

ENHANCING STAFF WELLBEING:

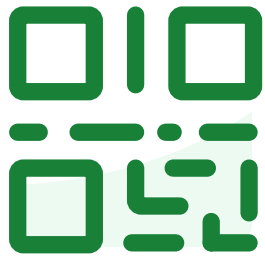
UTILIZING STAFF CONSULTATION STRATEGIES TO DECREASE BURNOUT
AND IMPROVE EMPLOYEE ENGAGEMENT

Emily Gallagher McAnany Ph.D. & Alexandra Gallagher Psy. D.

WEBINAR OBJECTIVES

- Review the literature regarding staff wellbeing
- Learn about strategies for improving staff wellbeing and decrease staff burnout
- Evaluate staff wellbeing and burnout in your setting
- Review a case study of DBT consultation to improve wellbeing

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CURRENT WORK PLACE STATISTICS

- **76% of U.S. workers reported at least one symptom of a mental health condition.**
Source: MindShare Partners' 2021 Mental Health at Work Report
- **84% of respondents said their workplace conditions had contributed to at least one mental health challenge.**
Source: MindShare Partners' 2021 Mental Health at Work Report
- **81% of workers reported that they will be looking for workplaces that support mental health in the future.**
Source: APA's 2022 Work and Well-being Survey results

2021 Mental Health at Work Report | Mind Share Partners

Stressed? Here's how to engage your five senses to beat work worries

Story by Perri Ormont Blumberg • 1d • 🕒 5 min read

[U.S. Surgeon General Releases New Framework for Mental Health & Well-Being in the Workplace | HHS.gov](#)

[2023 Work in America Survey: Workplaces as engines of psychological health and well-being \(apa.org\)](#)

WHAT HAVE YOUR STAFF SHARED ABOUT WELLBEING AND BURNOUT?

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**What have your staff
shared about
wellbeing and
burnout?**

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WHAT IS STAFF WELLBEING?

The state of health, happiness, and fulfillment in both work and personal life

It includes:

- **Physical Health**
- **Mental & Emotional Health**
- **Job Satisfaction**
- **Work-Life Balance**
- **Social Well-Being**
- **Professional Development**
- **Workplace Environment**

Weziak-Bialowolska, D., Bialowolski, P., Sacco, P. L., VanderWeele, T. J., & McNeely, E. (2020). Well-Being in Life and Well-Being at Work: Which Comes First? Evidence From a Longitudinal Study. *Frontiers in public health*, 8, 103. <https://doi.org/10.3389/fpubh.2020.00103>

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ELEMENTS OF STAFF WELLBEING

Five Essentials for Workplace Mental Health & Well-Being

Centered on the worker voice and equity, these five Essentials support workplaces as engines of well-being. Each Essential is grounded in two human needs, shared across industries and roles.



Components

Creating a plan with all workers to enact these components can help reimagine workplaces as engines of well-being.

Protection from Harm

- Prioritize workplace physical and psychological safety
- Enable adequate rest
- Normalize and support mental health
- Operationalize DEIA* norms, policies, and programs

Connection & Community

- Create cultures of inclusion and belonging
- Cultivate trusted relationships
- Foster collaboration and teamwork

Work-Life Harmony

- Provide more autonomy over how work is done
- Make schedules as flexible and predictable as possible
- Increase access to paid leave
- Respect boundaries between work and non-work time

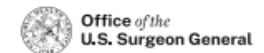
Mattering at Work

- Provide a living wage
- Engage workers in workplace decisions
- Build a culture of gratitude and recognition
- Connect individual work with organizational mission

Opportunity for Growth

- Offer quality training, education, and mentoring
- Foster clear, equitable pathways for career advancement
- Ensure relevant, reciprocal feedback

*Diversity, Equity, Inclusion & Accessibility



US Department of Health and Human Services

WHAT IS STAFF BURNOUT?

"a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do 'people work'..." (Maslach, [1982](#), p. 3)

- An occupation-related syndrome resulting from chronic workplace stress that has not been successfully managed.
- Includes emotional exhaustion, psychological distance or negativity, and feelings of inefficacy
- **Not** managed by the normal rest found in work breaks, weekends, and time off (World Health Organization, 2019).
- **Causes of Burnout**
 - Lack of control
 - Lack of clarity
 - Conflicts with others
 - Too much or too little to do
 - Lack of support
 - Problems with work-life balance

Maslach, C. (1982). *Burnout-The cost of caring*. Prentice-Hall International.

IMPACT OF BURNOUT

- **Organizational**
 - Absenteeism
 - Job dissatisfaction
 - Lack of productivity
 - High job turnover
 - Staffing shortages
- **Personal**
 - Depression
 - Anxiety
 - Compassion fatigue
 - Heart disease
 - Headaches

Salvagioni, D. A. J., Melanda, F. N., Mesas, A. E., González, A. D., Gabani, F. L., & Andrade, S. M. D. (2017). Physical, psychological and occupational consequences of job burnout: A systematic review of prospective studies. *PloS one*, 12(10), e0185781.

BENEFITS OF WELLBEING

- **Organizational**
 - Improved customer/patient experience
 - Increased productivity
 - Decreased absences
- **Personal/Psychological**
 - Increased job satisfaction
 - Increased sense of belonging
 - Decrease in anxiety and depression

Carolan S, Harris PR, Cavanagh K. Improving Employee Well-Being and Effectiveness: Systematic Review and Meta-Analysis of Web-Based Psychological Interventions Delivered in the Workplace. *J Med Internet Res*. 2017 Jul 26;19(7):e271. doi: 10.2196/jmir.7583. PMID: 28747293; PMCID: PMC5550734.

BURNOUT AND WELLBEING

IN TREATMENT SETTINGS

- Nearly 50% of behavioral health care providers report feeling burnt out or exhausted
 - Providers cite high stress, lack of advancement and low salaries as main contributors to burnout
- 67% of clinicians will experience high levels of burnout in their career
- Burnout has been linked to:
 - lower patient safety
 - negative patient experiences
 - disrupted patient care through staff turnover

Yang, Y., & Hayes, J. A. (2020). Causes and consequences of burnout among mental health professionals: A practice-oriented review of recent empirical literature. *Psychotherapy, 57*(3), 426–436. <https://doi.org/10.1037/pst0000317>

Kelly, R. J., & Herald, L. R. (2020). Burnout and leadership style in behavioral health care: A literature review. *The journal of behavioral health services & research, 47*(4), 581-600.

Towey-Swift, K. D., Lauvrud, C., & Whittington, R. (2022). Acceptance and commitment therapy (ACT) for professional staff burnout: a systematic review and narrative synthesis of controlled trials. *Journal of Mental Health, 32*(2), 452–464. <https://doi.org/10.1080/09638237.2021.2022628>

UNDERSTANDING BURNOUT AND WELLBEING IN YOUR STAFF

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How do you currently Monitor staff wellbeing?

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MEASURING BURNOUT IN YOUR STAFF

Maslach Burnout Inventory (MBI):

- **Components:** Emotional exhaustion, depersonalization, reduced personal accomplishment.
- [Maslach Burnout Inventory - Human Services Survey \(MBI-HSS\) - Assessments, Tests | Mind Garden - Mind Garden](#)

Copenhagen Burnout Inventory (CBI):

- **Components:** Personal burnout, work-related burnout, client-related burnout.
- [Copenhagen Burnout Inventory \(CBI\) – EMERGE \(ucsd.edu\)](#)

Professional Quality of Life Scale (ProQOL):

- **Components:** Compassion satisfaction, burnout, secondary traumatic stress.
- [ProQOL Measure | ProQOL](#)

CHOOSING THE RIGHT INTERVENTION

Identifying Patterns:

- **High Scores:** Consistently high scores in areas like emotional exhaustion or depersonalization indicate significant burnout
- **Trends Over Time:** Compare results over different periods to identify if burnout is increasing or decreasing

Contextual Factors:

- **Work Environment:** Assess factors such as workload, staffing levels, and work conditions
- **Personal Factors:** Consider individual differences such as coping skills, personal life stressors, and career satisfaction

Actionable Items:

- **Develop Interventions:** Tailor interventions based on specific areas of burnout, such as emotional exhaustion or depersonalization.
- **Feedback Loop:** Use results to provide feedback to staff and adjust policies or practices

WHAT TRENDS ARE YOU SEEING IN YOUR STAFF?

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What trends are you seeing in your staff?

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BURNOUT AND WELLBEING INTERVENTIONS

- **Individual Interventions**

- Teaching relaxation, stress management training, promoting healthy life-style, increasing coping skills, increasing social supports

- **Group Interventions**

- Team building, group skills building, group counseling, group stress management classes

- **Therapeutic Interventions**

- Acceptance and Commitment Therapy based interventions
- Cognitive Behavior Therapy based interventions
- Dialectical Behavior Therapy based interventions

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Westermann, C., Kozak, A., Harling, M., & Nienhaus, A. (2014). Burnout intervention studies for inpatient elderly care nursing staff: Systematic literature review. *International journal of nursing studies, 51*(1), 63-71.

WHAT INTERVENTIONS HAVE YOU BEEN USING IN YOUR SETTING?



What Interventions
have you been using in
your setting?

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INTERVENTION IDEAS

- **Workload Management:**
 - Balanced Caseloads
 - Flexible Scheduling
- **Support Systems:**
 - Supervision and Peer Support
 - Mental Health Resources
- **Professional Development:**
 - Training Programs
 - Career Development
- **Organizational Culture:**
 - Positive Work Environment
 - Recognition and Rewards

INTERVENTIONS LINKED WITH IMPROVEMENTS

- **Employee Assistance Programs (EAPs):**
 - Reduce stress and improve job satisfaction
- **Wellness Programs:**
 - Enhance overall health and reduce burnout
- **Work-Life Balance Initiatives:**
 - Positive correlation with reduced stress and improved employee satisfaction
- **Stress Management Training:**
 - Effective in decreasing stress levels and increasing job engagement
- **Supportive Supervision:**
 - Linked to lower burnout and higher job satisfaction (Hsu et al., 2016).
- **Employee Feedback Systems:**
 - Facilitates early identification of issues and promotes continuous improvement

Attridge, M. (2019). The role of employee assistance programs in reducing workplace stress. *Journal of Workplace Behavioral Health*, 34(1), 62-77.

Gallup. (2017). *State of the American Workplace: Employee Engagement Insights for U.S. Business Leaders*. Gallup.

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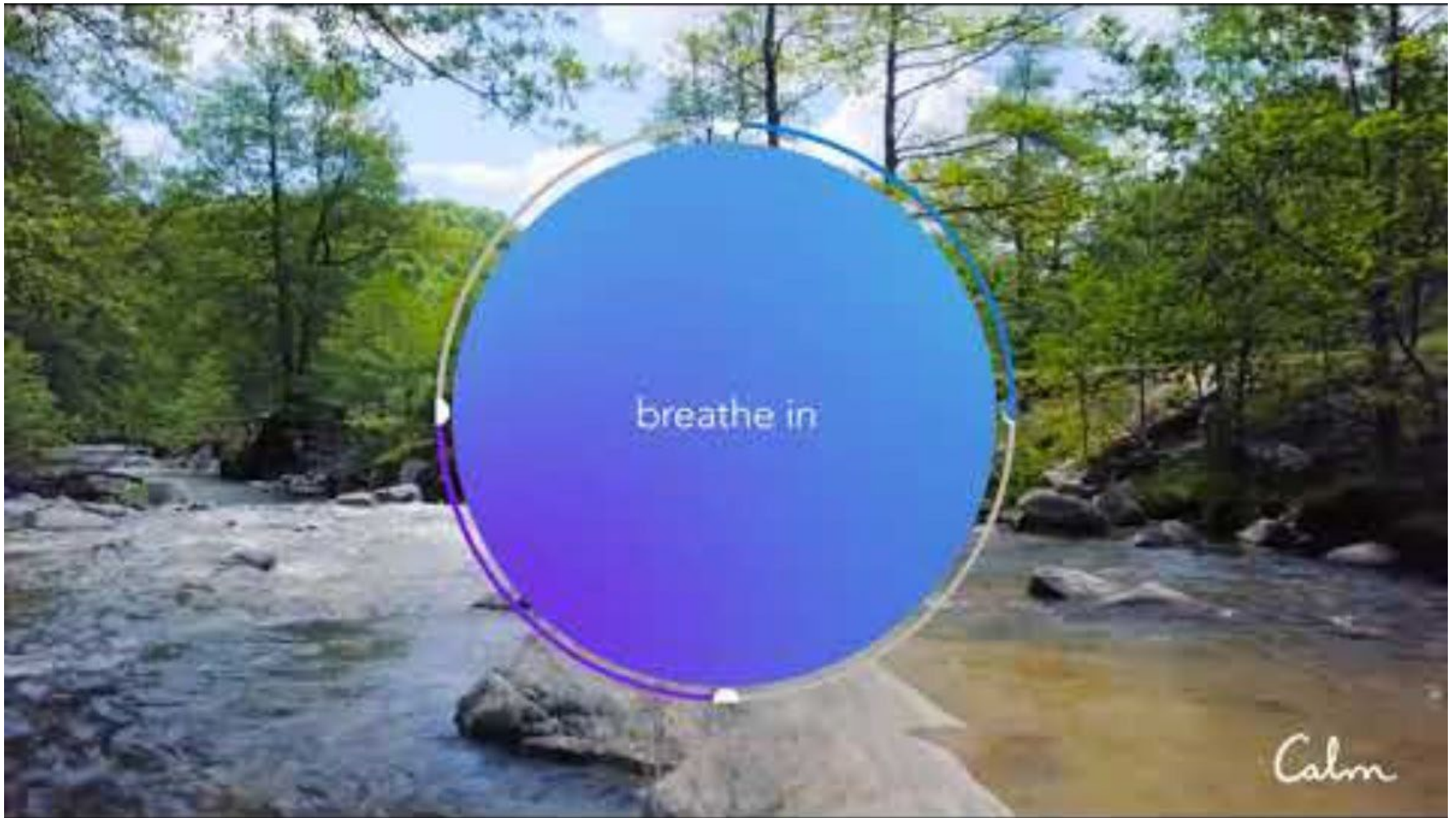
IMPROVING WELLBEING THROUGH DBT

MINDFULNESS BASED INTERVENTIONS

FOR STAFF

- 5-7 minutes of mindfulness in the work-day improves employee outcomes
- All mindfulness exercises help reduce stress for staff
 - Breath-based mindfulness
 - Help improve perspective taking
 - Loving Kindness practices
 - Boosts empathy

Hafenbrack, A. C., Cameron, L. D., Spreitzer, G. M., Zhang, C., Noval, L. J., & Shaffakat, S. (2020). Helping people by being in the present: Mindfulness increases prosocial behavior. *Organizational Behavior and Human Decision Processes*, 159, 21-38.



APPS AND TOOLS FOR INCREASING MINDFULNESS AT WORK

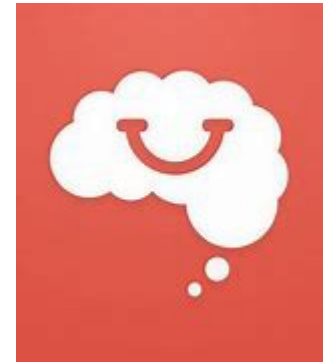
- Calm App

- Can be purchased for all staff
- [Calm - The #1 App for Meditation and Sleep](#)



- Smiling Mind

- Free App
- For adults and kids
- Could be used with staff and individuals together]
- [Smiling Mind App — Smiling Mind](#)



- UCLA Mindful App

- Free App
- Available in 14 different languages
- [UCLA Mindful App - UCLA Mindful | UCLA Health](#)

DOES YOUR WORKPLACE IMPLEMENT MINDFULNESS? HOW SO?



Does Your Workplace implement mindfulness? How So?

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TIPS FOR IMPLEMENTING MINDFULNESS

- Vary mindfulness practices
 - Mindfulness is not one-size fits all
- Infuse mindfulness into the work-day and routines
 - Begin meetings with mindfulness practice
 - Engage in gratitude practices before engaging with patients
 - Allow staff to take brief breaks to encourage mindfulness practices

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**ARE YOU WORKING IN A TREATMENT
SETTING THAT IMPLEMENTS DBT?**

**DO YOU HAVE A COMPREHENSIVE DBT
PROGRAM?**

Are you working in a treatment setting that implements DBT?

Do you have a comprehensive DBT Program?



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DBT CONSULTATION

- **Support for Therapists:** Provides a structured space for DBT therapists to discuss cases, share strategies, and ensure adherence to DBT principles (Linehan, 2014).
 - Serves to enhance motivation and capability of team members (Sayrs & Linehan, 2019)
- **Professional Development:** Facilitates ongoing learning and skill enhancement for DBT practitioners (Swales & Heard, 2017).
- **Enhancing Therapy Quality:** Ensures high fidelity to DBT practices and improves treatment outcomes for clients (Koerner, 2012).
- **Improved Client Outcomes:** Consistent application of DBT techniques leads to better therapeutic results (Linehan, 2014).
- **Therapist Growth:** Encourages continuous learning and adaptation of new strategies (Swales & Heard, 2017).
- **Team Cohesion:** Strengthens collaboration and communication among DBT practitioners (Koerner, 2012).

Koerner, K. (2012). *Dialectical Behavior Therapy: A guide for therapists*. Routledge.

Sayrs, J.H. & Linehan, M.M. (2019). *DBT Teams: Development and Practice*. New York: Guilford Press.

Linehan, M. M. (2014). Dialectical behavior therapy: Current status and future directions. *Annual Review of Clinical Psychology*, 10, 1-

34 25. Swales, M., & Heard, H. (2017). *Dialectical Behavior Therapy: Distinctive features*. Routledge.

DBT CONSULT AND BURNOUT

- Therapists who participate in DBT consultation teams report:
 - lower levels of burnout
 - increased job satisfaction
- The team-based approach of DBT consultation promotes:
 - a collaborative environment
 - shared problem-solving approach
 - maintaining therapeutic consistency and effectiveness

Glynn, L. M., Tollefson, J. L., & McClintock, A. (2016). Reducing burnout in therapists: The role of support and consultation. *Journal of Clinical Psychology, 72*(4), 347-356.

Koerner, K. (2012). *Dialectical Behavior Therapy: A guide for therapists*. Routledge.

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Lynch, T. R., Morse, J. Q., & Mendelson, T. (2006). Therapist burnout in DBT: Mechanisms and outcomes. *Journal of Behavioral Therapy and Experimental Psychiatry, 37*(3), 210-220.

Swales, M., & Heard, H. (2017). *Dialectical Behavior Therapy: Distinctive features*. Routledge.

DBT CONSULT FOR DIRECT SUPPORT STAFF

- Within a comprehensive DBT program, a team can consist of members beyond the therapist
 - Direct Care Staff
 - Case Managers
 - Physicians
 - Nurses
 - Teachers
- Programs can decide between one consult team for the entire program or consult team for clinicians vs. line staff
 - Barriers: shifting schedules, initial buy-in (Dimeff, Rizvi, and Koerner, 2023).
- Expectation is for those members to fulfill the roles of the DBT agreements and provide interventions within the model (Sayrs & Linehan, 2019).

Dimeff, L.A., Rizvi, S.L., & Koerner, K. (2023). *Dialectical Behavior Therapy in Clinical Practice: Applications across Disorders and Settings* (2nd ed.) Guilford Press.

36 Sayrs, J.H. & Linehan, M.M. (2019). *DBT Teams: Development and Practice*. Guilford Press.

RESOURCES

[2021 Mental Health at Work Report | Mind Share Partners](#)

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[ProQOL Measure | ProQOL](#)

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QUESTIONS

CONTACT INFORMATION

Emily Gallagher McAnany - Egallagh@devereux.org

Alexandra Gallagher - agallag2@devereux.org