

# Trustee Insights

VIEWPOINT



## Burnout in Health Care

A team effort can combat this critical issue

BY MELINDA L. ESTES AND  
THOMAS W. WAGSTAFF

In the highly specialized and exceedingly complex field of health care, our teams are there when needed—24 hours a day, seven days a week. We save lives and heal bodies. We provide care the moment someone enters this world and the moment they leave it. And we fight tirelessly to keep them healthy and thriving every moment in between. In other words, every clinician does their job out of a deep passion for and dedication to the work itself. But let's be honest: It is hard, hard work. And we, as a field, are exhausted.

### Physician Issues

Burnout is a real issue affecting nearly half of us in health care, and make no mistake, it's so much more than being overworked or in need of a vacation. It's a heavy amount of stress over long periods of time, leading to emotional exhaustion,

apathy and a low sense of personal accomplishment. To any health care provider, this kind of thinking isn't

just concerning—it's dangerous.

It is essential that hospital leadership—administrators, board members, physician and clinical leaders—open a dialogue and begin working together to find the solutions that will work best in

their organization — solutions that will meet their needs and directly address their specific challenges. This is the only way we all can make progress on this critical issue.

At Saint Luke's Health System, we strive for excellence, always. As the Kansas City metro area's fourth largest private employer—with more than 12,000 employees staffing 18 hospitals and campuses and more than 130 physician practices—we can only achieve that goal if our teams are healthy, happy, engaged and fulfilled in their roles.

Working together as executives and board members, we continually return to the conversation about how to increase resiliency, never assuming the issue is resolved and always striving for improvement. Through peer-to-peer support programs, creative clinician-specific

engagement exercises, leadership development opportunities, a hyperfocus on resiliency and gratitude—and the restorative powers of working together in concert—we are searching for solutions that resonate with our team and improve our patients' experiences while in our care.

## Understanding the Issue, Identifying Successful Interventions

Within the past few years, burnout has evolved from being spoken of only in hushed voices to being front and center now in a global conversation about wellness. To support the legitimacy of this topic, the World Health Organization recently added the entry of "burnout" to the International Classification of Diseases 11th Revision as an official medical diagnosis, classified as an occupational phenomenon. What's more, WHO is now [developing evidence-based guidelines](#) on mental well-being in the workplace to help combat the issue.

To aid in this critical work, the American Hospital Association is gathering data and best practices from around the United States and helping its members better understand the issue at hand. Earlier this year, the AHA Physician Alliance released [The Well-being Playbook](#), which highlighted seven key steps for success, along with real-world examples of successful interventions, in-depth studies and helpful tools. With this essential resource available to the AHA's 5,000 member organizations, the Physician Alliance is bringing

together physicians and hospital administrators to transform care and advance health in America.

With focused attention, we're now learning much more about burnout. We all know that we must fully understand the problem in order to find a solution. Here are a few important facts about how burnout is affecting health care organizations and clinicians:

## With increased efforts toward building resiliency and improving coping skills, and with an open and engaged dialogue among our leaders, burnout can be addressed as well as reversed.

- A study reported by the [National Academy of Medicine](#) shows that between 35% and 54% of clinicians report at least one symptom of burnout, more than double the amount of burnout found in other fields.

- A [nurse.org](#) study conducted in the spring of 2019 showed that 15.6% of nurses experienced at least one symptom of burnout. For those who were unengaged or suffering from low morale in their job, that number jumped to almost half.

- According to the latest research published in the [Annals of Internal Medicine](#), the most conservative models estimate that the burnout crisis is costing the United States approximately \$4.6 billion

each year in costs associated with physician turnover and reduced clinical hours. From an organizational perspective, that \$4.6 billion translates to \$7,600 per employed physician, per year.

Burnout affects us all: hospitals, clinical practices, physicians, nurses, administrators and all genders. While we already know the effects of burnout can be devastating on a personal level—leading to an increase in chronic conditions, alcohol abuse, depression—they also, not surprisingly, can significantly impact a clinician's relationship with patients.

The good news is that with understanding, education, training and support, it is possible to combat burnout. With increased efforts toward building resiliency and improving coping skills, and with an open and engaged dialogue among our leaders, burnout can be addressed as well as reversed. It can be tackled head-on, fearlessly. And it must be, for the benefit of our organizations, our teams and every patient.

## How Board Members Can Address Burnout

So what can you do? How, as a board member, can you personally become engaged and involved in combatting this challenge to our field? This is a crucial question because, at its heart, it acknowledges the simple fact that we all play an important role in this story. This is *our* problem to fix, together. Here are a few recommendations on how we can do it:

- First, be aware and understanding of the crisis we're all facing. Listen and know that vulnerability is not weakness. Understand that when team members come to us at their most vulnerable, that is also when we as leaders must reply in kind and be at our most compassionate.

- Second, open your minds to new solutions and investments that can build resiliency and nurture healthy leadership. Fund the inno-

vative programs. Find the answers. Move forward with curiosity and commitment, always looking for solutions.

- Third, remain vigilantly in tune to the demands placed on your team. And continually ask the question, out loud: What can we do to make it better? How can we better care for our people, so that they can better care for *the* people.

With compassionate hearts and open minds, we can move forward

and make the much-needed progress on this crucial issue of burnout in health care. It is up to us to make that progress a priority. We know health care leaders are up to the challenge, and we're confident each of you will play an essential role.

---

**Melinda L. Estes, M.D.**, is president and CEO, Saint Luke's Health System, and AHA board chair. **Thomas W. Wagstaff** is board chair, Saint Luke's Health System.