



Effects of A Multi-Pronged Wellness Intervention on Neurology Resident Burnout

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Background

- Physician burnout stems from **chronic workplace stress** and is characterized by emotional exhaustion, depersonalization, and a sense of low personal accomplishment
- It can affect the delivery of health care and can result in **poor medical decision making, diminished productivity, increased staff turnover**, and can increase the risk of **self harm**
- Among medical specialties, neurology is consistently among the highest in burnout rates, and **burnout symptoms are more prevalent among neurology residents** as compared to other specialties or practicing neurologists

Objectives

- Understand** factors contributing to burnout in UCLA Neurology residents
- Identify** strategies for building resilience from both a systems as well as individual perspective
- Implement** effective and sustainable interventions for improving overall resident wellness

Study Methods

- A **survey-based assessment** was completed by neurology residents in June 2023 and June 2024, at the end of each academic year to elicit baseline levels of burnout and contributory factors, preferences for interventions
- The **Physician Well Being Index (PWBI)**¹ was the primary outcome used in both surveys and has been previously validated to identify residents with **low mental quality of life, high fatigue, or recent suicidal ideation at a threshold score of ≥ 5** (range, 0-7)
- Due to a small sample size, Fisher's exact test was used to assess the primary outcome
- The **Utrecht Work Engagement Scale**² was used in the 2024 survey to assess levels of energy and mental resilience while working (assessed through three dimensions: vigor, dedication and absorption)

Wellness Interventions

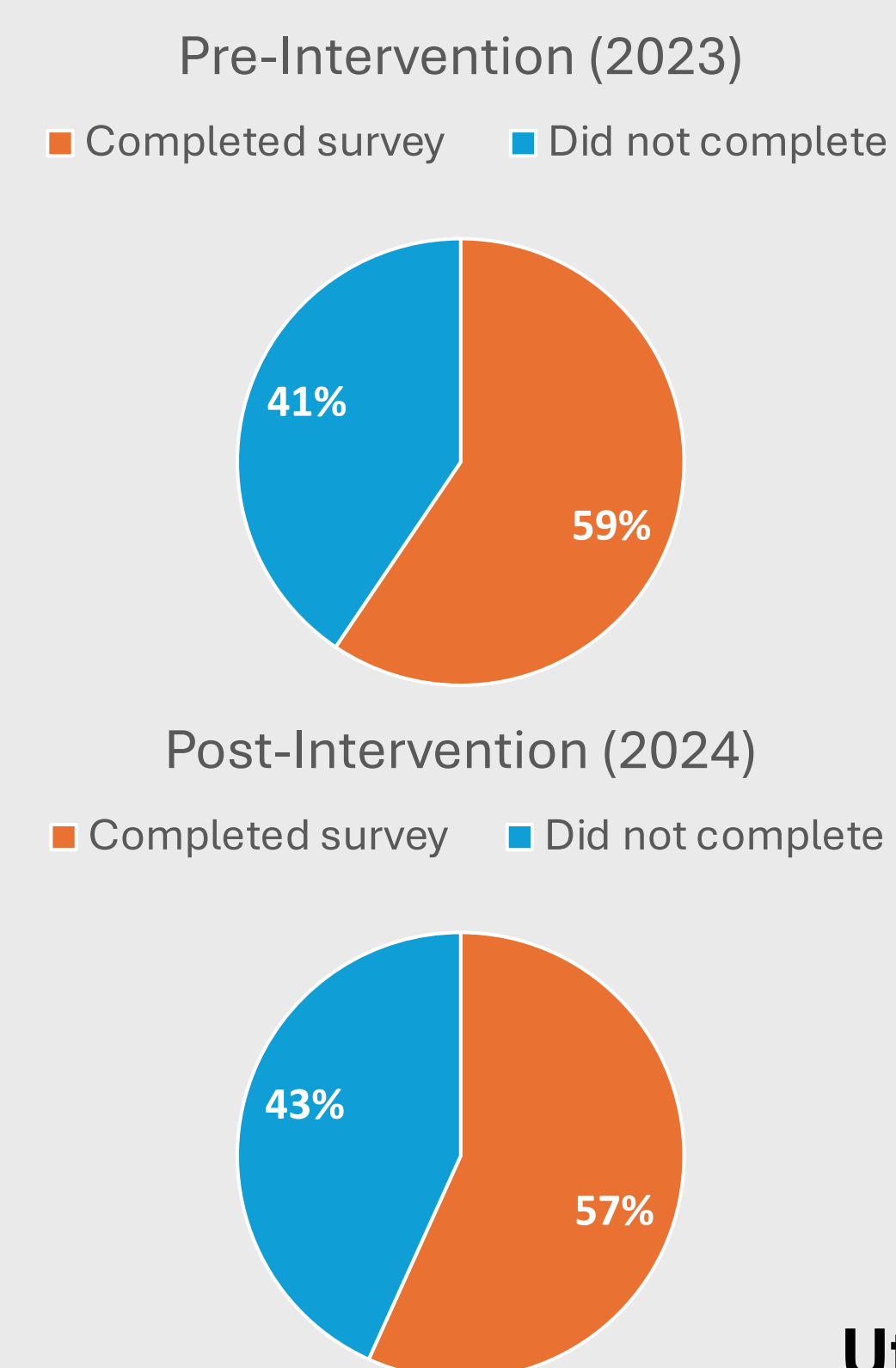
Multi-pronged approach from June 2023 to July 2024:

- Longitudinal didactics:
 - UCLA **mental health resources** available to residents through the BWC
 - Instruction on using **mindfulness to improve personal resilience** by the UCLA Mindfulness Awareness Research Center
 - Invited talk by Dr. Reza Manesh (author of "Finding Joy in Medicine")
 - Brainstorming with residents for **self-led wellness projects**
 - Dedicated time for implementation of wellness projects
- Bimonthly resident social events
- Weekly emails for spaced repetition
- Wellness "toolkits" at the beginning of PGY2 year, and prior to the RITE
- Additional measures: camaraderie-boosting measures for inpatient teams, dedicated wellness sessions at PGY2 resident bootcamp and the annual retreat

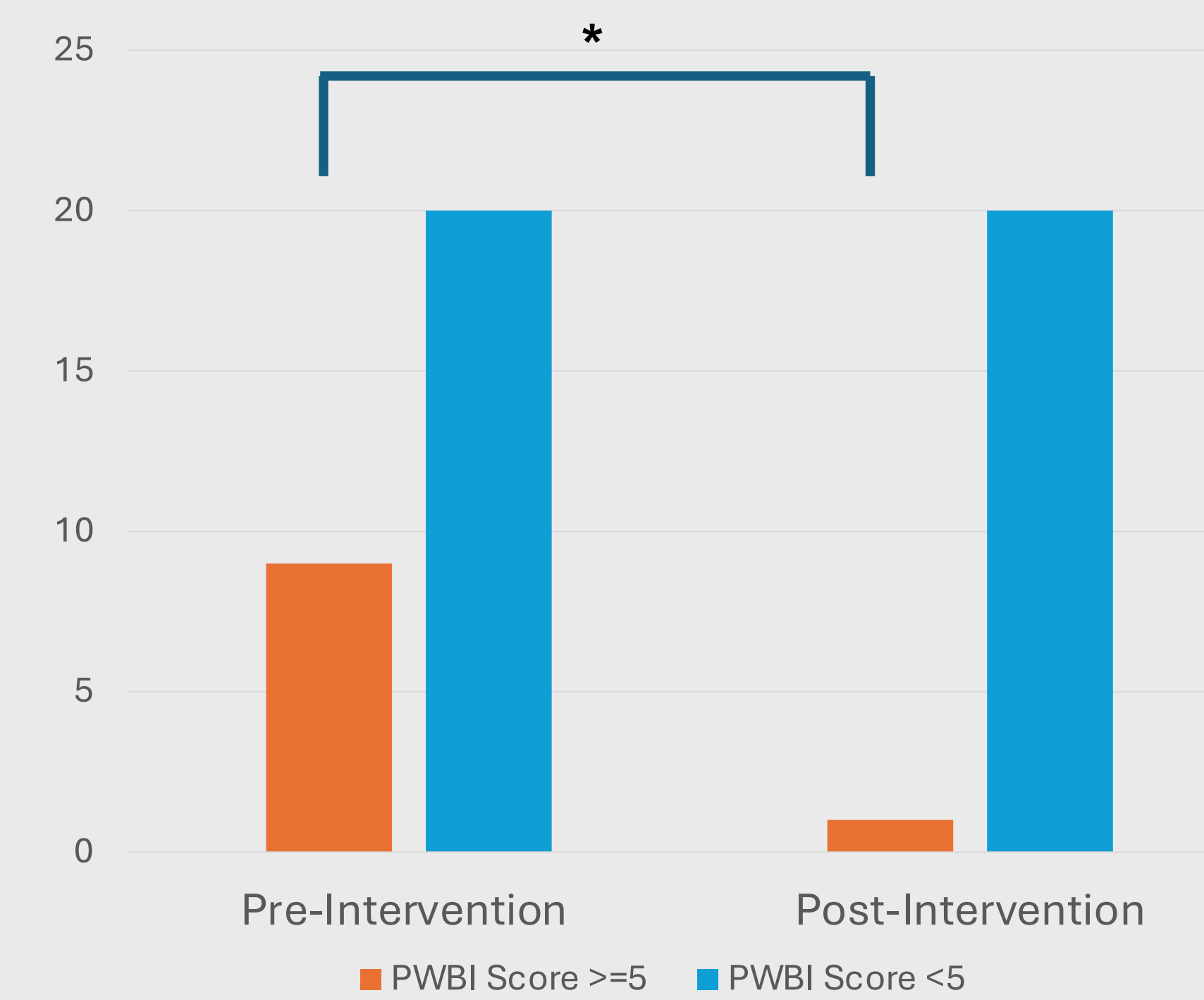


Results

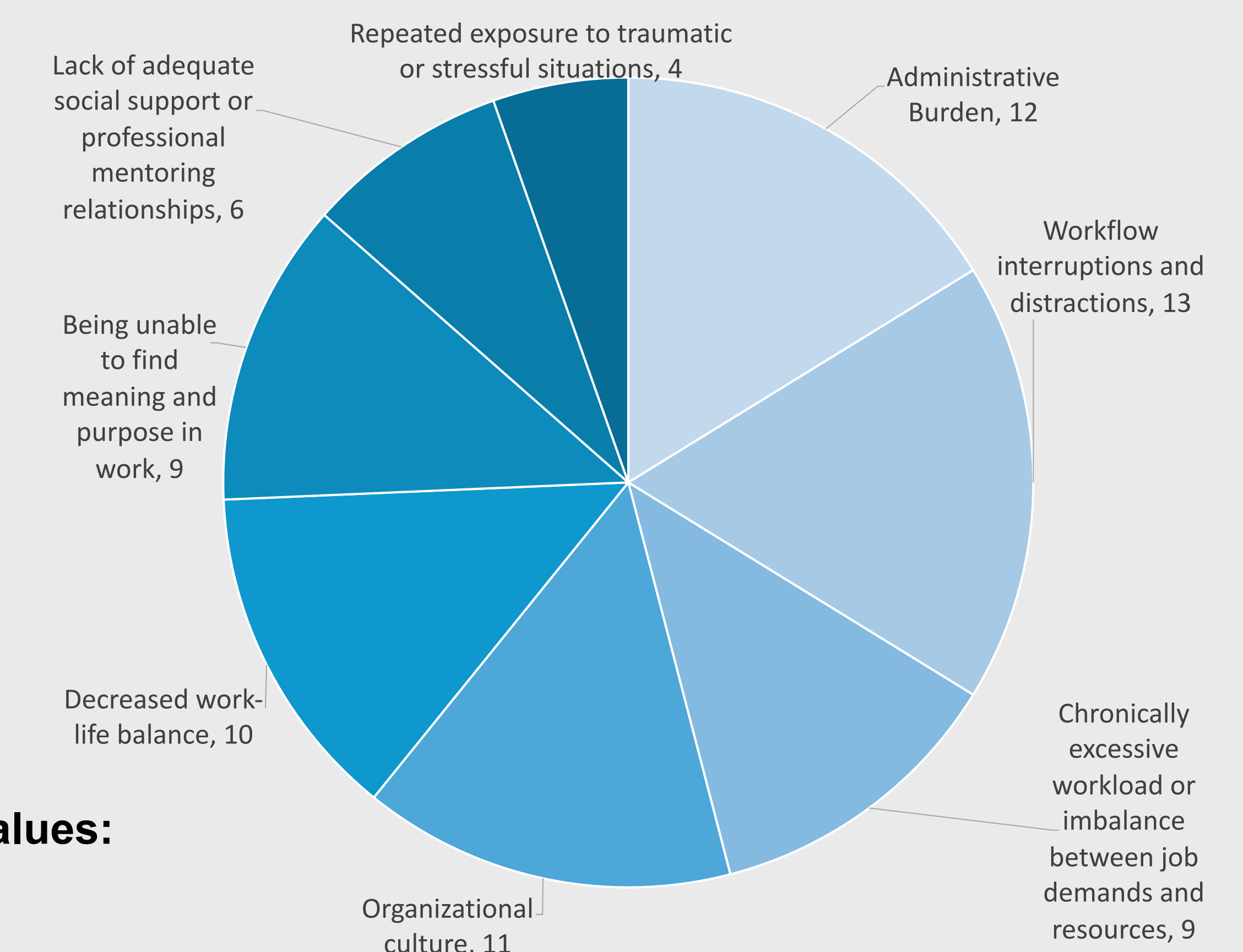
Rates of Survey Completion



Primary Outcome – PWBI Score



Contributory Factors for Burnout



Utrecht Work Engagement Scale (2024 survey only) mean values:

Vigor: 2.82 (maximum = 6)
 Dedication: 3.36 (maximum = 5)
 Absorption: 1.855 (maximum = 6)

Conclusions

- The wellness interventions were favorably received by residents
- The impact as assessed by the PWBI was statistically significant towards an improvement in burnout
- Consistent and diverse, as well as personalized wellness interventions should be further studied and may lead to continued positive benefits for burnout reduction
- Next steps and implementing new this year: Coffee with a Colleague Neurology Peer Support Program!

References

- Dyrbye LN, Satele D, Sloan J, Shanafelt TD. Ability of the physician well-being index to identify residents in distress. J Grad Med Educ. 2014 Mar;6(1):78-84. doi: 10.4300/JGME-D-13-00117.1. PMID: 24701315; PMCID: PMC3963800.
- Schaufeli M, Bakker A. Utrecht Work Engagement Scale. Preliminary Manual. Netherlands: Utrecht University; 2003.