

Burnout driving physicians to cut down work hours

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A new study found that high levels of burnout and low professional satisfaction scores predict a reduction in work levels. Learn more about which physicians are reducing their work hours and what is being done to improve professional satisfaction.

Who is increasingly cutting hours

Full-time physicians who report worsening burnout or show declining job satisfaction are more likely to reduce the hours they work, according to study published in April's *Mayo Clinic Proceedings*.

More than 1,800 Mayo Clinic physicians responded to a 2011 survey. For each one-point increase a physician had on a seven-point emotional exhaustion scale, there was a 43 percent higher likelihood that the physician would reduce his or her full-time employment over the next 24 months. Each one-point decrease in the five-point satisfaction score, meanwhile, led to a 34 percent higher likelihood a physician would reduce his or her hours, the study found.

A longitudinal analysis at the physician level showed that full-time physicians who reported worsening burnout or declining satisfaction between 2011 and 2013 also were more likely to cut hours in the next 12 months.

And it's not the younger physicians who cut back hours.

Between 2008 and 2014, there was a statistically significant increase in the proportion of men older than 55 who worked less than full time, a jump from 12.6 percent at the beginning of the study to 17.7 percent by the end of the study. The change was not statistically significant for men in other age groups, the study showed.

Women overall were less likely to work full time than men, but their rate did not increase over the study period. In fact, the proportion of women 35 years old or younger who worked less than full time

decreased from 29.2 percent to 11.8 percent during the study period.

“These findings suggest that the trends in full-time employment we observed were not attributable to millennials oriented toward better work-life integration but rather reductions in work hours by their older colleagues,” study lead author Tait D. Shanafelt, MD, director of the Mayo Clinic Department of Medicine Program on Physician Well-being, and his colleagues wrote.

“Although the reasons for this trend are unknown, several studies have suggested that the interval of 10 to 20 years after entering practice is a particularly stressful time for physicians, and it is possible that many physicians reduce their workload in response to the distress they experience during this period of their career,” Dr. Shanafelt and colleagues wrote.

Could burnout exacerbate physician shortages?

The proportion of physicians working less than full time at the Mayo Clinic increased to 16 percent in 2014, up from 13.5 percent in 2008. While working fewer hours may help individual physicians cope with burnout, a better solution needs to be found so physician shortages are not even worse than projected, both the researchers and an editorial accompanying the study said.

“There are many reasons why physicians may choose to decrease their work effort,” Rachel B. Levine, MD, an associate professor of medicine at Johns Hopkins School of Medicine wrote in the editorial. “However, [the study’s] findings provide further compelling evidence that now is the time to address physician burnout and diminished work satisfaction. We are currently facing projected workforce shortages, especially among primary care specialties, at the same time that our population is aging, and there is increased demand to care for newly insured patients.”

Study authors said efforts to reduce burnout must recognize the problem is, in large part, a system issue, and efforts need to address the problems that drive burnout, including excessive workloads and inefficiencies in the practice environment.

Improving professional satisfaction

The call for changing the practice environment echoes the findings of an AMA study conducted with RAND as part of the AMA’s Professional Satisfaction and Practice Sustainability initiative. That study concluded that key drivers of physician satisfaction were providing high-quality care; having greater control over the pace and content of clinical work; holding similar values to the practice leadership; and working in an environment that fosters collegiality, fairness and respect.

These areas are the ones policymakers and health delivery systems should work to change to improve professional satisfaction among physicians.

“This may seem an obvious conclusion, but considering the typical tools used to influence physician behavior (regulations, payment rules, financial incentives, public reporting and the threat of legal action), refocusing attention on the targets identified in this study may actually represent a substantial change of orientation for many participants in the U.S. health care system,” the AMA-RAND study found.

Resources to fight burnout

The AMA offers several online modules through its STEPS Forward™ collection of practice improvement strategies to help physicians in practice and physicians in training recognize and address burnout. These modules cover preventing resident and fellow burnout, preventing physician burnout and improving physician resiliency.

The AMA also is helping physicians to create thriving practices, working with physicians to advance initiatives that enhance their practice through leadership principles and efforts. The AMA is collaborating with hospitals, independent physician associations and others to cultivate successful physician leadership that improves the value of care for patients and fosters a more cohesive and integrative decision-making process within hospitals and health care systems.

For more on physician burnout

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