Disclaimer

- The opinions expressed in this presentation are the author’s own and do not reflect the view of the United States Government, the United States Department of Defense, The United States Navy, or The United States Navy Bureau of Medicine and Surgery.

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- There is no external funding for this project.
Burnout

• Staff burnout described first by Freudenberger (1974) and then by Maslach et al. (1996)

• Burnout is a work-related syndrome – 3 domains
  o Emotional Exhaustion (EE): feelings of being emotionally overextended and exhausted by one’s work.
  o Depersonalization (DP): an unfeeling and impersonal response towards clients/patients.
  o Personal Accomplishment (PA): feelings of competence & successful achievement in one’s work.

• Maslach Burnout Inventory (MBI) includes the Human Services Survey
  o Most commonly used scale to measure burnout for health care professionals
  o Self-report scale, 22 items, each item scored from 0 (never) to 6 (every day) based on frequency of the feelings addressed by each item
  o EE (nine items, range 0-54); DP (five items, range 0-30); PA (eight items, 0-48)
    o “I fee emotionally drained from my work.” “I have accomplished many worthwhile things in this job.” “I doubt the significance of my work.”
Burnout - Prevalence

• 28% of US work force experience burnout
  o 38% among physicians

• Burnout in civilian Mental Health (MH) workers range from 21-67%

• Army - 45% of deployed Primary Care, 33% MH and 15%
  all providers reported significant levels of burnout

• Navy – Burnout among military MH providers comparable to civilian MH providers
  o Deployment had no effect on burnout

• Anesthesiologists - 10-41% experience burnout
  o 16-62% - high Emotional exhaustion
  o 10-91% - high Depersonalization
  o 13-65% - low Personal achievement

• Surgeons – 30-38% experience burnout
Burnout - Consequences

<table>
<thead>
<tr>
<th>Patient Care</th>
<th>Health Care System</th>
<th>Physician Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>• ↓ Quality of care</td>
<td>• ↑ Absenteeism</td>
<td>• Depression</td>
</tr>
<tr>
<td>• ↑ Medical errors</td>
<td>• ↑ Job turnover</td>
<td>• ↓ Quality of life</td>
</tr>
<tr>
<td>• ↓ Patient satisfaction</td>
<td>• ↓ Access to care</td>
<td>• Lack of empathy</td>
</tr>
<tr>
<td>• ↓ Tx outcomes</td>
<td>• ↓ Job performance</td>
<td>• Difficulty sleeping</td>
</tr>
<tr>
<td></td>
<td>• ↓ Job satisfaction</td>
<td>• Substance abuse</td>
</tr>
<tr>
<td></td>
<td>• ↑ Healthcare cost</td>
<td>• Poor physical health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Motor vehicle crashes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Marital issues</td>
</tr>
</tbody>
</table>
1. Have you experienced any of the following burnout symptoms in the past year?

**Emotional Exhaustion?**

(feelings of being emotionally overextended and exhausted by one’s work)
2. Have you experienced any of the following burnout symptoms in the past year?

Depersonalization?

(an unfeeling and impersonal response towards clients/patients)
3. Have you experienced any of the following burnout symptoms in the past year?

**Personal Accomplishment?**
(feelings of competence & successful achievement in one’s work)
Burnout - NCCOSC Projects

Navy Psychology Survey 2017
- Needs assessment survey for Navy psychology community
- Conducted every 2-3 years since 2009
- 102 psychologists completed the survey

Staff Wellness Survey 2017
- Conducted every 2-3 years since 2012 at a large Military Treatment Facility
- 277 LIPs, 200 nurses and 450 others responded to the survey
Navy Psychology Survey 2017
Navy Psychology Survey 2017

- 92% Active duty, 6% civilians
- O3(GS12) 46%, O4(GS13) 30%, O5/O6(GS14/15) 14%
- Practicing as a licensed psychologist: M: 6 years
- MTF (70%), Operational (19%), Other (8%)
- 37% spent at least 30% of their time on collateral duties
- 64% were deployed at least twice and 33% were deployed once as a psychologist
- Deployed an average of 15 months in total
# Maslach Burnout Inventory [MBI]

<table>
<thead>
<tr>
<th>Domain [Min-Max]</th>
<th>Burnout Category</th>
<th>Current Psychologist Sample Mean (SD)</th>
<th>2014 Psychologist Comparison Mean (SD)</th>
<th>Civilian Comparison Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Exhaustion [EE] [0-54]</td>
<td>Low 31%</td>
<td>23.54 (11.55)</td>
<td>20.16 (11.44)</td>
<td>16.89 (8.90)</td>
</tr>
<tr>
<td></td>
<td>Moderate 28%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>High 41%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depersonalization [DP] [0-30]</td>
<td>Low 65%</td>
<td>6.06 (5.58)</td>
<td>5.30 (5.03)</td>
<td>5.72 (8.9)</td>
</tr>
<tr>
<td></td>
<td>Moderate 23%</td>
<td></td>
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<tr>
<td></td>
<td>High 12%</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Personal Achievement [PA] [0-48]</td>
<td>Low 5%</td>
<td>39.53 (5.26)</td>
<td>38.57 (7.23)</td>
<td>30.87 (6.37)</td>
</tr>
<tr>
<td></td>
<td>Moderate 34%</td>
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<tr>
<td></td>
<td>High 61%</td>
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</tbody>
</table>
Main Take Home Points

• Burnout
  o EE higher, DP higher, PA higher than the 2014 psychologist sample and the civilian comparisons
    o 41% experience high EE, 12% high DP, 61% high PA

• Job Satisfaction
  o Areas of lowest satisfaction: Opportunities for promotion and quality of supervision

• Work-Family Conflict/Family-Work Conflict
  o High WFC than the comparison groups
  o Low FWC than the comparison groups
Staff Wellness Survey 2017
2017 Staff Wellness Survey

- Demographics
- Work specific data
- Political climate
- Operational commitments
- Work-family conflict
- Maslach Burnout Inventory (MBI)
  - Emotional Exhaustion (EE)
  - Depersonalization (DP)
  - Personal Achievement (PA)
- Abridged Job Descriptive Index (aJDI)
  - Six domains
    - Satisfaction with co-workers
    - General job satisfaction
    - Present work exciting/rewarding
    - Pay
    - Promotion opportunities
    - Quality of supervision
- Fatigue
- Leadership satisfaction
- Self care
## Demographics

<table>
<thead>
<tr>
<th>Sex</th>
<th>(%)</th>
<th>Military status</th>
<th>(%)</th>
<th>Marital status</th>
<th>(%)</th>
<th>Hours worked per week</th>
<th>(%)</th>
<th>Moonlighting</th>
<th>(%)</th>
<th>Time on direct patient care</th>
<th>(%)</th>
<th>Time on collateral duties</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>58.2</td>
<td>Enlisted</td>
<td>27.4</td>
<td>Single</td>
<td>24.2</td>
<td>3.5</td>
<td>3.5</td>
<td>None</td>
<td>90.7</td>
<td>0%</td>
<td>11.9</td>
<td>0%</td>
<td>8.1</td>
</tr>
<tr>
<td>Male</td>
<td>41.4</td>
<td>Officers</td>
<td>72.6</td>
<td>Married</td>
<td>9.0</td>
<td>&lt;40</td>
<td>41</td>
<td>&lt; 5 hrs/week</td>
<td>4.1</td>
<td>&lt;40%</td>
<td>16.8</td>
<td>1-20%</td>
<td>48.3</td>
</tr>
<tr>
<td>Age group</td>
<td></td>
<td></td>
<td></td>
<td>Divorced</td>
<td>2.0</td>
<td>40</td>
<td>32.4</td>
<td>5-19 hrs/week</td>
<td>4.2</td>
<td>21-40%</td>
<td>19.9</td>
<td>1-40%</td>
<td>14.2</td>
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<tr>
<td>18-24</td>
<td>6.3</td>
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<td></td>
<td>Other</td>
<td></td>
<td>41-50</td>
<td>12.2</td>
<td>&gt;19 hrs/week</td>
<td>1.1</td>
<td>&gt;40%</td>
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<tr>
<td>25-30</td>
<td>14.8</td>
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<td>51-60</td>
<td>4.6</td>
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<td>31-35</td>
<td>14.8</td>
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<td>61-70</td>
<td>6.3</td>
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<tr>
<td>36-40</td>
<td>15.8</td>
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<td>70+</td>
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<td>41-45</td>
<td>12.7</td>
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<td>46-50</td>
<td>10.4</td>
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<td>50+</td>
<td>25.3</td>
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<tr>
<td>Federal status</td>
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<td></td>
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<tr>
<td>Active duty (AD)</td>
<td>52</td>
<td></td>
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<tr>
<td>Civilian (GS)</td>
<td>44</td>
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<tr>
<td>Primary job</td>
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<tr>
<td>Provider</td>
<td>28.8</td>
<td></td>
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<tr>
<td>Nurse</td>
<td>22.3</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Other</td>
<td>48.9</td>
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</tr>
</tbody>
</table>

**Federal status**
- Active duty (AD)
- Civilian (GS)

**Primary job**
- Provider
- Nurse
- Other

**Military status**
- Enlisted
- Officers

**Marital status**
- Single
- Married
- Divorced
- Other

**Hours worked per week**
- <40
- 40
- 41-50
- 51-60
- 61-70
- 70+

**Moonlighting**
- None
- < 5 hrs/week
- 5-19 hrs/week
- >19 hrs/week

**Time on direct patient care**
- 0%
- <40%
- 41-60%
- 61-80%
- >80%

**Time on collateral duties**
- 0%
- 1-20%
- 21-40%
- >40%
# MBI - Levels of Burnout

<table>
<thead>
<tr>
<th>MBI</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Achievement</td>
<td>34.8%</td>
<td>24.6%</td>
<td>40.6%</td>
</tr>
<tr>
<td>Depersonalization</td>
<td>62.4%</td>
<td>15.2%</td>
<td>22.4%</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>42.9%</td>
<td>19.2%</td>
<td>38.1%</td>
</tr>
</tbody>
</table>
### Burnout/Fatigue - Active Duty vs. Civilians

<table>
<thead>
<tr>
<th></th>
<th>Active duty</th>
<th>Civilians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Exhaus**[0-54]**</td>
<td>24.4</td>
<td>19</td>
</tr>
<tr>
<td><strong>Group differs p&lt;.05</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depersonalization**[0-30]**</td>
<td>6.9</td>
<td>3.8</td>
</tr>
<tr>
<td>Personal Achievement**[0-48]**</td>
<td>35.1</td>
<td>36.3</td>
</tr>
<tr>
<td>Fatigue**[0-32]**</td>
<td>15.3</td>
<td>11.7</td>
</tr>
</tbody>
</table>

### Similarities

**↓ Emotional Exhaustion:** ↑ general job satisfaction
**↑ Emotional Exhaustion:** ↑ work-family conflict
**↑ Fatigue:** ↑ work-family conflict

#### Active duty

- **↓ Emotional Exhaustion:**
  - ↑ satisfaction with staffing level
  - ↑ satisfaction with work-life balance
  - ↑ work exciting/rewarding

- **↓ Depersonalization:**
  - ↑ comfortable asking help for work stress
  - ↑ work exciting/rewarding
  - **↑ Depersonalization:**
    - ↑ work hours/week

- **↑ Personal Achievement:**
  - ↑ work exciting/rewarding
  - **↓ Personal Achievement:**
    - ↑ family-work conflict
    - ↑ work affected by political climate

- **↓ Fatigue:**
  - ↑ satisfaction with work-life balance
  - ↑ work exciting/rewarding
  - ↑ physical activity
  - **↑ Fatigue:**
    - ↑ direct patient care

#### Civilians

- **↓ Emotional Exhaustion:**
  - ↑ satisfaction with admin support
  - ↑ promotion opportunities
  - **↑ Emotional Exhaustion:**
    - ↑ concerns over political climate

- **↑ Depersonalization:**
  - ↑ work-family conflict

- **↑ Personal Achievement:**
  - ↑ command support to peers after a stressful event

- **↓ Fatigue:**
  - ↑ satisfaction with collaterals
  - ↑ promotion opportunities
## Themes

**Perform best when:**

<table>
<thead>
<tr>
<th>Active duty</th>
<th>Work is exciting/rewarding and have a good work-life balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enlisted</td>
<td>Satisfied with collaterals and provide direct patient care</td>
</tr>
<tr>
<td>Civilian</td>
<td>More opportunities for promotion and are satisfied with collaterals</td>
</tr>
<tr>
<td>Provider</td>
<td>Have general job satisfaction and experience minimal work-family conflict</td>
</tr>
<tr>
<td>Nurse</td>
<td>Work is exciting/rewarding</td>
</tr>
<tr>
<td>Trainee</td>
<td>Work is exciting/rewarding</td>
</tr>
</tbody>
</table>

"World-Class Care...Anytime, Anywhere"
NCCOSC Burnout Projects
Overall Conclusions

• **Burnout**
  - 33-43% of staff = **high** EE
  - Enlisted have the **highest** EE [69%]
  - EE and DP in AD **higher** than Civilian comparisons
  - PA in Civilian nurses **higher** than AD nurses

• **Work-Family/Family-Work Conflict**
  - Work-Family conflict **higher** than Civilian comparisons
  - Family-Work conflict **lower** than Civilian comparisons

• **Job Satisfaction**
  - Job satisfaction among psychologist and nurses **higher** than Civilian comparisons
Current Efforts to Prevent Burnout
CgOSC Key Components

Stress Continuum Model
Core Leader Function
Caregiver Occupational Stress First Aid (COSFA)
Resilience
Self-Care, Buddy-Care & Unit Consultation
World-Class Care… Anytime, Anywhere

Staff Wellness Survey 2017

Ready
- Adaptive coping
- Optimal functioning
- Wellness

Features
- Well trained and prepared
- Fit and focused
- In control
- Optimally effective
- Behaving ethically

Reacting
- Mild and transient distress or loss of optimal functioning
- Temporary & reversible
- Low risk for illness

Features
- Irritable, angry
- Anxious or depressed
- Physically too pumped up or tired
- Reduced self-control
- Poor focus
- Poor sleep

Injured
- More severe and persistent distress or loss
- Higher risk for illness

Causes
- Life threat, Loss, Inner conflict, Wear and tear

Features
- Panic or rage
- Loss of control of body/mind
- Can’t sleep
- Recurrent nightmares/bad memories
- Persistent shame, guilt or blame
- Loss of moral values and beliefs

Ill
- Persistent and disabling distress or loss of function
- Unhealed stress injuries
- Mental disorder

Types
- PTSD
- Major Depression
- Anxiety
- Substance abuse

Features
- Symptoms and disability persist over many weeks
- Symptoms and disability get worse over time

Unit Leader Responsibility

Individual, Peer, Family Responsibility

Caregiver Responsibility
## Burnout Symptom Domains

<table>
<thead>
<tr>
<th>Mind</th>
<th>Body</th>
<th>Spirit</th>
<th>Social</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irritability</td>
<td>Sleep Disturbances</td>
<td>Dehumanize Clients/Patients</td>
<td>Perfunctory Communication</td>
<td>Aggression</td>
</tr>
<tr>
<td>Anxiety</td>
<td>Somatic Complaints</td>
<td>Questioning faith</td>
<td>Poor Concentration</td>
<td>Callousness</td>
</tr>
<tr>
<td>Sadness</td>
<td>Fatigue</td>
<td>Helplessness/Hopelessness</td>
<td>Withdrawal/Detachment</td>
<td>Pessimism</td>
</tr>
<tr>
<td>Guilt</td>
<td>Illness</td>
<td>Disillusioned</td>
<td>“Presenteeism”</td>
<td>Cynicism</td>
</tr>
<tr>
<td>Depression</td>
<td>Weight gain or loss</td>
<td>Meaning and Purpose</td>
<td>Interpersonal Conflict</td>
<td>Substance use/abuse</td>
</tr>
</tbody>
</table>
4. How many of the previous burnout symptoms have you experienced in the past month?

0?
1-3?
4-7?
8 or more?
Other Burnout Related Factors

5. Do you feel your on-call duty has contributed to burnout?

Yes?
No?
Maybe?
Other Burnout Related Factors

6. Do you get the recommended 8 hours of rest for every 16-hour consecutive work period?

Always?
 Mostly?
 Some of the time?
 Nearly none of the time?
Individual Resilience Training (IRT)

Adaptation of cognitive-behavioral principles to address: concept of resilience, values, attitudes/beliefs and behaviors

Target evidence-informed resilience factors:
- Optimism
- Flexible Thinking
- Mindfulness
- Positive Coping
- Control & Acceptance
Self-Care: Not What You May Think

• “Self-care” coined in 1980 by healthcare professionals prescribing healthy lifestyles & stress management techniques

• Self-care is:
  – Choosing behaviors that balance the effects of stress from the four domains to increase well-being
  – Learning to self-soothe when feeling stressed or distressed
What is a Self-Care Plan?

• Systematic approach to identifying warnings signs of stress and burnout in four self-care domains:
  — Physical, Emotional, Social, Spiritual

• Self-awareness a must for self-care:
  — Identifies strengths and weaknesses
  — Helps one understand reactions in specific and overall stressful situations
  — Helps manage, not be overwhelmed by emotions
Developing a Self-Care Plan

• Identify current coping and self-care strategies
• Make a commitment to yourself
• Break the Conspiracy of Silence – Talk about what is troubling you
• Build positive personal and professional support systems that does not fuel your stress
• Recognize your personal limitations by establishing boundaries
• Develop your own self-care plan
Mind Body Resilience Training (MBRT)

- Flexible training curriculum teaching mind-body concepts for increased resilience and toughness
- Integration of mind-body activities into the general operations of the ship
- Continued opportunities for Sailors to engage in the practices they learn
MBRT Curriculum

✔ Core Curriculum

Introduction: Goals of Mind Body Resilience Training (30 min)
Stress Resilience: Build Stress Resilience using the Mind Body Connection (60-90 min)
Mindfulness: Develop Insight & Toughness through Mindfulness (60-90 min)
Meditation: Build Resilience & Recover Faster with Meditation (60-90 min)
Flexible Thinking: Overcome the Inner Critic with Flexible Thinking (60-90 min)
Communication: Promote Cohesion with Effective Communication & Empathic Listening (60-90 min)
Valued Living: Use Values to Guide You Toward What Matters (60-90 min)
Problem Solving: Use Healthy Coping & Goal Setting Skills Overcome Problems (60-90 min)
Course Summary (20 min)

✔ Optional Modules

Sleep: Managing Sleep in the Real World (60 min)
Leadership: Enhance Cohesion & Competence through Mindful Leadership (60 min)
Thank You!

Questions?
7. Are you committed to building a self-care plan to help balance work-life demands?

Yes?
No?
Maybe?
References


• Sargent, P, Millegan, J, Delaney, E, Roesch, S, Sanders, M, Mak, H, . . . Webb-Murphy, J. Health Care Provider Burnout in a United States Military Medical Center During a Period of War. Mil Med 2016, 181(2), 136-142. doi:10.7205/MILMED-D-14-00449


• West CP, Dyrbye LN, Shanafelt,TD. Physician Burnout: Contributors, Consequences and Solutions. J of Internal Medicine 2018; https://doi.org/10.1111/joim12752