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Burnout among cardiologists: a cause for alarm

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Conflicts and disclosures – none



Burnout reported by 50% of US physicians



Triad of symptoms:

Emotional exhaustion

Depersonalization

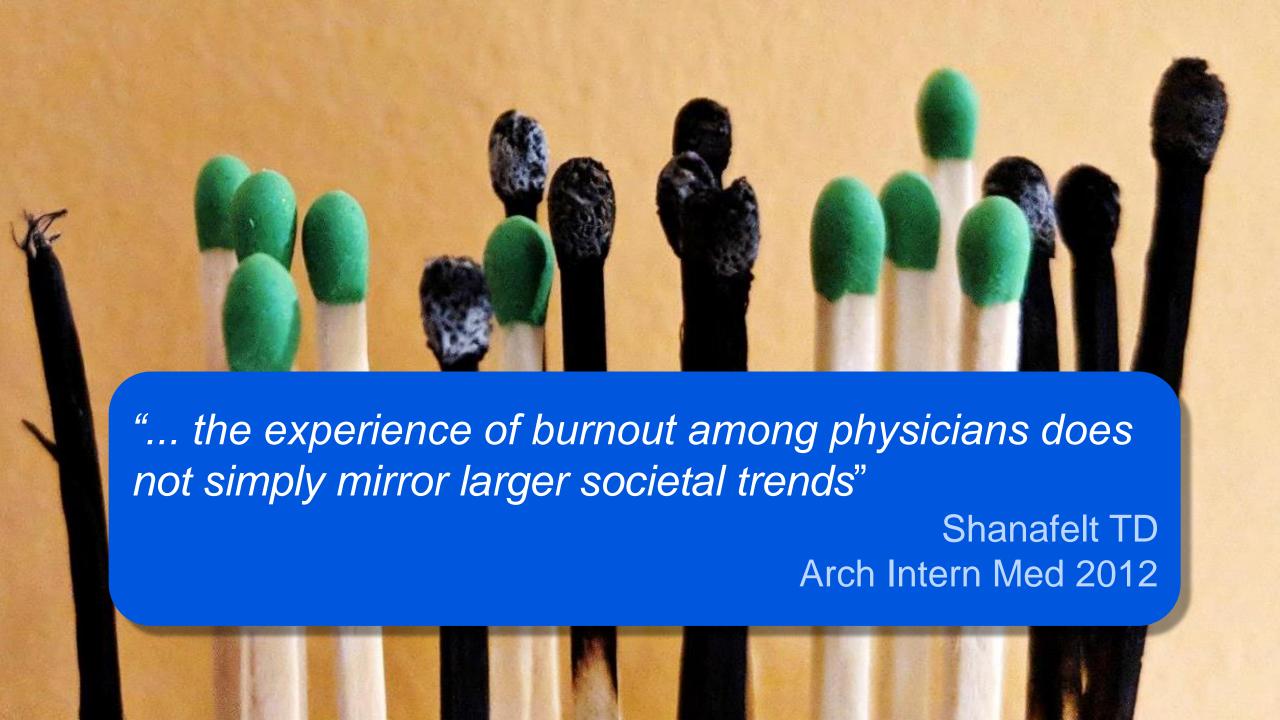
Sense of diminished accomplishment

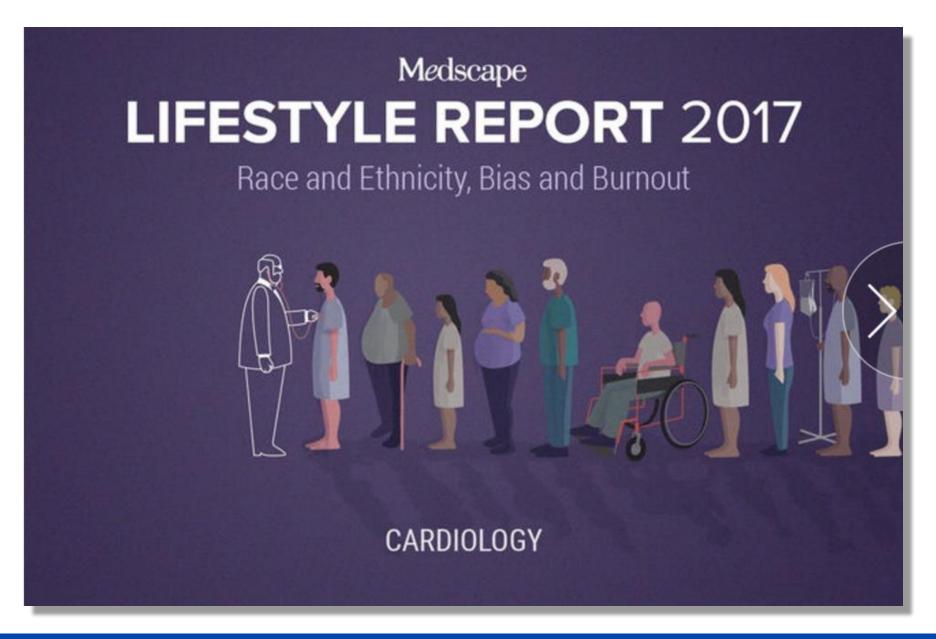


Cynicism

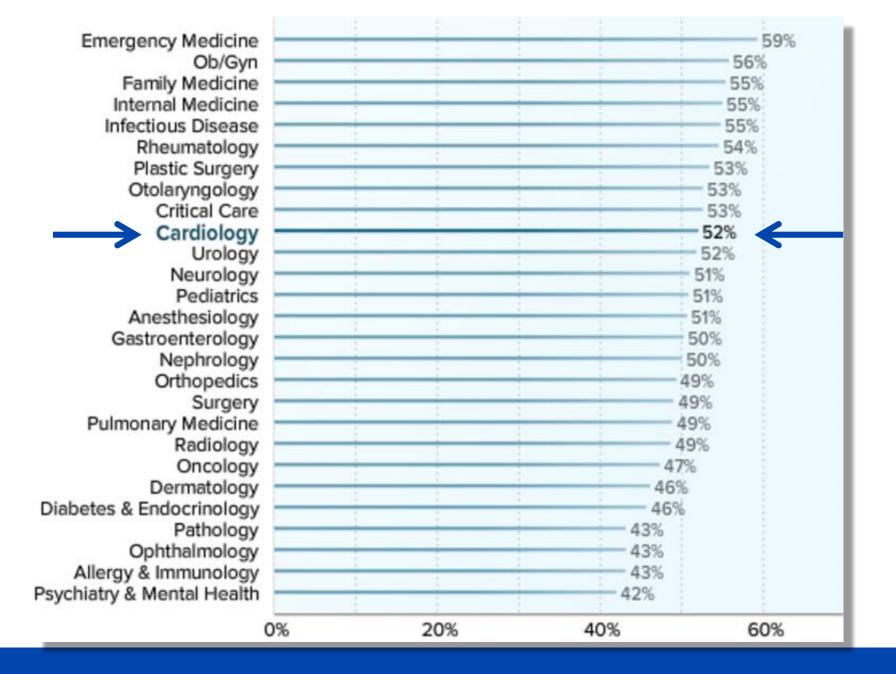
Inefficiency



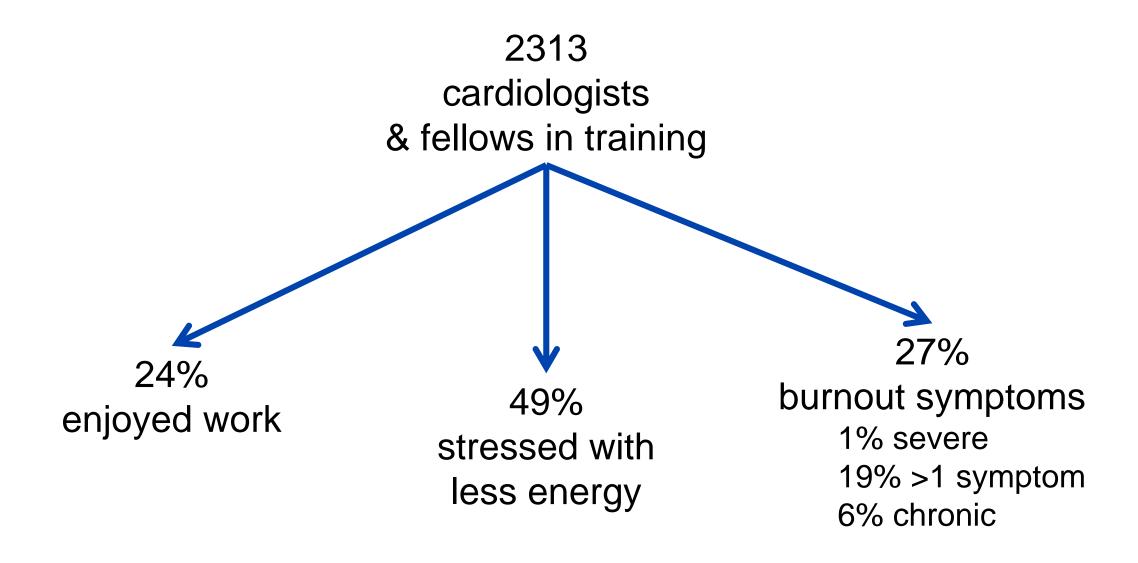




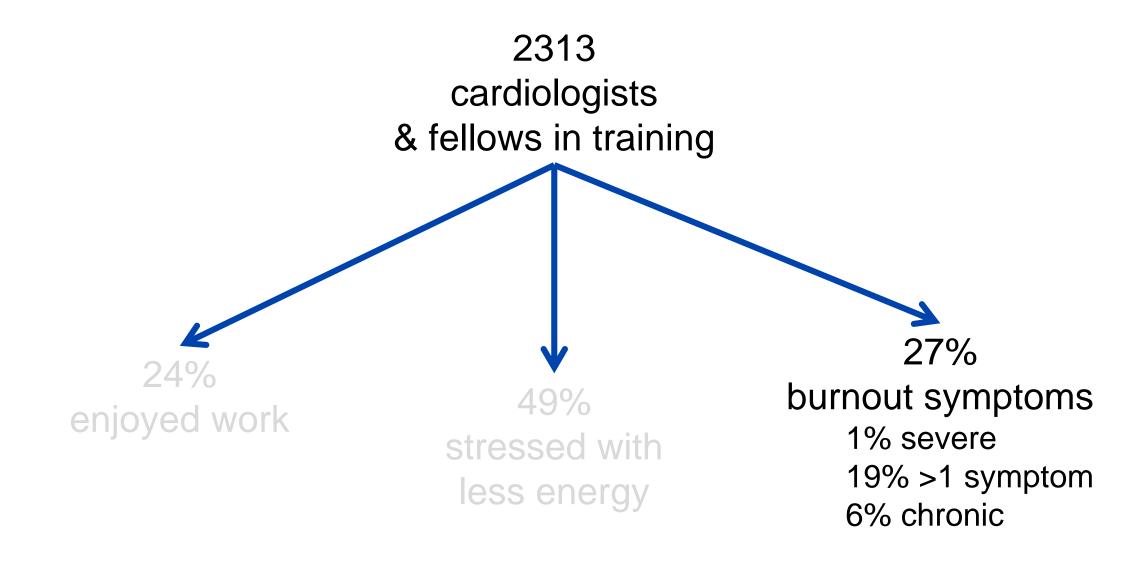




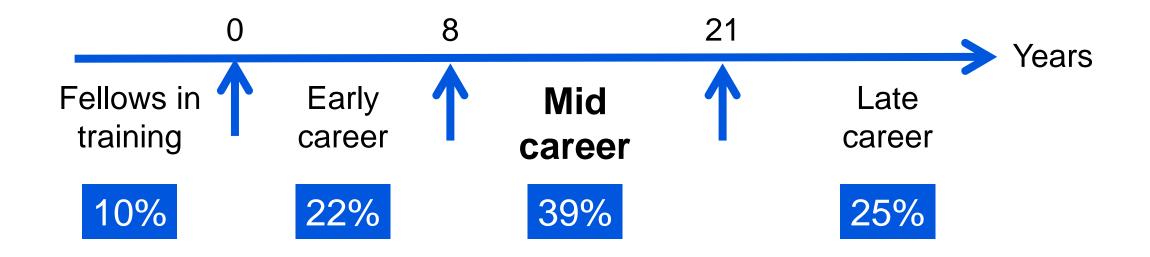






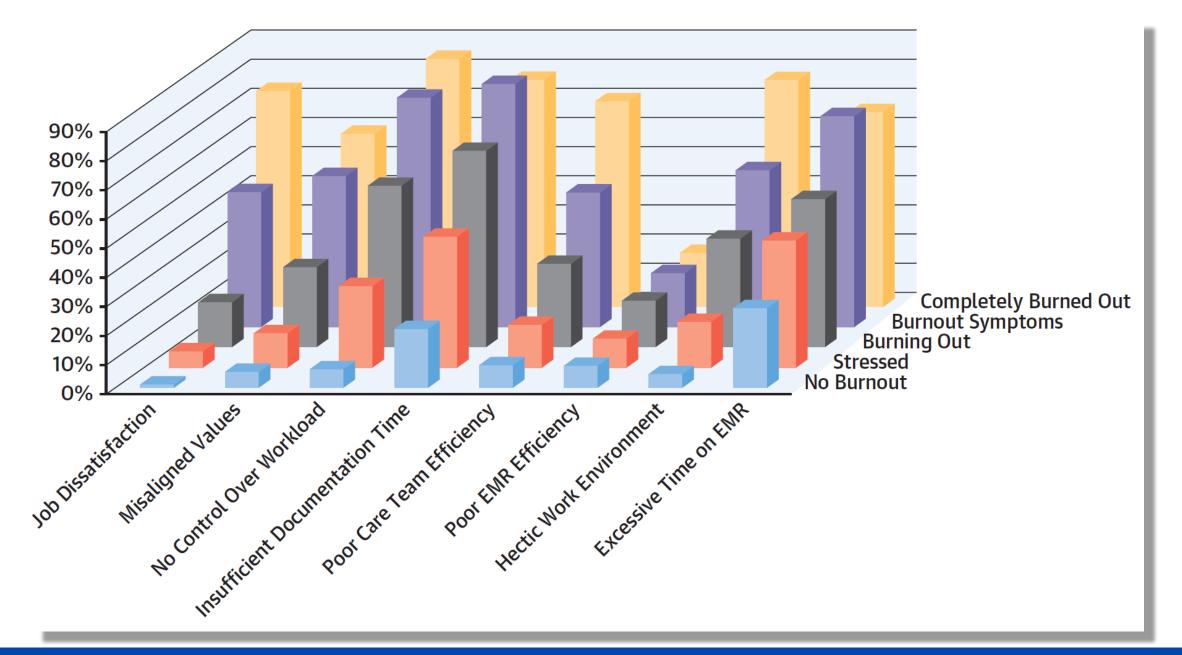






Burnout prevalence







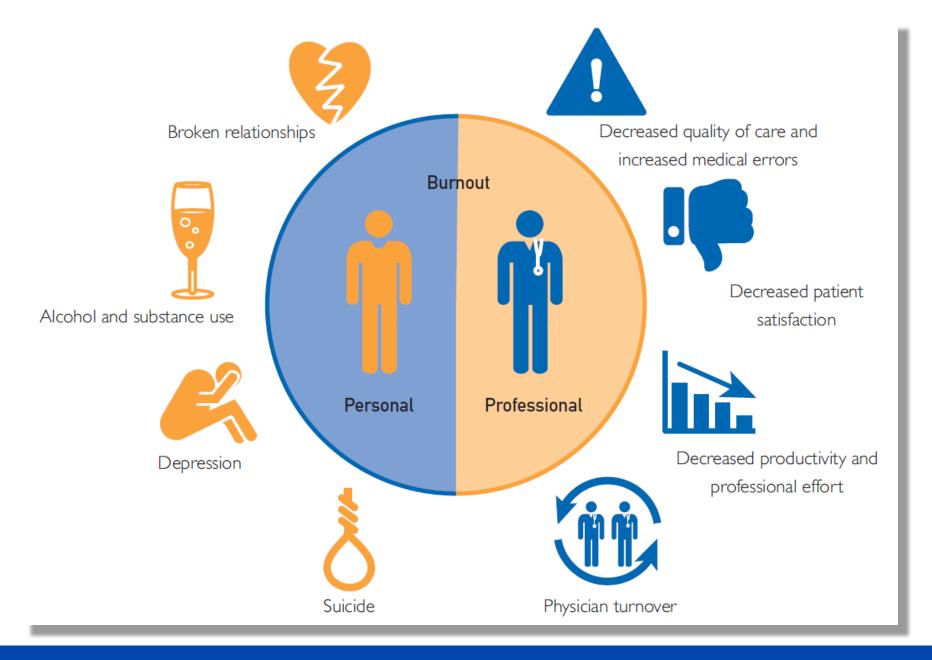
Contributing factors to burnout

Introduction of electronic health record (EHR)

- ↑ Clerical burden and e-mail
- ↑ Ever-expanding knowledge base
- ↑ Maintenance of certification/accreditation requirements
- ↑ Regulatory requirements
- ↑ Billing requirements
- ↑ High-level of scrutiny patient satisfaction scores, metrics
- ↑ Work hours

Loss of physician autonomy







theguardian

By the end of my first year as a doctor, I was ready to kill myself

Doctor suicide is the medical profession's grubby secret - but it's unclear why some of those dedicated to preserving life silently plot their own deaths

• 'Junior doctors make sacrifices because we love our job' - video





Executive Leadership and Physician Well-being: Ocrossmark
Nine Organizational Strategies to Promote
Engagement and Reduce Burnout



Abstract

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These are challenging times for health care executives. The health care field is experiencing unprecedented changes that threaten the survival of many health care organizations. To successfully navigate these challenges, health care executives need committed and productive physicians working in collaboration with organization leaders. Unfortunately, national studies suggest that at least 50% of US physicians are experiencing professional burnout, indicating that most executives face this challenge with a disillusioned physician workforce. Burnout is a syndrome characterized by exhaustion, cynicism, and reduced effectiveness. Physician burnout has been shown to influence quality of care, patient safety, physician turnover, and patient satisfaction. Although burnout is a system issue, most institutions operate under the erroneous framework that burnout and professional satisfaction are solely the responsibility of the individual physician. Engagement is the positive antithesis of burnout and is characterized by vigor, dedication, and absorption in work. There is a strong business case for organizations to invest in efforts to reduce physician burnout and promote engagement. Herein, we summarize 9 organizational strategies to promote physician engagement and describe how we have operationalized some of these approaches at Mayo Clinic. Our experience demonstrates that deliberate, sustained, and comprehensive efforts by the organization to reduce burnout and promote engagement can make a difference. Many effective interventions are relatively inexpensive, and small investments can have a large impact. Leadership and sustained attention from the highest level of the organization are the keys to making progress.

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Acknowledge and assess the problem



Harness the power of leadership



Develop and implement targeted work unit interventions



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









IATIONAL ACADEMY OF MEDICINE

Home > Initiatives > Clinician Resilience and Well-being > Commitment Statements on Clinician Well-Being

ABOUT THE NAM

PROGRAMS

PERSPECTIVES

NEWS

SUPPORT

MEMBER RESOURCES



National Academy of Medicine

Action Collaborative on 9 Clinician Well-Being and Resilience

Organizational Commitment Statements

To provide an opportunity for organizations across the country to discuss and share plans of action to reverse clinician burnout and promote clinician well-being, the National Academy of Medicine (NAM) has collected statements describing organizational goals or commitments to action. By sharing their commitment to improving clinician well-being and reducing clinician burnout, these organizations are an active contributor to the NAM's Action Collaborative on Clinician Well-Being and Resilience. The following organizations have submitted formal statements:



https://nam.edu/initiatives/clinician-resilience-and-well-being/commitment-statements-clinician-well-being/

VIEWPOINT

Addressing Physician Burnout The Way Forward

Individual level

- Professional responsibility to care of themselves
- Sleep, exercise etc
- Community building
- Identify priorities
- Work-life balance

ealth care delivery system and the field of lave experienced tremendous change over the e. At the system level, narrowing of insurance employed physicians, and financial pressures ted in greater expectations regarding produc-

eased Institutional level

Ikno Recognize effect of tion r physician well-being

Assess

- Improve practice efficiency and productivity
- Flexibility e.g. schedules
- Improve work-life balance

National and state levels

- Documentation
- Regulations

reported error

hospitalized p

tween burnout

sicians devote

the particularly

- Licensing applications
- **Insurance company** requirements
 - ...what contributes to good medical care?

o care.¹ Therefore, the high rates of burnn US physicians can be considered both a unction in the health care delivery system ontributing to dysfunction.3 To improve alth as well as the patient experience and cost of care in the United States, it will be nprove the work-life of physicians and other

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Shanafelt TD: JAMA 2017



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