#### **Resident Wellness Initiative at BFM**

At Broadway Family Medicine we strive to promote wellness for all of our providers and staff. We routinely emphasize an ongoing commitment to wellness and resilience for physicians. This document summarizes the ways in which we do this for our residents.



Resilience curriculum

- Orientation sessions on sleep deprivation, fatigue, recognizing self-impairment. Create personal wellness plan which is shared with faculty advisor and reviewed at quarterly reviews
- Monthly meeting from 4-6 pm for the PGY1 residents (residents blocked from clinic after 3:30 pm and excused from any other responsibilities). The meetings provide a safe forum for peer support, allowing residents to share vulnerabilities, support and share with one another. It also is an opportunity for faculty members to share their challenges and effective ways of maintaining wellness, thereby normalizing that being a physician can be challenging and serving as role models for healthy functioning. The PGY1 meetings are facilitated by a faculty member for the first hour, then there is time for socializing/fellowship.
- The PGY1 resilience topics may include:
  - 1 Intro/team building
  - 2 Self-discovery
  - 3 Imposter syndrome
  - 4 Challenging patient encounters
  - 5 Boundaries
  - 6 Physicians as patients
  - 7 Trauma stewardship
  - 8 Perfectionism
  - 9 Reflection on values

- 10 Empathy & moral injury
- 11 Clinic resilience tools
- 12 Wrap up
- PGY2 resilience sessions every other month, focusing on self-advocacy. Topics may include:
  - Recovering after making a mistake
  - Interrupting microaggressions
  - o Mentoring
  - Giving and receiving feedback
  - Revisiting trauma stewardship
  - Revisit professionalism
- PGY3 resilience curriculum includes sessions every other month facilitated by a faculty member. Topics may include:
  - a 'check-in' session to share the skills/approaches/techniques for wellness which they've been working on
  - sharing reflections on challenging interactions
  - revisit imposter syndrome
  - o transition to practice and reflection on residency
  - o revisit boundaries
- Monthly didactics topic on behavioral health
- Intranet wellness page with list of therapists recommended by past residents; online support references; self-assessment tools

#### Resident Wellness Advocates

Originated by three residents in 2017, the Resident Wellness Advocate program involves third-year residents serving as wellness advocates for all trainees at our clinic. Advocates reach out to trainees to offer peer support regarding both work and life stressors. The purpose is to give trainees an advocate, a sounding board, and an emergency contact. Advocates are intended to be safe, nonjudgmental people who can provide emotional support, recommend resources, help with wellness plans, and help trainees reach out to faculty or staff if needed. Information shared with advocates is treated confidentially and not shared with faculty (unless there are safety issues).

Individual feedback opportunities (to provide and receive feedback)

- Quarterly review with faculty advisor
- Biannual meeting with program director
- Feedback session with hospital rounding faculty at end of each week on FMS
- Mentor meetings as desired with faculty
- "Open door" policy with program director and program coordinator

## Group feedback opportunities (to provide feedback)

- Weekly "Res Time" at didactics with the chief residents
- Monthly "Res-Fac Meeting" with residents and faculty, facilitated by lead residents
- Annual Focus group department representatives come to the program to gather feedback from the residents about the program and the curriculum. This information is provided anonymously (grouped by resident year) to the faculty
- Annual Program Evaluation all residents and faculty are asked to provide feedback to the program on an annual basis. This feedback is submitted anonymously and is incorporated into the annual program review completed by the Program Evaluation Committee (which includes a resident) to ensure we continue to support our residents and remain compliant with ACGME requirements

## Clinic support

- Intern orientation sessions on professionalism, EHR tips
- Two Integrated Clinical Skills rotations during PGY1 year that focus on clinic efficiency, workflow and process/policy awareness
- Biannual individual clinic coaching sessions to assist with clinic workflow
- Practice Management rotation early on PGY3 year to offer support on seeking a job, career opportunities, and preparation for the next step after residency
- Dinner at clinic in the fall with recent graduates in attendance to talk about their job search and their transition from residency to practice

# Sick/crisis support

Clear back-up system in place at all times if a resident is unable to carry out their responsibilities; accessible 24 hours a day, 365 days a year

Clinic-wide team building/support activities

- Annual June picnic (clinic is closed for an afternoon and all providers and staff attend the picnic)
- Periodic clinic potlucks
- Organized volunteer involvement in community events and organizations such as The Ladder, Open Streets, Avenues for Youth teen shelter

# Resident team building/support activities

- Annual resident overnight retreat in the spring
- PGY2 and PGY3 orientation each June prior to graduating to next class
- Annual PGY1 dinner at the program director's home each June
- Journal club (PubMed)

#### UMN GME support

- Residency Assistance Program
- Availability of evaluation for disability and accommodations if needed
- DIO Dr. Susan Culican and others in the U of MN GME office are available at all times for urgent resident needs

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