

Physician Burnout is on the Rise

- all clinicians are increasingly at risk

Presenter: Ron Louks MD MBA

Learning Objectives

Objective 1

- Identify causes of physician burnout

Objective 2

- Recognize the symptoms of physician burnout

Objective 3

- Assess the scope of physician burnout and discuss interventions

Physician Burnout is on the Rise

Agenda:

- Background
- Symptoms
- Scope
- Interventions

Background

Physician Burnout is on the Rise: Background

- Significant changes in the past 40 years
- Decline in esteem of physicians in general
- Integrity and authority of physicians was once unassailable
 - “Because I’m the doctor, that’s why”
 - “I may be wrong, but I’m never in doubt”
- Now often called “providers” rather than “doctors”

Physician Burnout is on the Rise: Background

○ Quotes

- “Physicians are trained to be autonomous, are highly educated, and for the most part are very-well trained. Then they go out into practice and are subject to the nanny state, where regulations and unceasing directives that have nothing to do with delivering quality medical care (except in government bureaucrat minds) are imposed.”
- “I love practicing medicine, but I spend more time as a secretary than a physician.”
- “Burnout will NEVER go away until MOC does.”

Physician Burnout is on the Rise: Background

- Roughly 50% report symptoms of burnout
- Overworked was #1 reason
- Payer mandates & regulations
- Loss of autonomy
- Poor work/life balance
- MOC
- Difficulty recruiting, especially primary care and in small rural facilities
- Increased computerization of medical practice

Physician Burnout is on the Rise: Background

TheHappyMD.com

- The conditioning of our medical education often leads to these top four character traits
 - Workaholic
 - Superhero
 - Perfectionist
 - Lone ranger

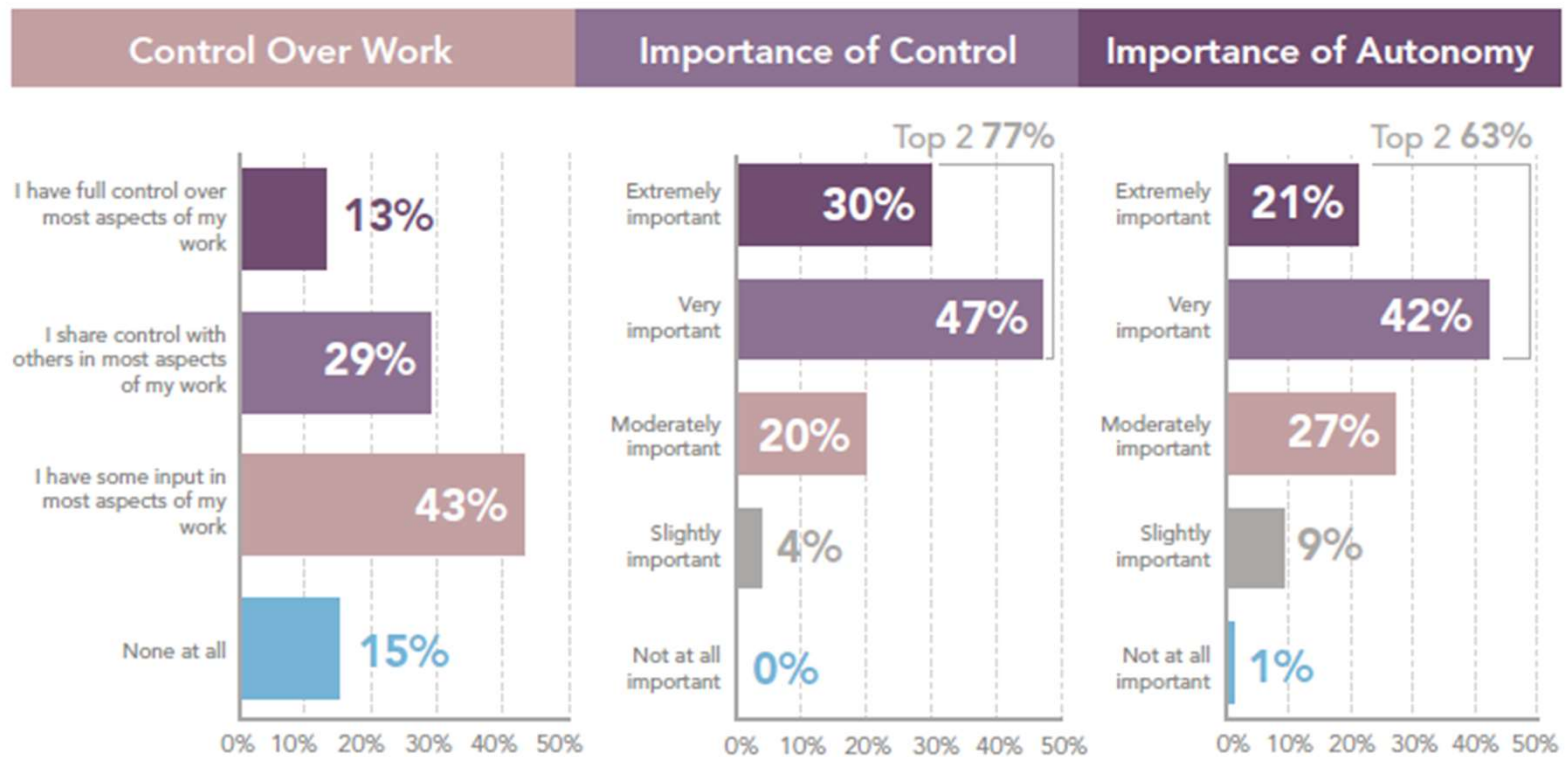
Physician Burnout is on the Rise: Background

TheHappyMD.com

- These 2 prime directives gradually and inevitably become ingrained in physicians
 - “The patient comes first”
 - “Never show weakness.”

Physician Burnout is on the Rise: Background (Loss of Autonomy)

Control over work



Physician Burnout is on the Rise: Background

- Doctors spend only 27% of their office day in face-to-face patient contact, but 49% doing desk work and using the EHR.
- Even in the exam room they spend 37% of their time on EHR and desk work and just over 50% on direct clinical face time
- For every hour doctors spend face-to-face with patients, they spend almost 2 hours doing EHR and desk work

Allocation of Physician Time...; Annals of Internal Medicine, September 6, 2016

Pandemic!

Physician Burnout is on the Rise: Background

COVID-19 aftermath

- “Moral injury”
- PPE shortages & basic needs
- Immediate threat to personal and family safety
- Financial impact
- Social isolation
- Disruption of established workflows

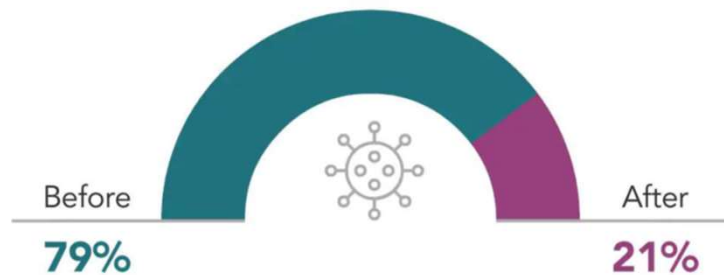
Addressing Postpandemic Clinician Mental Health; Annals of Internal Medicine, August 21, 2020

Physician Burnout is on the Rise: Background

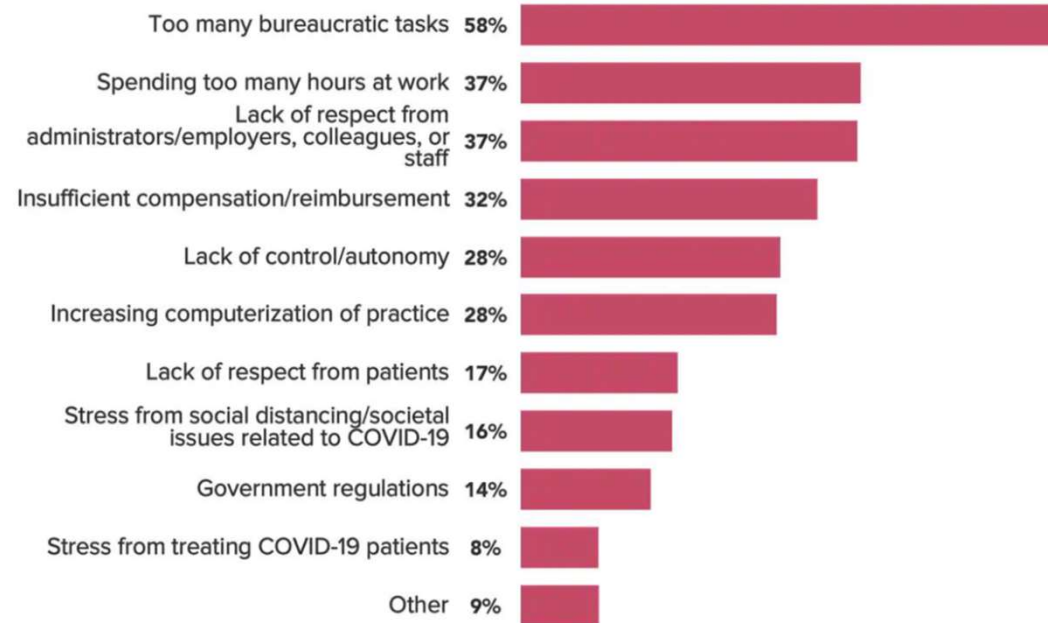
Are More Women or Men Physicians Burned Out?



Did Your Burnout Begin Before or After the Start of the COVID-19 Pandemic?



What Contributes Most to Your Burnout?



Physician Burnout is on the Rise: Background

How Severe Is Your Burnout?



- 29%** Has little or no impact on my life
- 24%** Has moderate impact on my life
- 47%** Has strong/severe impact on my life

How Has COVID-19 Affected Your Worklife Happiness?



Physician Burnout is on the Rise: Background

8 in 10 physicians were impacted as a result of COVID-19.

- **49%** reported a reduction in income
- **32%** experienced a reduction in staff
- **18%** switched to a primary telemedicine practice

Sixty-one percent of physicians report often experiencing feelings of burnout, showing a significant increase since 2018 as tracked by The Physicians Foundation data.



When it comes to COVID-19 impacts on physician mental health:



- **More than half of physicians (57%) have felt inappropriate feelings of anger, tearfulness or anxiety because of COVID-19**, 46% of physicians have withdrawn or isolated themselves from others and 34% felt hopeless or without a purpose
- Despite the high incidence of mental health symptoms, only **14% of physicians sought medical attention**

The majority of physicians identify their family (89%), friends (82%) and colleagues (71%) as most helpful to their mental health and wellbeing during the pandemic.

Over 70% of physicians believe a multi-pronged approach needs to be taken to address mental health conditions, burnout and/or preventing suicide, such as:

- Confidential therapy, counseling or support phone lines
- Evidence-based professional training to prevent burnout, behavioral health conditions and suicide

**A Survey Examining How the
Coronavirus Pandemic Affected the
Nation's Physicians**

Survey completed June 2021. Copyright 2021,
The Physicians Foundation,

Clinician Burnout is on the Rise: Background

Nurses' psychological trauma and the marathon of crisis

Theme #1: Psychological distress in multiple forms: Including anxiety, depression, guilt and symptoms of PTSD

Theme #2: Tsunami of Death: Overwhelming grief and loss

Theme #3: Torn between two masters: Personal/family safety and professional duties

Theme #4: Betrayal: Professional disillusionment, job dissatisfaction and intention to leave job/profession

Theme #5: Resiliency/posttraumatic growth through self and others: Professional experiences and other sources

Nurses' substance/alcohol use and mental health distress

Theme #1: Mental health crisis NOW!!: 'more stressed than ever, and stretched thinner than ever'

Theme #2: Turning to substances to cope: Alcohol, food, tobacco/smoking, recreational drugs/marijuana

Theme #3: Where is the support?

Symptoms

Physician Burnout is on the Rise: Symptoms

- Maslach Burnout Inventory
- Christina Maslach – USF in the 1970's
- described burnout as “an erosion of the soul caused by a deterioration of one's values, dignity, spirit, and will”
- 3 main symptoms

Physician Burnout is on the Rise: Symptoms

- Symptom: Exhaustion
 - Physical and emotional energy levels are extremely low and in a downward spiral
 - “I'm not sure how much longer I can keep going like this.”

Physician Burnout is on the Rise: Symptoms

- Symptom: Depersonalization
 - Cynicism, sarcasm, and the need to vent about your patients or your job
 - “Compassion fatigue”
 - Emotionally unavailable for their patients or anyone else

Physician Burnout is on the Rise: Symptoms

- Symptom: Lack of efficacy
 - Doubting of the meaning and quality of their work
 - “What's the use?”
 - “What I do doesn't really make any difference”
 - This symptom is less common in men

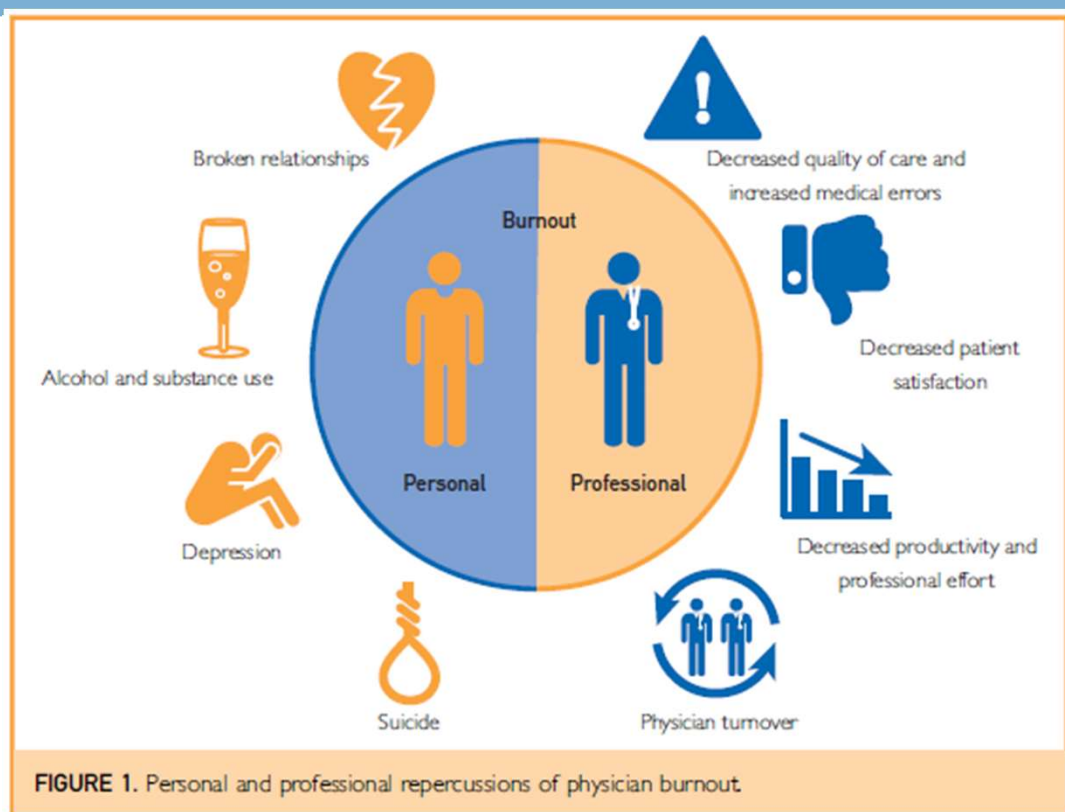
Physician Burnout is on the Rise: Symptoms

- Exhaustion
- Disengagement and Disconnection
- Loss of Purpose
- Loss of Hope
- A Change in Emotional State
- Strained Professional Relationships
- Decreased Patient Satisfaction
- Checking the Boxes



Scope

Physician Burnout is on the Rise: Scope



Shanafelt & Noseworthy
(Mayo Clinic Proc., 2016)

Physician Burnout is on the Rise: Scope

○ Consequences (Noseworthy, Madara, et.al.)

- Physician suicide (~400/yr.)
- Patient safety
- Quality of care
- Health care costs
 - Direct: turnover, early retirement, less than full time work
 - Indirect: medical errors, unnecessary testing and referrals, greater malpractice risk, and possibly higher hospital admissions/readmissions

Physician Burnout is on the Rise: Scope

[Journal of General Internal Medicine](#)

April 2017, Volume 32, [Issue 4](#), pp 475–482

The Relationship Between Professional Burnout and Quality and Safety in Healthcare: A Meta-Analysis

Authors

[Authors and affiliations](#)

Michelle P. Salyers , Kelsey A. Bonfils, Lauren Luther, Ruth L. Firmin, Dominique A. White, Erin L. Adams, Angela L. Rollins

Review Paper

First Online: 26 October 2016

DOI: 10.1007/s11606-016-3886-9

Cite this article as:

Salyers, M.P., Bonfils, K.A., Luther, L. et al. J GEN INTERN MED (2017) 32: 475.
doi:10.1007/s11606-016-3886-9

3

Citations

92

Shares

1.5k

Downloads

Eighty-two studies including 210,669 healthcare providers were included. Statistically significant negative relationships emerged between burnout and quality and safety. In both cases, the negative relationship implied that greater burnout among healthcare providers was associated with poorer-quality healthcare and reduced safety for patients.

Physician Burnout is on the Rise: Scope

Annals of Internal Medicine

MEDICINE AND PUBLIC ISSUES

Estimating the Attributable Cost of Physician Burnout in the United States

Shasha Han, MS; Tait D. Shanafelt, MD; Christine A. Sinsky, MD; Karim M. Awad, MD; Liselotte N. Dyrbye, MD, MHPE; Lynne C. Fiscus, MD, MPH; Mickey Trockel, MD; and Joel Goh, PhD

- Approximately \$4.6 billion a year in the US related to physician turnover and reduced productivity is attributable to physician burnout
- Physician average replacement cost is \$254,700
- Average vacancy-adjusted revenue loss is \$109,800 – 151,900 (depending on age & specialty)
- Average reduction in clinical hours associated with burnout is 11.7 – 19% (depending on age & specialty)
- Estimated average cost per employed physician is \$5,900 – 10,800 (depending on age & specialty)

Interventions

Physician Burnout is on the Rise: Interventions

- Health Care executives are beginning to accept this as a system issue
 - “...most institutions operate under the erroneous framework that burnout and professional satisfaction are solely the responsibility of the individual physician.”
 - “There is a strong business case for organizations to invest in efforts to reduce physician burnout and promote engagement.”
 - Shanafelt & Noseworthy (Mayo Clinic Proc., 2016)

Physician Burnout is on the Rise: Interventions

- “An engaged physician workforce is requisite to achieving institutional objectives.”
- 2 pervasive myths
 - “...the belief that the steps necessary to cultivate physician well-being will conflict with other organizational objectives”
 - “...the assumption that all effective interventions to reduce burnout will be cost prohibitive”
 - Shanafelt & Noseworthy (Mayo Clinic Proc., 2016)

Physician Burnout is on the Rise: Interventions



- 
-  Acknowledge and assess the problem
 -  Harness the power of leadership
 -  Develop and implement targeted work unit interventions^a
 -  Cultivate community at work
 -  Use rewards and incentives wisely
 -  Align values and strengthen culture
 -  Promote flexibility and work-life integration
 -  Provide resources to promote resilience and self-care
 -  Facilitate and fund organizational science

FIGURE 5. Organizational strategies to reduce burnout and promote physician engagement. ^aOften will focus on improving efficiency and reducing clerical burden but should focus on whichever driver dimension (Figure 1) deemed most important by members of the work unit (Figure 3).

- Key drivers of burnout and physician engagement were identified, leading to implementation of these organizational strategies
- Over the following 2 years, the absolute burnout rate of their physicians decreased by 7%, despite an 11% rise in the absolute rate of burnout in physicians nationally using identical metrics.

Shanafelt & Noseworthy (Mayo Clinic Proc., 2016)

Physician Burnout is on the Rise: Interventions

Research Letter | Physician Work Environment and Well-Being

May 8, 2017

Workplace Factors Associated With Burnout of Family Physicians

Monee Rassolian, MD¹; Lars E. Peterson, MD, PhD²; Bo Fang, PhD²; [et al](#)

» [Author Affiliations](#)

JAMA Intern Med. Published online May 8, 2017. doi:10.1001/jamainternmed.2017.1391

ONLINE FIRST

Of those with burnout (n = 441), 57.1% reported working in a hectic, chaotic atmosphere compared with 26.5% of those without burnout, 91.4% reported feeling a great deal of job stress compared with 38.4% of the physicians without burnout.

Avoid chaos and reduce physician stress

- Leadership
- Communication
- Workflow
- Process

Physician Burnout is on the Rise: Interventions

**EHR
INTELLIGENCE**
xtelligent HEALTHCARE MEDIA
(<https://ehrintelligence.com/>)

Topic

NEWS

Using EHR Optimization to Address Physician Burnout

Provider organizations are working to address physician burnout, with EHR optimization offering one avenue for improving clinical workflows and productivity.

JAMIA Open, 4(2), 2021, 1–7
doi: 10.1093/jamiaopen/ooab018
Case Report



Case Report

EHR “SWAT” teams: a physician engagement initiative to improve Electronic Health Record (EHR) experiences and mitigate possible causes of EHR-related burnout

With Physician Burnout Rising, EHR Optimization Takes Center Stage

Health systems turn to informatics groups to alleviate stress on clinicians

DAVID BATHS JULY 26, 2019



Physician Burnout is on the Rise: Interventions

Healthcare Looks to Telehealth to Address Physician Burnout, Stress

mHEALTH
INTELLIGENCE
xtelligent HEALTHCARE MEDIA

August 14, 2020

Burden or boon with regard to burnout?

- COVID-19 led to abrupt increase in multiple factors that would likely increase physician burnout
- Telehealth allows for more flexible scheduling and setting for physician, improving work-life balance
- Helps replace revenue lost by decrease in office visits
- “Physician heal thyself” – telehealth allows physicians and providers experiencing symptoms of burnout to seek help for themselves more discretely and conveniently
- Providence Health promotes platform to physicians, providers and families

Physician Burnout is on the Rise: Interventions



The Emotional PPE Project

[Home](#) [About](#) [FAQ](#) [Media](#)

<https://emotionalppe.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

Physician Burnout is on the Rise: Interventions

What can an EHR do to reduce burnout?

- Quadruple Aim
 - Improve the health of the population
 - Improve the patient experience
 - Reduce per capita health care costs
 - Improve the physician's interaction with the EHR... make technology work for doctors/clinicians, not vice versa

Thank you!