

Promoting wellness during residency

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The rate of burnout among physicians is disturbingly high, and wellness promotion is needed at all levels of training. While rigorous clinical training is necessary to build competence for making life-or-death decisions, training should not cause an indifference toward life or death. Because many physicians experience burnout during residency, we all must commit to wellness, which directly leads to healthier professionals and improved patient care.

Ey et al¹ evaluated the feasibility and application of a wellness program for residents/fellows and faculty in an academic health center over 10 years. They concluded that a comprehensive model of care was viable and well-valued, based on high levels of physician satisfaction with the program. This model, which involves educational outreach, direct care, and consultation, inspired me to reflect on the resident burnout prevention strategies employed by the residency program in which I am currently training.

Even in situations where a formal wellness program does not exist, measures that promote resident well-being can be embedded and easily adapted:

- Education on recognizing the early signs of burnout or establishing a “buddy system” can promote a help-seeking culture and ease the transition into residency.
- Faculty who provide feedback in the “sandwich method” (praise followed by corrective feedback followed by more praise) can help promote self-confidence among residents.

- Process groups and monthly meetings with chief residents present opportunities for professional development and for residents to express concerns.

- Social gatherings that encourage team building and regular interaction among residents, attendings, and family members help build a comforting sense of community.

- A residency program director and faculty who adopt open-door policies and foster personal attention and guidance are also essential.

A recent cross-sectional analysis found that building competence, autonomy, coping mechanisms, adequate sleep, and social relatedness were associated with resident well-being.² Hence, these factors should be integrated within residency training programs.

Residency should be approached as an engagement between colleagues where autonomy and confidence are promoted while residents acquire clinical skills within a wellness-promoting, learning environment. Demanding schedules may limit access to a dedicated wellness program; however, it is essential that a system be established to quickly identify and mitigate burnout. We all strive to be the best in our respective fields, and we must



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Disclosure

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re-evaluate how we achieve excellent training while developing proper skills for future success. As physicians, we are not machines; our humanity connects us with our patients, explains life-changing news, or consoles the bereaved when there is loss of life. We must embrace our humanity and be mindful that physicians experiencing burnout cannot deliver

high-quality care. Early detection and prevention strategies during residency training are key.

References

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2. Raj KS. Well-being in residency: a systematic review. *J Grad Med Educ.* 2016;8(5):674-684.

Clinical Point

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