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**¹²
  - 1 of every 12 surgeons with SI
  - 40-80% of residents!³

• **Worst for Urology residents... and worsening!**⁴

* 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)
Results

• **Participants:**
  - 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
Results

• **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
Results

Change in WBI Final Score over study duration

Change in MBI scores over study duration

Survey timepoint

1  2  3  4

WBI Score

0  0.5  1  1.5  2  2.5  3  3.5  4  4.5  5

Survey timepoint

1  2  3  4

MBI Score

0  5  10  15  20  25  30  35  40

Emotional Exhaustion  Depersonalization  Personal Accomplishment
Results

Most meaningful interventions, ranked

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Adjusted relative score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident-driven social outing</td>
<td>4</td>
</tr>
<tr>
<td>Faculty-funded Resident</td>
<td>3</td>
</tr>
<tr>
<td>1-on-1 mentor sessions with attending resident</td>
<td>2</td>
</tr>
<tr>
<td>Attending-resident social</td>
<td>2</td>
</tr>
<tr>
<td>Mindfulness/wellness lectures</td>
<td>1</td>
</tr>
</tbody>
</table>
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!

