

October 2019

## Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being

**Clinician burnout - a workplace syndrome resulting from chronic job stress - is a major problem across the nation.** Substantial symptoms are present in 35 to 54 percent of nurses and physicians, and 45 to 60 percent of medical students and residents. Current understanding suggests that burnout is a growing public health concern among all types of clinicians and learners.

Burnout has high personal costs for individual clinicians and learners, as well as high social and economic costs for their organizations and society as a whole. Burnout threatens the successful achievement of important health care quality goals: better care, improved population health, and lower health care costs. **Mitigating clinician burnout and supporting professional well-being is essential to providing high-quality patient care.**

Emotional exhaustion, depersonalization and loss of sense of professional efficacy—the three dimensions of burnout—are a barrier to professional well-being. Although the absence of burnout does not equate to a state of professional well-being, **addressing the factors contributing to burnout and the barriers to well-being is critical to reaching the goal of professional well-being among clinicians.** This will ultimately help health systems improve patients', families', and clinicians' experiences and outcomes.

Work system factors (i.e., job demands and job resources) often stem from organizational culture and policies, leadership expectations, health information technology that detracts from patient care, regulations and excessive documentation and reporting requirements, and stigma that prevents clinicians from seeking help and support. The job demands placed on clinicians are often greater than the job resources available to them; this imbalance can lead to burnout. **Interventions should target known factors that contribute to clinician burnout and include clinician and patient feedback.**

**Addressing burnout requires improving the design and organization of the environments in which clinicians train and work.** Individual-focused strategies can be an effective part of larger organizational efforts but do not sufficiently address the work system factors that contribute to clinician burnout.

Leaders in health care organizations and health professions educational institutions, federal agencies, health information technology stakeholders, state licensing boards, and health system credentialing bodies **must all work together to reduce clinician burnout and foster professional well-being.**

Methodologically **strong studies, dedicated funding, and collaboration are needed** to move clinician well-being research forward and realize viable and sustainable solutions to eliminating burnout and fostering well-being for clinicians in all disciplines and care settings.

To read the full report, please visit [nam.edu/ClinicianWellBeingStudy](http://nam.edu/ClinicianWellBeingStudy).

