

# FREE

## Faculty Resources for Educational Excellence



### Upcoming Events

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## ***"We All Own a Piece of the Work": A Conversation with Dr. Liselotte Dyrbye.***

***Sarah Harendt, PhD, MS*** | *Education & Faculty Development Manager, OCPD*

This year's Richard C. Vari, PhD Endowed Lecturer, Liselotte Dyrbye, MD, MHPE agreed to spend a few minutes chatting about how threats to well-being within healthcare systems can be addressed with effective impact. Lotte, as she prefers to be called, is one of the most widely cited scholars on clinician well-being and is a national voice on pragmatic, system-level solutions to burnout. Dr. Dyrbye serves as Senior Associate Dean for Faculty and Chief Well-Being Officer at the University of Colorado School of Medicine, where she leads initiatives that strengthen partnerships and reduce burnout across the learning and care environment. She is also co-developer of the Physician Well-Being Index, a validated screening tool used nationally to identify distress and guide support.

During our conversation, three of the organizational interventions Lotte recommended with the strongest evidence for impact on burnout and intent to leave were:

1. adopting an intentional improvement cycle—collect data, share results transparently, act, and continue measuring;
2. deploying coaching as a practical skill set for individuals and teams; and,
3. rigorously assessing whether quality-improvement projects are helping (or inadvertently harming) workforce well-being.

These priorities mirror themes in her research portfolio and national commentary calling for system accountability and measurement, not just individual resilience tactics.

Building on this call for shared responsibility and systemic change, Dr. Dyrbye emphasized that well-being cannot rest on individuals alone. She also cautioned against "othering" and encouraged viewing well-being as a shared responsibility that succeeds only when each of us owns a piece of the work. When asked to retire a persistent myth,

she distinguished burnout from moral distress: related, often intertwined, but not the same construct, an important nuance echoed in the literature. Looking ahead to 2026, Dr. Dyrbye highlighted a hopeful trend: despite the broader turbulence in health care, the field's sustained, growing attention to clinician well-being, and the expectation that organizations measure what matters, offers real momentum for change.

To view Dr. Dyrbye's recorded session, please email [jtaddair@carilionclinic.org](mailto:jtaddair@carilionclinic.org) for the link.

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