**GME Wide & Program Specific Initiatives to Strengthen a Culture of Well-Being**

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### Introduction: Background

**National Drivers for Well-Being**
- Burnout National Safety/Quality/Workforce Issue
- ACGME Common Program Requirements
- CLER (Clinical Learning Environment Review)
- National Academies of Medicine (NAM) action collaborative on clinical well-being and resilience

**GME Action Plan**
- **Strategic Plan:** GME leaders convened a GMEC retreat to develop a well-being strategic plan with key system leaders attending
- **Needs Assessment:** Prior to the retreat each residency & fellowship program completed ACGME’s Inventory of Elements of Your Program’s Well-Being Plan & GME office completed the Inventory of Elements of Your Institutional Well-Being Plan
- Each program director and the DIO presented key findings + action plan from inventory with cross-cutting themes identified

### AIM/Purpose/Objectives

- To serve as well-being system leaders through the development of clear GME protocols and procedures
- To identify and provide GME specific and system wide resources/support to physicians in
- To improve resident and faculty well-being through program specific initiatives

### Methods: Interventions/Changes

- Aligned our GME Well-Being Strategic Priorities with selected drivers of burnout and engagement in physicians per Shanafelt & Noseworthy (Mayo Clin Proc. 2017;92(1):129-146)
- Program-Level interventions
- GME-Wide interventions
- System-Wide: How to align/utilize Aurora Legacy and now Advocate Aurora Health resources, leadership groups, partnerships

### Methods/Results: Progress to Date

<table>
<thead>
<tr>
<th>Drivers</th>
<th>Program Specific</th>
<th>GME-Wide</th>
<th>Aurora Legacy /AAH</th>
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</thead>
<tbody>
<tr>
<td>Workload and Job Demands</td>
<td>OB/GYN Restructuring Weekend - Overnights</td>
<td>Revise Faculty Contracts to reflect education roles</td>
<td>Contracts Aligned with Medical Grp Policies</td>
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<td>Efficiency and Resources</td>
<td>Appoint Well Being Director</td>
<td>Access to Confidential Behavior Health Services</td>
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<tr>
<td>Social Support and Community at Work</td>
<td>Radiology Redesign Journal Club / Lectures</td>
<td>Contract and Implement Mayo Well Being Index (WBI)</td>
<td>Partner with System Leaders</td>
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<td>Work-Life Integration</td>
<td>FM Resource ½ Days</td>
<td>GME Lounge at all Sponsoring</td>
<td>WBI Implemented System Wide</td>
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<td></td>
<td>IM Wellness Challenges</td>
<td>Quarterly ½ Days Well-Being</td>
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**Legend:**
- ✓ = Completed; ✓ = In Progress; = Beginning

### Methods/Results: Measures/Metrics

**Goal:** To use existing data sets and/or add well-being items to existing initiatives to support benchmarking to local/national data

<table>
<thead>
<tr>
<th>Metric</th>
<th>Process</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>ACGME well-being program inventory submitted by all program 2x/yr for review at GMEC</td>
<td>✓</td>
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<tr>
<td>Annual Program Evaluation (APE) section on well-being</td>
<td>✓</td>
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<tr>
<td>Program Specific Tracking (FM ½ resource utilization; IM Participation Rates; Ob/GYN Well Being Check in Cards)</td>
<td>✓</td>
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<tr>
<td>GME wide end of rotation evaluation form includes well-being item</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Annual Press Ganey Engagement Survey Items related to well-being</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Well-Being Index</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>ACGME Resident/Faculty Survey Items</td>
<td>✓</td>
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### Discussion: Barriers & Strategies

**Barriers**
- **Concern Faculty Burnout:** GME initiatives have been primarily geared towards residents/fellows
  - **Strategy:** Initiatives attend to everyone’s well-being
- **Resources:** Ability to move GME initiatives forward
  - **Strategy:** Prioritize and align Legacy Aurora and Legacy Advocate initiatives under AAH Academic Affairs leaders
- **Mindset Change:** “Physician heal thyself.”
  - **Strategy:** Promoting evidence that focusing on better clinician and caregiver well-being leads to better patient care outcomes

**Next Steps and Sustainability**
- Share what people do on quarterly well-being ½ days
- Host an NI-VI ½ Team Meeting (with Dinner) for all program team and GME team leaders
- Collect and monitor data (including APE section) for program sustainability and to determine future steps consistent with PDSA cycle improvements