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FOR MIND BODY MEDICINE

Changing the Conversation: How to Address Resident Burnout By Promoting Resident Resiliency



Baystate
Medical Center



Cambridge Health Alliance



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Workshop Presenters:

Felicia Smith MD – MGH/McLean Program Director

Steven V. Fischel MD PhD – Baystate Medical Center
Program Director

Heather Vestal MD – MGH/McLean Associate Program
Director

Deanna Chaukos MD – MGH/McLean, PGY3

Jose Rengifo MD – Cambridge Health Alliance, PGY3



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None of the workshop presenters
have any conflict of interest to
disclose



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Overview

1. Rationale for Resiliency/Mindfulness Training in Residency
2. Brief Overview of 3 Programs Curricula, including discussion of approach to studying effectiveness/outcomes:
 1. MGH/McLean
 2. Cambridge Health Alliance
 3. Baystate Medical Center
3. Experiential Component
4. Discussion





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Why Resiliency Training?

- Coaching and resiliency training – huge initiatives in global corporations, finance and other highly dynamic workplaces
- Improves life satisfaction, peer-connectedness, positive leadership



Goldman
Sachs



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What is resilience?

- Positive re-appraisal coping
- Optimism
- Meaning given to adversity
- Proactive coping mechanisms
- Good social support
- Effective emotional regulation
- Altruism
- Positive self concept
- Good cognitive skills
- Auto-efficacy satisfaction
- Social skills
- Developed social intelligence
- Capable of empathy
- Internal locus of control
- Good sense of humor
- Nice, active and sweet temperament
- Charisma
- Warm, nurturing parents
- Successful experiences at school
- Spirituality
- Ability to face your fears
- Having a positive role model
- Goals in life and moral values



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Why now?

If skills to prioritize values, and to determine a **personal philosophy that integrates professional, personal and spiritual domains** are not honed in training, such balance will not easily occur later in one's career. (Quill, 1990)



Medical students at BU learn yoga as part of neuroscience course on mind body medicine



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Why now?

- Evidence supporting mindfulness-based stress reduction programs for physicians:
 - Significantly lower stress (Cohen-Katz 2005)
 - Improve confidence in the ability to cope (Tarantino 2013)
 - Improve mood, physician empathy, decrease burnout (Krasner 2009)
 - “being present” with patients led to finding increased meaning in their work (Horowitz 1995)
 - Improved patient satisfaction (Beach 2013)

Krasner et al. JAMA 2009: Doctors who participated in mindfulness program showed sustained improvements in well-being and attitudes toward patient-centered care





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Long Hours → **Stress**



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Stress ≠ time problem

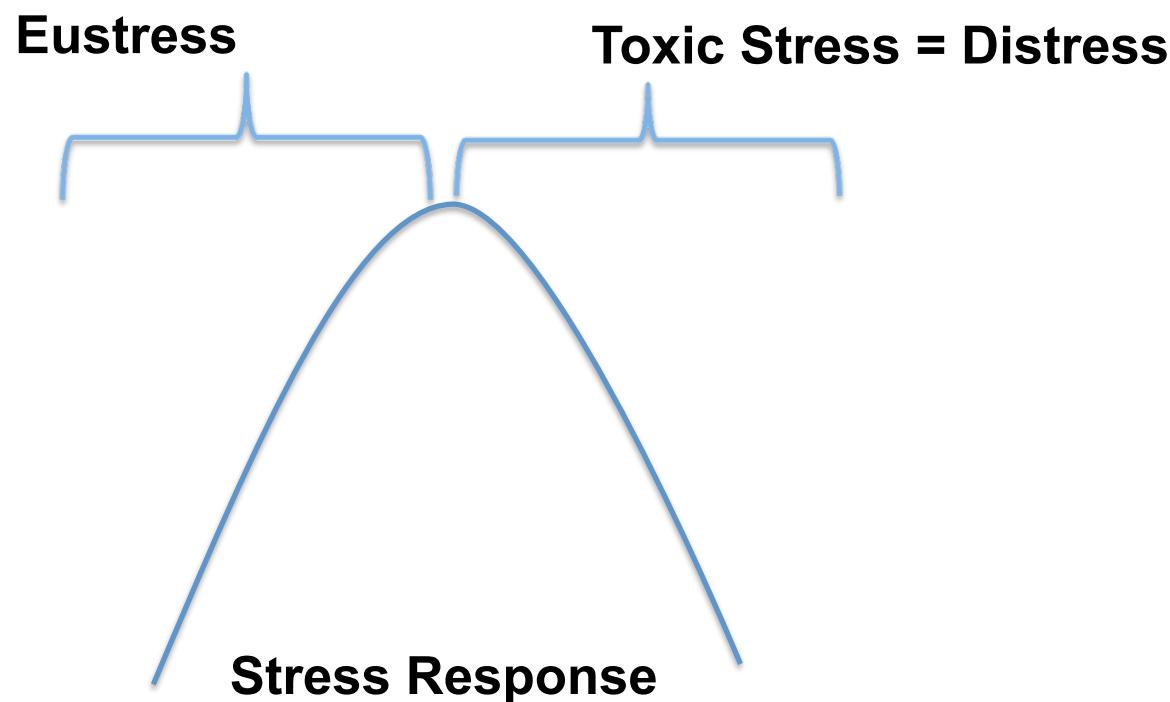


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The Stress Response

- Stress is not all bad!



- Chronic, toxic stress leads to allostatic load



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MGH McLean Intern Resiliency Curriculum: The SMART Program



The MGH SMART Program: Stress Management and Resiliency Training Program

- Adapted from the Benson Henry Institute's Relaxation Response and Resiliency Program
- Three pronged approach to wellness, health and resiliency:
 - 1. Eliciting the Relaxation Response
(mindfulness meditation)**
 - 2. Stress Awareness**
 - 3. Adaptive Strategies**



Founder of BHI, Dr Herb Benson



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SMART for Interns

- Program Structure:
 - Sessions during protected-time: 2 hours orientation, 3 hours during ambulatory rotation didactics, 2 hours intern retreat
 - **Weekly “practice” sessions: THURSDAY 5:30PM**
 - **MOST IMPORTANTLY: practice**
 - **Practice mindfulness for 20min per day**



SMART for Interns

To shift culture and adopt positive change, we need measurable outcomes.

- Study details:
 - 6 months DOM, 12 months Psychiatry
 - Pre- and Post- program surveys
 - Opportunity to own and wear **Basis**, health tracking device
 - Subjective stress/relaxation diaries



Curriculum Outline



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■ Session 1 (Intern Orientation):

- Presented the scientific basis for mindful practice, and rationale for “Why now?”
 - Mindfulness Exercise (ME): mindful breathing, “the mini”
 - Stress Awareness & Coping (SAC): How to recognize physical, cognitive, emotional, relational stress
 - Positive Perspective-taking (PPT): Letter to self

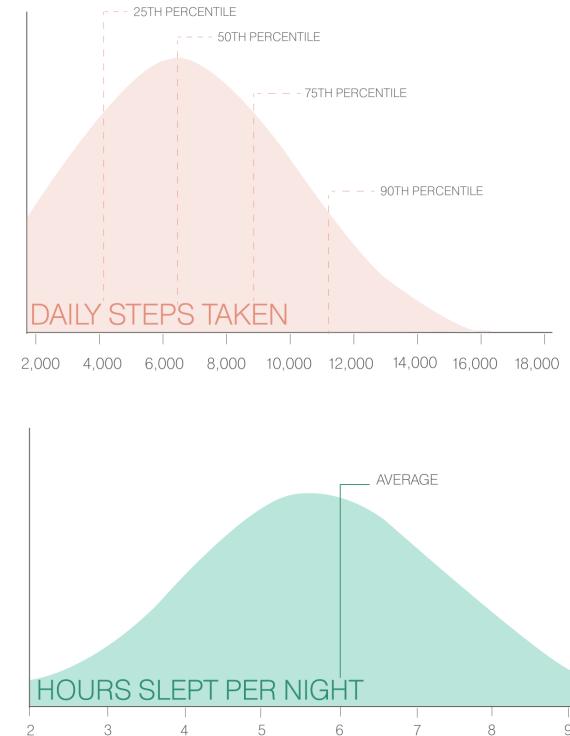
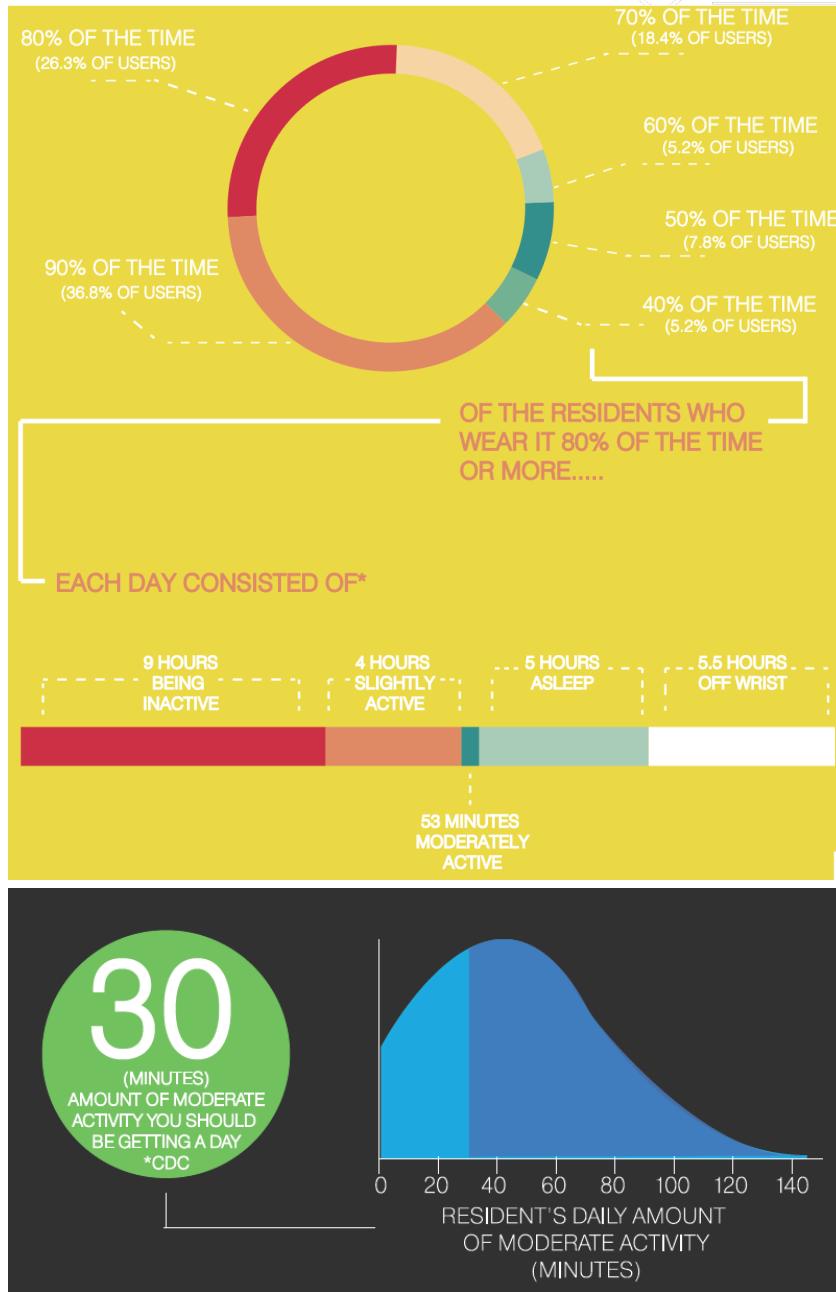
■ Session 2:

- ME: body scan
- SAC: sleep hygiene (sleep data), negative automatic thoughts, Upcoming situation and anticipated response
- PPT: Creating an adaptive perspective, From pessimism to optimism, Suzanne Coven article from the Boston Globe (discussion on optimism and loss)

■ Session 3 (The Intern Retreat):

- ME: Idealized Self meditation
- SAC: 3 good things, Humor in Medicine (“Does Laughter Make Good Medicine?” Sobel, 2006, NEJM)
- PPT: Creative expression (“The Guest House”), Read letter to self, Write second letter to self

Feedback and Motivators



DID YOU KNOW?

THIS WEEK'S DATA SHOWED:



CHALLENGE:
SHOOT FOR AN EXTRA
1,000 STEPS A DAY BY
SKIPPING THE HOSPITAL
CAFETERIA & WALKING

THEY GOT AN EXTRA
16.3 MINUTES OF SLEEP

GET MORE STEPS



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Feedback from Interns

- Resounding positive feedback for the program in general
- Resiliency Rounds (optional weekly sessions) impossible to get to
- Appreciate being able to leave hospital grounds
- Most found sharing largely validating and therapeutic, a few found sharing vulnerable and risky
- Workbook was too clunky, hard to integrate into sessions



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Reflections on the Pilot

- Promotes positive interactions with the interns, and amongst interns
- Noticed the different needs of medicine v.s. psychiatry interns
- Interns come in with different levels of resilience → focus on self-improvement v.s. damage control
- Learned to appreciate:
 - The skeptics
 - Natural leaders
 - The experts



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Next Steps

- Feasibility study complete → randomized controlled trial
- ECOTE grant funding
- Feedback and focus groups with this years participants
- Expand to more training programs at MGH and Partners





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Idealized Self Meditation



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Cambridge Health Alliance: Center for Mindfulness and Compassion



Mindfulness to promote resiliency

CHA PSYCHIATRY RESIDENCY: PROMOTING WELLNESS, RESILIENCE, AND SELF-CARE

- Mindfulness curricula in context
- Process of curricular changes
- Proposal
- In Practice



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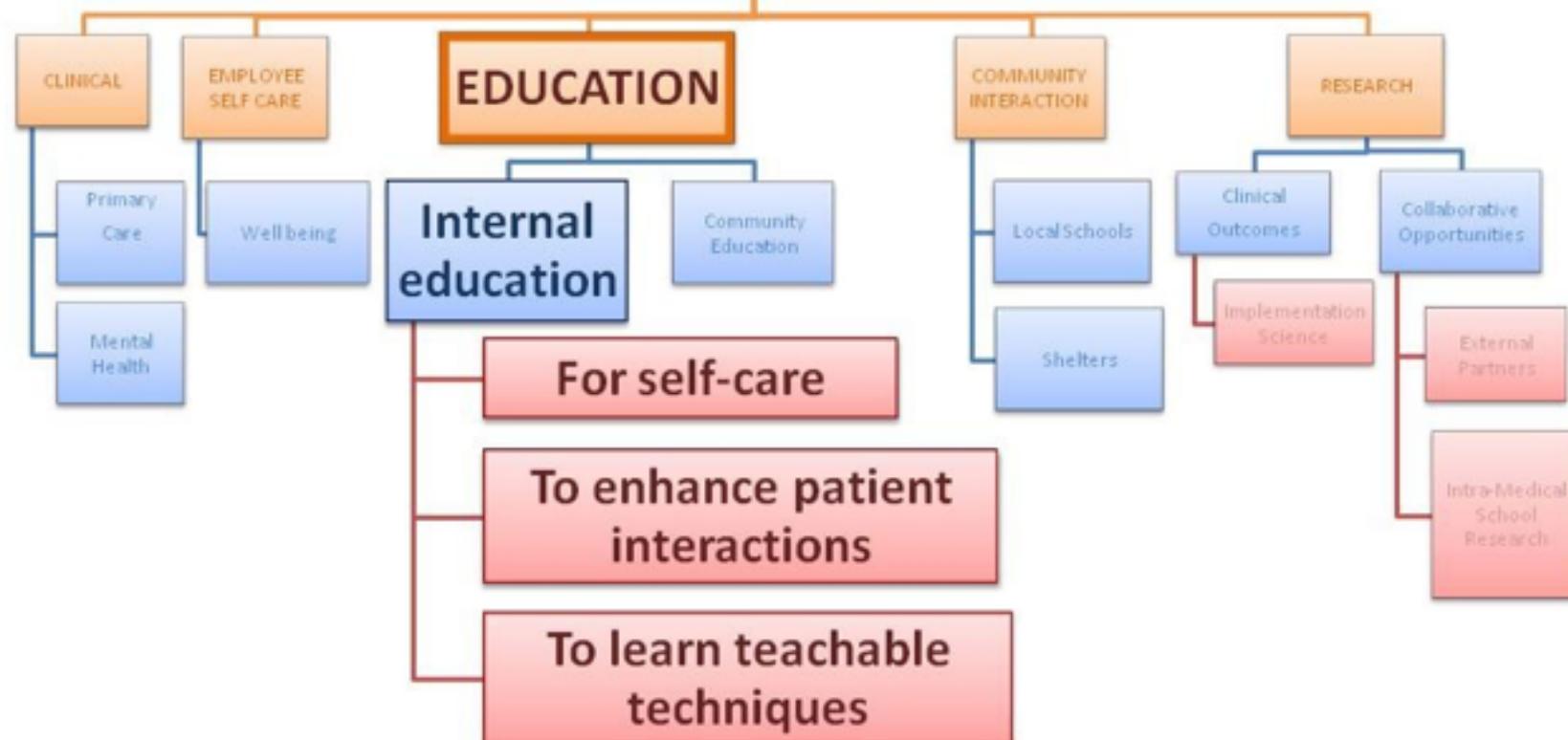
Context

- Growing interest
 - Meditation drop-ins
 - Staff Wellness retreats
 - New Center for Mindfulness and Compassion
- A few interested and excited residents...





CHA Center for Mindfulness & Compassion





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Curricular Changes Process

Championing Whole Health
FOR MIND BODY MEDICINE

- Few interested and excited residents met to:
 - Conduct a **literature review** of existing programs
 - Create a **proposal** for curriculum changes
- Discussed and revised with program director
- Created mindfulness education team
- Initiated pilot program



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Literature Review

- Pub-med search, grey literature, discussions with experts and working group
- Found a range of curricula in 11 programs-- retreats, formal and informal, mandatory or elective
- Also found review describing 14 medical schools teaching mindfulness to students, some included residents (Dobkin 2013)
 - Demonstrated decreased psychological distress and improved quality of life



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Proposal

Goals

- Improve resident wellness and promote resilience
- Improve patient experience of care through cultivating compassion, presence, critical curiosity, attentive observation
- Gain mindfulness skills to incorporate into therapy and to teach patients, colleagues, and community partners

Curricula

- Ongoing curriculum for 1-1.5 hours per month.
- Format includes guest lecturers, didactic learning and actual practice.
- Mindfulness techniques will repeat and build on each other, in a format adapted from Mindfulness-Based Stress Reduction 8 week series

Evidence-based science	Mindfulness Technique	Theme
Physician Self-Care	Body Scan	Acceptance
Enhancement of Patient Care	Mindful movement	Compassion
Neuroscience 1: Neuroimaging	Breathing	Non-judgement
Neuroscience 2: MEG and EEG	Listening	Listening
Stress Research	Body Scan	Non-reactivity
Clinical Applications I: Anxiety ,Depression and Sleep	Mindful movement	Presence
Cellular Mechanisms	Breathing	Kindness
Clinical Applications II: Addiction and Chronic Pain	Listening	Forgiveness
Provider Practice	Body scan, breathing, listening, movement	Practice



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In Practice

- **Physician Self-Care** – 3 hour orientation on deepening presence and introduction to mindfulness techniques – PGY2-4s
- **Clinical applications** – 1 hour session on introducing mindfulness to patients – PGY2-4
- **Neuro and clinical science** – PGY2s
- **Self-compassion in psychotherapy** – PGY2s
- **Clinical applications** – PGY2s
- Upcoming provider practice – PGY2-4



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Baystate Medical Center





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Promoting Resiliency during Residency Training

Steven V. Fischel MD, PhD

Program Director, Psychiatry Residency Program
Medical Director, Psychiatry Consultation Service

Baystate Medical Center
Associate Professor of Psychiatry
Tufts University School of Medicine





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Promoting Resiliency

- Culture of Program
 - Welcoming
 - Supportive
 - Safe
- Resident Skills
 - Self-care
 - Teamwork
 - Stress management



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Promoting Resiliency

- “I actually use the mindfulness techniques we’ve learned during my day and would not likely think of them if not for our program’s emphasis; I believe it helps reduce my stress level.”
- “Without a doubt, the safe environment that’s been cultivated in our program – to be open with issues, approach attendings, etc...is by far the most significant factor in reducing stress and building resiliency. There is no bigger drain on morale than working in a place where you cannot relax.”



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Why Mindfulness

- Mindfulness is about paying attention to the present moment, with a sense of interest and curiosity.
- Goals
 - Respond thoughtfully and compassionately rather than reactively
 - Improve self-care
 - Decrease burnout
 - Improve teamwork and collaboration
 - Improve patient care



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Pioneer Health INSTITUTE
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Mindfulness Curriculum

- Monthly 90 minute Mindfulness sessions
 - Required in PGY1 and PGY2; Optional for PGY3 and PGY4
 - Tuesday mornings
 - Alternates with Process Group
- Fall half-day intensive in Mindfulness
- Spring residency retreat
 - Half-day Mindfulness session
- Facilitated by Robert Smith DO
 - Pioneer Valley Family Medicine, Baystate Medical Practice
 - Director, Baystate Health Mindfulness Programs
 - Senior Mindfulness Teacher, Oasis Professional Training,
 - Center for Mindfulness, University of Massachusetts Medical School

A Curriculum in Mindful Practice
for Students and Residents

Facilitator Manual



Ronald Epstein, MD
Timothy Quill, MD
Michael Krasner, MD
Scott McDonald, MD
Fred Marshall, MD

University of Rochester School of Medicine and Dentistry
©Mindful Practice Programs, University of Rochester, 2010



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Monthly themes

- Noticing
- Witnessing suffering
- Professionalism
- How doctors think
- Responding to errors
- Self-care and burnout
- Mindful communication
- Balance
- Dealing with death and dying
- Conflict
- Time
- Teams and Partnerships



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Components of Sessions

- **Experiential exercises** include meditative exercises to promote mindful responses rather than reflexive reactions.
- A **didactic component** outlines the structure and theme of the sessions of the session and provides content.
- **Narrative and appreciative inquiry exercises** help bring mindful approach into daily practice.
- **Home and work assignments** reinforce the session.



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Mindfulness Practice

- Stretching
- Awareness of Breathing



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ROCK MIND BODY MEDICINE

Didactic Component: Burnout

- Learning Objectives
 - Discuss the three components of burnout
 - Recognize Physician Characteristics that contribute to Burnout
 - Practice Mindfulness approaches to decreasing burnout
 - Identify resources for preventing burnout
 - Evaluate the benefit of incorporating Clinical Mindfulness into your Practice



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Resident Health Improvement
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Narrative and Appreciative Inquiry

- Narrative
 - Residents take about 5 minutes to write a brief story about a time when they took some action **during their daily work** in order to reduce stress, enhance their effectiveness or improve their sense of well-being.
- Appreciative Inquiry
 - Residents break into pairs, each taking 5 minutes to tell their story, the other being an attentive listener.
- Debriefing
 - Residents report back their reactions (cognitive, affective, somatic) to hearing their partner's story and how that affects their approach to medicine



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Home and Work Assignments

- Home
 - Body scan
 - Breathing Awareness
- Work
 - STOP twice a day
 - Stop
 - Take a breath
 - Observe
 - Proceed



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Fall and Spring Intensives

- Fall
 - On campus for a half day
 - Intensive instruction
 - Team mindfulness exercises
- Spring
 - Half day as part of the yearly resident retreat off campus
 - Practice learned mindfulness exercises
 - Silent retreat for part of the time



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Curriculum Assessment

- Resident feedback
 - Overall rating on “usefulness of the seminar at this stage of your training” was 4.4 (scale 1-5) (n=18)
 - Comments:
 - Excellent lectures and time to debrief!
 - It is a great opportunity and time to relax and PAUSE!
 - Very helpful! Really made me reflect on how I approach/do things!
 - Very helpful and appropriate. Discussion was excellent.
 - The session increased my own awareness as to how I should reduce stress. Thank you again!
- Outcomes research project
 - IRB approved (exempt)
 - Measures:
 - Maslach Burnout Inventory (2 questions)
 - Perceived Stress Scale (10 questions)



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Appreciative Inquiry Exercise



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Discussion & Questions



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Thank you!