One Program’s Response to a Tragic Event
Disclosure

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Formerly the Director of a Malignant Program

“repentant sinner”
Disclosure

The title, most of the slides, and all of the message, are from Ralph Greco, MD
The Layout

Identify the problem
elsewhere
here

Build a solution
the architect
the plan
the builders

Make it public so others can profit
The good surgeon

DOES THE MOST CASES

DOES THE BIG CASES

IS THE FASTEST

NEVER GETS TIRED

STAYS THE LATEST

WILL COME IN DAY OR NIGHT
The happy surgeon?

Career satisfaction for surgeons seems to be diminishing

Affects patient safety, quality of care, medical errors

Also has personal consequences to relationships, family, self

Younger surgeons, especially, can be at significant risk for stressors and burnout
What is burnout?
Syndrome of personal distress characterized by emotional exhaustion, depersonalization, decreased sense of personal accomplishment
Failure to Adapt is a Formula for Extinction
Investigate stress and balance in Stanford residents

Develop a program to address imbalance

Attract national attention

Assemble a team to keep movement going
Data Collected 2010-2012
BY ARGHAVAN SALLES, M.D., Ph.D

1. WELL BEING
2. BURN OUT
3. BELONGING
4. SLEEP AND EXERCISE HABITS
5. MEDICATIONS, TOBACCO AND ALCOHOL USAGE
Burnout in Stanford residents

Rankings of professional stressors
Work–life balance as a concept to include the proper prioritizing between:

<table>
<thead>
<tr>
<th>Work</th>
<th>Lifestyle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career</td>
<td>Health</td>
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<tr>
<td>Ambition</td>
<td>Pleasure</td>
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<tr>
<td></td>
<td>Leisure</td>
</tr>
<tr>
<td></td>
<td>Family</td>
</tr>
<tr>
<td></td>
<td>Spiritual development/meditation</td>
</tr>
</tbody>
</table>
Wayne State Life Balance Quiz
15 True/ False Questions

• 0-2: Good balance
• 3-5: On the Edge
• 5+: Out of Balance

Data collected by Dr Greco, Arghavan Salles, Cara Liebert and others
Stanford Surgery
Life in Balance by PG Year 2013

<table>
<thead>
<tr>
<th>Year</th>
<th>Balanced</th>
<th>Out of Balance</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY1</td>
<td>3</td>
<td>2</td>
<td>5</td>
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<tr>
<td>PGY2</td>
<td>1</td>
<td>7</td>
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<td>PGY3</td>
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<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>5</td>
<td>20</td>
<td>25</td>
</tr>
</tbody>
</table>
How do we promote “balance” for our residents? The vision...

Establishment of / or participation in a resident well-being program

Resident participation in the design and governance of the program
- Educate faculty and residents about signs of depression

- Teach strategies for dealing with stress, burn out and depression such as self reflection and awareness as well as a venue for sharing ideas

- Educate residents about resources for handling stress and depression. Provide easy access to counseling which is completely confidential.

- Sponsor team building activities and an organized mentoring program.
- Provide leadership and education to de-stigmatize calling for help.

- Provide group meetings by PG year with a trained counselor.

- Acknowledge that stress, burnout, depression and suicide are deeply embedded in our profession and also common in faculty and staff.
- Eliminate the culture of shame – the perception that infallibility is a pre-requisite and that errors and bad outcomes are your fault.

- Establish a policy of “zero tolerance” for ridicule, humiliation and all abusive behavior and a reporting mechanism that residents find credible.
- Emphasize the importance of physical health and enable residents the time to see their PCP’s and dentists

- Guarantee that residents can access healthy food, exercise and clean on call living quarters.

- Consider naming a program/department ombuds to impartially and confidentially investigate any perceived violation of the well being program.
Founding Committee on Balance in Life

RALPH S. GRECO, M.D.

RACHAEL CALLCUT, M.D.
CLAUDIA MUELLER, M.D., Ph.D.

SURGERY RESIDENTS:
GREG MAGEE, M.D.
ARGHAVAN SALLES, M.D., Ph.D.
MEDIGET TESHOME, M.D.
YULIA ZAK, M.D.

THOMAS M. KRUMMEL, M.D.
Balance in Life

- Healthy Food
- Doctors’ Visits
- After Hours

- Counseling sessions
- Retreat

- Class Representation
- Resident Mentorship
- Leadership

- Social Events
- After hours guide
Resident Refrigerator and Club House in the Goodman Simulation Center
Team Building
Resident Mentorship Program
Ropes Course
Psychological Health

• Balance in Life Class Meetings

• Lisa Post, Ph.D
“After Hours” Brochure

- Primary Care Physicians
- Dentist
- Hiking/Biking Trails
- Restaurants
- Local Travel
- Gyms
Physical Health

• Visits to Doctors and Dentists

• Healthy diet

• Exercise
Challenges

• Attending MD buy-in
  • Where did you get the idea you could lead a balanced life? I’ve been unbalanced for forty years.
  • I regret that I missed the childhood of all my children. But surgery is worth it – don’t you think?

• Resident buy-in
  • You call sailing on San Francisco Bay a retreat? This place is a country club.

• Outcomes
  • Does this really make a difference?
Outcomes

- Refrigerator
  - Allotted $50 out of 100 by residents
  - Used several times per week
  - Residents found it to be, on average, “extremely valuable”
    - “Greatest thing on the planet”
    - “Would skip many more meals if I didn’t have it”
    - “Totally a mood improvement”
    - “Coke zero and string cheese are integral to my survival in residency”

Salles et al. 2015
Outcomes

• Social Events

• Found to be valuable
• Allotted $26 by residents

• Many positive comments:
  • “Amazing opportunity to interact with co-residents and faculty out of the hospital. Incredibly beneficial; something that sets us apart from other training programs.”
  • “Instill a feeling of class unity.”

Salles et al. 2015
Outcomes

• Counseling session
• 76-100% attendance on average
• Allotted $24 by residents

• Mostly positive comments (27 of 30):
  • “It's helpful to debrief with fellow residents about our struggles/challenges which are often shared experiences.”
  • “It is very validating and supportive to hear about the shared experiences of residency among individuals dealing with similar scenarios that could individually make one feel very isolated.”

Salles et al. 2015
Promoting Balance in the Lives of Resident Physicians
A Call to Action

As physicians, we spend a significant amount of time counseling our patients about how to live healthier lives. Ironically, as trainees and practicing physicians, we often do not prioritize our own physical and psychological health. Most residents go to work despite significant physical impairment and severe anxiety. Compared with population controls, residents are more likely to experience burnout and symptoms of depression. These problems are not unique to medicine; a recent national survey found that 40% of surgeons were burnout and that 30% had symptoms of depression. Another study reported that 60% of surgeons experienced suicidal ideation in the preceding 12 months. Perhaps most startling, there are roughly 300 to 400 physicians who die by suicide per year—the equivalent of 1 medical school graduating class.

Against the backdrop of compelling data suggesting the need for interventions to promote wellness, our general surgery training program suffered the tragic suicide of one of our recent graduates in November 2015. After mourning his loss only 5 months after having left Stanford, our residency program took decisive action to create a multifaceted program aimed at enhancing resident wellness. Our goal was to create a program that helps residents cope with daily stress, provide tools to manage challenges after completing residency, and reduce the risk of burnout, depression, and suicide.

We first formed a committee consisting of residents and faculty. Through several meetings over the course of 4 months, we arrived at the structure of a balance in life program, now in its fourth year of implementation. Others, faced with similar challenges, have created educational mental health lectures. Our comprehensive curriculum strives to promote wellness through balance despite the inherent stressors of surgical training. As outlined here, the program is divided into 4 domains of well-being: professional, physical, psychological, and social.

Professional Well-being
There are 2 components of the balance in life program aimed at improving professional well-being: a resident mentoring program and leadership training. To improve existing faculty-resident mentorship structure, we added a program pairing senior residents with junior residents. To create effective mentorship pairs, in September of each year, junior residents select their senior residents. Quarterly lunch meetings between the junior and senior pairs are funded by the program to facilitate ongoing relationships. This provides junior residents with a private, informal setting in which to discuss concerns about work, research, or their personal lives.

The Balance in Life program also builds on a preexisting leadership curriculum in our department that includes sessions on leadership styles and teamwork. We expanded this program to include an annual outdoor ropes course focused on leadership, mutual support, and team bonding. Residents form groups across postgraduate-year levels and participate in various team-building activities, including finding their way through a maze while blindfolded, filling team members safely through a webbed rope, and discovering the hidden contents of a container using string, paper clips, and a mirror. These activities afford unique opportunities for residents to collaborate outside the hospital setting and build rich relationships with each other.

Physical Well-being
A significant challenge our residents faced was the lack of healthy food options in the hospital, particularly in the evenings and on weekends. To solve this problem, we purchased an refrigerator that was placed in a secure location in our surgical education center to which residents have badge access. The residents appreciate having a refrigerator that is stocked weekly with healthy snacks and drinks. In addition, residents are encouraged and expected to see a physiatrist annually and a dentist semiannually. To facilitate residents seeking regular health care, incoming interns are provided with guide listing physicians, dentists, and physical fitness venues recommended by resident peers.

Psychological Well-being
One of the primary goals of the Balance in Life program is to provide residents with tools to manage stress in their lives. We enlisted an expert clinical psychologist with experience working with high-performance teams to meet with our residents weekly. These 90-minute confidential meetings are scheduled by postgraduate year on a rotating schedule, with each postgraduate-year group meeting with the psychologist every 6 weeks. This time is protected in the same way as weekly educational time, and topics are selected by the residents. Residents have the opportunity to discuss issues with their peers and develop strategies for managing their concerns. As one resident stated, “It is very validating and supportive to hear about the shared experiences of residents among individuals dealing with similar scenarios that could individually make one feel very isolated.”

Residents increasingly take advantage of the opportunity to meet with our clinical psychologist individually to discuss personal issues.

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TIME IN DEPTH > DOCTORS ARE STRESSED, BURNED OUT, DEPRESSED, AND WHEN THEY SUFFER, SO DO THEIR PATIENTS.

Life/SUPPORT

INSIDE THE MOVEMENT TO SAVE THE MENTAL HEALTH OF AMERICA'S DOCTORS

By Mandy Oaklander / Photographs by Balazs Gardi for TIME

Dr. Asapham Suller, 35, photographed at Stanford Health Care.
The New Paradigm

I love surgery, but I love my spouse and children more.
I like my busy practice, and I protect my time at home.
I like doing cases that help patients—be they big or small.
I exercise 4 days a week in reserved time.
I love music, art and literature.
I plan to retire while I am still healthy enough to enjoy the fruits of my labor.
Balance in Life