Occupational Stress and Burnout in Health Care Providers: Challenges, and Solutions to Improve Quality of Care and Service Delivery

Presented by **Behdin Nowrouzi-Kia**

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Agenda

- Learning Objectives
- Background
- Return to Work
- Importance of Good Health
- Solutions & Strategies





Learning Objectives

- 1. Define occupational stress, burnout and its components
- 2. Describe the risk factors associated with burnout in health care providers and their impacts on health care delivery
- 3. Identify strategies and solutions to bolster workplace mental health





New Surgeon General Advisory Sounds Alarm on Health Worker Burnout and Resignation

During Mental Health Awareness Month, Surgeon General's Advisory Highlights the Impacts of the COVID-19 Pandemic on Health Workers, Who Already Faced Crisis Levels of Burnout Prior to the Pandemic

There is a Projected Shortage of More than 3 Million Essential Low-Wage Health Workers in the Next

Five Years and a Projected

Today, United States Surge highlighting the urgent neeworkers, including physicia others, have long faced sys pandemic, leading to crisis workers, with many risking public health crisis. Promot is a priority for the Biden-H mental health strategy, with

The <u>Surgeon General's Ad</u> whole-of-society can take t being, and strengthen the r

"At the height of the health workers to ke and Human Servicustodial staff – an Surgeon General's support and system I'm grateful to Surg Health and Human large to use availal

Mental health professionals experiencing burnout

By MELISSA ENMORE OCTOBER 3, 2022

With more Canadians, including health-care providers accessing mental health services, mental health practitioners are coping with ever-increasing workloads, work demands and compassion fatigue.



After two-and-a-half years of COVID-related illness and death. social isolation. quarantines. lockdowns and uncertainty there is and continues to be an increase in the uptal

What is the situation regarding mental he demands are placed on their services? How

Penn State Health Implements Al-Driven Virtual ICU to Lessen Physicial Burnout

The health system collaborated with an artificial intelligencefocused company to address provider shortages and capacity management issues through a virtual ICU.



Healthcare workers more than three times more likely to have experienced burnout during the COVID-19 pandemic

Healthcare professionals working during the coronavirus (COVID-19) pandemic are up to 3.3-times more likely to be burned out compared to non-healthcare professionals, despite the rates of mental health issues being similar, according to new research led

Physician Burnout Has Reached Distressing Levels, New Research Finds

Nearly two-thirds of doctors are experiencing at least one symptom of burnout, a huge increase from before the pandemic. But the situation is not irreparable, researchers say.





re, is defined by increased emotional exhaustion, a more and a declining sense of personal accomplishment. Charles

'We are absolutely destroyed': Health workers facing burnout, even as COVID levels ease



By Teresa Wright · Global News

Posted June 5, 2022 7:00 am · Updated June 6, 2022 2:43 pm

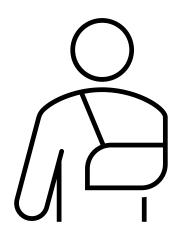




Background: Occupational Stress

Occupational Stress: When job requirements exceed an employee's capabilities, resources, or needs leading to physical and emotional harm









Background: Burnout

Occupational Burnout: A condition caused by prolonged periods of job stress that leads to both physical and emotional exhaustion



Emotional exhaustion



Cynicism and depersonalization



Reduced professional efficacy and personal accomplishment





Burn-out: "an occupational phenomenon": International Classification of Diseases

"Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions:



Feelings of energy depletion or exhaustion



Feelings of negativism or cynicism related to one's job



Reduced professional efficacy

Burn-out refers specifically to phenomena in the occupational context and should not be applied to describe experiences in other areas of life."





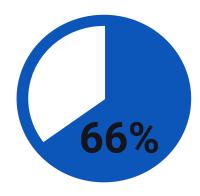
Statement from the U.S. Surgeon General



Public health workers have reported symptoms of a mental health condition



Health workers have experienced workplace violence



Of nurses have considered resigning

"We are looking at a future without enough doctors, nurses, and other critical health workers. That puts our entire health care system at risk [...] Must prioritize health worker well-being" - Dr. Vivek Murthy (U.S. Surgeon General)

Burnout Risk Factors in Health Care Providers

Factors associated with burnout among health workers



Societal and Cultural

- · Politicization of science and public health
- · Structural racism and health inequities
- Health misinformation
- · Mental health stigma
- Unrealistic expectations of health workers

Health Care System

- · Limitations from national and state regulation
- Misaligned reimbursement policies
- Burdensome administrative paperwork
- Poor care coordination
- Lack of human-centered technology

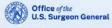
Organizational

- · Lack of leadership support
- · Disconnect between values and key decisions
- · Excessive workload and work hours
- · Biased and discriminatory structures and practices
- · Barriers to mental health and substance use care

Workplace and Learning Environment

- · Limited flexibility, autonomy, and voice
- · Lack of culture of collaboration and vulnerability
- Limited time with patients and colleagues
- Absence of focus on health worker well-being
- · Harassment, violence, and discrimination

"This is beyond my control..."







Impact of Burnout on Health Care



"I can't provide the best care to my patients..."

"I can't get the care I need..."



Health worker burnout can have many negative consequences

Health Workers

- · Insomnia, heart disease, and diabetes
- · Isolation, substance use, anxiety, and depression
 - · Relationship and interpersonal challenges
- · Exhaustion from overwhelming care and empathy

Patients

- · Less time with health workers
- · Delays in care and diagnosis
 - Lower quality of care
 - · Medical errors

Health Care System

- Health workforce shortages and retention challenges
 - · Limited services available
- · Risk of malpractice and decreased patient satisfaction
 - Increased costs

Community and Society

- · Erosion of trust
- · Worsening population health outcomes
 - Increased health disparities
- · Lack of preparedness for public health crises







Returning to Work...







Return-to-work Outcomes

Returning to work improves mental and physical health

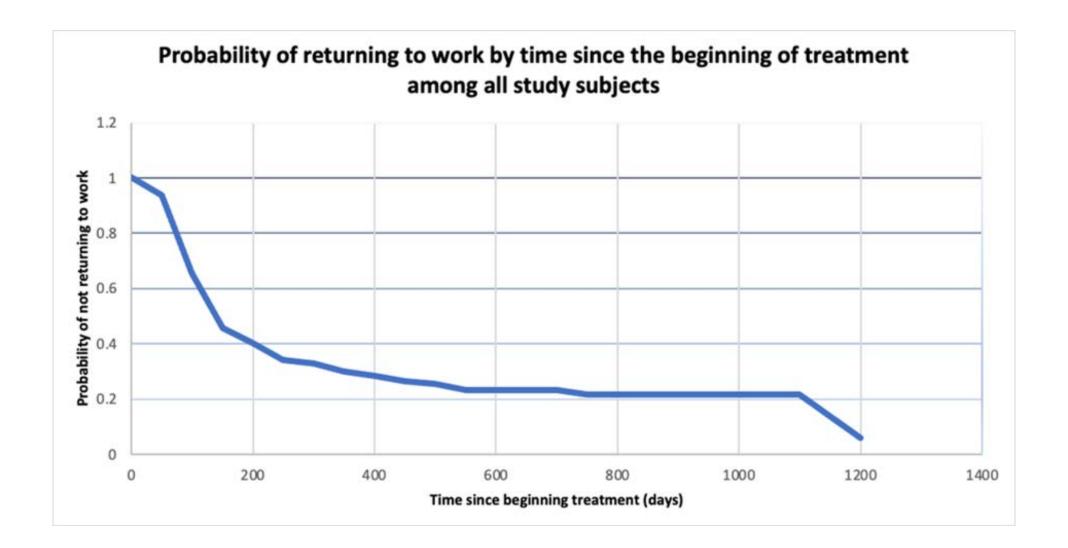
Better health outcomes are seen with earlier reemployment (<6months since job loss) than delayed reemployment

Earlier reemployment demonstrates a decline in depressive symptoms

Reemployment is associated with lower anxiety, depression, and anger scores and higher quality of life than those who remained unemployed











The Seven 'Principles' for Successful Return to Work

Positive workplace health and safety climate

The employer offer of modified work (accommodation)

RTW planning

Supervisors trained in work disability prevention and included in RTW planning

Employer makes early and considerate contact with injured/ill workers

Identified person to coordinate RTW

Communication between employers and health care providers (consent)





13 Domains of Health and Safety in the Workplace

| 1. Psychological Support | 8. Involvement & Influence |
|--|-----------------------------------|
| 2. Organizational Culture | 9. Workload Management |
| 3. Clear Leadership & Expectations | 10. Engagement |
| 4. Civility & Respect | 11. Balance |
| 5. Psychological competencies & requirements | 12. Psychological Protection |
| 6. Growth & Development | 13. Protection of Physical Safety |
| 7. Recognition & Reward | |





Guarding Minds at Work

In this Guideline...

- Relevant definitions
- Identifies risk factors for poor workplace psychological health
- Provides practical strategies for different levels of organizations to improve workplace psychological health



Labour Program: fair, safe and productive workplaces

PSYCHOLOGICAL HEALTH

in the Workplace



Canada





SOLUTIONS & STRATEGIES BASED ON EVIDENCE





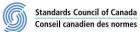


CSA Z1011:20 National Standard of Canada



Work disability management system





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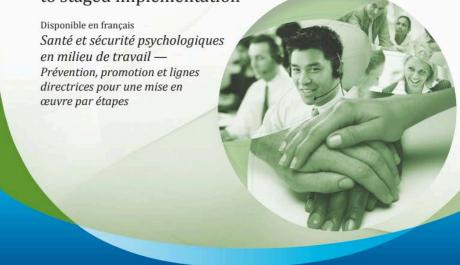




CAN/CSA-Z1003-13/BNQ 9700-803/2013 National Standard of Canada (reaffirmed 2018)

Psychological health and safety in the workplace —

Prevention, promotion, and guidance to staged implementation



Commissioned by the Mental Health Commission of Canada







Canadian Standards Association



CSAZ1003: Psychological Health and Safety in the Workplace

About the Standard

 Offers practical guidance to develop and maintain a psychologically healthy and safe workplace

Importance for health care professionals

□ Health professionals with expertise in trauma and operational stress injury may be involved in treatment options

CSAZ1011: Work disability management system

About the Standard

- □ Sets out the requirements for a work disability management (WDM) system
- □ Guidance on how to effectively manage workers' health needs to minimize the impact of work disability and effectively onboard workers with disabilities

Importance for health care professionals

□ Health care professionals with expertise in workplace disability may be involved in the case management process





Importance of Good Health

- What happen if health workers continue to face burnout
- Burnout in health workers make it harder for patients to get care when they need it
- If not addresses, this health worker burnout crisis will...



1. Cause health costs to rise



2. Hinder our ability to prepare for the next public health emergency



3. Increase health disparities





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RESEARCH ARTICLE

WILEY

Factors associated with burnout among medical laboratory professionals in Ontario, Canada: An exploratory study during the second wave of the COVID-19 pandemic

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Abstract

Objective: The objective of this study was to examine factors associated with burnout among medical laboratory technologists (MLT) in Ontario, Canada during the second wave of coronavirus disease 2019 pandemic.

Methods: We employed a cross-sectional design and used a self-reported questionnaire designed for MLT in Ontario, Canada.

Results: There were 441 (47.5% response rate) MLT who were included in the analytic sample. Most of the respondents were women, with a mean age of 43.1 and a standard deviation of 11.7. The prevalence of experiencing burnout was 72.3% for MLT. In the adjusted demographic model, those ≥50 (OR = 0.36, 95% CI: 0.22–0.59) were 0.36 or about one third as likely to experience burnout as those under 50. Similarly, those who held a university degree were less likely to experience burnout compared with high school degree (OR = 0.35, 95% CI: 0.15–0.79). In the adjusted occupational model, high quantitative demands (OR = 2.15, 95% CI: 1.21–3.88), high work pace (OR = 2.21, 95% CI: 1.25–3.98), high job insecurity (OR = 2.56, 95% CI: 1.39–





Factors associated with burnout among medical laboratory professionals in Ontario, Canada: An exploratory study during the second wave of the COVID-19 pandemic



Study objective: To examine factors associated with burnout among medical laboratory technologists in Ontario, Canada



Study Method: Cross-sectional design: Questionnaire and focus groups



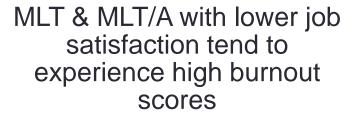
Study Findings: Demographic factors associated with burnout: education attainment and age. Occupational factors associated with burnout: high work demands, job demands, low job satisfaction and high self-regulated health





Occupational Factors Associated with Burnout







Lower quantitative demands, work pace, & work life conflict are protective factors against high burnout scores



Increased job security was associated with low burnout scores





Factors associated with work performance and mental health of healthcare workers during pandemics: a systematic review and meta-analysis

Behdin Nowrouzi-Kia^{1,2,3}, Gobika Sithamparanathan¹, Nirusa Nadesar³, Basem Gohar^{2,4}, Markus Ott¹

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ABSTRACT

Introduction Healthcare workers' work performance and mental health are associated with positive mental health outcomes and directly related to increased productivity and decreased disability costs.

Methods We conducted a systematic review to identify factors associated with work performance of healthcare workers during a pandemic and conducted a meta-analysis of the prevalence of mental health outcomes in this context. Primary papers were collected and analysed using the Population/Intervention/Comparison/Outcome framework and using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines. To critically appraise the studies included in the review, we used the AXIS appraisal tool to assess each cross-sectional study's quality.

Results The study identified nine factors associated with the work performance and mental health of healthcare workers, including experiencing feelings of depression, anxiety, having inadequate support, experiencing occupational stress, decreased productivity, lack of workplace preparedness, financial concerns associated with changes in income and daily living, fear of transmission and burnout/fatigue.

Conclusion There is a rapidly rising need to address the work performance and mental health of healthcare workers providing timely care to patients. Regular and sustained interventions, including the use of information and communication technologies such as telehealth, are warranted.

Keywords COVID-19, healthcare workers, pandemic, work performance, workplace mental health





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Factors associated with work performance and mental health of healthcare workers during pandemics: a systematic review and meta-analysis



Study objective: Conduct a systematic review to identify factors associated with work performance of healthcare workers during a pandemic and a meta-analysis of the prevalence of mental health outcomes.



Study Method: Systematic review and meta-analysis



Study Findings: Nine factors - experiencing feelings of depression, anxiety, lack of support, occupational stress, decreased productivity, lack of workplace preparedness, financial concerns, fear of transmission and burnout/fatigue





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Research Article

Factors Associated With Intent to Leave in Registered Nurses Working in Acute Care Hospitals: A Cross-Sectional Study in Ontario, Canada

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Abstract

Background: The work environment factors associated with nurses' intention to leave their jobs are not well understood because most studies have used non-probabilistic sampling methods, thus restricting the generalizability of the results. This study examined the relationship between work environment factors and intent to leave among nurses working in acute care hospitals in Ontario, Canada. Methods: This study included a random sample of 1,427 registered nurses who were part of a larger crosssectional study and who responded to a mailed survey that included measures of resource availability, interprofessional collaboration, job satisfaction, and demographics. Results: Most of the respondents were female (94.8%), with an average age of 45.6 years, and 14.5 years of nursing experience at their current workplace, which included mostly urban (94.6%) and non-teaching hospitals (61.8%). In the multivariate model, we observed that the work environment variables explained 45.5% of the variance in nurses' intent to leave scores, F(9, 1362) = 125.41, p < .01, with an R^2 of .455 or 45.5%. Job satisfaction (p < .01), flexible interprofessional collaborative relationships (p = .030), and resource availability (p < .01) were significantly associated with nurses' intent to leave scores. Conclusion/Application to Practice: Nurses who reported greater job satisfaction, flexible interprofessional relationships, and resource availability were less likely to express an intent to leave their hospital workplaces. Employers and health policy makers may use these findings as part of a broader strategy to improve the work environment of nurses. Occupational health nurses are ideally positioned to demonstrate leadership in promoting retention efforts in the workplace by advocating for





Factors associated with intent to leave in registered Nurses Working in Acute Care Hospitals: A Cross Sectional in Ontario, Canada



Study objective: Examine the relationship between work environment factors and intent to leave among nurses working in acute care hospitals



Study Method: 1,427 RNs completed survey measuring resource availability, interprofessional collaboration, job satisfaction, and demographics



Study Findings: Nurses who reported greater job satisfaction, flexible interprofessional relationships, and resource availability were less likely to express an intent to leave their hospital workplaces







ORIGINAL RESEARCH published: 16 March 2022 doi: 10.3389/fpsyt.2022.854507



The Forgotten (Invisible) Healthcare Heroes: Experiences of Canadian Medical Laboratory Employees Working During the Pandemic

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Objective: The purpose of this qualitative study was to understand the stressors and coping strategies of medical laboratory technologists (MLTs) and assistants (MLAs) working during the COVID-19 pandemic in Ontario, Canada.

Methods: In this descriptive qualitative study, we held two focus groups with MLTs and MLA who were working during the COVID-19 pandemic. The focus group sessions were transcribed verbatim followed by thematic analysis to develop codes and themes.

OPEN ACCESS





The Forgotten (Invisible) Healthcare Heroes: Experiences of Canadian Medical Laboratory Employees Working During the Pandemic



Study objective: To understand the stressors and coping strategies of medical laboratory technologists (MLTs) and assistants (MLAs) working during the COVID-19 pandemic in Ontario, Canada.



Study Method: A total of 13 participants across Ontario were involved in our study, which included one MLT (n = 7) group and one MLA (n = 6) MLA.



Study Findings: (1) COVID-19 contributing to the notable and existing staff shortage; (2) the pandemic reinforced that medical laboratory employees are forgotten within the healthcare system; (3) a poor work environment exacerbated by the pandemic; and (4) a resilient and passionate group.





Concluding Statements

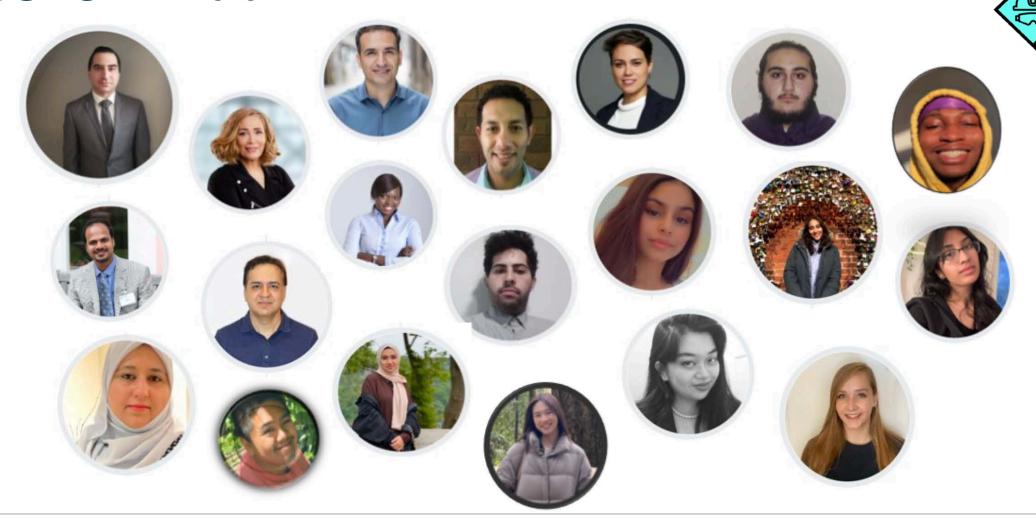
- Occupational stress and burnout in health care providers is an urgent and significant issue that needs immediate attention
- Strategies and solutions addressing occupational stress and burnout must be implemented to support healthcare workers to improve the healthcare system and patient care







ReSTORE Lab





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