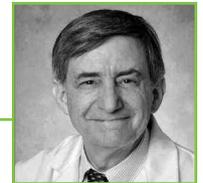


The Leadership Forum

Words of Wisdom

The ACLGIM Work-Life and Wellness Survey: Understanding our Work Conditions, Making Them Better

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It started as a hum after a talk at the 2013 ACLGIM Summit. It then developed into a buzz with support by SGIM President Bill Moran, ACLGIM COO Kay Ovington, and ACLGIM Presidents Tracie Collins and Stewart Babbott. It gained momentum with support from Russell Phillips and Harvard Medical School's Center for Primary Care, and culminated in a partnership between Hennepin County Medical Center's Institute for Professional Work-life and ACLGIM to field a national survey on work-life and wellness in GIM in 2015.

Many of us know the serious challenges of practicing in GIM. Time pressure because of short visits, complex patients, and documentation requirements are often seen as the largest problems GIM faces. Other problems include chaotic environments, lack of control of the workplace, and a lack of

clarity in the values of leadership and how those values relate to our daily workloads. For many of us, the workday never seems to end: after a 10- to 12-hour day, 2-3 hours of electronic medical record (EMR) work must be done at home. These work conditions result in high stress, burnout, and turnover, and portend poorly for the future of our discipline. ACLGIM leaders felt it was time to measure and address the conditions to improve the attractiveness and sustainability of our profession.

The ACLGIM Work-Life and Wellness (WLW) project began in the winter of 2015, with a survey of 15 GIM divisions, and concluded this fall with a second wave of 7 divisions. Close to 1000 general internists, both primary care and hospital-based, were surveyed in the two waves, with a combined response rate over 50%.

The 10-item mini Z survey (for Zero Burnout Program) was used to measure key work-life factors (stress, burnout, chaos, control, values, teamwork, time pressure, and EMR work at home), as well as stressors and solutions. Data were returned to division chiefs through a "chief's packet" containing their own division's data compared with national summary data, a list of potential interventions for their specific stressors, and suggestions for leveraging data with department chairs for resources, flexibility, and understanding.

Next steps will include preparing an abstract for the annual SGIM meetings and writing a manuscript for submission. These products will provide evidence for policy recommendations to make GIM a rewarding and sustainable career for all of us and for general internists for years to come.