Strategies and Interventions to Improve Healthcare Professionals' Well-Being and Reduce Burnout

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Kelsey et al report the results of a promising pilot study on the role of shared experience on healthcare workers' wellbeing in the workplace.¹ As primary and secondary healthcare professionals, we are acutely aware of the growing occupational burnout affecting healthcare workers' mental, emotional, and physical well-being.²⁻⁴ Therefore, this article aims to provide an overview of effective strategies and interventions to address it.

Burnout is a psychological response to chronic workplace stress that can lead to feelings of exhaustion, increased mental distance from one's job, negativism, cynicism, and reduced professional efficacy.⁵ The COVID-19 pandemic worsened its prevalence and harmful effects in the healthcare workforce.^{6,7} Burnout can be caused by several factors, including increasing workload, inadequate support, lack of control and autonomy, a stressful work environment and moral injury from the inability to meet patient needs and demands.⁸⁻¹⁰ Evidence suggests that it has relatively high stability over time, with studies showing that physicians who score high on burnout assessment at one point in time tend to continue to do so at subsequent points, at least up to about 3 years.¹¹

The effects of burnout can be far-reaching, adversely impacting both patients and healthcare professionals.^{12,13} It can lead to reduced patient satisfaction, medical errors, and decreased quality of care.¹²⁻¹⁴ It can also lead to increased absenteeism, reduced productivity, physical and mental health problems, poor social relationships, and reduced job satisfaction among healthcare professionals.^{14,15} While high Maslach Burnout Inventory (MBI) scores (regarded as the gold standard assessment) are associated with worsened performance, the relationship between burnout and job performance can be complex and multifactorial. It may depend on a variety of individual, organizational, and contextual factors.16

It is crucial to address burnout and promote a healthy work environment, ensuring high-quality patient care.10 Neither the high prevalence nor the deleterious effects of occupational burnout are contentious. Therefore, we must focus on developing effective interventions and their implementation and sustainability. Based on our experiences as healthcare professionals and researchers, no single intervention would be sufficient to deal with burnout. Hence, a multi-pronged approach involving individual and organizational-level strategies will be most effective.16

Managing workload is a crucial factor in reducing burnout among healthcare workers.¹⁷ Evidence from a systematic review (of randomized controlled trials and observational studies) shows that the limitation of duty hours is an effective intervention.¹⁸ Furthermore, adequate staffing levels and flexible work schedules will be essential in reducing workload. Realistic workload and expectations with appropriate resources and training are crucial in reducing burnout and increasing engagement in the workplace.9

Additionally, healthcare workers face considerable stress and pressure on the job, which can affect their physical and mental health. Individual-focused interventions, such as mindfulness, stress management, and small group discussions, can be effective in reducing burnout.¹⁸ Therefore, such services, including counseling and mindfulness, should be made accessible by healthcare employers. However, they are an addition and not a substitute for occupational interventions such as ensuring adequate staffing and manageable workloads.

Providing access to professional development opportunities, training, and educational resources can help workers feel more confident, engaged and motivated, thereby reducing burnout.9,19 Moreover, experiencing autonomy and control over the work environment are protective factors in burnout.²⁰ Additionally, doctors who rated their supervisor's

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leadership behavior highly showed lower levels of burnout, intention to leave their job, and higher levels of professional fulfilment.²¹ Supportive colleagues and healthcare managers can have a significant impact on healthcare workers' wellbeing. Group activities and discussions can be helpful if staff feel the leadership is approachable, supportive, and responsive to their needs and concerns. The recent strikes in England by doctors in training²² and by nurses and other occupational groups indicate that many healthcare professionals working in England's NHS currently feel undervalued and feel they lack adequate support in the workplace.²³

Peer support can also help them feel connected to their colleagues and provide them with a sense of community. Kelsey et al point out that being part of a community such as a virtual book club can be beneficial. In addition to wellness activities and social gatherings, mentoring from peers can also be an effective intervention for burnout.²⁴

The workplace should not be regarded just for expending energy but rather for getting recharged, motivated, and inspired. Furthermore, work culture should encourage a healthy and balanced life. This could mean regular meal breaks and rest periods, paid time off work, flexible work schedules, and cultivating personal interests outside professional work. Organizational culture and leadership are vital in fostering a balance between personal and professional life.²⁴

In conclusion, while growing evidence supports various interventions for addressing burnout, significant challenges remain in their development and implementation. Organizational-level changes are necessary to foster supportive environments that prioritize individual growth and flourishing over short-term gains in areas such as patient flow and healthcare delivery. Furthermore, resources could be redirected from programs such as resilience training to shared activities and experiences, including mindfulness and group discussion.

A culture of openness and support that encourages practitioners to seek help when needed, without fear of stigma or negative consequences, is also essential for staff's psychological safety and long-term well-being. While resilience training is one potential solution, it only has a modest impact on reducing burnout among healthcare professionals.²⁵ There is also a potential risk in emphasizing individual resilience. This approach may foster a culture of blame and selfcriticism rather than a focus on systemic support programs that address wider issues in the workplace. Addressing healthcare burnout requires a multifaceted and sustained effort toward creating supportive and safe work environments. This means viewing it as a shared responsibility between healthcare systems and individual physicians.¹⁶

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