

COVID19 Pandemic Provider Burnout: a UCH Staff Study

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Results

•A total of 833 respondents completed the questionnaire in its entirety and were included in the final analysis. Demographics of the respondents are listed in Table 1 below.

	Number of respondents	Percent of respondents
Total	833	100%
Gender		
Male	230	28%
Female	557	67%
Prefer not to answer	46	5%
Race		
URIM	42	5%
Non URIM	717	86%
Prefer not to answer	74	9%
Provider role		
Physicians only	481	58%
APPs	198	24%
Researchers (no clinical role)	46	5%
Other role	108	13%

Table 1: Demographics and clinical roles of the respondents. Legend: Underrepresented in Medicine (URIM) and Advanced Practice Provider (APP). APPs included Physician Assistants and Nurse Practitioners. Roles included in the row "Other role" were Administrative, Advanced Practice Provider, Finance, Food service, Housekeeping, IT Support, Lab or X-ray technician, Laboratory staff, Medical Assistant, Nurse, Nursing Assistant, Occupational Therapist, Receptionist/Scheduler, Resident or Fellow, Pharmacist, Physical therapist, Physician, Researcher (without clinical role), Respiratory Therapist, Social worker, Speech Therapist, and a write-in category.

	Stress	Burnout	Down, depressed, or hopeless
Total	34%	59%	13%
Gender			
Male	27%	46%	12%
Female	35%	63%	12%
Prefer not to answer	57%	76%	20%
Race			
URIM	31%	60%	17%
Non-URIM	32%	57%	12%
Prefer not to answer	53%	77%	18%
Provider role			
Physicians only	32%	55%	10%
APPs	35%	70%	15%
Researchers (no clinical role)	33%	48%	11%

Table 2: Prevalence of stress, burnout and depression among respondents. Legend: Underrepresented in Medicine (URIM) and Advanced Practice Provider (APP).

Background

- Burnout is a work-related syndrome that is associated with chronic stress and emotionally intensive work¹.
- Three key dimensions of burnout exist: overwhelming exhaustion, feelings of cynicism and detachment from the job, and a sense of ineffectiveness and lack of accomplishment².
- The COVID19 pandemic has been shown to increase the prevalence of health care worker burnout above pre-COVID19 levels^{3,4}.
- Numerous risk factor for burnout have been discussed in literature, including frontline exposure, gender, provider role, and number of years worked in the profession.
- The primary question of this study is to determine what the impact of provider role is on levels of self-reported stress, burnout, and depression in University of Colorado Hospital employees.
- The primary hypothesis of this study is that Advanced Practice Providers will have higher rates of stress, burnout, and depression when compared to physicians and other individuals with ancillary roles.

Methods

- This study was a cross sectional, survey-based study to determine prevalence of stress, burnout, and feeling down, depressed or hopeless.
- Additional demographic factors were surveyed, including gender, ethnicity, job title, clinical practice location, years in training, medical specialty, academic rank, age, and highest degree obtained.

Conclusions

- Based on prevalence odds ratios, physicians are significantly less likely to report burnout compared to advanced practice providers and males are significantly less likely to report both stress and burnout compared with females.
- The other outcomes from this study included non-significant odds ratios, so the significance of these results is unclear.
- Study limitations include the fact that the final survey that was sent out was designed prior to the initiation of this study, so specific questions and edits were not able to be made.
- An additional limitation was that the questions used in the survey did not define terms such as "anxiety", "depression" and "burnout". Therefore, standardized and validated definitions may not have been understood by study participants.

References

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Disclosures

All authors declare that they have no conflicts of interest