Reducing Physician Stress and Burnout

A Guide to Developing Physician Leader’s Stress Management Skills

Questions Addressed:
• How pervasive is physician burnout?
• Why should you elevate stress management to a leadership skill?
• What are the most important skills for managing stress effectively?
Talent Development

LEGAL CAVEAT

Advisory Board is a division of The Advisory Board Company. Advisory Board has made efforts to verify the accuracy of the information it provides to members. This report relies on data obtained from many sources, however, and Advisory Board cannot guarantee the accuracy of the information provided or any analysis based thereon. In addition, Advisory Board is not in the business of giving legal, medical, accounting, or other professional advice, and its reports should not be construed as professional advice. In particular, members should not rely on any legal commentary in this report as a basis for action, or assume that any tactics described herein would be permitted by applicable law or appropriate for a given member’s situation. Members are advised to consult with appropriate professionals concerning legal, medical, tax, or accounting issues, before implementing any of these tactics. Neither Advisory Board nor its officers, directors, trustees, employees, and agents shall be liable for any claims, liabilities, or expenses relating to (a) any errors or omissions in this report, whether caused by Advisory Board or any of its employees or agents, or sources or other third parties, (b) any recommendation or graded ranking by Advisory Board, or (c) failure of member and its employees and agents to abide by the terms set forth herein.

The Advisory Board Company and the “A” logo are registered trademarks of The Advisory Board Company in the United States and other countries. Members are not permitted to use these trademarks, or any other trademark, product name, service name, trade name, and logo of Advisory Board without prior written consent of Advisory Board. All other trademarks, product names, service names, trade names, and logos used within these pages are the property of their respective holders. Use of other company trademarks, product names, service names, trade names, and logos of the same does not necessarily constitute (a) an endorsement by such company of Advisory Board and its products and services, or (b) an endorsement of the company or its products or services by Advisory Board. Advisory Board is not affiliated with any such company.

IMPORTANT: Please read the following.

Advisory Board has prepared this report for the exclusive use of its members. Each member acknowledges and agrees that this report and the information contained herein (collectively, the “Report”) are confidential and proprietary to Advisory Board. By accepting delivery of this Report, each member agrees to abide by the terms as stated herein, including the following:

1. Advisory Board owns all right, title, and interest in and to this Report. Except as stated herein, no right, license, permission, or interest of any kind in this Report is intended to be given, transferred to, or acquired by a member. Each member is authorized to use this Report only to the extent expressly authorized herein.

2. Each member shall not sell, license, republish, or post online or otherwise this Report, in part or in whole. Each member shall not disseminate or permit the use of, and shall take reasonable precautions to prevent such dissemination or use of, this Report by (a) any of its employees and agents (except as stated below), or (b) any third party.

3. Each member may make this Report available solely to those of its employees and agents who (a) are registered for the workshop or membership program of which this Report is a part, (b) require access to this Report in order to learn from the information described herein, and (c) agree not to disclose this Report to other employees or agents or any third party. Each member shall use, and shall ensure that its employees and agents use, this Report for its internal use only. Each member may make a limited number of copies, solely as adequate for use by its employees and agents in accordance with the terms herein.

4. Each member shall not remove from this Report any confidential markings, copyright notices, and/or other similar indicia herein.

5. Each member is responsible for any breach of its obligations as stated herein by any of its employees or agents.

6. If a member is unwilling to abide by any of the foregoing obligations, then such member shall promptly return this Report and all copies thereof to Advisory Board.
# Table of Contents

- A Challenging Market for Physicians ................................................................. 4
- Physician Burnout On The Rise ........................................................................ 5
- The Importance of Stress Management as a Leadership Skill ....................... 6
- Skill #1: Clarifying Your Priorities ..................................................................... 7
- Skill #2: Advocating for Yourself ....................................................................... 8
- Skill #3: Building Supportive Relationships ..................................................... 9
A Challenging Market for Physicians

*Market Realities To Which All Physicians Must Respond*

From changing demographics, to consumerism, to new-in-kind competitors, there is no doubt that industry-wide forces in health care today are fundamentally transforming how physicians will practice.

In our conversations with CMOs and physician leaders, we’ve identified eight challenging market realities to which all physicians must respond, if their practices are to remain viable businesses:

1. **Physician performance is under increasing scrutiny**—and it’s not just about clinical quality measures anymore. Physicians are increasingly evaluated on cost performance, efficiency of utilization, and technology use.

2. **Providing standout patient experience is a critical business imperative.** Patient loyalty is no longer a given. Primary care must be as convenient as possible. In specialty care, physicians must focus on building stronger patient relationships.

3. **Physicians will face increasing pressure to trade autonomy for scale and impact.** As more physicians are employed, many encounter frustrations around being told “how to practice.” The challenge ahead is for physicians to find new ways to exert their influence within a large hospital or health system.

4. **Each point-of-care encounter will get increasingly complex.** Physicians must contend with changing demographics and more chronic diseases, increasing care team size, and the shift towards full risk—all of which complicate each patient visit.

5. **Many physicians will spend less time in direct contact with patients.** Building and leveraging a full care team to the top of their licenses will be critical for physicians to handle the patient and paperwork burden.

6. **The EMR is here to stay, and providers play a key role in realizing its potential.** The reality is that meaningful use requirements will evolve—not end. Physicians’ clinical expertise is the critical component needed to automate the right workflows and ensure that the technology drives actual quality gains.

7. **How physicians are paid will soon reflect transformational change in the market.** Although physicians increasingly participate in risk-based payment models, they have not been subject to direct financial incentives and penalties based in those models. Starting in 2017, however, their performance will translate into payment adjustments that affect them personally.

8. **The forces contributing to physician burnout will continue to increase.** And physician burnout is likely to get worse before it gets better.

This last point is the focus of this paper, and a point of urgency for physician leadership. For physicians to respond effectively to any of the market realities listed above, they must be engaged, energized, and up to the task. However the reality is that in many hospitals and health systems, physicians are experiencing higher rates of burnout than ever before. The good news is that providers have more control than they might think when it comes to intervening to reduce physician stress and burnout.
Physician Burnout On The Rise

Burnout has become endemic to the health care industry

An Urgent Problem

We define burnout as physical, mental, and emotional exhaustion due to chronic stress and inadequate coping mechanisms. Alarmingly, this problem is on the rise for physicians, with 54% self-reporting that they struggle with burnout:

45% in 2011
54% in 2014

While 54% might not sound alarming, this is an average, and the picture is much bleaker when you look at burnout rates for specific specialties.

Specialties with the Highest Rates of Burnout

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine</td>
<td>74%</td>
</tr>
<tr>
<td>Urology</td>
<td>64%</td>
</tr>
<tr>
<td>Physical Medicine and Rehab</td>
<td>63%</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>63%</td>
</tr>
<tr>
<td>Radiology</td>
<td>61%</td>
</tr>
<tr>
<td>Orthopedic Surgery</td>
<td>60%</td>
</tr>
<tr>
<td>General Internal Medicine</td>
<td>59%</td>
</tr>
<tr>
<td>Neurology</td>
<td>58%</td>
</tr>
<tr>
<td>Dermatology</td>
<td>57%</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>56%</td>
</tr>
</tbody>
</table>


Most organizations have invested in stress management, but haven’t cracked the code

Organizational Efforts Falling Short

Many hospitals and health systems have taken significant steps to address burnout. Popular stress management programs for physicians include counseling, support groups, mindfulness training, yoga workshops, and creative outlet classes.

These offerings are an important starting point, but the truth is that the industry hasn’t quite cracked the code on burnout. We hear two main challenges from organizational leaders. First, many stress management programs go underutilized by physicians. Second, though helpful, current programs are not enough to truly move the dial on individuals’ stress and burnout long-term.
Stress Management as a Leadership Skill

Personal Stress Management Tactics Are The Most Effective Long-Term

Stress management is most successful when physician leaders take an active role in helping themselves. A meta-analysis of 25 stress management interventions found that the most effective way to reduce stress is to blend organizational strategies and programming with individual-led tactics.

<table>
<thead>
<tr>
<th>Organization-Directed Interventions</th>
<th>Individual-Directed Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flex scheduling</td>
<td>Relaxation exercises</td>
</tr>
<tr>
<td>Changing shift length</td>
<td>Positive thinking</td>
</tr>
<tr>
<td>Job/task re-evaluation</td>
<td>Seeking social support</td>
</tr>
</tbody>
</table>

33% of burnout improvement maintained after one year
75% of burnout improvement maintained after one year

Blended Intervention
80% of burnout improvement maintained after one year

But Stress Is Much More Than a “Personal Issue”

When physicians invest in managing their own stress, not only do they improve their own lives, but they measurably improve the experiences of their staff as well. Studies show that both stress and wellness are contagious. One Gallup study found that when leaders exhibit high levels of wellbeing, their staff are 15% more likely to experience wellbeing six months later. In other words, physician leaders who work more sustainably also create more sustainable teams.

A key barrier stands in the way: many physicians simply don’t have the tools they need to reduce their own stress. In interviews with health care leaders, we’ve identified three critical skills for reducing physician stress and burnout that also make leaders more effective in their roles:

1. Clarifying one’s priorities
2. Advocating for one’s needs at work
3. Building supportive relationships

Skill #1: Clarifying Your Priorities

Physician leaders must carve out time to reflect on what purpose and tasks energize them the most

One of the biggest challenges facing physician leaders is juggling too many competing priorities. Many feel pressure to “do it all.” They find themselves spending time on tasks that aren’t fulfilling, sitting in on committees they aren’t passionate about, driving initiatives they aren’t excited about—and feeling overwhelmed and exhausted as a result.

Physician leaders need to develop judicious personal standards for how—and what—they spend their time and energy on at work. When we talk with health care leaders, we often hear that they determine their workflow by considering four criteria:

- **The most urgent work**: tasks with an impending deadline, including “firefighting”
- **The most recent work**: new requests that are most top-of-mind
- **The most familiar work**: work the leader has always done and assumes he or she should keep doing
- **The most high profile work**: work that is most visible to senior leaders

We work with physician leaders to help them develop two more effective parameters for clarifying priorities. The first is **the most important work**, e.g. tasks that advance the organization’s key strategic initiatives and truly make an impact. The second is **the most energizing work**, e.g. activities the leader finds intrinsically motivating.

For physicians especially, defining what is “most energizing” is a critical step towards bringing back the joy of medicine. Many feel disconnected from their organizations, or frustrated that they are performing a job they didn’t sign up for. Identifying the “most energizing” work is a personal endeavor that many physicians simply don’t know how to pursue. For many in medicine, it can be far too easy to lose touch with what brought them into the field in the first place. To reconnect with their passions, we encourage physician leaders to carve out time for personal reflection across three areas:

<table>
<thead>
<tr>
<th>Learning</th>
<th>Strengths</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What new interests do you want to cultivate?</td>
<td>• What strengths do you want to use more at work?</td>
<td>• What values do you want to live out at work?</td>
</tr>
<tr>
<td>• What skills do you want to develop?</td>
<td>• What expertise do you have?</td>
<td>• What specific difference do you want to make for patients, staff, etc.?</td>
</tr>
<tr>
<td>• What career path excites you the most?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

We’ve found that when this is done well, physicians can reconnect with their deeper purpose in medicine—a passion for patient safety or physician wellness, for example—and bring those insights to their leadership to find opportunities to scope their non-clinical contributions around those passions.
Knowing what to ask for is only half of the challenge, however. The arguably more difficult half is knowing how to ask. Asking for support can be daunting. We encourage physician leaders to brainstorm specific talking points and choose a style of asking for help that feels most comfortable to them:

- **Directive Style:** making a specific, direct ask
- **Inclusive Style:** asking for advice or input on a clearly defined problem
- **Exploratory Style:** asking for insight into a vague or not-yet-defined problem; this type of conversation is especially important for the physician leader who knows they are burned out, needs to raise their concern to leadership, but doesn’t know where to start or what would help them.

Developing the skills to recognize and navigate resources across the organization—and gain comfort in asking for help—is one of the most critical skills physician leaders need to develop to get the support and increased sense of autonomy that can help decrease burnout long-term.

Yet, far too often, physicians feel uncomfortable asking for the help they need. This reluctance to ask for help starts as early as medical school. One study found that only 34% of medical students with burnout seek help and support.

When leaders do ask for help, they’re often limited in their thinking, believing that only additional staff or funding can solve their problems. However, there are other resources available in any health care organization that are often easier to ask for, and more effective in easing the leader’s workload—but too often overlooked. This broader range of support falls into three categories:

### Material Support
- Staff
- Money
- Technology
- Templates
- Collaboration

### Informational Support
- Expertise
- Facts/information
- Feedback
- Training
- Buy-in

*E.g. “lessons learned” from someone who has done a similar project*

### Emotional Support
- Listening
- Productive venting
- Humor
- Perspective
- Advice

*E.g. time to debrief a difficult patient case*

Knowing what to ask for is only half of the challenge, however. The arguably more difficult half is knowing how to ask. Asking for support can be daunting. We encourage physician leaders to brainstorm specific talking points and choose a style of asking for help that feels most comfortable to them:

- **Directive Style:** making a specific, direct ask
- **Inclusive Style:** asking for advice or input on a clearly defined problem
- **Exploratory Style:** asking for insight into a vague or not-yet-defined problem; this type of conversation is especially important for the physician leader who knows they are burned out, needs to raise their concern to leadership, but doesn’t know where to start or what would help them.

Skill #3: Building Supportive Relationships

Cultivating social support is essential for long-term stress and burnout management.

Creating long-term sustainability at work depends on building a safety net of supportive relationships over time. These relationships can help large organizations feel more navigable and can yield new perspectives and resources. In fact, research shows that having strong social support from others actually reduces the extent of stress and incidence of depression:

**Impact of Social Support on Stress**

<table>
<thead>
<tr>
<th></th>
<th>Experienced more stress in past year</th>
<th>Experienced depression due to stress in last month</th>
</tr>
</thead>
<tbody>
<tr>
<td>No emotional support</td>
<td>43%</td>
<td>33%</td>
</tr>
<tr>
<td>Emotional support</td>
<td>26%</td>
<td>50%</td>
</tr>
</tbody>
</table>

The two most prevalent strategies for securing social support in the workplace are professional networking (e.g. events and associations) and one-on-one mentorship. Both strategies are important, but each have their downfalls. To best create social support, we recommend a middle path: creating a Personal Board of Directors, which offers both depth and breadth of relationships. This board is an informal group of 5-10 go-to people who can provide diverse perspectives and support.

- **Professional Networks**: Many contacts. Opens doors to other people, opportunities. Can feel impersonal; relationships not as deep.
- **Personal Board of Directors**: Small group of supporters. Offers both depth and breadth in relationships.
- **One-on-One Mentorship**: One deep relationship. Provides an expert perspective. Can take a long time to establish; relationship limited to one person.

The key insight is that physician leaders need the skills to forge relationships across departmental and functional silos: peer allies in other departments, educators, senior leaders, administrators—anyone who can provide them with a fresh perspective and a range of informational and emotional support.

Empower Leaders to Actively Reduce Their Stress

Minimizing stress and burnout is not a “nice to have”—it is a leadership imperative given today’s demanding health care environment. To gain greater control over work-related stress, physician leaders must be equipped with three essential skills:

1. Clarifying their priorities
2. Advocating for their needs at work
3. Building supportive relationships

Understanding and practicing these personal leadership skills is critical to making meaningful progress against what can feel like an insurmountable challenge. When physician leaders proactively reduce their own stress and burnout, they not only perform their best, but set an example that empowers staff to take care of themselves, too.

Talent Development Partnership

A Talent Development Partnership can help you equip your physician leaders with the skills, knowledge, and tools to work more effectively and sustainably in today’s health care environment. Our capabilities include:

• Developing physicians’ industry knowledge so they are up-to-date on the latest trends and best practices
• Teaching physicians personal leadership tactics to reduce their own stress and burnout
• Upskilling physician leaders around your organization’s biggest priorities and challenges
• Consultation on how individual stress management can support your organization’s existing wellness programs

Want more info? Contact us at HartmanM@advisory.com