

a VITAL WorkLife article

Beyond the Frontlines: Exploring Burnout Among Healthcare Executives

By Steven E. Swanson, MD, MBA



Coming up in the article:

- Burnout: The Great Equalizer
- Strategies for Mitigating Burnout

The Mayo Clinic describes "job burnout" as a state of physical, emotional and mental exhaustion that may involve feeling useless, powerless and empty.

In the context of healthcare, there is abundant literature describing the corrosive effect of burnout on the performance of front-line healthcare providers including physicians, nurses, therapists and hospital staff that can lead to suboptimal patient care. To reduce employee burnout, many health systems are now providing support to improve the work environment and offering other well-being solutions to help their staff cope with the stressors that can lead to burnout.





Only recently has there been any recognition that burnout could impact the performance of senior healthcare executives. This group is often thought to have the power, influence and decision rights that protect them from the types of stressors that impact front-line workers. In 2018, the healthcare executive search firm WittKieffer surveyed nearly 400 healthcare executives, of whom about 60 percent reported some degree of burnout. More than half said that the stress and demoralization might cause them to leave their positions.

Healthcare executive leaders are equally vulnerable to the mental, emotional and physical fatigue associated with burnout. A 2021 study by Tait Shanafelt, MD defined some of the stressors impacting these leaders:

"Besides ensuring a sufficient, engaged, and adequately supported workforce, these operational leaders (both executives and managers)...must set the strategy for their organization, safeguard the quality and safety of patient care, meet expectations of patients and their families, provide a safe and equitable workplace, respond to regulatory changes, work with payers so that patients have access to the healthcare system, manage the impact of reduced reimbursement for clinical care, position the organization in a competitive marketplace, and ensure financial viability of the organization."

And all of this while coping with an understaffed workforce that may be afflicted to various degrees by extreme stress and burnout.

In 2022, WittKieffer released the results of another survey of healthcare executives reporting executive burnout increasing from 60 to 74 percent. Post-pandemic challenges contributing to this include staffing shortages, disengaged workforce, rising costs and decreasing reimbursement.

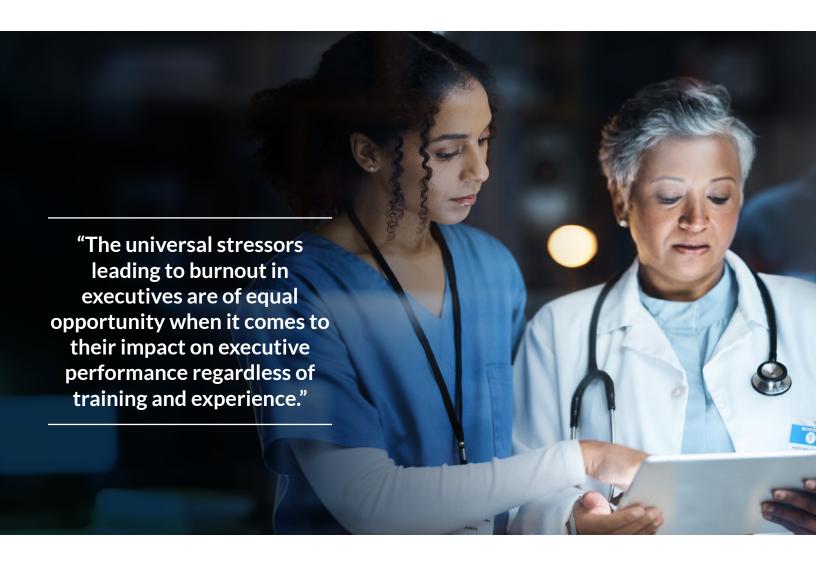
Burnout: The Great Equalizer

Here is the open question that gets to the point of this discussion, "are clinically trained healthcare executive leaders (like physicians or nurses) uniquely able to manage the stressors leading to executive burnout in healthcare as compared to non-clinically trained healthcare executive leaders?"

If I had to provide a quick and direct answer, I would say "no." A better, and more nuanced answer might be that "it depends." There are probably some circumstances where a clinically trained executive might have more experience and context in areas of clinical quality and safety, operating room staffing and supplies, whereas a more classically trained business executive might have more experience and resilience in areas like compliance, human resources or financial management.

Emotional intelligence, integrity, communication and listening skills, stamina, judgment, business acumen and financial literacy are also very important skills, and necessary, for success as a physician executive.

-Steven E. Swanson, MD, MBA



The universal stressors leading to burnout in executives are of equal opportunity when it comes to their impact on executive performance regardless of training and experience. Issues such as not having enough time in the day, lack of control, not enough compensation, or feeling like no one is listening are common to all executive leaders regardless of their training, experience or industry. Hence the term, "The Great Equalizer" fits for burnout-no one is immune.

My personal opinions on healthcare leadership are obviously shaped by my own experience as a practicing neurosurgeon, medical staff leader, health system executive, corporate executive and most recently, a physician executive peer coach. Physicians (and nurses for that matter) are most likely picked for leadership roles based on their clinical performance. It can be a challenge to influence physician

behavior or provide stable medical staff leadership when your clinical skills aren't respected by those you are supposed to be leading. You must either demonstrate excellence in clinical care or have an excellent reputation for your past clinical performance to be respected by the clinicians you are leading in the organization. If you don't have that clinical credibility, your leadership may not be respected by your team.

It turns out that while that clinical competence is essential, that quality alone is not sufficient to succeed in an executive role and to be a respected physician leader. Emotional intelligence, integrity, communication and listening skills, stamina, judgment, business acumen and financial literacy are also very important skills, and necessary, for success as a physician executive.



Being able to show vulnerability is a critical leadership skill, yet, my training in neurosurgery suggested that a neurosurgeon sharing vulnerability was a sign of weakness. If you were vulnerable in the operating room, you were putting the patient at risk. In a conference room, many executives understand that modeling humility is a critical leadership trait; it isn't a sign of weakness-but a sign of strength. It can be challenging for clinically trained healthcare executives to overcome the habit of making critical decisions in the moment. To mitigate the effects of burnout on themselves and others, healthcare executives must understand both sides and that in stressful situations, showcasing your humanity signals active engagement and open collaboration from others.

When I was a practicing surgeon, I viewed hospital administrators not so much as colleagues but rather as facilitators-providing the resources needed for me to provide neurosurgical care for my patients safely and efficiently. Only when I started to lead at the enterprise level in the health system and in the corporate environment did I come to appreciate the important skills that my nonphysician executives had developed over their career. Their education was predominantly in business management and finance, but their professional experience developed crucial skills like project management, working in teams and developing talent.

Physicians tend to be autonomous, self-directed, task oriented and credible in their field. If they are good to patients, have excellent results and are reasonable to work with they can make a real contribution to society and will be a critical asset for the health system and the community. They experience burnout when non-physicians assign arbitrary metrics to evaluate and determine care, compensation and clinical support. There is often a dynamic tension between the clinicians and the non-physician hospital executives around resource allocation, financial performance and program support.

Sometimes, a skilled physician executive can bring some credibility and empathy to the discussion to share perspectives and reach agreements. If that tension cannot be managed, the practice environment deteriorates and burnout can follow. If key talent leaves the organization, whether it is a practicing physician, a hospital executive or a clinical leader-all that critical institutional knowledge goes with them. No one wins, and patients suffer.

Mutual respect between the executive team and the clinical providers can foster open communication and shared initiatives to optimize the care environment in the health system. Healthcare is inherently stressful because the stakes are always high when you are treating sick patients and diseases never rest. A disengaged, burned out team will not be able to rise to that challenge-and that includes those who lead them. So, what can executives do to mitigate that risk?







Strategies for Mitigating Burnout

Make burnout a topic of discussion. Isolated individuals are more likely to experience burnout and burnt out individuals tend to isolate. If caregivers and executives understand that the most senior leaders and the board members are fully engaged in finding solutions to this vexing problem, there may be a shift to a culture of optimism... particularly if everyone can see some meaningful improvements.

Explore Executive Coaching resources. Executive coaching can be helpful to provide leaders with the tools and expertise to grow as an executive and service their organization to its fullest potential. By having a dedicated coach, they can help build strong well-being skills and better work/life integration, all to help head off the likelihood of burnout and the <u>ripple effect</u> that can have across the organization.

Model authenticity and boundaries. Share what you are experiencing, and what you are doing to manage it. Set some personal boundaries and share them with others. Practice self-care.

Build connections. Executive leadership can be an isolating role. Suffering in silence leads to burnout. Engage with peers both within the organization as well as outside organizations either informally or in formal affinity groups.

Encourage leaders to access programs. Ask your executives to take advantage of institutional wellness resources and coaching as a means of building resilience.

The healthcare executives' responsibilities are extraordinary but so are their contributions to the community. We owe it to ourselves to take executive burnout seriously - it is not a sign of weakness. Focusing on a culture of well-being for everyone including executives demonstrates our commitment to humane healthcare and delivers positive patient, caregiver and financial outcomes.



Contact us to learn more about how to foster a culture of well-being and launch a well-being program for your organization.



Contact us by phone at 877.731.3949, or online at **VITALWorkLife.com/contact-us**



Scan the QR Code to schedule a free consultation.

ABOUT VITAL WORKLIFE

VITAL WorkLife is the leading mental health and well-being expert for healthcare organizations and their workforce. We've focused on healthcare since 2007, and today our innovative solutions are leading the way in helping physicians, nurses and entire care teams address professional burnout, life challenges and barriers to seeking help.



STEVEN E. SWANSON, MD, MBA

Dr. Steve Swanson is a boardcertified neurological surgeon and has been a Peer Coach with VITAL WorkLife since 2020. He received his medical degree from Mayo Medical School in

Rochester, Minnesota and completed his residency at the University of Michigan Neurosurgery in Ann Arbor, Michigan. He also holds an MBA from the University of St. Thomas Opus College of Business in Minneapolis, Minnesota. Dr. Swanson is currently the President and Principal Consultant of 3Pines M.D. Strategies, LLC, a consulting practice that aims to empower clinicians and healthcare leaders to achieve career goals and lead initiatives that will improve the lives of their patients. He is a certified coach through the SurgeonMasters Physician Coaching Training program.

SOURCES

- 1. https://oitecareersblog.od.nih.gov/tag/preventing-burnout/
- The survey is no longer available online, but there is a useful summary in Fred Pennic, "Report: Understanding the Impact of Burnout on Healthcare Executives," HIT Consultant, January 28, 2019. https://hitconsultant.net/2019/01/28/impact-of-burnout-on-healthcare-executives/
- Tait Shanafelt, MD et al., "Assessing Professional Fulfillment and Burnout Among CEOs and Other Healthcare Administrative Leaders in the United States," Journal of Healthcare Management, September, 2022 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9447437/
- 4. WittKieffer, "Burnout in Healthcare Executives: A Call to Action" https://wittkieffer.com/insights/burnout-in-healthcare-executives-a-call-to-action