



THRIVE not Survive

A Deeper Look at Provider Burnout

April 29, 2025



WORKFORCE
SOLUTIONS

EXTERNAL PEER REVIEW
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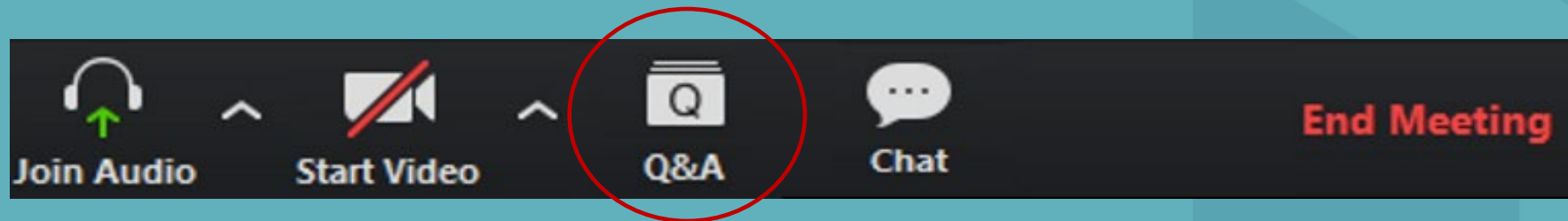
CONSULTING
SOLUTIONS

PHYSICIAN
LEADERSHIP

Medical Staff Services • Credentialing • Provider Enrollment • Peer Review • Quality • Risk Management

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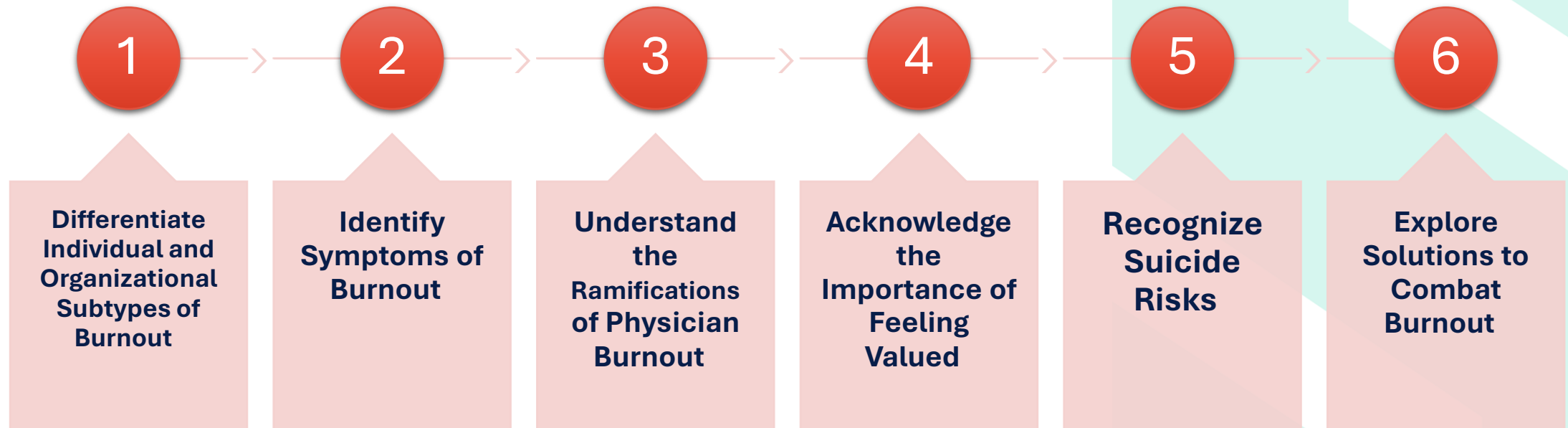
This webinar will be recorded and available to watch on demand for CME credit. The recording will be posted on the (<https://www.hardenberghgroup.com/resources>) page in approximately two weeks.

Di Thompson, MD
Senior Physician Consultant
Practitioner Health & Wellness,
Practitioner Burnout, Peer Coaching



Dr. Thompson is a nationally recognized psychiatrist with over 25 years of clinical experience in her role as a system-wide Wellbeing Medical Director. She has developed a diverse well-being program with multiple facets to support physicians and other advanced practice providers, including annual burnout assessments and a robust peer coaching program. This unique program has demonstrated improved provider burnout rates and has grown to include over 300 trained physicians and APP coaches.

Goals for today's session



WORDCLOUD



Organizational Resilience



Domains of Organizational Resilience in Healthcare

**Organizational
commitment**

**Workforce
assessment**

Leadership

Policy

**Efficiency of
work
environment**

Support

Burnout:

- Administrative Duties
- Challenging Patients/Families
- Conflicts With Colleagues
- Stressors At Home
- Fallout After Covid
- Geopolitical Turmoil



Maslach Dimensions of Burnout



Emotional Exhaustion

Feeling tired,
physically and
emotionally drained



Depersonalization

Feeling callous,
sarcastic, resentful,
numb



Personal Accomplishment

Feeling work is
meaningful,
worthwhile

It's a Universal Issue: Study of 60 Countries



In 2020 a total of 2,707 responses: half of healthcare providers from 33 countries reported burnout. Previously rates have ranged from 43% to 48%

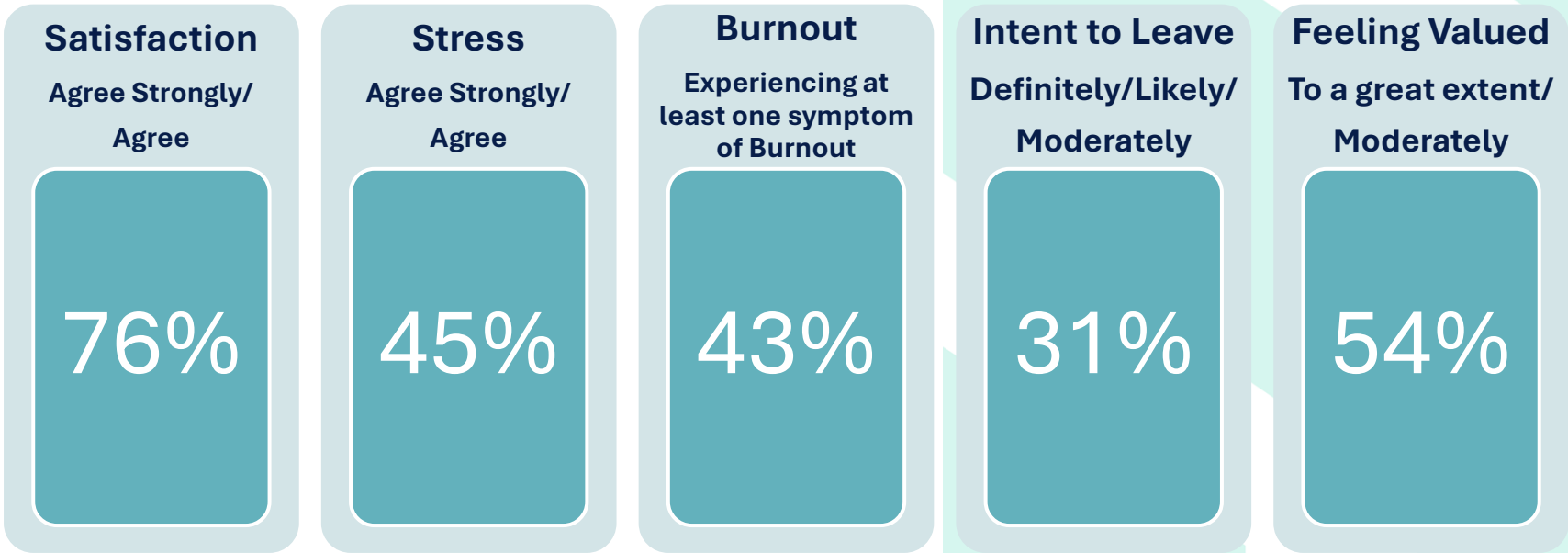


The **U.S.** had the highest reported burnout among all countries at a rate of over 50% in 2020. 2024 rate is 45%

2024 Key Performance Indicators

Physician Medical Specialty

2024 National
Physician Comparison



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2024 Key Performance Indicators

Physician Medical Specialty

	Satisfaction Agree Strongly/ Agree	Stress Agree Strongly/ Agree	Burnout Experiencing at least one symptom of Burnout	Intent to Leave Definitely/Likely/ Moderately	Feeling Valued To a great extent/ Moderately
Primary Care Specialty	77%	45%	43%	29%	55%
Hospitalist	75%	43%	43%	33%	53%
Medical Specialty	78%	41%	41%	30%	57%
Surgery Specialty	76%	47%	42%	35%	51%
Obstetrics & Gynecology	80%	50%	46%	31%	53%
Psychiatry	83%	35%	29%	33%	66%

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Gender and Burnout

Women physicians were more likely to suffer from symptoms of burnout—at **54.5%**—compared to **42%** of men

LGBTQ+ physicians experience more burnout, less professional fulfillment and greater intent to leave their practice than non-LGBTQ+ physicians.

Streed CG, Navarra M, Halem J, Stewart MT, Rowe SG. Academic Physician and Trainee Occupational Well-Being by Sexual and Gender Minority Status. *JAMA Netw Open*. 2024;7(11):e2443937. doi:10.1001/jamanetworkopen.2024.43937

Age and Opening a Bike Shop...

Pre-pandemic Medscape Survey / Physician Burnout Reported:

- 50% of generation X (40–54 years old)
- 38% of millennials (25–39 years old)
- 39% of baby boomers (55–73 years old)

Age and Opening a Bike Shop...

2024 AMA Survey:

- Women less likely to leave than men (33% vs 36%)
- Women more likely to switch to part-time.



<https://www.aamc.org/news/women-are-changing-face-medicine-america>



Physician turnover can cost organizations anywhere from \$500,000 to \$1 million or more for every physician who leaves.

Recognizing the symptoms: It's not personal, it goes way beyond that . . .

- Relationships
- Errors
- Absenteeism
- Presenteeism
- Reduced productivity
- Substance abuse
- Turnover
- Clinicians leaving the profession



Burnout: Real Consequences

Burnout is a significant predictor of:

- Hypercholesterolemia
- Type 2 diabetes
- Coronary heart disease
- Musculoskeletal pain
- Changes in pain experiences
- Prolonged fatigue
- Headaches
- Gastrointestinal issues
- Respiratory problems
- Severe injuries
- Mortality below the age of 45 years.



Salvagioni, Denise Albieri Jodas et al. "Physical, psychological and occupational consequences of job burnout: A systematic review of prospective studies." *PloS one* vol. 12,10 e0185781. 4 Oct. 2017

Feeling Valued

Direct relationship between feeling valued and both burnout and job satisfaction

Women physicians are also less likely to feel valued, at 45.8%, compared to 56.3% of men who felt valued.



Suicidal Ideation and Physician Suicide

- **One in 6** physicians have contemplated or attempted suicide. The rate of contemplated suicide has **risen from 9% in 2022 and 2023 to 15% in 2024.**
- About 38% said they knew one or more fellow physicians who had attempted or thought about suicide. Medscape Feb 21, 2025

National Violent Death Reporting System (NVDRS) data:

- The suicide risk was 47% higher among female physicians than female nonphysicians. During the same period, male physicians had a 16% lower risk for suicide than male nonphysicians.

Makhija H, Davidson JE, Lee KC, Barnes A, Choflet A, Zisook S. National Incidence of Physician Suicide and Associated Features. *JAMA Psychiatry*. Published online February 26, 2025. doi:10.1001/jamapsychiatry.2024.4816

Solutions:

Organizational Resilience

Burnout

Feeling Valued

Suicide Prevention

WORDCLOUD

name something that
is a red flag on an
application



WORDCLOUD

name something that
is a red flag that a
provider is
experiencing burnout



MSPs: Gatekeepers of Provider Access and Insight

What if
credentialing
professionals
were trained
to spot
burnout risk
factors the
same way we
identify red
flags in a file?

First to Notice: Credentialing and reappointment processes often surface early signs of distress—gaps in work history, delayed responses, performance concerns.

Trusted Eyes and Ears: Through committee coordination and provider support, MSPs may become aware of providers struggling with performance or engagement before leadership does.

System Navigators: MSPs know who to contact, what resources exist, and how to diplomatically advocate for provider support without breaching confidentiality.

Organizational Resilience: Organizational Committment



System based commitment to address and take action to support physicians' wellbeing

Collaboration for Solutions:

Foster dialogue on physician recognition and support in hospital and clinic settings.

Leadership plays a crucial role by:

- Removing barriers
- Adding resources

Organizational Resilience: Workforce Assessment



Formal Measurements
of Wellbeing and
Burnout

Interview physician
groups

Ask about “pajama
hours”, inbox volume,
confidence in
delegating

Organizational Resilience: Leadership

Presence & Accessibility:

Hospital administration remains consistently visible and approachable.

Conflict Management:

Leaders handle conflicts and criticism with an open, curious mindset.

Supportive & Flexible Leadership:

Foster an environment where communication is encouraged, providers are supported, and flexibility is valued.

Adaptive Strategies:

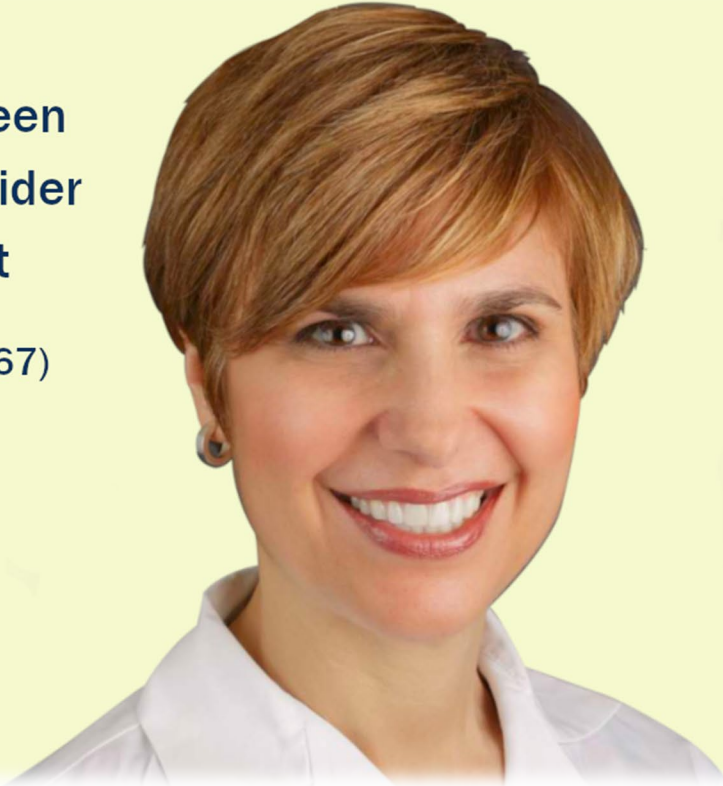
Encourage innovation and shared responsibility in problem-solving.



Organizational Resilience: Policy

The Dr. Lorna Breen
Health Care Provider
Protection Act

(S. 610 and HR 1667)



Review application for
hospital privileges

Revisit existing
policies/procedures



**If burnout shows up
in our workflows,
then wellbeing
should too.**

From Credentialing to Compassion – Operationalizing Wellness

Integrating Provider Wellbeing into Credentialing Systems

Advocate for removing invasive mental health disclosures that discourage providers from seeking help (TJC & Lorna Breen Act alignment).

Embed wellness check-ins or self-reflection prompts during reappointment processes.

Monitor late chart closures, credentialing delays, and reappointment red flags as potential indicators—not just compliance issues.

Develop non-punitive workflows for when credentialing or peer review identifies emotional or psychological distress.

Organizational Resilience: Efficiency of Work Environment

Minimize administrative work

Encourage teamwork

Minimize technology focused tasks



Organizational Resilience: Support



Create workflow that prioritizes teamwork and efficiency of care



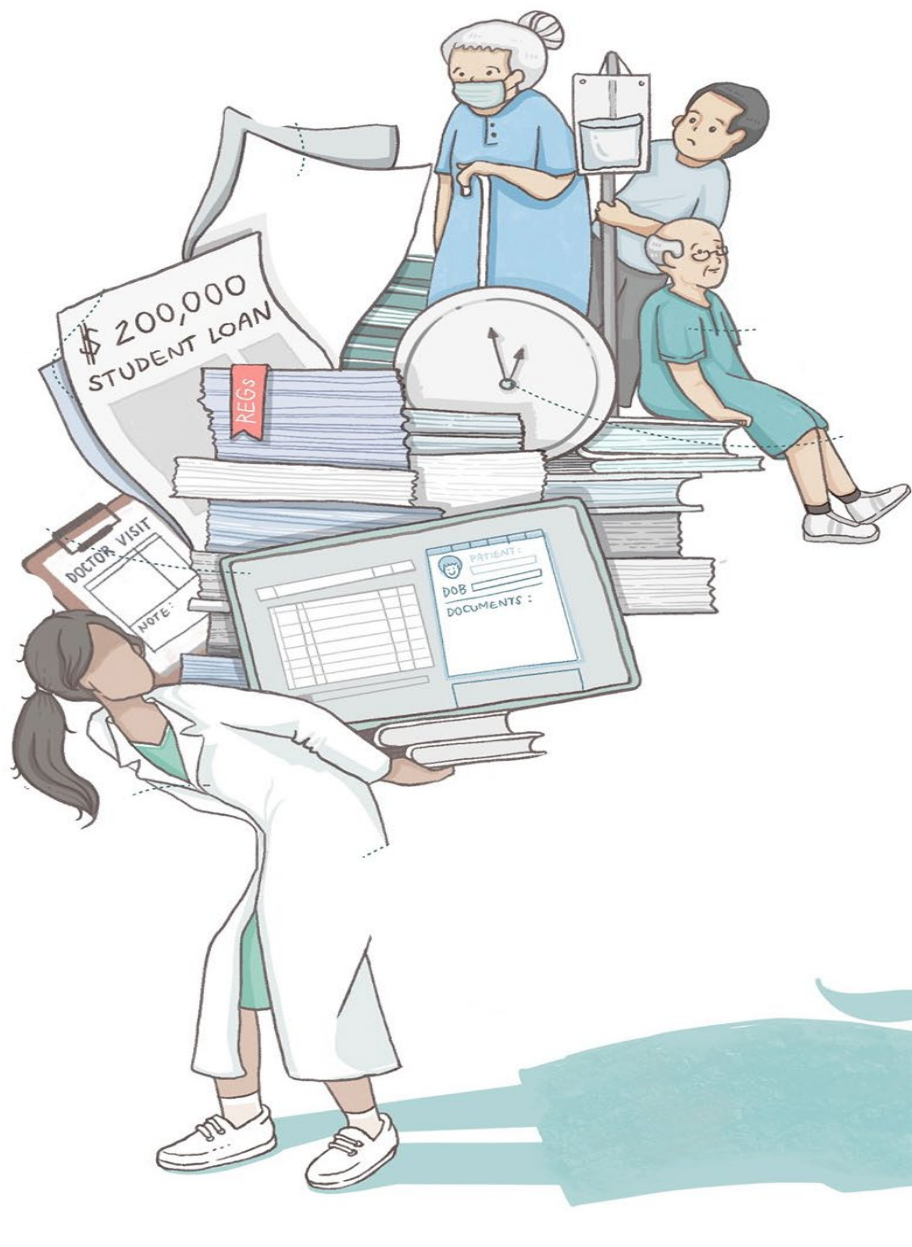
Leave work with physical and emotional energy for self care, friends and family



Create community at work



Offer formal or informal mentorship from leaders



The Reality of Burn Out

Effective Well Being Program

- Chief Wellness Officer
- Peer Coaching
- 24-hour physician specific hotline
- Conflict resolution resources for physician groups, between individual physicians and with others including staff, nursing
- Building Community
- Commensality (eating together) dinners
- Evening events with significant others
- Encourage engagement in activities outside of work including community/volunteer and personal growth i.e., taking a class, physical activity
- Metrics



The Value of a Peer Coach Training Program

22 Hospital System with Physician Peer Coaching

	Satisfaction	Stress	Burnout	Feel Valued
Peer Coach Training	87%	38%	27%	63%
No Coach Training	74%	44%	41%	50%

Boost Engagement: Foster belonging and motivation within teams.

Reduce Burnout: Offer support that alleviates stress and encourages well-being.

Build Community: Create networks for professional and personal support.

Altruistic Benefits: Enhance personal growth through helping others.

Call to Action: Invest in peer coach training to strengthen our community and promote a healthier workplace.

Value



“I just feel like I’m viewed as a cog in the wheel”



Schedule flexibility and autonomy to minimize work outside office hours, allows for more emotional availability at home.



Paid time off (PTO)-encourage them to be role models

Physicians’ responsibilities should also be fully covered when they’re on vacation



Ask about their interest in Professional development.

MSPs as Change Agents in Organizational Resilience

Call to Action:

- ☑ Train MSPs on recognizing burnout symptoms
- ☑ Include MSPs in wellness committees
- ☑ Empower MSPs to ask, “Are you okay?”—and know what to do next

Policy Shapers: MSPs are vital voices in revising bylaws, privileging criteria, and appointment policies to reflect modern realities of work-life balance and mental health.

Confidential Support: As neutral parties, MSPs can confidentially direct providers to EAPs, peer coaching, or wellness officers.

Champions for All: MSPs can raise awareness about vulnerable groups (women, LGBTQ+, early-career providers), but should never lose sight that burnout can impact ALL providers.

Suicide Prevention

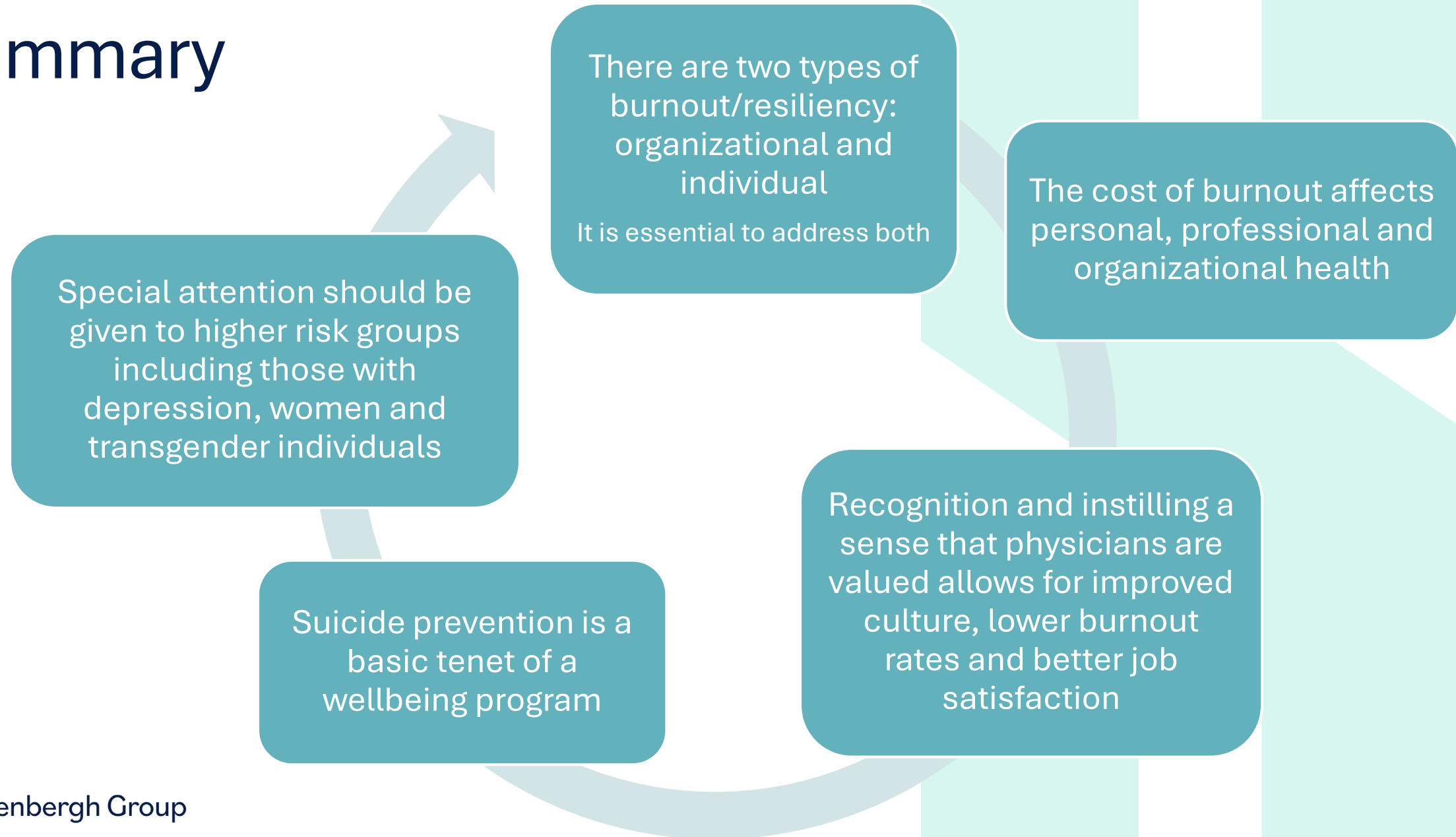
Identify Suicide Risk Factors and Warning Signs

- Promote Care-Seeking Behaviors as an accepted strategy; address “stigma” concerns
- Train Leaders to recognize symptoms of distress and how to refer when needed. Consider HRO training, Live vs pre-recorded learning modules
- Make it easy to get help: identify your resources including state led physician health programs, employee assistance programs
- Consider asking local psychiatrist if they are willing to see physicians in need of clinical care and maintain the list

The Facts of Physician Suicide

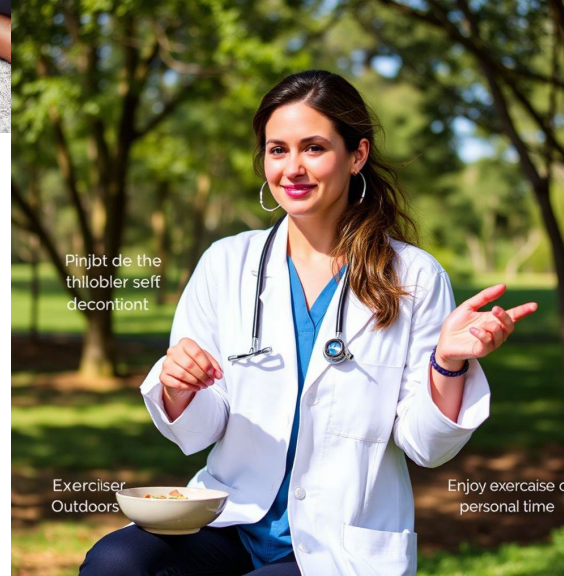
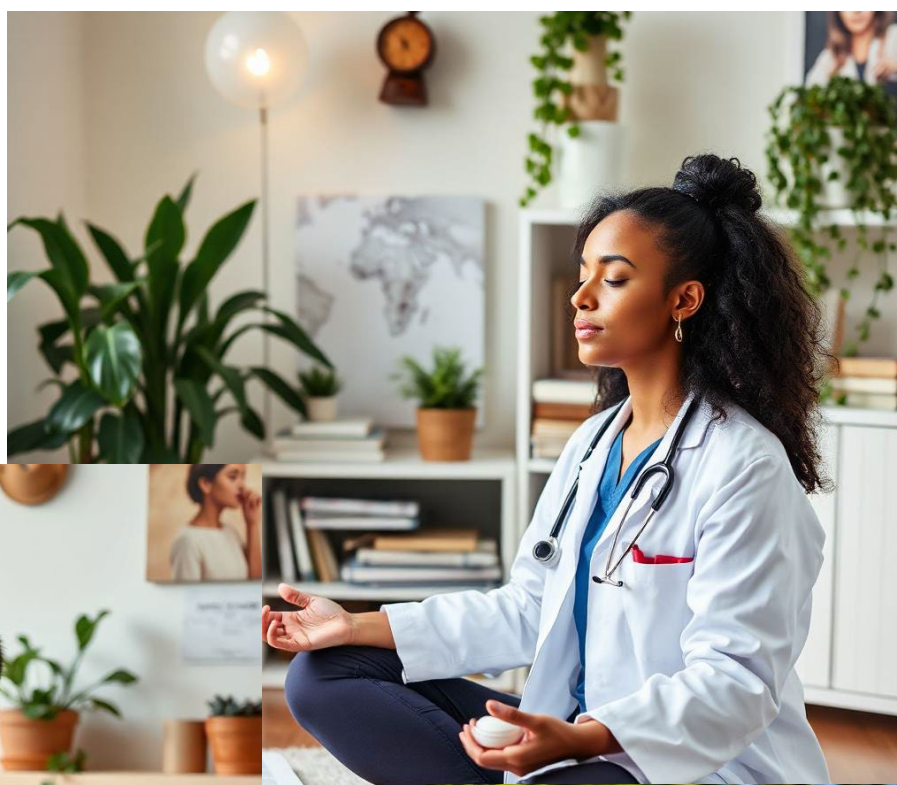
- Doctors have the highest suicide rate of any profession, about one every day
- The number of doctor suicides -- 28 to 40 per 100,000 -- is more than twice that of the general population
- Doctors who die by suicide often have untreated or undertreated depression or other mental illnesses
- Depression affects an estimated 12% of male doctors and up to 19.5% of female doctors
- Due to knowledge of and better access to lethal means, physicians have a far higher suicide completion rate than the general public, between 1.4-2.3 times the rate achieved in the general population

Summary



Self Care

Be the role model!
Take care of you!



Questions?

Thank
you



Thank you for your time!

If you're interested in learning more about Physician Coaching or establishing a well-being program in your organization or facility, please don't hesitate to reach out. Together, we can enhance the health and happiness of our medical community!

Schedule a call:



SCameron@HardenberghGroup.com



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