

4 Physician Well-Being Strategies During COVID-19

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What Does It Mean?

As physicians on the front lines continue to combat the global pandemic, ensuring their physical and mental well-being is an increasing priority for healthcare organizations. It is important for organizations to help physicians cover their basic needs of food, accommodation, transportation, personal safety, and child and elder care if possible. Several strategies that are being employed to support physicians include redistributing workloads to reduce their burden, developing respite plans, offering incentives, addressing their mental health concerns, and designating a room for them to use to decompress.

Recognizing the need to address the physical, emotional, and mental well-being of their physicians as they continue to deal with the COVID-19 pandemic, several organizations are instituting interventions to help cover necessities like food and child care and reduce their stress and anxiety levels. The following are a few of the main strategies that organizations are employing to support physicians and their families during this crisis.

1 | Redistributing Workloads

With an increased number of COVID-19 patients requiring the care of a physician, this role in particular can feel overwhelmed. Redistributing workloads is thus one strategy that can be used to reduce physician burden, while continuing to provide effective patient care. Several strategies are being employed by organizations to achieve this redistribution, such as assigning physicians such as dermatologists and orthopedic surgeons to the ED, hiring medical students ready for graduation to hospitals, and redeploying other staff members as needed.

For instance, Ochsner Health is recruiting upcoming graduates into practice and is encouraging the states it operates in to issue temporary emergency licenses to physicians and respiratory therapists to ease physician workloads ([click here](#) for more information). Medical students are also being used in other capacities, such as triaging patients calling hospital hotlines, assisting indirect patient outreach by refilling medications, and helping patient intake at drive-thru testing centers ([click here](#) for more information).

Additionally, tools have been developed to assist organizations in determining workforce needs and redeploying clinical teams. For instance, a COVID-19 staffing tool was created out of a collaboration between Vanderbilt University Medical Center, Michigan Medicine's Center for Surgical Training and Research and Department of Learning Health Sciences, and the Procedural Learning and Safety Collaborative. After entering various information specific to each facility—such as total number of COVID-19 inpatients and the number of COVID-19 patients in the ICU—this online tool will project potential staffing needs and offer guidance to organizations to determine their response to adjusted needs.



Featured Resource: COVID Staffing Project Tool

[Click here to access the tool at covidstaffing.org](https://covidstaffing.org)

2 | Offering Incentives and Pay Protection

As healthcare institutions are facing physician burnout due to COVID-19, a few organizations are offering incentives to staff to show the front-line providers appreciation for their service. For example, Texas Children’s Hospital has awarded a special bonus to all its employees for their extensive support in delivering care during this pandemic ([click here](#) for more information). Additionally, with some roles in hospitals reporting reduced working hours due to fewer ED patients, hospital admissions, or elective surgeries, health systems are also developing pay protection plans to ensure their employees continue to receive their base pay ([click here](#) for more information).

3 | Addressing Psychosocial and Mental Health Concerns

Due to the obvious stress and anxiety caused by COVID-19, organizations are developing programs aimed at addressing the mental health concerns of their staff. They are also encouraging physicians to evaluate their psychosocial needs and connect with experts when needed. At Mount Sinai Health System, supportive counseling and several self-care activities are being extended to physicians, with 24/7 mental health crisis response teams also available for additional support ([click here](#) for more information).

Key medical associations and societies have gathered tactics, tools, and resources to help physicians reduce stress. For instance, several resources addressing the well-being of physicians and their families were compiled by the American Academy of Family Physicians (AAFP), some of which are highlighted below for reference.

Example Resources for Physician Stress Reduction

Source: AAFP (2020)

- PeerRxMed’s free peer-to-peer support community ([click here](#))
- AAFP’s well-being portal ([click here](#))
- Headspace’s meditation app, free through 2020 to healthcare professionals ([click here](#))
- Ten Percent Happier’s toolkit of podcasts and guided meditations ([click here](#))
- Insight Timer’s free meditations ([click here](#))
- Yoga With Adrienne’s free YouTube yoga channel ([click here](#))
- YMCA free workout videos ([click here](#))

Activities such as medication, physical activity, and connections with peers are widely seen as ways to help to reduce anxiety—all of which can help physicians during this stressful time.

Some organizations are designating certain rooms in their facilities as “reset rooms” where providers can remove themselves from their work and destress. Hennepin County Medical Center, for example, first opened its “reset room” in 2015. Providers can go and use the room to make a phone call, eat lunch, or process a difficult encounter. The room comprises a desk, two chairs, a computer, and a small refrigerator filled with bottled water. It includes soft lighting, flameless candles, a sound machine, and a yoga mat, as well as books and flyers on destressing, what it is like to practice medicine, and deep-breathing meditation. Given the highly infectious nature of COVID-19, cleaning and disinfecting the space regularly is important to ensure the room can be utilized without worry by the people on the front lines who need some respite.



Featured Resource: Hennepin County Medical Center's Multifaceted Approach to Counter Provider Burnout

[Click here to access full version on our member portal](#)

Additionally, the UCSF Department of Psychiatry is conducting an ongoing webinar series for healthcare providers to help address their emotional wellness and reduce stress. The series will discuss topics such as healing moral distress and outrage, strategies to deal with acute stress, compassion-based care, and resilience to traumatic stress.



Featured Resource: UCSF Department of Psychiatry's Webinar Series on Emotional Well-Being for Healthcare Providers

[Click here to register for the webinar on the UCSF website](#)

4 | Covering Basic Needs

Given that physicians' priorities are fully focused on COVID-19, some are not able to ensure that even basic needs are met for themselves or their families. As such, supporting the basic needs of providers on the front lines is crucial to reducing stress. Recognizing the significance of this strategy, several organizations are working on interventions to help meet the needs of food, child and elder care, transportation, and personal safety. For instance, Mount Sinai Health System has coordinated food donations for front-line providers, started to offer low-cost or free additional meal options to providers, and established a volunteer service to assist providers with personal tasks such as grocery shopping, child care, or pet care ([click here](#) for more information). Off-site accommodations are also being offered to physicians in need of an overnight or short-term stay.

A unique physician concierge program has also been introduced by MedStar Health, which enables physicians to connect with guide care concierges trained to help physicians navigate through any emotional, social, physical, financial, or legal services required during this crisis ([click here](#) for more information).

Further, to ensure physicians are given some time away from the bedside, some organizations or private practices are introducing changes to physicians' schedules so that they are given respite from caring for patients at the bedside. For instance, one private practice has providers work the inpatient and outpatient units for two weeks at a time, including weekends. Then, following the two weeks, they are asked to complete administrative work such as updates to clinical notes, billing, and charts from the comfort of their office or at home.

Last, in effort to provide respite to clinicians, providers, and healthcare facilities participating in the Medicare quality reporting programs, CMS has also announced exceptions from their reporting requirements, thereby allowing physicians to direct their time and attention to patient care ([click here](#) for more information).

Require more assistance during the COVID-19 pandemic? HBI's research team is here to help. Send a message to contact@hbinsights.com with your questions!

About the Analysts

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Leah Bilitz drives the direction of research, events, social media, and deliverables within the HBI Cost & Quality Academy for a diverse audience that ranges from front-line providers to C-suite. Leah joined HBI in 2014 and has served as a research analyst, team lead, and principal analyst.

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COVID-19 is an ongoing situation and organizations' processes are changing daily to adapt to various needs during this crisis. As such, this information is up-to-date as of April 21, 2020. HBI is continually monitoring the situation and updating material as we gather additional information. While HBI has attempted to ensure the accuracy of research provided in this document, the information has been obtained from numerous resources. Therefore, HBI cannot guarantee its accuracy and is not liable for any claims or losses that arise from errors or omissions within this document.