



BUILDING A SYSTEMIC WELL-BEING PROGRAM: A 5-STEP BLUEPRINT

February 2024



OVERVIEW

Building a Well-Being Program

The Collaborative for Healing and Renewal in Medicine (CHARM) is a professional society composed of well-being leaders, medical educators, leaders in academic medicine, and experts in burnout research and interventions, working together with the mission to promote well-being among all health care professionals and trainees.

The AHA partnered with a group of chief wellness officers (CWOs) belonging to the CHARM chief wellness officers network to help leaders, whether they be new CWOs or other leaders tasked with addressing health care organizational well-being, navigate where their organization currently is on this journey and how to effectively take next steps to move this work forward. This resource includes case examples and stories from leaders across health care sharing their experiences and lessons learned. It also offers resources to guide and enrich your efforts.

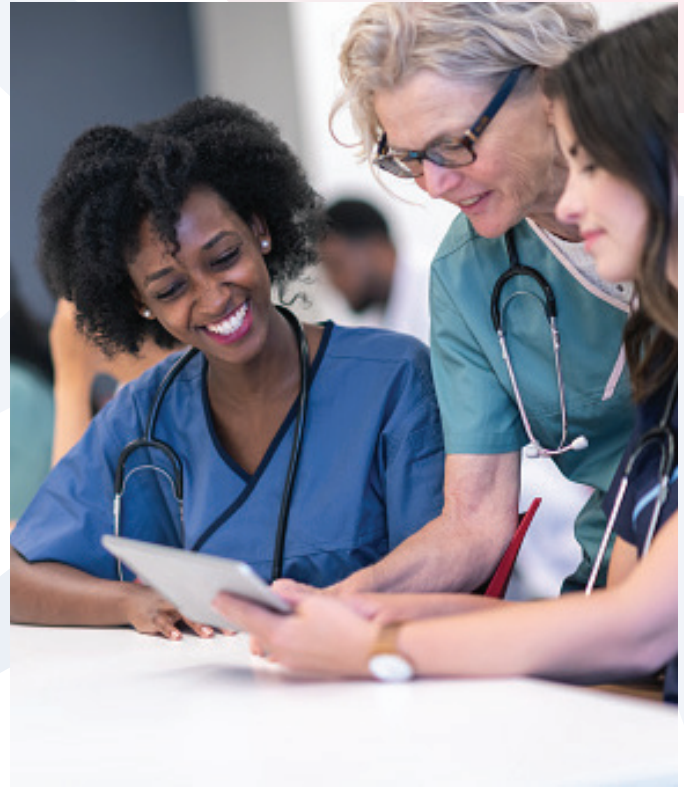
Participants included:

- **Gaurava Agarwal, M.D.**, vice president and chief wellness executive, Northwestern Medicine, director of faculty wellness, Northwestern University
- **Suzanne Bentley, M.D.**, MPH, FACEP, CHSE, chief wellness officer, director of Simulation Innovation & Research, attending physician, emergency medicine, Helping Healers Heal Co-Lead, Workforce Wellness Advocate, NYC Health + Hospitals/Elmhurst, associate professor, Emergency Medicine at Mount Sinai
- **Nadia Charguia, M.D.**, executive medical director, Integrated Well-Being Program for UNC Health, director of Well-Being and Professional Fulfillment, University of North Carolina School of Medicine, Office of Faculty Affairs and Leadership Development
- **Nigel Girgrah, M.D., Ph.D.**, chief wellness officer, Ochsner Health
- **Becky Lowry, M.D.**, chief wellness officer, University of Kansas Health System
- **Kristine Olson, M.D.**, M.Sc. chief wellness officer, Yale New Haven Hospital, director, Work-life Well-being, Analytics at Yale New Haven Health
- **Jonathan Ripp, M.D.**, MPH, dean for Well-Being and Resilience and chief wellness officer, Icahn School of Medicine at Mount Sinai; inaugural president, Collaborative for Healing and Renewal in Medicine (CHARM)
- **Stefanie Simmons, M.D.**, chief medical officer, Dr. Lorna Breen Heroes Foundation

INTRODUCTION

Burnout is defined as a workplace “syndrome characterized by high emotional exhaustion, high-depersonalization and a low sense of personal accomplishment”¹ and for several decades has been recognized as an urgent issue for health care workers. The COVID-19 pandemic amplified this problem, creating an increase in job demands with fewer available resources. Research shows burnout is an occupational outcome experienced by the individual as the result of a suboptimal work environment. Knowing this issue is primarily system-based, it is important that an organization take a comprehensive approach to address the drivers which lead to burnout.

Research to date shows that efforts to alleviate burnout have yet to have lasting impact. Two main reasons: awareness regarding the economic costs of burnout and the limited resources to address such a large systemic problem.² It's essential that all levels of leadership, including administrative, clinical and hospital boards understand the urgency of addressing burnout in a meaningful way. Without action, burnout has the potential to have broad deleterious effects on health care.



Making the Case: Why should hospitals and health systems address burnout?

Research shows that clinician burnout has a negative impact on the overall health of an organization. Addressing it not only is the right thing to do; it also improves care quality, patient satisfaction and the financial health of an organization.

“When looking at the business case, my communication style has begun to evolve over time. As I have become more vulnerable and authentic talking about my own struggles, the moral case for this has become clear. I have also learned that messaging will be dependent on your audience. You will need to refine the business case depending on who you are communicating with. Creating dashboards to demonstrate where you are and where you are going is essential.”

NIGEL GIRGRAH, M.D., PH.D.

When getting stakeholder buy-in, it is important to clearly communicate these benefits.

1. <https://nam.edu/initiatives/clinician-resilience-and-well-being/national-plan-for-health-workforce-well-being/>

2. <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2653912>

The resources below can help you build the case for addressing well-being and burnout.

- **Psychological and physical health consequences of physician burnout:** “There is a moral and ethical imperative to address burnout in physicians. Physician burnout contributes to broken relationships, alcoholism, and physician suicide. Additionally, it has been associated with an increased risk of chronic disease, including hypertension and diabetes.” —Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout
- **Quality and patient safety:** Extensive evidence has linked physician burnout to quality of care.³ Studies have connected increased levels of burnout to the likelihood of a physician reporting a major medical error. In cross-sectional studies of more than 7,100 U.S. surgeons, burnout was an independent predictor of reporting a recent major medical error and being involved in a medical malpractice suit.⁴ Additionally, studies have also shown a relationship between burnout and self-reported suboptimal patient care behavior. Studies have reported significant correlations between a physician’s degree of depersonalization and patient satisfaction with their hospital care and patient-reported adherence to medical advice.⁵ Further, studies have shown a correlation between physician sleep and wellness with clinically significant medical errors⁶, as well as clinical distress and inappropriate antibiotic prescribing.⁷
- **Financial:** Burnout has been correlated with reduced job productivity and higher rates of turnover. Understanding the financial implications of lost productivity and the cost of replacing a clinician is extremely important for an organization. Some estimate the hard costs of replacing a physician to be \$88,000 before factoring in lost revenue. When including lost revenue, the total cost varied anywhere from \$500,000 - \$1,000,000, per physician and even higher for subspecialty groups. It is important to note this formula will be different based on positions, but there are several worksheets available to help you get started calculating projected return on investment (ROI). In a recent 2023 publication examining ROI of workplace-based burnout prevention interventions, it was reported that the ROI calculation was positive for 78 interventions (56.5%), negative for 12 (8.7%), neutral for 13 (9.4%) and undetermined for 35 interventions (25.4%), further supporting the financial benefits.⁸



3. <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2653912>

4. <https://nam.edu/burnout-among-health-care-professionals-a-call-to-explore-and-address-this-underrecognized-threat-to-safe-high-quality-care/>

5. <https://nam.edu/burnout-among-health-care-professionals-a-call-to-explore-and-address-this-underrecognized-threat-to-safe-high-quality-care/>

6. <https://pubmed.ncbi.nlm.nih.gov/33284339/>

7. <https://pubmed.ncbi.nlm.nih.gov/35489803/>

8. <https://academic.oup.com/eurpub/article/33/4/612/7192365?login=false>

GETTING STARTED

Each of the chief wellness officers we interviewed emphasized the importance of initiating efforts to understand the status of their organization’s current work in addressing burnout. It is crucial to assess both the existing efforts and the organization’s readiness for change. After assessing the resources available to advance the work, the identification of a dedicated team of champions and advocates becomes the next step to propel this work forward.

Institutional Self-assessment

On a scale of 1 to 5 (1 being the lowest), document where you believe that your institution stands. Focus on the current state of the organization. The following section focuses on scoping the work to be done based on this assessment.

	1	2	3	4	5	Notes
Do we have leadership support from the executive level?						
Do we have support from different departments?						
Do we have a clearly defined scope of work?						
Do we have identified leaders to drive this work?						
Do these leaders have clearly defined expectations for their roles?						
Do we have a budget in place to support designated well-being leaders?						
Do we have a budget identified for this work and is it earmarked for specific work streams?						
Does this work align with organizational mission, vision and values?						
Do we have data to track and measure impact?						

KEY TAKEAWAY: Every organization will be at a different place in their journey. Take the time to understand where your organization is and create an action plan accordingly.

Resources:

- **The Business Case for Investing in Physician Well-being:** This resource goes into further detail on the business case for investing in physician well-being as well as outlining several stages of an organization’s journey towards physician well-being.
- **Organizational Evidence-Based and Promising Practices for Improving Clinician Well-Being:** This resource outlines organizational approaches that focus on fixing the workplace, rather than “fixing the worker.” Specifically, the authors examine evidence-based practices shown to increase clinician well-being across six different domains.
- **AMA STEPS Forward Modules:** These modules offer a collection of engaging and interactive educational toolkits that are practical, actionable “how-to” guides to transform and improve.
- **Leading with Empathy: Workforce Well-being at Ochsner Health:** In this conversation, Nigel Girgrah, M.D., chief wellness officer at Ochsner Health, discusses his evolution in workforce well-being, building a business case for organizational buy-in and the importance of combining leadership with mental health transparency.

KEY STEPS IN YOUR WELL-BEING JOURNEY

Regardless of where your organization is at on its well-being journey, developing a program will need the following steps to be successful.



Step 1

Support from the very highest levels of organizational leadership

To develop a robust program to promote well-being and sustain the workforce, it's essential that executive leadership support the work as well as a team dedicated to moving the work forward. It will be important to have a clear business case established and effectively communicate the importance of this work.

“Optics are important. When you pay people to do the work it shows the importance.”

SUZANNE BENTLEY, M.D.

It will also be important to have a leadership team in place. Having an appointed leader within each department that is trusted and well-respected amongst their peers is a good starting point. Pro Tip: While volunteers are a great way to start your journey, by putting your money where your mouth is, organizations demonstrate the importance of this work and the organizational commitment to moving it forward.

“Chief wellness officers are leaders who lead by influence. In the truest sense we can only be really effective if we are able to influence those individuals who are at the helm of given system level responsibilities that are likely to have dramatic impact on the well-being of the workforce.”

JONATHAN RIPP, M.D.

The ability to understand organizational intelligence, change management skills, and lead through influence are the most essential skills for whomever leads this work.⁹ Organizations should utilize the social capital available to them. Pro Tip: Instead of looking outward, look for leaders across your organization and create opportunities for them to grow and take on these roles.

9. [https://www.mayoclinicproceedings.org/article/S0025-6196\(22\)00650-4/fulltext](https://www.mayoclinicproceedings.org/article/S0025-6196(22)00650-4/fulltext)

Peer support networks also are a great tool in supporting well-being work. These networks should have a dedicated budget appropriate for the size of the organization. Well-being champions are a good example of a peer support network.

“ If we define wellness as providing a superior work environment to the people who work in our organization, in my view, wellness has to be locally led because those folks know how their departments and divisions work the best. As an organization, the way we can best help is to provide individuals with the skills and knowledge needed to craft a work environment that is optimal.

GAURAVA AGARWAL, M.D.

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EXAMPLES



TOOLKIT

Helping Healers Heal

This peer-led, employee wellness program offers emotional first aid to health care providers who are suffering from workplace stress or anxiety and may be at risk of depression caused by the demanding circumstances of the job and unexpected patient outcomes.



WEBINAR

Scholars of Wellness Program

This Northwestern University program provides training and resources to help address drivers of burnout within different department teams. The program equips individuals within each department to take on leadership roles and drive well-being work across the organization.



EDUCATIONAL PROGRAMS

Duke Well-Being Ambassador Training

An evidence-based training program that provides tools and resources to lead local efforts at improving well-being. Ambassadors from a variety of backgrounds, both clinical and nonclinical, are encouraged to participate. The program offers face-to-face courses as well as virtual trainings and webinars. This is a great tool when looking at investing in and growing internal team members to take on these leadership roles.



ARTICLE

The Rise of a Chief Well-being Officer

Looking at the rise of the CWO position, this article digs into how CWOs are addressing organizational well-being.



ARTICLE

Responsibilities and Job Characteristics of Health Care Wellness Officers in the United States

Exploring the different characteristics of the CWO, this article takes a look across several organizations to see how these roles are functioning and their different responsibilities and job characteristics.

CONSIDERATIONS

- Who makes up your usual team?
- What time commitments should you expect?
- What leadership support exists?
- Which departments are committed to support?
- What messages resonated with different segments of leadership?
- Who are your influencers and champions?
- What qualities do you look for in your leaders driving this work?
- How will you recruit them?
- How can they help drive engagement/utilization?

KEY TAKEAWAY

While a chief wellness officer is a great starting point, an organization must think about ways to support and disseminate this work across different departments. Be intentional about individuals you select to serve as leaders and champions of this work. Dedicate budget and time to support those in these roles and provide appropriate and ongoing training and education.

Step

2

Establish a strategy and framework for action, with a shared understanding for prioritization of this work

Well-being leaders and organizational leadership must agree on the problem to be solved and identify the appropriate well-being strategic framework and model of well-being to guide their local strategy development. Taking the time to examine where you are and where you would like to go are essential to getting buy-in from leadership, the implementation team and front-line staff. Understanding the problem that you are trying to solve and defining the challenges to be addressed are the first step to creating your organizational strategies and goals. We highly recommend developing dyad teams across operational and clinical leaders when embarking on this work to bring broad perspective and influence.

Understand and be strategic about where you are and where you want to begin.

If you are looking to lead well-being work at your organization, below are some questions to consider when taking on this role. Using the organizational assessment above, consider the following:

- Who will be your key partners, including across clinical and administrative/operational roles?
- What is the scope of the role and which job will the work focus on?
- What framework (i.e., model of well-being) will guide your work?
- What is the infrastructure available to support this work and how does the role tie to the organization's values and mission?
- What policy and procedure supports will be necessary to drive this work forward?
- What committees or meetings should the well-being lead be embedded within?

“When we began our journey, we felt a frantic pace of needing to do everything for everyone all at once. This was unsustainable and doing everything at 75% of the way was not the way to grow a program. We had the hard discussion and were intentional about setting boundaries and identifying areas to begin that would have the most impact.”

SUZANNE BENTLEY, M.D.

EXAMPLES

Below are examples of where you might look to begin putting together a model of well-being. While the strategic framework to carry out your well-being efforts will be unique to your organization, there are leading models that can inform your efforts and be used as a starting point.



CONCEPTUAL AND VISUAL MODEL

The Stanford Model of Professional Fulfillment

One of the best leading models to explore to cultivate professional fulfillment.



NATIONAL PLAN

NAM National Plan for Health Workforce Well-being

This workplan was released by the National Academy of Medicine in October 2022 to drive collective action to strengthen health workforce well-being and restore the health of the nation. This plan is a good starting point to identify areas to include in your model.



TOOLKIT

Chief Wellness Officer Road Map

This toolkit helps health care organizations, particularly those looking to add a new C-level chief wellness officer position, by providing a step-by-step guide for defining the scope, building a team, identifying resources, developing a strategy, establishing partnerships, setting performance metrics, and avoiding common pitfalls when creating this new role.

CONSIDERATIONS

Below are some questions to keep in mind as you create a strategic framework. We encourage you to convene a group of your organization's stakeholders to discuss the following:

- What problems are you being asked to solve?
- How are you defining the challenge to be addressed?
- Who are you querying to develop your hypothesis?
- Is the group representative of all the units and stakeholders for which the well-being initiative is focused?
- Who was involved in creating your organizational strategic framework?
- Where can the biggest impact be made?

KEY TAKEAWAY

To be successful, an organization will need a strategic framework and model of well-being to guide this work. The strategic framework must consider organization-wide change and demonstrate the organization's dedication to fostering a culture of well-being. Additionally, it will be important to have input and buy in from all stakeholders.

Create a sense of shared accountability and administrative supports

Promoting shared accountability across leadership and the board will support sustainability across the organization. Take the time to review your organization's strategic plan and look for opportunities where well-being could tie into existing priorities. Not only will this help gain the attention of leadership, but it will enforce the importance of well-being as a pillar in moving your organization's strategic priorities forward. To ensure success, there must be simple, clear communication on the importance and commitment to this work at a regular cadence across all departments – as the work begins, as changes are underway, and as success is found — even small wins.

“There are stakeholders across the organization doing work daily to improve health care well-being. While someone might just see another program, they don't see all the work that is going into everything we do on their behalf. Because of this, I wish we had a dedicated communications officer to communicate this to our team. I don't think that at every level, our teams know how much other people are also taking on a piece of the puzzle. We need to communicate where we all fit and how we are collectively moving our organization forward to make it a professional home and place to be.

KRISTINE OLSON, M.D.

EXAMPLES



PODCASTS

The Well-being Impact of Northwestern Medicine's Scholars of Wellness Program

To address the mental stresses of health care, Chicago's Northwestern Medicine established the Scholars of Wellness program, focusing on understanding what well-being actually means, and how it can be woven into organizational culture. In this discussion, Gaurava Agarwal, M.D., vice president and chief wellness executive at Northwestern Medicine and director of faculty wellness at Northwestern University, and Samantha Saggese, physician assistant of nephrology and hypertension at Northwestern Memorial Hospital, explain the difference the Scholars of Wellness program is making, and how it could be adopted for the benefit of hospitals and health systems across the nation.



PODCASTS

Embedding an Organizational Culture of Wellness

High levels of stress and burnout in the health care field not only cause more errors on the job, but can cost hospitals and health systems millions of dollars to replace departing staff. Having a robust employee wellness program has become a huge priority, moving the needle in recruiting and retaining staff. In this conversation, Kristine Olson, M.D., chief wellness officer at Yale New Haven Hospital, discusses the steps to developing an organization-wide wellness and well-being program, and how these types of programs are creating positive results in their workforce.

CONSIDERATIONS FOR EXECUTIVE LEADERSHIP COMMITMENT

- Has the organizational executive leadership identified a leader position to be accountable for overseeing a well-being initiative?
- Who does the well-being leader report to?
- Is the well-being leader resourced for success?
- How is well-being reflected in the organizational values? In the strategic plan? How will action be communicated?
- How is the organization's leadership team held accountable for supporting the well-being efforts?

KEY TAKEAWAY

To create a sense of shared accountability, organizations should adopt the quintuple aim (care team well-being, healthy communities, patient-centered care, quality care, health equity and affordable care) for informing annual strategic goals. Interdisciplinary care team well-being should be of equal importance to the organization's overall mission as the other five elements of the quintuple aim.¹⁰

Step

4

Identification of ways to integrate well-being improvement efforts with ongoing organizational work

With limited resources, it is important that you look for areas where you can overlap efforts already underway in your organization, such as addressing quality and performance improvement. Look for opportunities to connect this work to other strategic priorities.

Many organizations already have a dedicated staff and budget for patient safety and quality improvement. There are a lot of opportunities to merge these worlds and create a culture of safety that not only encompasses patients, but also incorporates the voice and experience of staff when approaching improvement efforts. In many cases, several of the patient-facing metrics that are already being collected can also be staff-facing. Look for opportunities to broaden the work already taking place.

“When you hear safety, you always think patient safety but at the end of the day we are all in this together and we need to show up as our best selves to provide the best care we can for our patients. We need to broaden the discussion to how do we get the staff to a place where they feel safe and can be compassionate to provide high-quality care.”

SUZANNE BENTLEY, M.D.

10. <https://knowledgeconnection.mainehealth.org/cgi/viewcontent.cgi?article=1110&context=jmmc>

EXAMPLES



INFOGRAPHIC

Science-Based Strategies to Promote Clinician Well-Being and Patient Safety

Human Factors and Ergonomics (HFE) draws from multiple sciences to understand and optimize interactions between people and their work environment and process. Applying the science behind HFE empowers leaders to strategically budget the highly trained cognitive resources of their institution and reduce the occupational stress on clinicians and others. This infographic demonstrates how to best employ science-based strategies for well-being.

CONSIDERATIONS

- What existing efforts and projects can this work help drive?
- Who needs to see this work as “theirs?”
- How can we tie well-being metrics to goal setting and bonuses? Where are there opportunities to connect to the strategic plan?
- Where are we currently measuring outcomes that can be connected to well-being?
- Who are your critical partners to engage?
- Who has the shared deliverables with the well-being work?
- What influence do you have on work already ongoing?

KEY TAKEAWAY

Most organizations have existing work with dedicated budgets and resources that can be tied to well-being efforts. To maximize impact, take the time to identify these areas.

Step

5

Establishment of benchmarks to track and measure impact

Measuring progress and commitment to organizational well-being activities is essential to sustain efforts. How to best capture the impact of well-being efforts is a complex challenge that requires both process and outcome measures as well as a deliberate and continual plan to share these metrics. It is essential to capture and analyze these data then disseminate and communicate them clearly amongst all stakeholders. Identifying utilization metrics is a useful tool in demonstrating engagement.

When developing metrics, identify process measures for success that can help show progress, along with secondary measures that can show longer term impact. It is important to distinguish between metrics of organizational progress and measures of program effectiveness. The CWO and the team guiding this work are not solely accountable for the well-being and professional satisfaction of clinicians in the organization, rather they are accountable for setting the strategy and measuring progress towards its achievement. Senior executive leaders who adopt strategies informed by the CWO guide the organization and ultimately lead the workforce towards enhanced well-being.¹¹ See a small sample of examples in the table below. For the complete table check out [The Health Care Chief Wellness Officer: What the Role Is and Is Not](https://journals.lww.com/academicmedicine/fulltext/2020/09000/the_health_care_chief_wellness_officer__what_the.38.aspx).

11. https://journals.lww.com/academicmedicine/fulltext/2020/09000/the_health_care_chief_wellness_officer__what_the.38.aspx

TABLE

Responsibilities of the Chief Wellness Officer (CWO) and Measures of Organizational Progress toward Well-Being Goals¹²

Responsibilities of the CWO ^a	Measures and Evidence of Organizational Progress ^b
Measure well-being, burnout and professional fulfillment across the organization	Rates of burnout, professional fulfillment across the organization
Measure the efficiency of the practice environment and identify opportunities to improve it	Efficiency of the practice environment (amount of time spent on documentation or turnaround times, among others)
Develop an organization-wide action plan for improving clinician well-being	Implementation of an organization-wide action plan to improve clinician well-being
Assess the organizational culture and identify dimensions of culture that require strengthening	Strengthening and addressing issues related to organizational culture
Provide relevant and actionable data to other leaders	Leaders to act to drive improvements in their spheres of influence and responsibility
<p>a Responsibility of the CWO and his or her team; CWO is accountable.</p> <p>b Responsibility of senior leaders in the organization; all senior leaders are accountable.</p>	

Just as each organization is at a different starting point, each clinical department or unit also will be at a different level. It is recommended that you work with department and/or unit leads to understand where each is at on their journey, together creating benchmarks and metrics to move forward. Dashboards and scorecards are a useful tool for evaluating maturation of department efforts to improve well-being. Figure 4A and 4B in the [Mayo Clinic's Organization-Wide Approaches to Foster Effective Unit-Level Efforts to Improve Clinician Well-Being](#) are two good examples.

EXAMPLES



ARTICLE

[The Health Care Chief Wellness Officer: What the Role Is and Is Not](#)

Looking at the role of the CWO, this article identifies measures of organizational progress toward well-being goals.



ASSESSMENT TOOL

[Organizational Well-Being Assessment](#)

The Organizational Biopsy supports organizations in holistically measuring and taking action to improve the health of their organization.



OVERVIEW AND SURVEY INSTRUMENTS

[Valid and Reliable Survey Instruments to Assess Work-Related Dimensions of Well-Being](#)

Developed by the Action Collaborative on Clinician Well-Being and Resilience, this resource provides a summary of valid and reliable survey instruments that can be used to measure individual burnout, depression and well-being.

12. https://journals.lww.com/academicmedicine/fulltext/2020/09000/the_health_care_chief_wellness_officer_what_the.38.aspx



Beyond Burnout: From Measuring to Forecasting

Through a summary of valid and reliable survey instruments, this paper helps estimate the cost of clinician burnout beyond the widely studied losses due to turnover. It looks at hard-to-measure and potentially long-term costs that arise from reduced patient satisfaction and lower productivity of burnt-out clinicians at work. Additionally, it uses standard medical billing and administrative operating data to forecast turnover and productivity of clinicians to serve as an early warning system.

CONSIDERATIONS

- What data exist from the team on the challenges?
- What access to data do you have (i.e., HR/survey questions/employee engagement scores)?
- What access to analytics/IT do you have?
- What efforts have already been tried/are underway?
- What resources already exist as part of a well-being effort/HR?
- What access to communication channels will you have to spread the effort?
- What project management and protected time support is available?
- How and at what cadence will you disseminate findings/results/improvements?

KEY TAKEAWAY

Well-being should be a measurable quality metric for the organization and should be embedded into decision-making at every level. Metrics that capture the efficacy of the well-being effort are distinct from measures of well-being for the organization and though related, both types of data need to be captured and distinguished in order to understand the success of both the well-being effort and the organization's progress.

CONCLUSION

To successfully address burnout, organizations must be mindful about the steps that are taken when building a well-being program as well as communicating it clearly amongst all stakeholders. There is currently a lot of well-being work being done in the field; don't try to reinvent the wheel. This resource aims to help leaders learn from each other to better understand what has been successful and what hasn't.

ADDITIONAL RESOURCES

Below are some additional resources and examples to support and guide your organization as you embark or continue your journey of building culture of well-being.

The Clinician Well-being Playbook

The AHA's Physician Alliance Clinician Well-being Playbook 1.0 lays the groundwork for understanding well-being and setting your organization up to build a well-being program.

Well-being Playbook 2.0

The AHA's Physician Alliance Clinician Well-being Playbook 2.0 is a COVID-19 resource for hospital and health system leaders looking to develop and execute a well-being program.

Organization-Wide Approaches to Foster Effective Unit-Level Efforts to Improve Clinician Well-Being

This guide from the Mayo Clinic outlines steps for organizations to consider as they establish infrastructure to improve professional well-being.

Joy in Medicine Health System Recognition Program

This program is designed to spark and guide organizations interested, committed or already engage in improving physician satisfaction and reducing burnout.

Organizational strategies to reduce physician burnout and improve professional fulfillment

This consensus review by leaders in the field across multiple institutions presents emerging trends and exemplary evidence-based strategies to improve professional fulfillment and reduce physician burnout using Stanford's tripartite model of physician professional fulfillment as an organizing framework: practice efficiency, culture, and personal resilience to support physician well-being. The review concludes with evidence-based recommendations on establishing an effective physician wellness program.

Podcasts

Leading with Empathy: Workforce Well-being at Ochsner Health

Addressing burnout and the mental health of employees is not only the right thing to do, but also improves care, quality, patient satisfaction and the financial health of the organization. In this conversation, Nigel Girgrah, M.D., chief wellness officer at Ochsner Health, discusses his evolution in workforce well-being, building a business case for organizational buy-in and the importance of combining leadership with mental health transparency.

Workforce Burnout: Embedding an Organizational Culture of Wellness

High levels of stress and burnout in the health care field not only cause more errors on the job, but can cost hospitals and health systems millions of dollars to replace departing staff. Having a robust employee wellness program has become a huge priority, moving the needle in recruiting and retaining staff. In this conversation, Kristine Olson, M.D., chief wellness officer at Yale New Haven Hospital, discusses the steps to developing organization-wide wellness and well-being, and how these types of programs are creating positive results in their workforce.

Peer Support and Building an Infrastructure of Employee Mental Wellness

For many clinicians the pressure of treating a never-ending line of patients can be stressful. The COVID pandemic has been a health care game changer, and its lasting effect on care teams accelerated issues like burnout and the need to address well-being. In this conversation, Suzanne Bentley, M.D., chief wellness officer and director of simulation, innovation and research at the New York City Health and Hospitals Elmhurst Hospital Center, discusses the critical role that their peer support program played in employee mental health and the impact of building infrastructure focused on the well-being of staff.

The Well-being Impact of Northwestern Medicine's Scholars of Wellness Program

To address the mental stresses of health care, Chicago's Northwestern Medicine established the Scholars of Wellness program, focusing on understanding what well-being actually means, and how it can be woven into organizational culture. In this discussion, Gaurava Agarwal, M.D., vice president and chief wellness executive at Northwestern Medicine and director of faculty wellness at Northwestern University, and Samantha Saggese, physician assistant of nephrology and hypertension at Northwestern Memorial Hospital, explain the difference the Scholars of Wellness program is making, and how it could be adopted for the benefit of hospitals and health systems across the nation.

The Growing Role of Chief Wellness Officers in Health Care

In U.S. health care there has been a significant increase in the number of chief wellness officers (CWOs) employed by hospitals and health systems. CWOs are an essential part of a health care worker's mental and physical support structure, providing opportunities and resources whenever needed. In this conversation, Jonathan Ripp, M.D., senior associate dean for well-being and resilience and chief wellness officer of Icahn School of Medicine at Mount Sinai, discusses his role as one of the nation's first chief wellness officers, and how the importance of employee wellness has evolved in hospitals and health systems in the last decade.