

Combating Clinician Burnout with Digital Enablers





Utilizing Digital Enablers to Combat Clinician Burnout

WHAT IS BURNOUT?

Burnout is a complex, widespread issue in the healthcare industry, affecting both employees and employers. The World Health Organization (WHO) has defined burnout as a clinical syndrome “resulting from chronic workplace stress that has not been successfully managed.”¹

According to the WHO, three dimensions characterize burnout:

1. Feelings of energy depletion or exhaustion.
2. Increased mental distance from one’s job, or feelings of negativism or cynicism related to one’s job.
3. Reduced professional efficacy.²

Occupational burnout has a uniquely negative effect on the healthcare industry. The pressures of work in the field have been exacerbated by increasing demands on clinical staff as the Baby Boomer generation ages and the need for health and wellness services grows.³ Nurses consistently report the highest level of burnout, with emotional exhaustion and lack of personal accomplishment being prime causes.⁴ A nationwide survey found that 54% of physicians reported at least one symptom of burnout.⁵ This pervasive condition obviously has profound implications for the staff experiencing symptoms. But it also impacts the patients treated by those individuals and the health systems that employ them.

PERSONAL IMPACTS OF CLINICAL BURNOUT

Healthcare professionals are predisposed to burnout symptoms because medical culture emphasizes perfectionism, denial of personal vulnerability and lack of work-life balance. Clinicians work long hours and perform demanding tasks in an extremely high-stress environment. Further, clinical staff are expected to perform all of their duties with no room for error. When errors do occur, they have the potential to be life-altering for the patients in a clinician’s care. While other industries also deal with occupational burnout, the unique emotional toll of working directly with patients and their families is especially trying for healthcare professionals. In fact, the most cited cause of burnout in hospital staff is emotional exhaustion.

What are the symptoms of this dangerous condition? Clinical staff experiencing burnout are at an increased risk of:

1. Making medical errors. These errors expose patients to greater risk, and health systems to medical malpractice suits. Medical errors only increase the emotional burden that physicians and nurses experience.
2. Suffering from guilt. Guilt is a major contributor to the emotional exhaustion reported by clinical staff. When a staff member makes a medical error that negatively affects a patient outcome, it is common for that individual to experience guilt, compounding the emotional impact of the job.
3. Suicidal ideation and suicide. Staff experiencing burnout are exposed to a two and a half to four time’s greater risk of suicide than the general population.⁶

¹ https://www.who.int/mental_health/evidence/burn-out/en/

² https://www.who.int/mental_health/evidence/burn-out/en/

³ <https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage>

⁴ <https://www.nursing.org/resources/nurse-burnout/>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6262585/>

⁶ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6262585/>

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INDUSTRY IMPACTS OF CLINICAL BURNOUT

As a result of these dangerous and destructive personal effects, burnout is a leading contributor to staff turnover, which in turn causes increased administrative costs for health systems already suffering from shrinking margins. It also forces health systems to rely on contract staff to fill gaps in coverage, or increase the workload of remaining employees. Coverage gaps due to staff attrition increase the risk of adverse events, compromising patient safety and satisfaction.

In addition, the use of contract staff creates challenges in maintaining a unified corporate culture and standard of care across a health network. The resources spent training contract staff deplete reserves that the organization could otherwise allocate toward finding full-time replacements, locking it into reliance on a temporary workforce. These staffing issues can be even more of a challenge when patient volumes are higher than normal.

Other industries have been able to fend off staff attrition by investing in initiatives that reduce stress. These include nap pods, relaxation rooms and mobile applications that provide counseling services to staff when needed. Healthcare has lagged behind other, adjacent industries in the implementation of such strategies, driving healthcare professionals from the bedside to industries that allow for a better work-life balance and a reduced emotional toll. For those that remain, dissatisfaction with their roles can affect their interactions with patients, resulting in lower patient satisfaction scores for the hospital and the potential for a reimbursement reduction.

Due to the attendant risks for health systems, senior leaders need to make mitigating burnout a strategic priority in their organizations. Doing so has the ability to reduce staff attrition, increase employee and patient satisfaction scores and decrease costs to the system. While there is no single solution for fixing burnout across an organization, there are digital enablers that can help drive the changes needed to alleviate some root causes of burnout amongst staff.

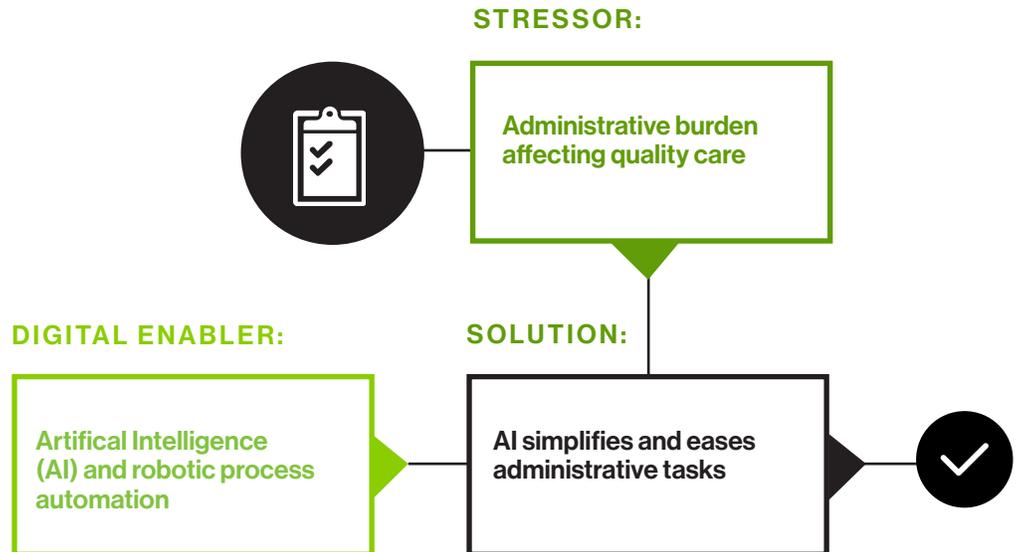


DIGITAL ENABLERS AS A TOOL TO ADDRESS BURNOUT

There are many common stressors found in health systems. One familiar example is time pressure—the need to see a certain number of patients in a limited timeframe. This constraint results in rushed visits, often leaving providers exhausted, unsatisfied and unsure about accurate diagnoses and next steps in care. Mitigating the negative impacts of this and other common stressors, and the resulting burnout, will require a comprehensive technological solution, along with human resource and change management evolution.

While some of the emotional stressors of working in a clinical setting are inherent, health systems can use tools that target specific pain points to ease other aspects of healthcare jobs. These tools will need to enable and empower the employees charged with using them to complete their duties in a more streamlined, automated way. Below are select examples of stressors found in the healthcare system paired with proposed digital enablers that offer solutions to struggling staff.

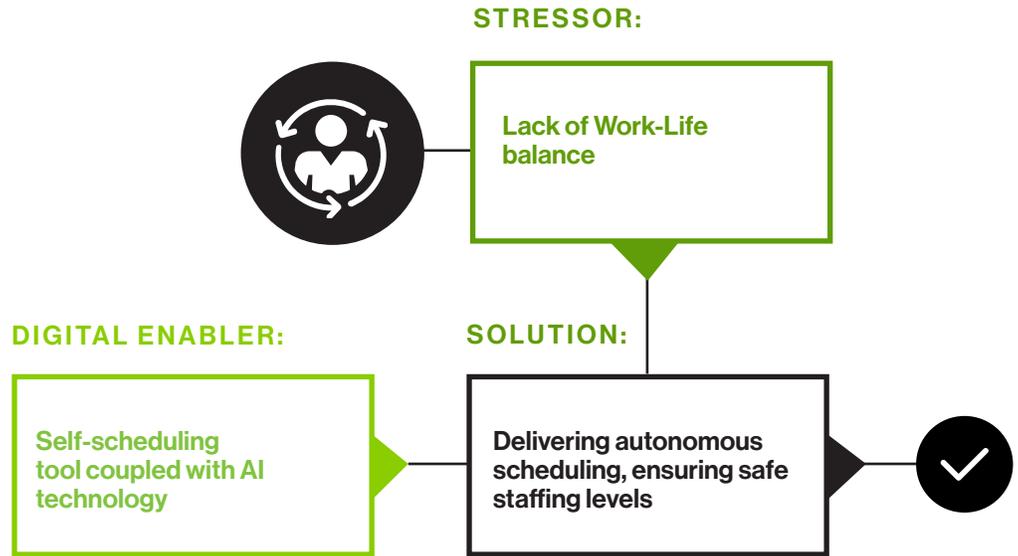
Stressor: **Administrative Burden**



One area of frustration frequently cited by healthcare professionals is the administrative burden that takes clinicians away from the bedside and inundates them with reporting requirements. Health systems looking for a digital solution to this widespread problem can leverage artificial intelligence (AI) and robotic process automation to streamline documentation workflows. This would empower clinicians to spend more time with patients, resulting in better patient satisfaction while mitigating this dimension of burnout. This solution would also increase productivity and standardize responses for future data analysis, while reducing the risk of entry error.

As electronic functions increase in the health environment, healthcare professionals are required to sign on to multiple platforms. Implementing a digital enabler that eases the sign-on process by reducing the number of times a clinician needs to enter a password in a workday would deliver an increase in productive hours while also boosting provider satisfaction.

Stressor:
**Work-Life
Balance**



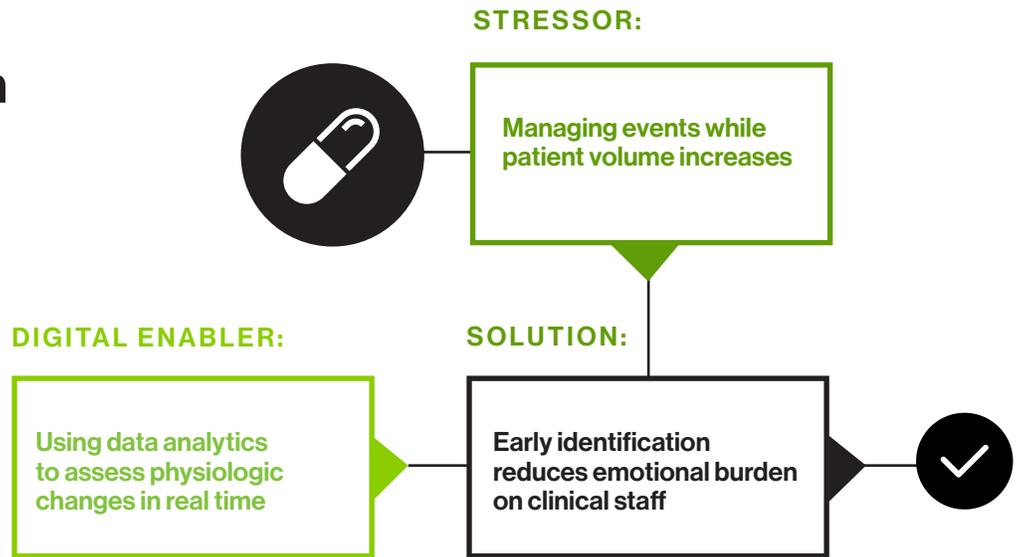
Another area ready for optimization is work-life balance, which is, in part, a victim of antiquated scheduling processes. Nurses and ancillary healthcare workers often cite a lack of autonomy in managing their own schedule as a contributor to burnout. Efforts toward improving work-life balance for staff should include the promotion of autonomy regarding work hours. Using a self-scheduling system that is coupled with AI technology will allow for more autonomy over scheduling while also ensuring safe staffing.

This issue with scheduling also affects patient-scheduling issues. Outdated and inflexible patient-scheduling tools encumber physicians' ability to focus on care delivery. Utilizing a scheduling tool that could adapt to emergent events in a physician's day can ensure that patients are treated in a timely manner while not further adding to the care burden experienced by providers. Scheduling tools that include data analytics can respond and adjust to fluctuating patient volumes. Optimizing scheduling can improve patient satisfaction and reduce work burdens on providers.



Stressor:

Decompensation Events



A third area overdue for improvement is proactively identifying patients who decompensate (whose health deteriorates). Currently, healthcare providers are seeing an increasing number of patients, making it more difficult to manually monitor for decompensation events. Using data analytics to review patient vital signs and labs can indicate if a patient condition is worsening before the staff can see it. Investing in this ability to collect and analyze real-time patient data to alert medical staff of early signs of decompensation would ease the burden on medical teams. This automatic, early intervention would furthermore prevent transfers to expensive intensive care units and improve patient outcomes.



TAKING ACTION

While each of the solutions presented above leverages technology to reduce burnout, health leaders will need to pinpoint specific problems within their own health systems, as well as consider facility culture and human resource management, for maximum impact. Investing in technology to innovate and increase productivity alone will not address the underlying issues that clinical staff are facing.

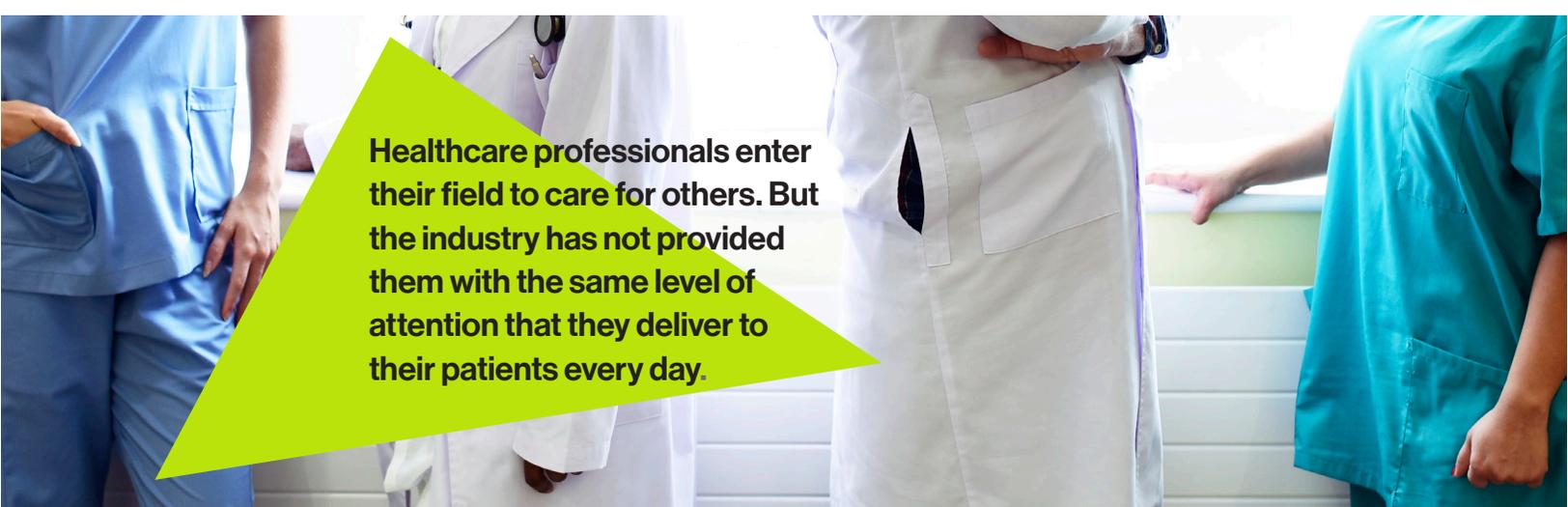
This first step—identifying issues specific to a facility's staff and culture—is critical to success. As touched upon in the digital enablers discussion, health organizations are vulnerable to a diverse set of threats to well-being. Some healthcare organizations may struggle with staff-related issues, which could range from high staff turnover to caring for staff mental health. On a more logistical level, some facilities may need to focus on updating their medical instruments and infrastructure while others might choose to hone in on improving staff lounges and amenities.

Until health leaders understand the issues contributing to stress and burnout that are plaguing their specific organization and system, they cannot take effective steps toward solving root problems. Correctly identifying these challenges should include staff interviews and surveys, focus groups, clinical and administrative observations and leadership engagement.

To this end, health leaders must approach this transformation holistically and systematically, by:

- **Creating a task force with stakeholders from both the C-suite and clinical staff. This task force should be given a clear mandate (e.g., reduce staff turnover by 20% in 6 months) and meet on a regular basis to report on findings and results.**
- **Conducting surveys using tools like the Maslach Burnout Inventory Human Services Survey to identify organization-specific pain points. Ideally, health leaders would work with a third party to administer these surveys to avoid staff reticence or fear of retribution when reporting negative feelings. The task force, mentioned above, should work with the third party to analyze and synthesize the results into next steps and constructive action.**
- **Determining opportunities for intervention and identifying success measures. Health leaders and task force members should work together to craft a plan of action that engages employees at all levels to reach new heights of staff fulfillment and satisfaction. Strategically leveraging select digital enablers, convening all-hands meetings/town halls and sparking two-way dialogue on intranet and social media sites can bolster collaboration and promote success.**

While self-care and compassionate human interaction are good first steps to a healthy, stress-free workplace, strategic choices about digital tools can also improve organizational morale and results. Such tools deploy AI to tackle complex projects, including administrative tasks, scheduling and decompensation analytics. As the old adage states, “You cannot care for others unless you care for yourself.” With the industry rapidly changing and the pressure on front-line healthcare employees increasing, the time is now for health leaders to begin caring for their staff the way their staff cares for patients.



Healthcare professionals enter their field to care for others. But the industry has not provided them with the same level of attention that they deliver to their patients every day.



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