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# Enhance Resident Physician Well-being: How and Why to Implement Opt-Out Wellness Check-Ins

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## Abstract

- The stress of transitioning to residency can lead to new or worsening depression, anxiety, and burnout among house staff.<sup>1</sup>
- Lowering barriers to accessing mental health services and emphasizing preventative mental health care can improve the mental well-being of residents.
- Opt-out programs have been used to target resident physicians and medical students, to increase help-seeking and provide low-barrier access to mental health care and other supports.<sup>2-5</sup>
- Thomas Jefferson University Hospital (TJUH) is a multi-state not-for-profit academic medical system that trains approximately 2,100 house staff/year.
- Opt-out visits began at TJUH as a pilot in 2021 with 2 residency programs. In 2022, the program expanded to include 9 residencies.
- AY21: 76 visits were scheduled. 61% (46/76) opted in. Of those, 24% (11/46) scheduled an intake.
- AY22: 369 visits were scheduled. 32% (118/369) opted in. Of those, 34% (40/118) scheduled an intake.
- This data shows that residents who attend opt-out visits often choose to schedule intake appointments, illustrating increased help-seeking behavior.
- This low-cost intervention can be implemented by all institutions to demonstrate that hospital and program leadership value well-being.

## Goals

1. Identify, support, and monitor residents who are struggling with their mental health and remind them of available services.
2. Encourage residents to reflect on their individual signs of burnout and develop an action plan to enhance well-being throughout residency.
3. Feedback solicited through surveys is meant to help the program grow and serve residents in the most meaningful way possible.

## Methods

AY	Timeframe	Participants	Facilitators
21	July - September 21	-Internal Medicine (PGY1) -Neurology (PGY2-4)	1 Psychiatrist
22	July 22 - April 23	-Internal Medicine (PGY1-3) -Neurology (PGY2-4) -Psychiatry (PGY1) -General Surgery (PGY1-5) -Emergency Medicine (PGY1-3) -Family Medicine (PGY1-3) -Pediatrics (PGY1-3)	1 Psychiatrist 3 Therapists

**Facilitators:** Emotional Health and Wellness Program Staff (employed by TJUH)

**Appointments:** 1:1, 30 minutes, virtual, scheduled by the program during designated time off in the workday or evening

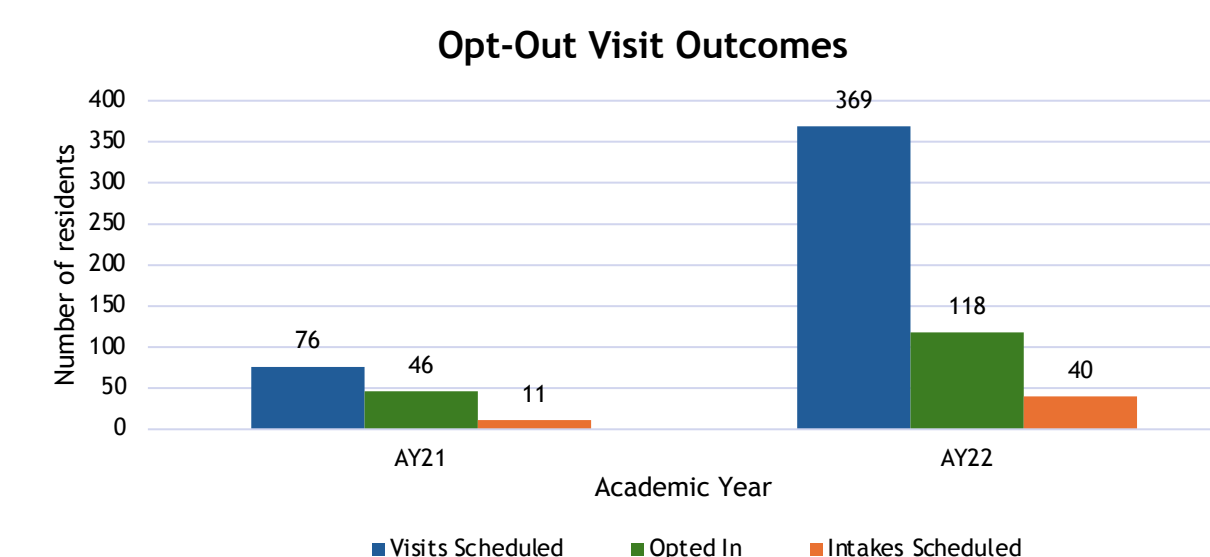
**Preparation:** Residents were asked to complete a consent form and PHQ-9

**Visit Format:**

- Recognize personal signs and symptoms of burnout
- Reflect on individual coping skills
- Review highs and lows from the past year (if attended previously)
- Identify members of their support system
- Consider when to reach out for professional help
- Ask individualized questions about how to access care
- Schedule a mental health intake appointment (optional)

**Follow-Up:** All residents, whether they opted in or out, were emailed resident specific mental health resources and a voluntary survey

## Findings



**AY21:** 61% opted in; of those 24% scheduled intakes

**AY22:** 32% opted in; of those 34% scheduled intakes

**Survey Comment:** “This was a super effective concise meeting that allows us the opportunity to reflect and schedule an appointment if needed. Everyone needs this!”

## Conclusion

- After the first year of the free pilot, residency programs chose to pay for their residents to continue to receive opt-out visits, based on the benefits reported by participants.
- Residents appreciated the autonomy and choice afforded by the opt-out model, fostering a sense of agency in their well-being.
- The program's emphasis on personalized support and low-barrier access to intake appointments fostered a culture of help-seeking, modeled the importance of self-reflection, and increased the utilization of mental health services by residents.
- Program buy-in and staff time are important resources to build an opt-out wellness program.
- This low-cost preventative care wellness program is an effective way for hospital leadership to improve systemic well-being while also helping individual residents.

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