Connect and Reflect: Starting a Clinician Resilience Program in an Academic Tertiary Care Hospital

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Introduction:
Burnout is endemic among healthcare professionals. Increased demands on clinicians and reduced time to spend with both patients and colleagues increase the inherent emotional impact of healthcare practice. It is now recognized that caring for the caregiver is essential for excellent patient care. Lahey Hospital and Medical Center, has undergone enormous growth and change in the past 5 years. Providers are feeling stressed. Leadership is recognizing the need to support them. Connect and Reflect (C&R) has received internal grant funding and is being supported by the CMO and other key leaders.

Methods:
Connect and Reflect uses the core components of several clinician resilience programs (Schwartz Center Rounds, Literature and Medicine, Narrative Medicine, Healer’s Art): a group of clinicians gather on a regular basis, to discuss emotional components of patient care/ healthcare practice, with a trained facilitator, generally with a light meal provided. Participation is voluntary. Studies have indicated these programs help reduce burnout, sustain clinicians and promote increased empathy towards patients, colleagues and self. Additional interventions (narratives, literature,vignettes) will be included based on needs of the participants.

Buy-in was received by the CMO as well as department chairs. An advisory committee of 7 clinicians serve as consultants and ambassadors for the program. A pilot group of physicians has begun based on a survey in that department. A needs assessment will be distributed in 2016 to all medical staff, and other disciplines. The goal is 10 ongoing groups by the end of FYI 2016 as well as a half-day retreat.

Results and Initial Findings:
The program is in its infancy. Much of the data at this time is from leadership, informal discussion with a variety of providers in different departments, a small pilot survey (N=25), and one pilot C &R group. This group of 7 M.D’s all indicated that the sessions met their needs and they planned to return. Surprising to the author was the fact that participants in the survey indicated a preference for a discussion based on “the needs of the group at the time” rather than any or traditional prompts- poem, case vignette, narrative, topic for the day. The results suggest that the need to connect and share with colleagues in this sample is so strong that prompts may not necessary. Results may differ with a larger sample.

Problems/Areas for further exploration:
Lack of time, one of the major factors in burnout makes it hard for clinicians to commit to additional activities. In informal discussions, many clinicians indicated an interest in a C and R but said that the other work demands, and wish to spend time with family outweighed it. Making participation rewarding enough to become a priority will be key in developing and sustaining the program.

Other areas for study will be differences between same discipline or interdisciplinary groups, groups comprised of department members versus interdepartmental groups.