Resilience Rules the Day!

Dr. Jochen Profit received his medical degree from the Albert Ludwigs University, Freiburg, Germany. He completed pediatric residency training at Tufts University, and fellowships in neonatal-perinatal medicine and health services research at Harvard. From 2005 to 2013, Dr. Profit served as Assistant Professor of Pediatrics at Baylor College of Medicine. In 2013, he joined the faculty at Stanford University School of Medicine, where he continues his research.

Dr. Profit’s primary research interests are measuring and improving the quality of neonatal and pediatric health care delivery, with a focus on enhancing organizational effectiveness. He has received federal and intramural support for his research. Dr. Profit has served as a member of the National Quality Forum’s Steering Committee on National Voluntary Consensus Standards for Perinatal Care and on the National Priorities Partnership Action Team. He has also been a member of the American Academy of Pediatrics Section on Perinatal Pediatrics Technical Committee on Neonatal Quality Improvement. Dr. Profit has published in the areas of quality measurement and improvement, financial incentives, and cost-effectiveness, and has also given workshops, symposia, and other scientific presentations on his work.

NICQ Symposium, Friday, October 2, 2015
Resilience Rules the Day!
Objective: Advance understanding of the impact of caregiver resilience and its relationship with NICU safety.
Resilient NICUs
Jochen Profit MD, MPH

While you are waiting...
Send a nice note to a loved one

Resilient NICUs
Jochen Profit MD, MPH
Assistant Professor of Pediatrics
Stanford University
California Perinatal Quality Care Collaborative

Conflicts of interest

• Dr. Profit is Co-PI of the WISER Study testing the effectiveness of a multi-faceted intervention program to improve caregiver resilience
NICHD – 1 R01 HD084679-01

Take home points

• Caregiver burnout is a major problem for quality improvement
• Positive psychology tools have been successful in relieving burnout
• We are conducting a trial of simple to use tools to reduce burnout in health care and
• YOU CAN JOIN

What is Burnout

• High and sustained levels of stress resulting in
  – irritability
  – fatigue
  – detachment
  – cynicism
• Hallmark features
  – emotional exhaustion
  – depersonalization
  – reduced sense of personal accomplishment

Burnout ≠ Lazy

Burnout is common among physicians in the United States, with an estimated 30% to 40% experiencing burnout.

JAMA, May 18, 2011—Vol 305, No. 19

Physician Burnout
A Potential Threat to Successful Health Care Reform

Excessive workload, lack of recognition of accomplishments, and work-life balance—these are major contributors to burnout. Health care reform does contain some provisions that may reduce physician stress. For example, removing insurance barriers to treatment of psychologic conditions, facilitating medication coverage, and streamlining insurance claims are all positive features of health care reform that are likely to improve patient care and reduce physician burnout and stress.
Burnout in the NICU setting and its relation to safety culture

- Burnout mean = 26%
- Burnout inversely related to safety culture
- Burnout is contagious

Only nurse burnout was associated with UTI and surgical site infection. Hospitals in which burnout was reduced by 30% had a total of >6,200 fewer infections for an annual cost saving of up to $68 mio.

Fixing Burnout Using Positive Psychology

Lies. ALL LIES.
Active Destructive Responding
Finding the bad in the good: where you find the cloud in the silver lining

Passive Destructive Responding
Not caring at all about their news

Passive Constructive Responding
Not making a big deal out of it

Active Constructive Responding
Reacting positively, being interested and caring about their news.

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Active Constructive Responding

Maintain eye contact / smile / touch / laugh

- Don’t overdo the praise and positive feedback (it can make people feel uncomfortable/patronized)
- Concentrate on asking questions which encourage the person to talk about their good news, savor their positive emotions
- If this type of active and constructive response does not come easily to you try to ask at least three questions

Maintain eye contact / smile / touch / laugh

Time Remaining: 00:00

Three good things

http://www.youtube.com/watch?v=dwkDE4gFBA
Seligman, Steen, Park & Petersen, 2005

1. [5] Three Good Things Exercise, Day 9: What went well today, and what was your role in making it happen.

<table>
<thead>
<tr>
<th>Good Thing #1</th>
<th>Good Thing #2</th>
<th>Good Thing #3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note to give the reference for Big Three executing chores</td>
<td>A new system for the surgery team that made it more efficient and cost-effective</td>
<td>Enjoying a good book</td>
</tr>
<tr>
<td>n = 75</td>
<td>n = 75</td>
<td>n = 75</td>
</tr>
<tr>
<td>Positive emotions, positive attitudes, positive actions</td>
<td>Positive emotions, positive attitudes, positive actions</td>
<td>Positive emotions, positive attitudes, positive actions</td>
</tr>
<tr>
<td>Three Good Things (n = 75)</td>
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</tbody>
</table>
Nov 2012 - 3 Good Things

- 90 initiated exercise
- 61 completed at least 7 days

Significantly less:
1. Burnout
2. Depression
3. Communication breakdowns resulting in delays
4. Challenged in dealing with difficult colleagues
5. Taking work home to complete after hours

Significantly more:
1. Happiness

Resilience Before and After 3 Good Things

Resilience Before and After 3 Good Things

<table>
<thead>
<tr>
<th>Variable</th>
<th>Pre (Day 1)</th>
<th>Post (Day 15)</th>
<th>P</th>
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</thead>
<tbody>
<tr>
<td>Burnout</td>
<td>56.9%</td>
<td>47.5%</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Happiness</td>
<td>67.8%</td>
<td>72.5%</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>W-L Balance</td>
<td>2.17</td>
<td>1.96</td>
<td>.014</td>
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</tbody>
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N=56 (NICU = 39, PICN = 7, PICU = 8, Other = 2). Pre/post differences (days 1 and 15), paired samples t-test

3GT - Stanford Cohort (2/2014)

Joining WISER

- September 2016 – 6 month intervention
- Web-based roll out, brief learning sessions (10 min) followed by behavioral interventions (over 2 weeks)
- Positive Psychology Tools
  - Gratitude Letters
  - Three Good Things
  - Deliberate Acts of Kindness
  - Active constructive responding/Cultivating Awe
  - Signature Strengths
  - Difficult colleagues

The Two Wolves Cherokee Legend

An old Cherokee is teaching his grandson about life. “A fight is going on inside me,” he said to the boy.

“Which wolf will win?” The old Cherokee simply replied.

The boy answered, “The one you feed.”

The grandson thought about it for a minute and then asked his grandfather.

Thank you

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