



Editorial

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The Impact of Stress, Burnout, and Personality on Physician Attitudes and Behaviors that Impact Patient Care

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Abstract

Physicians are trained to provide best patient care. It takes years of dedicated time, effort and commitment, and the reward is the joy of practicing good medical care. But the changing nature and complexity of today's health care environment is increasing physician levels of frustration, anger, cynicism, and more, leading to high levels of stress and burnout that has negatively impacted physician attitudes and behaviors toward patient care. We must recognize the seriousness of this issue and provide the necessary support and assistance to help physicians thrive and succeed in medical practice.

Keywords: Stress and Burnout; Physician Behavior; Physician Engagement

Background

Physicians just want to practice good medical care. Years ago physicians would practice in a relatively autonomous environment depending upon their accrued knowledge, technical skills, and experience to make the appropriate medical decisions and provide the necessary interventions to deliver high quality care. Over the past twenty years the introduction of managed care, utilization controls, and risk based contracting started the era of external oversight of physician practices and outside intrusions telling physicians what they can and cannot do. Health Care Reform has added further fuel to the fire by introducing accountable health care initiatives holding physicians accountable for their performance by introducing a number of different performance metrics that measure satisfaction, quality, and safety, financially rewarding or penalizing physicians for their reported outcomes.

Changing incentives and priorities have forced many physicians to leave private practice to become employee physicians working under an assortment of productivity based performance models pushing them further away from traditional fee for service reimbursement. The ready availability of public access to medical information, the introduction of the electronic

medical record mandates, and theenforcement of standardized guidelines and suggested algorithms have further diluted their sense of control. For physicians who have been in practice for more than 10 years, they are becoming more dissatisfied, frustrated, angry, and cynical toward medical practice. Recent studies have suggested that nearly 50% of physiciansreport high levels of stress and burnout causing many physicians to either change practice models, move into new careers, or retire prematurely [1]. For those that remain, the concern has to be both for their individual well- being and their attitudes and behaviors that can negatively impact patient care [2,3].

Strategic Direction

This is a serious situation [4]. The problem is that we can't leave it up to the physician to take care of things on their own. There needs to be a strong organizational commitment and dedicated process in place for helping physicians before it gets too late (Table 1). The first issue is physician awareness. Many physicians are unaware of the effects of stress and burnout and how it may negatively affect their thoughts and actions. If and when they do realize what's happening, their first impulse is that they can handle it on their own. After all, they have worked under

stressful conditions all their life. Then, if they do recognize it's a concern, barriers to action and seeking outside help include their super ego, the fear that if someone finds out it there may be questions raised about competency, and the fact that they are so overwhelmed that they don't have the time to address the issue as patient care needs come first. All of these concerns are valid. The approach the organization needs to take is first recognizing their physicians as a precious valuable resource, and then focusing on the fact that they are here to help them thrive and succeed in their practice with efforts aligned around a mutual goal of patient centered care. Physicians need to know that you understand their state of affairs and empathize with their concerns. Physicians need to be assured that all efforts will remain confidential. Scheduling appropriate interventions should accommodate the physician's schedule. Bepro-active in your efforts in trying to help.

Table 1: Strong organizational commitment and dedicated process in place for helping physicians before it gets too late.

Raising physician awareness
Understanding the physician personality
Addressing stress and burnout
Enhancing physician motivation and engagement
Promoting physician well- being

The next area of focus is to gain a better understanding of the physician personality. Personality is a reflection of a mixture of internal and external factors. Issues related to age (generation), gender, ethnicity, culture, spiritual beliefs, geography, socioeconomics, the rigors of medical training, and other current external forces all contribute to one's values, perceptions, biases, attitudes, and behaviors [5]. Most physicians have very strong ego-centric personalities which perpetuates individualism and autonomy. Providing appropriate education and physician training to help physicians gain a better understanding of these issues will help when trying to introduce programs to help address physician attitudes and behaviors.

Stress and burnout play a strong role in affecting the physician's demeanor. The focus on stress management interventions is to help the physician better adjust to the pressures and demands of today's health care environment. While generic stress management programs may be of help, more individualized training may be needed. Other areas of focus might include training in emotional intelligence, mindfulness, resiliency, and/ or enhancing overall conflict management, leadership, communication, and team collaboration skills. Many organizations now offer the services of a coach or counselor to work with the physician one on one to help individualize strategies geared to improving their attitudes and behaviors to better adjust to the pressures of medical practice. In some cases, more severe behavioral abnormalities may require a higher level of intervention.

Organizational support and commitment are crucial to the success of any physician support program [6]. In addition to addressing the behavioral component, organizations can also provide appropriate logistical and administrative support. Be sensitive to physician capacity and productivity concerns related to patient scheduling, committee responsibilities, and on-call requirements. Provide assistance to ease the path to electronic medical record documentation requirements through additional individualized training or through the use of dedicated "scribes". Help to reduce some of the clinical load by using Physician Assistants, Nurse Practitioners, or Care Coordinators to help free up time for the physician to deal with more complex medical patients.

Enhancing physician engagement is the best way to ease the pain and get physicians more in tune with the joys of medical practice [7]. In order to do these there must first be a process in place where the physician is allowed to have input as to what their concerns are and get a sense of involvement in any planned actions that affect clinical care. Input can be gained through town hall meetings, Department meetings, special task forces, or better yet, through one on one discussion with key members of the clinical or administrative staff. Physicians want to have a voice and be recognized and respected for what they do and the pressures they're under. Organizations need to listen, show empathy, and respond to their needs. It's not that you'll be able to solve every problem, but just listening shows that you care.

Physician well-being is a must [8]. The combination of stress and burnout, fatigue, and disillusionment can all eventually take their toll on the physician's physical and mental health. In addition to self-preservation, there are many studies linking well-being to overall satisfaction, engagement, care efficiency, and care relationships that when impeded can adversely impact patient outcomes of care [9]. Physicians need to understand the importance of rest and relaxation, and make it a priority by setting aside appropriate time for joy and recuperation and recognizing the importance of being able to say no. It's just as important for the organization to set limits and provide appropriate wellness services to help physicians achieve this goal. In this regard many organizations are revamping the concept and services of their Physician Wellness Committees or providing other amenities and services that support a positive work-balance and healthy lifestyle.

Conclusion

Changing physician attitudes and behaviors is not an easy task [10,11]. There are many contributing factors and forces involved that play a significant role in the process. Physicians are overwhelmed and over extended and even if they wanted to won't take the necessary steps to address these issues. Organizations need to take a pro-active approach to help physicians deal with stress and burnout before it gets to the point where there is an unwanted result. Be sensitive to physician's needs, allow input and involvement, respond to their concerns, show that you care,

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and provide the appropriate logistical, clinical, and behavioral support services that can help them adjust better to the pressures around them and restore their joy and zest for medical care.

References

- Shanafelt T, Hasan O, Lotte N, Drybye N, Christine Sinsky, et al. (2015) Changes in Burnout and Satisfaction with Work- Life Balance and the General US Working Population Between 2011-2014. Mayo Clin Proc 90(12): 1600-1613.
- Rosenstein A, O'Daniel M (2008) A Survey of the Impact of Disruptive Behaviors and Communication Defects on Patient Safety. Jt Comm J Qual Patient Saf 34(8): 464-471.
- Dang D, Bae SH, Karlowicz KA, Kim MT (2016) Do Clinician Disruptive Behaviors Make an Unsafe Environment for Patients? J Nurs Care Qual 31(2): 115-123.
- Noseworthy J, Madara J, Cosgrove D, Edgeworth M, Ed Ellison, et al (2017) Physician Burnout is a Public Health Crisis: A Message to our Fellow Health Care CEOs. Health Affairs Blog.
- 5. Rosenstein A (2016) Human Factors Affecting Disruptive Physician

- Behaviors and its Impact on the Business of Medicine. Journal of Business and Human Resource Development 2(2): 1-10.
- Shanafelt TD, Gorringe G, Menaker R, Storz K, Reeves D, et al. (2015)
 The Impact of Organizational Leadership on Physician Burnout and Satisfaction. Mayo Clin Proc 90(4): 432-440.
- Rosenstein AH (2015) Strategies to Enhance Physician Engagement. J Med Pract Manage 31(2): 113-116.
- 8. Rosenstein A (2016) Understanding the Psychology behind Physician Attitudes, Behaviors, and Engagement as the Pathway to Physician Well-Being. Journal of Psychology and Clinical Psychiatry 5(6): 1-4.
- Salyers M, Bonfils K, Luther L, Firmin R, White DA, et al. (2017) The Relationship Between Professional Burnout and Quality and Safety in Healthcare: A Meta-Analysis. J Gen Intern Med 32(4): 475-482.
- West C, Dyrbye LN, Erwin PJ, Shanafelt TD (2016) Interventions to Prevent Physician Burnout: A Systematic Review and Meta- Analysis. Lancet 388(10057): 2272-2281.
- 11. Shanafelt TD, Noseworthy JH (2017) Executive Leadership and Physician Well- Being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout. Mayo Clin Proc 92(1): 129-146.



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