

Recent statistics on clinician well-being paint an alarming picture: more medical professionals are suffering every day from the effects of burnout, depression, and other dimensions of workplace distress.

Along with threatening overall well-being, professional fulfillment, and the quality of patient care, distress is also leading to the devastating consequence of clinician suicide.



Over 400 clinicians in the U.S. die of suicide each year related to burnout¹



U.S. physicians have one of the **highest rates of suicide** of any profession²



Suicide is the **2nd leading cause of death** among resident trainees in the U.S.³



Nurses & physicians at a high level of distress have a **2X higher risk** of developing suicidal ideation⁴

Address the Distress

It's clear that effective mental health support must be prioritized to protect clinician lives. In the recent study "Physician Suicide: A Call To Action," researchers detail the path institutions must take:

*"The actions of individual physicians are insufficient to prevent burnout, depression, and suicide. Changing the stoic culture of medicine will require top-down efforts. The first step is acknowledging and assessing the problem. From there, hospitals and physician workplaces can implement changes to strengthen the physician community."*²

The first step is acknowledging and assessing the problem.

As studies continue to highlight the dire need for this support, healthcare organizations are implementing systemic interventions to reduce suicidal ideation and other associated risk factors of distress. One such intervention medical leaders are turning to is the Well-Being Index, the **comprehensive self-assessment tool** invented by Mayo Clinic, to:



Measure 6 dimensions of distress & well-being including suicidal ideation



Provide targeted resources to improve clinician mental health



Foster a workplace culture of wellness & reduce stigma of seeking help



Track progress over time and assess the efficacy of wellness efforts

Assessing Risk and Providing Support: A Well-Being Index Case Study on Reducing Clinician Suicidal Ideation

Wellness leaders within a regional health group (kept anonymous to protect confidentiality) began to sense a decline in the well-being of their staff. With over 800 physicians, nurse practitioners, and physician assistants practicing at over 240 locations, leadership knew they had to increase efforts to protect their employees from the alarming trend of clinician burnout.

Committed to staff and patient well-being, leadership established a number of goals to guide their efforts. In addition to maximizing fulfillment and identifying and correcting systematic processes that were driving distress, they also set out to make sure none of their team members or colleagues would die of suicide.

To help achieve these vital goals, they turned to the Well-Being Index.

After anonymously assessing the distress levels of their clinicians with the validated tool, they focused on utilizing the data to its fullest potential. Along with gathering a general baseline measurement, the deidentified aggregate reporting also showed leaders that there were individuals within the organizations who were at a high risk of suicidal ideation. From these new insights, they were able to immediately implement targeted resources specifically aimed at reducing the likelihood of tragedy, including a forum and discussion about suicide prevention.

In addition to these resources, other proactive measures were put in place to:

- Normalize conversation surrounding mental health
- Remove the stigma of seeking help and utilizing resources
- Increase awareness and discussion regarding suicide

Among other key indications of progress, such as improved well-being scores and an increased meaning in work reported by staff, their efforts to support employee mental health have successfully resulted in no clinician suicides to date.

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Read the full case study and see other tactics employed by the health group at:

<https://www.mywellbeingindex.org/case-study/regional-health>.

NOTE

The Well-Being Index is an assessment tool that calculates relative risk based on validated data; it is not a diagnostic tool. The Well-Being Index does not and cannot diagnose any condition or recommend a specific treatment.

Among other dimensions of distress, the Well-Being Index assesses the risk level of an individual developing suicidal ideation relative to all of those who have completed the assessment based on the Well-Being Index validation surveys. An assessment result displaying a high risk of suicidal ideation indicates that the participant is comparatively at a higher risk of developing suicidal thoughts based on their assessment but may not be currently experiencing that dimension of distress.

Risk factors have been determined for each occupational group through occupation-specific validation studies, which you can find at:

<https://www.mywellbeingindex.org/about#Validation>

Citations

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4. Well-Being Index. "State of Well-Being 2022-2023 Report: Well-Being Index." <https://www.mywellbeingindex.org/state-of-well-being-2022-2023-report>.