

Context

Mindful Practice in Medicine-Flourishing in Medicine (MPIM-FIM) is a rigorously developed, evidence-based educational initiative designed to strengthen clinician wellbeing, resilience, teamwork, and patient-centered care. Delivered through immersive workshops, retreats, interactive presentations, and scalable online modules, MPIM-FIM has reached thousands of healthcare professionals across diverse disciplines, settings, and countries. Over more than two decades, the program has been continuously refined through co-production with clinicians, integrating their lived experiences of contemporary healthcare pressures with research-informed practices that support professional sustainability and high-quality care.



Intervention



The Mindful Practice in Medicine-Flourishing in Medicine (MPIM-FIM) curriculum integrates three mutually reinforcing components to support clinician wellbeing, teamwork, and high-quality care:

- **Awareness Practices** – Mindfulness-based grounding and self-regulation practices that cultivate attentional stability, emotional awareness, and presence in clinical work. These skills enhance clinicians' abilities to respond skillfully under pressure, supporting resilience, situational awareness, and patient-centered decision-making.
- **Narrative Medicine** – Reflective writing, close listening, and shared storytelling that deepen empathy, meaning-making, and professional identity formation. By engaging lived experience, narrative practices foster connection, normalize uncertainty, and integrate the emotional and moral dimensions of care.
- **Appreciative Dialogues** – Structured, strengths-based conversations informed by Appreciative Inquiry that promote psychological safety, collective learning, and shared purpose. These dialogues help teams identify assets, envision healthier ways of working, and cultivate systems-focused hope and agency.

Together, these three components create an interactive, relational learning environment that strengthens individual resilience while enhancing team cohesion, communication, and connection—key conditions for sustainable practice and safer care.

Problem

Healthcare professionals face rising burnout, distress, moral injury, and reduced psychological safety. Sustained exposure to patient suffering, high-stakes decisions, team conflict, and error-related stress undermines wellbeing, clinical performance, patient outcomes, and workforce retention. Healthcare organizations therefore need scalable, evidence-based approaches that build resilience and foster psychologically safe, sustainable clinical environments.

Assessment of Problem and Analysis of Causes

Clinician distress arises from the interaction of individual, relational, and organizational factors. High workload, compassion fatigue, team communication failures, and cultures of perfectionism contribute to cumulative strain, compounded by limited space to process uncertainty, grief, and error. Clinical training has prioritized technical expertise while underdeveloping human capacities—such as presence, reflection, and relational connection—that protect against burnout and support safe, high-quality care. Effective responses must therefore strengthen individual skills while also improving team dynamics and organizational culture.



Strategy for Change

The program was developed through iterative cycles of co-design with practicing clinicians. Workshops and retreats are grounded in participants' real-world experiences, including managing uncertainty, caring for suffering patients, responding to adverse events, and working within interprofessional teams. A growing international network of Flourishing in Medicine Centers of Excellence adapts the curriculum to local contexts while maintaining fidelity to core principles. Dissemination occurs through faculty development, organizational partnerships, and coordinated cross-site implementation.

Measurements of Improvement

- Reductions in emotional exhaustion and depersonalization
 - Improved patient-centered attitudes and skills.
 - Increases in emotional stability and conscientiousness.
 - Decreases in work-related distress and intention to leave.
 - Enhanced meaning, engagement, and sense of purpose
- Qualitative feedback highlight increased sense of community, confidence navigating uncertainty and errors, and a renewed commitment to creating healthier cultures of care.

Effects of Changes

Participants report improved emotional regulation, greater capacity for attentive presence, and strengthened ability to engage in constructive, compassionate interactions with both patients and colleagues. The program contributes to:

- Improvements in health professional wellbeing and decreases in burnout.
- Improvements in healthcare teamwork and work engagement
- Improved empathy
- Strengthened communication, teamwork, and psychological safety.

Organizations adopting MPIM-FIM report improved workforce morale and increased engagement in quality and safety initiatives.

Lessons Learned

Central lessons include the critical role of community, protected reflective space, and structured dialogic practices in supporting sustainable clinician wellbeing. Clinicians consistently value practical, immediately applicable skills that can be used in real time during emotionally charged or high-pressure clinical encounters. The co-production model—where clinicians actively shape program content and evolution—enhances relevance, cultural alignment, and continuous innovation. Our experience underscores that embedding wellbeing skills into everyday practice requires visible leadership support, alignment with organizational priorities, and training approaches that are both accessible and scalable across diverse healthcare settings.



Locations of MPIM-FIM intensive workshops or advanced teacher trainees

Summary

MPIM-FIM is a replicable, adaptable, and sustainable approach for strengthening clinician wellbeing and healthcare quality. Implemented across multiple countries and care settings, the program demonstrates strong generalizability. Healthcare organizations seeking to enhance resilience, teamwork, and psychological safety can adopt and tailor this model to local needs. MPIM-FIM offers a practical, evidence-based pathway toward a healthier, more compassionate future for clinicians and patients.

References

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