

WORK UNIT LEVEL DRIVERS OF BURNOUT AMONGST ADVANCED PRACTITIONERS IN OUTPATIENT HEMATOLOGY PRACTICE AT AN ACADEMIC MEDICAL CENTER Amber B. Koehler, PA-C, Patricia A. Gerber, APRN, CNP, Robin R. Klebig, APRN, CNP - Division of Hematology, Mayo Clinic Rochester

BACKGROUND

We noticed increasing negativity and dissatisfaction within our work unit and aimed to better understand these dynamics in the context of our practice. In searching the literature on health care provider burnout, we identified validated evaluation tools including the Maslach Burnout Inventory (MBI) and the Areas of Work-Life Survey (AWS). Much has been written about physician burnout, but the literature on advanced practitioner (AP) burnout is still evolving.

RESULTS

- response rate
- 87.5% of APs reported experiencing burnout a few times per month or more
 - 62.5% of APs reported experiencing burnout a few times per week or more
 - 25% of APs reported experiencing burnout daily
- MBI subscale analysis scores demonstrated [mean(SD)]:
 - High levels of emotional exhaustion: 40.4 (9.8)
 - Moderate/High levels of depersonalization: 12.1 (5.4)
 - Low levels of personal achievement-related burnout: 45.3 (4.1)



AIM

First, we aimed to better characterize levels of burnout amongst APs in our outpatient Hematology practice using the MBI. At the same time, we aimed to understand areas of mismatch between job role and AP expectations utilizing the AWS that may be contributing to the levels of burnout reported on the MBI.

METHODS

We administered the Maslach Burnout Inventory (MBI) and the Areas of Work-life Survey (AWS) electronically and anonymously. Responses to the MBI were summarized using mean and standard deviation (SD); responses to AWS were summarized in percentages of match/mismatch/major mismatch. We then identified top areas of work unit level mismatch/major mismatch to create actionable interventions with a goal of decreasing overall burnout.

• All APs in the work unit (n=8) completed the surveys for a 100%

- I feel I'm working too hard on my job
- 2. I feel burned out from my work
- 3. I feel frustrated by my job
- 4. I feel emotionally drained from my work
- I feel used up at the end of the workday
- I feel fatigued when I get up in the morning and have to face another day on the job
- I feel like I'm at the end of my rope
- Working with people all day is really a strain for me
- Working with patients directly puts too much strain on me

Figure 1: Emotional exhaustion subscale questions listed from highest scoring contributing factors to lowest

- - Workload
 - Frequency of interruptions in a day (100%)
 - Amount of work required to complete in a day (87.5%)
 - Intensity of demands from customers (87.5%)
 - Control

 - Participation in decisions that affect one's work (87.5%) • Capacity to influence decisions that affect one's work (87.5%)
 - Reward

 - Amount of time they do work they truly enjoy (75%)

SUMMARY

A significant proportion of outpatient hematology APs at a large academic medical center report high levels of burnout, primarily marked by high levels of emotional exhaustion and moderate/high levels of depersonalization. Despite the high level of overall burnout, there is low personal-achievement related burnout. Potential actionable work unit level drivers of burnout identified were primarily noted in the AWS domains of workload, control, and reward.

• The AWS revealed several areas of mismatch/major mismatch (%) between AP expectations and current job role across the following domains:

Access to perks at work (87.5%)

 No work unit level factors with significant mismatch/major mismatch in the domains of Community, Fairness, or Values were identified. The frequency of interruptions in my workday

Counts/frequency: Just Right (0, 0.0%), Mismatch (3, 37.5%), Major Mismatch (5, 62.5%)



he amount of work to complete in a da

Counts/frequency: Just Right (1, 12.5%), Mismatch (4, 50.0%), Major Mismatch (3, 37.5%)



v capacity to influence decisions that affect my work Jency: Just Right (1, 12.5%), Mismatch (5, 62.5%), Major Mismatch (2, 25.0%)



My capacity to influence decisions that affect my work: Counts/frequency: Just Right (1, 12.5%), Mismatch (5, 62.5%), Major Mismatch (2, 25.0%)



Figure 2: Highest areas of major mismatch between job role and AP expectations reported on the AWS

NEXT STEPS

As a result of this data, we proposed work-unit level interventions with a goal of decreasing burnout amongst APs in our practice. We initiated interventions including workstation "busy lights" for APs, which allows them to set their availability status as a visual cue for others when approaching with non-urgent questions. We also created smart phrase templates for use in the electronic health record to empower APs to respond effortlessly to messages that should be re-routed to the appropriate care team member as opposed to taking on tasks that are outside their scope of practice. We plan to reassess burnout levels after a 6-month trial of these interventions before trialing additional potential action items identified on the AWS.

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