

Abstract Title:

Interventions Aimed at Reducing Burnout Experienced by Neonatologists at Miller Children's & Women's Hospital

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Abstract Description:

Burnout is a work-related syndrome involving emotional exhaustion, depersonalization, and a sense of reduced personal accomplishment, related to an imbalance the employee's personal characteristics and work-related issues. Neonatal ICU practitioners frequently experience burnout due to a high patient turnover time, heavy workload, emotional burden, and difficulties working collaboratively on a multidisciplinary team. Many interventions related to burnout focus on bringing about self awareness in a nonjudgmental, mindful way. The practice of learning to create internal calmness is a way to increase a sense of personal control in a chaotic environment as well as creating better coping mechanisms. Mindfulness practices such as meditations have been shown to significantly decrease burnout.

Currently, the neonatologists of Miller Children's & Women's Hospital meet every other week with NICU psychologists to focus on the prevention of burnout. The initial phase focused on building predictability and consistency to create an anticipated expectation for de-stressing and relief. The second phase is about experiencing quiet moments that aim to increase familiarity and comfort when facing internal emotions and thoughts, to increase a sense of control and resiliency. This is done by utilizing mindfulness and reflective practice. The third phase will seek to strengthen the practice of mindfulness and reflective practice with more regularity within the support group and increase the likelihood of use outside of group sessions.

This group has been meeting for approximately 4 months with regularity and is well attended largely due to the commitment and encouragement of the medical director. In August of 2018, the participants were given Maslach Burnout Inventory questionnaire, which is recognized as the leading measure of burnout, validated by the extensive research. The questionnaires were provided again in January of 2019 to qualify and quantify staff burnout progression.

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The Maslach Burnout Inventory measures three burnout parameters: emotional exhaustion, depersonalization, and personal accomplishment. After four months, repeat assessment has revealed improvements in depersonalization and personal accomplishment, with a slight worsening in emotional exhaustion. Of the three parameters, depersonalization category showed the biggest adjustment.

With this data, we plan to modify our current program, paying particular detail to improving emotional exhaustion of our neonatal providers. We will continue to assess and adjust as needed until there is a greater improvement of all three parameters. If successful, we will then present our findings to other medical groups, so they may benefit from the ground work for burnout improvement implemented in this group.