

Managing Clinician Burnout

Clinician burnout is an ongoing problem in healthcare, particularly since the COVID-19 pandemic. Recent surveys from the American Medical Association and *Medscape* show some improvement in burnout rates; however, almost half of physicians still report feelings of burnout, with numbers higher for female physicians and certain specialties.¹

Because burnout still persists, healthcare organizations should exert due diligence and

prioritize their clinicians' health and well-being. Leaders should be trained to recognize and address burnout; they also should identify and modify processes and systems that fuel burnout and strive to create positive work and learning environments.

The following risk tips include more guidance on mitigating clinician burnout and fostering professional well-being.²

1

Consider creating a leadership role or function that oversees and facilitates professional well-being efforts for all clinicians to ensure that addressing burnout remains a priority for the organization.

2

Monitor the number of hours that clinicians are required to work, try to distribute workweeks effectively, and adjust staffing procedures and schedules when possible. Make sure clinicians receive adequate breaks.

3

Pay attention to clinicians' time constraints. Assess total workload and clinicians' obligations, including continuing education, maintenance of certification, required institutional learning modules, etc.

4

Provide adequate workplace safety resources, including sufficient and effective personal protective equipment, hand hygiene and respiratory hygiene supplies, cleaning products, etc.

5

Continually assess clinicians' health and well-being to respond to their needs and identify risks or emerging issues. Conduct assessments using validated [measurement tools](#) to help minimize burden, protect privacy, and address any stigma or pressure that clinicians may perceive related to monitoring or reporting burnout.

6

Work proactively to reduce the stigma and eliminate the barriers associated with obtaining support and services for managing burnout. Identify high-quality mental health professionals and counseling options available to support clinicians, and eliminate obstacles that discourage access to professional and personal support programs for individual clinicians.

7

Focus on communication and teamwork as a critical part of organizational culture, and offer training on power skills such as situational awareness, collaboration, adaptability, and more.

8

Make access to various resources — such as coaching, small-group learning, discussion groups, and professional and personal development — available to clinicians. Facilitate peer support programs, and create opportunities for professional connection.

9

Promote a work culture in which clinicians feel supported and able to speak up without repercussions. Give them a [psychologically safe environment](#) to openly talk about barriers to their well-being, including stress and burnout.

10

Assess your organization's environment, culture, and infrastructure to identify factors that might contribute to clinician burnout. Closely monitor systems and technology for negative consequences, and create plans to mitigate any issues.

11

Encourage clinicians to report safety incidents, such as encounters with violent or aggressive people and environmental hazards; adopt policies and procedures for immediate follow-up.

12

Evaluate how business and management decisions may affect work demands and resources, patient care quality and safety, and levels of burnout; work with leaders across the organization to improve informed decision-making.

13

Support the implementation of new ideas, approaches, and technologies that may enhance clinicians' well-being and improve quality of care. Implement evidence-based approaches to reduce the risk of burnout while ensuring the appropriate development of competencies, skills, professionalism, and ethical standards.

14

Incorporate clinicians' concerns and feedback into quality improvement projects, and monitor for progress.

Resource

For additional information on this topic, see MedPro's [Risk Resources: Burnout](#).

Endnotes

¹ American Medical Association. (2024, July 2). *Physician burnout rate drops below 50% for first time in 4 years*. Retrieved from www.ama-assn.org/practice-management/physician-health/physician-burnout-rate-drops-below-50-first-time-4-years; McKenna, J. (2024, January 26). *Medscape physician burnout & depression report 2024: 'We have much work to do.'* Medscape. Retrieved from www.medscape.com/slideshow/2024-lifestyle-burnout-6016865#1

² The risk tips in this publication are based on the following sources: American College of Physicians. (n.d.). *Top 10 culture change interventions to reduce turnout and improve physician well-being*. Retrieved from www.acponline.org/practice-resources/physician-well-being-and-professional-fulfillment/top-10-culture-change-interventions-to-reduce-burnout-and-improve-physician-well-being; National Academies of Sciences, Engineering, and Medicine. (2019). *Taking action against clinician burnout: A systems approach to professional well-being*. Washington, DC: The National Academies Press. doi: <https://doi.org/10.17226/25521>; Berg, S. (2020, March 12). *6 big things that must change to beat physician burnout*. American Medical Association. Retrieved from www.ama-assn.org/practice-management/physician-health/6-big-things-must-change-beat-physician-burnout; National Academies of Sciences, Engineering, and Medicine. (n.d.). *Checklist for health care leadership to take action against clinician burnout*. Retrieved from <https://nam.edu/systems-approaches-to-improve-patient-care-by-supporting-clinician-well-being/checklist-for-health-care-leadership-to-take-action-against-clinician-burnout/>

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