

EMPLOYED PRACTICE

Tackling Burnout in Employed Physicians

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Looking for greater flexibility, influence, and self-care opportunities within your organization can help keep burnout at bay.

Burnout, the significant mental and physical exhaustion brought on by a stressful work environment, has become a growing problem in the medical world.

With burnout rates among physicians exceeding 40 percent, physicians need tools to combat the personal and professional dysfunction that hurts themselves, their loved ones, their coworkers, and their patients.¹ Physicians who are overextended and unable to work at peak performance weaken patient satisfaction and quality of

care, and 40 percent of them still exhibited symptoms of burnout.³

The challenge of physician burnout requires ongoing strategies to improve physician self care, perceived empowerment, and recognition of accomplishments at multiple levels within an organization. Here are a few key areas that employed physicians can address:

Know your limits. During medical training, students and residents can develop a “superhero” mentality because the responsibility for patient care and outcomes falls directly on the trainee – a mentality they may then transfer into practice.⁴ In addition, employed physicians often find it difficult to delegate, especially if they have not hired their staff and fear certain tasks will not be done correctly. Delegation is an important aspect of

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care. Medical errors and liability increase. High rates of burnout are associated with greater physician and staff turnover rates, increased physician drug or alcohol use, and even physician suicide.¹

Employed physicians face additional challenges as they often lack autonomy and flexibility in setting productivity demands and quality markers. Additionally, they may have little input on staffing decisions, practice protocols, and office resources. About 58 percent of family physicians are employed, and the rate is even greater among younger physicians.² As more and more physicians become employed, either voluntarily or not, acknowledging burnout and refocusing on physician wellness become paramount. Even in the best health care systems, physicians struggle with burnout; a Mayo Clinic survey found that even when 79 percent of physicians reported feeling very satisfied or satisfied with their organizations, 40 per-

cent of them still exhibited symptoms of burnout.³ leadership because there are too many tasks to tackle alone. Take time to learn which of your staff can appropriately take responsibility for items you do not need to do yourself. Communicate your needs for clinical and clerical support, and strive to have everyone working to the full scope of their capabilities. Similarly, understand your defined job responsibilities and feel empowered to reject doing something that genuinely falls out of your scope or level of compensation. When asked to take on new responsibilities, seek ways to balance it by potentially transferring other duties or negotiating an increase in compensation or time off. By limiting your responsibilities to what truly belongs to you, you waste less energy.

Focus on what you can change. There will always be areas you cannot change. You may not be able to choose your electronic health record (EHR) or select your practice manager; however, identifying those areas where you

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do have input is vital. Ask to serve on committees that matter to you. Many organizations have ways for staff to provide comments or express concerns, so look for these opportunities and be available for meetings on important issues. Even in challenging environments, having some areas where you can exert control can help you feel empowered.

Identify appropriate targets for your concerns or questions. Understanding the hierarchy in your organization is important. If you have concerns about your EHR or workflow but do not know who oversees those areas, you may spend a lot of time and energy complaining to people who cannot fix the problem. Learn which administrators are most receptive to hearing your input, and use them to help initiate changes. Additionally, when coming forward with concerns, avoid presenting complaints without having possible solutions. Aim to be a problem solver.

Remember the importance of self-care. Physicians often struggle with self-care because sacrificing sleep, exercise, and outside interests often played a role in how we got where we are. Medical school and residency required grueling hours and intense focus.

Physical, emotional, and spiritual rejuvenation take time away from our seemingly endless office schedules, call schedules, and overfilled task boxes. Do not assume you will just find time for these necessary “time outs.” Most offices require time-off requests three to six months in advance, so sit down and schedule them. Consider taking a vacation day as a “mental health day” once every month or two. Knowing you have this time to step away from your office burdens can give you something to look forward to when frustration creeps in.

In addition to taking time off, schedule time weekly for activities that are important to you. If you don't commit to scheduling those items, it becomes easy to let them stay on the bucket list. Regularly disconnecting from the office is also helpful. Turn off your cell phone and pager, defer your emails or tasks until a later time, and reconnect with family, friends, or even just yourself. At first it may be difficult to shift your focus, but you can take better care of your patients when you also take care of your needs.

Keep meaning in your work. Identify what drove you to medicine, and reconnect with your passion, maybe through volunteering your services to a community in need or mentoring medical students. Work with your employer to identify mutually beneficial career development opportunities that help your continued progression through increased clinical skills, research, or teaching. One of my colleagues keeps a “feel good journal” in which he writes down compliments and encouraging words he receives from patients and coworkers. When a day is particularly tough, looking back on the positive impact you have had on individuals can help remind you

ADDITIONAL RESOURCES FOR PREVENTING, RECOGNIZING, AND TREATING BURNOUT

American Academy of Family Physicians

<http://www.aafp.org/about/constituencies/resources/new-physicians/burnout.html>

American Medical Association

<https://www.stepsforward.org/modules/physician-burnout>

Family Practice Management

“Physician Burnout: Its Origin, Symptoms, and Five Main Causes” <http://www.aafp.org/fpm/2015/0900/p42.html>

“Eight Ways to Lower Practice Stress and Get Home Sooner” <http://www.aafp.org/fpm/2015/1100/p13.html>

“Four Tools for Reducing Burnout by Finding Work-Life Balance” <http://www.aafp.org/fpm/2016/0100/p28.html>

your work is important. What we do is often hard, but it can also be rewarding and reinvigorating.

Know when to move on. Most health care systems seek to empower and grow the skills of their employed physicians. They solicit feedback and identify areas for improvement. However, there are times when an environment is unusually toxic with little regard for employee wellness or a life apart from patient care. If physician input is ignored or discouraged and if the burden placed on providers is unreasonable, it may be necessary to look for a better working environment.

Physician burnout does not have a single, all-encompassing solution, and the suggestions above may not be easy. Overcoming burnout requires not only ongoing self care but also the recognition by our employers and ourselves that the challenges of caring for the sick are exacerbated when they are not acknowledged. In employed situations, it can become easy to feel like a mere cog in a large, uncaring machine. But even in these environments, we can be voices for change and find resources to prevent burnout. **FPM**

1. Medscape Physician Lifestyle Survey 2015. <http://wb.md/1BVCDqM>. Accessed May 6, 2016.

2. Singleton T, Miller P. The physician employment trend: what you need to know. *Fam Pract Manag.* 2015;22(4):11-15.

3. Shanafelt TD, Gorringer G, Menaker R, et al. Impact of organizational leadership on physician burnout and satisfaction. *Mayo Clin Proc.* 2015;90(4):432-440.

4. Drummond D. Physician burnout: its origins, symptoms, and five main causes. *Fam Pract Manag.* 2015;22(5):42-47.

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