# Perceived Value of a Program to Promote Surgical Resident Well-being \*, \* \*

Arghavan Salles, MD, PhD,\* Cara A. Liebert, MD,\* Micaela Esquivel, MD,\* Ralph S. Greco, MD, FACS,\* Rebecca Henry, PhD,† and Claudia Mueller, PhD, MD\*

\*Department of Surgery, Stanford University School of Medicine, Stanford, California; and †Office of Medical Education Research and Development, Michigan State University, East Lansing, Michigan

**OBJECTIVE:** The demands of surgical residency are intense and threaten not only trainees' physical wellness, but also risk depression, burnout, and suicide. Our residency program implemented a multifaceted Balance in Life program that is designed to improve residents' well-being. The purpose of this study was to evaluate the program utilization and perceived value by residents.

**DESIGN, SETTING, PARTICIPANTS:** Residents (n = 56, 76% response rate) were invited to participate in a voluntary survey from December 2013 to February 2014 regarding utilization, barriers to use, and perceived value of 6 program components (refrigerator, After Hours Guide, psychological counseling sessions, Resident Mentorship Program, Class Representative System, and social events). They were also asked questions about psychological well-being, burnout, grit, and sleep and exercise habits before and after implementation of the program.

**RESULTS:** The most valued components of the program were the refrigerator (mean = 4.61) and the psychological counseling sessions (mean = 3.58), followed by social events (mean = 3.48), the Resident Mentorship Program (mean = 2.79), the Class Representative System (mean = 2.62), and the After Hours Guide (mean = 2.10). When residents were asked how they would allocate \$100 among the different programs, the majority was allocated to the refrigerator (\$54.31), social events (\$26.43), and counseling sessions (\$24.06). There was no change in psychological well-being or burnout after the program. Residents had higher levels of grit ( $\beta$  = 0.26, p < 0.01) and exercised

**CONCLUSIONS:** This study demonstrated that a multifaceted program to improve the well-being of trainees is feasible, highly valued, and positively perceived by the residents. Further research is needed to quantify the effectiveness and longitudinal impact such a program has on resident depression, burnout, and other psychological factors. (J Surg Ed **1:111-111**. © 2017 Association of Program Directors in Surgery. Published by Elsevier Inc. All rights reserved.)

**KEY WORDS:** resident well-being, resource utilization, surgical residency, burnout

**COMPETENCIES:** Systems-Based Practice

#### INTRODUCTION

Studies have shown that occupational stress is associated with depression, sleep dysfunction, substance abuse, and accident proneness. 1,2 High rates of burnout and depression have been noted in practicing physicians, and in particular for surgeons who have rates of burnout of up to 40%.<sup>3,4</sup> Consequently, most calls for action have been aimed at improving wellness for practicing physicians. 4-6 However, surgical residency can be equally demanding, as the workhours, acuity of patients, and stresses of developing into an independent practitioner all place high demands on individuals in training. Indeed, recent studies indicate that stress and unmanaged burnout are more prevalent among residents than previously recognized,<sup>7,8</sup> with residents being more likely to experience these symptoms than the general population. Nonetheless, few formal efforts have been made by surgical training programs to address the psychosocial wellness of residents. We propose that residency is the time when many physicians' negative health behaviors, patterns, and sentiments begin and so may be the most amenable to change.

<sup>(</sup> $\beta$  = 1.02, p < 0.001) and slept ( $\beta$  = 1.17, p < 0.0001) more after the program was implemented.

<sup>\*</sup>Conflict of Interest: Dr. Ralph Greco is the Director of the Balance in Life program in Department of Surgery at Stanford School of Medicine. Drs. Mueller, Salles, Liebert, and Esquivel serve on the Balance in Life Program Committee in the Department of Surgery at Stanford.

Funding: This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Correspondence: Inquiries to Arghavan Salles, MD, PhD, Department of Surgery, Washington University in St. Louis, 660 S. Euclid Avenue Box 8109, St. Louis, MO 63110; e-mail: sallesa@wustl.edu

Balance in Life Program							
	Physical Well-Being	Psychological Well-Being		Professional Well-Being		Social Well-Being	
•	Refrigerator stocked with healthy food and drinks After Hours Guide	Weekly confidential group meetings with clinical psychologist by PGY-level		Resident Mentorship Program Class Representative System		Sponsored social events	
Outdoor Ropes Course*				Team-Building Retreat*			

<sup>\*</sup>Components added to the Balance in Life program after completion of study

FIGURE 1. Components of Balance in Life program.

Several studies have summarized individual and organizational strategies for adaptive coping including stress recognition, seeking care when needed, and the maintenance of nutritional and physical fitness.<sup>7,10-13</sup> Using some of these strategies, a resident wellness program called Balance in Life was initiated in our institution's Department of Surgery in 2011.<sup>14</sup> The goal of the program is to improve resident wellness and work-life balance despite the high-stress environment of surgical training. A main objective of the program is for the psychosocial and behavioral skills learned from the program to benefit residents not only during training but also throughout their surgical careers. The Balance in Life program aims to improve the physical, psychological, professional, and social well-being of residents through various components previously described, 14 which are summarized below and shown in Fig. 1.

The purpose of this study is to evaluate the feasibility, frequency of use, and residents' perceptions of the components currently employed in the Balance in Life program to determine which components provide the most benefit to the residents within our resident well-being program.

### **MATERIALS AND METHODS**

## **Balance in Life Program Elements**

Physical well-being is supported by 24-hour access to a fully stocked refrigerator in the surgical workroom with a variety of healthy snacks and drinks to decrease the barriers residents face to regular and healthy eating. 11,13 Specifically, items routinely stocked include nuts, string cheese, Greek yogurt, bread, peanut butter, protein bars, hard-boiled eggs, and seasonal fruits. In addition, we have created an After Hours Guide with information on local hikes, biking trails, restaurants, gyms, as well as local primary care physicians, obstetricians, and dentists who have weekend and late evening hours.

Resident' psychological well-being is supported with regularly scheduled confidential group meetings with an experienced psychologist. Employee counseling benefits have been shown to decrease anxiety and depression, improve productivity, and lead to greater job satisfaction. Our psychologist meets with a different group of residents each week for 90 minutes. These sessions give residents an

opportunity to discuss concerns in a safe environment with a professional who has experience working with high-performance teams. The psychologist helps residents devise coping strategies for both in and out of the hospital. Residents may also schedule urgent one-on-one sessions with the clinical psychologist whenever needed.

Resident mentorship and leadership training are the 2 main components aimed at improving professional wellbeing. The Resident Mentorship Program pairs junior residents with senior residents early in the academic year and funds quarterly lunch meetings to ensure regular and ongoing relationship building. The goal of this program is to provide a peer resource for the junior residents and to develop mentorship skills for the senior residents. The second component addressing professional well-being is a Class Representation System. Residents from each postgraduate year select 1 resident to represent their concerns and present solution at regularly scheduled meetings with the Residency Program Director.

Residents' social well-being is fostered with sponsored and organized social events, such as sporting events, happy hours, dinners, and outdoor activities. The goal is to have at least one social event every quarter to allow opportunities for bonding outside of the hospital.

Budget: The annual cost associated with our program is primarily linked to the stocking of the refrigerator (approximately \$16,000/y) and the salary requirements of a trained psychologist (up to \$12,000/y). Additionally, social events and gift cards used for the mentorship program can total up to \$2000 per year. However, the cost of each of these activities can vary by institution. For instance, some institutions may have access to psychology training programs or other counseling services that provide access to such sessions at a greatly reduced cost.

#### **Data Collection**

After institutional review board approval, all residents in the General Surgery department (N = 76) were invited to participate in our study during a mandatory educational meeting. Those who were not present were e-mailed a link to the survey the next day. Demographic information, including age, sex, and postgraduate year (PGY) level was collected. Residents were asked to report how frequently they used the 6 key aspects of the Balance in Life program (refrigerator, After Hours Guide, psychological counseling sessions, Resident Mentorship Program, Class Representative System, and social events). Residents also reported barriers that prevented them from using each resource. Participants were asked to rate how valuable they found each aspect of the program on a 5-point Likert scale (1 = not at all valuable to 5 = extremely valuable).Residents responded to open-ended responses asking them to describe their perception of each aspect of the program. Finally, residents were also asked how they would allocate

# Download English Version:

# https://daneshyari.com/en/article/8834832

Download Persian Version:

https://daneshyari.com/article/8834832

<u>Daneshyari.com</u>