

Conceptualizing Physician Wellness: Lessons from the US

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A CENTURY OF SAVING LIVES
MILLIONS AT A TIME

JOHNS HOPKINS
BLOOMBERG SCHOOL
OF PUBLIC HEALTH

Why Physician Wellness?

“Physicians are important citizens of health care systems, and evidence indicates that many physicians are unwell.”

“When physicians are unwell, the performance of the health care system can be suboptimum.”

Wallace, Lemaire & Ghali. (2009). Physician wellness: A missing quality indicator. *The Lancet*. 374:1714-21.



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On the term “Wellness”

Health is the state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.

– World Health Organization

(Well-being includes) the quality of their relationships, their positive emotions and resilience, the realization of their potential, or their overall satisfaction with life...It generally includes global judgments of life satisfaction and feelings ranging from depression to joy.

- Centers for Disease Control & Prevention (CDC)



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What we will achieve today

- Heighten awareness of the concepts surrounding job dissatisfaction, burnout, and wellness in physicians;
- Analyze underlying factors based on presented case studies;
- Link our understanding with our past professional experiences;
- Collectively identify the most important factor/scenario that is influencing physician wellness in Vietnam today.



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We are discussing a potentially sensitive topic. Some ground rules:

- Maintain confidentiality within group
- Treat others' contributions with respect
- Listen to others without interruptions
- Keep personal issues out of the discussions
- Keep to the time given for activities



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Activity 1a – 4 minutes

Turn to your neighbor on the right.

Spend 2 minutes each discussing the question:

“What motivated you to join the medical profession?”

Generate as many answers as possible, and write them on a piece of paper.



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Activity 1b – 4 minutes

Turn to your neighbor on the left.

Spend 2 minutes each discussing the question:

“What makes you happy in your profession?”

Generate as many answers as possible, and write them on a piece of paper.



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Activity 1c – 4 minutes

Turn to your neighbor in front of you.

Spend 2 minutes each discussing the question:

“What makes you unhappy in your profession?”

Generate as many answers as possible, and write them on a piece of paper.



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Activity 1d – 10 minutes

Form a group of 4-5 with people around you.

Based on Activities 1a-c, choose one answer that the group agrees on for each of the questions:

- “What motivated you to join the medical profession?”
- ”What makes you happy in your profession?”
- “What makes you unhappy in your profession?”

Write your answers on the post-it’s provided.



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Job dissatisfaction and burnout in physicians are real.

FIGURE 1. Meta-Analysis of Male Physicians' Suicide Rate Ratios in 24 Studies^a

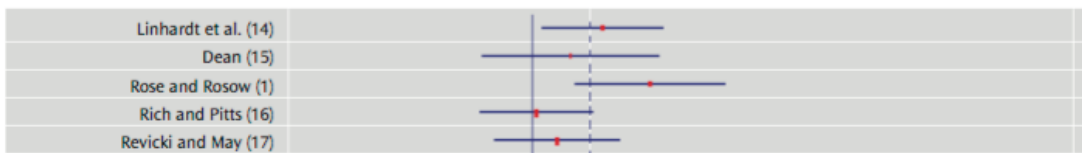
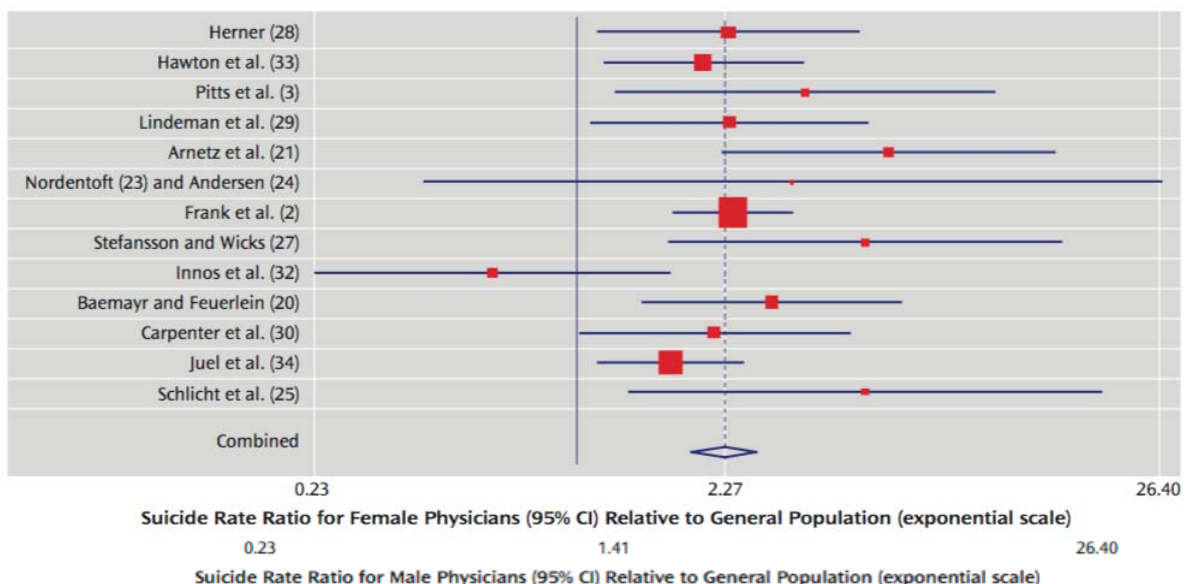


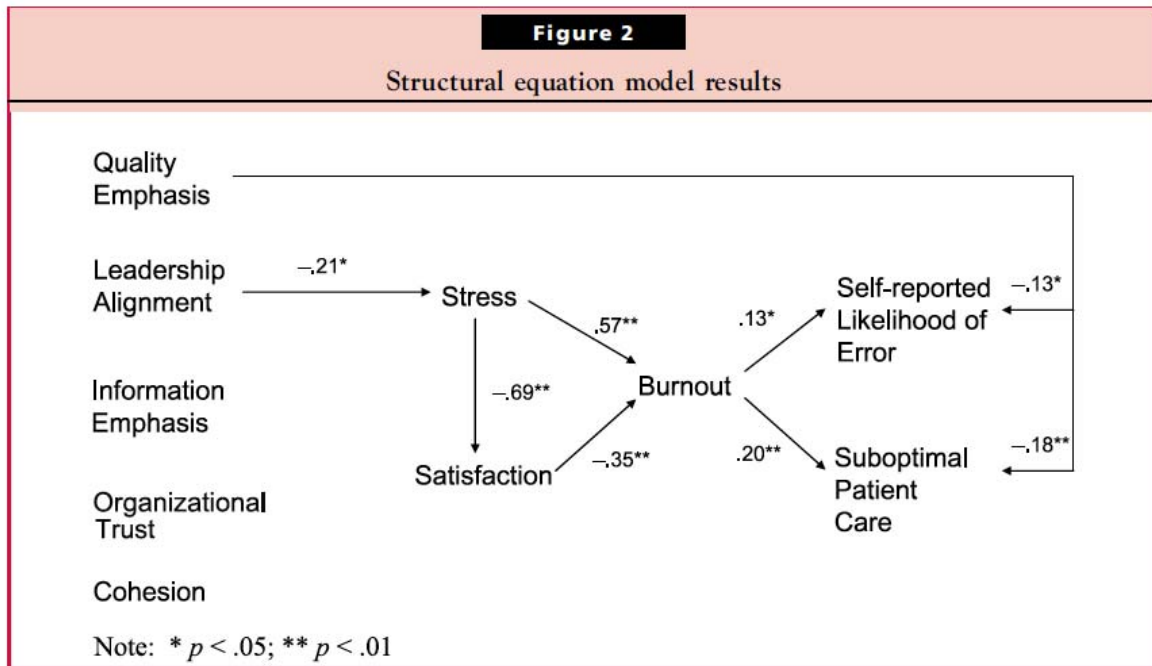
FIGURE 2. Meta-Analysis of Female Physicians' Suicide Rate Ratios in 13 Studies^a



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Clinical Impact of Burned Out Physicians



management review, 33(1), 29-39.

Williams, E. S., Manwell, L. B., Konrad, T. R., & Linzer, M. (2007). The relationship of organizational culture, stress, satisfaction, and burnout with physician-reported error and suboptimal patient care: results from the MEMO study. *Health care management review, 32*(3), 203-212.



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Financial Impact of Physicians Leaving

(B) Actual Costs Calculated from Primary Data (Above)

Work Group	Best Case: Using Pareto LC (\$)				Worst Case: Using Linear LC (\$)			
	To Hire	To Train	CoRP	Totals	To Hire	To Train	CoRP	Totals
Physicians	2,057,608	89,800	1,556,240	3,703,648	2,057,608	89,900	3,287,816	5,435,324
Nurses	426,735	4,130,325	1,573,047	6,130,107	426,735	4,130,325	3,660,786	8,217,846
Allied health personnel	190,800	420,555	1,076,165	1,687,520	190,800	420,555	2,837,885	3,449,240
Technical staff	107,570	491,970	1,155,680	1,755,220	107,570	491,970	2,987,780	3,587,320
Support	135,564	1,065,078	298,146	1,498,788	135,564	1,065,078	2,486,130	3,686,772
Administrators or managers	67,896	897,900	1,501,830	2,467,626	67,896	897,900	3,961,092	4,926,888
Totals	2,986,173	7,095,628	7,161,108	17,242,909	2,986,173	7,095,728	19,221,489	29,303,390

Cost to train new physicians is a fixed cost. CoRP considers only the first year of employment and is shown using both linear and Pareto LCs where $f(0) = 0.5$. All calculations in B are derived from A, multiplying individual costs by number of new hires. In B, costs to hire and costs to train are unaffected by choice of Learning Curve (LC) for calculation of CoRP. "Best case" total turnover cost in B was calculated using a Pareto LC and "worst case" used a Linear LC.

Waldman, J. D., Kelly, F., Aurora, S., & Smith, H. L. (2004). The shocking cost of turnover in health care. *Health care management review, 29*(1), 2-7.



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How do we compare with the evidence?

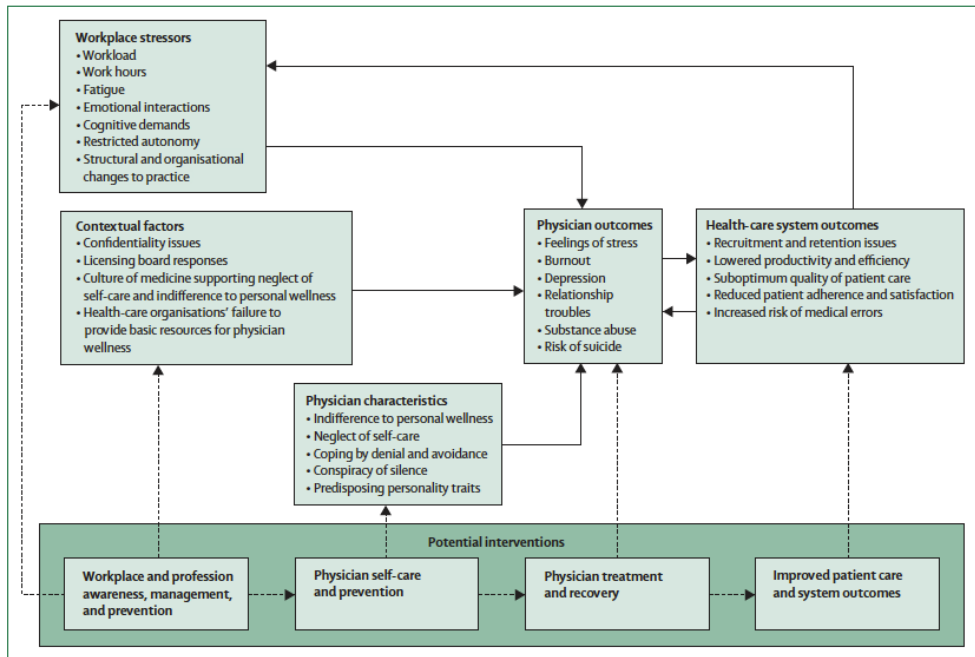


Figure: A model of physician ill health and the links with health-care system outcomes, and potential interventions to improve physician and system outcomes. Solid lines are empirically supported; broken lines are potential links.

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Case study 1 – EHR adoption in primary care

The two physicians who owned (a primary care) clinic made the EHR selection decision without input from employees including other providers. The planning process was autocratic, leading to disengagement first by providers and then by other employees following their example....

Hummel & Evans. (2012). EHR implementation with minimal practice disruption in primary care settings.
<https://www.healthit.gov/sites/default/files/ehr-implementation-wirec.pdf>



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Activity 2a

In your group of 4-5, spend 7 minutes:

- 1) Listing all possible factors why the implementation was less than ideal;
- 2) Discussing the psychological or organizational impact each factor/situation had on the physician.



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Case study 2 – Kimberly Hiatt



TWEET f SHARE (9,253)

Cristina Byvik

Fatal mistakes

<http://www.vox.com/2016/3/15/11157552/medical-errors-stories-mistakes>



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Activity 2b

In your group of 4-5, spend 7 minutes:

- 1) Listing each situation that affected the psychological state of Kimberly Hiatt;
- 2) Discussing what should have been done differently by her colleagues and/or employer.



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What is the most pressing factor affecting physician wellness in Vietnam now?



Session Evaluation

Please write in English on a piece of paper:

1. One most clear point.
2. One least clear point.
3. What was “good” in the lecture.
4. What you would like changed in the lecture.



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The background of the lower section is a faded, light-colored photograph of the Johns Hopkins Bloomberg School of Public Health building. The building features classical architecture with large columns and a pediment. The text 'SCHOOL OF HYGIENE' and 'PUBLIC HEALTH' is visible on the facade.

**Comments, thoughts, questions?
Thank you!**

Feel free to contact me at:

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