

## **Leading with Wellness in Mind: Lessons in Academic Leadership During a Pandemic**

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### **Abstract**

**Purpose:** COVID-19 pandemic impact on healthcare providers has been immense, making it clear that the pandemic demands even more out of our leadership and wellness efforts.

**Methods:** We ground this work in the phenomenology of leadership. Our team evaluated programmatic interventions of virtual community wellness sessions.

**Results:** Ninety-eight percent of respondents strongly agreed that wellness initiatives in the department are critical. Qualitative results focus on one of the lessons learned; what it means to *lead with wellness in mind*.

**Conclusion:** Now, more than ever, *leading with wellness in mind* becomes a high priority. We present its seven key domains.

**Keywords:** wellness, burnout, leadership, COVID-19, pandemic

## Leading with Wellness in Mind: Lessons in Leadership During a Pandemic

The COVID-19 pandemic presents an unprecedented time in medicine. The pandemic challenges every aspect of the mission of health centers; its clinical, research, and education missions. To say that the impact on healthcare providers has been immense would be a great understatement. The pandemic demands even more out of our wellness efforts.

Prior to the pandemic, physician burnout rates were below 50% among doctors in the U.S.<sup>1</sup> Within academic medicine, 31% of faculty who provide patient care in clinical departments report one or more symptoms of burnout. Women and underrepresented in medicine faculty also report higher levels of burnout.<sup>2</sup> Unfortunately, the COVID-19 pandemic is exacerbating other crises, including physician burnout, systemic racism, and health equity.

Figure 1. Burnout Drivers During the Pandemic

### **Burnout Drivers During the Pandemic**

An estimated 64% of US physicians recently surveyed by Medscape indicated that the pandemic has intensified their sense of burnout. How were they coping? 29 % were eating more, 19% were drinking more alcohol, 2% indicated taking prescription stimulants and medications, 46% reported loneliness.<sup>3-4</sup> The biggest drivers of burnout in relation to the pandemic constitute a call to action largely by leadership.

As the pandemic put pressure on our teams, it was important to process what does operating in the middle of a pandemic and healthcare nightmare mean for our faculty, trainees, and staff. It is easier to focus on this point when you commit to wellness. As a department, we set out to do virtual wellness sessions during the upheaval of the pandemic, along with providing resources and advocating for more support from our school and healthcare system.

In this article, we present the results of these virtual wellness sessions. However, we also focus on one of the lessons that our faculty, staff, and trainees taught us; what it means to *lead with wellness in mind* and the characteristics of leaders who do so. We ground this work in the

phenomenology of leadership, which considers the fundamental characteristics that make it possible to be a leader and how leaders can orient their thinking and actions.<sup>5-6</sup> We present and discuss seven salient domains and end with implications for practice.

### Crisis versus Transformational Leadership

Today, transformational leaders encourage, inspire and motivate teams to innovate and create change that will help grow and shape the future success of the organization<sup>7-11</sup>. Crisis leadership rises to address challenges and emergent situations. In the context of the pandemic, leaders must lead decisively, continuously frame the crisis, and constantly assess while actively communicating in all directions because transparency and honesty become critical. It seems best to work from data that may not always be the source of complete information and information that comes from many sources.<sup>12</sup>

Based on the phenom of *leading with wellness in mind*, both of these leadership approaches can be fully represented as we are challenged by this pandemic. Transformational leadership seems to reinforce the internalized motivations of healthcare providers to rise to the pandemic challenges in caring for patients, while at the same time negotiating concerns about their own health and those of their families and friends. While crisis leadership demands decisiveness at a critical time, it also requires pointed questions to the highest level of the organization at the exact time for patients and the team, without perceiving it as a threat or criticism.

### **Methods**

Separate wellness sessions for faculty and staff were provided twice per week for one hour each. Sessions were led by the department's vice-chairs for wellness and faculty development. Session content was guided by a wellness question, included free dialogue, as well

as strategies to reduce burnout while allowing for the exchange of ideas and strategies amongst participants. The sessions were evaluated via survey to determine effectiveness, continuity, and to understand the perspectives of faculty and staff regarding this initiative. Ratings were based on satisfaction and agreement in 5-point Likert-scales. The final evaluation was anonymous and included thirteen items with demographic information focused on faculty and staff roles. The evaluation also included open-ended questions including how leadership was doing in addressing their wellness during the pandemic. A total of 33 wellness sessions were held. These sessions were equally distributed and designated specifically for either faculty or staff. The sessions started on March 17, 2020, at the height of uncertainty. A total of 81 individuals, faculty (30) and staff (51) participated in the survey. The data were analyzed using descriptive statistics and correlations were generated.

We analyzed qualitative data using an inductive process. We independently coded the qualitative data before coming together to develop a finalized list of codes. We completed thematic categories when we reached thematic saturation. In considering the limitations of this evaluation, we recognize that the majority of those completing the survey participated in these sessions. Participation in these sessions was limited based on the time of day, especially for busy clinicians. However, to our knowledge, this is the first evaluation to focus on the perspectives of academic medicine faculty and staff regarding our concept of *leading with wellness in mind*.

## **Results**

A total of 81 participants responded to this evaluation. Regarding the importance of wellness initiatives, 98% of respondents strongly agreed that wellness initiatives in the department were of importance to them. Ninety-one percent of participants understood the overall goal of the wellness sessions. When asked if they had found these sessions helpful, 81%

either strongly agreed or agreed. Moreover, concerning community-building, 75% of participants felt part of a community while 76% felt that the department had created a safe space.

Furthermore, 65% of respondents either strongly agreed or agreed that they had learned wellness strategies that they could practice during the pandemic and while working from home. Lastly, 83% either strongly agreed or agreed that they would recommend these sessions to others.

In regards to how the department was doing in *leading with wellness in mind*, 76% said yes. Respondents also indicated the types of topics they were most interested in, which included: how to transition back to work after the pandemic or reentry efforts (43%), learning more mindfulness practices (23%), interest in group coaching sessions (10%), interest in one to one coaching (7%), and resources such as mental health services (5%). Qualitative data regarding wellness concerns during the pandemic demonstrated strong themes, especially about stress, anxiety, fear and guilt, loss of focus, and productivity. Table 1 summarizes the themes.

Table 1. Qualitative Themes

<i>Identified Themes</i>	<i>Participant comments</i>
high levels of stress	<i>Stress and exacerbation; stress: pressure of situation; work too much</i>
anxiety	<i>Anxiety has been heightened during this pandemic</i>
fear and guilt	<i>I fear going back too early and more people getting sick; fear of the future</i>
loss of motivation and focus	<i>Staying focused during times of uncertainty</i>

feelings of isolation	<i>Isolation; Feeling isolated and disconnected from my co-workers, my division, and the school</i>
fear of getting sick or getting loved ones sick	<i>Staying healthy; Fear of family contracting illness,</i>
loss of productivity at home while at the same time enduring longer work hours	<i>Being efficient in clinical work, being overwhelmed with information;</i>
lack of personal protective equipment	<i>Lack of PPE</i>
limited physical activity and weight gain	<i>I'm gaining weight! I have been moving a lot less at home.</i>
income security	<i>Job and income security</i>

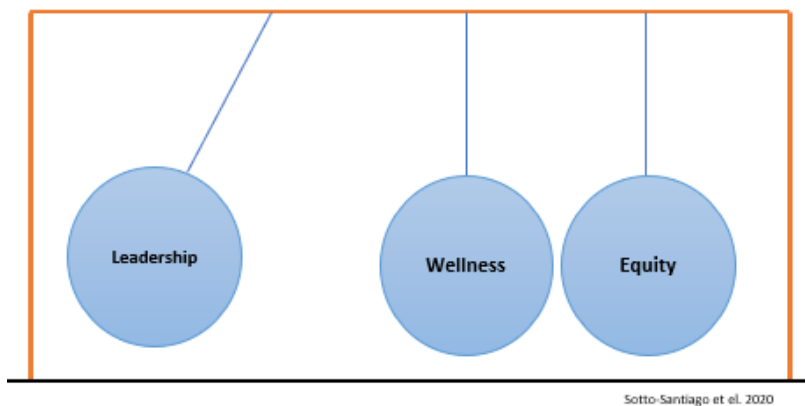
Furthermore, respondents were asked *what characteristics would a leader with wellness in mind would exhibit?* The following themes emerged: inclusive, collaborative, personal, inspirational, empathetic, active listener, openness and transparency, one who exhibits grace, proactive, flexible, patient, and balanced. Respondents also stated: “Leadership interests and efforts register clearly that wellness is a priority, and are much appreciated.” Others hoped for these sessions to continue well beyond the pandemic and stated: “Please do not change the wellness sessions. They are perfect and they help me feel connected.” Also: “Thank you for taking such an early initiative to protect employees and offering us safety and security at this time.”

## Discussion

In addition to multiple departmental resources, the purpose of our virtual wellness sessions was to provide support and community, monitor the mental health consequences of stress and uncertainty, and listen carefully to the needs of our teams. We found the sessions were very well received and have been encouraged by the fact that these sessions have evolved and continued even at the time of this article submission.

However, what have we learned from this experience in regards to leadership? Although the majority of participants indicated that the department was *leading with wellness in mind*, we did not have a concrete definition at the time. In 2017, as we embarked into departmental-level wellness initiatives, we referred to *leading with wellness and equity in mind* as a way to reemphasize not only our commitment to inclusive excellence but wellness and equity.<sup>13</sup>

Figure 2. *Leading with wellness and equity in mind*



Leading with wellness and equity in mind means that every decision we make will consider the impact on the wellness of our faculty, trainees, and staff; and we will consider the impact that these decisions may have on equity, specifically for women and members of minoritized groups. Therefore, we posit that *leading with wellness in mind* during the COVID-19 pandemic combines



key traits of transformational leadership and crisis management while monitoring and advancing wellness and equity amongst our faculty, trainees, and staff.

As we look at the leadership domains expressed by our participants, we can map the character traits of leaders who lead with wellness in mind: inclusive, collaborative, personal, inspirational, empathetic, active listener, open and transparent, one who exhibits grace, proactive, flexible, patient and balanced. *Leading with wellness in mind* calls on leadership to value and cultivate these attributes within the ranks to inspire creativity and fortitude to solve our most pressing problems. If we are to change the landscape of medicine to reflect a “well” culture, equal value must be placed on the ability to demonstrate these critical leadership skills and the ability to achieve any other clinical, research, or scholarly benchmarks.

## **Conclusion**

Overall, this article examines the very early stages of the adjustments made during the COVID-19 pandemic. It is now clear that these changes will be more longstanding. Now, more than ever, *leading with wellness in mind* becomes a high priority. Creative and fulfilling community wellness experiences are of paramount importance.

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