

# A Targeted Feedback System to Identify and Mitigate Irritations to Improve Regional Anesthesiologist Well-Being

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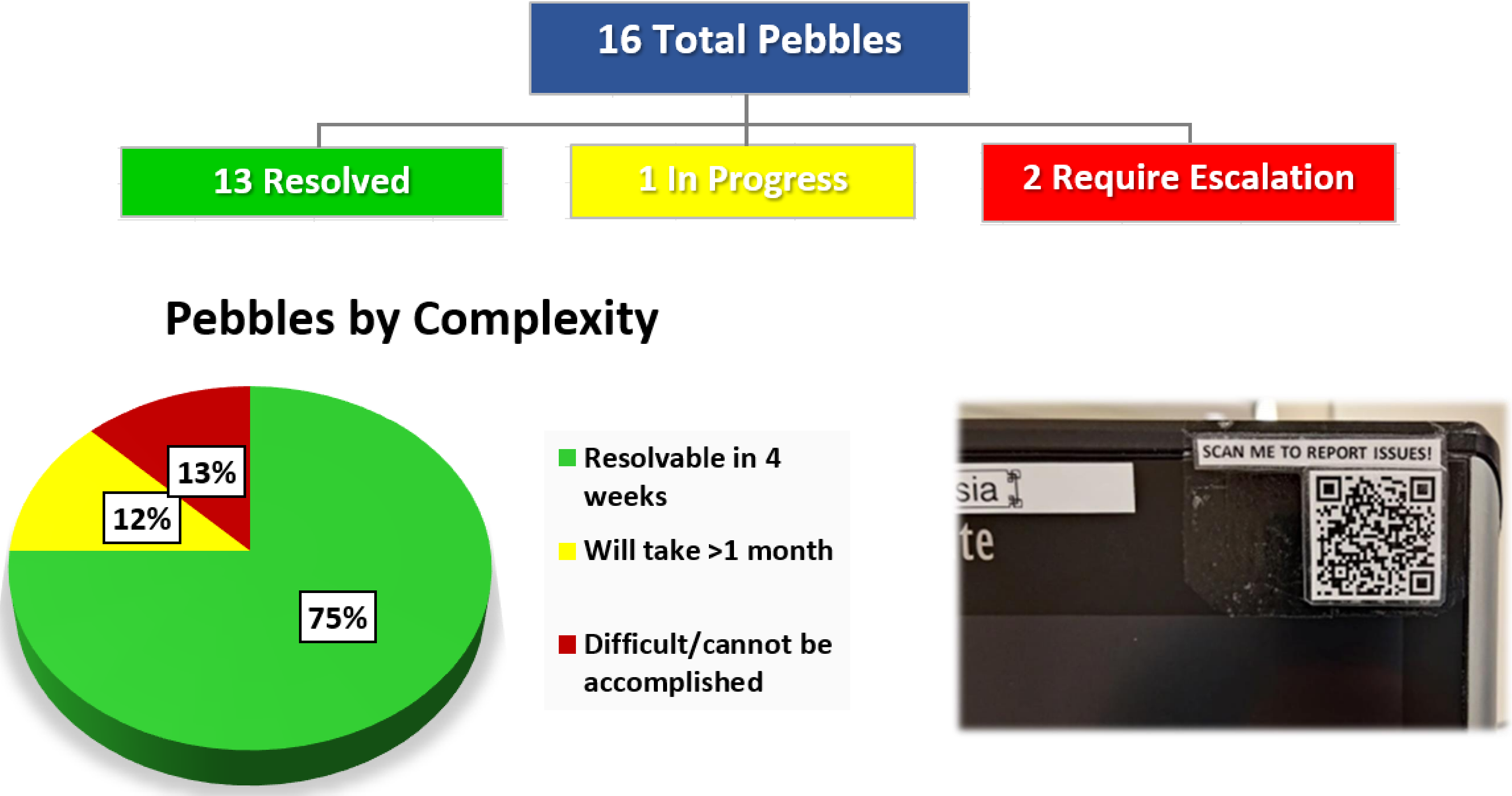
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## Introduction

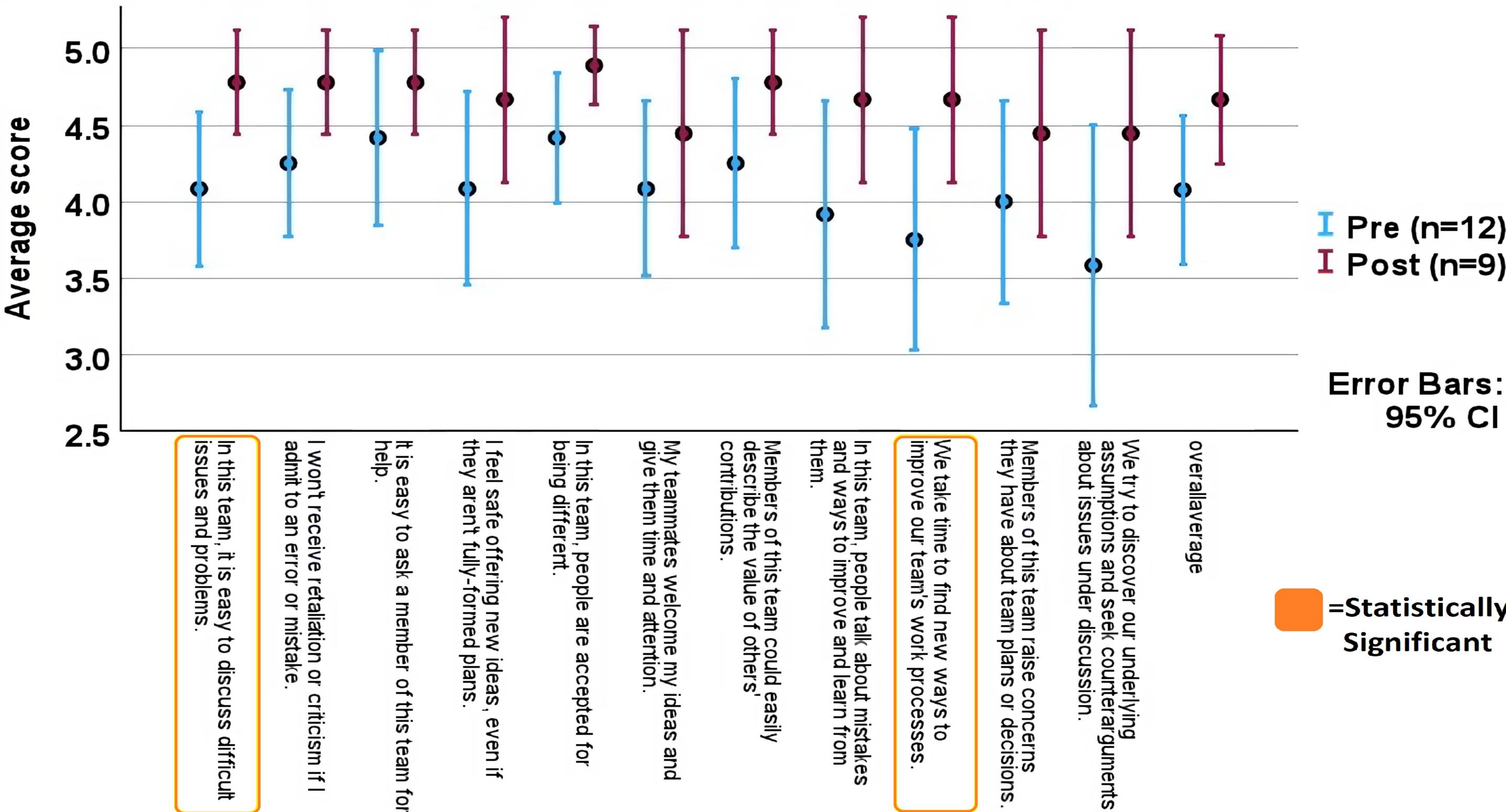
- Physician burnout and its correlates negatively affect health care delivery nearly comprehensively with ramifications affecting both providers and patients<sup>3</sup>.
- “Pebble projects<sup>1</sup>” attempt to attenuate burnout at its roots by addressing workplace annoyances that may seem minor in isolation but cumulatively are consequential.
- We designed a system to collect and stratify areas for provider experience improvement for a regional anesthesia and acute pain service at a busy academic medical center.
- Primary aim: to develop & evaluate a system that identifies and addresses “pebbles” that may contribute to regional anesthesia personnel burnout.

## Methods

- Scannable QR code labels were placed on ultrasound machines in the perioperative units. The QR codes allowed users to report their pebbles & propose solutions.
- Collected pebbles were evaluated and categorized by their anticipated timeframe and perceived ease of intervention.
- Solutions were subsequently implemented and broadcast.
- Analysis of the collected pebbles helped to identify root causes and the process effectiveness.
- An 11-question psychological safety assessment<sup>2</sup> was applied upon initiation and completion of the project to analyze changes in psychological safety and well-being of the regional team.



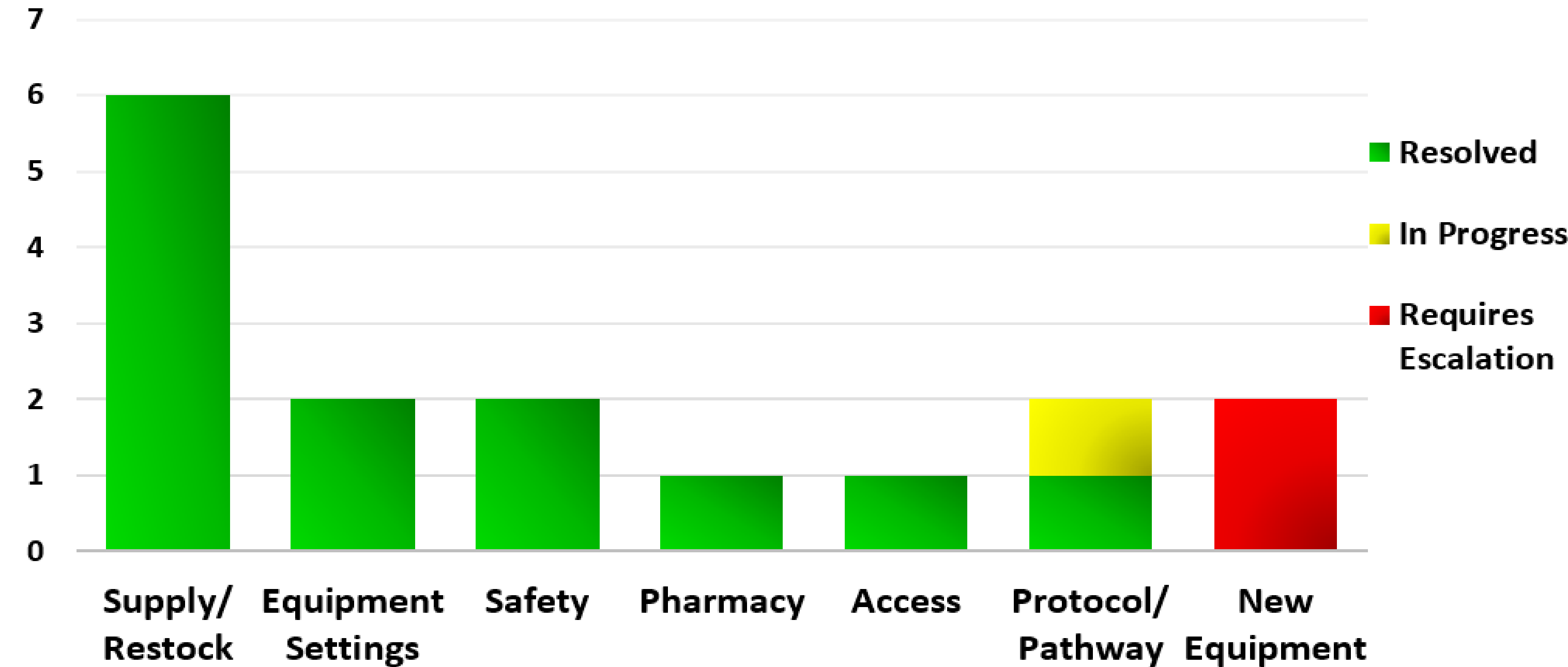
## Regional Team Well-Being Improvement



## Results

- Over 8 weeks, 81% of identified pebbles were solved.
- Most issues were equipment, policy, or environment-related.

### Category of Pebbles



## Discussion

- By streamlining a process for provider experience improvement, we were able to clearly define simple workplace problems and identify straightforward solutions.
- Ultimately: We demonstrate an effective way to enhance provider experience.
- The successful uptake of this project highlights the potential impact of basic measures in improving clinical processes and provider experience.

## References

- A. and Berg, S. (2019) *Fix the 'pebble in the shoe' problems to cut physician burnout*, American Medical Association. Available at: <https://www.ama-assn.org/practice-management/physician-health/fix-pebble-shoe-problems-cut-physician-burnout> (Accessed: 21 February 2024).
- Psychological Safety and Learning Behavior in Work Teams<sup>2</sup> (Amy Edmondson, 1999, Administrative Science Quarterly 44 (2): 350-383)
- West CP, Dyrbye LN, Shanafelt TD. Physician burnout: contributors, consequences and solutions. J Intern Med. 2018;283(6):516-529. doi:10.1111/joim.127523. Afonso AM, Cadwell JB, Staffa SJ, Sinskey JL, Vinson AE. U.S. Attending Anesthesiologist Burnout in the Postpandemic Era. Anesthesiology. 2024 Jan 1;140(1):38-51. doi: 10.1097/ALN.0000000000004784. PMID: 37930155.