

Marshfield leaders tackle pandemic's "brutal" impact on morale

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When Marshfield Clinic Health System in Wisconsin surveyed its staff during the pandemic, it found widespread reports of burnout and exhaustion. The C-suite responded by undertaking efforts designed to boost morale, offer flexible work options and provide mental health and financial support.

"It has been brutal for our workers," said CEO Susan Turney, MD, describing the backlash and protests her staff encountered from patients and families. "It's so sad when they're doing everything they can to take care of the people that walk through our doors."

COVID-19 affected workforce dynamics. But it also provided an opportunity to challenge Marshfield's staff and leadership in unique ways to better serve patients, said Dr. Turney, who spoke during a Becker's Healthcare webinar sponsored by the AMA Health System Program.

The AMA Health System Program, which counts Marshfield as a member, has three aims: enhancing patient care and the joy of practicing medicine, while ensuring that health systems get recognition for the work they're doing, said Suja Mathew, MD, senior physician adviser with AMA and moderator of the webinar. Learn more about the AMA Health System Program and organizational well-being.

Rural health's pre-pandemic challenges

Covering 45,000 square miles, Marshfield has a large footprint in Wisconsin, with 60 clinical locations, 40 communities and 170-plus specialty services.

Even before COVID-19, Marshfield faced challenges unique to rural health. There's poverty, scarce public transport, and spotty internet service. Any closures of rural facilities

can be devastating to patients who have difficulty accessing care, said Dr. Turney. The pandemic has been “a major suck in morale” on staffing and resources, she said.

At some point, Marshfield leaders felt it was important to check in with its staff and do a systemwide survey on the pandemic’s impact on employees. “We wanted to show people that we could actually do something to help them” as they came into work each day, she said.

Unsurprisingly, the survey showed that providers and staff were exhausted. They were struggling to decompress outside of work. They felt afraid, disrespected. Interdepartmental communication issues needed to be addressed.

These trends reflect the national scene on burnout. An AMA survey of 64,000 health professionals in 29 states found that more than half were experiencing some symptoms of burnout. Burnout was reported highest among critical care physicians at 65%, nurses at 57%, and hospital-based employees in the emergency department or intensive care unit at 55%, said Nancy Nankivil, director of practice transformation at AMA.

Supporting doctors and staff

Many health care organizations have instituted rounding to check in with their staff or deployed peer support to help people deal with the long-term impact of COVID-19, said Nankivil.

Marshfield realized it needed to make changes that had some teeth, said Dr. Turney. “We had to find child care for staff, support them with mental health resources. We also had to look at ways to support them emotionally.”

One tool, a mental health-based app, allows staff to track and record how they’re feeling and connects them with mental health providers. Employees can shout out other employees through a new social media feed. This allows for real-time feedback, letting people know how much they’re appreciated, said Dr. Turney.

To provide financial support, Marshfield offered merit increases and zero-premium health plans. The Marshfield Clinic Health System Foundation, meanwhile, donated funds to help pay medical expenses.

Providing flexible work options such as remote work helped people get through the tough months. “We still have 1,000 working at home, but most of the 12,000 employees are now back in the building, figuring out ways to operate better,” said Dr. Turney.

Marshfield wants to take care of its people, she added. “Our goal is to be the workplace of choice in our communities.”

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing, issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face.

By focusing on factors causing burnout at the system level, the AMA assesses an organization’s well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.