DGIM Project Summary

Name of Project: Pilot Stress Reduction and Compassion Training for Residents in Internal Medicine

Investigator(s). (Include phone numbers and email address, indicate PI and primary contact)
PI (primary contact): Eve Ekman, PhD: eve.ekman@ucsf.edu
Co-PI: Shelley Adler, PhD: shelley.adler@ucsf.edu

Research question(s):
To assess the impact of a longitudinal stress reduction and empathy enhancement curriculum for internal medicine residents on their attitudes and skills and their patient’s experience of care.

Brief Background/Significance:
Residents frequently experience high levels of workplace stress due to the emotional demands of working with distressed patients and families. Ongoing distress without effective coping strategies for maintaining adaptive levels of compassion and empathy can lead to burnout. Burnout among residents is associated with increased likelihood of medical errors, reduced quality of care, poorer communication with patients, and lower patient satisfaction with care.

The primary goal of this project is to pilot test a scalable emotion regulation, compassion and mindfulness skills training with the aim of equipping residents with tools to cope with work stress, sustain adaptive empathy, and reduce the likelihood of burnout. The curriculum is adapted from the evidenced-based Cultivating Emotional Balance (CEB) program adapted by Dr. Ekman specifically for human service providers. CEB is an emotion skills, compassion and mindfulness meditation training designed to improve emotional regulation, provide stress reduction practices and develop a sustainable emotional wellbeing.

This pilot for residents will provide an opportunity to assess the value of an abbreviated version of CEB to support the overall wellbeing of residents and whether this has an impact on patient care.

Inclusion/exclusion criteria (list)
Inclusion:
1) being a second or third year primary care internal medicine resident in the division of general internal medicine residency program
2) or being a patient receiving care from a second or third year primary care resident in the division of general internal medicine residency program

Exclusion:
1) Not currently participating as a second or third year primary care internal medicine residency at UCSF
2) or not receiving care from a resident in this program.

Method of contact/recruitment (be specific)
Patients seen by residents will be approached by a researcher in the waiting room of the clinic after the patient’s clinic visit has been completed and be invited to participate.

Benefits/burden for participants (clearly identify potential for harm)
Patients will be provided with a $10 Starbucks gift card for participating. Potential harm would be feeling uncomfortable being asked about their provider’s empathy.

Any benefits or burden to DGIM practitioners?
Residents will be provided with the patient feedback if the resident wishes to receive it.

Timeline for recruitment (projected start and stop dates)
September 2015-June 2015

Funding source
Innovations for Funding in Medical Education, UCSF Academy of Medical Educator

Potential for DGIM collaborators? (We encourage DGIM resident and fellow involvement in particular)
Ryan Laponis, MD

Do you agree to notify us when recruitment is completed?
Yes

Date form completed:
8/26/15