4 ways chief wellness officers can define their scope and charge

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Amid a culture that is contributing to physician burnout and a loss of a sense of joy in medicine, a chief wellness officer (CWO) can help your organization systematically improve the well-being of doctors and other health professionals.

When this C-level executive position is established and a CWO is chosen, it is important that the scope and charge is clearly defined. An AMA STEPS Forward™ toolkit helps health systems and other organizations do just that and more.

The “Chief Wellness Officer Road Map” toolkit outlines a nine-step approach CWOs can follow to implement a leadership strategy for professional well-being. Clearly defining the scope and charge is the first of the nine steps.

Outside of health care, the CWO is often part of the human resources department. Their goal is to reduce health care expenditures by encouraging healthy living and personal stress reduction at the individual level. In medicine, the CWO’s focus is not on individual stress reduction but rather on improving a practice environment’s efficiency and elements of the organization’s culture. This includes reducing EHR-documentation times, cultivating collegiality and community among health professionals, and creating peer-support programs and other resources for those in distress.

Taking too narrow of a focus on personal resilience can be a pitfall, said Tait D. Shanafelt, MD, co-author of the toolkit with Christine Sinsky, MD, the AMA’s vice president of professional satisfaction. Dr. Shanafelt is an associate dean of the Stanford University School of Medicine and chief wellness officer at Stanford Medicine. He was the first health care CWO in the nation.

“It’s much simpler to create courses and resources for individuals than it is to try to bite off structural change,” Dr. Shanafelt said. “Improving the efficiency in a practice environment, evaluating dimensions of culture or our leadership behaviors as an organization need to change and beginning to
try to advance those things is much more difficult. But that’s the work—we are not chief personal resilience officers.”

Here are four areas to focus on to clearly define the CWO’s scope and charge.

**Who the CWO is responsible for**

One fundamental question that should be decided before hiring a CWO is whether the person in the position will be responsible for only physician well-being or for the well-being of others on the health care team too. The broader the charge—nurses, pharmacists, technologists, therapists, all employees—the greater the personnel and financial support required.

**How to advocate for clinicians**

A CWO creates a strategic vision that defines why and how the organization will improve the work environment to advance professional well-being. It’s also the CWO’s role to make sure that physician and other clinician needs are an important consideration when making decisions.

The goal is to be a catalyst to help the organizational culture evolve toward more affirmational qualities, including participatory leadership, professionalism, equity and fairness, mutual respect, growth mindset, continuous learning and an attitude of caring for self and others, the toolkit says.

**Strategy development and execution**

CWOs need to oversee the development and execution of an organization-wide strategy to improve professional well-being for physicians and other health professionals. They also need to lead when implementing specific initiatives and tactics to achieve that goal.

While developing a strategy, it is important to remember to identify the most critical elements and say “no” to other opportunities even though they may be worthy. This helps ensure that CWOs and their teams are not taking on too many things at once, allowing them to be more successful in areas they have chosen to make improvements.

**Assessing physician experiences**
Another responsibility of CWOs is “assessing professional fulfillment and distress, benchmarking the organizational experience relative to other medical centers” and then tracking the measures over time.

The data needs to be broken down by department, division, section or clinic so the CWO can engage leaders in those areas and provide support and guidance on how to make improvements. CWOs should also support leaders’ efforts to make progress.

AMA?STEPS Forward open-access toolkits offer innovative strategies that allow physicians and their staff to thrive in the new health care environment. These courses can help you prevent physician burnout, create the organizational foundation for joy in medicine and improve practice efficiency.