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What practical measures can healthcare leaders and organizations implement to support physician well-being during COVID-19 and beyond?

There are numerous, specific actions. It is crucially important that stigma about mental health be confronted; that a focus on diversity, equity, and inclusion be a central component; and that an organization's culture encourages physicians ability to seek ongoing care for themselves and their colleagues, rather than fearing retribution from health organizations or regulatory agencies. Educating colleagues about the continuum and types of symptoms of stress—from time-limited distress to burnout and potential psychiatric disorders—is essential and should be put in the context of the various predictable phases of a disaster like COVID-19<sup>1</sup> while at the same time acknowledging that some physicians who have had COVID-19 themselves, or whose family members have died or been unwell, will have extra psychological burdens. While this document focuses primarily on physicians, programs for other professional groups of clinicians should also be implemented.<sup>2</sup>

- ◁ Develop, fund, and support a Chief Wellness Officer team with physician wellness champions in all departments and major divisions.<sup>3</sup>
- ◁ Ensure that physicians are trained in leadership and entrusted to leadership positions throughout the organization so that physicians' voice is heard and influential and that clinical team functioning is improved generally, thereby diminishing the psychological distress of all team members.
- ◁ Develop a "critical mass" of internal physicians who are interested in and committed to clinician well-being and who may have sought additional training through a number of programs.<sup>4</sup>
  
- ◁ Foster and advocate for policies and actions that create a trustworthy medical culture and appropriate organizational change, given that 80% of the causes of burnout are organizational. Many examples of such changes are available.<sup>5</sup>
- ◁ Formally acknowledge and promote "clinician wellbeing" as the fourth leg of a quadruple aim<sup>6</sup> integrated into organizational strategic plans, and make leadership accountable for achieving related strategic goals.<sup>7</sup>
- ◁ Develop an active mentoring culture both within and across disciplines for all physicians, and especially for more junior physicians, at times of career transition.
- ◁ Measure relevant data about physician engagement and burnout at least annually, and then take actions in response to the findings.
- ◁ Continuously educate and message about the importance of self and community care in response to burnout and other disorders.<sup>8</sup>

*The findings, opinions, and conclusions of this guidance document do not necessarily represent the views of the officers, trustees, or all members of the American Psychiatric Association.*

- < Require a strong focus on diversity, equity, and inclusion throughout the organization to ensure that all individuals feel safe in seeking support and care.
- < Work in close collaboration with other health systems and local medical societies to synergize offerings, including coaching and cross-institutional support meetings.



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