



Comparing Burnout Between Behavioral Health Prescribers and Primary Care Providers at a Federally Qualified Health Center

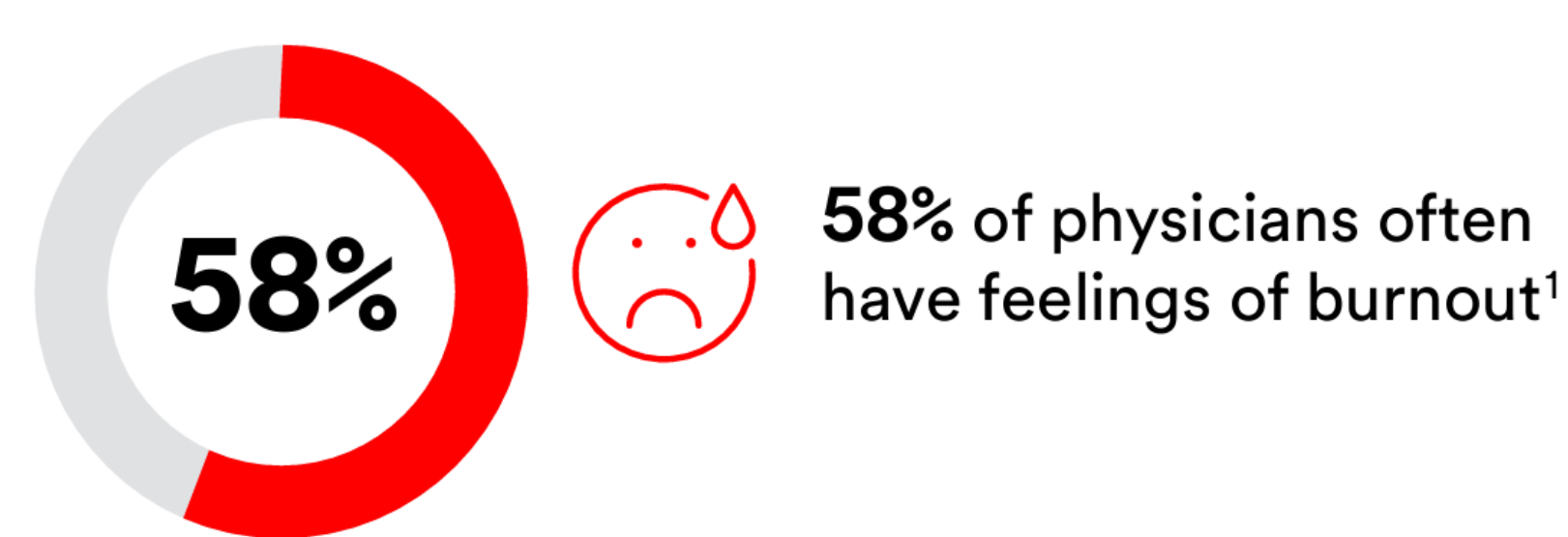
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Background

- Burnout is a concern in the healthcare world on both a local and national level, especially among physicians and behavioral health prescribers¹⁵.
- Burnout can present in many ways, such as feeling overwhelmed, low job satisfaction, and poor patient outcomes⁹.

The physician burnout crisis:



Objective

- To compare burnout, job stress, and intent to leave between behavioral health prescribers and primary care providers.

Methods

Literature Review

Evaluated different indicators of burnout used for primary care providers and behavioral health prescribers.

Quantitative Survey (N = 86)

A convenience sample of primary care providers and behavioral health prescribers who completed a 2022 survey. Specialty-specific national comparison groups were made available from the American Medical Association (AMA) database, including psychiatry (N = 67) and primary care (N = 737).

Instruments

Organizational biopsy™ administered jointly with the AMA, which includes the mini-z burnout assessment as well as custom questions regarding intent to leave, community, and teamwork.

Analysis

Data analyzed in Excel.

Results

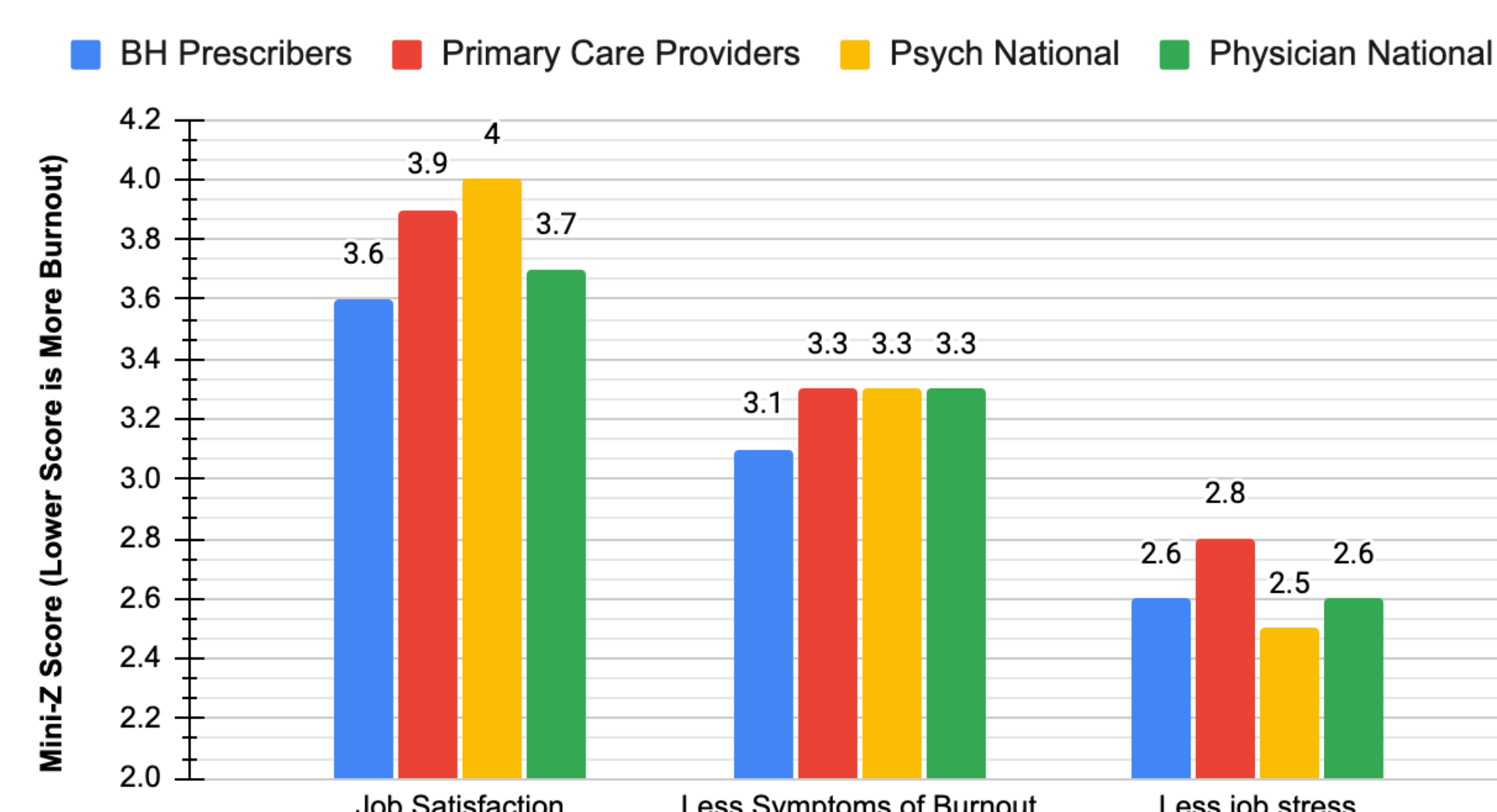


Figure 1: Comparison of Mini-Z Scores with National Levels

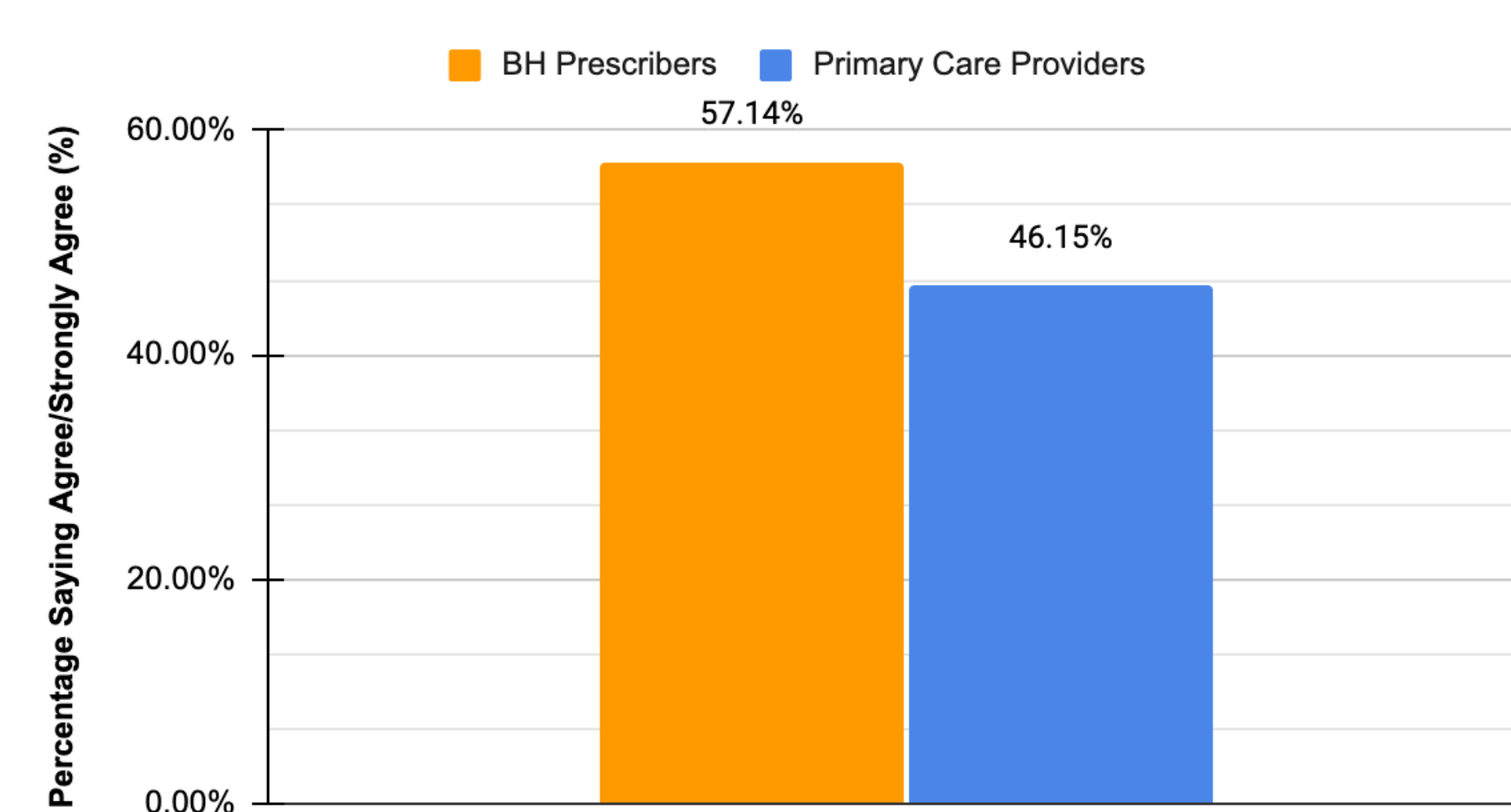


Figure 2: I feel a great deal of stress because of my job

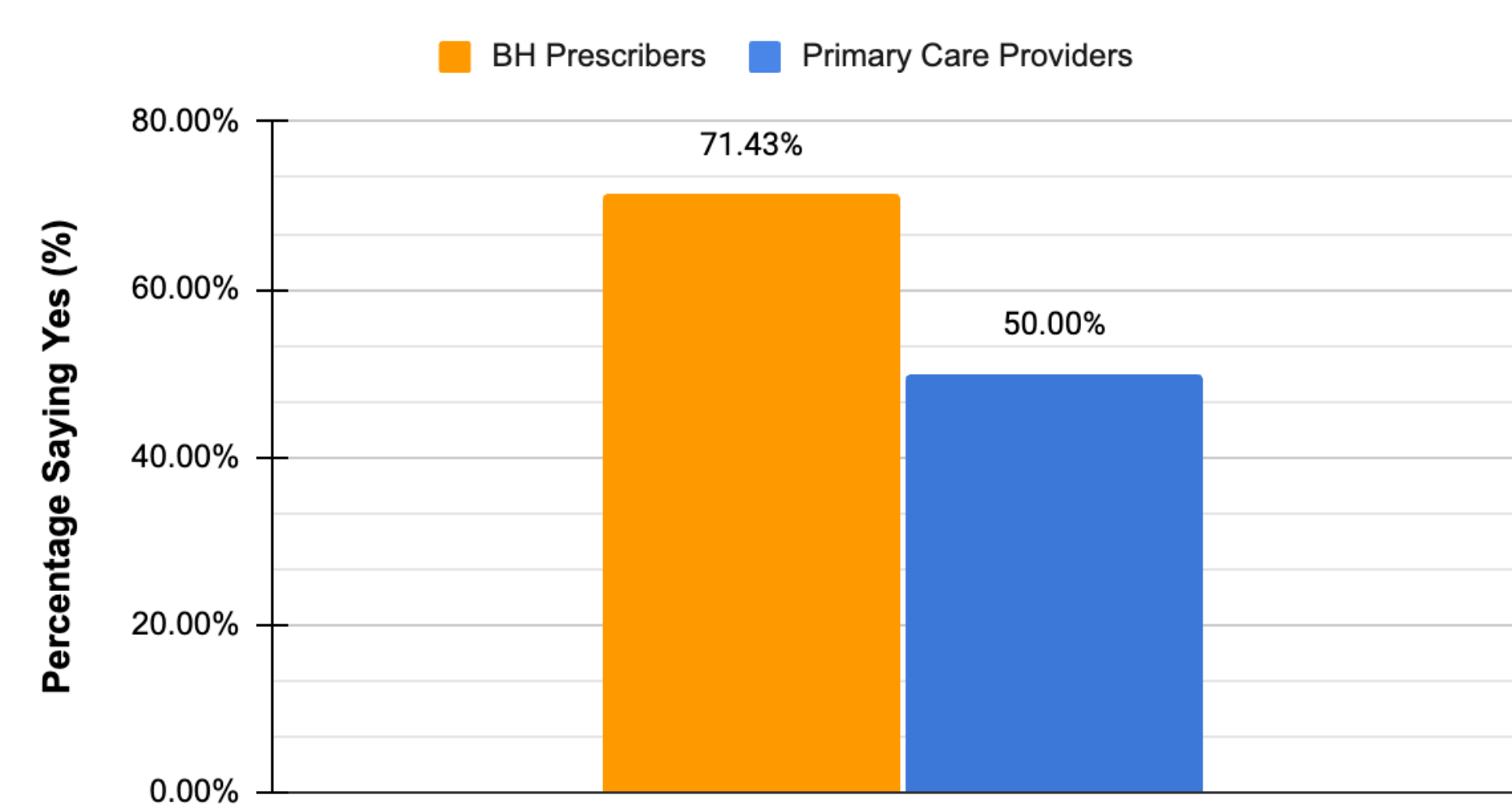


Figure 3: 1 or More Symptoms of Burnout

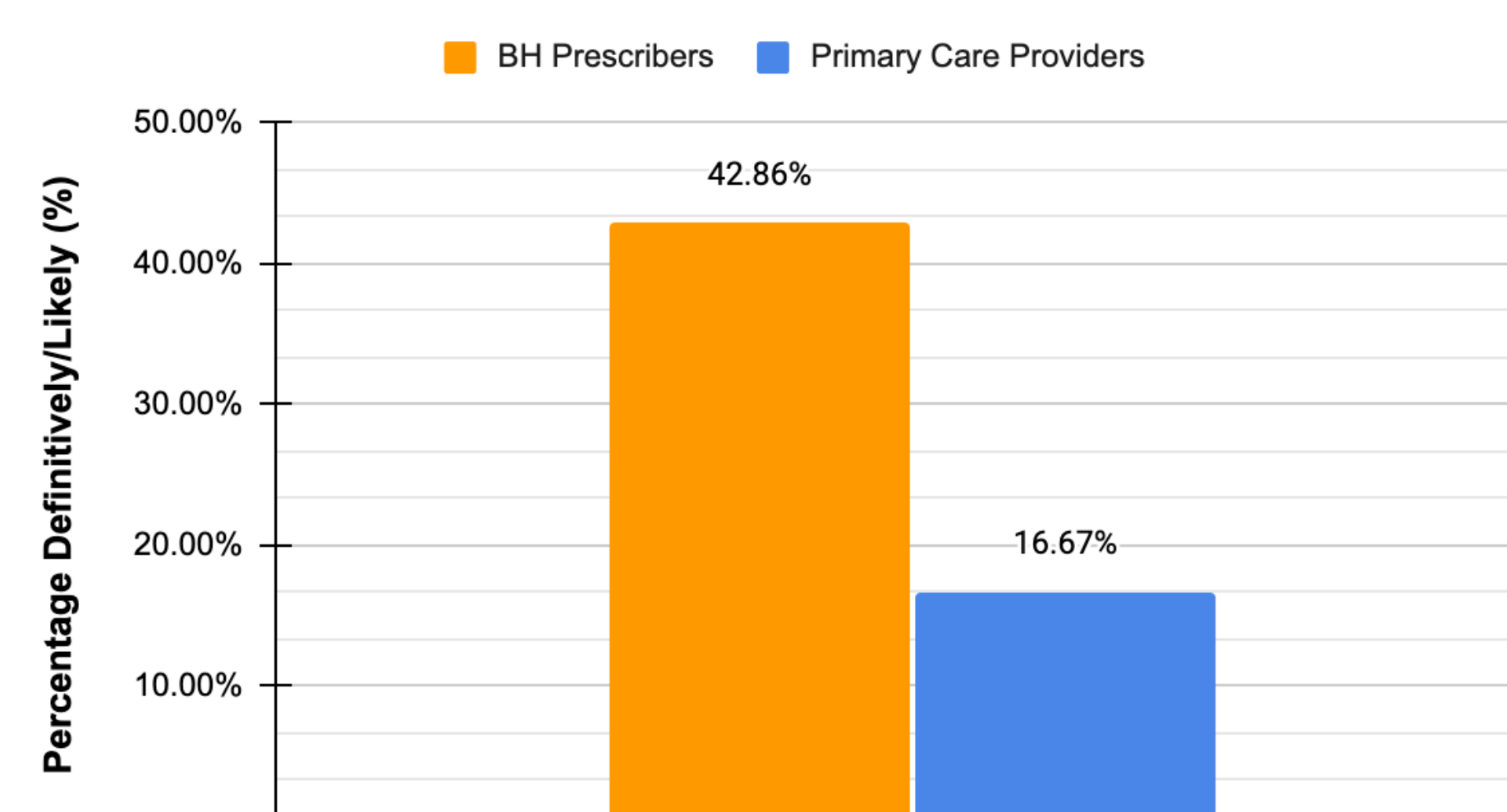


Figure 4: What is the likelihood that you will leave within 2 years?

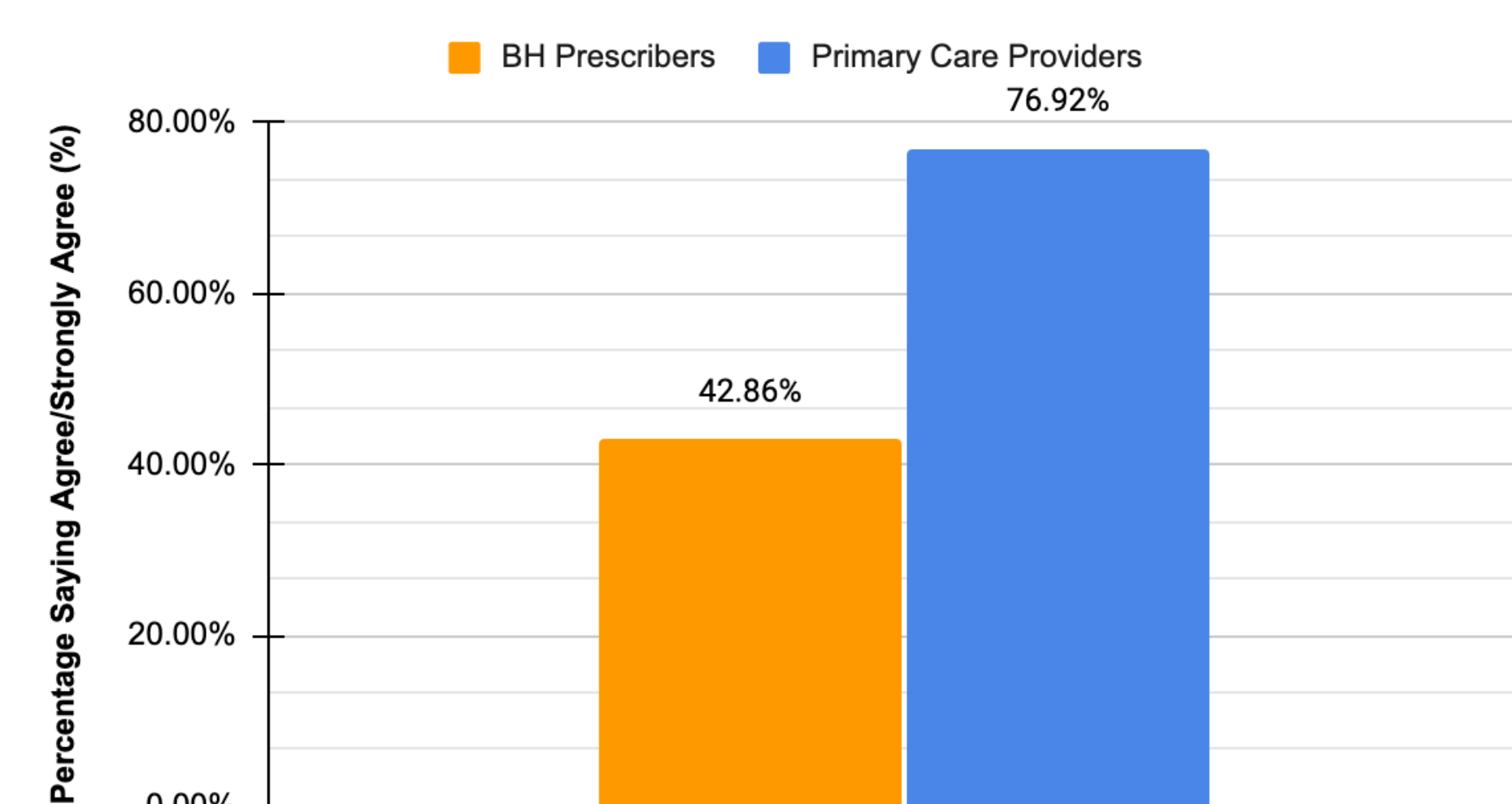


Figure 5: I feel a sense of community with my work colleagues

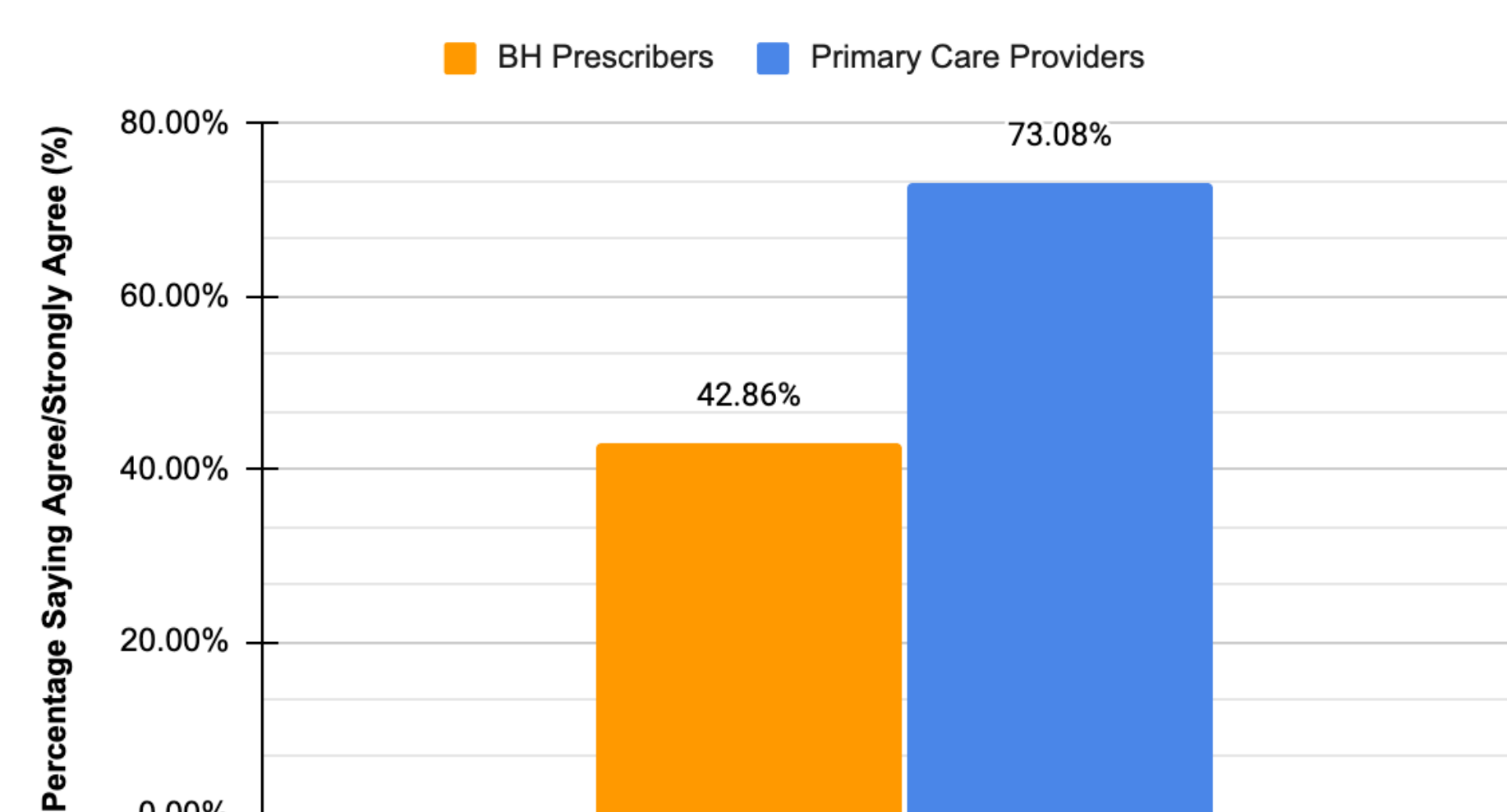


Figure 6: I feel a sense of belonging with my work colleagues

Results

- Overall behavioral health (BH) prescribers have higher rates of work stress, burnout, intent to leave within two years when compared to primary care providers at Thundermist.
- When comparing to national data, the Thundermist findings similarly show that job stress is higher among BH prescribers. However, unlike Thundermist behavioral prescribers, national BH prescribers do not have higher burnout and job dissatisfaction than medical providers.
- Additionally, BH prescribers tend to have lower rates of a sense of community and feelings of belonging when compared to primary care providers at Thundermist

Conclusions

- After comparing BH prescribers to primary care, we can conclude that Thundermist BH prescribers experience more burnout, stress, job dissatisfaction, and intent to leave practice than primary care providers. This difference is not mirrored in the national sample.
- There are many interventions that can be evaluated to decide what could help reduce burnout levels among behavioral health prescribers, such organizational interventions and leadership interventions.
- One example of organizational intervention could be improving electronic health records management, while an example of leadership intervention could be ARC (Availability, Responsiveness, Continuity) organizational intervention which have been shown to be effective⁵.

Acknowledgements

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