

a VITAL WorkLife article

# The Challenges of Well Being: Battling Early Career Physician Burnout

By Liz Ferron, MSW, LICSW



## Coming up in the article:

- A look at the issues facing early career physicians
- The challenges of well being
- Solutions for ending the burnout cycle

If we're concerned about the future of medicine—not to mention the costs of turnover—we need to pay attention to Penelope Hsu, MD, a physician, life coach and VITAL WorkLife consultant who counsels practitioners.

She says, "I have two clients right now who are two years out of residency and ready to quit medicine."

Dr. Hsu's clients sound like they're experiencing at least some of the signs of burnout<sup>1</sup>—a problem for physicians in all age groups, that is particularly acute among early-career practitioners. In a Mayo Clinic study of 36,000 residents published in the fall of 2018, for example, 45 percent reported at least one warning sign of burnout—and members of this group were more than three times more likely to regret their decision to enter medicine than others in the survey.<sup>2</sup>

Burnout begins with stress, and while medicine is inherently stressful given what's at stake—human life and health—contemporary medicine has some well-documented extra stressors, including:

- The hours of coding electronic medical records
- Aging patient populations, often with multiple conditions
- Pressures from leadership to increase productivity, which can whittle down per-patient time.

1. "Physician Burnout: Its Origin, Symptoms, and Five Main Causes," Dike Drummond, MD, Practice Management, September-October 2015.

2. "Many Young Doctors Report Burnout, Regret Career Choice," HealthDay News, UPI, September 18, 2018



## A Different Landscape

These affect most physicians, of course, but early-career practitioners face special challenges, according to Dr. Hsu. “The landscape of medicine has changed,” she says. “Older doctors came into medicine when the prestige of the profession was higher. Today this respect has been knocked down quite a few notches; a patient might say, ‘I looked up my condition on Google, and I want an MRI.’ New practitioners are immediately competing with Dr. Google, not getting the deference their older peers got in their earlier careers, and can start to feel their work doesn’t really matter—which can be a warning sign of burnout.”

The often-punishing time demands of technology—hours and hours of charting and coding—hit younger doctors at a time of life when many are raising young families, and at a time in the culture when work/life balance has become more of a value. “The older doctors will begrudgingly take the charting home at night and on weekends,” says Dr. Hsu. “Research shows many practitioners average two hours a night after work just charting. The younger ones don’t want to do this. They have hopes and expectations for a more balanced life including family and other concerns.”

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*Penelope Hsu, MD*



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## The Challenges of Well Being

They also know and care about well being. “There’s a whole industry centered on well being and self-care which didn’t exist twenty years ago,” says Dr. Hsu, “and so there’s a general awareness among younger physicians: their lives should be balanced for health reasons too, and they should relax, have fun, enjoy life. But medical training still says, sacrifice yourself for your patient at all costs. So young doctors are hearing dual messages, and because they can’t reconcile them, they feel very frustrated.”

In fact, she suggests, the expectation for practitioners to avoid burnout by handling stress can seem like just another responsibility being piled on them—and thus another source of stress—“especially in a medical culture totally unused to thinking along those lines,” she says.

Perhaps the most significant stress factors of all are learning and transition. Young doctors are learning the day-to-day realities of the profession, and while they’re on this steep learning curve they’re experiencing challenging transitions: from student to resident, resident to brand-new staff physician. “And although conditions differ in different work environments, overall, they’re left to navigate those transitions on their own,” Dr. Hsu notes.

## Solutions for Ending the Burnout Cycle

1

### **Solution: Mentoring**

Faced with these challenges, the young practitioner needs someone to talk to and learn from. “There’s a lot of data showing mentorship is very important—having someone to go to with those cases and situations you don’t know how to handle can act as a real buffer against burnout,” says Dr. Hsu.<sup>3</sup> (She also says mentoring can be a two-way street, with tech-savvy younger doctors helping their older colleagues meet the challenges posed by EMRs.)

In a Medscape article, Rosalyn E. Plotzker, MD, notes in the past mentorships between older and younger doctors tended to come into being spontaneously, but the faster pace of today’s practice means dedicated mentoring programs need to be set up by the organization. “The matchmaking process varies widely across programs,” she writes. “In some cases, preceptors are assigned to mentees during the onboarding process. In other cases, a resident identifies a research mentor during intern year.”<sup>4</sup>

2

### **Solution: Flexibility**

Being flexible about scheduling is often recommended to organizations as a way to make the most of older physicians who may be transitioning into new roles or retirement<sup>5</sup>, but it’s crucial for early-career physicians’ work/life balance as well, according to Dr. Hsu. “Younger doctors are trying to get more flexible hours,” she says, “and many of them are working part-time or in urgent-care facilities operating outside of traditional open hours, but many organizations still just don’t understand the need. I don’t think they’re trying to deny the physicians balance—they just don’t quite get the concept.”

3

### **Solution: Social Support**

Besides mentoring, the young practitioner thrust into the stressful challenges of medical work/life also needs informal social support—gatherings with peers to socialize, blow off steam and get to know one another. This kind of support can be hard to come by, given the stresses and time constraints of practice, but Dr. Hsu believes it can, and should, be mandated by organizations in the form of after-work get-togethers.

“Forced socialization—it sounds so artificial, like no fun—but with drinks and free food it can work,” she says with a smile. And if physicians don’t want to hang around the workplace after hours, she suggests leaders make it clear they’ll support informal gatherings at bars or restaurants by letting staff use the company credit card.

<sup>3</sup> “For Young Doctors, a Mentor Can Provide Emotional Support,” Joanne Finnegan, Fierce Healthcare, March 10, 2017

<sup>4</sup> “How Mentors Can Help Young Doctors Avoid Burnout,” Rosalyn E. Plotzker, MD, Medscape, March 9, 2017

<sup>5</sup> See our article “The Challenges and Opportunities of the Aging Physician,” September 18, 2018



Download the Physician & Advanced Practitioner Well Being Solutions Survey to learn how you can help your physicians & advanced practitioners.

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#### ABOUT VITAL WORKLIFE

VITAL WorkLife, Inc. is a national behavioral health consulting practice supporting all dimensions of well being. Our healthcare solutions are designed specifically to meet the unique needs of physicians and providers. Our team of licensed master's and doctorate level senior consultants, physician peer coaches, psychiatrists and other specialists have deep experience in issues surrounding physician performance, satisfaction and retention. Our ultimate goal is to proactively help physicians and organizations address issues before they escalate to the point of affecting performance and patient safety.



#### LIZ FERRON, MSW, LICSW

As our Physician Practice Lead, Liz Ferron manages Physician Well Being Resources for VITAL WorkLife, as well as oversees all solutions of our healthcare clients. Liz provides training, consultation, counseling and coaching to healthcare

administrators and individual practitioners in many areas, including stress management, change management and conflict resolution. Liz is a Licensed Independent Clinical Social Worker and received her MSW degree in clinical social work from the University of Minnesota. She was also a consultant for the Earl E. Bakken Center for Spirituality & Healing at the University of Minnesota. She has served three terms as President of the Minnesota Employee Assistance Program Administrators and Counselors (MEAPAC) and is a former adjunct faculty member at the College of St. Benedict.

## Hidden Consequences—and Advantages—for Organizations

"Many leaders fail to see the consequences of the stress-to-burnout process for the whole organization," says Dr. Hsu. "They think of it as an individual problem with an individual solution. 'We'll just adjust her schedule,' they may say. But these issues affect the entire organization and addressing them can bring positive results to the entire organization."

Not only can it build loyalty, and with it efficiency and productivity in a medical workforce less prone to burnout and resignation, but the fact the organization supports its practitioners in this way can be a potent recruiting tool—"something leaders can and should promote," says Dr. Hsu.

"If you really take in this concept of well being," she says, "your staff—not just the young practitioners, but all of them, and not just the physicians but nurses and administrative staff—they function better and longer; they turn over less. This is how you nurture a group of people who will be loyal to you, who will work very hard for you, who will be more efficient for you, if you take care of them."

Your younger practitioners want to keep their faith in medicine as a career and do their best for you. Building mentoring, flexibility and social support into your organizational culture can go a long way toward showing them you care about their well being—and that care will keep them on your team.

**For more on building an organizational culture supporting the needs of younger practitioners and everyone else on your staff, [contact us here.](#)**

**Phone:** 877.731.3949

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#### Sources:

1. "Physician Burnout: Its Origin, Symptoms, and Five Main Causes," Dike Drummond, MD, Practice Management, September-October 2015.
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