RUNNING AND RAPPING OUR WAY TO WELLNESS: INTERNAL MEDICINE

RESIDENCY APPROACH TO PREVENTING BURNOUT

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INTRODUCTION: BACKGROUND

PHYSICIAN BURNOUT & WELL BEING

- Between 22-60% of practicing physicians are reported to have experienced burnout
  - Stems from lack of work satisfaction, overwhelming schedules, and loss of support from colleagues
  - Physician burnout has led to increased CV disease and shorter life expectancy, problematic alcohol use, depression as well as suicide

- Burnout in internal medicine (IM) ranks among the highest of all specialties with rates up to 76%

DATA ON INTERVENTIONS:

- Residents recover from existential burnout by:
  - Feeling validated
  - Forming connections with patients/colleagues
  - Increasing competence, career development initiatives
  - Medical Students whose aerobic exercise and/or strength training habits are consistent w/ CDC guidelines appear:

REFERENCES/RESOURCES


METHODS: INTERVENTIONS

AIM #1: PEER ADVISOR TEAM (RAPS)

- Form Resident Advising Program for Success (RAPS) Team
- Faculty Advisor, Sr Resident, Jr Resident
- Assign incoming intern post NRMP Match Day to PGY-II/III in continuity clinic and corresponding RAPS team (April 1)
- Email to intern from RAPS team including photo of their new team with fun facts about each team member (April 5)
- Quarterly check-ins with team (team dependent)
- 3 out of hospital “bonding” events (June, January, May)

AIM #2: WELLNESS CHALLENGE

- January 9th, 30th FIFITLIFE SURVEY... JANUARY FITNESS CHALLENGE

-内部医学二月新闻

- Internal Medicine February Newsletter

FITLIFE SURVEY

- 3 Item Survey sent 1/wk via MedHub per AHA guidelines
  - # days in last wk did you engage in > 30 minutes moderate AND/OR 25 minutes vigorously intensity exercise?
  - Did you pair exercise w/ other activities/priorities in your life?
  - Rate your overall health (physical, emotional) this past week?

RAPS PROGRAM

- Semi structured 3-5 min individual interviews with interns
  - Focus: overall value of RAPS

RESULTS:

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<tr>
<th>MAYO WELL-BEING INDEX</th>
<th>RAPS PROGRAM</th>
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<tr>
<td>IM Resident Scores</td>
<td>Attendance at Events</td>
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<tr>
<td></td>
<td>• June 2018: 11 interns</td>
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<td>• Jan 2019: 4 interns</td>
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<td>Interns Interviewed (N=13)</td>
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<td>• Overall Value</td>
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<td>- 85% (11) welcomed idea of a more structured peer advisor program</td>
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<td>- 15% (2) felt not necessarily helpful but potential</td>
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<td>• Meetings w/ peer advisor</td>
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<td>- 100% weekly (at clinic)</td>
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<td>- 0% outside clinic setting</td>
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DISCUSSION, BARRIERS, STRATEGIES

KEY FINDINGS/DISCUSSION

- Initiating core teams pre residency begins may help initial transition and lead to long-term trusted relationships
- Simplicity is key and frequent reminders yielded higher completion rates but cumbersome for the team

BARRIERS

- Limited data collection and attaining data via surveys may be increasing burnout by adding more to be done

STRATEGIES

- Formation of Residency Program Wellness Committee to continue to sustain/build interventions

PROJECT AIMS

IMMEDIATE: Relationships w/Colleagues & Exercise
- To create a personal team for incoming residents to help with the transition into residency
- Education and promotion re: importance of personal health including exercise/diet it’s impact on health

LONG TERM:
- To continue monitoring the effectiveness of our interventions during upcoming academic year
- To gain a better understanding on the ongoing trends of the contributions of resident burnout