

ACT to Reduce Psychiatry Resident Burnout

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INTRODUCTION

- Burnout is stress characterized by exhaustion, cynicism, detachment, and loss of self-efficacy.¹⁻²
- Burnout is linked to reduced patient safety and poor physician mental health.³
- The DPRTP has recently made efforts to reduce resident burnout by changing job factors (e.g., ensuring appropriate duty hour limits) yet in DPRTP surveys, over 30% of residents still report sleep deprivation that they fear impacts patient safety and their ability to learn.
- Acceptance and Commitment Therapy (ACT) is a cognitive-behavioral intervention that improves human functioning and adaptability by increasing psychological flexibility.⁴ Skills include acceptance, mindfulness and values clarification and allow individuals to be more present, aware, and open to internal experience, so that their behavior can align with their personal and professional values.
- ACT skills have been used with a variety of populations, including clinicians. Studies show that even brief ACT interventions reduce burnout and improve personal and professional valued living among providers in medicine-related fields.⁵⁻⁸

Objective

The aim of this study is to gather preliminary data on acceptability and effectiveness of an ACT workshop for reducing resident burnout offered as part of the DPRTP.

METHODS

- Duke Psychiatry residents completed baseline measurements of burnout (Maslach Burnout Inventory)⁹, sleep disturbance and impairment (PROMIS sleep scales)¹⁰, general health (General Health Questionnaire)¹¹ and life satisfaction (Life Satisfaction Scale)¹² and then participated in an ACT workshop focused on reducing burnout (conducted over 2 consecutive weeks) during their scheduled academic half day.
- Residents also received weekly text message reminders related to the content of the workshop for 12 weeks. A 12-week follow-up assessment of burnout and psychological health is scheduled for November 1, 2017.

37 residents completed the assessment

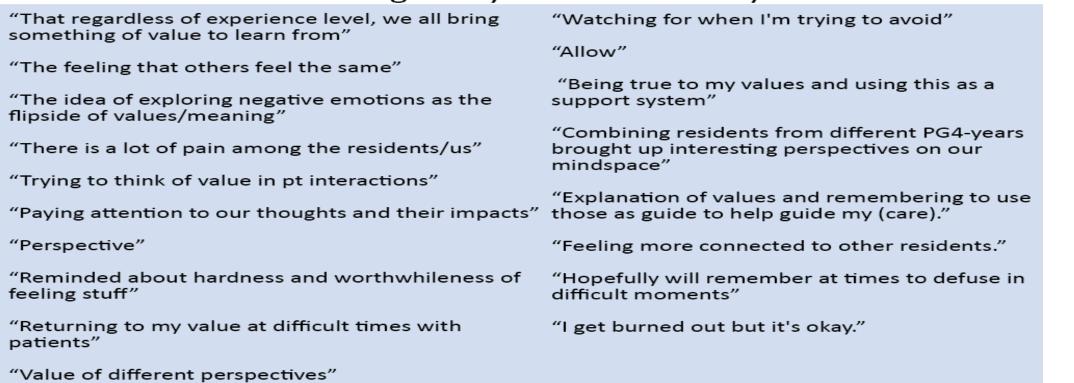
• 51% female

Table 1

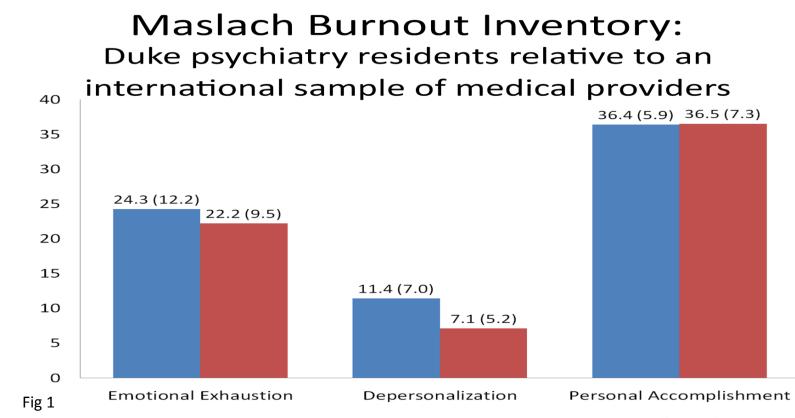
- 62% Caucasian, 30% Asian, 5% Black/African American, 3% Other
- Mean Age: 31 years (*SD*=3.96)
- Descriptive analyses indicate that Duke Psychiatry Residents, on average, report moderate levels of burnout (See Fig. 1), endorse typical levels of sleep disturbance and impairment relative to adults in the United States general population, and rate their level of life satisfaction in the "slightly satisfied" range (results not shown).
- Descriptive analyses also suggest residents entering their 3rd year of residency report levels of burnout, particularly emotional exhaustion, relative to peers in other cohorts (See Fig 2-3).
- Results indicate overall workshop acceptability was high (See Table 1) and participants extracted valuable, model consistent content (See Table 2).

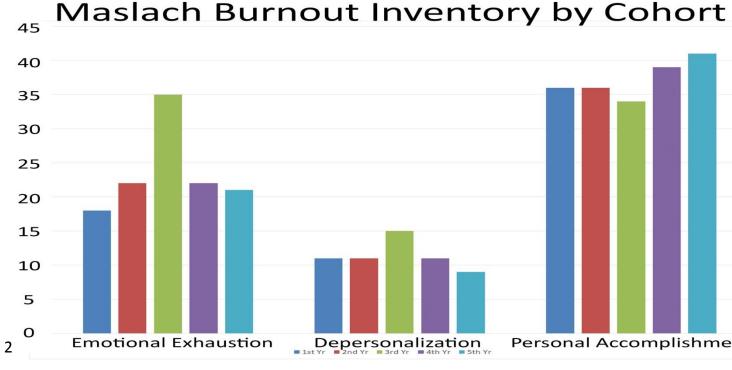
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
This session was relevant to me or my work.		90% "agree	or "strong	gly agree"	
This session was helpful.		81% "agree	or "stron	gly agree"	
l liked this session.		83% "agree	or "stron	gly agree"	
My participation in this session will influence what I do with patients, with myself, with others.		67% "agree	or "stron	gly agree"	
My participation in this session will influence the care that I provide.		72% "agree	or "stron	gly agree"	
I would recommend this session as part of the Resident Training Program.		83% "agree	or "stron	gly agree"	
I would recommend that others attend this session if it was optional.		78% "agree	or "stron	gly agree"	
I would take part in additional booster sessions or other offerings on ACT.		70% "agree	or "strong"	gly agree"	

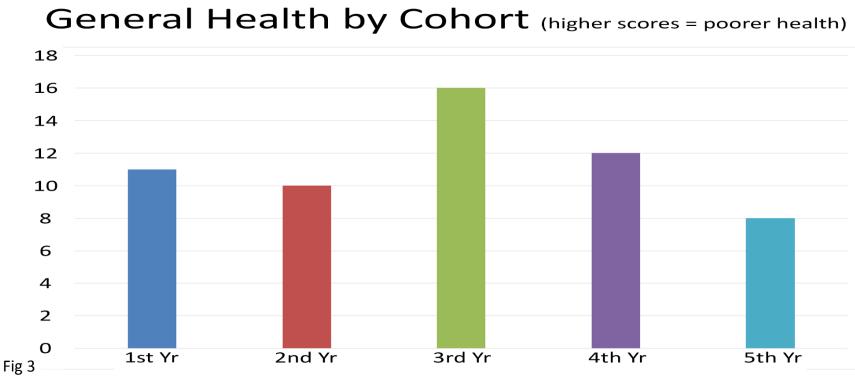
Please tell us something that you will take away from this session:



RESULTS







CONCLUSIONS

- Findings suggest that Duke Psychiatry Residents are experiencing moderate degrees of burnout and perceive a brief ACT workshop for resident burnout as acceptable and helpful, supporting its inclusion in the Resident Training Program.
- Data also provides preliminary evidence that the onset of the third year of residency may be a particularly vulnerable time for burnout.
- Residents were able to learn ACT skills in this format.
- Future directions might examine how best to help residents translate skills to improve patient care.