li> </ul> </li> <li>Scheduling system</li> <li>Policies</li> <li>Affiliations that restrict referrals</li> <li>Rigid application practice guidelines</li> </ul>	<ul style="list-style-type: none"> <li>Precertifications for tests/treatments</li> <li>Insurance networks that restrict referrals</li> <li>Practice guidelines</li> </ul>	<ul style="list-style-type: none"> <li>Personality</li> <li>Assertiveness</li> <li>Intentionality</li> </ul>	<ul style="list-style-type: none"> <li>Personality traits</li> <li>Length of service</li> <li>Relationship-building</li> </ul>
<ul style="list-style-type: none"> <li>Community at work</li> </ul>	<ul style="list-style-type: none"> <li>Collegality in practice environment</li> <li>Physical configuration of organization</li> <li>Physician lounge</li> </ul>	<ul style="list-style-type: none"> <li>Collegality across the organization</li> <li>Support and community created by Medical/specialty societies</li> <li>Physician lounge</li> </ul>	<ul style="list-style-type: none"> <li>Strategies to build community</li> <li>Social gatherings</li> </ul>	<ul style="list-style-type: none"> <li>Work-life integration</li> </ul>
<ul style="list-style-type: none"> <li>Work-life integration</li> </ul>	<ul style="list-style-type: none"> <li>Priorities and values</li> <li>Personal characteristics                             <ul style="list-style-type: none"> <li>Spouse/partner</li> <li>Children/dependents</li> <li>Health issues</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Call schedule</li> <li>Structure night/weekend coverage</li> <li>Cross-coverage for time away</li> <li>Expectations/role models</li> </ul>	<ul style="list-style-type: none"> <li>Vacation policies</li> <li>Structure night/weekend coverage</li> <li>Part-time work</li> <li>Flexible scheduling</li> <li>Expectations/role models</li> </ul>	<ul style="list-style-type: none"> <li>Requirements for:                             <ul style="list-style-type: none"> <li>Maintenance certification</li> <li>Licensing</li> <li>Regulations that increase clerical work</li> </ul> </li> </ul>



3

# Taking Action as an Organization

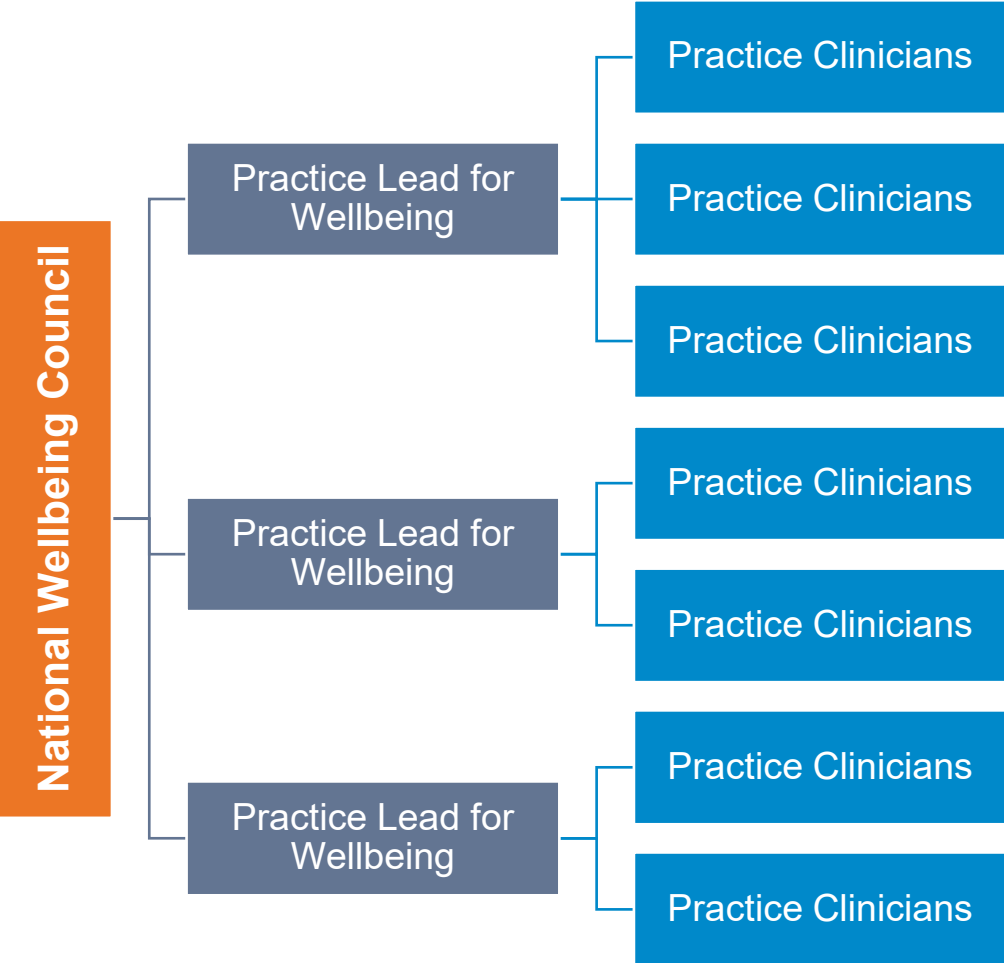
## Establish the Well-being Infrastructure

Ensure representation with practice-level, role-specific Wellbeing Leads

Bidirectional communication

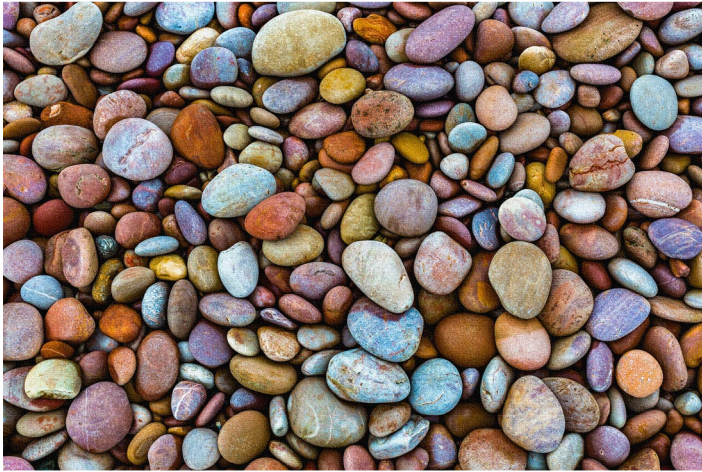
Peer community among wellbeing leads

- Sharing best practices
- Crowdsourcing solutions



# Reframing Our Thinking

## Burnout as manifestation of 1000 pebbles



It isn't the mountains ahead to climb that wear you out; it's the pebble in your shoe.

*Muhammad Ali*