Proven, effective strategies to prevent and treat provider burnout

Burnout is a serious syndrome that affects millions of healthcare professionals globally across all specialties. Whether you work in the E.R. or private practice, workplace stresses can accumulate and compound into burnout and other accompanying mental and physical health disorders.

Burnout can have a significant impact on healthcare professionals’ ability to provide compassionate care, but it can be difficult to identify and diagnose because of the variety of different ways it can manifest in people. By learning what burnout is, ways to recognize it, and how to handle it before and once it sets in, you can not only prevent burnout in your own practice but also know how to help patients and colleagues who are suffering from burnout themselves.

What exactly is burnout?

Burnout is a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress. It might sound like a 21st-century buzzword, but clinical awareness of burnout isn’t new. The term was coined in 1975 by a group of child psychologists and was described by Dr. H. J. Freudenberger in his study, *The staff burn-out syndrome in alternative institutions.*

Burnout is associated with other mental health repercussions including depression, spiritual or emotional exhaustion (EE), and depersonalization (DP). These can occur when the physician or HCP reaches their maximum ability to manage issues during patient care, resulting in care that is more about getting the work done rather than providing patients with considered, personalized care. As described by Ioanna V. Papathanasiou, “Studies often reported high positive correlation between burnout and depression,” including symptoms like anger, guilt, difficulty experiencing pleasure, and anxiety.

Burnout can also often manifest in bodily symptoms such as physical fatigue, which should not be ignored as one of the syndrome’s most characteristic symptoms.

“Studies often reported high positive correlation between burnout and depression...”

Ioanna V. Papathanasiou
Is burnout common among healthcare providers?
In 2022, Dr. Tait Shanafelt et al. found that physicians experience higher rates of burnout and lower job satisfaction than the general population. A 2023 Medscape survey of 9,100 physicians found burnout among clinicians at a high of 53%. One in five physicians studied also reported experiencing depression, up from 15% in 2018. This report documented some of the early and lingering effects of the COVID-19 pandemic on healthcare professionals in terms of professional satisfaction and burnout as a whole, which of course have yet to be studied in a long-term capacity.

Physicians aren’t the only HCPs to be affected by burnout. Early stage Advanced Practice Providers (APPs) reported having burnout at a large urban medical center surveyed by Meredith P. Ashooh et al. in 2019, which was attributed to facing the challenges of working in healthcare as an inexperienced provider before establishing proper coping mechanisms.

Burnout and depression among nurses
Nurses experience an astonishingly high rate of burnout. A national survey of 22,316 nurses reported three-fourths of nurses experiencing it, with two-thirds citing less compassion for their patients and two-thirds also identifying as being depressed. Half said they felt exhausted and overwhelmed, while only 25% sought professional mental healthcare. The impact of burnout can be significant in an era already rife with nurse staffing shortages, with 18-34% of nurses in the survey saying they planned to leave nursing.

Pharmacists and social workers are no less susceptible to the impact of long hours and work demands on a person’s psyche. Dr. Brianna McQuade et al. reported in 2022 an 88% burnout rate among hospital and ambulatory pharmacists, with the group reporting worsened burnout during the pandemic. In addition to COVID-19 precautions, the report also cited compounding, but perhaps more traditional, challenges that caused burnout including managing insurance, paperwork, and physician demands. A cross-sectional study on social workers demonstrated 61% burnout, with many participants citing increasing isolation from patients and coworkers as a significant factor.

Burnout is not just an individual problem; it can also be influenced by organizational factors. For example, healthcare organizations that prioritize productivity over patient care may contribute to feelings of burnout in their employees. Supervisors risk employee burnout by placing workers in a position that is not well-suited to their skills or not sufficiently supporting professional growth to help HCPs meet workplace needs and requirements. It is important for healthcare organizations and those who lead them to recognize the significant role they play in creating a work environment that supports employee well-being and reduces burnout.

75% of nurses report burnout
50% feel exhausted & overwhelmed
66% cite less compassion for patients
Only 25% seek professional mental healthcare

Medscape Nurse Practitioner Burnout & Depression Report 2022,
Roni Robbins | August 17, 2022
How is burnout identified?
The Maslach Burnout Inventory (MBI) is one of the most commonly used tools for identifying individuals with burnout. It was developed by Christina Maslach and Susan Jackson in the late 1970s and has since become the gold standard for measuring burnout in healthcare professionals and students.

The MBI is a ten-minute, validated survey that measures three domains of burnout across 22 symptoms to detect high emotional exhaustion, feelings of depersonalization or cynicism, and reduced personal accomplishment or efficacy:

- High emotional exhaustion refers to feelings of being emotionally drained or overextended and manifests as physical or emotional fatigue. It is often caused by prolonged stress or excessive workload, which can be additionally assessed through the combined use of the MBI with the Areas of Worklife Study (AWS).

- Depersonalization or cynicism refers to negative attitudes and feelings towards others, including coworkers and even patients. This can manifest in a number of ways that negatively impact patient care and team morale, including a callous attitude or lack of empathy towards others.

- Low personal accomplishment or efficacy is characterized by a sense of inadequacy or failure and a lack of feeling fulfillment from one’s work. There are a variety of factors that can cause this, including organizational issues such as insufficient resources. Burnout in HCPs is often associated with feelings of ineffectiveness or the inability to make a meaningful difference in the lives of patients.

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Effective burnout prevention strategies
Creating a diligent routine for preventing burnout should be a priority for every healthcare professional. By recognizing the warning signs and symptoms early, it’s possible to make an impact and even prevent burnout altogether.

There are many proactive methods that any healthcare professional can take — even the many of us who work long hours in high-pressure settings — to prevent reaching that low point that can take so much work to rebound from.

Here are a few tips for preventing burnout as an HCP:

1. Set realistic goals — There’s nothing wrong with wanting to perform or achieve, but setting unrealistic goals can lead to feelings of inadequacy and burnout. Set achievable, realistic professional goals that align with your values, priorities, and availability. You can always set a new one once you’ve achieved what you’re currently striving for!

2. Prioritize taking care of yourself — Self-care means more than just getting a massage once a year. Prioritize getting enough sleep every day, eating nutritious meals, drinking enough water, practicing stress reduction like meditation, exercising regularly, and doing things in your free time that bring you happiness including seeing friends. If you don’t think you have the time to take care of yourself, think about how much time you’ll have to spend picking up the pieces if you don’t.

3. Create and maintain healthy workplace boundaries — Boundaries can prevent burnout by helping you set limits on your time and your energy, both physical and emotional. You need to know when to say “no” to taking on additional professional responsibilities so that you can prioritize your personal life.

Identifying burnout early on and taking these kinds of steps to combat it is key to preventing it from becoming chronic and affecting job performance.
Treatment for burnout
When healthcare professionals start experiencing the early signs of burnout, it is important to take action and make changes to keep it from snowballing and affecting their work performance.

Here are some strategies for healthcare burnout solutions:

1. Adjust your workload — Delegate tasks appropriately and don’t hesitate to talk to your supervisor about reducing or adjusting your workload if you need to. It’s not uncommon to experience burnout in a healthcare workplace and it is the job of your supervisors to be there to respond to your work needs appropriately for both you and your team as a whole.

2. Take time off — It’s essential to recharge sometimes by engaging in activities that you enjoy. Reduce your stress by taking a break from work, even if that vacation just means spending time relaxing at home.

3. Seek support — It is important not to feel alone and become isolated when you’re experiencing depression or burnout. Reach out to trusted colleagues, mentors, or mental health professionals to provide emotional support and help you develop coping and stress reduction strategies.

CME for preventing and responding to burnout
In addition to these strategies, there are also many CME courses available that can equip healthcare professionals with valuable information on preventing and responding to burnout in patients and in themselves.

Here are some of the lectures on burnout and the specific topics that they cover:

1. Physician Burnout and Resilience Strategies That Work — Learn to screen for and manage burnout in physicians

2. Addressing Burnout: Evidence-based Strategies for Physicians — Evidence-based strategies for physician wellness to help HCPs prevent burnout

3. Provider Burnout: Current State and Future Solutions — Learn to interpret the Maslach Burnout Inventory and reduce your own burnout to improve patient outcomes

4. Causes and Prevention of Physician Burnout — Help prevent burnout in yourself and other clinicians

By taking courses to learn about burnout — how to prevent it, how to manage it, and how to recognize it in others — you can not only improve the stability of your own practice, but also help patients and colleagues who are suffering from burnout themselves. Want to learn more? Find other CME/CE courses to reduce physician burnout so you can recognize the signs and take the earliest opportunity to prevent or treat burnout by making changes to your workload, seeking support, and staying informed.