

## **Third National Summit on Promoting Well-Being and Resilience in Healthcare Professionals: Abstracts from the Poster Winners**

Symptoms of burnout, depression, and anxiety are experienced by more than half of all healthcare providers across the country. Like the general population, healthcare providers also engage in unhealthy lifestyle behaviors which can contribute to suboptimal mental health and chronic disease outcomes. Further, the mental and physical well-being of providers has been linked to the quality, safety, and cost of patient care. To address these critical issues, The Ohio State University partnered with the National Academy of Medicine's Action Collaborative on Clinical Well-being and Resilience to bring together hundreds of clinicians, leaders, influencers, students, and agents of change for the Third National Summit on Promoting Well-Being and Resilience in Healthcare Professionals. The summit took place September 28-30, 2022, in Columbus, Ohio. In addition to including phenomenal presentations from some of the nation's brightest minds, expert practitioners, and renowned motivational speakers, the Summit also included judged poster sessions. BHAC is pleased to present the following abstracts from the winning posters.

More information about the National Summit on Promoting Well-Being and Resilience in Healthcare Professionals is available at: <https://clinicianwellbeing.osu.edu/>



## Nebraska Collaborative Investment in Nurses: Resiliency, Retention & Well-being

Alyson Hanish, PhD, MSN, RN  
University of Nebraska Medical Center

Tiffany Moore, PhD, RN, SANE-A  
University of Nebraska Medical Center

Bobbie Barton, MHEA  
University of Nebraska Medical Center

Kami Wattenbach, MBA  
University of Nebraska Medical Center

Therese Mathews, PhD, APRN-NP, BCBA-D  
University of Nebraska Medical Center

Lyndsay Dean, DNP, APRN, PMHNP-BC, FNP-BC  
University of Nebraska Medical Center

Heidi Keeler, PhD, RN  
University of Nebraska Medical Center

Marcia Shade, PhD, RN  
University of Nebraska Medical Center

Jessica Semin, DNP, MPH, RN  
University of Nebraska Medical Center

Lisa Walters, MSHSM, RN, FACHE  
University of Nebraska Medical Center

Emily Blanchard, MPH, RN  
University of Nebraska Medical Center

Krista Brown, MBA, MPH  
University of Nebraska Medical Center

Keith Hansen, MBA  
University of Nebraska Medical Center

Deborah Levy, PhD, MPH  
University of Nebraska Medical Center

Katie Cordts, PhD, LP  
University of Nebraska Medical Center

Alison DeLizza, PhD, LP  
University of Nebraska Medical Center

Steven Wengel, MD  
University of Nebraska Medical Center

Rebecca Wysoske, MD  
University of Nebraska Medical Center

Partnerships: Nebraska Center for Nursing (Juan-Paulo Ramirez, PhD), Nebraska Board of Nursing (Ann Oertwich, PhD, RN), and the Nebraska Hospital Association

Winning Category: Most Innovative

**Background:** During the pandemic, health care workers providing direct care services reported increased rates of burnout, suicide, and other adverse behavioral health outcomes. The Nebraska Center for Nursing created a multiregional nursing supply and demand model that shows nursing shortages were expected to grow by 26% by 2025. Currently, Nebraska faces a nursing shortage of roughly 3,000 nurses, with a 14% unmet demand for nurses in rural and medically underserved areas (MUAs). Escalated rates of burnout and mental health conditions further strain the recruitment and retention crisis of nurses. Burnout and mental health conditions are multidimensional, requiring integrated individual and system-level action.

**Purpose:** The purpose of this HRSA-funded wellness initiative is to deliver innovative resiliency-based interventions and resources to address and reduce burnout and mental health conditions in nursing students, as well as RNs and APRNs working in rural and MUAs.

**Methods:** A resiliency-based intervention, Wellness - How One Lives Effectively (WHOLE), was delivered to undergraduate nursing students by psychiatrists, psychologists, and nursing faculty trained in the program. An adapted WHOLE program will be delivered with no-cost continuing education hours for RNs/APRNs. Our team will develop community-based partnerships to adopt the Critical Incident Stress Management model, including piloting models of Critical Incident Stress Debriefing to address the needs of nurses at the time of crisis. Outcomes measured in this study are centered on mental health, well-being, and resilience and measured at predetermined intervals based on HRSA performance measures.

**Results:** July 2022, the WHOLE program was delivered to 292 students. Prior to starting nursing school, all students fell into the moderate to high perceived stress category. Upon completion of the WHOLE program, we saw significant decreases in anxiety and perceived stress ( $p$ 's<0.001). Outcomes of the WHOLE program will be enhanced using rapid cycle quality improvements.

**Implications:** Sustainability efforts are embedded in the HRSA-approved sustainability plan.

Author Correspondence:

Alyson Hanish, PhD, MSN, RN  
alyson.hanish@unmc.edu

This project is funded by the Health Resources and Services Administration (HRSA) under award number 1U3NHP45394-01-00. This research is solely the responsibility of the authors and does not necessarily represent the views of the HRSA.

## Feasibility of A Walking Meditation Intervention on Mental Health and Sleep Quality in Baccalaureate Nursing Students

Cheryl Hines, EdD, MSN, CRNA  
University of Alabama

Abby Horton, EdD, RN, CHC, CLC  
University of Alabama

Shameka Cody, PhD, AGNP\_C  
University of Alabama

Winning Category: Most Impactful

**Background:** Anxiety and depression are growing concerns among nursing students, and the literature suggests that nursing students experience significant stress during their education. Mental illnesses are known to negatively impact sleep, and poor sleep can intensify mental illness. Nurse educators have a role to promote self-care and facilitate the development of appropriate coping strategies to improve mental health and well-being of the next generation of America's heroes.

**Purpose:** The purpose of this study was to examine feasibility and acceptability of a meditative labyrinth walking intervention among baccalaureate nursing students.

**Methods:** Thirty nursing students were asked to walk the labyrinth three days a week (30 minutes each session) for 6 weeks. At baseline and post-intervention, participants were asked to complete questionnaires related to mental health, sleep quality, and academic performance in addition to 7-day actigraphy. Feasibility and acceptability were assessed by participant enrollment, number of sessions completed, retention rates, participants' satisfaction, and perception of the intervention. Correlations between completion of the intervention and mental health (primary outcome) and sleep quality (secondary outcome) were assessed. Our aims were to see if: 1. The walking meditative labyrinth is free to use and conveniently located at the nursing school which will increase the likelihood that students will adhere to the 6-week intervention and 2. Greater completion rates will correlate with improvements in mental health outcomes. Given the association between mental health and sleep quality, improvements in mental health outcomes for those who complete with intervention will correlate with improvements in sleep quality.

**Results:** Of the eight recruited volunteers, only three completed every part of the intervention. Researchers found that due to weather, clinical rotations, and lack of researcher availability, after hours and on weekends, it was not feasible to have researcher monitored participation for every walk.

**Impact:** Spring 2023, the researchers plan for increased recruitment strategies (goal is n= 30) and have tweaked the methodology so that after initial session, subsequent participation has students sign in and out of the labyrinth using an URL code.

Author Correspondence:

Cheryl Hines, EdD, MSN, CRNA  
cheryl.b.hines@ua.edu

## Suicide Prevention: Towards Promoting Wellness Culture Change and Preventing Student Suicide

Nayla M. Khoury, MD, MPH  
Upstate Medical University

Kaushal B. Nanavati, MD, FAAFP, ABOIM, ABIHM  
Upstate Medical University

Joanna L. Suser, MS  
Upstate Medical University

Winning Category: Most Scalable

**Background:** We present process, recommendations, and preliminary outcomes for a suicide prevention taskforce, called for by the alarming rate of suicide among our medical students in the last four years. Nationally, medical students are more likely than their same sex peers to die of suicide, despite being more resilient at matriculation. At our local Institution there are specific stressors that we can target to address this alarming problem.

**Purpose:** To review the process and recommendations made by a suicide prevention taskforce as well as present preliminary data on outcomes based on policy and procedure changes.

**Methods:** A taskforce was called for that met twice per month from October 2021 to February 2022, reviewed existing literature, best practices and survey data collected on our own students to assess specific risks and areas for improvement. The group also met with suicide prevention experts from the American Foundation for Suicide Prevention and Gatekeeper training through Syracuse University (Campus Connects).

**Results:** Using the suicide prevention framework outlined by the American foundation for suicide prevention, the taskforce identified a number of recommendations and organized them into health promotion, help-seeking and disease management arms. They included integrating wellness into the medical school curriculum, expanding a systematic screening program to identify those at elevated risk of suicide, enhancing peer support and recommending an enhanced gatekeeper training for selected faculty, mentors, and chief residents as well as key staff within the hospital system.

**Implications:** This taskforce process will share lessons learned that can be helpful for other medical schools and institutions of higher learning looking to address the issue of student suicide and promote cultures of wellbeing.

Author Correspondence:

Nayla Khoury, MD, MPH  
khouryn@upstate.edu

## BeWell Champion Program: An Initiative to Increase Employee Wellness

Kathleen Allen, BS  
The Pennsylvania State University

Angela Zearfaus, RD  
The Pennsylvania State University

Winning Category: Most Sustainable

**Background:** Workplace wellness programs can offer employees the support, resources, and awareness needed to maintain a resilient and sustainable work environment. In the healthcare setting, time, financial and workplace priority limitations are often a barrier in program implementation. The BeWell Champion program was supported by Penn State Health Human Resources with the goal of overcoming these barriers.

**Purpose:** The BeWell Champion program offers Penn State Health workplace locations/units (sites) technical assistance (TA), managerial support, and funding to improve the eight dimensions of wellness (Occupational, Environmental, Physical, Financial, Emotional, Spiritual, Social, and Intellectual). A baseline survey was conducted to address wellness barriers among staff at each of these sites.

**Methods:** In the fall of 2019, the BeWell Team enrolled 14 sites, each with a corresponding employee Champion. Each Champion was guided in administration of a baseline staff wellness assessment which consisted of 59 questions focused on identifying barriers to wellness activities. The BeWell team provided TA to site Champions' development, implementation and evaluation of wellness programming, and provided funds.

**Results:** There were 250 respondents to the baseline survey representing 14 sites. Of these, 79.9% ( $n = 199$ ) indicated time as the largest barrier to wellness activity participation. Additional barriers included inconvenient times and locations for wellness programs. When asked which dimensions of wellness were in highest need at their sites, employees identified physical (57.0%,  $n = 184$ ), environmental (42.7%,  $n = 138$ ), and emotional wellness (33.7%,  $n=109$ ).

**Implications:** Baseline results informed planning and implementation of site wellness initiatives. The BeWell Team ensured plans were responsive to baseline survey results, but also feasible within the allotted budget and time frame. For a large healthcare institution with significant variability among sites, the baseline assessment proved a key factor in appropriately meeting site specific wellness needs.

Author Correspondence:

Kathleen Allen, BS

kallen1@pennstatehealth.psu.edu

## Health System Strategies for Caregiver Mental Wellbeing During the Persistent COVID-19 Pandemic

Perry M. Gee, PhD, RN, FAAN  
Intermountain Healthcare

Anne Pendo, MD, FACP, ACC  
Intermountain Healthcare

Emily Sterling, MBA, MRC  
Intermountain Healthcare

Winning Category: Best Overall

**Background:** Intermountain Healthcare is a growing health system that serves the healthcare needs of people across the Intermountain West. We are an integrated, not-for-profit health system headquartered in Salt Lake City, Utah, with SelectHealth insurance plan that serves over a million lives. Our team will describe our 7 system-wide strategies used to combat the additional stress, fatigue, and mental unrest with the seemingly endless pandemic.

**Purpose:** To describe using the Intermountain Healthcare Operating Model of Continuous Improvement© used for the real-time development and implementation of strategies that support caregiver mental wellbeing during an evolving pandemic.

**Methods:** Utilizing the best available evidence, the knowledge and wisdom of system and national experts, and best practices identified locally by our front-line caregivers, our team implemented our 7 strategies using our Operating Model.

**Results:** Using a focus with the goal of improving a mental wellbeing culture, we successfully implemented or piloted our 7 strategies. Our team will measure success of our programs utilizing specific items from our ongoing Press Ganey caregiver engagement scores, intermittent pulse surveys of caregivers with targeted questions looking at specific strategies, tracking utilization of wellbeing resources, and using validated wellbeing instruments with specific caregiver populations.

**Implications:** Past pandemics have significantly impacted caregiver mental wellbeing and left some vulnerable to post traumatic stress. We must proactively engage with caregivers in highly impacted areas like emergency departments and intensive care units to mitigate the potential for mental wellbeing concerns. In addition, we must provide unique, equitable resources for all system caregivers regardless of work setting.

Author Correspondence:

Perry M. Gee, PhD, RN, FAAN

Perry.Gee@imail.org