

# Running on 'E': Understanding and Addressing Burnout in Pharmacy Practice



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May 20, 2020

# Disclosure/Conflict of Interest

The author declares no relevant or material financial interests that relate to this continuing education presentation

# Pharmacist/Technician Learning Objectives

1. Differentiate stress and burnout
2. Evaluate the implications of burnout on the individual, the healthcare system, and the patient
3. Cite factors associated with burnout
4. Identify opportunities to contribute to organizational strategies to reduce burnout and improve employee well-being and resilience
5. Formulate personal strategies to reduce burnout and improve well-being and resilience

# Feeling the Heat Firsthand

Dr. J is 56 years old and has been practicing pharmacist for over 30 years, initially as a staff pharmacist then opened her own pharmacy

- Now pharmacy manager for a chain and works ~65 hours a week
- Involved in a variety of collaborative practice agreements with local physicians
- Provides public health services to her community



# Feeling the Heat Firsthand

Recently, Dr. J is constantly drained and hasn't felt the same fulfillment from her practice

- She has been less careful with her work, including several near-misses involving dispensing errors
- She finds herself less and less interested in hearing “sob stories” her patients tell her
- She knows she needs to keep working, so she tries to hunker down, focus, and just get through her shift
- She's wondering if she is even capable of still being a pharmacist...

# Is Dr. J burned out?

And what made you say so?

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# Burnout in Healthcare

## **Burnout is a widely recognized problem**

- Major topic of interest across all disciplines in recent years
- Results from a chronic imbalance of high job demands and inadequate job resources

## **Long-lasting consequences on:**

- Clinicians' careers
- The healthcare system
- Patient care

**Affects individuals across all disciplines and all stages of their career**

# Stress vs. Burnout

## Stress

Characterized by over-engagement

Emotions are overreactive

Produces urgency and hyperactivity

Loss of energy

Leads to anxiety disorders

## Burnout

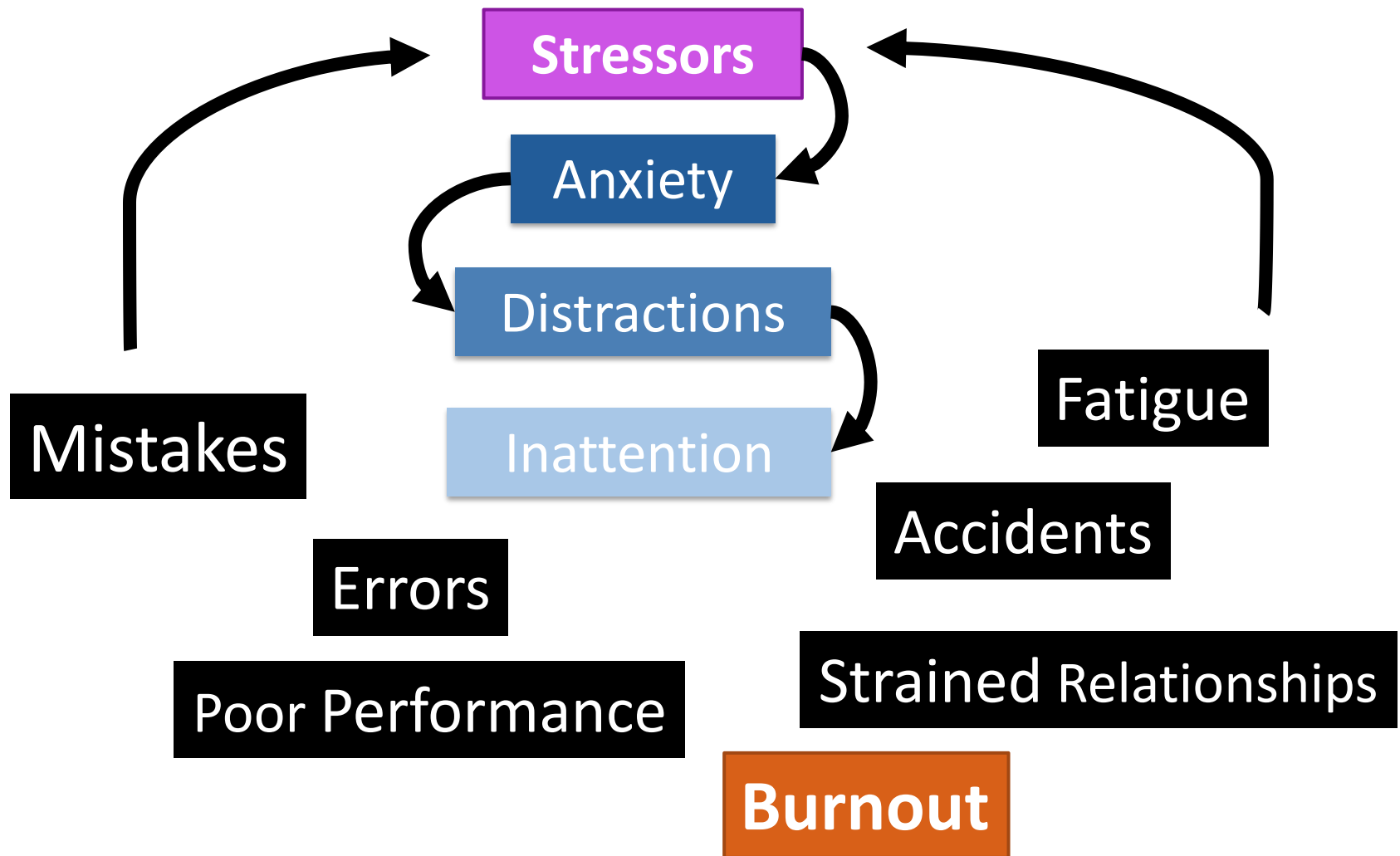
Characterized by disengagement

Emotions are blunted

Produces helplessness, hopelessness

Loss of motivation, ideals, and hope

Leads to detachment and depression



# What is Burnout?

Hint: It's not when you squeal your tires!

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# Defining Burnout

## First described in 1974 by Herbert Freudenberger

- “A syndrome that develops through prolonged response to chronic interpersonal stressors on the job...”

## World Health Organization (WHO)

- ICD 11: “Occupational phenomena”
- “Syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed”

# Defining Burnout

## 3 Subdomains of Burnout

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment



# Emotional Exhaustion

- Hallmark domain of burnout
- Most frequently reported symptom
- Feeling overwhelmed and emotionally depleted
- Typically worsens over time without intervention

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Which of the following suggest Dr. J's emotional exhaustion?

- a) "...working in a busy and thriving practice"
- b) "Several near-misses involving dispensing errors..."
- c) "...feels drained and hasn't felt the same fulfillment"
- d) "... less and less interested in hearing the "sob stories"

Answer: C

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Depersonalization

- Typically occurs after emotional exhaustion
- Loss of ability to care for anyone or anything
- Negative interactions with colleagues, cynicism, and isolation
- Often considered the most toxic consequence of burnout

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Which of the following suggest Dr. J is experiencing depersonalization?

- a) “...working in a busy and thriving practice”
- b) “Several near-misses involving dispensing errors...”
- c) “...feels drained and hasn’t felt the same fulfillment”
- d) “... less and less interested in hearing the “sob stories”

Answer: D

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Reduced Personal Accomplishment

- Feeling less competent/confident in ability to provide care
- Poor professional self-esteem
- Perception of lack of contribution
- May feel like they don't make a difference or are underappreciated

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Which of the following suggest Dr. J has perceived reduce sense of personal accomplishment?

- a) “...wondering if she is even capable of still being a pharmacist”
- b) “Several near-misses involving dispensing errors...”
- c) “...feels drained and hasn’t felt the same fulfillment”
- d) “... less and less interested in hearing the “sob stories”

Answer: A

Emotional  
Exhaustion

Depersonalization

Reduced Personal  
Accomplishment

# Assessing Burnout

“Isn’t everyone a little burned out...?”

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# Maslach Burnout Inventory™ (MBI)

## Assesses Professional Burnout

- Various types, but MBI-HHS used for healthcare research
- 22-item questionnaire
  - ~10 minutes to complete
- Other tools include:
  - Oldenburg Burnout Inventory (OBI)
  - Copenhagen Burnout Inventory (CBI)
  - Physician Work-Life Study's Single Item

## MBI-HHS Scoring

MBI-HHS	Score
<b>Emotional Exhaustion</b>	
High	≥ 27
Moderate	17-26
Low	0-16
<b>Depersonalization</b>	
High	≥ 13
Moderate	7-12
Low	0-6
<b>Personal Accomplishment**</b>	
High	≥ 39
Moderate	32-38
Low	0-31

\*\* Low score would indicate burnout

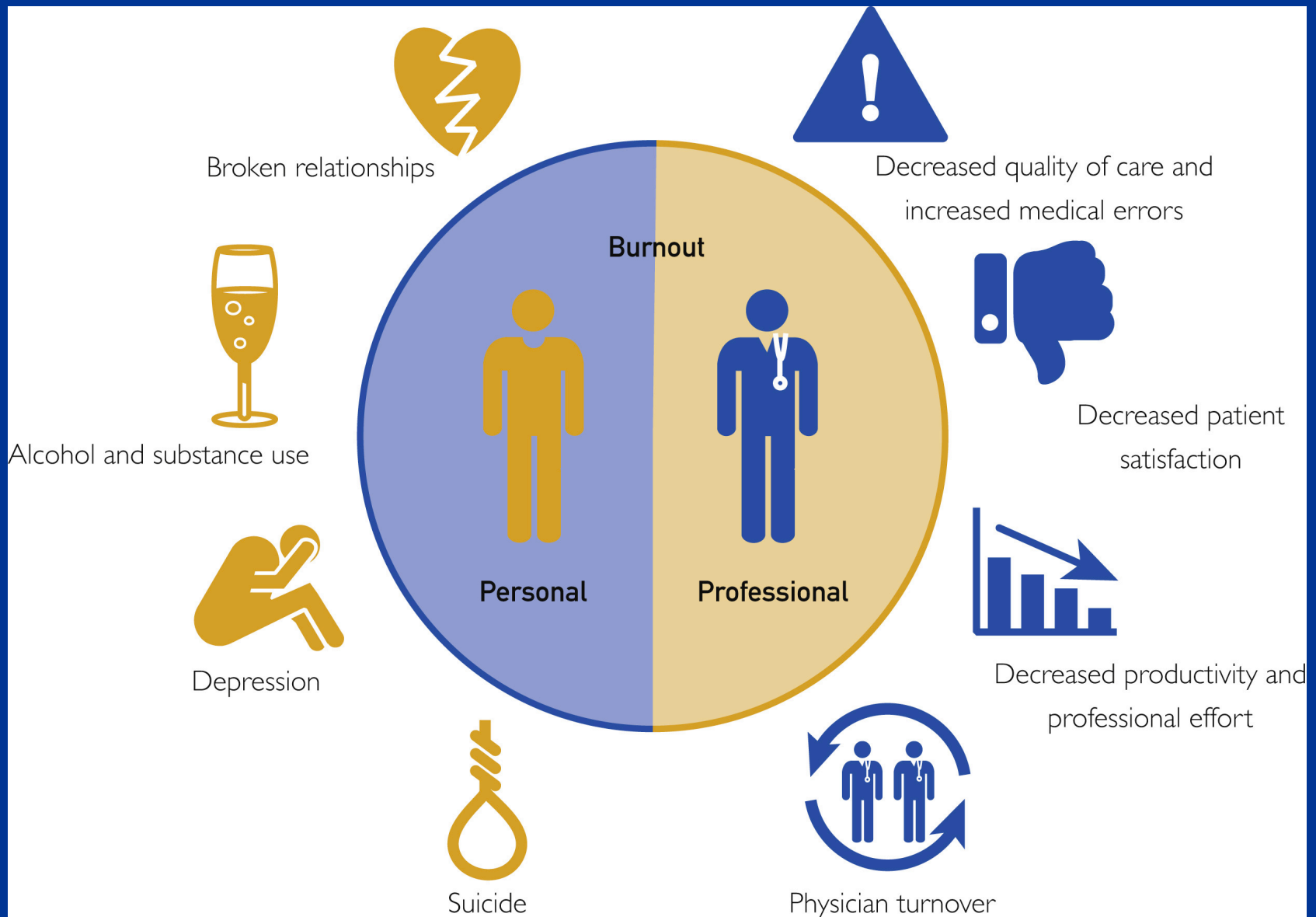


# Individual Effects of Burnout

Estimated Fuel Level: Low



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# Individual Effects of Burnout

- Increased absenteeism
- Isolation and/or distancing from others
- Greater incidence of anxiety and depression
- Work-home conflicts
- Alcohol use and dependence
- Substance use and abuse
- Suicidal ideation

# Effects of Burnout on the Health System

Burning Through Hospital Resources



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# Effects of Burnout on the Health System

**Worsened workplace morale**

**Malpractice suits**

**Turnover**

- Cost associated is \$10,000 per physician per year

**Reduction in productivity**

- 1.35 x as likely to reduce professional work effort

# Effects of Burnout on Patient Care

To continue care, immediate refuel required



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# Effects of Burnout on the Patient Care

## Patient Perception of Burnout in Healthcare

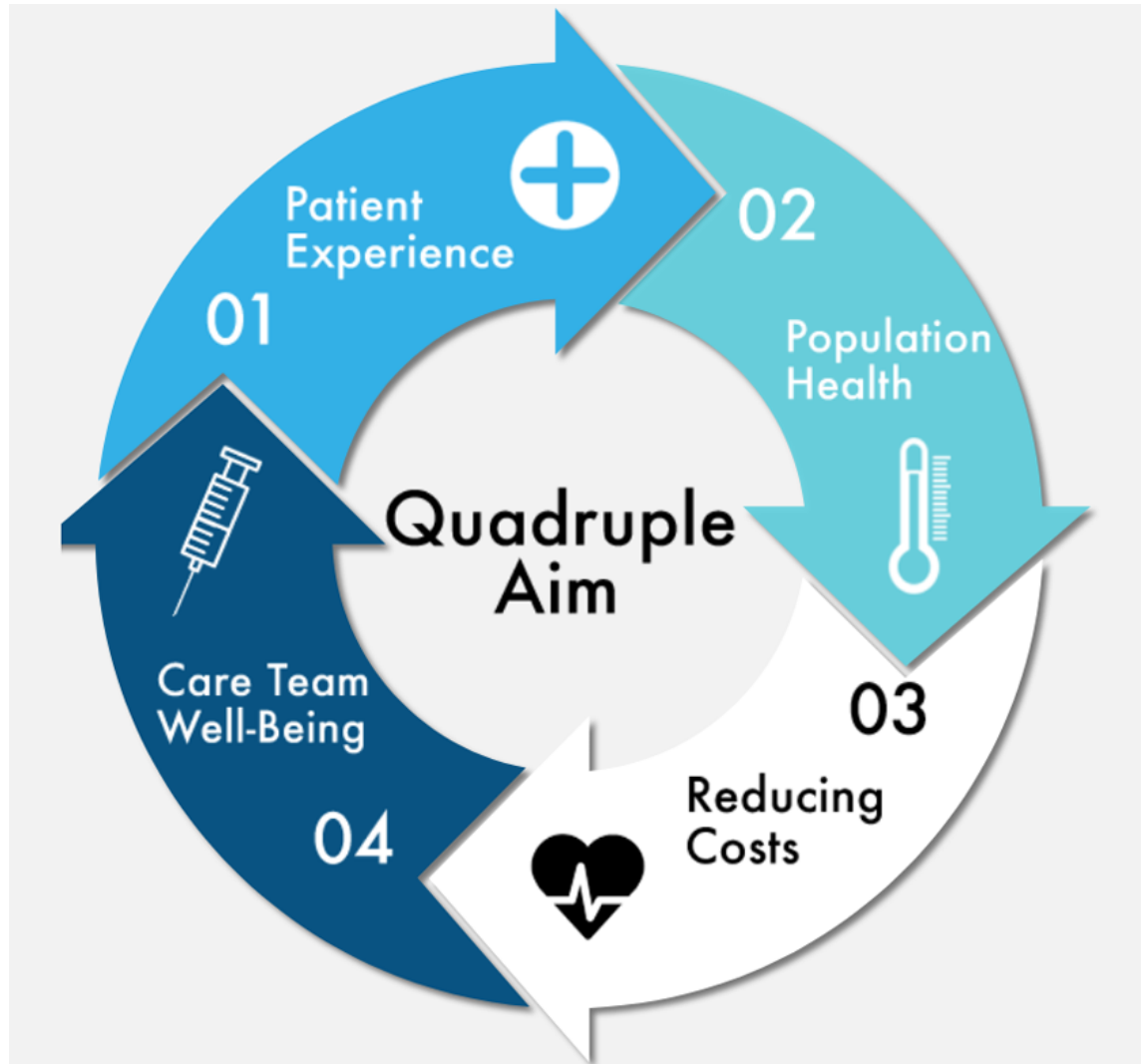
- 80% recognize burnout is a problem among healthcare clinicians
- 91% believe its important to take steps to avoid burnout

## Negative Outcomes Associated with Burnout

- Increased mortality, medical errors, and hospital acquired infections
- Worsened patient safety
- Lower patient satisfaction
- Decreased patient adherence

- In 2014, the National Academy of Medicine (NAM) updated the long standing 'Triple Aim'
- Response driven by the current crisis of burnout in healthcare

SOMETIMES, MORE IS BETTER...

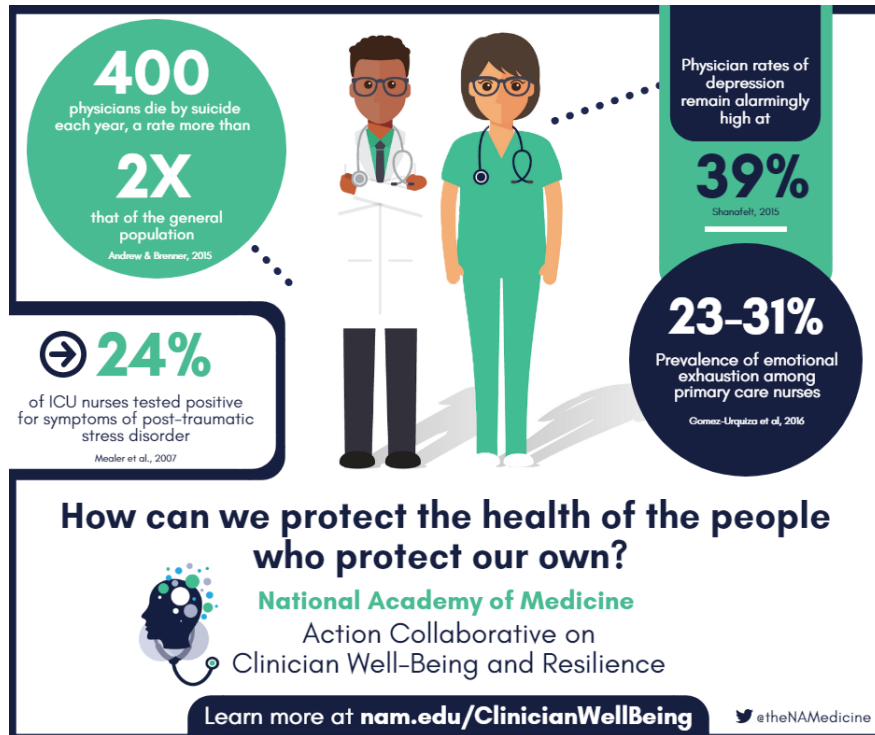




# Prevalence of Burnout

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# Prevalence of Burnout in Healthcare



35-54% of nurses, physicians

45-60% of medical residents

46-61% of pharmacists

# Burnout in Pharmacy Practice

Is the tank half-full or half-empty?



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# Evidence for Burnout in Pharmacy Practice

## **46-61% of pharmacists suffer from burnout**

- Less extensively reviewed compared to nurses or physicians

## **No studies have evaluated the prevalence of burnout in technicians**

- One study included technicians (n=185), but did not explicitly report burnout rates

# Burnout Prevalence Across Disciplines

Specialty	Burnout rate, %	No. of participants (response rate, %)
Army health care providers <sup>20,a</sup>	69.8	53 (33)
General surgery resident physicians <sup>18</sup>	69	665 (—)
PGYI physicians <sup>19</sup>	68	31 (60)
Rural physician assistants <sup>21</sup>	64	161 (11.3)
Hospital clinical pharmacists (current study)	60.8	1077 (14.7)
Neurosurgeons <sup>3</sup>	57	783 (24)
Clinical oncologists <sup>22</sup>	45	1490 (50)
Infectious diseases physicians <sup>23</sup>	44	1840 (46)
Pharmacy practice faculty <sup>24</sup>	41.3	758 (32.7)
General surgeons <sup>1</sup>	40	7905 (32)
Transplant surgeons <sup>25</sup>	38	259 (35)
Emergency medicine physician assistants <sup>26</sup>	35.6	160 (40.3)
Gynecologic oncologists <sup>27</sup>	32	369 (34)
Emergency medicine physicians <sup>28</sup>	32	193 (43)
Plastic surgeons <sup>29</sup>	29	505 (71)
Orthopedic surgeons <sup>30</sup>	28	264 (24)
Surgical oncologists <sup>31</sup>	28	549 (36)
Neonatal intensive care unit providers <sup>32,b</sup>	26	2073 (62.9)
Neonatal critical care physicians <sup>32</sup>	15	204 (—)
Ophthalmologists serving as department chairs <sup>33</sup>	9	101 (77)

# Burnout Assessment of Inpatient Clinical Pharmacists

## Prospective, cross-sectional study

- Included 974 clinical hospital pharmacists in the US

## Results:

- 61% of respondents were burned out
- 51% either neutral or dissatisfied with their work/life balance

Burnout indices	Median score	Number (%)
Emotional exhaustion	28	—
Low score ( $\leq 18$ )		231 (23.7)
Moderate score		228 (23.4)
High score ( $\geq 27$ )		515 (52.9)
Depersonalization	6	—
Low score ( $\leq 5$ )		443 (45.5)
Moderate score		213 (21.9)
High score ( $\geq 10$ )		318 (32.6)
Personal accomplishment	34	
Low score ( $\leq 33$ )		477 (49.0)
Moderate score		396 (40.7)
High score ( $\geq 40$ )		101 (10.3)
Burned out	—	596 (61.2)

# American Society of Health-System Pharmacists (ASHP) Well-Being and Resilience Survey

## Preliminary data

- 76% of pharmacists reported job-induced stress
- 46% of pharmacists reported experiencing burnout

# Cross-Sectional Survey of French Community Pharmacies

**Included 1,141 pharmacists (65%) and 181 technicians (14%)**

- 56.3% of respondents met criteria for burnout
- 10.5% of respondents were considered to have severe burnout
- Depression found in 15.7% of respondents
- Anxiety found in 42.4% of respondents



# Evidence for Burnout in Health-System Pharmacists

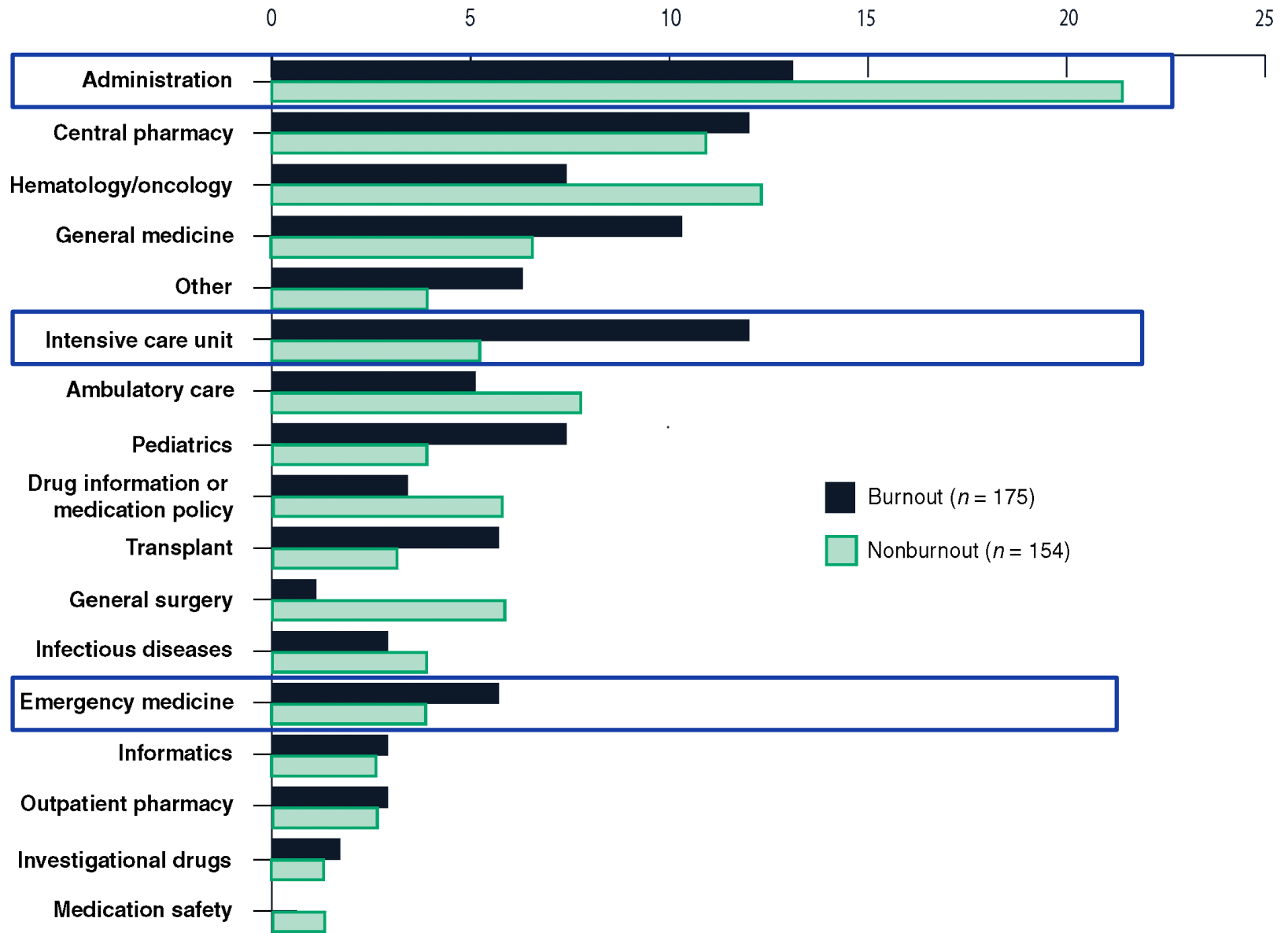
## **Prospective, multicenter, cross-sectional cohort survey study**

- Measured by MBI-HHS (n=329)

## **Results:**

- 53% reported a high degree of burnout
  - 68% with emotional exhaustion
  - 60% felt reduced personal accomplishment
  - 38% exhibited effects of depersonalization

# Burnout in Various Pharmacist Roles



# **Factors Associated with Burnout**

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# How Does Burnout Happen?

**Burnout occurs when an individual does not have adequate time to recover from workplace stress**

Over time, the continual stress contributes to the symptoms associated with emotional exhaustion, depersonalization, and reduced personal accomplishment

# Key Areas of Impact

1. Finding meaning in work is a protective factor against burnout
2. Each of the listed areas can be impacted positively or negatively
3. Collectively contribute to or mitigate burnout



# Organizational Risk Factors for Burnout

## Job Demands

- Excessive workload
- Unmanageable work schedules
- Inadequate staffing
- Workflow, interruptions, and distractions
- Inadequate technology usability
- Moral distress

## Job Resources

- Organizational culture
- Alignment of values and expectations
- Job control, flexibility, and autonomy
- Rewards
- Professional relationships
- Work-life integration

# Which of the following are organizational factors that may be contributing to Dr. J's burnout?

- A. A new computer system was implemented, and Dr. J feels that because of redundancies her workload has nearly doubled
- B. Dr. J's district manager focuses almost entirely on metrics and is always calling to ask why she is not meeting her store goals
- C. Corporate policy states that pharmacists can only be late 3 times per year before punitive action and must clock-out for a 30-minute lunch
- D. Dr. J's best technician just quit, adding to the list of employees that have left in the past 5 years
- E. A new pharmacist just started, but he has a negative attitude and is rude to customers – for which Dr. J has to apologize constantly

Answers: A + B + D + E

# Individual Risk Factors for Burnout



Young



Female



Practicing for < 15 years



Single



> 60 hours per week



On-call responsibilities



Too many non-clinical duties



Contributions underappreciated



# Which of the following risk factors does Dr. J have for burnout?

- A. Female
- B. 30+ years of practice
- C. Working 65 hours a week
- D. 56 years old

## Demographics

**Age:** 56

**Gender:** Female

**Experience:** > 30 years

**Avg. week:** 65 hours

Answers: A + C

# Well-Being and Resilience Strategies to Reduce and Prevent Burnout

Filling the tank

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## EXTERNAL FACTORS

### SOCIO-CULTURAL FACTORS

- Alignment of societal expectations and clinician's role
- Culture of safety and transparency
- Discrimination and overt and unconscious bias
- Media portrayal
- Patient behaviors and expectations
- Political and economic climates
- Social determinants of health
- Stigmatization of mental illness

### REGULATORY, BUSINESS, & PAYER ENVIRONMENT

- Accreditation, high-stakes assessments, and publicized quality ratings
- Documentation and reporting requirements
- HR policies and compensation issues
- Initial licensure and certification
- Insurance company policies
- Litigation risk
- Maintenance of licensure and certification
- National and state policies and practices
- Reimbursement structure
- Shifting systems of care and administrative requirements

### ORGANIZATIONAL FACTORS

- Bureaucracy
- Congruent organizational mission and values
- Culture, leadership, and staff engagement
- Data collection requirements
- Diversity and Inclusion
- Level of support for all healthcare team members
- Professional development opportunities
- Scope of practice
- Workload, performance, compensation, and value attribution to work elements

### LEARNING/PRACTICE ENVIRONMENT

- Autonomy
- Collaborative vs. competitive environment
- Curriculum
- Health IT interoperability and usability/Electronic health records
- Learning and practice setting
- Mentorship
- Physical learning and practice conditions
- Professional relationships
- Student affairs policies
- Student-centered and patient-centered focus
- Team structures and functionality
- Workplace safety and violence

Stigmatization of mental illness

Documenting and reporting requirements

Collaborative vs competitive environment

Professional relationships

Flexibility and ability to respond to change

Physical, mental, and spiritual well-being

Work-life integration

Resilience

## INDIVIDUAL FACTORS

### HEALTH CARE ROLE

- Administrative responsibilities
- Alignment of responsibility and authority
- Clinical responsibilities
- Learning/career stage
- Patient population
- Specialty related issues
- Student/trainee responsibilities
- Teaching and research responsibilities

### PERSONAL FACTORS

- Inclusion and connectivity
- Family dynamics
- Financial stressors/economic vitality
- Flexibility and ability to respond to change
- Level of engagement/connection to meaning and purpose in work
- Personality traits
- Personal values, ethics and morals
- Physical, mental, and spiritual well-being
- Relationships and social support
- Sense of meaning
- Work-life integration

### SKILLS AND ABILITIES

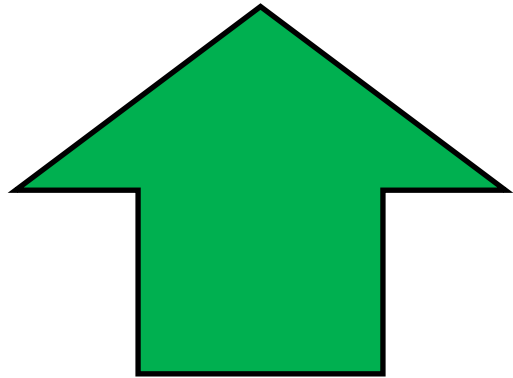
- Clinical Competency level/experience
- Communication skills
- Coping skills
- Delegation
- Empathy
- Management and leadership
- Mastering new technologies or proficient use of technology
- Mentorship
- Optimizing work flow
- Organizational skills
- Resilience
- Teamwork skills



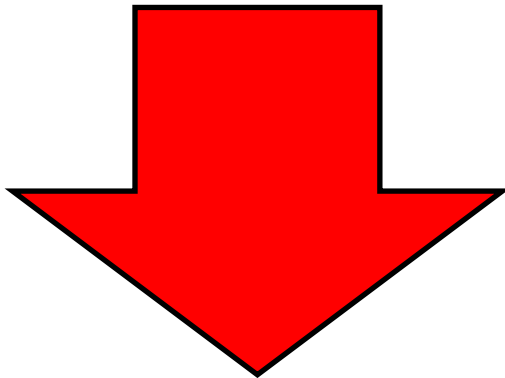
NATIONAL ACADEMY OF MEDICINE

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# Mitigating Burnout



Improve Well-Being  
and Resilience



Prevent and  
Reduce Burnout

# Well-Being

Psychological state of physical, emotional, spiritual, environmental, occupational, financial, and social wellness that is subject to change from moment to moment

## Defined by:

- Presence of positive emotions and moods
- Absence of negative emotions
- Satisfaction with life and fulfillment
- Positive functioning

## Well-being can be achieved by:

- Implementing new programs and policies
- Improving work environment



# Resilience

Dynamic process that relies on past and future experiences to overcome, or 'bounce back' through adversity

## Defined by:

- Skills, behaviors, and attitudes that contribute to personal physical, emotional, and social well-being

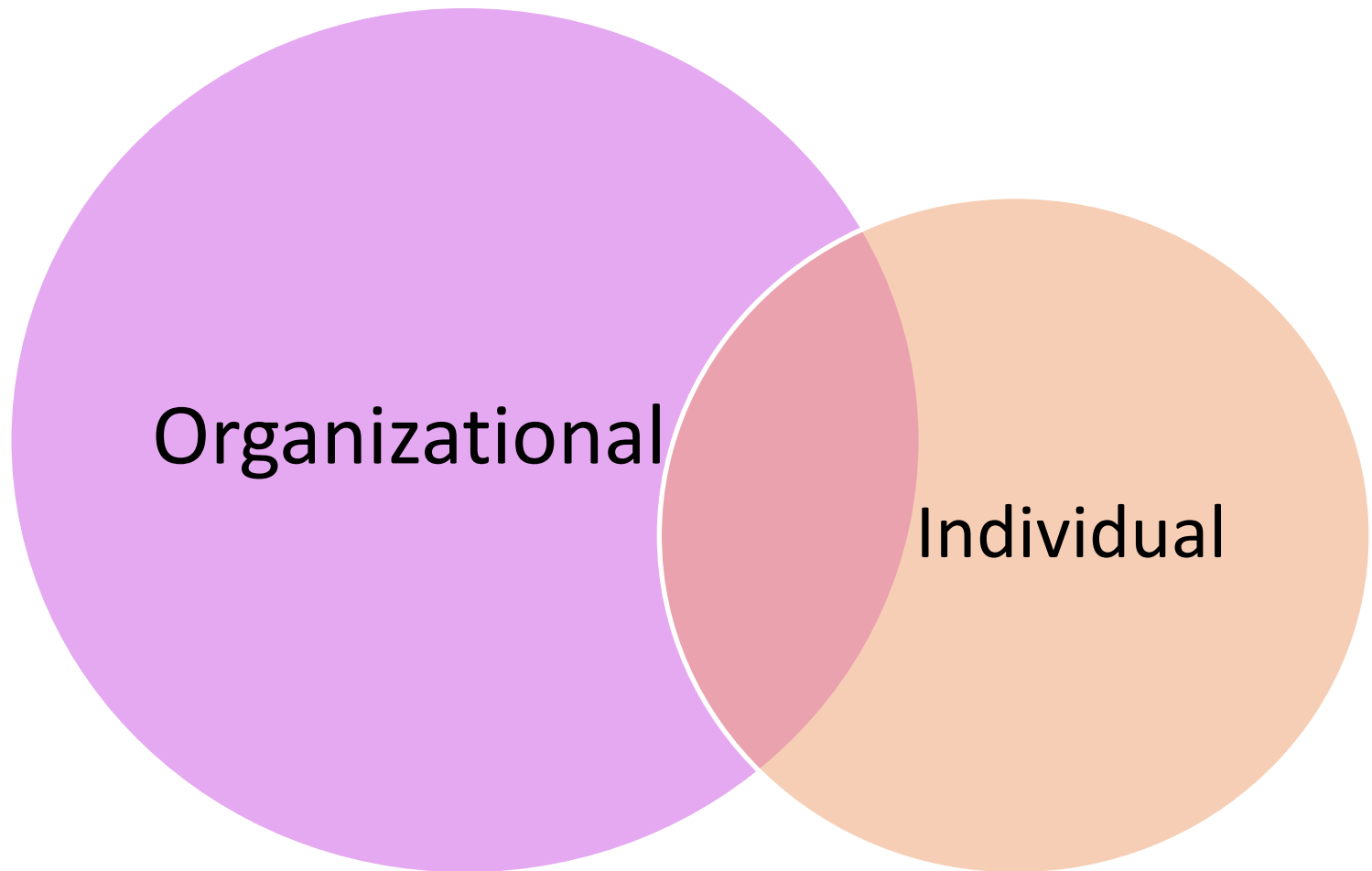
## Resiliency can only be developed by the individual:

- Resilience training can foster development



# **Interventions to Promote Well-Being and Resilience and Mitigate Burnout**

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# Organizational Strategies to Reduce and Prevent Burnout

Upgrading the Fuel Tank



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# Organizational Interventions

- Main drivers of burnout are attributed to the system, not the individual
- Dedicating resources to these strategies can reduce burnout and promote well-being and resilience



Acknowledge and assess the problem



Harness the power of leadership



Develop and implement targeted work unit interventions<sup>a</sup>



Cultivate community at work



Use rewards and incentives wisely



Align values and strengthen culture



Promote flexibility and work-life integration



Provide resources to promote resilience and self-care



Facilitate and fund organizational science



Acknowledge and assess the problem

## **Encourage open communication about burnout**

- Less than half (45%) of pharmacists feel comfortable telling their supervisors about feeling burned out

## **Integrate education on burnout and well-being and resilience strategies**

- New employee orientation/on-boarding process

## **Measure and assess prevalence of burnout**

## **Assess any implemented programs or strategies for effectiveness**



Cultivate community at work

## **Create a positive work environment and a culture of learning**

- Engagement on a professional and personal level

## **Facilitated group discussions decrease burnout**

- Opportunity to share experiences that may be stressful and/or traumatic

## **Mentorship**

- A strong mentor-mentee relationship can help identify burnout and provide opportunities to improve well-being and develop resiliency skills



Use rewards and incentives wisely

## **Provide Recognition**

- Provide specific affirmation that is sincere and timely
- Feeling appreciated → Job satisfaction → Retention/productivity

## **Match effort with recognition and reward**

- Effort-Reward Imbalance (ERI) associated with burnout in nurses
- Less stress and improved well-being reported when effort is matched with recognition and reward

# Recognition Examples at Beaumont

**Cheers for Peers!** <sup>1,A</sup>

**The HeART of Health Care** <sup>1,B</sup>

**Saluting Our Stars** <sup>2,B</sup>

**Applause** <sup>3,B</sup>

**Take A Bow** <sup>3,B</sup>



<sup>1</sup> Royal Oak

<sup>2</sup> Farmington Hills, Grosse Pointe, Royal Oak, Troy

<sup>3</sup> Dearborn, Taylor, Trenton, Wayne

<sup>A</sup> Pharmacy Department

<sup>B</sup> Hospital-wide



Promote flexibility and work-life integration

## Flexibility for pharmacists

- Engagement in a variety of professional opportunities and practice responsibilities
- Spending a greater proportion of time on the most fulfilling part of work significantly reduced rates of burnout in physicians

## Work-Life Balance vs Work-Life Integration

### Balance

Describes the importance of adequate time dedicated to both professional and personal life

Insinuates a 50/50 split between 'work' and 'life'

Set up for failure

### Integration

Alludes to the fluidity of time and energy spent on professional and personal life

True 'balance' is unattainable

Reiterates flexibility and adaptability



Provide resources to promote resilience and self-care

## Absence/unawareness of available resources is significantly associated with pharmacist burnout

- Implementation of organization-wide well-being and resilience initiatives has not been well-established

## Access to well-being and resilience resources may be limited and/or underutilized

Study	n	Burnout (%)	Access (%)	Utilization (%)
Durham, et al. (2018)	329	53.2%	17.3%	4%
ASHP Survey (2019)	-	46.0%	<40%	25%

## Contributory factors may include:

- Aversion due to stigma
- Perception that such programs are ineffective or unhelpful



# Personal Strategies to Promote Well-Being and Resilience

Filling the Tank



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# Mindfulness

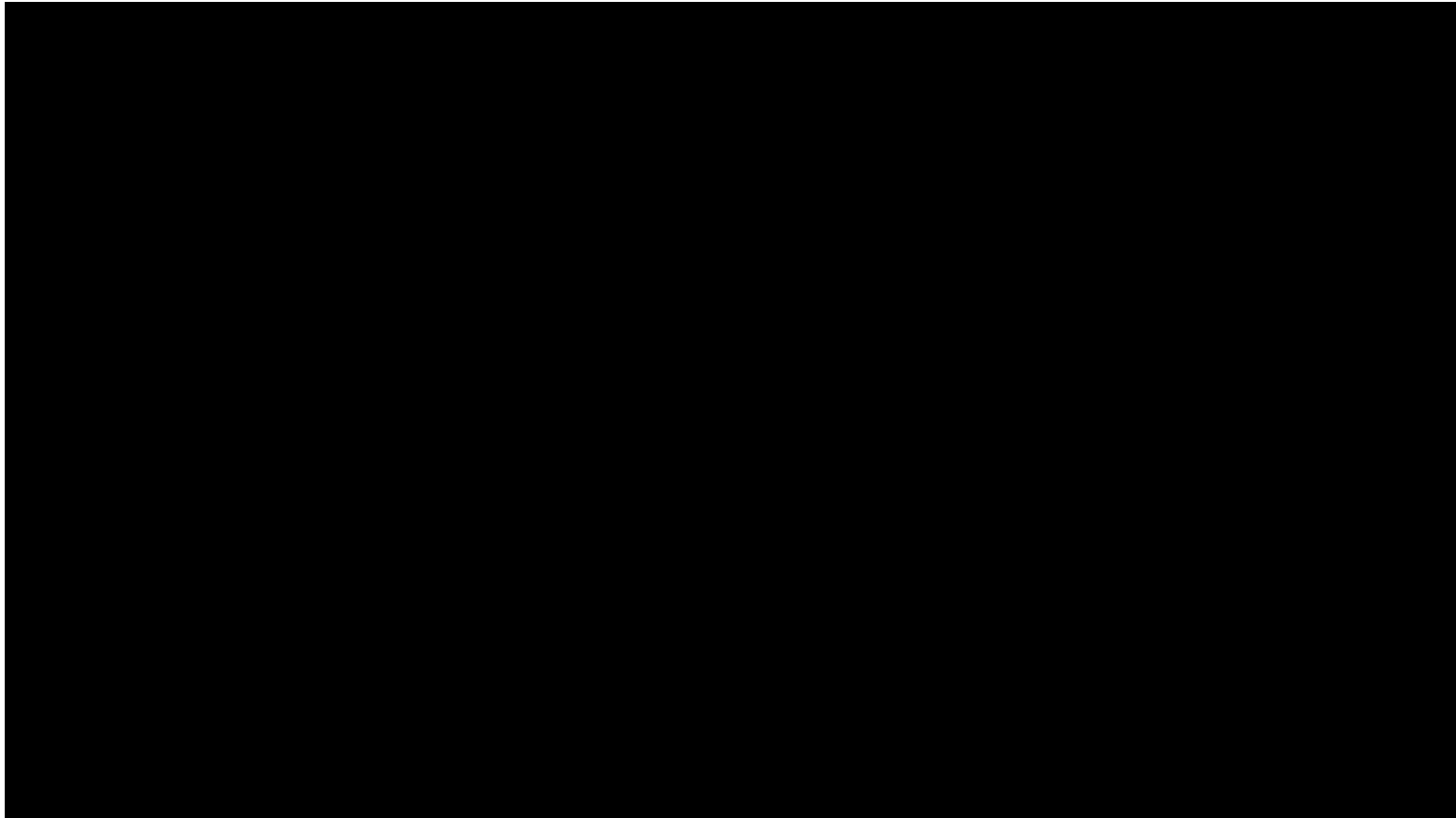
One of the most studied interventions to reduce burnout, build resilience, and improve clinician well-being

*“Moment-to-moment awareness, cultivated by paying attention in a specific way, in the present moment”*

*“Creating a moment where the mind and the body are in the same place at the same time”*



# *Mindfulness as a Superpower*



# Evidence for Mindfulness in Healthcare

## **Demonstrated benefit in physicians, medical residents and students, nurses and nursing students**

- Significant reduction in perceived stress and anxiety
- Significant reduction in emotional exhaustion and depersonalization

## **Pharmacists and student pharmacists**

- Mindfulness reported as source of satisfaction and fulfillment
- Mindfulness significantly lowers distress

# Purposeful Pause

*Mindfulness technique conducted by intentionally pausing for 30 seconds or so.*

**How:** Take some calming breaths and feel your body – noticing any tension and allowing your body to relax with each breath cycle. Then establish an intention to come to the next activity or interaction with presence and care.

**Best For:** A quick reset when you are stressed.

**Benefits:** Allows you to bring yourself back to the present moment and helps realign your focus to the task at hand.

**Example:** During hand-washing, stand still and pause. Pay attention to the moment; reaching for the soap, spreading it on your hands; the motion, the feel of the soap, the temperature, the texture. Stay with the experience and not your thoughts.

# The Escape Artist

*Mindfulness technique conducted by physically removing yourself from a situation.*

**How:** Recognize yourself in an overwhelming situation and step away from it. As you move away, acknowledge the emotions that you feel and then let them pass. Use your breathing or the sensation of walking as your focus point.

**Best For:** Handling a high stress environment with many distractions.

**Benefits:** Allows you to escape and reconnect your body and mind.

**Examples:** Go to the bathroom, get a drink of water, go for a short walk.

# The 45 Second Timeout

*Mindfulness technique conducted by pausing to acknowledge and process emotional experiences*

**How:** Pause and reflect. Ask yourself, what am I feeling right now? Why am I feeling this way? Tell yourself, it's normal that I have these feelings. Then let those feelings pass with each exhaled breath.

**Best For:** Emotionally charged experiences such as the death of a patient, a long-stressful day, or anxiety about something in the future.

**Benefits:** Allows closure after an emotional experience and revitalizes the mind to give its attention to the current moment.

**Examples:** Before class to focus your attention or after a stressful day to process and let pass the emotional burden of the day.

# Sleep

Adequate sleep is imperative for proper functioning and physiologic restoration

## Sleep loss affects:

- Personal well-being
- Ability to learn
- Professionalism
- Task performance
- Personal relationships

### National Sleep Foundation Recommendations

Age Group	Recommended Duration
Young Adults (18-25)	7-9 hours
Adults (26-64)	7-9 hours
Older Adults (≥ 65)	7-8 hours

Hirshkowitz, M. et al. *Sleep Health: Journal of the National Sleep Foundation*. 2015;1(4):233.



# Physical Health

## Physical Activity

- Reduces the risk of prolonged stress responses
- Medical residents and fellows experienced improved quality of life and less burnout with an incentivized exercise program

## Yoga

- Improvements in stress, mindfulness, self-compassion, and resilience
- Better moods, improved physical functions, and increased energy levels

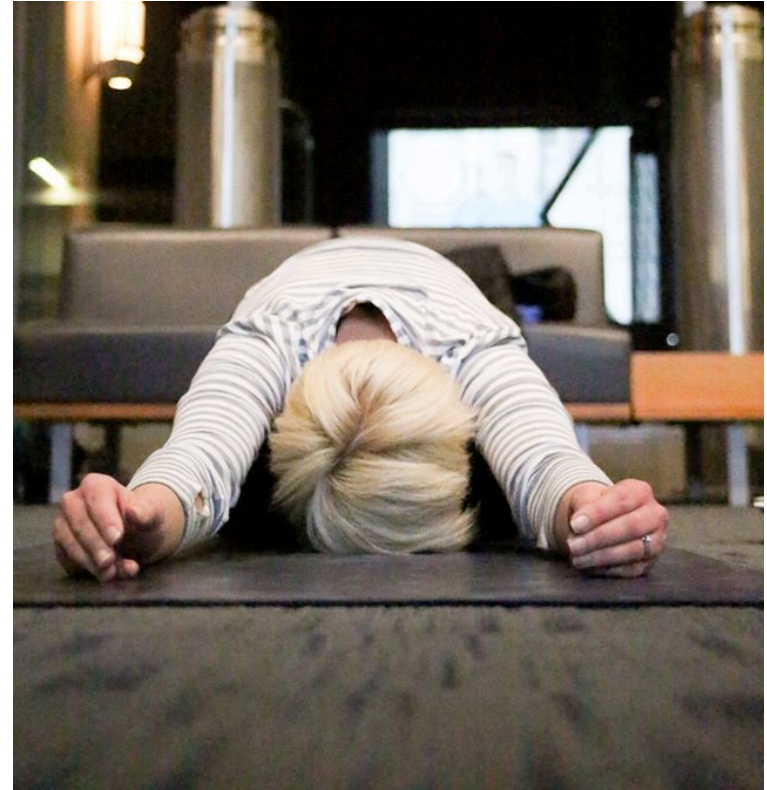


Photo permissions: Lexi Baskin, PharmD Candidate 2021

# Time Away from Work

**Burnout is characterized by inability to recover from stress of work-related events**

- Pharmacists (72%) feel that too many hours worked is a major stressor

**Working longer hours associated with:**

- Higher perceived stress scores
- Greater depression and hostility

**Time Away from work:**

- Provides time to practice self-care and well-being activities
- Utilize the provided time off to prevent burnout and improve well-being



<https://absolutehealth.com/cucumbers-on-your-eyes-cure-puffiness/>

# Organization

## **Eliminate clutter**

- Clutter has profound effect on mood and self-esteem

## **Maintain a detailed calendar that works for you**

- Schedule essential personal responsibilities before work obligations on your calendar

# Find Meaning Outside of Work

**One of the most beneficial strategies to mitigate burnout and improve well-being and resilience**

- Helps break ‘workism’ ideology

**Ways to find meaning outside of work:**

- Find hobbies
- Engage in pleasurable activities
- Participate in professional organizations
- Spend time with friends and family

# Time Management

**Allow personal values, strengths, and desires determine where to spend time**

**Know your boundaries**

- Yes to one thing means no to something else or less effort somewhere else

***‘Essentialism’***

# Empathy and Self-Compassion

## Development of self-compassion:

- Improves empathy and patient outcomes
- Associated with greater well-being and resilience

## Empathy and understanding helps breaks stigma

## Importance of taking care of our own mental health

# Maintain Positivity

## **Positivity potentiates emotional well-being and resilience**

- Positivity is contagious

## **Gratitude: Three Good Things**

- What three things am I most grateful for?
- What three things did I do well today?

## **The Five-Minute Rule**

- When upset, spend exactly 5 minutes on venting negativity
- Complain, moan, yell or whatever you need to do
- Once the five minutes are over, accept it and move on

# Future Directions

1. Methodologically strong studies are necessary to **elucidate the best strategies** to combat the healthcare burnout crisis
2. Dedicated **funding to well-being and resilience** programs and initiatives will be necessary to operationalize organizational interventions
3. Continued **collaboration** across disciplines



# Summary

- Mitigating clinician burnout and supporting professional well-being is essential to providing high-quality patient care
- Interventions should target known factors that contribute to clinician burnout
- Individual-focused strategies can be an effective part of larger organizational efforts, but do not sufficiently address the work system factors that contribute to clinician burnout

# Additional Resources

Resource	Access
<b>ASHP Well-Being &amp; You</b> American Society of Health-System Pharmacists statements on clinician well-being, well-being and resilience resources, webinars, and information related to pharmacist burnout. Resources free to non-members.	<a href="https://wellbeing.ashp.org/">https://wellbeing.ashp.org/</a>
<b>ASHP Connect: Clinician Well-Being and Resilience</b> American Society of Health-System Pharmacists member community for sharing clinician well-being and resilience resources.	<a href="https://connect.ashp.org/home">https://connect.ashp.org/home</a>
<b>Clinician Well-Being Knowledge Hub</b> National Academy of Medicine resource for information on clinician burnout, causes and effects of burnout, and potential solutions in the form of white papers, discussion pieces, and case studies. Free access.	<a href="https://nam.edu/clinicianwellbeing/">https://nam.edu/clinicianwellbeing/</a>
<b>APhA Well-Being</b> Resources to beat burnout/build resiliency, as well as consensus recommendations for enhancing well-being and resilience among the workforce. Available to APhA members only.	<a href="https://www.pharmacist.com/well-being/well-being-resources?is_sso_called=1">https://www.pharmacist.com/well-being/well-being-resources?is_sso_called=1</a>
<b>Well-Being Index Survey</b> American Pharmacists Association resource to screen yourself for fatigue, depression, burnout, anxiety/stress, and well-being. Allows you to track over time to see progress.	<a href="https://app.mywellbeingindex.org/account_setup">https://app.mywellbeingindex.org/account_setup</a>

# Additional Resources

Resource	Access
<b>Headspace</b> Brief audio-visual meditations for work, sleep, focus, stress, and anxiety. Clinical research on content has been conducted and is available online. Courses available with subscription. Free basic features.	<a href="https://www.headspace.com/">https://www.headspace.com/</a>
<b>Calm</b> Mobile app for sleep, meditation, and relaxation. Easy to use interface. In-app purchases. Free basic features. Additional resources available online.	<a href="https://www.calm.com/">https://www.calm.com/</a> <a href="https://www.calm.com/blog/mindfulness-resources">https://www.calm.com/blog/mindfulness-resources</a>
<b>Insight Timer</b> Collection of community-compiled meditations for free use. In-app purchases available.	<a href="https://insighttimer.com/">https://insighttimer.com/</a>
<b>PFC 103: Incorporating Mindfulness into Clinical Practice</b> Institute for Healthcare Improvement Open School course to learn how to practice mindfulness in the healthcare setting. Eligible for pharmacist CPE.	<a href="http://www.ihl.org/education/IHIOpenSchool">http://www.ihl.org/education/IHIOpenSchool</a>
<b>Bwell</b> Beaumont employee wellness department. Resources available for six dimensions of well-being: career, community, emotional, financial, physical, and social. Classes offered to employees in yoga, mindfulness, meditation, and many other areas.	<a href="https://www.experiencebeaumont.com/us/en/health/Pages/bwell.aspx">https://www.experiencebeaumont.com/us/en/health/Pages/bwell.aspx</a>
<b>Beaumont Employee Assistance Program (EAP)</b> Resources for coaching and work-life integration. Counseling opportunities by EAP therapists to all employees.	<a href="https://www.experiencebeaumont.com/us/en/life-work/pages/eap.aspx">https://www.experiencebeaumont.com/us/en/life-work/pages/eap.aspx</a>

*“Through collective action and targeted investment, we can not only reduce burnout and promote well-being, but also help clinicians carry out the sacred mission that drew them to the healing professions – providing the very best care to patients.”*

Victor J. Dzau

President

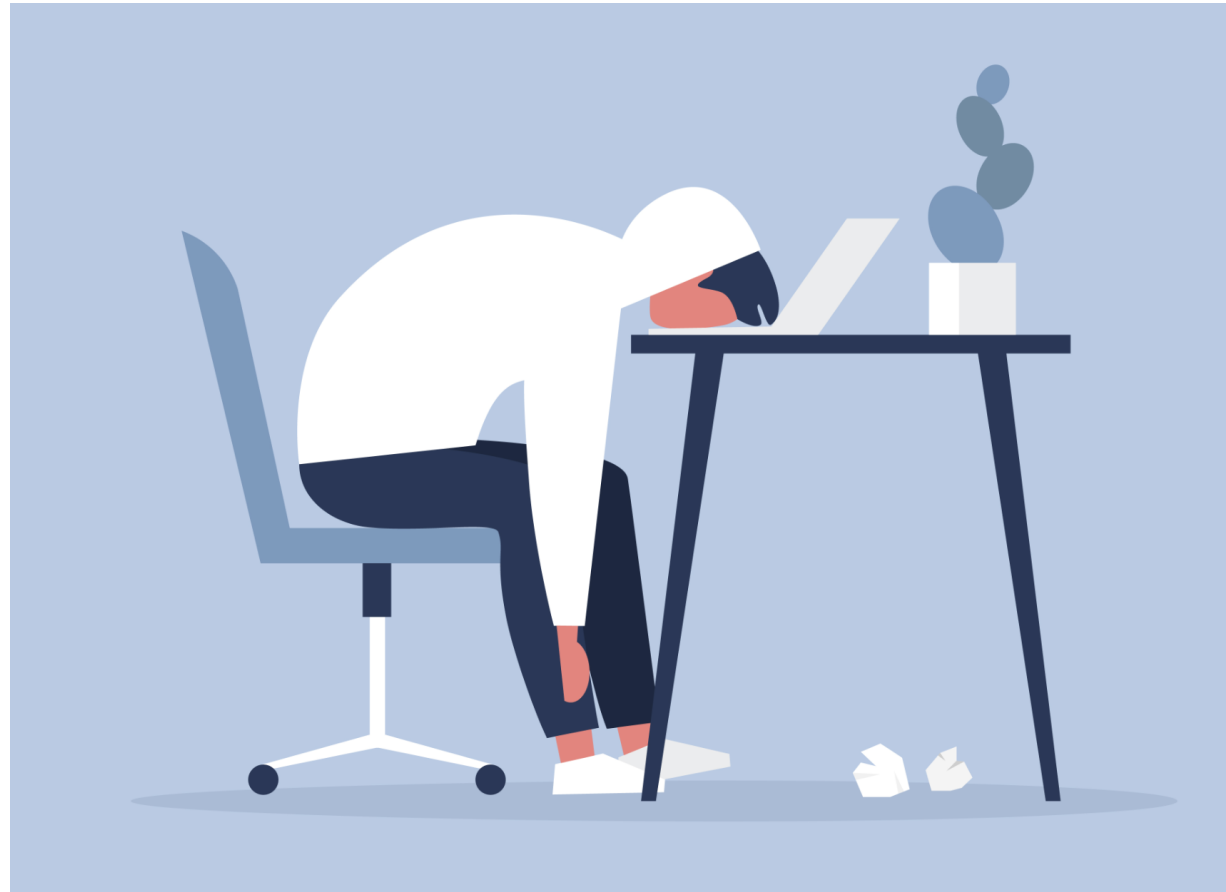
*National Academy of Medicine*

# Questions?

Please email me!

I'd love to hear your thoughts  
and answer any questions.

**Jordan.potter@beaumont.org**



<https://insights.dice.com/2019/06/03/burnout-now-official-medical-condition/>

# CE Codes

Pharmacist

D8SRB5

Technician

J5UCRB

# Running on 'E': Understanding and Addressing Burnout in Pharmacy Practice



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May 20, 2020