The Positive Influence of Palliative Care on Organizational and Team Wellness

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National Director of Social Work Training and Education, Prospero Health

February 25, 2020
Join us for upcoming CAPC events

➔ Upcoming Webinars:
  – Cultivating Resiliency as a Palliative Care Program Leader
    Tuesday, March 10 at 12:30pm ET
  – Addressing the Changing Hospice Landscape
    Monday, March 16 at 12:30pm ET

➔ Virtual Office Hours:
  – Improving Team Effectiveness
    Thursday, February 27 at 3:00pm ET
  – Evaluating Models for Palliative Care in the Community
    Monday, March 9 at 2:00pm ET

Register at www.capc.org/events/
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Disclosures

There are no disclosures to make.
Objectives

1. Describe a culture of wellness for a team and organization.

2. Discuss what markers indicate that an organization and senior leadership is committed to preventing burnout and creating a healthy, engaging work environment.

3. Define reasonable professional boundaries to support in creating a culture of wellness on the team.
Agenda

→ 15 min - Overall Review of Wellness
→ 20 min - Organization and Senior Leadership
   Commitment to a Healthy, Engaging Work Environment
→ 10 min - Creating a Culture of Wellness on the Team
→ 15 min - Question and Answer
Polling Question

How many people work in an organization that has a strategic plan for a healthy environment?
In February 2019, a CAPC webinar on burnout was held. It focused on individual and discipline specific aspects of burnout.

This year, we return to some of the themes but want to focus at more at an organizational level on wellness.
There is an immediate need for policies that support high-value, team-based palliative care through expansion in all segments of the specialty palliative care workforce, combined with payment reform to encourage the deployment of sustainable teams.
→ No differences in the prevalence of burnout by clinical role.
→ Nurses had the highest mean score for professional fulfillment (18.1; SD: 4.2), followed by physicians (17.9; SD: 4.5), social workers (17.4; SD: 4.4), and others (17.0; SD: 4.5).

→ Recommend policies that prevent the worsening of the burnout rate and support resilience.

→ Our results show relatively low burnout compared to other medical specialties and only minor effects on the sustainability of the physician workforce.

→ One protective factor supporting the low rate may be working within interdisciplinary teams of clinicians who share responsibility for care delivery.
Frameworks for Joy in Work or Healthy Work Environments
Work Environments

➔ Per Institute of Health Improvement – burnout an epidemic

➔ 2017 Joy in Work paper
  – Joy in Work to be positive since clinicians positively impact patients
  – Joy to focus on the connection of people working together to develop innovation
  – Joy to promote change
Figure 2. IHI Framework for Improving Joy in Work
Figure 1. Four Steps for Leaders

1. Ask staff, “What matters to you?”

2. Identify unique impediments to joy in work in the local context

3. Commit to a systems approach to making joy in work a shared responsibility at all levels of the organization

4. Use improvement science to test approaches to improving joy in work in your organization
Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being

→ Mitigating clinician burnout and supporting professional well-being is essential to providing high-quality patient care.

→ Addressing burnout requires improving the design and organization of the environments in which clinicians train and work.

→ Leaders in health care organizations and health professions educational institutions, federal agencies, health information technology stakeholders, state licensing boards, and health system credentialing bodies must all work together to reduce clinician burnout and foster professional well-being.

October 2019
Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being

Recommendations

➔ GOAL 1. CREATE POSITIVE WORK ENVIRONMENTS
➔ GOAL 2. CREATE POSITIVE LEARNING ENVIRONMENTS
➔ GOAL 3. REDUCE ADMINISTRATIVE BURDEN
➔ GOAL 4. ENABLE TECHNOLOGY
➔ GOAL 5. PROVIDE SUPPORT TO CLINICIANS AND LEARNERS
➔ GOAL 6. INVEST IN RESEARCH

October 2019
A SYSTEMS MODEL OF CLINICIAN BURNOUT AND PROFESSIONAL WELL-BEING

External Environment
Health Care Organization
Frontline Care Delivery

Work System Factors
Individual Mediating Factors

OUTCOMES
Clinician Burnout
Professional Well-Being

CONSEQUENCES for:
Patients
Clinicians
Health Care Organizations
Society

LEARNING AND IMPROVEMENT
Healthy Work Environment 2019 American Association of Critical Care Nurses
Fundamental to Quality Palliative Care is a High-Functioning Interdisciplinary Team (IDT)

**Framework for Improving Team Effectiveness**

**PROGRAM ALIGNMENT & GOALS**
- Needs Assessment
- Mission, Vision, Values, Culture
- Service Standards & Goals

**TEAM DESIGN**
- Staffing & Team Composition
- Hiring, Training, & Staff Development
- Role Clarity

**TEAM PROCESSES**
- Referrals & Triaging
- Coverage, Transitions & Scheduling
- Meetings (Administrative & Clinical)
- Communication

**TEAM HEALTH**
- Morale & Engagement
- Development & Growth
- Team Wellness Processes & Plans

**MEASUREMENT & EVALUATION**
- Measuring Performance
- Feedback

Source: CAPC’s Team Effectiveness Tools & Resources [www.capc.org](http://www.capc.org)
CARE

➔ C = Compassion
➔ A = Awareness
➔ R = Responding Resiliently
➔ E = Empowerment

Polling Question

➔ How many people work in an organization that has a strategic plan for a healthy environment?
Background & Wellness Journey

Lisa Vitucci

→ Background as hospice bereavement social worker and palliative care social worker

→ One of the founders of a home-based palliative care program with ProHEALTH New York, which has grown into a national company called Prospero Health

→ Recognized early on the need for team health activities on a regular basis (i.e.: Humor, Family Feud, Wacky Wednesday, off-site wellness summits)

→ Use of self as example, especially when slipping out of a self-care routine
Lessons Learned & Practical Tips
Lisa Vitucci

➔ Create a culture of kindness and self-care from beginning (interview process, training)

➔ Need for consistent, routine wellness check in, pro-active vs. reactive

➔ Social Work profession has routine supports built in with clinical supervision (individual and group), all disciples should have a routine touch base

➔ Can’t force happiness or fun, wide range of options (self-assessment vs. wellness summit)

➔ Important to adapt wellness activities to local culture
  – What worked in one region or site may not work in another
Background & Wellness Journey

Kristin Edwards

→ Interest started with a Fellow Lecture 10 years ago

→ Integrated wellness into Medical Director role from the beginning

→ Reached a career plateau and felt the need and passion to make wellness part of personal career development and growth
  – Asked for and senior administration created a senior wellness leadership role
  – Advocated for and received opportunities and wellness resources

→ Formally created a leadership position and title in August 2019 to bring attention to wellness at the organizational level
  – Reinforced commitment to create a “culture of wellness”
Lessons Learned & Practical Tips

Kristin Edwards

→ Palliative care and wellness have many parallels
  – Pioneering fields that require an investment in “doing the right thing”
  – Supports clinicians with the most difficult/time-consuming work

→ Work collaboratively with leadership to establish a culture of wellness
  – Meaningful commitment (e.g. yoga while good, does not help with workload)

→ If you are leader, be firm in protecting the team from unreasonable workload

→ Build in wellness as part of the team’s regular work
  – Just like we do for our patients, acknowledge tough cases, etc.
  – Celebrate your and your colleagues’ successes!

→ Ask the team – what would be helpful?

→ Build wellness in from the start (e.g. onboarding process)
Background & Wellness Journey

Amy Frieman

→ Drawn to the humanities in medical school and residency

→ Attending physician, Visiting Doctors’ Program
  – Resident creative projects
  – Narrative Medicine course for medical students

→ Corporate Medical Director, Palliative Care
  – Focus on interdisciplinary team (IDT) wellness

→ Chief Wellness Officer
  – Focus on clinician wellness across the network
Lessons Learned & Practical Tips

Amy Frieman

➔ Self-care is not enough
   – Wellness interventions must also focus on team and organizational dynamics

➔ Clearly define the team’s mission and culture

➔ Team health doesn’t happen by accident
   – Regular part of team’s activities
   – Foster open communication and connection
Voices from the Field

Comments from Participants
## Attributes of Healthy Teams

- Well-defined program mission, vision, and goals
- Roles clearly delineated for each clinician/discipline, with acceptance that aspects of palliative care are shared across disciplines
- Shared team values that are consistently articulated
- Established lines of staff accountability, reporting, and supervision
- Clear work and productivity expectations
- Constructive and routine staff evaluation process
- Established/routine team health activities
- Demonstrated respect and appreciation for individual team members and team as a whole
- Open communication among staff members to resolve conflicts, promote trust, and work to achieve common goals
- Strong leadership skills of palliative care program leader(s)

Source: Strategies for maximizing the health/function of palliative care teams, CAPC, 2014.
Wellness on a Team Level Level

1. Establish roles and responsibilities.
2. Move from reactive to proactive mode.
3. Listen to the team and its shared experience.
4. Find out what brings the team together.
5. Give the team permission to feel good about what they do.

Source: Strategies for maximizing the health/function of palliative care teams, CAPC, 2014.
SUMMARY – WELLNESS IS DELIBERATE.
Thank you!

Questions and Discussion
Articles

→ Prevalence and Predictors of Burnout among Hospice and Palliative Care Clinicians in the U.S.” Journal of Pain and Symptom Management

→ It Is Like Heart Failure. It Is Chronic…and It Will Kill You”: A Qualitative Analysis of Burnout Among Hospice and Palliative Care Clinicians, Journal of Pain and Symptom Management

Improving Team Effectiveness Series

➔ Keep the conversation going in the Improving Team Effectiveness virtual office hours. Next session in March. Register on capc.org or CAPC Central Virtual Office Hours pages.

➔ Check out our new Quick Tips on the Improving Team Effectiveness page in CAPC Central

➔ Join us for upcoming webinars on other Team Effectiveness topics:

Register for all upcoming events at: www.capc.org/providers/webinars-and-virtual-office-hours/
Helpful Resources

CAPC – Team Effectiveness Quick Tips & Resources

Palliative care national and professional organizations. (AAHPM, HPNA, SWHPN, etc.)

Publicly available resources & books

- Harvard Business Review articles on building effective teams
- DiSC personality test
- Book: Now Discover Your Strengths
- Book: Team of Teams
- Your Human Resources Department
- App called “Headspace” to practice mindfulness
Helpful Resources
