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Title

Taking the Pulse of Primary Care Teams: Provider and Staff Wellness and Burnout in a Large Primary Care Network

Priority 1 (Research Category)

Practice management and organization

Presenters

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Abstract

Context: Assessment of wellness and burnout in primary care often focuses on providers. Less is known about wellness and burnout in other primary care team members, including actions that would improve wellness. Objective: To assess wellness and burnout in primary care providers and staff and identify actions to increase work-related wellness. Study Design: Cross-sectional survey. Setting: Jefferson Health system, with 100 primary care practices in the Philadelphia region. Population studied: Survey was emailed to all primary care providers and staff (N=1155) in February 2021, including providers, behavioral health consultants, nurses, medical assistants and all other clinical staff, quality/research staff, and all administrative staff. Instrument: Thirty-item survey: demographic items (age, sex, race/ethnicity, practice region, professional role), Perceived Stress Reactivity Prolonged Reactivity Subscale (PRS), Abbreviated Maslach Burnout Inventory (aMBI) with emotional exhaustion, depersonalization, and personal accomplishment subscales, Mini-Z Burnout Survey, 1-10 rating of work-related wellness, and an open-ended question asking what one thing would improve work-related wellness. Outcome Measures: Primary outcomes were average wellness and burnout scores: mean(standard deviation) (SD) PRS, mean (SD) aMBI emotional exhaustion, median and interquartile range aMBI depersonalization and personal accomplishment, mean(SD) Mini-Z score and response to Mini-Z burnout item, and mean(SD) 1-10 wellness rating. Responses were compared across demographic categories for significant differences ($p<.05$). Open-ended responses were analyzed for themes. Results: 429 providers and staff completed the survey (37% response rate). All roles were represented. Mean PRS score was 3.89(1.55), aMBI: emotional exhaustion: 9.11(5.25), depersonalization 1.00(4.00), personal accomplishment 15.00(4.00), Mini-Z 32.09(3.99) with 48% reporting some burnout, and 5.85(2.45) on 1-10 wellness scale. Results varied significantly by region and role. Open-ended responses (N=202) recommended increased staffing, increased administrative time, and better practice and leadership communication/teamwork. Conclusions: Our sample reported elevated prolonged stress reactivity but similar/slightly lower burnout than prior studies. Findings were shared with participants and action steps developed; survey will be readministered every 6 months.