



Resident-Driven Culture Change

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Description

Driven by a desire to reduce burnout and promote a positive learning environment during residency, residents at the University of Washington Physical Medicine and Rehabilitation (UW PM&R) residency program formed a focus group to measure and improve resident burnout rates and help develop a more supportive learning environment. By engaging key stakeholders in our program and collaborating with the UW Well-Being Initiative, we aim to promote measurable changes in the learning culture of our program and reduce burnout.

Aim

Improve the UW PM&R resident perceived learning environment over a 12 month period

Actions Taken

- Copenhagen Burnout Inventory (CBI) administered to obtain baseline burnout rate
- Residents surveyed about perceived culture of support (Table 1)
- Themes analyzed prompting proposed changes to resident feedback process to improve the transparency and quality of feedback

Summary of Results

- Likert scale questionnaire developed (Table 2) to assess resident perception of learning environment, obtained at baseline and to be repeated quarterly
- New feedback process developed to encourage consistent mid- and end-of-rotation feedback for residents
- CBI and Likert survey results to be shared with faculty

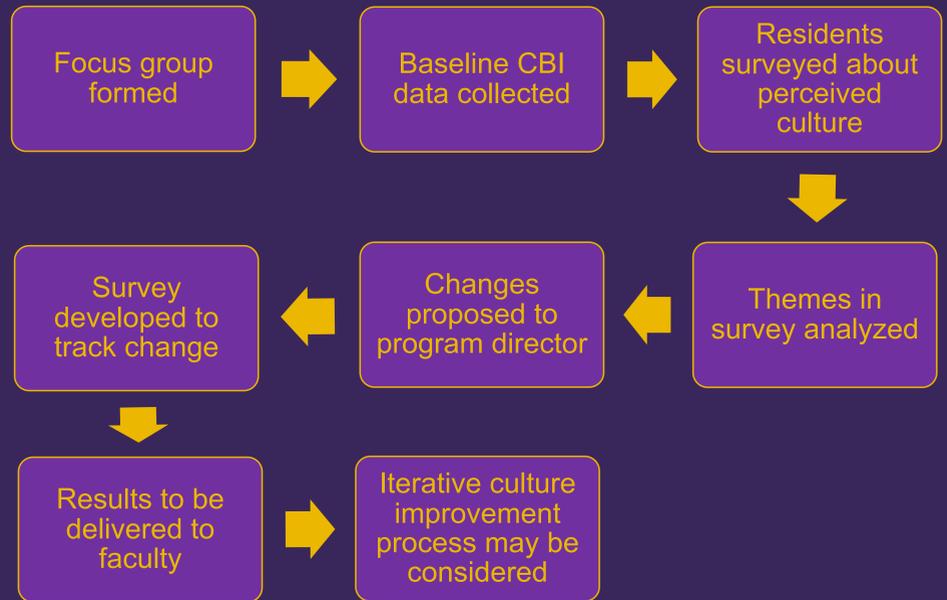


Table 1. UW PM&R Residency Support Survey.

1. Have you felt that our residency has provided a supportive learning environment? Why or why not? Specific elements of a supportive learning environment may include feeling comfortable asking questions and discussing knowledge gaps with peers and faculty, having adequate time and energy to learn both at work and at home, and receiving constructive, timely, and actionable feedback.
2. Have you felt overly burdened with clinical duties in any way? If yes, how so? This can include daily work-flow issues, coverage demands, vacation scheduling difficulties.
3. Have you felt that your clinical duties have been clearly explained to you by your attending in advance of your clinical rotations?
4. Has your personal life (e.g. illness, relationship issues, family needs etc.) affected your ability to engage in residency or impacted your well-being? If yes, have you felt adequately supported by the residency program? Why or why not?
5. Do you have concerns about a specific rotation? What are your concerns?
6. Do you have any suggestions on how the program can help residents feel more supported?

Table 2. UW PM&R Residency Feedback Culture Survey.

1. How often do you feel supported by the faculty regarding clinical care and overall workload? This can include acknowledging the difficulty of the volume of work to on-the-job modeling when residents are in unfamiliar scenarios.
1 = seldom supported
5 = almost always supported
2. How often are you comfortable bringing up and asking questions about your knowledge gaps with faculty?
1 = seldom comfortable
5 = almost always comfortable
3. How often do faculty facilitate opportunities or provide resources for you to achieve a learning goal?
4. How would you rate the overall quality of feedback you receive across rotations? Quality can include, but is not limited to, usefulness, accuracy, timing, delivery, and appropriateness.
1 = very poor
5 = very good
5. Was your faculty sensitive to personal circumstances that impacted your clinical work?
Yes/No
6. Please share any positive experiences, comments, suggestions, or concerns you have regarding the residency learning environment: