

Innovative Changes in a Urology Residency Program can Lower Rates of Resident Burnout

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Physician Burnout

Background

- Burnout is a syndrome consisting of:
 - Emotional exhaustion (EE)
 - Depersonalization (DP)
 - Reduced personal accomplishment (PA)
- Over 50% of all physicians report burnout ^{1,2}
 - 1 of every 12 surgeons with SI
 - 40-80% of residents! ³
- Worst for Urology residents... and worsening!

* References on last slide



Objective

To measure the effect of implementing a purposeful Resident Wellness Curriculum on rates of burnout in our Urology program



The Resident Wellness Curriculum

• 5 key initiatives:

- 1. Faculty-supported Resident wellness fund
- 2. Faculty-resident social groups
- 3. 1-on-1 mentorship
- 4. Resident social outings
- 5. Wellness education



Methods

Timeline:

- Four timepoints from 2017 to 2019
- Resident Wellness Curriculum introduced 2017

• Instrument used:

- Maslach Burnout Index (MBI)
- Expanded Mayo Physician Well Being Index (WBI)
- Survey to rank interventions

Population:

○ All Urology residents at Baylor (PGY-1 to PGY-5)



Participants:

- o 35 unique residents
- 54 completed surveys over study period
- Longitudinal data from 11 residents

• Initial data:

- High levels of Emotional Exhaustion
- High levels of Depersonalization
- High levels of Personal Accomplishment



MBI

- Decrease in Depersonalization by 28% (p=0.04)
- Decrease in Emotional Exhaustion by 20% (p=0.15)
- Preserved high Personal Accomplishment

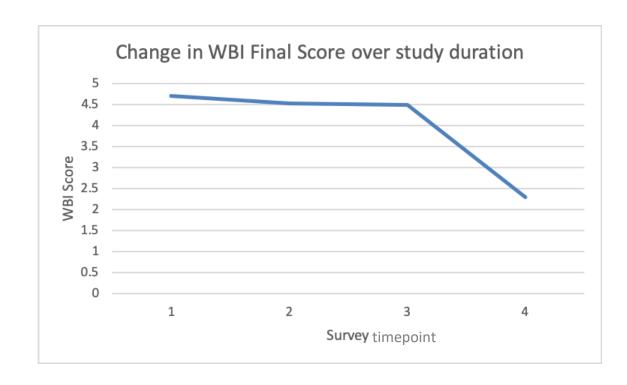
WBI

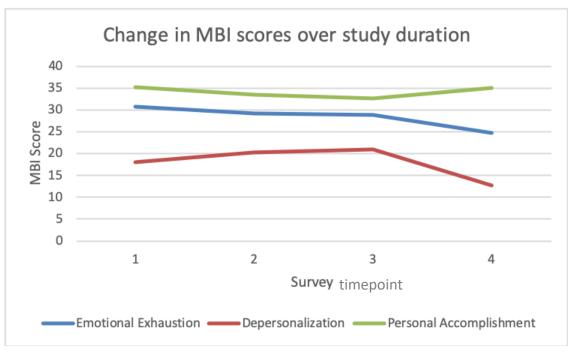
○ Decrease in average WBI Burnout score by 52% (p=0.006)

Post-study Survey:

- 55% response rate
- Resident-driven social outings most meaningful

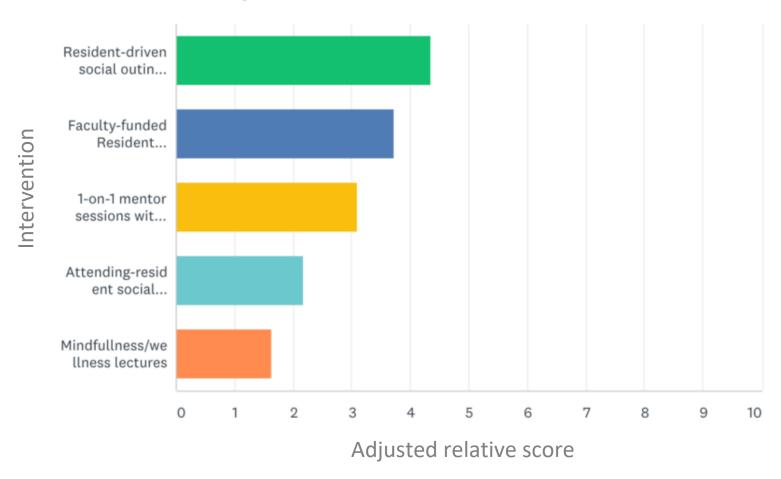








Most meaningful interventions, ranked



Results







Results







Our Program Director
(Not harmed in the making of this photo)



Conclusion

Rates of burnout still high, as expected

 Resident wellness interventions may lead to tangible improvements in burnout

More research needed!



References

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