



Behavioral Health &
Wellness Program

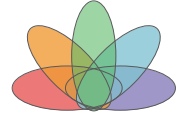
University of Colorado Anschutz Medical Campus
School of Medicine

DIMENSIONS: Work & Well-Being Toolkit for Physicians



Behavioral Health & Wellness Program

University of Colorado Anschutz Medical Campus • School of Medicine



The DIMENSIONS: Work & Well-Being Toolkit for Physicians was developed by the
University of Colorado Anschutz Medical Campus, School of Medicine,
Behavioral Health and Wellness Program
September 2014

Cynthia W. Morris, PsyD, Clinical Director
Rebecca M. Richey, PsyD, Assistant Clinical Director
Laura F. Martin, MD, Medical Director
Chad D. Morris, PhD, Director

Acknowledgements:

We want to thank the Colorado Medical Society (CMS) Expert Panel on Wellness for their support, input and resources:

Doris Gundersen, MD, Chair
David Hutchison, MD
Mark Fogg, JD
Jeanette Guerrasio, MD
Brent Keeler, MD
Jan Kief, MD
Dianne McCallister, MD
Pierre Onda, MD
Debra Parsons, MD
Warren Pettine

Funding for this project was generously provided by the Colorado Medical Society.

For further information about this toolkit, please contact:

Behavioral Health and Wellness Program
University of Colorado Anschutz Medical Campus
School of Medicine
1784 Racine Street
Mail Stop F478
Aurora, Colorado 80045

Phone: 303.724.3713
Fax: 303.724.3717
Email: bh.wellness@ucdenver.edu
Website: www.bhwellness.org



TABLE OF CONTENTS

| | |
|--|----|
| Overview | 4 |
| Why is a Work & Well-Being Toolkit for Physicians Needed? | 5 |
| Why Focus on Physician Health and Well-Being? | 6 |
| Employers, Healthcare Providers and Peers have an Important Role to Play | 7 |
| Physician Health and Well-Being | 9 |
| Consequences of Physician Distress and Illness | 10 |
| Factors that Influence Physician Well-Being | 11 |
| Physicians and Work Satisfaction | 12 |
| A Model for Whole Health | 14 |
| 8 Dimensions of Wellness | 16 |
| <i>Skills & Strategies Toolbox: Assess Your Wellness</i> | 17 |
| Self-Assessment | 18 |
| Physician Burnout | 20 |
| <i>Skills & Strategies Toolbox: Know Your Limits</i> | 21 |
| <i>Skills & Strategies Toolbox: Strategies to Avoid Burnout</i> | 22 |
| Physician Values | 23 |
| <i>Skills & Strategies Toolbox: Defining Your Values</i> | 24 |
| Mindfulness | 27 |
| <i>Skills & Strategies Toolbox: Mindful Awareness Attention Scale (MAAS)</i> | 29 |
| Integrating Mindfulness | 31 |
| <i>Skills & Strategies Toolbox: Facilitating Your Practice</i> | 31 |
| Building a Change Plan | 33 |
| Stages of Change | 34 |
| <i>Skills & Strategies Toolbox: Determine Your Stage of Change</i> | 35 |
| Changing Behaviors | 35 |
| <i>Skills & Strategies Toolbox: Create New Healthy Habits</i> | 36 |
| Goal Setting | 36 |
| SMART Goals | 37 |
| <i>Skills & Strategies Toolbox: Setting SMART Goals</i> | 38 |
| <i>Skills & Strategies Toolbox: Setting Healthy Boundaries</i> | 39 |
| Sustaining Change | 41 |
| Resources | 43 |

Overview

1. Why is a Work & Well-Being Toolkit for Physicians Needed?
2. Why Focus on Physician Health and Well-Being?
3. Employers, Healthcare Providers and Peers have an Important Role to Play

Why is a Work & Well-Being Toolkit for Physicians Needed?

Being a physician is an incredible gift. We are given the opportunity to change the lives of our patients for the better. We save lives. We love our jobs, and there are few higher callings. We work incredibly hard, long, emotionally and physically demanding hours. We take on large amounts of responsibility that have life-threatening consequences when we make mistakes and incur large amounts of debt to obtain this honorable, yet challenging, profession.

These working conditions can threaten our well-being. When our well-being is at risk, we can make mistakes, lose satisfaction in our careers, become burned out, fail to take good care of our physical and emotional health, or develop new illnesses, such as depression or substance use disorders.

As individuals, we are happiest and healthiest when we adopt healthy lifestyle choices. In turn, when we are well, our patient care is at its highest quality and the public benefits. This toolkit can help you improve your wellness, prevent burnout and manage distress that may already be present in your life through the use of healthy lifestyle choices. Our choices regarding our health have the power to improve not only our physical health, but also the health of our careers, our family relationships and the public we serve.^{1,2} However, making healthy choices often requires effort and changes in lifestyle that can upset the status quo at home or work. You may feel like you do not have a lot left to give toward making a positive lifestyle change following a long day at the office. It may also seem like there is no room for change. This toolkit offers information, skills and strategies to create and implement a plan for work and well-being that meets your unique needs.

*Laura F. Martin, MD
Medical Director
Behavioral Health and Wellness Program*



Why Focus on Physician Health and Well-Being?

Healthy doctors live longer, lead more satisfying lives and are safer practitioners. The safe and effective practice of medicine requires extensive training and skill development. Physicians must practice active listening to collect medical histories. They use sight, sound and touch to perform patient examinations. Physicians integrate this data, along with diagnostic testing, through sound clinical judgment, one of the most powerful tools of the physician. Employing effective communication skills, physicians then translate their clinical judgment into action through other healthcare providers or patients. Impairment in any of these areas can result in sub-optimal care or even harm. Therefore, it is imperative to address conditions that can create either temporary or permanent impairment in a physician's performance.³ Medical errors can have profound effects on patient care, a physician's sense of self-worth, career and work environment. A physician's wellness is associated with fewer medical errors, enhanced satisfaction and a positive environment in the workplace.^{4,5}

Healthy doctors aren't "born" that way. There are common, but not insurmountable, barriers to being a healthy doctor. Many successful doctors attribute their success in training to their selflessness, emotional and physical strength,

drive for success and conscientiousness. They are rewarded for being the first to arrive, not attending to their physical or emotional needs, and being the last to leave. While many of these characteristics are tied to success, they can also be barriers to seeking and receiving assistance when in need. Physicians may view taking time for self-care or asking for help as selfish, weak or irresponsible. Or they may fear that coworkers or employers will view them in these ways. Many physicians may not even realize how in need of help they are.

Wellness does not happen in a vacuum. In order to create wellness in any environment, collaboration and support from others is essential.



Employers, Healthcare Providers and Peers have an Important Role to Play

Although academic medical training centers, hospitals, other medical staff employers and physicians themselves are aware of the costs of impaired physicians, these concerns are often not addressed when they are identified. However, employers, healthcare providers and their peers can all have a significant effect on this process. Given the potential effect on public health, it is our ethical duty to support the health of our peers through informal support and formal monitoring.^{6,7}



About This Toolkit

Who is this toolkit for?

This toolkit is designed for use by physicians to facilitate their individual and workplace well-being. Physicians' peers and employers can also use this toolkit as a reference.

How do I use this toolkit?

The toolkit contains a variety of information including step-by-step instructions about:

- Education regarding the importance of maintaining overall wellness for a physician;
- Developing skills for assessing one's overall wellness and identifying goals to further promote wellness;
- Low burden means of assessing readiness to change related to increasing wellness behaviors;
- Evidence-based strategies for improving wellness.

The use of this toolkit should not be a substitute for seeking out appropriate healthcare, and it is recommended that each individual who uses this toolkit identify their own primary care physician as an important step away from treating oneself and a step toward wellness.



SKILLS & STRATEGIES TOOLBOX

The Skills & Strategies Toolboxes contain activities to engage you in the process of health behavior change. Take time to complete these activities. The information you gain can provide insight and awareness, direct your focus and guide your actions.

End Notes

- ¹ Wallace, J. E., Lemaire, J. B., & Ghali, W. A. (2009). Physician wellness: A missing quality indicator. *The Lancet*, *374*(9702), 1714-1721.
- ² Landon, B. E., Reschovsky, J. D., Pham, H. H., & Blumenthal, D. (2006). Leaving medicine: The consequences of physician dissatisfaction. *Medical Care*, *44*(3), 234-242.
- ³ Taub, S., Morin, K., Goldrich, M. S., Ray, P., & Benjamin, R. (2006). Physician health and wellness. *Occupational Medicine*, *56*(2), 77-82.
- ⁴ Shanafelt, T. D., Sloan, J. A., & Habermann, T. M. (2003). The well-being of physicians. *American Journal of Medicine*, *114*(6), 513-519.
- ⁵ Shanafelt, T. D., Balch, C. M., Bechamps, G., Russell, T., Dyrbye, L., Satele, D., ... & Freischlag, J. (2010). Burnout and medical errors among American surgeons. *Annals of Surgery*, *251*(6), 995-1000.
- ⁶ American Medical Association. (2004). Opinion 9.0305 – Physician health and wellness. *American Medical Association Code of Medical Ethics*. Retrieved from <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion90305.page>
- ⁷ Taub, S., Morin, K., Goldrich, M. S., Ray, P., & Benjamin, R. (2006). Physician health and wellness. *Occupational Medicine*, *56*(2), 77-82.

Consequences of Physician Distress and Illness

Physicians suffer from many of the same illnesses that non-physicians do. While physicians are more likely to engage in healthy lifestyles than the general population (e.g. less tobacco use), they still develop acute and chronic medical and emotional illnesses such as age-related cognitive decline and dementia, diabetes, heart disease, depression and substance use disorders.^{1,2} However, they may be less likely to take the time to acknowledge or seek out treatment for the illness. They are also at higher risk for some disorders and suicide.³

Many of the characteristics that lead to success, such as a desire for excellence, competitiveness, independence and reliability, can also contribute to

Illness may or may not cause impairment in the workplace, and the determination of when impairment occurs can be quite difficult for physicians to identify for themselves. The physician may subconsciously use denial, minimization or rationalization and avoidance of seeking their own healthcare in order to maintain the status quo. Thus, having a trusted primary care physician or other healthcare specialist is imperative and ideally, should be sought out prior to having any illness.

A discussion should also occur with a treating physician regarding whether a physician's health monitoring program should be involved. These programs vary from state to state in how

Early intervention and evaluation offer the best opportunities for a successful outcome.

a failure to get help. In fact, physicians may even try to work harder to overcome feelings of inadequacy because they are uncomfortable with asking for help or with feelings of not having control. They may be concerned about the perceived stigma or possible discrimination by a medical board or employer. This potentially creates a downward spiral of worsening illness. Untreated or severe illness can create stress (and distress) for the physician, the physician's family and the workplace.

they operate, so a physician should become acquainted with their state's program before there is a need. If nothing else, it is helpful to have this information for your peers. Many of these programs, including the Colorado Physician Health Program (CPHP), provide a free evaluation and, if engaged proactively, can maintain a physician's confidentiality from the medical board. In the absence of this safe haven, physicians may not seek out appropriate self-care for fear that the medical board will restrict or suspend their license.

Physician Health Programs

Federation of State Physician Health Programs (FSPHP)
<http://www.fsphp.org>

Colorado Physician Health Program (CPHP)
<http://www.cphp.org>

Factors that Influence Physician Well-Being

There are several factors that influence the well-being, or lack thereof, of a physician. In 2013, Friedburg and colleagues found that two major frustrations physicians face are in working with Electronic Health Records (EHRs) and providing quality healthcare.⁴ These two frustrations, beyond all others, contribute to physicians' experience of career dissatisfaction.

Electronic Health Records (EHR)

While EHRs may eventually be a powerful tool for interconnectivity, currently EHRs often contribute significantly to a physician's decreased level of satisfaction and well-being at work. Poor EHR usability, confusing interfaces, time-consuming data entry, interference with direct patient care, problems communicating with other professionals, and degradation of documentation are major frustrations physicians report having with EHRs. Although physicians agree with the concept of an EHR, they regularly report that in practice EHRs do not meet the goals of increased access to patient information, streamlined diagnosis and treatment, or improving the quality of care.

Quality Patient Care

Competing Demands. Physicians must find a delicate balance between providing quality healthcare to patients and meeting the demands of third-party payers. These third-party payers sometimes deny coverage for a patient even when a treatment has been prescribed by a physician. When this occurs, physicians must make a difficult decision regarding whether to carry out their prescribed treatment, follow the directive of the managed care company, or appeal, which takes precious time. Other instances of competing demands occur when practice leadership is unsupportive of new ideas or has unrealistic expectations regarding the number of billed clients seen. Another competing demand is balancing the commitment of time and energy between work and home life.

Workload. Physicians who have more control and autonomy over their workflow report greater well-being and satisfaction. When physicians can appoint their own colleagues, have control over their schedule, and see the type of patient they wish, in the time period they wish, they are happier with their work situation overall.

Working with Other Physicians. Relationships between physicians can also have significant effects on well-being and satisfaction with work. When physicians feel respected, perceive teamwork among providers, and feel they are compensated well, they report feeling more satisfied with their profession.

Other Factors. Additional factors that are associated with physician resilience include a sense of contribution, maintaining an interest in the field, appropriate use of acceptance versus change related coping skills, self awareness, ability to set appropriate limits, attending to personal care (exercise, recreation, spirituality), and personal support (family, friends and a physician).^{5,6}



Physicians who have more control and autonomy over their workflow report greater well-being and satisfaction.

Physicians and Work Satisfaction

All of these factors affect job satisfaction for physicians. When one or more of these undesirable factors are present, physicians may quickly become dissatisfied with their work. Physicians who report less satisfaction with their work also report: ^{7,8}

- Missing work frequently
- Lower levels of productivity
- Leaving medicine or retiring early
- Anxiety
- Depression
- Lower self-esteem
- Chronic fatigue
- Illegal drug use, problematic alcohol or prescription drug use
- Sleeping pattern changes
- Impaired concentration and attention
- Detachment from patients, colleagues, family, and friends
- Feelings of isolation
- Suicidal ideation



End Notes

- ¹ Shanafelt, T. D., Boone, S., Tan, L., Dyrbye, L. N., Sotile, W., Satele, D., ... & Oreskovich, M. R. (2012). Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Archives of Internal Medicine*, 172(18), 1377-1385.
- ² Hughes, P. H., Storr, C. L., Brandenburg, N. A., Baldwin Jr, D. C., Anthony, J. C., & Sheehan, D. V. (1999). Physician substance use by medical specialty. *Journal of Addictive Diseases*, 18(2), 23-37.
- ³ Frank, E., Biola, H., & Burnett, C. A. (2000). Mortality rates and causes among US physicians. *American Journal of Preventive Medicine*, 19(3), 155-159.
- ⁴ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ⁵ Jensen, P. M., Trollope-Kumar, K., Waters, H., & Everson, J. (2008). Building physician resilience. *Canadian Family Physician*, 54(5), 722-729.
- ⁶ Zwack, J., & Schweitzer, J. (2013). If every fifth physician is affected by burnout, what about the other four? Resilience strategies of experienced physicians. *Academic Medicine*, 88(3), 382-389.
- ⁷ Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52, 397-422.
- ⁸ Shanafelt, T. D., Boone, S., Litjen, T., Dyrbye, L. N., Sotile, W., Satele, D., ... Oreskovich, M. R. (2012). Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Archives of Internal Medicine*, 172(18), 1377-1385.

A Model for Whole Health

Wellness is not just the absence of illness. From a whole-health approach, it is important to work across multiple dimensions of wellness. The way a person functions in one dimension can enhance or impede the way they function in another dimension.

From this perspective, there are multiple doors to wellness. Depending on an individual's unique needs, each person's entry point will be different. Nevertheless, the best entry point is often the one that comes easiest. When a person takes steps towards wellness, they create momentum that translates into sustained health behavior change potentially spanning all dimensions.



8 Dimensions of Wellness

Emotional Wellness involves awareness of your emotions as they occur, expressing and processing your emotions in a productive and positive way, using the insight provided by your emotions to guide your actions, approaching life with optimism, creating interdependent relationships that involve trust and respect, and utilizing healthy coping mechanisms.

Environmental Wellness involves living and working in environments that are safe, healthy and facilitate your sense of well-being. Since our environments have a big impact on how we feel, it is important for your environment to be pleasing to you, free from exposure to toxins and in balance with the broader natural environment.

Financial Wellness involves accessing your financial resources and knowledge to direct financial decisions and planning. It means knowing how your investments are distributed and whether this is in alignment with your personal values and desires.

Intellectual Wellness involves engaging in mentally stimulating activities, creativity, and expanding your personal and professional knowledge and skills. Intellectual wellness also encompasses the exploration of new ideas and information.

Occupational Wellness involves finding personal satisfaction and fulfillment through work. It entails using your talents and skills to their fullest extent throughout your career as well as understanding the need for and creating a balance between work and personal time.

Physical Wellness involves being aware of and taking care of your body, including engaging in pleasurable physical activity and eating food that is nutritious. Physical wellness also involves obtaining regular medical check-ups, sleeping well, and living tobacco-free.

Social Wellness involves creating meaningful interpersonal relationships that feel supportive and satisfying. Social wellness also involves contributing positively to one's community.

Spiritual Wellness involves having a belief system that is meaningful and matches your values, establishing a life that feels purposeful, and being compassionate towards others. Spiritual wellness does not necessarily mean having a religion; rather, it focuses on your ability to attribute meaning to life and the day-to-day interactions you experience.



Eight Dimensions of Wellness



SKILLS & STRATEGIES TOOLBOX

Assess Your Wellness

Let's examine these 8 Dimensions of Wellness through a simple exercise. This exercise provides information about your specific level of wellness across these 8 dimensions. Consider the following questions as related to each dimension. Then rate yourself on a scale of 1-Low to 10-High in terms of your wellness in that area.

Emotional Wellness

- Are you aware of your emotions throughout the day?
- Do you express your emotions in a way that is respectful to yourself and others?
- Are you generally optimistic?
- Do you practice coping skills that you perceive as healthy?

Environmental Wellness

- Do you live and work in a safe and healthy environment?
- How are you affected by your home and work environment?
- Do you regularly spend time in nature or natural environments?

Financial Wellness

- Are you intentional and aware in your spending?
- Do you have resources and knowledge to keep yourself financially healthy?
- Do you plan for and feel secure in your financial future?

Intellectual Wellness

- Do you take advantage of opportunities for learning in your personal and professional life?
- Do you find ways to express yourself creatively?
- Do you keep up-to-date with current issues and ideas?

Occupational Wellness

- Do you feel personally fulfilled and energized by your work?
- Do you look forward to going to work?
- Are you satisfied with the direction your career seems to be heading?

Physical Wellness

- Do you choose to eat healthy foods?
- Are you physically active at least 3 days per week?
- Do you use drugs and alcohol to cope with stress?

Social Wellness

- Are your interpersonal relationships close and meaningful?
- Do you actively engage in activities in your community?
- Are there people you can reach out to when you need support?

Spiritual Wellness

- Do you find existential meaning in life events?
- Is it easy for you to treat others who have different values with respect?
- Is the work you do compatible with your values?

Review your responses to each of the 8 Dimensions of Wellness. Where do you rate yourself High (8-10), Moderate (4-7) and Low (1-3)? Consider the activities that facilitate or detract from your wellness in any one dimension. Is there a particular dimension of wellness on which you would like to focus your attention?

Self-Assessment

Taking time to engage in self-assessment is imperative to the overall wellness of physicians. Physicians who take the time to assess their values, goals, and level of well-being are able to make choices with greater clarity and confidence.

with the concerns identified above, this work has found that physicians over-rate the degree of their well-being. Of great importance, this brief assessment and feedback session alone motivated half of the physicians to pursue a

Self-assessment is imperative to the overall wellness of physicians.

They can also make better decisions about how they want to practice, including patient population, colleagues and navigating managed care and other bureaucratic hurdles. Making the right choice when faced with these decisions contributes significantly to the overall wellness of physicians.^{1,2,3,4}

In an effort to promote physician self-awareness regarding health and distress, Shanafelt and colleagues developed an intervention that screens for symptoms of burnout, stress, sleep deprivation, and emotional and physical health, and then provides physicians feedback regarding their overall health.^{5,6} Consistent

change to improve their well-being, suggesting that this, or a similar brief assessment, would be helpful for many physicians.

The work of a physician can be difficult—long hours, extensive paperwork and complex patients can leave physicians feeling overworked and exhausted. Since physicians are high-achievers by nature, many tend to push themselves to see more patients and do more work than resources allow. Often, there is little time or consideration for the needs of the physician in this fast-paced environment, which can lead to dissatisfaction and burnout.

Physician Self-Assessment

In a 2014 study, Shanafelt et al. found that physicians' ability to reliably determine their level of distress was very poor. In fact, among those with the lowest levels of well-being, most believed their well-being was at or above average levels. This lack of awareness may lead physicians to ignore signs of burnout when they occur.⁷



Physician Burnout

Burnout is a response to facing significant job stressors over a long period of time and is apparent when an individual begins to feel cynical or depersonalized, experiences prolonged emotional exhaustion, or finds it difficult to perform well and feel accomplished at work and home. Among various professions in the U.S., physicians experience the highest and most significant levels of burnout.

Are you experiencing symptoms of burnout? If you are, take action now to obtain the support you need. You do not need to handle this alone. Reach out to a mentor, colleagues, counselor, family or friends. Contact your state Physician Health Program. Utilize the resources provided in this toolkit.

Symptoms of Burnout

Physicians who are burned out may experience many symptoms, including:^{8,9}

- Absenteeism
- Reduced job satisfaction
- Decreased self-esteem
- Increased medical errors
- Insomnia
- Withdrawal and isolation
- Decreased productivity
- Feelings of anxiety
- Being irritable with patients
- Exhaustion
- Feelings of depression
- Suicidal ideation
- Changing careers or early retirement
- Impaired concentration and attention
- Relationship problems both at home and at work
- Use of alcohol or other drugs, including prescription drugs, to cope
- Feeling detached from peers, patients, family and friends
- Experiencing dread before going to work

The Maslach Burnout Inventory (MBI) has been recognized as the leading measure of burnout for physicians. The MBI addresses three general scales:

1. Emotional exhaustion
2. Depersonalization
3. Personal accomplishment

For more information about the MBI: <http://www.mindgarden.com/products/mbi.htm>

Factors that Cause Burnout

Burnout can be caused by a variety of factors, but Maslach, Schaufeli and Leiter found that the most common correlates are:¹⁰

Job-related factors such as having too much to do and not enough time to do it, working with too many patients or many patients with highly complex issues, facing competing demands at work, and lack of adequate information or control to do their job well.

Occupational-related factors such as lack of support from supervisors and colleagues, being treated disrespectfully, inappropriate or insufficient feedback about performance, and lack of freedom to practice or make career decisions autonomously.

Personal factors like emotional exhaustion, which can occur when physicians work with severely ill patients frequently, experience incongruence

between their individual values and those of their employer, possess low levels of hardiness, maintain an external locus of control, employ a passive communication style, or can be caused by being in an early stage of one's career.

A recent study found that almost half (45.8%) of physicians are currently experiencing at least one symptom of burnout.¹¹ Consider the Symptoms of Burnout checklist. Are you currently experiencing any symptoms of burnout?



SKILLS & STRATEGIES TOOLBOX

Know Your Limits

When the focus of your work is care for others, taking care of your own needs is essential. Make a list of signs and symptoms indicating you are reaching your limit.



- 1) _____
- 2) _____
- 3) _____
- 4) _____

PAY ATTENTION to these signs and symptoms. Notice when they arise.

CHECK-IN with yourself. What do these signals tell you about how close you are to your limit?

STOP and take a break. Walk, stretch, breathe deeply, meditate, talk with a friend or co-worker. Take care of your physical needs (Are you hungry or thirsty? Do you need a bathroom break? Are you tired?).

LISTEN to what your body and emotions tell you. Treat yourself with the same care and respect you give to patients.



SKILLS & STRATEGIES TOOLBOX

Strategies to Avoid Burnout

While many physicians struggle with burnout, there are plenty of physicians practicing in a way that is both satisfying and fulfilling to them. These physicians:

Reduce workload. Share workload among all staff members by shifting workflow, communicating with other professionals, and utilizing new technologies. While electronic health records (EHRs) are a major source of frustration for many physicians, the most satisfied physicians use EHRs with interfaces that match clinical workflow, utilize the skills of other professionals, and focus on the positives of EHRs—such as their ability to expedite information sharing, increase communication between patients and providers, and increase access to patient information.^{12, 13}

Find reward in practice. Identify and define your values to remind yourself of the reasons you chose to pursue medicine as a profession. Connect with other physicians to combat isolation. Physicians report higher levels of workplace satisfaction when they can choose their own colleagues and coworkers, and these connections contribute to finding reward in practice.^{14, 15, 16}

Provide high-quality medical treatment. When physicians feel they are meeting the

needs of their clients, they are more likely to feel successful and connected to their patients and the world around them.^{17, 18}

Practice self-care. Create work-life balance by using mindful self-awareness, practicing self-compassion and experiencing sincere empathy. Many physicians report feeling tension between fulfilling patient care duties, maintaining a manageable workday, and achieving a balance between their work and home lives. By being mindful of their actions and compassionate to their own needs, physicians can achieve the balance they seek.^{19, 20}

Are positive in their thinking. Make use of cognitive reappraisal skills, positive self-talk, and reframing when faced with a negative situation. Positive self-talk, or the act of noticing and responding to negative messages that we automatically tell ourselves, has a moderating effect on overall negative mental frameworks.²¹

Use mental training techniques. Create a practice of gratitude and appreciation.²²

Physicians tend to have a difficult time paying attention to their needs. This is likely a result of a confluence of factors, including the tendency to focus on the needs of the patient, a high need for achievement driving physicians to work long hours at a fast pace, or low energy after working a long day.²³ Whatever the reason, physicians who go out of their way to meet their own needs report being **happier** and **healthier** themselves and able to **provide higher quality care to their patients.**

Physician Values

To build a fulfilling and satisfying practice, values are of the utmost importance. Values act as a guide to determine and set life priorities and decisions. Whether or not it is apparent, values guide choices and actions every day. Values influence medical practice—by directing decisions about medical services and interventions, billing practices, time spent with each patient, and documentation.

There is incentive to remaining true to one's values. Physicians' ability to see their own values represented in the work that they do is a significant factor in feeling as though they are making a

Conversely, not being able to work according to one's values can be a significant source of dissatisfaction and frustration. Many physicians report that care and compassion for others is an important value. This value system lines up with the professional ethic of beneficence, or the act of doing what is in the patient's best interest at all times. When physicians feel they are in a situation where they cannot offer adequate care or compassion, the perception of a lack of beneficence follows. With the changing requirements of payer sources, physicians find themselves caught between offering high-quality

Physicians' ability to see their own values represented in the work that they do is a significant factor in feeling as though they are making a positive difference in the world.

positive difference in the world. According to Friedberg et al., physicians who felt they had time, competence, and adequate support from leadership to provide high-quality patient care had greater work satisfaction.²⁴

care and meeting organizational demands.²⁵ This mismatch of values and practice can in turn lead to feelings of hopelessness and helplessness. This can lead to demoralization, which is directly associated with burnout.^{26,27}

Since there are many influences that shape an individual's values over time, it is useful to take time to define one's values. When an individual defines their values, the knowledge gained can provide useful information about what is most important to them. Knowing and prioritizing values in everyday life can help in three key ways. It can help:

1. Prioritize how to spend time and resources;
2. Bring clarity to the decision-making process;
3. Resolve tension in conflictual situations.





SKILLS & STRATEGIES TOOLBOX

Defining Your Values

Step 1. Identify times when you feel the happiest.

- What are you doing?
- Are you with anyone? Who are you with?
- What factors contribute to your happiness?

Step 2. Identify times when you feel most proud.

- Why are you proud?
- Are you with anyone? Who are you with?
- What factors contribute to your feelings of pride?

Step 3. Identify times when you feel most fulfilled.

- Why do you feel fulfilled?
- Are you with anyone? Who are you with?
- What factors contribute to your feelings of fulfillment?

Step 4. Determine your most important values.²⁸

Review the list of values below. Identify 10 values that are important to you. Base your selection on your experiences of happiness, pride and fulfillment.

Step 5. Prioritize your top values. Take your list of 10 important values. Write them down in any order. Compare one value to another, asking yourself which you would choose if you could only choose one. Work your way through your list, shifting the order until it is correct.

Step 6. Reaffirm your values. Review your top 2 values. You will likely find that these values have guided your decisions throughout your life. Did these values lead you to medicine as a career? Do you see these values reflected in your day-to-day work? If not, explore ways to integrate these values into your medical practice. Where do you envision these values being exemplified?

Identify 10 values that are important to you.

| | | | | | |
|----------------|---------------|--------------|----------------|-----------------|----------------|
| Acceptance | Contribution | Freedom | Inner Peace | Openness | Self-Control |
| Accuracy | Compassion | Friends | Integrity | Order | Self-Esteem |
| Achievement | Cooperation | Fun | Intimacy | Passion | Self-Knowledge |
| Adventure | Courtesy | Generosity | Justice | Pleasure | Service |
| Attractiveness | Creativity | God's Will | Knowledge | Popularity | Sexuality |
| Authority | Dependability | Growth | Leisure | Power | Simplicity |
| Autonomy | Duty | Health | Love | Purpose | Solitude |
| Authenticity | Ecology | Helpfulness | Loving | Rationality | Spirituality |
| Beauty | Excitement | Honesty | Mastery | Realism | Stability |
| Benevolence | Faithfulness | Hope | Mindfulness | Responsibility | Tolerance |
| Caring | Fame | Humility | Moderation | Risk | Tradition |
| Challenge | Family | Humor | Monogamy | Romance | Virtue |
| Change | Fitness | Independence | Non-conformist | Safety | Wealth |
| Commitment | Flexibility | Industry | Nurturance | Self-Acceptance | World Peace |

End Notes

- ¹ Balch, C. M., & Shanafelt, T. S. (2011). Dynamic tension between success in a surgical career and personal wellness: How can we succeed in a stressful environment and a “Culture of Bravado?”. *Annals of Surgical Oncology*, *18*, 1213-1216.
- ² Wallace, J. E., Lemaire, J. B., & Ghali, W. A. (2009). Physician wellness: A missing quality indicator. *The Lancet*, *374*, 1714-1721.
- ³ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ⁴ Gabel, S. (2012). Demoralization: A precursor to physician burnout? *American Family Physician*, *86*(9), 861-862.
- ⁵ Shanafelt, T. D., Kaups, K. L., Nelson, H., Satele, D. V., Sloan, J. A., Oreskovich, M. R., & Dyrbye, L. N. (2014). An interactive individualized intervention to promote behavioral change to increase personal well-being in US surgeons. *Annals of Surgery*, *259*(1), 82-88.
- ⁶ Dyrbye, L. N., Satele, D., Sloan, J., & Shanafelt, T. D. (2013). Utility of a brief screening tool to identify physicians in distress. *Journal of General Internal Medicine*, *28*(3), 421-427.
- ⁷ Shanafelt, T. D., Kaups, K. L., Nelson, H., Satele, D. V., Sloan, J. A., Oreskovich, M. R., & Dyrbye, L. N. (2014). An interactive individualized intervention to promote behavioral change to increase personal well-being in US surgeons. *Annals of Surgery*, *259*(1), 82-88.
- ⁸ Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, *52*: 397-422.
- ⁹ Shanafelt, T. D., Boone, S., Lltjen, T., Dyrbye, L. N., Sotile, W., Satele, D., ... Oreskovich, M. R. (2012). Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Archives of Internal Medicine*, *172*(18), 1377-1385.
- ¹⁰ Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, *52*: 397-422.
- ¹¹ Shanafelt, T. D., Boone, S., Lltjen, T., Dyrbye, L. N., Sotile, W., Satele, D., ... Oreskovich, M. R. (2012). Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Archives of Internal Medicine*, *172*(18), 1377-1385.
- ¹² Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ¹³ Sinksy, C.A., Willard-Grace, R., Schutzbank, A.M., Sinksy, T.A., Margolius, D., & Bodenheimer, T. (2013). In search of joy in practice: A report of 23 high-functioning primary care practices. *Annals of Family Medicine*, *11*, 272-278.
- ¹⁴ Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>
- ¹⁵ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ¹⁶ Sinksy, C.A., Willard-Grace, R., Schutzbank, A.M., Sinksy, T.A., Margolius, D., & Bodenheimer, T. (2013). In search of joy in practice: A report of 23 high-functioning primary care practices. *Annals of Family Medicine*, *11*, 272-278.
- ¹⁷ Nedrow, A., Steckler, N.A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>
- ¹⁸ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ¹⁹ Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>
- ²⁰ Weight, C. J., Sellon, J. L., Lessard-Anderson, C. R., Shanafelt, T. D., Olsen, K. D., & Laskowski, E. R. (2013). Physical activity, quality of life, and burnout among physician trainees: The effect of a team-based, incentivized exercise program. *Mayo Clinical Proceedings*, *88*(12): 1435-1442.

End Notes

- ²¹ Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>
- ²² Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>
- ²³ Shanafelt, T. D., Kaups, K. L., Nelson, H., Satele, D. V., Sloan, J. A., Oreskovich, M. R., & Drybye, L. N. (2014). An interactive individualized intervention to promote behavioral change to increase personal well-being in US surgeons. *Annals of Surgery*, 259(1), 82-88.
- ²⁴ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ²⁵ Friedberg, M. W., Chen, P. G., Van Busum, K. R., Aunon, F. M., Pham, C., Caloyeras, J. P., ... Tutty, M. (2013). *Factors affecting physician professional satisfaction and their implications for patient care, health systems, and health policy*. RAND Corporation. Retrieved from http://www.rand.org/content/dam/rand/pubs/research_reports/RR400/RR439/RAND_RR439.pdf
- ²⁶ Gabel, S. (2013). Demoralization in health professional practice: Development, amelioration, and implications for continuing education. *Journal of Continuing Education in the Health Professions*, 33(2), 118-126.
- ²⁷ Shanafelt, T. D., Kaups, K. L., Nelson, H., Satele, D. V., Sloan, J. A., Oreskovich, M. R., & Drybye, L. N. (2014). An interactive individualized intervention to promote behavioral change to increase personal well-being in US surgeons. *Annals of Surgery*, 259(1), 82-88.
- ²⁸ Miller, W. R., & Rollnick, S. (2013). *Motivational interviewing: Helping people change*. New York: The Guilford Press.

Mindfulness

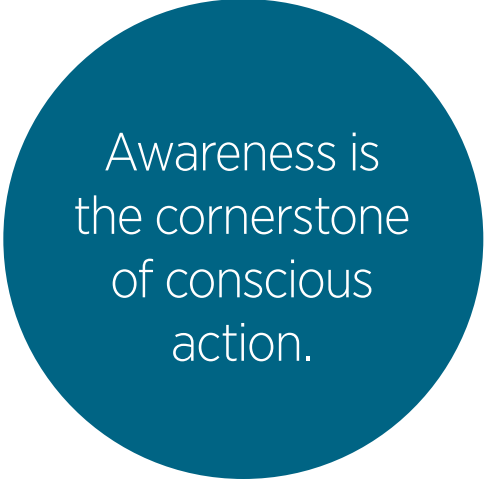
1. Skills & Strategies Toolbox: Mindful Awareness Attention Scale (MAAS)
2. Integrating Mindfulness
3. Skills & Strategies Toolbox: Facilitating Your Practice

Mindfulness

A life of well-being – living in a manner that is consistent with your values – requires commitment, awareness and intention. Mindfulness, a way of being that enables one to attend to their experience, supports well-being by “paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally.”¹

The goals of mindfulness are to:

1. Maintain open awareness of one’s experience to support emotional balance and well-being;
2. Recognize habitual thoughts and behaviors that do not support well-being, which allows for new and different ways of being.⁵



Awareness is
the cornerstone
of conscious
action.

Langer and Moldoveanu describe the subjective experience of mindfulness as being in a “heightened state of involvement and wakefulness or being in the present.”² Baer further describes components of mindfulness as observation, description, acting with awareness, non-judging of inner experience and non-reactivity of inner experience.³ Observation includes noticing and attending to internal and external experiences, such as thoughts, feelings, bodily sensation and other environmental stimuli. Description occurs when a person labels their experience with words. In order to act with awareness, an individual engages in behaviors with a focused attention. This stance can be contrasted with acting while on “autopilot.” Non-judging inner experience occurs when a person is aware of their thoughts and feelings without evaluation or critique. It is a process of allowing thoughts and feelings to come and go without taking action to fix, change, or be distracted by the experience.

When a person can approach their daily routines and behaviors from a place of mindfulness, change is more likely to occur, and there is an increased awareness of one’s environment, openness to new information and observation from different perspectives. All of these facilitate a sense of empowerment and control, which can lead to decreased stress and increased creativity.⁴



SKILLS & STRATEGIES TOOLBOX

Mindful Awareness Attention Scale (MAAS)⁶

Below is a collection of statements about your everyday experience. Use the 1-6 scale below to indicate how frequently or infrequently you currently have each experience. Answer according to what really reflects your experience rather than what you think your experience should be. Treat each item separately from the others.

| 1 | 2 | 3 | 4 | 5 | 6 |
|---------------|-----------------|---------------------|-----------------------|-------------------|--------------|
| Almost Always | Very Frequently | Somewhat Frequently | Somewhat Infrequently | Very Infrequently | Almost Never |

MAAS Scoring: To score the scale, simply compute a mean of the 15 items. Higher scores reflect higher levels of dispositional mindfulness.

| | | | | | | |
|--|---|---|---|---|---|---|
| I could be experiencing some emotion and not be conscious of it until some time later. | 1 | 2 | 3 | 4 | 5 | 6 |
| I break or spill things because of carelessness, not paying attention, or thinking of something else. | 1 | 2 | 3 | 4 | 5 | 6 |
| I find it difficult to stay focused on what's happening in the present. | 1 | 2 | 3 | 4 | 5 | 6 |
| I tend to walk quickly to get where I'm going without paying attention to what I experience along the way. | 1 | 2 | 3 | 4 | 5 | 6 |
| I tend not to notice feelings of physical tension or discomfort until they really grab my attention. | 1 | 2 | 3 | 4 | 5 | 6 |
| I forget a person's name almost as soon as I've been told it for the first time. | 1 | 2 | 3 | 4 | 5 | 6 |
| It seems I am "running on automatic," without much awareness of what I'm doing. | 1 | 2 | 3 | 4 | 5 | 6 |
| I rush through activities without being really attentive to them. | 1 | 2 | 3 | 4 | 5 | 6 |
| I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there. | 1 | 2 | 3 | 4 | 5 | 6 |
| I do jobs or tasks automatically, without being aware of what I'm doing. | 1 | 2 | 3 | 4 | 5 | 6 |
| I find myself listening to someone with one ear, doing something else at the same time. | 1 | 2 | 3 | 4 | 5 | 6 |
| I drive places on 'automatic pilot' and then wonder why I went there. | 1 | 2 | 3 | 4 | 5 | 6 |
| I find myself preoccupied with the future or the past. | 1 | 2 | 3 | 4 | 5 | 6 |
| I find myself doing things without paying attention. | 1 | 2 | 3 | 4 | 5 | 6 |
| I snack without being aware that I'm eating. | 1 | 2 | 3 | 4 | 5 | 6 |

Krasner and his colleagues (2009) found that physicians who practice mindfulness show improved overall well-being and effectiveness in clinical practice. They also found that physicians who practice mindfulness experience increased attentiveness to the presence of stress, understanding of the source of stress and capacity to mediate the effect of their stress. Approaching their daily practice with a mindful approach lowers the physician's reactivity to events and increases their resiliency in difficult situations.⁷

The concept of mindfulness is an easy one to understand—"the quality of being fully aware and attentive in the moment during everyday activities."⁸ A growing evidence-base of the positive

effects of mindfulness in medicine can also be a compelling motivator to live and practice from this perspective. However, incorporating mindfulness into daily routines can be more challenging than it seems. There may be external demands that can act as barriers, and well-entrenched habits will also get in the way.

Physicians' ability to see their own values represented in the work that they do is a significant factor in feeling as though they are making a positive difference in the world.



TIP: Try using a smartphone app to support your mindfulness practice. There are many different apps that offer guided and silent meditations, reminders for daily mindfulness practice and tracking your mindfulness activities.

The Mindfulness App by MindApps:
<http://www.mindapps.se/?lang=en>

Headspace
<https://www.headspace.com/headspace-meditation-app>

Mindful Meditation by Mental Workout:
<http://www.mentalworkout.com/store/programs/mindfulness-meditation/>



Integrating Mindfulness

Although there is not one “right” way to integrate a mindfulness practice into the practice of medicine, or any other areas of life, there are many useful strategies to build momentum toward greater mindfulness. Here are a few strategies to consider:

Set your intention. Make the choice to live mindfully. Set it high on your list of priorities. As with any other skill, mindfulness will require focus and commitment to make it a reality.

Be aware. Once you have made the choice to live mindfully, you will become aware of the opportunities to practice mindfulness in your life. There will be times when you are aware of being “mindless” — being on autopilot, disconnected from your experience or distracted from the present moment. If you have difficulty being aware of these opportunities, make the opportunities happen by checking in with yourself at predetermined times or when you are engaged in regular daily activities. Ask yourself...how do I feel? What am I experiencing right now?

Create space. Whether it is creating a physical, emotional or mental space for mindfulness, you will need space to rehearse mindfulness behaviors. You may choose to reserve some time to meditate. Or you can participate in a workshop or seminar on mindfulness. It can also be as simple as taking time to practice deep breathing in between your meetings with patients and colleagues. Or you may just take a moment to check in with yourself.

Practice. Ask yourself reflective questions to promote curiosity about your internal experience. Focus on the present moment from an open and non-judgmental perspective. Use the information you gain to assist you to seek out mindfulness practices that match your unique needs. There is no “right” or “wrong.” Draw on your wisdom to inform the choices you make.

Interact with others. Share your experiences, including perceived successes and failures, with others. Exchange ideas about how you may incorporate mindfulness into your practice. Elicit feedback from others about their observations of your practice and ways to refine your strategies. Use these exchanges to continually assess and make adjustments as needed.



SKILLS & STRATEGIES TOOLBOX

Facilitating Your Mindfulness Practice

Use these questions to facilitate your mindfulness practice:

1. What do I need in the moment to support positive thinking?
2. What self-care practices will help me to be best prepared to care for my patients?
3. How can I balance my needs with the needs of my patients?
4. How can I maintain an open and appreciative stance when interacting with colleagues and patients?
5. What helps me to genuinely connect to my patients as they share their concerns and thoughts?⁹

End Notes

¹ Kabat-Zinn, J. (1994). *Wherever You Go There You Are: Mindfulness Meditation in Everyday Life*. New York: Hyperion.

² Langer, E. J., & Moldoveanu, M. (2000). The construct of mindfulness. *Journal of Social Issues, 56*(1), 1-9.

³ Baer, R. A. (2009). Self-focused attention and mechanisms of change in mindfulness-based treatment. *Cognitive Behaviour Therapy, 38*(S1), 15-20.

⁴ Langer, E. J., & Moldoveanu, M. (2000). The construct of mindfulness. *Journal of Social Issues, 56*(1), 1-9.

⁵ Fortney, L., Luchterhand, C., Zakletskaia, L., Zgierska, A., & Rakel, D. (2013). Abbreviated mindfulness intervention for job satisfaction, quality of life, and compassion in primary care physicians: A pilot study. *Annals of Family Medicine, 11*(5), 412-420.

⁶ Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology, 84*(4), 822-848.

⁷ Krasner, M. S., Epstein, R. M., Beckman, H., Suchman, A. L., Chapman, B., Mooney, C. J., & Quill, T. E. (2009). Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians. *The Journal of the American Medical Association, 302*(12), 1284-1293.

⁸ Krasner, M. S., Epstein, R. M., Beckman, H., Suchman, A. L., Chapman, B., Mooney, C. J., & Quill, T. E. (2009). Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians. *The Journal of the American Medical Association, 302*(12), 1284-1293.

⁹ Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>

Building a Change Plan

1. Stages of Change
2. Skills & Strategies Toolbox: Determine Your Stage of Change
3. Changing Behaviors
4. Skills & Strategies Toolbox: Create New Healthy Habits
5. Goal Setting
6. SMART Goals
7. Skills & Strategies Toolbox: Setting SMART Goals
8. Skills & Strategies Toolbox: Setting Healthy Boundaries

Building a Change Plan

Physicians who take time to focus on their own wellness are better equipped to withstand the stressors inherent in a medical career and provide higher quality service to their patients.^{1,2,3} In order for physicians to promote wellness, it is important they engage in a personal behavior change process as well as advocate healthy behavior change for those with whom they work.

Stages of Change

A key to self-determined, healthy action is to match action with individual readiness for change. The Transtheoretical Model (TTM) provides a framework that has been extensively studied as a means by which to both 1) assess readiness to change and 2) provide strategies for guiding change and maintenance of desirable behaviors.⁴

| Transtheoretical Model (TTM) Stages of Change ⁵ | | |
|---|--|--|
| Stage | Definition | Activity |
| Pre-contemplation | The individual is not considering making change in the next 6 months. | <ul style="list-style-type: none"> Education Gather information |
| Contemplation | The individual is not prepared to make a change at present but intends to make change in the next 6 months. | <ul style="list-style-type: none"> Support and encouragement Increase motivation |
| Preparation | The individual intends to take action within the next 30 days and has taken some behavioral steps in this direction. | <ul style="list-style-type: none"> Set goals Practice some new behaviors |
| Action | The individual is making overt attempts to change. However, the change has been in effect for less than 6 months. | <ul style="list-style-type: none"> Support for new behaviors Remove barriers |
| Maintenance | The individual has engaged in new behaviors for 6 months or more. | <ul style="list-style-type: none"> Continued support Set new goals |

Often the way in which people move through these stages is less linear and more organic or fluid than the stage model indicates. Individuals may need to cycle and re-cycle through specific stages or even skip stages or move quickly through a stage. Additionally, individuals may be in different stages of change in various aspects of their lives or dimensions of wellness.



SKILLS & STRATEGIES TOOLBOX

Determine Your Stage of Change

Use this model to think about your own readiness to make a health behavior change. Consider each of the following stages in relation to your health and wellness goals and the information it provides about your readiness to change.

- *Are you in pre-contemplation, ready to gather information, but not ready to take action at this time? Or, are you in the preparation stage, ready to set a plan for change in the near future?*
- *Consider the reasons behind why you may be in a particular stage of change.*
- *What would need to happen to move you forward one stage?*

No matter which stage of change you are in, it is helpful to know so you can make realistic plans for ongoing personal progress.

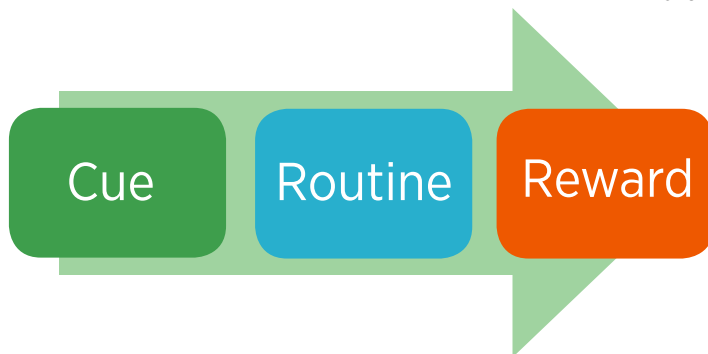
Changing Behaviors

All behaviors, at their root, are the result of a process that includes cues, resulting routines and rewards. Triggered by events, people, emotions, physical arousal, or any number of environmental cues, individuals react in ways that lead them towards obtaining a reward. The reward itself may vary greatly, such as seeking relief from negative experiences to attaining pleasurable experiences. Still other behaviors may be sought out to achieve a state of homeostasis.⁶

To facilitate the process of developing new habits and behaviors:

1. Identify cues for habits you want to change
2. Change the reward pathway by setting up new routines and rewards
3. Shape the environment to support the new behavior

As a new cue-routine-reward cycle is repeated, the association is strengthened. So, while it may be difficult to take initial steps toward increasing behaviors that support well-being, new behaviors are reinforced with repetition.⁷





SKILLS & STRATEGIES TOOLBOX

Create New Healthy Habits

Incorporate new behaviors that support your well-being into your daily practice.

1. Link a cue (or trigger) to a new routine.
2. Identify rewards to support this new behavior.
3. Practice. Practice. Practice.



Goal Setting

Once readiness to change has been identified and motivation to make a change is in place, it is time to set a change plan. The first step in creating a change plan is to set a health behavior change goal.

Clearly defined goals provide actionable direction and should be easily evaluated, allowing for regular feedback to assess individual progress. Goals affect performance by serving four key functions:⁸

- 1 Provide direction** – Goals focus attention on activities relevant to the identified goal
- 2 Are energizing** – High goals can be more activating than low goals
- 3 Encourage persistence** – Challenging goals encourage increased and prolonged effort
- 4 Lead to action** – Goals stimulate engagement in activities that support successfully achieving the goal, such as accessing knowledge and skills, developing strategies and planning action

The change process can be facilitated by setting goals that are sufficiently challenging to maintain interest but not so challenging to be out of reach. Delayed gratification in reaching long-term goals can be difficult. To counter this, a long-term goal made up of many short-term steps strengthens motivation by providing regular feedback on the small wins that sustain effort. For example, setting a goal to lose 50 pounds may inadvertently lead to avoidance and decreased motivation, whereas losing one pound a month is much more realistic, motivating and sustainable. As short-term goals are achieved, self-efficacy and enthusiasm grow, engendering feelings of satisfaction and accomplishment and building momentum for overall long-term health.⁹

Change cannot happen without a conscious desire to live differently.

SMART Goals

When goal-setting, it is important to set S.M.A.R.T. goals. S.M.A.R.T. goals are:¹⁰

- S** **SPECIFIC**
Target a specific area for improvement
- M** **MEASURABLE**
Identify indicators for progress
- A** **ATTAINABLE**
Challenging but perceived as possible to achieve
- R** **REALISTIC**
Achievable through available resources
- T** **TIMELY**
Timeline in which goals will be achieved

For example, a non-S.M.A.R.T. goal might be to “decrease work stress.” While this is a worthwhile and important goal, it will be hard to achieve due to the fact that the specifics have not been defined. This goal transformed into a SMART goal might sound like, “I intend to decrease my work stress by reserving one hour of my regular schedule per day for documentation for one month.” This targets a specific activity that may decrease work stress. There is a schedule identified, which can be evaluated for progress. It is challenging but achievable. If there is some flexibility in the schedule, this is achievable with a one-month timeline.





SKILLS & STRATEGIES TOOLBOX

Setting SMART Goals

Consider your current level of well-being. Think about any similarities or differences across the 8 Dimensions of Wellness. What behaviors do you want to change to support your well-being? Write your goal in the space below. Also consider what you need in order to successfully achieve this goal.

Healthy Behavior Change Goal:

It can also be helpful to determine ahead of time what you need to successfully achieve your goals.

Write your ideas below:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

When setting goals, it is crucial to choose goals that are important in relation to your priorities and values. Your confidence in your ability to achieve a given goal can determine your long-term success. Readiness to make a change influences your desire to take steps towards your goal. Finally, your ability to achieve your goal depends on the amount of control you have over making a change. All of these components are necessary for effective goal-setting.

Use the ruler below to identify where you fall on each of these scales in terms of the health behavior change goal you have chosen. Consider the following questions on a scale from 1 to 10 (1-Low, 10-High):

How IMPORTANT is it for you to change RIGHT NOW?



How CONFIDENT are you that you can change RIGHT NOW?



How READY are you to take steps toward change RIGHT NOW?



How much CONTROL do you have over your ability to make positive change RIGHT NOW?



If you mark yourself low on any of these rulers, adjust the goal you have set for yourself. All of your ratings should be high (between 7-10) for an achievable goal.



SKILLS & STRATEGIES TOOLBOX

Setting Healthy Boundaries

Healthy boundaries are key to well-being in all areas of life. Dedication and diligence are required to effectively align our boundaries so they are consistent with our values. Often there are so many incoming requests that it can be a challenge to do anything other than to react out of habit. Your habit may be to automatically say “Yes” even if it does not work for you. Or you may lash out in anger or frustration, pushing people away or withdrawing. Or you may be rigid and unbending. Regardless of how you tend to react, it is essential to take the time you need to clarify what you want and how you want to respond.

Consider a recent request. Write it down in the space provided.

What is your immediate internal (and physical) response to this request?

Yes

No

I don't know

If your response is a clear “yes” or “no,” indicate your reason below. If your response is, “I don't know,” stop to consider whether your visceral reaction is to approach or withdraw. Why?

Some other questions for consideration:

Is this request consistent with my goals?

Yes

No

Is this request consistent with someone else's goals?

Yes

No

Whose goal is it? _____

Is this request consistent with my values?

Yes

No

| Benefits of saying “Yes” | Benefits of saying “No” |
|--------------------------|-------------------------|
| 1) | 1) |
| 2) | 2) |
| 3) | 3) |
| 4) | 4) |

A quick version of this activity is to check-in with yourself throughout the day.

Ask yourself: What do I want?

The answers to this simple question can provide valuable information and guidance for your decisions and actions.

End Notes

- ¹ Frank, E. (2004). Physician health and patient care. *Journal of the American Medical Association*, 291(5), 637.
- ² Balch, C. M. & Shanafelt, T. S. (2011). Dynamic tension between success in a surgical career and personal Wellness: How can we succeed in a stressful environment and a “culture of bravado”? *Annals of Surgical Oncology*, 18, 1213-1216.
- ³ Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52, 397-422.
- ⁴ Prochaska, J. O. & DiClemente, C. C. (1982). Transtheoretical therapy: Toward a more integrative model of change. *Psychotherapy: Theory, Research and Practice*, 19, 276-288.
- ⁵ Prochaska, J. O. & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward and integrative model of change. *Journal of Consulting and Clinical Psychology*, 56, 520-528.
- ⁶ Hilario, M. R. F. & Costa, R. M. (2008). High on habits. *Frontiers in Neuroscience*, 2(2), 208-216.
- ⁷ Hilario, M. R. F. & Costa, R. M. (2008). High on habits. *Frontiers in Neuroscience*, 2(2), 208-216.
- ⁸ Locke, E. A. & Latham, G. P. (2002). Building a practically useful theory of goal setting and task motivation. *American Psychologist*, 57(9), 705-717.
- ⁹ Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York, NY: W. H. Freeman.
- ¹⁰ Doran, G. T. (1981). There's a S.M.A.R.T. way to write management's goals and objectives. *Management Review*, 70(11): 35-36.

A scenic landscape featuring a range of rugged, snow-capped mountains in the background. The foreground is a lush green field filled with numerous daisy-like flowers. The overall scene is bright and natural, suggesting a high-altitude or mountain environment.

Sustaining Change

Sustaining Change

With any behavior change, the key to sustaining the change over time is to make it a way of life. Creating well-being, in work and life, requires a lifelong dedication to the long-term goals of health and wellness. Often, this can feel daunting. The momentum for focus on living a mindful and intentional life ebbs and flows depending upon fluctuating life events.

Creating well-being, in work and life, requires a lifelong dedication to the long-term goals of health and wellness.

For many, emphasis on well-being does not happen until a person is aware they are unwell—the discomfort of being out of balance propelling an individual into action. However, lack of wellness or illness does not necessarily need to be the catalyst for action. A combination of intentional living, self-awareness, and commitment to well-being can not only support the process of behavior change but sustain the change over time.

There are several key steps to making and sustaining change:

Intention. Change cannot happen without a conscious desire to live differently. Being clear about short- and long-term goals directs attention towards behaviors that support the achievement of these goals.

Mindfulness. Maintaining a stance of mindfulness can provide valuable information about how a person is doing—right now. It can bring awareness to signs and symptoms that may periodically arise. This information can provide the insight and clarity needed to make informed choices and guide action towards balance and realignment.

Communication. The path to achieving goals for health and wellness relies on effective communication. Clear, constructive and assertive communication is needed to set and maintain healthy boundaries. Making requests and setting limits can increase feelings of satisfaction and control.

Collaboration. Wellness does not happen in a vacuum. In order to create wellness in any environment, collaboration and support from others is essential. It can facilitate the development of new practices, creative ideas and enhance problem-solving.

Practice. Although it can feel risky to deviate from the status quo, practicing new behaviors is key to developing skills. Practice helps to adjust and refine behaviors to discover ways to meet the unique needs of an individual or system. The best kind of practice includes taking small, manageable steps that can add up to significant change.

A blue-tinted landscape photograph. In the background, a range of rugged mountains with snow-dusted peaks stretches across the horizon. The middle ground is a vast, open field of tall grass. In the foreground, several daisy-like flowers are in focus, their white petals and dark centers clearly visible against the blue background. The overall mood is serene and natural.

Resources

Physician Wellness Resources

Online Resources:

Mayo Clinic Physician Well-Being Program

<http://www.mayo.edu/research/centers-programs/physician-well-being-program/overview>

RENEW founded by Linda Hawes Clever, MD

<http://renewnow.org>

The Institute for the Study of Health and Illness (ISHI) founded by Rachel Naomi Remen, MD

<http://www.ishiprograms.org/programs/>

Columbia University Medical Center – Program in Narrative Medicine

<http://www.narrativemedicine.org/>

Books:

Firth-cozens, J. (2010). *How to survive in medicine: Personally and professionally*. John Wiley & Sons.

Lipsenthal, L. (2007). *Finding balance in a medical life*. Publisher: Author.

Peterkin, A. D. (2008). *Staying human during residency training: How to survive and thrive after medical school* (4th ed). Toronto: University of Toronto Press.

Skovholt, T. & Trotter-Mathison, M. J. (2010). *The resilient practitioner: Burnout prevention and self-care strategies for counselors, therapists, teachers, and health professionals* (2nd ed). Routledge.

Sotile, W. M. & Sotile, M. O. (2002). *The resilient physician: Effective emotional management for doctors and their medical organizations*. Washington, DC: American Medical Association Press.

Wicks, R. (2005). *Overcoming secondary stress in medical and nursing practice: A guide to professional resilience and personal well-being*. Oxford: Oxford University Press.

Mindfulness Resources

Online Resources:

Mindfulness Awareness Research Center (MARC), UCLA Semel Institute, University of California

<http://marc.ucla.edu/default.cfm>

This website provides a bibliography and summary of key research finding.

<http://marc.ucla.edu/body.cfm?id=38#Programs>

Center for Mindfulness in Medicine at UMASS Boston - Mindfulness Based Stress Reduction (MBSR)

<http://www.umassmed.edu/cfm/home/>

Books:

Bien, T. (2006). *Mindful therapy: A guide for therapists and helping professionals*. Somerville, MA: Wisdom Publications.

McCrown, D., Reibel, D. K., & Micozzi, M. S. (2011). *Teaching mindfulness: A practical guide for clinicians and educators*. New York: Springer.

Santorelli, S. F. (2000). *Heal thy self: Lessons on mindfulness in medicine*. New York: Random House.

Shapiro, S. L. & Carlson, L. E. (2009). *The art and science of mindfulness: Integrating mindfulness into psychology and the helping professions*. Washington, DC: American Psychological Association.

Siegel, D. J. (2010). *The mindful therapist: A clinician's guide to mindsight and neural integration*. New York: W. W. Norton & Company.

Smartphone Apps:

The Mindfulness App by MindApps

<http://www.mindapps.se/?lang=en>

Headspace

<https://www.headspace.com/headspace-meditation-app>

Mindfulness Meditation by Mental Workout

<http://www.mentalworkout.com/store/programs/mindfulness-meditation/>

Treating Physicians Resources

Online Resources:

Federation of State Physician Health Programs (FSPHP)

<http://www.fsphp.org>

Colorado Physician Health Program (CPHP)

<http://www.cphp.org>

Books:

Myers, M. F. & Gabbard, G. O. (2008). *The physician as patient: A clinical handbook for mental health professionals*. Arlington, VA: American Psychiatric Publishing, Inc.

Goldman, L. S., Myers, M., & Dickstein, L. J. (Ed). (2000). *The handbook of physician health: The essential guide to understanding the health care needs of physicians*. Chicago, IL: American Medical Association.

The Behavioral Health and Wellness Program's DIMENSIONS: Work & Well-Being Toolkit is designed for use by physicians to facilitate their individual and workplace well-being. The toolkit supports physician well-being through providing education on evidence-based strategies for improving wellness. Contact the Behavioral Health and Wellness Program at bh.wellness@ucdenver.edu for more information.

