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Burnout Prevention in Primary Care Providers

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Burnout Prevention in Primary Care Providers

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CASTLETON FAMILY HEALTH CENTER

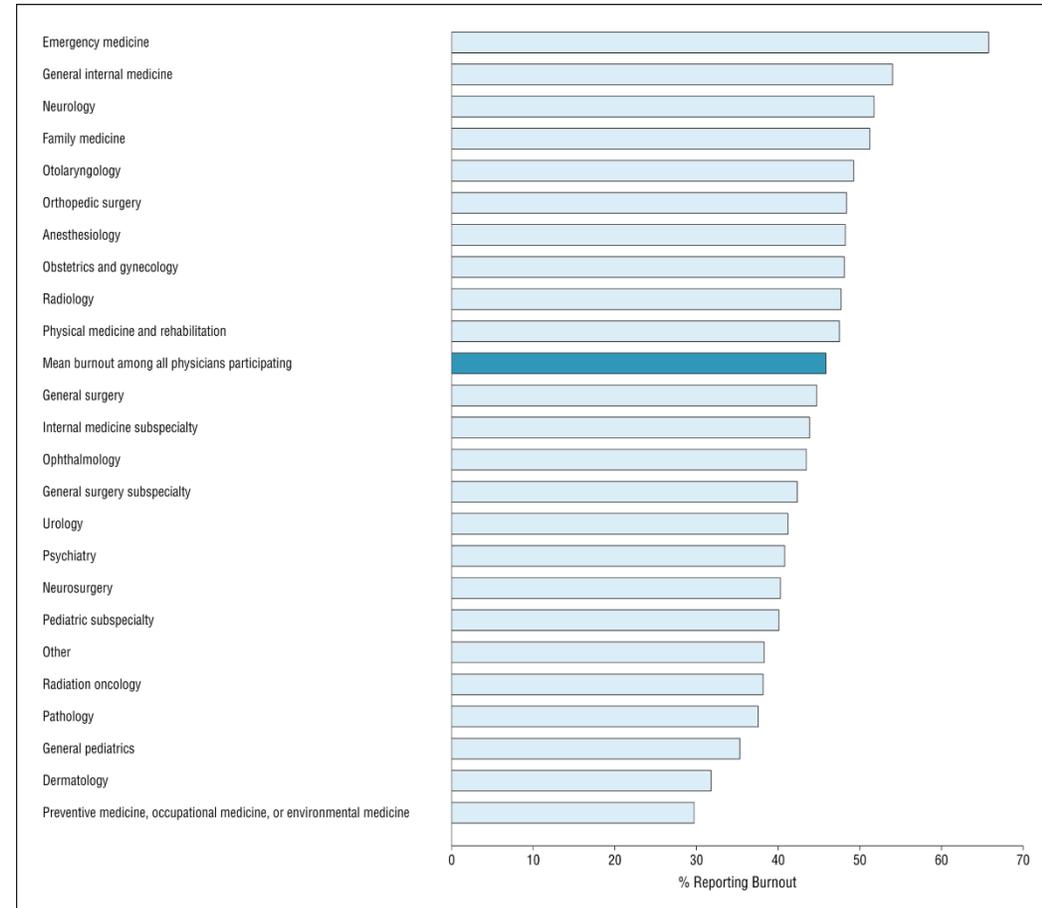
BOMOSEEN, VERMONT

JULY-AUGUST, 2015

DR. BRADLEY BERRYHILL

2-Problem Identification

- Burnout is typically defined as:
 - 1) emotional exhaustion
 - 2) depersonalization of patients
 - 3) decreased perception of personal accomplishments
- Compared to the general population physicians are more likely to work >60hr/wk, be dissatisfied with work/home balance, and develop signs and symptoms of burnout. Primary care providers, Emergency medicine physicians, and neurologists, have the highest risk for burnout.
- Burnt-out physicians are less communicative with patients leading to inefficient treatment plans, longer recovery times, and an overall decrease in patient satisfaction.
- In Vermont, shortages of family and internal medicine physicians has lead to some practices limiting or denying new patients. Work is spread over too few providers.



3-Public Health Cost

- Burnout of providers correlates with increased rates of specialist referrals, medical errors, and malpractice. All of which increase health care costs.
- Medical errors, though not solely caused by burnout, affect 10% of hospitalized patients causing between 44,000 and 98,000 deaths per year in the US. These errors cost \$17.1 billion annually.
- In Vermont, medical errors account for approximately 200 deaths per year and as much as \$63 million in preventable costs.
- Burnout can also increase the rate of physician turnover. The turnover rate among physicians has increased, from 5.9% in 2009 to 6.8% in 2013.
- Some estimates put the cost of recruiting a new physician at \$40,050. In addition to this cost, departure of a physician causes losses from gross billing, inpatient revenue, and specialty referral revenue that can range from \$600,000 to \$800,000.
- Models show that reducing turnover by 1% in an health care organization employing 3,000 workers with an average salary of \$45,000 can reducing costs by \$1.3 million annually

4-Community Perspective

- Interviews were conducted with community members involved in the primary healthcare setting as well as in the promotion of wellness and mindfulness.
 - Dr. Bradley Berryhill, MD – Medical Director at Community Health Centers of the Rutland Region
 - Dr. William Kelley, Ph. D. – Founder of the Pyramid Holistic Wellness Center and mindfulness instructor
- Interviewees agreed that burnout is a pervasive problem within Rutland County that increases stress and negatively affects performance in workers across many fields including primary healthcare.
- Factors they contributed to burnout included:
 - Unrealistic demands placed on employees
 - Existence of “24 hour data stream” that must be constantly monitored
 - Decrease in work-free leisure time
 - Society valuing hard workers over happy workers
- Both suggested mindfulness training as possible solution to preventing burnout
 - Train employees to “be in the moment” and focus on the task at hand
 - Prevent work errors by being mindful of surroundings and circumstances
 - Cheap and relatively simple technique to teach

5-Intervention and Methodology

- Studies show that mindfulness education can improve well-being and associations with patient care as well as improve interpersonal relationships. Mindfulness can also decrease stress, anxiety, and improve the quality of life of the people who practice it.
- Based on the community perspective and literature review, mindfulness training is a potential solution to decreasing and/or preventing burnout in Rutland County primary health care providers. This in turn may improve health care outcomes and patient satisfaction in the region.
- Before such a program can be organized however employee interest must first be evaluated as it could be the limiting factor to successful mindfulness training.
- Surveying the employees of Community Health Centers of the Rutland Region would be helpful in determining the need for and overall interest in a mindfulness program. Employee opinion regarding the amount of time willing to spend on such a program was also assessed.

6A-Results

- The survey was constructed through the online survey company SurveyMonkey to gauge Community Health Centers of the Rutland Region employees' interests towards mindfulness training. The survey also attempted to assess workers' mindfulness as well as potential burnout symptoms recently experienced.
- Select questions from both the Mindfulness Attention Awareness Scale and Oldenburg Burnout Inventory were utilized to estimate employees' mindfulness and risk of burnout, respectively. Limited demographics and anonymous employment information was also gathered.
- The survey consisted of seventeen multiple choice, matrix scale, and single textbox questions. In order to obtain the highest response rate, the survey remained open for three weeks, two weeks beyond the end of this rotation.
- The survey was distributed to approximately 300 employees across seven Rutland County community health centers. In addition to healthcare providers, administrative workers were also surveyed.
- See below for survey.

6B-Results (Survey Questions)

1. What is your age?



- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

2. In a typical week, about how many hours do you work for Community Health Centers of the Rutland Region?

5. Please indicate how frequently you experience the following:

	Almost always	Very frequently	Somewhat frequently	Somewhat infrequently	Very infrequently	Almost never
I find it difficult to stay focused in what's happening in the present.	<input type="radio"/>					
It seems I am "running on automatic," without awareness of what I am doing.	<input type="radio"/>					
I find myself preoccupied with the future or the past.	<input type="radio"/>					
I do jobs or tasks automatically, without being aware of what I'm doing.	<input type="radio"/>					

3. In total, how many years have you worked in primary care?

4. Which of the following best describes your work:

- I work mostly with patients
- I do mostly administrative work
- I spend equal time doing administrative work and seeing patients

6. Please indicate if you agree or disagree with the following statements:

	Totally disagree	Disagree	Agree	Totally agree
I can tolerate the pressures at my work very well	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After work, I have enough energy for leisure activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I work I usually feel energized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I always find new and interesting aspects in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel more and more engaged in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find work a positive challenge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. In the past 6 months, have you experienced any of the following:

- Associating patients with just their illness
- Feeling as if your work is not meaningful
- Emotional exhaustion

8. Would you be interested in learning about ways to prevent these experiences?

- Yes
- No

9. How many hours per week would you be willing to spend on learning techniques to prevent these experiences?

7-Evaluation of Effectiveness & Limitations

- Evaluation of Effectiveness

- The survey remained open to Community Health Centers of the Rutland Region employees beyond the end of this rotation. It was thought that giving employees ample time to complete the survey would lead to a better understanding of mindfulness throughout the employee population. Because data was still being collected at the time this report was published the effectiveness of the survey is difficult to establish currently.
- However, attitudes toward the survey itself, and its potential to glean mindfulness and burnout information from employees, was positive. Once survey results are collected we can evaluate whether or not employees would likely participate in mindfulness workshops. We can also measure the effectiveness of the survey based on the number of responses received.

- Limitations

- Survey data was still being collected by the time this rotation had concluded making it challenging to determine if employees would value mindfulness training.
- The survey itself does not directly provide a way to decrease burnout among primary care workers. It is a discrete data point for future intervention to build off of.
- Survey results may indicate that employees would prefer a different method to treat burnout.

8-Recommendations for Future Intervention

- Once survey data is collected and analyzed decisions on whether or not to move forward with employee mindfulness training can be explored. Relevant information would include:
 - The level of mindfulness in employees
 - Estimated proportion of workers with burnout symptoms
 - Differences in rates of burnout between healthcare providers and administrative employees
 - Willingness to decrease or prevent burnout symptoms through mindfulness training
- Future projects can also address a number of factors regarding mindfulness training, including:
 - Researching and obtaining resources necessary to organize mindfulness workshops
 - Surveying employees during and after training to determine the effectiveness of mindfulness workshops

9-References

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