



Objectives - Pharmacist

- 1 Define burnout, well-being, and resilience
- Explain why clinician burnout is a patient care and healthcare workforce problem
- Discuss the impact of COVID-19 on well-being and resilience
- Identify strategies to improve well-being and resilience in the pharmacist workforce





Objectives - Pharmacy Technician

- 1 Define burnout, well-being, and resilience
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- Discuss the impact of COVID-19 on well-being and resilience
- Identify strategies to improve well-being and resilience in the pharmacy technician workforce



Burnout,
Well-being, and
Resilience Defined

Well-being and Resilience

Well-being

- The presence of positive emotions and moods
- The absence of negative emotions
- Satisfaction with life, fulfillment and positive functioning
- Physical well-being

Resilience

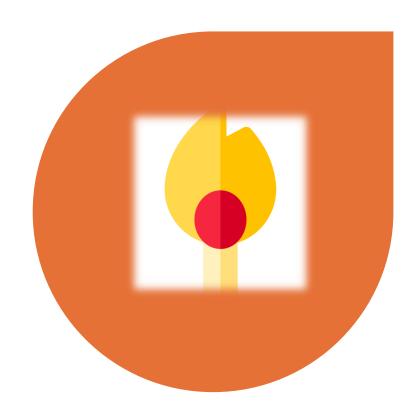
 Set of individual skills, behaviors, and attitudes that contribute to physical, emotional, and social well-being, including the prevention of burnout

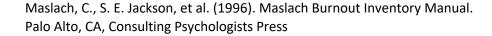


Burnout

Syndrome of:

- Depersonalization
- Emotional exhaustion
- Low personal accomplishment







An Occupational Phenomenon

- World Health Organization International Classification of Diseases
- ICD-11 presented at World Health Assembly in May 2019
 - States "burnout syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed"
 - Specific to the occupational context, not to be applied to describe other areas of life (e.g. medically, home-life)
 - Effective January 1, 2022





National Pharmacist Workforce Study

- Primary objective: collect demographic characteristics, work contributions and quality of work-life of pharmacist workforce in the US during 2019
- New: workplace discrimination and harassment, opioid-related practice issues, and pharmacist retirement during 2019
- New: assessed job burnout and professional fulfillment
 - Fulfillment
 - High in community independent and hospital settings
 - Work exhaustion
 - High in community chain, mass merchandiser, and supermarket settings
 - Interpersonal disengagement





National Pharmacist Workforce Study - Burnout

Fulfillment

- I feel happy at work
- I feel worthwhile at work
- My work is satisfying
- I feel in control when dealing with difficult problems at work
- My work is meaningful to me
- I'm contributing professionally in ways I value most

Work Exhaustion

- I feel...
- a sense of dread when I think about work I have to do
- Physically exhausted at work
- Lacking in enthusiasm at work
- Emotionally exhausted at work

Interpersonal Disengagement

- I feel...
- Less empathetic with my patients
- Less empathetic with my colleagues
- Less sensitive to others' feelings/emotions
- Less interested in talking with my patients
- Less connected with my patients
- Less connected with my colleagues





Pharmacy Workforce

Hospitals / Health-systems	Community Practice	Clinical Pharmacy
Purpose : Assess levels of and risk factors for burnout in health-system pharmacists	Purpose : Assess prevalence and risk factors for occupational burnout in community pharmacists	Purpose : Characterize level of and identify factors associated with burnout in clinical pharmacists
Methods: Maslach Burnout Inventory Human Services Survey distributed to health-system pharmacists	Methods: Maslach Burnout Inventory Human Services Survey distributed to community pharmacists	Methods: prospective, cross- sectional pilot study utilizing
Results: 329 surveys analyzed; 175 (52.2%) reported scores of a high degree of burnout in at least one MBI-HSS subscales; emotional exhaustion (22.9%), depersonalization (6.2%), and reduced personal accomplishment (36.3%)	Results: 411 surveys analyzed; 308 (74.9%) reported scores of a high degree of burnout in at least one MBI-HSS subscales; emotional exhaustion (68.9%), depersonalization (50.4%), and reduced personal accomplishment (30.7%)	Results: 974 surveys analyzed; rate of burnout (61.2%), mostly emotional exhaustion. Predictors: too many nonclinical duties, inadequate teaching/administration time, difficult pharmacist colleagues, contributions unappreciated

Burnout: Pharmacy Residents

- Stress and negative affect levels surveyed in PGY1 & PGY2s
- Those working > 60 hours/week reported higher levels of stress, depression, and hostility
- Perceived stress for pharmacy residents was significantly higher than in comparably aged adults and similar to medical residents
- When pressures of being overworked > resident's ability to cope, well-being is in danger



ASHP Survey Details



4,090 pharmacist members completed entire survey



33% clinical pharmacist 11% residents



36% have at least 20 years of professional practice



74% of pharmacists are satisfied with their current job



Most form part of interprofessional care teams and 86% feel valued by colleagues, particularly by physicians and nurses



Interprofessional Care

Role on interprofessional care team

85% work as part of an interprofessional care team

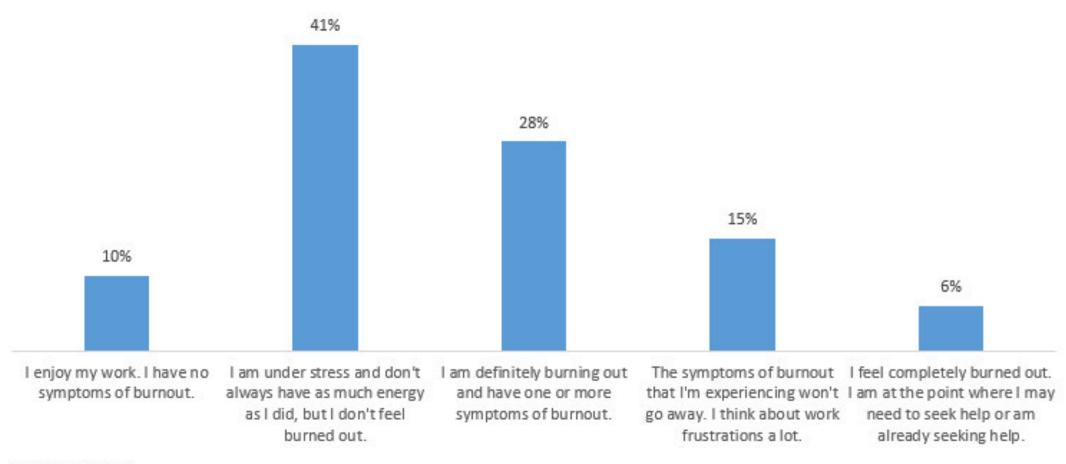
- High performing team qualities

 Shared goals (76% good/optimal) and Mutual trust (72% good/optimal)
- Working at fullest potential on team 65% agree or strongly agree
- Meaningful interactions

 Largely with physicians, nurses, and administrative staff
- Alignment with leadership values
 62% agree or strongly agree



Burnout Self-Reported: Pharmacists



Sample size: 4,862





"My patient load in ICU went from 16 to 28 daily without additional support when the team split into 2 teams and I still have to cover both teams."

- Pharmacist Survey Respondent

- Over the past 12 months (March 2020 March 2021):
 - 33% rate their mental health as good/very good
 - 27% rate their mental health as not good at all
 - 88% attribute mental health to pandemic either partially or significantly
 - 31% have a renewed sense of meaning/purpose in work
 - 42% are optimistic about the future





In the next six months:

- 19% intend to leave their position; 18% are undecided
- 3% intend to leave the pharmacy profession; 10% are undecided

Comments from survey respondents:

"Workload exceeds number or hours in the day. [There is a] **lack of support**/caring from home office." "As a director - too many demands - placed upon RX leadership - feel like a squashed sandwich - between keeping Staff satisfied and C-Suite metrics in check with all other financial demands. No one cares about management!"

"No support from immediate supervisor for maintaining work life balance."



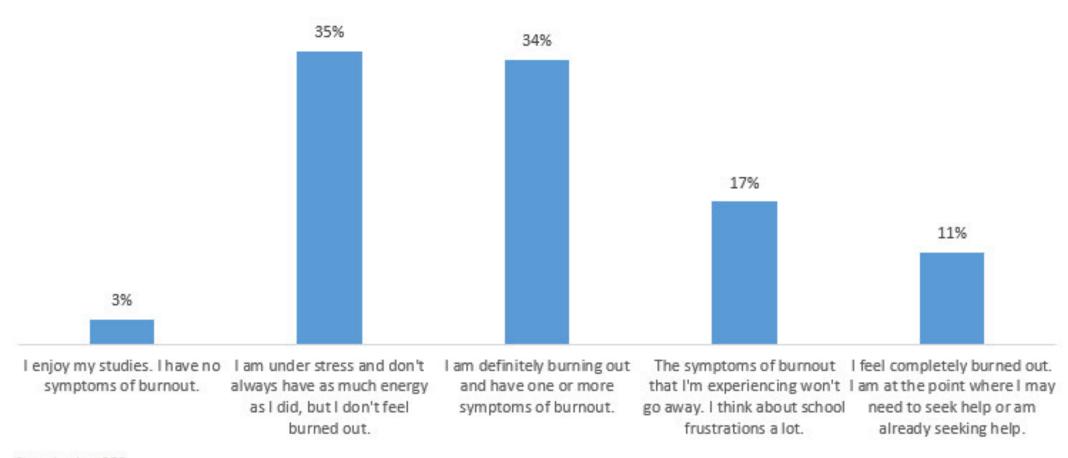
- More than half of executive level (51%) and pharmacy department (56%) leadership recognize the risk of burnout
- Yet only a third are prioritizing employee wellbeing to the best extent possible (33% v. 38%)
- More than two thirds of pharmacists (68%) feel a great deal of stress due to their job
- 44% have marginal/poor control over their workload (+5% increase from 2018)
- More than a third (35%) do not feel comfortable telling their supervisor about feelings of burnout

"Providing adequate staffing and workload expectations [would help me with my well-being and resilience during the pandemic]."

Pharmacist Survey Respondent



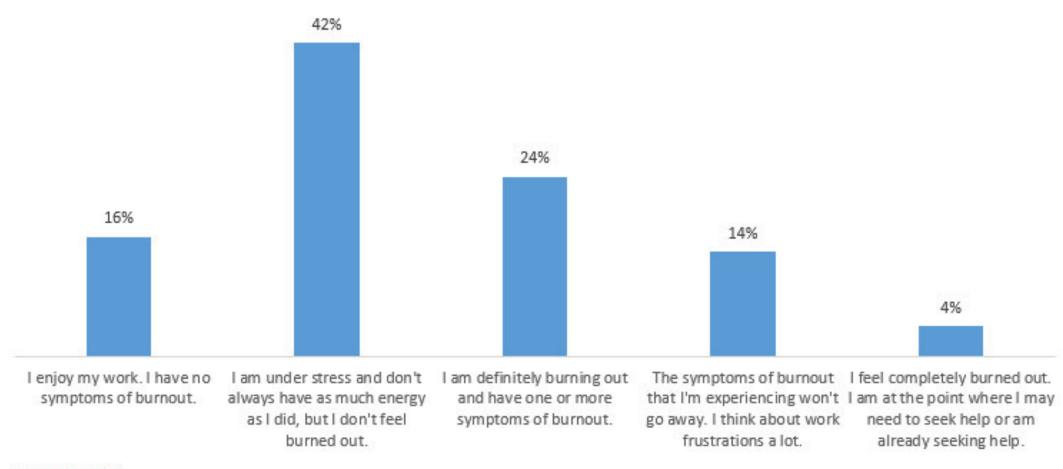
Burnout Self-Reported: Student Pharmacists







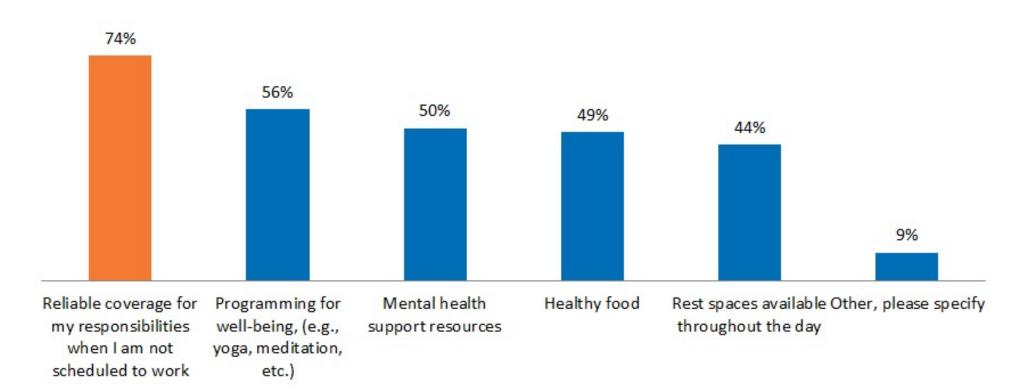
Burnout Self-Reported: Pharmacy Technicians



Sample size: 407



The following employer-provided and ASHP resources would help support me with my well-being and resilience during the pandemic:



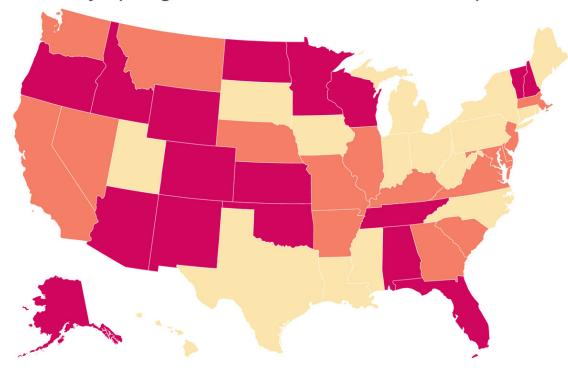


"The doctors are not all right"

- June 2021 Vox The Aftermath series
- 2021 Kaiser Family Foundation and Washington Post Frontline Health Care Workers
 - 6 in 10 reporting pandemic stress has harmed mental health
 - 3 in 10 have considered leaving healthcare
 - > 50% self-reported burnout
- Barriers for healthcare practitioners to access mental health services
 - Time, Location
 - Mandatory Reporting to State Boards
 - Stigma, Fear

In 33 states, license boards are asking doctors about their mental health

Does not ask mental health questions ■ Only asks about conditions currently impairing doctors ■ Asks broader mental health questions



As of July 2020

Source: The Emotional PPE Project



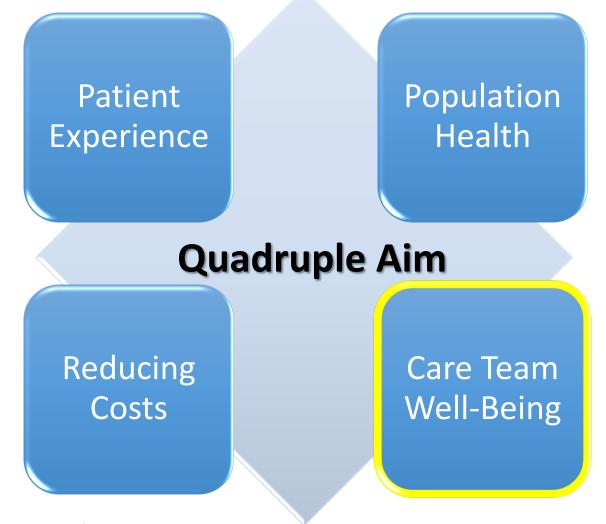
Key Drivers of Burnout in Healthcare Professionals

Risk Factor	Example
Workload	Job demands exceeding human limits; limited time to rest, recover, and restore
Control	Role conflict; absence of direction in the workplace
Reward	Inadequate financial, institutional, or social reward in the workplace; lack of recognition
Community	Inadequate opportunity for quality social interaction at work; inadequate development of teams
Fairness	Perception of inequity from an organization or leadership
Values	Organizational values are incongruous with an individual's personal values or beliefs
Job-person incongruity	Personality does not fit or is misaligned with job expectations and coping abilities



Clinician Burnout as a **Patient Care &** Healthcare Workforce **Problem**

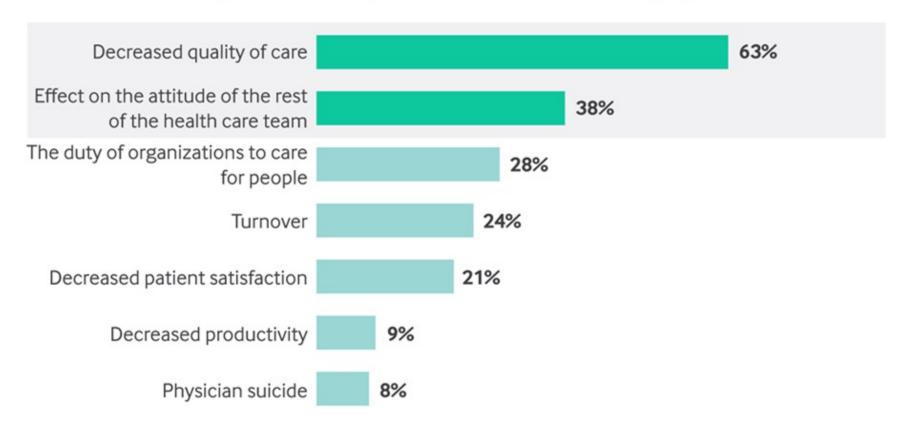
Burnout is a Patient Care Problem





Top Reasons to Address Physician Burnout

What are the top two most important reasons to address physician burnout?



Base = 570 (multiple responses)

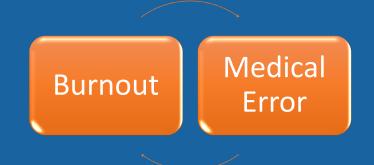


Decreased Quality of Care is a Top Reason to Address Burnout – According to Patients



- Recent national survey of more than 2,000 Americans found:
 - 8 out of 10 have heard that burnout is a problem among healthcare professionals
 - About 77% are concerned for their safety when clinicians appears burnt out
 - Nearly 80% believe care quality may decrease when their pharmacist or other healthcare provider is burnt out
 - Total of 91% believe its important that their pharmacists or clinician take measures to avoid burnout

Burnout and Patient Safety



- A systematic review of 46 studies found significant correlation between poor well-being in health care professionals and worsening patient safety
- Multiple studies demonstrate relationship between medical errors and worsening burnout & depressive symptoms (i.e. second victim phenomenon)



Consequences of Burnout

There are many consequences of burnout:

CLINICIANS AND LEARNERS

- Occupational injury
- Problematic alcohol use
- Risk of depression and suicide
- Career regret
- Suboptimal professional development

HEALTH CARE ORGANIZATIONS

- Fewer available staff (absenteeism and turnover)
- Lower morale and productivity
- Presenteeism (working while sick)
- Threat to organizational reputation

\$4.6 BILLION

Estimated societal costs attributable to burnout in the United States each year.

BURNOUT LOWERS PATIENT CARE QUALITY:

- Resulting staffing challenges decrease patients' access to care.
- High workloads, administrative burdens, and poorly designed technologies divert clinicians' time away from patient care.
- Workplace ethical dilemmas can erode clinician professionalism.
- Barriers to patient-clinician communication adversely affect patient satisfaction and health outcomes.
- Safety incidents, medical errors, and malpractice claims are more likely.

National Academy of Medicine

Action Collaborative on Clinician Well-Being and Resilience

PERSPECTIVE

COLLECTIVELY CONFRONTING THE CLINICIAN-BURNOUT CRISIS

To Care Is Human — Collectively Confronting the Clinician-Burnout Crisis

Victor J. Dzau, M.D., Darrell G. Kirch, M.D., and Thomas J. Nasca, M.D.

"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"



Collaborative Composition and Commitments

- 36 sponsoring organizations, 100 network organizations
 - Professional organizations
 - Government
 - Technology and EHR vendors
 - Large health care centers
 - Payors

190 commitment statements

- A venue for sponsors & network organizations to share plans on addressing and promoting clinician well-being and resilience.
- https://nam.edu/initiatives/clinician-resilience-and-well-being/commitment-statements-clinician-well-being/





National Academy of Medicine Action Collaborative on Clinician Well-Being & Resilience

Phase I-II (2017 to 2020): Building a Community around Clinician Well-Being

- Improve baseline understanding of challenges to clinician well-being
- Raise visibility of clinician stress and burnout
- Elevate evidence-based, multidisciplinary solutions that will improve patient care by caring for the caregiver

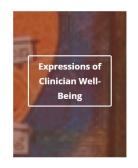
Resources from the Clinician Well-Being Collaborative











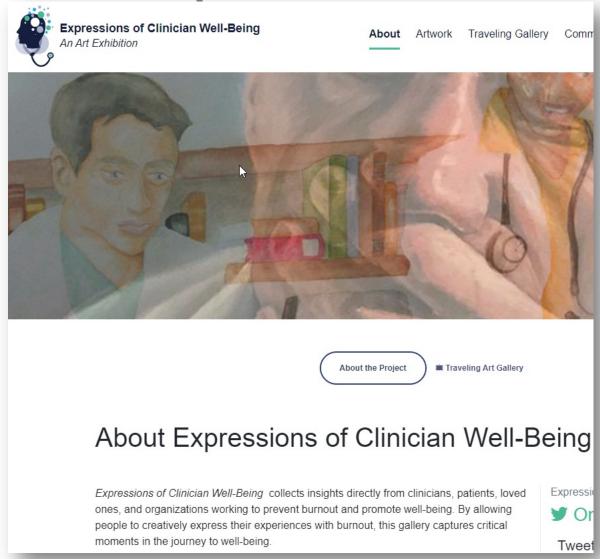
National Academy of Medicine Action Collaborative on Clinician Well-Being & Resilience

Phase III (2021-2022): Creating a National Strategy and Social Movement

- Working Group on A National Strategy for Clinician Well-Being
- Working Group on Implementing Tools to Improve Clinician Well-Being
- Working Group on Navigating the Impacts of COVID-19 on Clinician Well-Being

^{*}Learn more https://nam.edu/initiatives/clinician-resilience-and-well-being/

NAM Expressions of Well-Being





"Don't Slip"
Elizabeth Canterbury, PharmD



ASHP Vision and Strategic Plan



Strategic Priorities and Goals

- Our Patients and Their Care
 - Goal 4: Improve Patient Care by Enhancing the Well-Being and Resilience of Pharmacists, Student Pharmacists, and Pharmacy Technicians
- Our Members and Partners
- Our People and Performance



2018 ASHP Policy

CLINICIAN WELL-BEING AND RESILIENCE

Source: Council on Education and Workforce Development

To affirm that burnout adversely affects an individual's well-being and healthcare outcomes; further,

To acknowledge that the healthcare workforce encounters unique stressors throughout their education, training, and careers that contribute to burnout; further,

To declare that healthcare workforce well-being and resilience requires shared responsibility among healthcare team members and between individuals and organizations; further,

To encourage individuals to embrace well-being and resilience as a personal responsibility that should be supported by organizational culture; further,

To encourage the development of programs aimed at prevention, recognition, and treatment of burnout, and to support participation in these programs; further,

To encourage education and research on stress, burnout, and well-being; further,

To collaborate with other professions and stakeholders to identify effective preventive and treatment strategies at an individual, organizational, and system level.

A RESILIENT PHARMACY WORKFORCE

Burnout affects today's pharmacists, residents, student pharmacists, and pharmacy technicians at unprecedented rates. A pharmacy workforce with the ability to thrive during adversity — a resilient workforce — is essential to combat burnout and support safe, high-quality patient care.

BURNOUT

Characterized by emotional exhaustion, cynicism, and/or a low sense of personal accomplishment



Affects pharmacists, residents, students, and technicians

53% of health-system pharmacists surveyed reported a high degree of burnout*



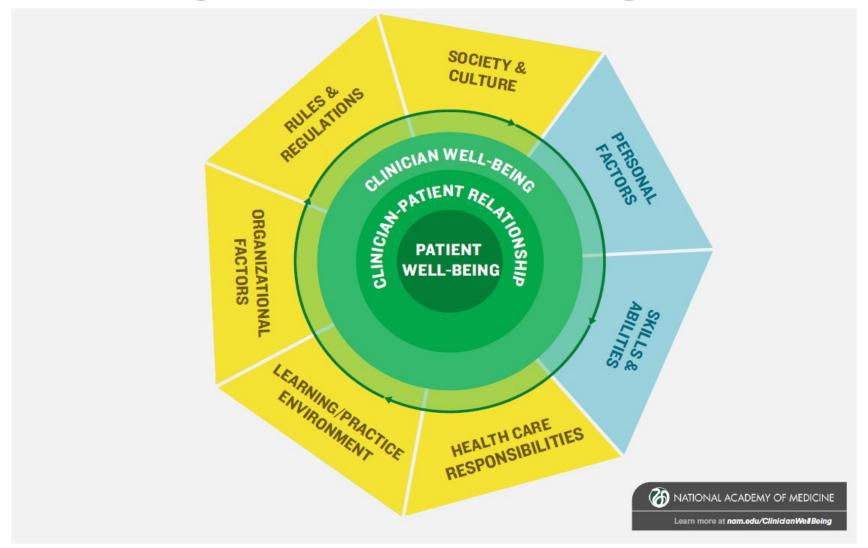
A nationt care problem

Pharmacy staff burnout can result in medication errors and increased patient harm



Strategies to Improve Well-Being and Resilience

Factors Affecting Clinician Well-Being and Resilience





External Support of Well-Being





Identify Burnout



A Pragmatic Approach for Organizations to Measure Health Care Professional Well-Being

Print Ver

See more detail:

Tweeled by 48
On 1 Facebook p.
DOI
https://doi.org/1
1809g

- Maslach Burnout Inventory Human Services Survey for Medical Personnel
- Guide to selecting the most appropriate measurement instrument for your organization



Organizational strategies to reduce burnout and increase engagement



Acknowledge and assess the problem



Harness the power of leadership



Develop and implement targeted work unit interventions^a



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



SPECIAL ARTICLE

Nine Organizational Strategies to Promote Engagement and Reduce Burnout



Tait D. Shanafelt, MD, and John H. Noseworthy, MD, CEO

Shanafelt, TD, and Noseworthy, JH. Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout. Mayo Clinic Proceedings, January 2017;92(1):129-146https://www.mayoclinicproceedings.org/article/S0025-6196%2816%2930625-5/pdf

State Affiliate Toolkit

State Affiliate Toolkit Well-Being and Resilience

VIEW RELATED LINKS ,



ASHP is an original sponsor of the National Academy of Medicine (NAM) Action Collaborative on Clinician Well-Being and Resilience and actively leading the pharmacy profession on this issue? ASHP recognizes that a healthy and thriving clinician workforce is essential to ensuring optimal patient health outcomes and safety; this commitment to improving pharmacy workforce well-being and resilience is embedded within ASHP's Strategic Plan, as well as, a new policy position, 1825 Clinician Well-Being and

Resilience, that was approved during the 2018 House of Delegates. Check out a well-being and resilience resource page at ASHP.org to help you, whether you're a student pharmacist, a pharmacy resident, a pharmacy technician, or an active pharmacist practitioners, in your resilience journey.

Tools for Promoting a Resilient and Thriving Pharmacy Workforce

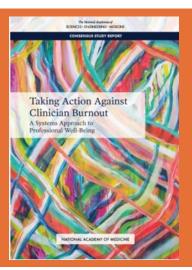
- Educate
- Engage
- Prepare
- Discuss
- Promote
- Expand
- Share

ashp.org/State-Affiliates/Affiliate-Resources/State-Affiliate-Toolkit-Well-being-and-Resilience



Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being



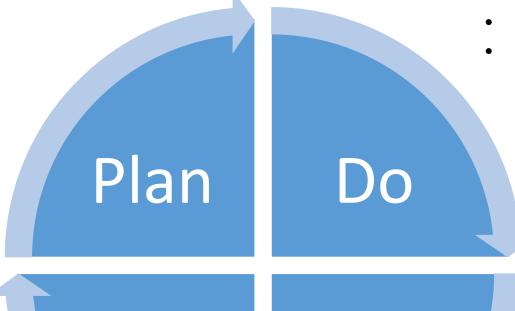


- A consensus study from the National Academy of Medicine (Nov. 2019)
- 6 Goals to Reduce Burnout and Foster Professional Well-Being
 - Goal 1 Create Positive Work Environments
 - Goal 2 Create Positive Learning Environments
 - Goal 3 Reduce Administrative Burden
 - Goal 4 Enable Technology Solutions
 - Goal 5 Provide support to Clinicians & Learners
 - Goal 6 Invest in Research



Systems Approach and Change Management

- Identify Need
- Describe current state
- Gather & Analyze Data
- Identify Improvement Opportunities
- Identify Root Causes of Problem(s)



Act

- Standardize Change
- Monitor Change & Hold Gains

Study

- Generate and Choose Solutions
- Plan and Implement a Pilot

- Evaluate Pilot Results
- Draw Conclusions



Example - Work Redesign

MANAGEMENT CONSULTATION

Workplace strategies to reduce pharmacy leadership burnout

King E, et al. *American Journal of Health-System Pharmacy*, Volume 76, Issue 14, 15 July 2019, Pages 1007–1009, https://doi.org/10.1093/ajhp/zxz089

Summary of Publication

- 1. Burnout identified amongst pharmacy managers
- 2. Task Force formed
- 3. Recommendations made to reduce work overload
- 4. Senior leadership presentation
- 5. Actions taken
- 6. Results analyzed
- 7. Ongoing focus on work demands and stressors



Addressing Burnout During a Pandemic



Preventing a Parallel Pandemic: Workforce Well-Being and Resiliency

PERSPECTIVE

PREVENTING A PARALLEL PANDEMIC

Preventing a Parallel Pandemic — A National Strategy to Protect Clinicians' Well-Being

Victor J. Dzau, M.D., Darrell Kirch, M.D., and Thomas Nasca, M.D.



Supporting the Health and Well-Being of Clinicians During COVID-19

Strategies for Health Care Leaders

For leaders and managers to implement to help sustain the well-being of clinicians amidst the COVID-19 outbreak

Strategies for Clinicians

For health care professionals to implement to help support themselves and their colleagues

Other Resources

More information on how to promote clinician well-being from sources such as global health organizations, U.S. government agencies, professional associations, health care providers & schools of health professions





Strategies for Health Care Leaders During COVID-19

- Value clinicians

- - Enable cooperation & collaboration

Communicate best

- Provide central information access point

Monitor & promote clinician well-being

- Ensure clinicians aren't required to return to work during dire situation

Provide supportive environment

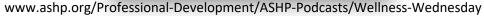
- Provide appropriate resources if clinicians are infected

Organizational Best Practices: Fix the workplace, not the worker

Domains of evidence-based and promising practices:

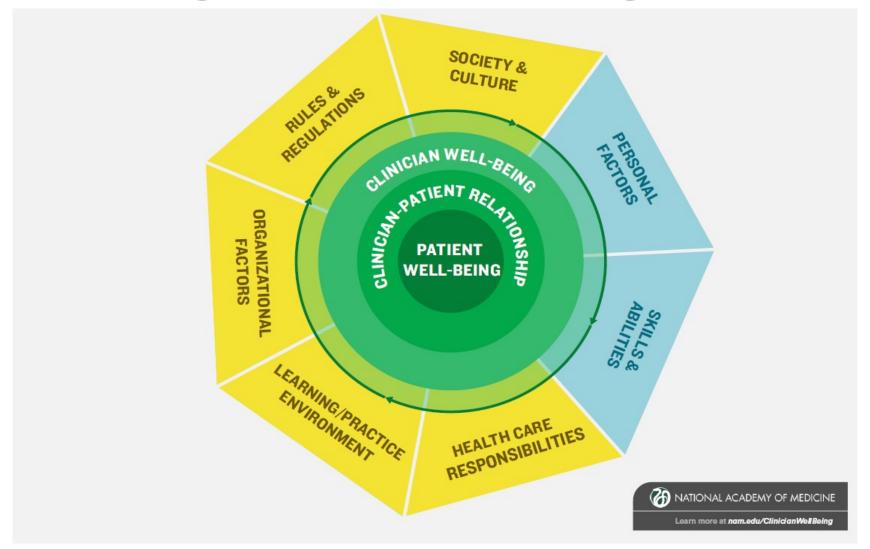
- Organizational commitment
- Workforce assessment
- Leadership







Factors Affecting Clinician Well-Being and Resilience





Individual Resiliency Traits & Skills



ashp

Be Aware of How Resilient You Feel

Ready

Good to go

Adapting/flexible

Excelling at job

"I am at the top of my game and adapting well to all pressures"

Reacting

Mild distress

Temporary symptoms

Still getting work done

"Stress is affecting me but can still get the job done"

Injured

Noticeable symptoms

Personality change

Erratic functioning

"I have changed to the point that I am not in total control of my behavior or reactions"

Ш

Severe impairment

Extremely overwhelmed

Possible danger to self/others

"This worsening condition requires full attention before getting back to work"

Self Interventions

Social Support

Professional Care

Rest Needed



Bolstering Resiliency

- Identify personal self-care techniques
- Cognitive Reframing
 - Create a different way of looking at a situation, person, or relationship
 - New "lens"
 - Reverse: What's the other person's perspective
 - Long: How will I likely view this situation in six months
 - Wide: How can I grow from this
- Emotional Intelligence (EQ)
 - Recognize emotions in self and others
- Mindfulness
 - Awareness in the present moment without judgement





Strategies for Clinicians During COVID-19





22 Take breaks

Perform self check-ins

Stay connected

Honor your service

Respect differences

A collection of resources to promote clinician well-being is available online.

ASHP Member Resources



SSUE OUR LEADERSHIP

TAKE ACTION

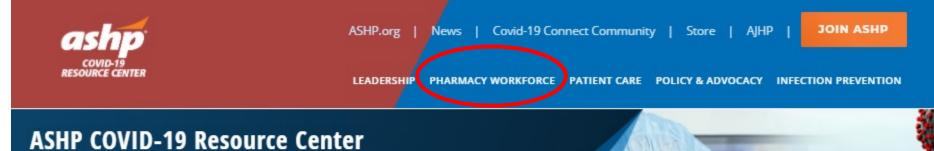
RESOURCES

NEWS Q





ASHP COVID-19 Resource Center: Well-Being & Safety



Workplace Safety and Well-Being

Protect the health and well-being of yourself and others



- Tips for Taking Care of Yourself during COVID-19
- Checklist for Pharmacists and Pharmacy Technicians to Minimize Exposure from COVID-19 at Home [PDF]
- Checklist for Pharmacists and Pharmacy Technicians to Protect Themselves in Outpatient Care Settings [PDF]
- · Well-Being Reminders during Difficult Times
- · Wellness with COVID: Contagious Strategies to Promote Pharmacy Well-being [PDF]







View Enrollment

Member Free

Non-Member Free



TAGS:

CAREER/PROF, DEVELOPMENT

COVID-19

LEADERSHIP/MANAGEMENT

Well-Being and Resilience Series

Planned in cooperation with the ASHP New Practitioners Forum

Release Date: December 3, 2018 Expiration Date: December 3, 2021 Activity Type: Knowledge-based

Activity Fee: Member - Free / Non-member - N/A

Activity Overview

ASHP is an original sponsor of the National Academy of Medicine (NAM) Action Collaborative on Clinician Well-Being and Resilience and is honored to lead the pharmacy profession on this issue. ASHP is committed to fostering and sustaining a healthy and thriving pharmacy workforce, which is essential to ensuring optimal patient health outcomes and safety. This commitment begins with facilitating the development of education aimed at helping pharmacists, student pharmacists, and pharmacy technicians address and effectively cope with the stress and burnout associated with demanding patient care environments.

The Well-Being and Resilience Webinar Series is a growing collection that will cover facets of defining stress and burnout to identifying solutions to build resilience of individuals and of teams.

This series is free for ASHP members as a benefit of membership.

Educational Activities

Learning Module	ACPE #	Credit Hours
Empowering the Healer: Results of the National Academy of Medicine (NAM) Consensus Study	NO CE	0.0
Caring for the Pharmacy Workforce during COVID-19 (6/3/2020)	NO CE	0.0
Caring for the Pharmacy Workforce: Wellness Strategies for the Student Pharmacist	NO CE	0.0



MCM 19 ASHP Well-Being Collaborative Meeting: Common Themes

Training Assessments

A call for comprehensive

signs of burnout and the

use of evaluations to help

Communication

A call for more free and

open communication in

testing to diagnose the

improve efforts

the workplace

A call for more

comprehensive

members of the

A call for more

advocates in the

workplace that will

listen to and support

wellbeing initiatives

workforce

professional training

for preceptors and

Senior Level Buy-in

PRECEPTORS

"A mental health training program for preceptors centered around protocol for when students are symptomatic of a mental health crisis is needed."

PRECEPTORS

"Providing preceptors resources on teaching is vital. Many pharmacists lack a solid background on how to be an effective teacher and really carry out learner relationships."

WORKFORCE

"A shorter on-boarding process is disadvantageous. It threatens the workforce to become less efficient with requisite technology and hinders its high performance usage."

ADVOCATES

"We must emphasize the importance of finding champions within our institutions to support wellness initiatives."

BARRIER

"System-level changes are repeatedly voiced but are notably difficult to implement due to bureaucratic barriers. The people making the final decisions don't necessarily see the benefit of these programs."

LEARNERS

"Assessing burnout levels in residents before starting their program can be effective as a preventative measure."

WORKFORCE

"The workforce can utilize effective surveys and inventories to communicate more clearly how they are feeling."

PRECEPTORS

"Peer evaluations can serve as a teaching tool on how to interact with learners."

LEARNERS

"Programs within pharmacy schools should make strides to encourage more open discussions about burnout among pharmacy students."

WORKFORCE

"How can we address the "badge of honor" of not asking for help and move towards being more vulnerable with each other?"

WORKFORCE

"We must emphasize the importance of having a community with common experiences and sharing them among one another."

Collaborative Discussion held at Midyear 2019

ASHP Interprofessional

- Themes identified are applicable during COVID-19
 - Assess
 - Communicate
 - Lead
 - Train



ASHP Wellbeing and Resilience Infographic









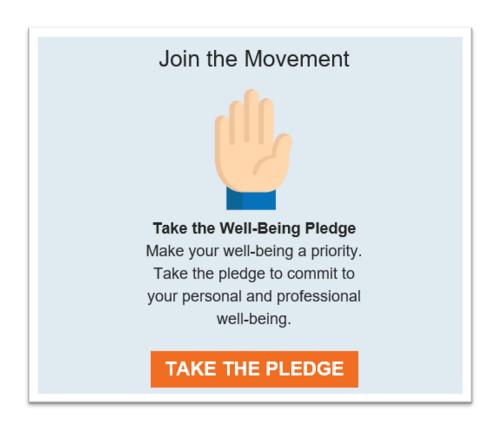
- Monitor your stress levels
- Find a mentor
- Develop meaningful social connections
- Embrace change
- Start a daily gratitude practice

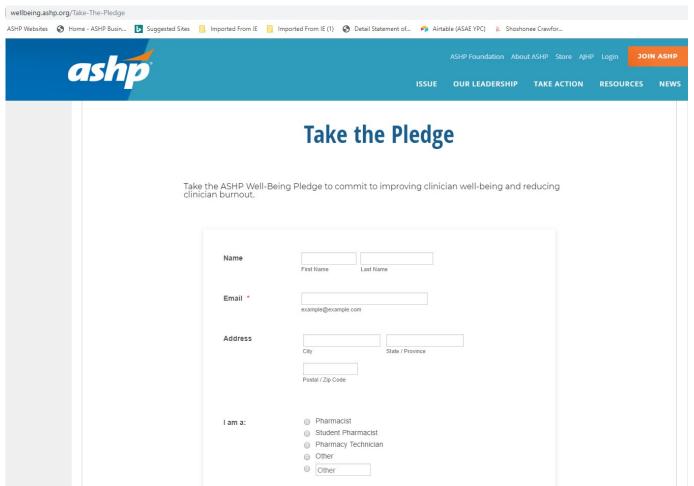


wellbeing.ashp.org



Commit to Individual Well-Being





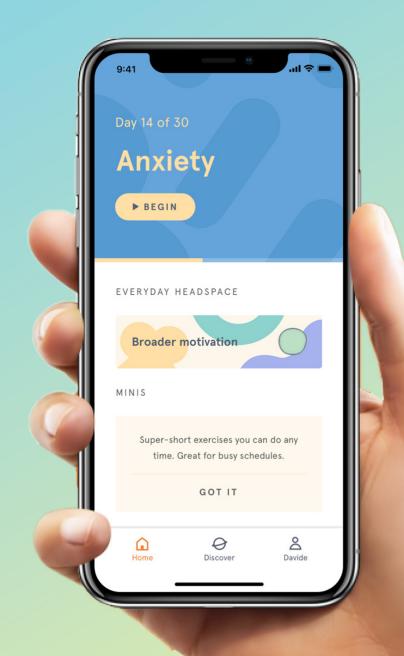




Start Your **FREE**Subscription Today!

ashp.org/headspace

Send your feedback to wellbeing@ashp.org.



ASHP Well-Being and Resilience Certificate



7 Modules | 18 CE Hours

The curriculum addresses:

- Core principles associated with burnout in the healthcare workforce
- Individual resilience strategies
- Redesigned work system approaches
- Cultures to sustain healthcare professional well-being and resilience



Looking Ahead





ASHP Extends Commitment to NAM Action Collaborative on Clinician Well-Being and Resilience

- Two-year extension through 2022
- New working groups
 - National Strategy for Well-being and Resilience
 - COVID-19 Response
 - Implementation









Conclusions

Clinician burnout is a patient care and healthcare workforce problem that needs addressing.

Well-being and resilience needs a combined effort by both the individual and the system.

ASHP is focused on promoting wellbeing and resilience in many ways and is here to help.



- 1. What successful personal and health system resiliency strategies have been implemented at your institution?
- 2. Were you surprised by the survey results?
- 3. What challenges and gaps exist around wellbeing and resilience?

Discussion Questions



Thank You

Contact: wellbeing@ashp.org

