

2022 AAP MidCaN Grand Webinar Series

Touching on: Advocacy, Communication, Leadership, Quality Improvement, Research, and Wellness

January, 27th, 3 pm (CT)

Ted Lasso, Football, and Leadership:
From Burnout to Believe
Dena Hubbard, MD, FAAP

February 15th, 2:30 pm (CT)

Seeking Wellness by Understanding Diversity, Equity,
Inclusion, Micro-aggressions, and Emotional
Intelligence
Sharada Gowda, MD, FAAP

March, 17th, 2 pm (CT)

Quality Measures:
What Should We Measure, and Why?
Munish Gupta, MD, MMSc, FAAP

April 2022

Generational Differences in Leadership
Ashley Lucke, MD, FAAP, and
Lewis First, MD, MS, FAAP

May 2022

Entrepreneurship in Neonatology Research
Janene Fuerch, MD
Vivek Lal, MD, FAAP

June 2022

Careers in Quality Improvement
Heather Kaplan, MD, MSCE, FAAP

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Message Amplification through Social Media
Ben Courchia, MD, and
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Trent Tipple, MD, FAAP, and
Linda Van Marter, MD, MPH, FAAP

November 2022

Integrating Advocacy/Public Policy into your
Professional Life as a Neonatologist
Stephen Patrick, MD, MPH, MS, FAAP

December 2022

Leadership – speaker TBA

Learn more at:

<https://www.aap.org/en/community/aap-sections/sonpm/midcan/midcan-grand-webinar-series/>



American Academy of Pediatrics

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BELIEVE

Ted Lasso, Football, and Leadership: From Burnout to Believe

2022 AAP Section on Neonatal-Perinatal Medicine

MidCaN Grand Rounds

Dena K. Hubbard, MD, FAAP

January 27, 2022



@HubDeMD; dkhubbard@cmh.edu



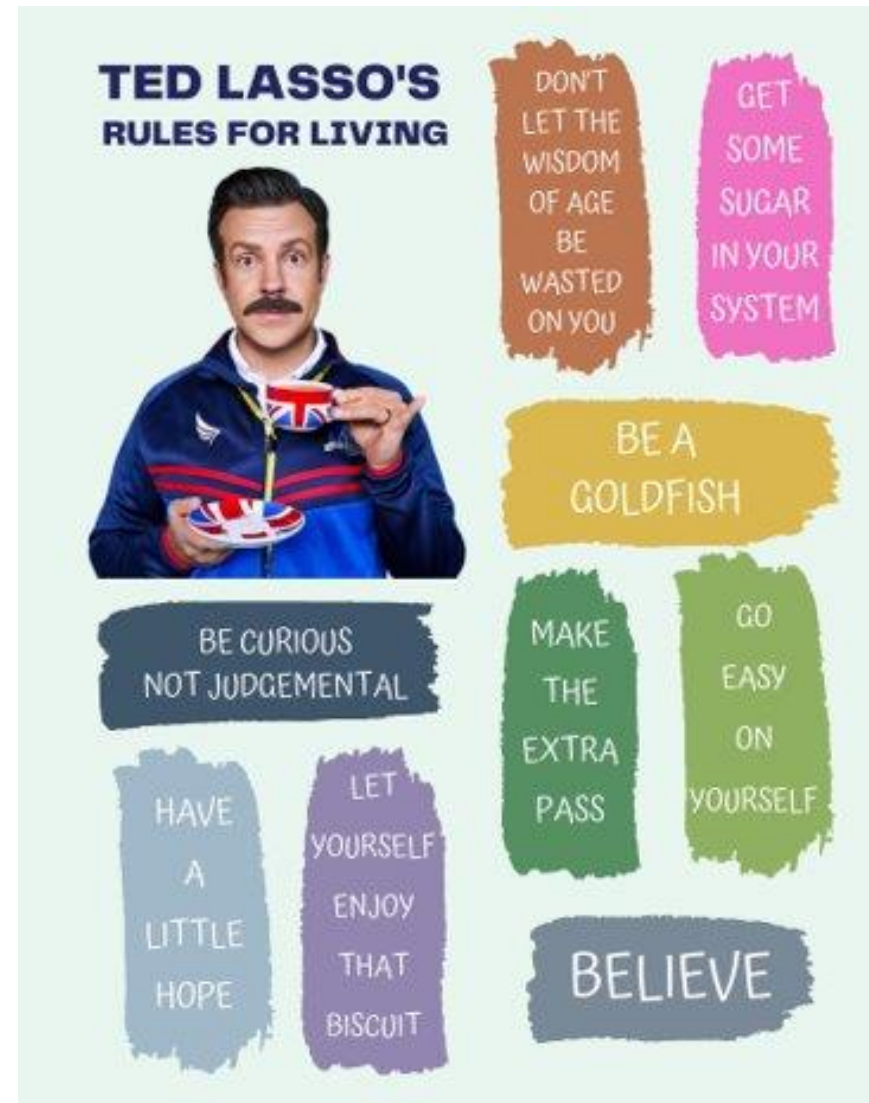
Children's Mercy
KANSAS CITY

Check-in

- Chat in 3 things about yourself
- Ted Lasso 👍 👎
- Describe your current psychological well-being in an emoji or song title

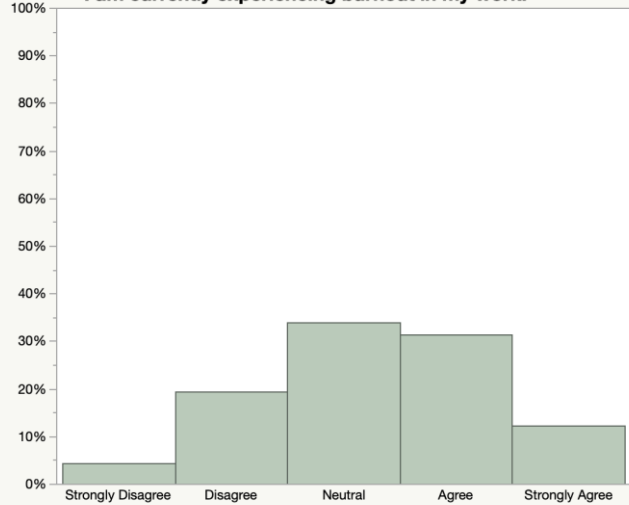


- Where are you joining from today?

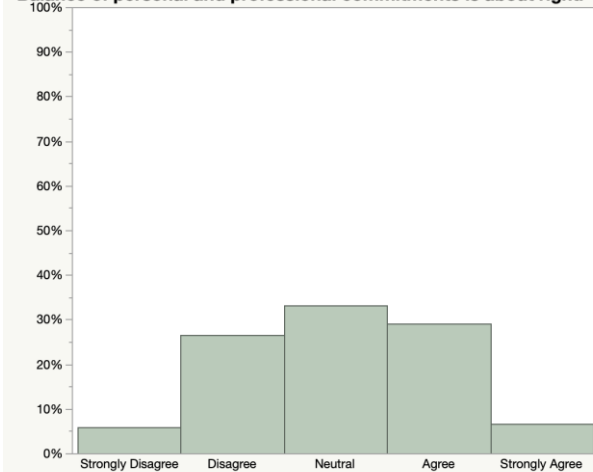


Survey of Registrants N = 132

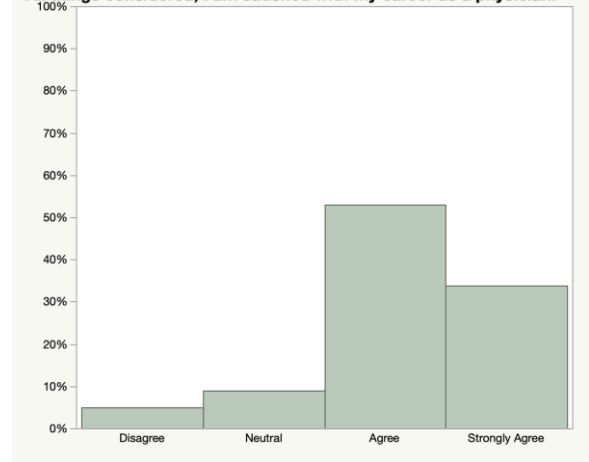
I am currently experiencing burnout in my work.



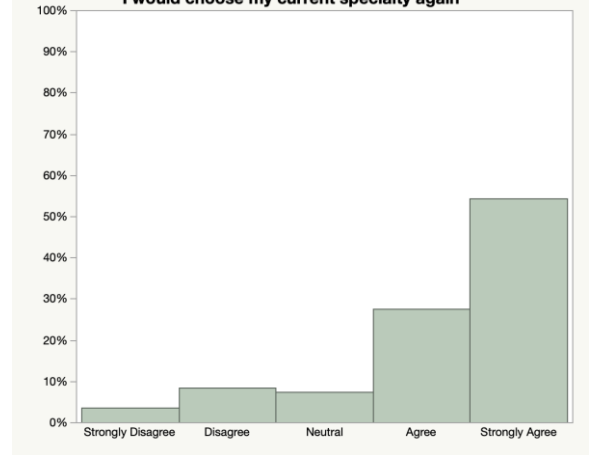
Balance of personal and professional commitments is about right.



All things considered, I am satisfied with my career as a physician.



I would choose my current specialty again



Thanks Eric Horowitz for the graphics!

My Burnout Story: Praying for Appendicitis

- How I knew I was in trouble
- How others perceived me
- What I did to help myself



Ted Lasso 
@TedLasso



There is something worse out there than being sad,
and that is being alone and being sad.

4:47 PM · Oct 18, 2020 · Twitter for iPhone

Clinician Well-being, Burnout, Resilience...So What?

BURNOUT RESULTS IN DECREASED QUALITY OF CARE

Special Stressors and Trauma Informed Care in Pediatrics

*What may seem rare and uncommon for others is **routine** for us*

Positive Traits or Risk Factors?

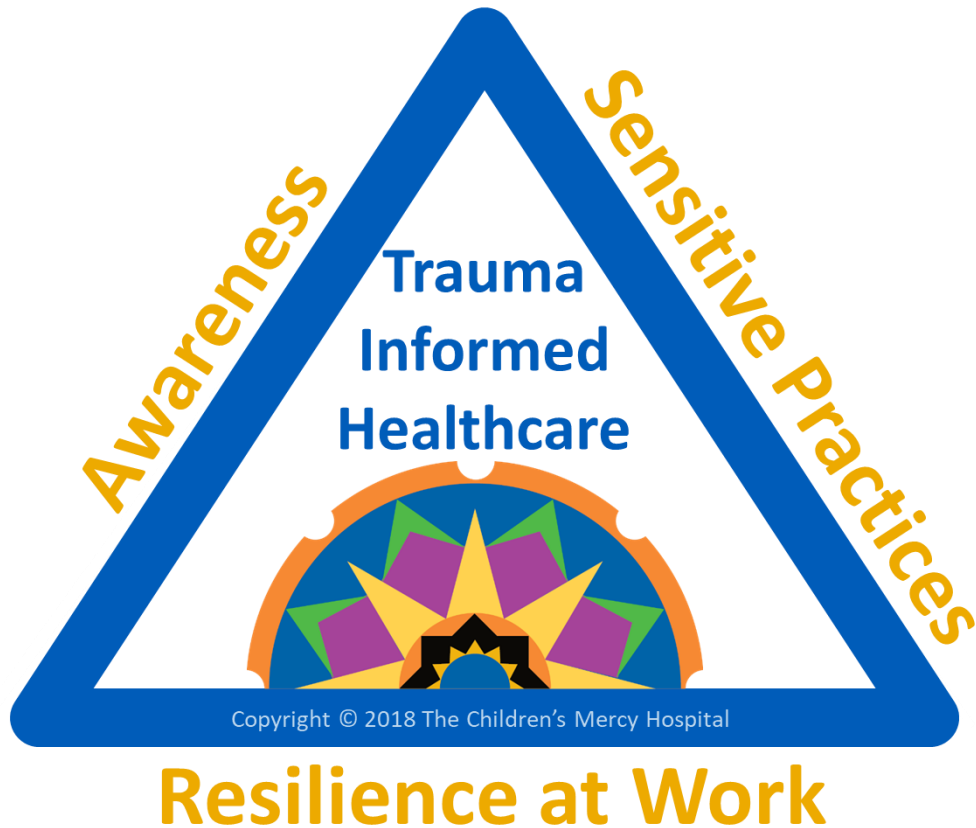
Positive Trait	In Exaggerated Form
Altruism	Loss of sense of self, martyr
Compassion	Compassion fatigue, loss of empathy, depression
Perfectionism	Compulsiveness, self-doubt, imposter syndrome
Competitiveness	Isolation, alienation of peers
Resiliency	Sense of invincibility, unsustainable pace, exhaustion
High Achievers	Workaholic, burnout



Moral Distress

- Inability to act according to personal core values
- Medical error
- Patient suffering
- Prolongation of life
- Do not resuscitate/Do not intubate
- Conflict about treatment
- Poor team communication
- Perceived misalignment of values

Trauma Informed Care



- We don't know what we don't know
- Universal precautions
- We don't know what experiences our patients have had when they present for services, so we need to approach them in a universally sensitive matter
- Same applies to each of us
- Need to understand impact of trauma in our lives and our work

Principles of Trauma Informed Care

A trauma informed approach incorporates the Key Principles into every interaction, policy, and procedure.



SAFETY



TRUST



CHOICE



COLLABORATION



EMPOWERMENT



CULTURAL
HUMILITY

Preventing and Fighting Burnout

- Reward Work
- Encourage autonomy
- Promote fairness & transparency
- Support reasonable workload
- Foster sense of community
- Assure consistent values

“No surer path to a disillusioned workforce than the perception that those in charge are hypocrites.”

“The best way to prevent burnout and attrition is to empower people to perform their jobs effectively, in an environment that is safe and supportive.”

I'm a survivor.

Top 10 Things I Learned As a Burned-Out Physician

My toolbox

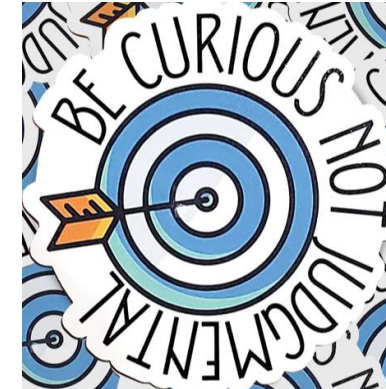
Learn from my mistakes!

Top 10 Things I Learned As a Burned-Out Physician

1. I found an outlet.
2. I need to be truly present.
3. I can control how I respond to things out of my control.
4. I am not my career.
5. I remembered my “why”.
6. I know me best.
7. I am never stuck.
8. Work-Life balance is a unicorn.
9. No. This is a complete sentence.
10. I am enough.




LIVING
IN THE MOMENT
IS A GIFT,
THAT'S WHY
THEY CALL IT
THE PRESENT.



There's two
buttons I never
like to hit.
That's panic and
snooze.
TED LASSO

**DON'T
YOU
DARE
SETTLE
FOR FINE.**

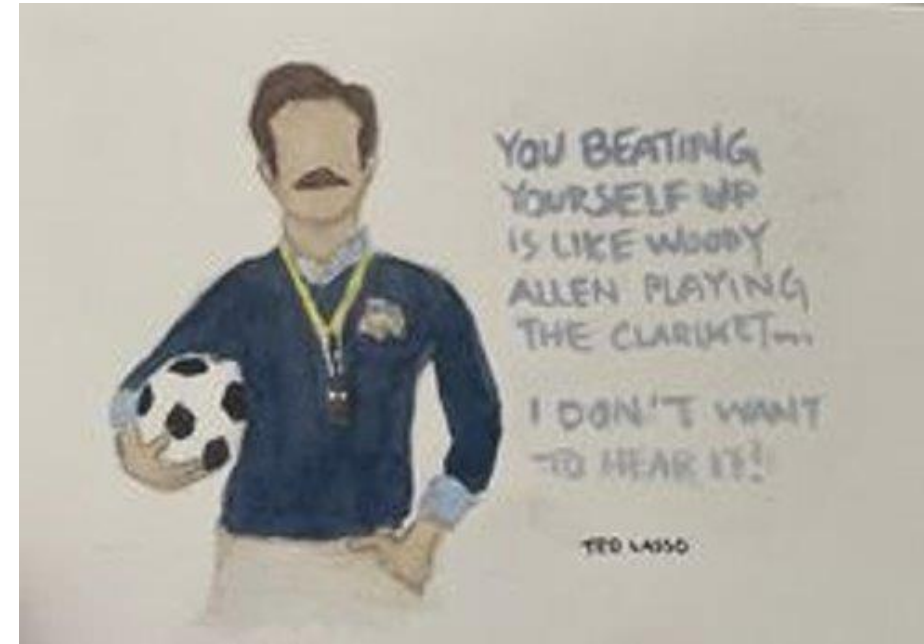


"TAKIN' ON A CHALLENGE IS
A LOT LIKE RIDIN' A HORSE.
IF YOU'RE COMFORTABLE
WHILE YOU'RE DOIN' IT,
YOU'RE PROBABLY DOIN'
IT WRONG."

BELIEVE

Your Burnout is "You"nique: Go Easy on Yourself

- What is causing you to feel burned out?
 - Exhaustion
 - Cynical detachment
 - Reduced sense of efficacy
- Agency is Restorative
 - Take control
 - Take action
- Prevention and Early Intervention

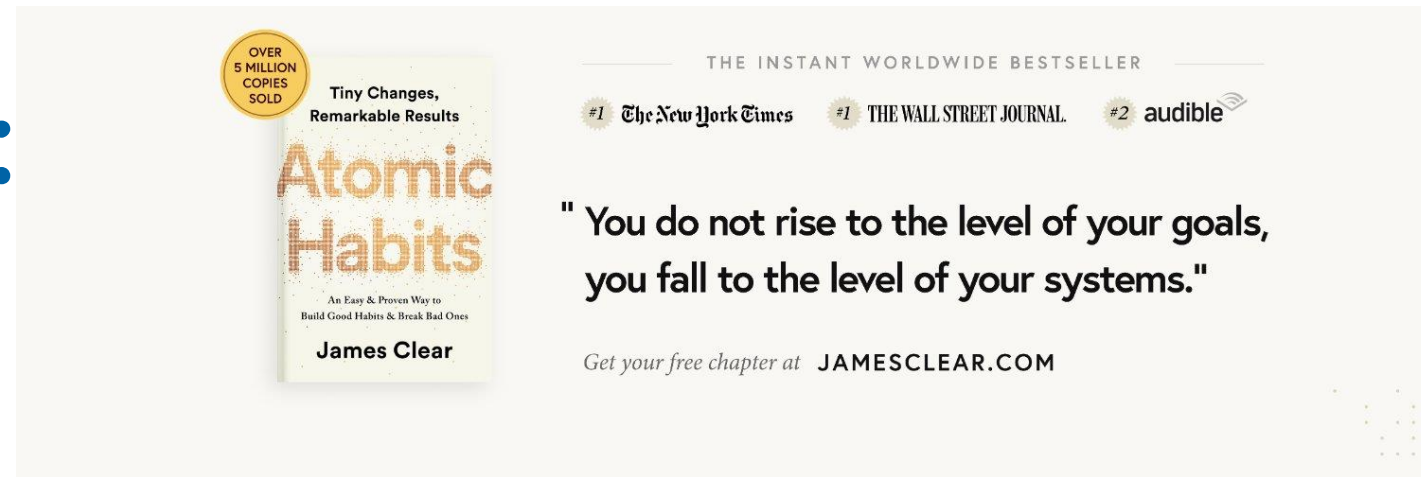


Self-Care Routine: Let Yourself Enjoy That Biscuit

- Change your mindset
- Challenge your assumptions
- Define self-care on your own terms
- Beware all-or-nothing thinking
- Integrate into your existing habits and routines



Overcoming Stress:



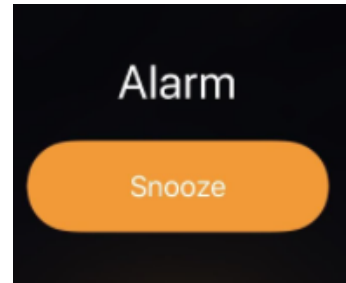
- **Pick one small habit to change**
 - A healthy lifestyle habit often leads to more healthy changes
- **Surround yourself with like-minded people**
 - Makes sticking to habit easier, more fun, effective, plus social support is bonus!
- **When you falter, pick yourself up with compassion**
 - Talk to yourself like you would talk to a friend
- **Healthy lifestyle habits including what we eat, how much we move, sleep, and how mindful we are affect our ability to adapt to stress and adversity**

5 Mistakes We Make When We're Overwhelmed



- I don't have time to do things that would help me (*waiting for*)
 - **Choose the best option that's easily available now**
- I have to focus (*not utilizing your unconscious mind*)
 - **Let your mind drift to allow creativity/problem solving without trying so hard**
- I am weak for feeling overwhelmed (*self-critical*)
 - **Talk to yourself like you would a friend, with compassion**
- I default to my dominant approach and defenses (*rigid, less flexible*)
 - **Rethink, does this task or problem need my strength?**
- I withdraw from my supports (*missed opportunities to fill your bucket*)
 - **Identify ways you can connect even with limited emotional energy**

5 Things to Do When You Feel Overwhelmed by your Workload



Practice your acceptance skills with healthy self-talk



Track your time



Check your assumptions about other people's expectations



Examine your assumptions about what success requires



Start taking time off now instead of waiting for the "right" time

"THE STRESS ITSELF WILL KILL YOU FASTER THAN THE STRESSOR WILL—UNLESS YOU DO SOMETHING TO COMPLETE THE STRESS RESPONSE CYCLE.

WHILE YOU'RE MANAGING THE DAY'S STRESSORS, YOUR BODY IS MANAGING THE DAY'S STRESS. IT'S ABSOLUTELY ESSENTIAL TO YOUR WELL-BEING THAT YOU GIVE YOUR BODY THE RESOURCES IT NEEDS TO COMPLETE THE STRESS RESPONSE CYCLES THAT HAVE BEEN ACTIVATED."

—
EMILY AND AMELIA NAGOSKI
AUTHORS, *BURNOUT: THE SECRET TO UNLOCKING THE STRESS CYCLE*

UnlockingUs PODCAST WITH BRENÉ BROWN

Steps to Take When You're Starting to Feel Burned Out



Ted Lasso ✓
@TedLasso



In my experience, the best solution for burnout is to cook it out instead. Nothing a little sunshine, a rack of ribs, and a plate of mac 'n cheese can't fix.

11:47 AM · May 17, 2021 · Twitter for iPhone



Prioritize taking care of you



Analyze your current situation



Reduce exposure to job stressors



Increase job resources



Take the opportunity to reassess

Boost Your "Resilience"

- Recognize good stress vs toxic stress
- Exercise mindfulness
- Compartmentalize your cognitive load
- Take detachment breaks
- Develop mental agility
- Cultivate compassion



"Just listen to your gut, okay? And on your way down to your gut, check in with your heart."

- TED LASSO

How to Beat Burnout:

Be curious,
not
judgemental

1

Challenge

- Challenge the status quo with curiosity

2

Verbalize

- Verbalize your sense of purpose

3

Manage

- Manage your workload

4

Normalize

- Normalize discussing your mental health at work

5

Connect

- Connect with family and friends

6

Be

- Be an empathetic leader

Have A Little Hope

- **Goals**
 - Start small to feel you're spending time on meaningful tasks
- **Believe**
 - You can overcome obstacles to achieve those goals
- **Options**
 - Think outside the box
 - Brainstorm different ways of accomplishing these tasks
 - Try a new approach
- **Success** is energizing
 - Setting and accomplishing goals leads to hopefulness
- **Identify** an accountability partner



Advocating for You!

Through **Systems** Changes

“

**You do not rise to the
level of your goals.
You fall to the level of
your systems.**

JAMES CLEAR
Atomic Habits

dare to lead |  Spotify

It's Not ~~You~~ Me, It's ~~Me~~ You...

- Stop doing unnecessary work
- Think lean!
- Work smarter, not harder!
- Know your worth!
- DOWNTIME – 8 Types of Waste
- Getting Rid of Stupid Stuff (GROSS)
- De-implementation Checklist
- How could you be better rewarded for your work?
- Where do you need more autonomy?
- Are there opportunities to improve fairness & transparency?
- How can we change what is considered a “reasonable” workload?
- How can we promote a better sense of community?
- What do you need to remain authentic and true to your values?

8 Types of Waste – “DOWNTIME”

	<i>Definition</i>	<i>Healthcare example</i>
D	<i>Defects</i> Information, products, or services that are incomplete or inaccurate	Incorrect data entry
O	<i>Overproduction</i> Making more of something or making it earlier or faster than is needed	Multiple forms with the same information
W	<i>Waiting</i> Waiting for information, equipment, materials, parts, or people	Patients waiting for appointments, MD, visits, procedures
N	<i>Non-utilized intellect</i> Underutilizing people’s talents, skills, & knowledge	Not obtaining input from those closest to the work
T	<i>Transportation</i> Unnecessary movement of patients, materials, information, or equipment	Sending the patient here, there, and everywhere Moving items (e.g. lab specimens, supplies, reports needing signatures)
I	<i>Inventory</i> Accumulation of supplies, information, etc. beyond what is required	Expired supplies
M	<i>Motion</i> Excessive movement by you	Staff reaching, searching, back and forth
E	<i>Extra Processing</i> Any steps that do not add value to the customer	Doing activities two and three times

Minimize alerts

- Retain only those alerts with evidence of a favorable cost-benefit ratio

Simplify login

- Simplify and streamline login process, leveraging options like single sign-on, RFID proximity identification, bioidentification (fingerprint, facial recognition, etc.)

Extend time before auto-logout

- Consider extending time for workstation auto-logout
- Consider customizing workstation location and the security level to use patterns of the specific user

Decrease password-related burdens

- Consider extending the intervals for password reset requirements
- Help users create passwords that are both strong and easy to remember (i.e., by allowing special characters and spaces, and by allowing longer passwords that can be passphrases)
- Consider use of password keeper programs

Reduce clicks and hard-stops in ordering

- Reduce requirements for input of excessive clinical data prior to ordering a test
- Eliminate requirements to fill fields attesting to possible pregnancy in males or women over 60 years old

Eliminate requirements for password revalidation

- Identify ways to reduce unnecessary requirements for users to [re-enter username/password](#) when already signed in to EHR, to send prescriptions (Note: Organizations may choose to keep this requirement in place for opioid prescriptions.)

Reduce note-bloat

- Reduce links imbedded in visit note documentation templates that automatically pull in data from other parts of EHR contributing to “note bloat,” but adding little if any true clinical value



De-implementation checklist

In an effort to [reduce unintended burdens](#) for clinicians, health system leaders can consider *de-implementing* processes or requirements that add little or no value to patients and their care teams. Physicians themselves are often in the best position to recognize these unnecessary burdens in their day-to-day practice. The following list includes potential de-implementation actions to consider. Learn more on how to reduce the unnecessary daily burdens for physicians and clinicians at stepsforward.org.

Reduce inbox notifications

- Stop sending notifications for tests ordered that do not yet have results or have test results *not* ordered by the physician in question
- Stop sending notifications for reports generated by the recipient of the notification
- Eliminate multiple notifications of the same test result or consultation note
- Consider auto-release of normal and abnormal test results to the patient-facing portal with imbedded or linked patient-friendly explanations

Simplify order entry processes

- Optimize technology to auto-populate necessary discreet data fields if the information already exists in EHR (e.g., if medical assistant has completed a discreet field for “last menstrual period,” optimize your technology so no one has to reenter that data into the order for a pap smear)

Compliance

- Allow verbal orders in low-risk and in crisis situations as legally permitted**
- Reduce signature requirements**
 - Eliminate signature requirements for forms that do not legally require a physician signature
 - Eliminate order requirements for low-risk activities that do not legally require a physician signature (ear wash, fingerstick glucose, oximetry)
 - Consider eliminating “challenge questions” to electronically sign orders when the user already logged in and actively using the EHR
- Evaluate annual trainings and attestations**
 - Review current compliance training modules and consider removal of those that aren’t required by a regulatory agency or for which evidence of benefit is lacking
- Reduce attestations required daily or every time one logs in**
 - Eliminate requirements as allowed by state or federal requirements (i.e., for privacy protection attestation) that occur on a daily or every-time-one-logs-in basis (i.e., consider whether or not an annual attestation is sufficient)



Quality assurance/improvement

- Eliminate the rote ascertainment of learning style preference**
- Perform condition screens no more frequently than recommended**
 - Include a “grace period” of at least 30–50% of the guideline recommended time interval when constructing a performance measure from a clinical practice guideline

Example: If clinical practice guideline recommends annual screening for depression, then set performance measurement with an interval of performing this task within 18 months—otherwise staff will waste limited clinical resources screening more often than is required to meet the 365-day annual interval.

Key Players in a G.R.O.S.S. Initiative

- **IT:** EHR inefficiencies
- **Risk management and legal:** processes implemented to mitigate risk may not be useful
- **Compliance:** misunderstandings about regulatory requirements
- **HIM:** overinterpretation of requirements
- **Revenue Cycle:** misunderstandings requirements for accurate billing
- **Mandatory education:** irrelevant training requirements
- **Nursing leadership:** variable, documentation of nurse activities, rather than patient care provided.
- **Physician executive leadership:** medical executive committee requirements that create extra work
- **Specific departmental leadership:** specialty-specific requirements that create extra work
- **Laboratory services:** unnecessary clicks to accomplish appropriate ordering

G.R.O.S.S. Idea Submission Form:

Submit your idea:

As a:

_____ (your role, eg, physician, nurse, pharmacist, medical assistant)

Working at:

_____ (location, eg, clinic, hospital unit, Epic login department)

I would like to:

_____ (your goal)

So that:

_____ (the benefit of the change)

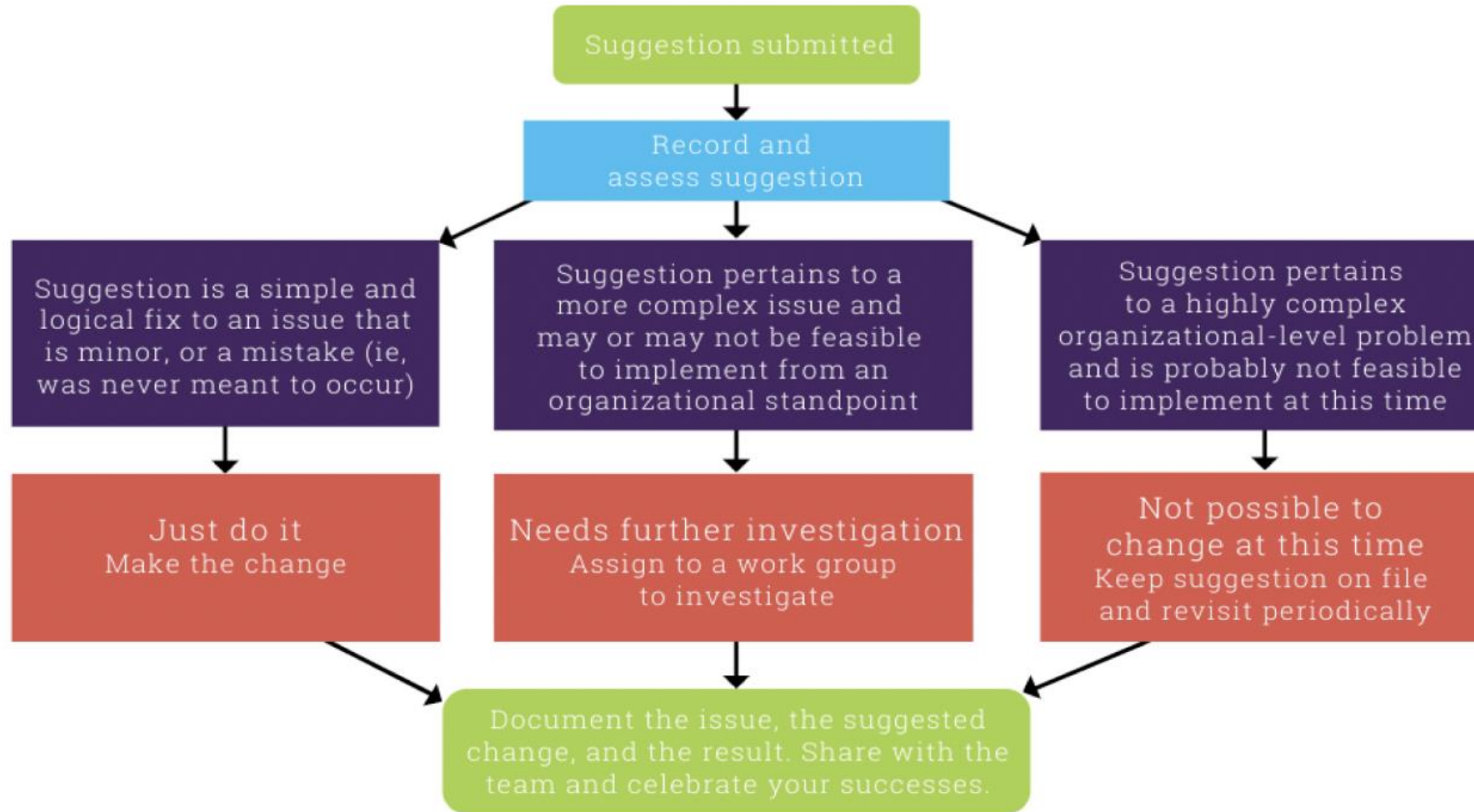
Name:

Email:

Phone:

Getting Rid of "Stupid Stuff" Decision Tree

Triage suggestions to determine appropriate next steps



Meeting Fatigue

- Is this meeting necessary?
 - Opportunity to bring team members together that you wouldn't have?
 - Use to make decisions that require an active conversation?
- If necessary, consider
 - Does it have to be a video call?
 - Is it longer than it needs to be?
 - Which attendees are absolutely essential?
 - Who could be left off the invite next time?
- Reduce one hourlong meeting to 45 minutes

Recognizing the Clinician in Distress

- Recent trauma experience
- Self-reported errors
- More medication errors
- Decreased adherence to best practices
- Changes in physical health, relationships, motivation to learn
- Disenchanted with demands and stresses of practice

What does burnout feel/look like?

- Jaded, cynical towards patients, colleagues, the system
- Exhaustion – physical, mental, emotional
- Difficulty getting up in the morning
- Like I have nothing left to give (home and/or work)
- Hypercritical of self and others
- Looking for a way out – Feeling trapped and antsy

Reaching Out to a Colleague in Distress

- Take your "doctor" hat off
- Be present and express concern
- Be persistent
- Be ready to listen
- **YOU COULD SAVE A LIFE!**

- <https://youtu.be/CVgdJu-xm5M>

Barriers to Seeking Help

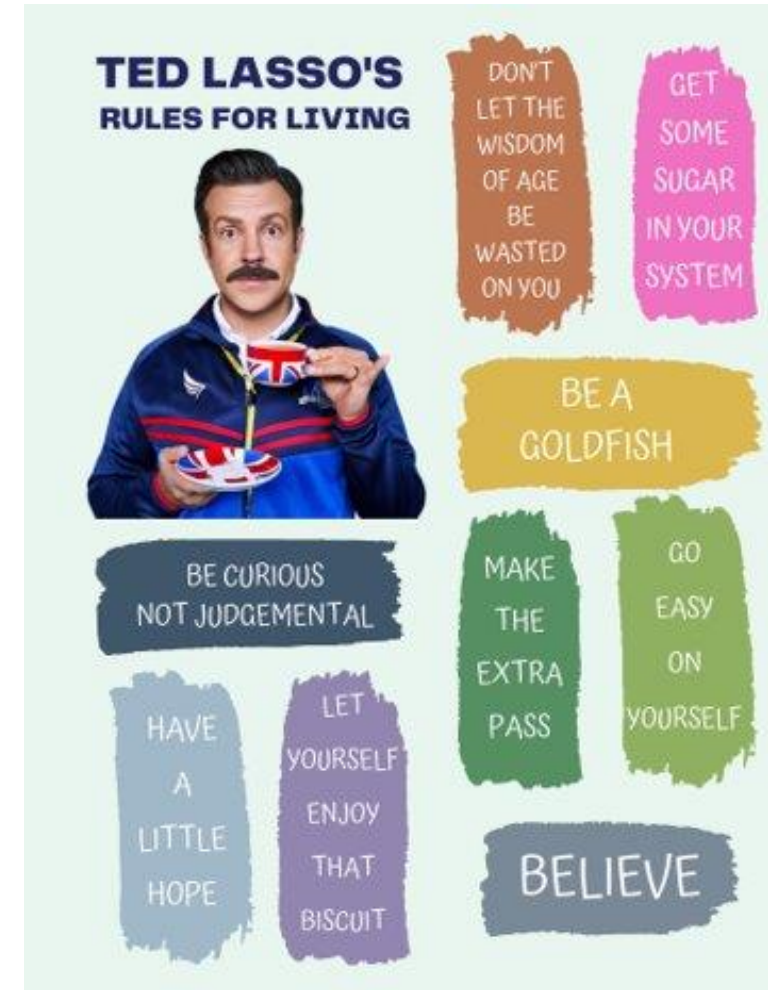
- Denial → 'I'm fine'
- Distortion → 'I'm the only one struggling'
- Defense → 'I'm worried about practice and license implications'
- Deference ==> Subordinate in a culture that frowns on weakness

Beyond Burned Out-A Call to Action

- No quick fix
- Start small
- Practical steps
- Work towards collective change
- Can't waste this crisis – we are finally paying attention!
- The time is now

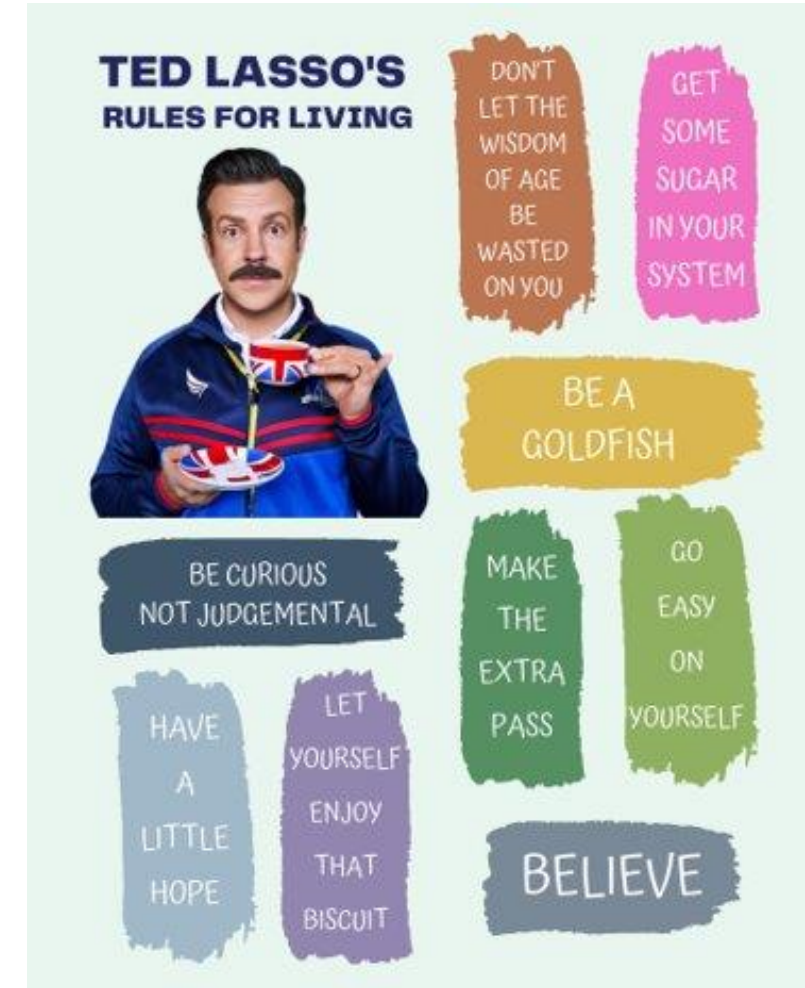
Leadership Lessons from Ted Lasso

- Put your ego aside
- Recognize when some techniques don't work
- Fix the little things first
- Find ample reasons to celebrate
- Empower others



Leadership Lessons from Ted Lasso

- Emphasize the role of team
- Kindness supports great leadership
- Everyone has a perspective to share
- Psychological safety
- Approach the unknown with humility
- Cultivate hope





Questions?

- dkhubbard@cmh.edu
- dkhubbard@gmail.com
- @HubDeMD

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Stephen Patrick, MD, MPH, MS, FAAP

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Children's Mercy
KANSAS CITY





BELIEVE

#1 Find an Outlet

- How do you relieve stress?
- Do you have a hobby?
- Mindfulness
- Primal survival needs
 - Safety
 - Reward
 - Connection

Tiny THE TRAUMA STEWARDSHIP INSTITUTE'S
SURVIVAL GUIDE


PROTECT YOUR MORNINGS
[or whenever you wake up]
less cortisol, more intentionality.


 **GO OUTSIDE**
[or look outside]
perspective, context +
something larger than this. 


BE ACTIVE
[avoid stagnation]
in body, mind, spirit.


CULTIVATE RELATIONSHIPS
those that are edifying + healthy.

NURTURE GRATITUDE
what is one thing, right now,
that is going well?


 **DETOX**
if navigating addictions,
be wise + safe
limit news + social media.

SPEND TIME WITH ANIMALS
↓ stress hormones, ↑ comfort. 


 **METABOLIZE ALL YOU ARE EXPERIENCING**
re-regulate your nervous
system.

SIMPLIFY 
[less is more]
be aware of decision
fatigue + cognitive overload.


ADMIRE ART
the gift of feeling transported.

 **LAUGH**
pure humor = a sustaining force.

**FOSTER HUMILITY
& EXTEND GRACE**
self-righteousness
+ hubris = unhelpful.

SLEEP 
to cleanse + repair brain + body.

CLARIFY INTENTIONS
how can i refrain from causing harm,
how can i contribute meaningfully?

BE REALISTIC + COMPASSIONATE
[with yourself]
be mindful of the quality of your
presence. it means so much
to others. 

© The Trauma Stewardship Institute 2020

#2 Be Present

- Enjoy the now
- Simplify
- Be intentional
- Metabolize what you are experiencing

CHANGE
HOW YOU
SEE, SEE
HOW YOU
CHANGE

POSITIVE
EXPOSURE

#3 Choose How to Respond

- There will be things out of your control
- What you **CAN** control is how you choose to respond



#4 You Are Not Your Career

- If you do what you love, you'll never work a day in your life..
 - True or False
- You are so much MORE
- Find meaning outside of work
- Invest in relationships
- Perfection vs “good enough”
- Don't forget to play and have fun!

#5 Find Your Why

- Realize your purpose*
- “To Do” List vs “To Be” List
- Define your personal mission and vision
- Define your ideal day
- Get off your But!

#6 Be Authentic and True to Yourself

- "You will be too much for some people, those are not your people."

--- Laurie Baedke

- "BLAD"

--- Dr. Tom George



#7 You Are Never Stuck

- You are CEO of your own happiness
- Determine if you need to make changes
- Identify what energizes/drains you
- You **ALWAYS** have a choice to leave or stay

#8 Work-Life ~~Balance~~ Integration

- If you are struggling to find work-life balance, you are
- Decide what stressors can be modified
- Build your resilience through recovery
- Manageable workload
- Schedule cognitive breaks
- Use technology
- Eat lunch ...
- Spend time with your colleagues ...

#9 Create Boundaries

- No. This is a complete sentence
- Saying “no” is a skill
- Every “yes” is a “no” to something else
- It's ok to **NOT** be all things to all people
- Pause
- Who is asking me to do this?
- Will this take time away from my core work?
- Will this take time away from my family?
- Will this advance my career?
- Increased support and/or compensation?

#10 You Are Enough

- Believe you are worth it
- Don't let people "should" all over you
- Cultivate compassion
- Get creative, how can you spend more time (> 20%) doing something you are passionate about

**“NO MATTER WHAT GETS DONE AND HOW MUCH IS LEFT UNDONE,
I AM ENOUGH.
IT’S GOING TO BED AT NIGHT THINKING, YES, I AM IMPERFECT
AND VULNERABLE
AND SOMETIMES AFRAID,
BUT THAT DOESN’T CHANGE THE TRUTH
THAT I AM ALSO BRAVE AND WORTHY
OF LOVE AND BELONGING.”**

BRENÉ BROWN

THE GIFTS OF IMPERFECTION
10th Anniversary Edition

Pro-QOL Survey

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

COMPASSION SATISFACTION AND COMPASSION FATIGUE

(PROQOL) VERSION 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some-questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never

2=Rarely

3=Sometimes

4=Often

5=Very Often

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1=Never

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- _____ 1. I am happy.
- _____ 2. I am preoccupied with more than one person I *[help]*.
- _____ 3. I get satisfaction from being able to *[help]* people.
- _____ 4. I feel connected to others.
- _____ 5. I jump or am startled by unexpected sounds.
- _____ 6. I feel invigorated after working with those I *[help]*.
- _____ 7. I find it difficult to separate my personal life from my life as a *[helper]*.
- _____ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I *[help]*.
- _____ 9. I think that I might have been affected by the traumatic stress of those I *[help]*.
- _____ 10. I feel trapped by my job as a *[helper]*.

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11. Because of my *[helping]*, I have felt "on edge" about various things.
12. I like my work as a *[helper]*.
13. I feel depressed because of the traumatic experiences of the people I *[help]*.
14. I feel as though I am experiencing the trauma of someone I have *[helped]*.
15. I have beliefs that sustain me.
16. I am pleased with how I am able to keep up with *[helping]* techniques and protocols.
17. I am the person I always wanted to be.
18. My work makes me feel satisfied.
19. I feel worn out because of my work as a *[helper]*.
20. I have happy thoughts and feelings about those I *[help]* and how I could help them.

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- _____ 21. I feel overwhelmed because my case [work] load seems endless.
- _____ 22. I believe I can make a difference through my work.
- _____ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
- _____ 24. I am proud of what I can do to [help].
- _____ 25. As a result of my [helping], I have intrusive, frightening thoughts.
- _____ 26. I feel "bogged down" by the system.
- _____ 27. I have thoughts that I am a "success" as a [helper].
- _____ 28. I can't recall important parts of my work with trauma victims.
- _____ 29. I am a very caring person.
- _____ 30. I am happy that I chose to do this work.

Pro-QOL Survey Scoring

YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on **each section**, total the questions listed on the left and then find your score in the table on the right of the section.

Compassion Satisfaction Scale

Copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

- 3. _____
- 6. _____
- 12. _____
- 16. _____
- 18. _____
- 20. _____
- 22. _____
- 24. _____
- 27. _____
- 30. _____

Total: _____

The sum of my Compassion Satisfaction questions is	And my Compassion Satisfaction level is
22 or less	Low
Between 23 and 41	Moderate
42 or more	High

Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are “reverse scored.” If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. “I am happy” tells us more about

- *1. _____ = _____
- *4. _____ = _____
- 8. _____
- 10. _____
- *15. _____ = _____
- *17. _____ = _____
- 19. _____
- 21. _____
- 26. _____
- *29. _____ = _____

Total: _____

The sum of my Burnout Questions is	And my Burnout level is
22 or less	Low
Between 23 and 41	Moderate
42 or more	High

You Wrote	Change to
	5
2	4
3	3
4	2
5	1

the effects of helping when you are *not* happy so you reverse the score

Secondary Traumatic Stress Scale

Just like you did on Compassion Satisfaction, copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

- 2. _____
- 5. _____
- 7. _____
- 9. _____
- 11. _____
- 13. _____
- 14. _____
- 23. _____
- 25. _____
- 28. _____

Total: _____

The sum of my Secondary Trauma questions is	And my Secondary Traumatic Stress level is
22 or less	Low
Between 23 and 41	Moderate
42 or more	High

Compassion Satisfaction _____

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 23, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job. (Alpha scale reliability 0.88)

Burnout _____

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

If your score is below 23, this probably reflects positive feelings about your ability to be effective in your work. If you score above 41, you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern. (Alpha scale reliability 0.75)

Secondary Traumatic Stress _____

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other’s trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others’ traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

If your score is above 41, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional. (Alpha scale reliability 0.81)