



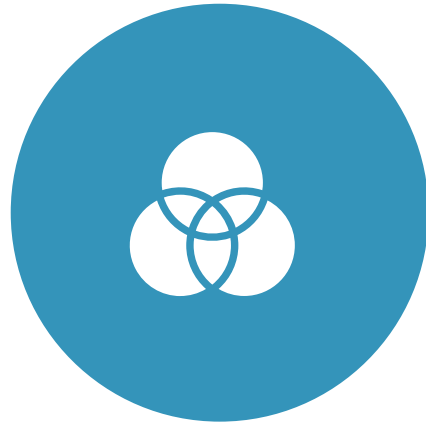
**KSBHA:
HEALTHCARE PROFESSIONAL
WELLNESS**

COURTNEY E. CYZMAN, GENERAL COUNSEL

ROADMAP



FRAME ISSUE



KSBHA ROLE AND
RECENT CHANGES

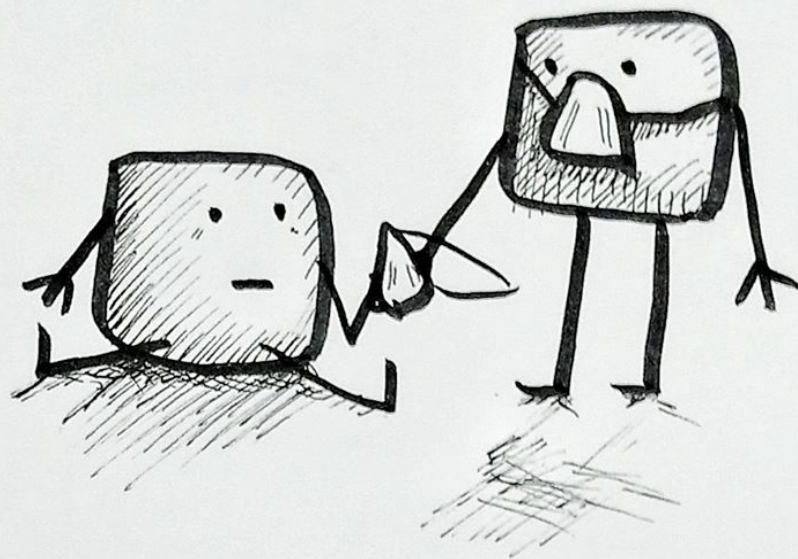


FAQS

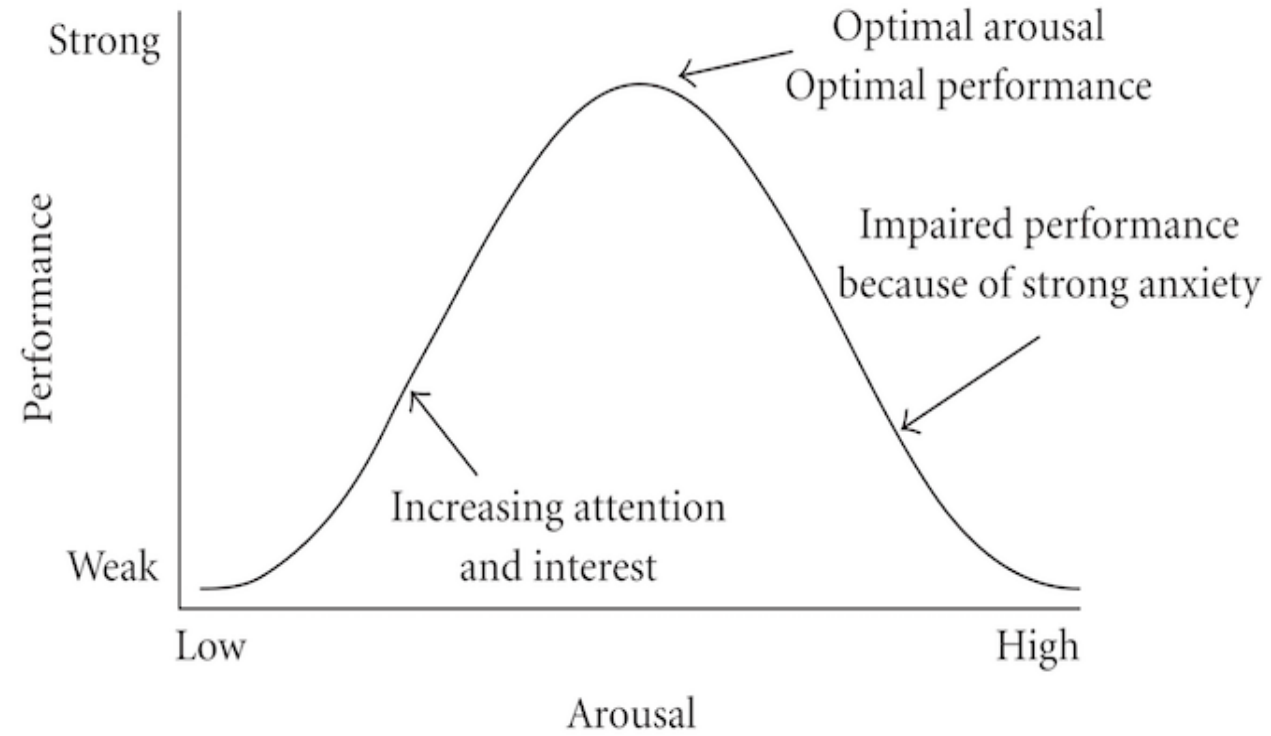


RESOURCES

put your own
oxygen mask
on first



ANXIOUSLITTLEMONSTERS



YERKES-DODSON CURVE (1908)

MASLACH BURNOUT INVENTORY

Emotional exhaustion

- Measures feelings of being emotionally overextended and exhausted by one's work.

Depersonalization

- Measures an unfeeling and impersonal response towards patients.

Personal accomplishment

- Measures feelings of competence and successful achievements in one's work.



WHAT DOES BURNOUT LOOK LIKE?



RISK FACTOR FOR BURNOUT - INDIVIDUAL

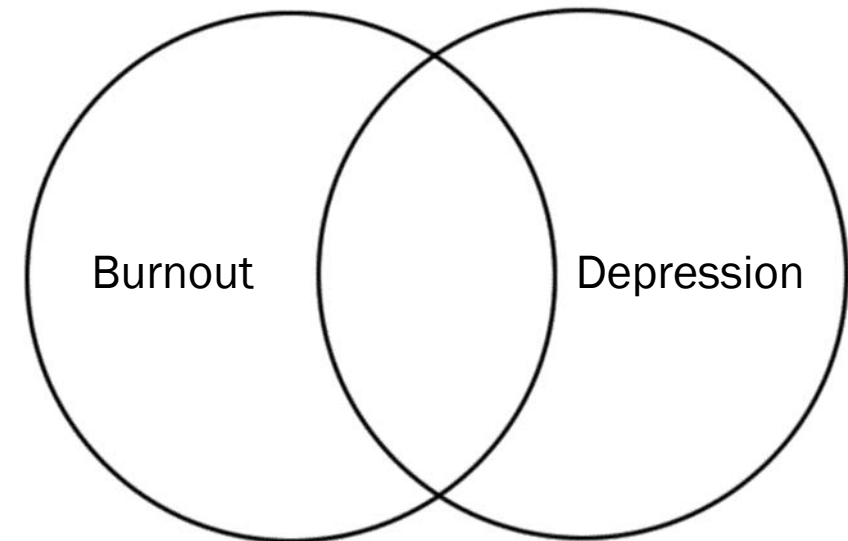
- Age – Under 55 years old
- Debt
- Relationship
 - Children
 - Work-home interaction/conflict
- Gender
 - Women are at higher risk – but hard to know exactly how much
 - Women more likely to experience emotional exhaustion; men more likely to experience depersonalization
 - Imposter Syndrome

CONTRIBUTORS TO BURNOUT - WORK

- Inefficient work environment
- Excessive workload
- Loss of support from colleagues
- Loss of control, autonomy and meaning at work
- Organizational climate
 - Negative leadership, limited collaboration and advancement opportunities
 - Lack of alignment between individual and organizational priorities (ex: recognizing other responsibilities, bias, harassment)

WHY DOES THIS MATTER?

- Loss of professionalism
- Less attention to detail, increased risk of error
- Relationship issues
- Depression
- Anxiety
- Social isolation
- Insomnia
- Physical illness
 - Prolonged fatigue, headaches, GI issues, etc.
- Substance misuse
- Suicide



WHY DON'T HEALTHCARE PROFESSIONALS SEEK HELP?

Culture of healthcare

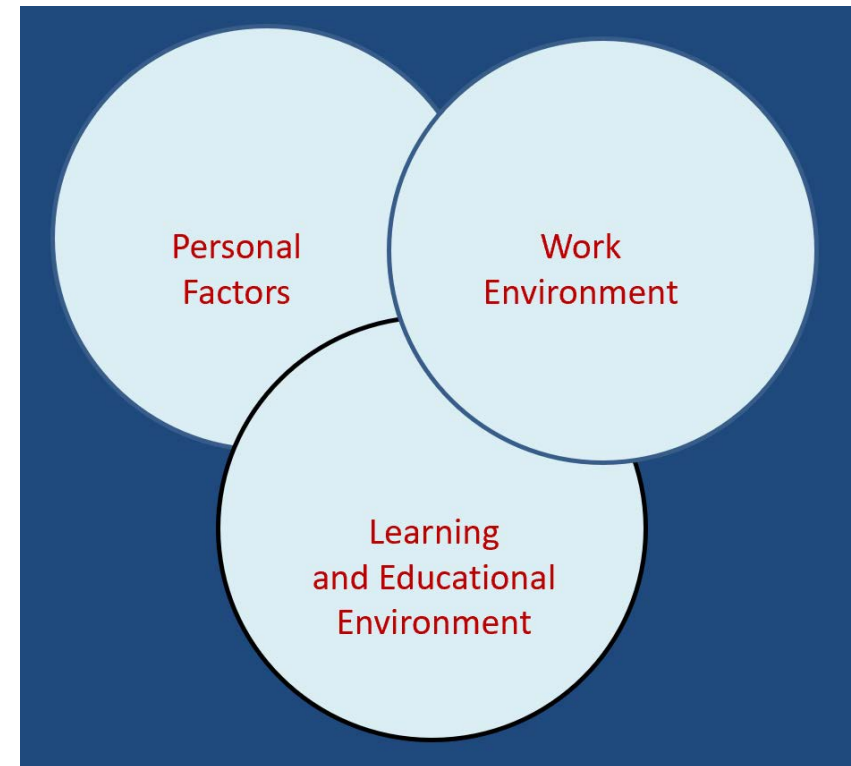
Stigma

Fear of impact on licensure

Time

INTERVENTIONS

- Awareness of burnout, depression, anxiety, etc.
- Realistic recognition of limits
- Physical exercise
- Supportive help and talking with others about issues and stressors
- Forming firm boundaries between work and home
- Work environment



UNHEALTHY COPING MECHANISMS



SUBSTANCE USE



GIVING UP TRYING
TO REMEDY THE
SITUATION



DENIAL



SELF-BLAME



FOCUSING ON
THINGS OTHER
THAN THE
SITUATION



VENTING?

HEALTHY COPING MECHANISMS

- Acceptance
- Adaptive
- Planning and taking action
- Seeking advice
- Seeking emotional support
- Identifying a positive aspect of the stressor



MOVING FORWARD

1

Develop a sense of belonging, community, and increased opportunities for interaction (especially post-pandemic)

2

Create a more supportive environment that responds to the needs of healthcare professionals

- Control and flexibility in schedules
- Workload

3

Support for roles outside of work (maternity/family leave, childcare, etc.)

4

Normalize self-care from institutional to personal level

5

Change the climate so healthcare professionals can and will seek needed help (decrease stigma)



FEDERATION OF STATE MEDICAL BOARDS – REPORT AND RECOMMENDATIONS OF THE WORKGROUP ON PHYSICIAN WELLNESS AND BURNOUT (APRIL 2018)

Review


Recommendation 1: Review medical licensure (and renewal) applications questions on mental health, substance use, and addiction

Emphasize


Recommendation 6: Emphasize the importance of health, self-care, and treatment-seeking for all health conditions

Be Aware

Recommendation 10: Be aware of potential burdens placed on licensees by new or redundant regulatory requirements



It is also recommended that boards take advantage of all opportunities available to them to discuss physician wellness, communicate regularly with licensees about relevant board policies and available resources, and make meaningful contributions to the ongoing national dialogue about burnout in order to advance a positive cultural change that reduces the stigma among and about physicians seeking treatment for mental, behavioral, physical or other medical needs of their own.



INITIAL APPLICATION *PRIOR TO NOVEMBER 2019*

- Within the past 2 years, have you been diagnosed or treated for any physical emotional or mental illness or disease, including drug addiction or alcohol dependency, which limited your ability to practice the healing arts with reasonable skill and safety?
- Within the past 2 years, have you used controlled substances, which were obtained illegally or which were not obtained pursuant to a valid prescription order or which were not taken following the directions of a licensed health care provider?
- **Have you ever** practiced your profession while **any physical or mental disability**, loss of motor skill or use of drugs or alcohol, impaired your ability to practice with reasonable skill and safety?
- Do you presently have any physical or mental problems or disabilities **which could affect** your ability to competently practice your profession?

RENEWAL QUESTION *PRIOR TO NOVEMBER 2019*

- In the past 12 months, have you suffered from any impairment which might affect your ability to safely practice, been referred to and/or participated in a program for impaired providers?



NEW

Do you have any physical or mental health conditions (including alcohol or substance use) that currently impairs your ability to practice your profession in a competent, ethical, and professional manner? (Yes/No)

Dear Kansas Occupational Therapists and Occupational Therapy Assistants:

All of us are feeling added stress due to the pandemic; whether due to dealing with patients suffering and dying from an illness we knew nothing about this time last year, or the uncertainty of how long this will last. Unlike most other public health crises, this is not only impacting our patients and our communities, but is also placing our colleagues, our families, and ourselves at risk when we simply do our jobs. These added stressors can increase our risks of developing depression and anxiety. In addition, the isolation of physical distancing is increasing the loneliness.

Suicide is a major public health concern and among the leading causes of death in the United States. Yearly, over 48,000 lives are claimed by suicide in the U.S. Yet mental health issues among healthcare professionals are frequently not addressed because of the fear, shame, and stigma attached to them. We entered healthcare to help others; not to become patients ourselves. We are the ones that are supposed to have the answers, but stress and anxiety, especially during the pandemic, frequently leave us feeling lost. In addition, we may practice in an environment in which we frequently have little control and have little interaction with our colleagues, especially with physical distancing. Our careers can also have negative impacts on our personal lives, and successful work-life integration remains elusive, especially for healthcare professionals with children who are attempting to navigate remote learning, in addition to other stressors in the workplace.

Healthcare professionals are trained to place the need of our patients above our own. We often take poor care of our own health, both physical and mental, and think that we can treat these conditions ourselves. This often leads to poor outcomes. We are especially afraid to seek help for our mental health because of fear of the impact of acknowledging the need for and seeking treatment on our licensure and employment. However, and importantly, your license will not be impacted because you sought help.

The Kansas State Board of Healing Arts recently removed from its application and renewal forms several questions relating to mental health and impairment treatment history. We did this because, upon reflection, we realized that these questions were unnecessarily broad in some respects and might contribute to the phenomena of health care professionals avoiding treatment due to fears of licensing consequences down the road. We replaced these questions with a new, narrower and more focused, universal impairment question on the initial and renewal licensing application to help avoid the misperception that healthcare professionals will suffer negative licensing consequences when they seek care for mental or physical health issues.

We want to work with you to address the issues leading to healthcare provider mental health issues and suicide. If you or a colleague is suffering from depression or anxiety, or other mental health issues, please seek help. Or if you just need to talk, there are those who want to listen. You can contact the Heart of America Professionals Network at the number listed below.

Heart of America Professional Network
Alan Murray, Executive Director
(913) 236-7575
alan@hapn.org

Additional Resources:

National Suicide Prevention Lifeline: 1-800-273-8255

Text "HELLO" to 741741
Both are available 24/7

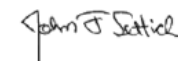
Kansas Suicide Prevention Resource Center Local Hotline: 1-785-841-2345

www.kansassuicideprevention.org

Sincerely,



Kimberly Templeton, M.D.
Member and Past President, Kansas State Board of Healing Arts



John F. Settich, PhD
President, Kansas State Board of Healing Arts



Tucker L. Poling, J.D.
Acting Executive Director, Kansas State Board of Healing Arts

9. Recommendation by a peer that has known the applicant for a minimum of 1 year.

I _____, a licensed and practicing OT or OTA in the state of _____
(name, please print) (state name)

affirms that _____ has been known to me for _____ year(s), and that applicant, to
(name of applicant)

the best of my knowledge is an ethical practitioner, is of good professional character, and not addicted to the use of alcohol or drugs.

signature

address

date

city, state and zip


ELIMINATION OF PEER RECOMMENDATION

KSBHA HEALTHCARE PROFESSIONAL WELLNESS ACTION ITEMS


- Continuing KSBHA led group to address healthcare professional wellness
- Increasing conversation with stakeholders and licensees
- Continue discussion regarding change in credentialing/privileging impairment questions
- Bolstering website content and resources on healthcare professional wellness








If I have a condition that is being treated and under control, do I need to report it?



Can I be in a professional health program without the
Board being notified?



I was recently arrested for a DUI. What can I expect?



If an investigation is open because of my response on an application or renewal, what does the process involve? What is the average length of time?

PROFESSIONAL HEALTH PROGRAMS

MD/DO/PA/DC

- Kansas Medical Society – Professionals Health Program
 - (785) 231-1309
 - Carolyn Westgate
- Kansas Association of Osteopathic Medicine
 - (785) 234-5563
 - Vicki Whitaker, Executive Director

RT/AT/PT/PTA/OT/OTA

- Heart of America Professional Network
 - Alan Murray, Executive Director
 - (913) 236-7575
 - alan@hapn.org

Welcome.

The Emotional PPE Project connects healthcare workers in need with licensed mental health professionals who can help.

No cost. No insurance. Just a trained professional to talk to.

Healthcare Workers Affected By The
COVID-19 Crisis

Mental Health Practitioners Looking To
Help

All Services Provided Through The Emotional PPE Project Are Free Of Charge.

The Emotional PPE Project is a directory that provides contact information of volunteer mental health practitioners to healthcare workers whose mental health has been impacted by the COVID-19 crisis.

The Emotional PPE Project is an independent tax-exempt nonprofit (501(c)(3)) organization fully staffed by volunteers.

You may contact us at: contact@emotionalppe.org // [Click here to review our Terms of Use](#) // [Click here to read our FAQs](#)

Follow Us On Social Media!





National Suicide Prevention Lifeline

We can all help prevent suicide. The Lifeline provides 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals.



Text “Hello” to 741741

SPECIAL ANNOUNCEMENT



President Signs National Suicide Prevention Designation Act Into Law

The President recently signed the National Suicide Hotline Designation Act into law. 988, the new three-digit number for the National Suicide Prevention Lifeline, is to be completed by July 2022. In the meantime please continue to share 1-800-273-TALK (8255) with anyone wishing to connect to the Lifeline. 988 is NOT CURRENTLY ACTIVE nationally and may not connect callers to the Lifeline.

[LEARN MORE](#)²





CONTACT INFORMATION

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