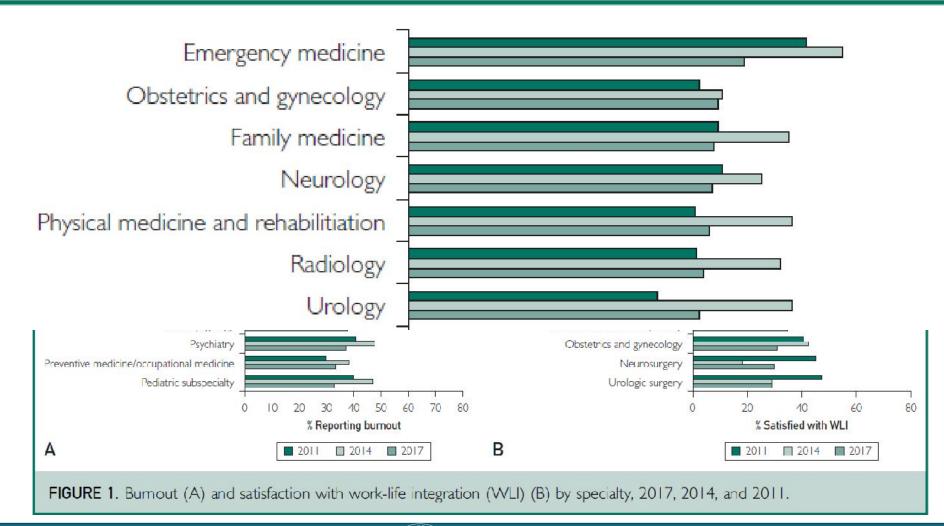
Family Medicine & Burnout, by the numbers

Andrew Bazemore, MD, MPH
SVP Research & Policy, ABFM
Co-Director, Center for Professionalism & Value

-With gratitude and attribution to Dr. Lars Peterson





| | Continuing Certification Questionnaire | Initial Certification Questionnaire | Graduate Survey | Practice Demographic Survey |
|-------------------------|---|---|---|---|
| Timing | 3-4 months prior to examination date | 3-4 months prior to examination date | Calendar Year | Calendar Year |
| Cohorts | 7+ years after residency; regularly returning cohorts | Residency graduates from that year | 3 years after residency graduation (2013 graduates in 2016) | End of each 3-year Continuous Certification Cycle |
| Business Requirement | Yes | Yes | No | No |
| Implemented | 1980s | 2014 | 2016 | 2019 |

ABFM Assessment of Burnout in its Diplomates

| | Initial Certification | Continuing Certification | Graduate Survey | Practice Demographic Survey |
|------|--------------------------|-----------------------------|--------------------|-----------------------------|
| 2016 | | Single item Mini Z | EE + callous | |
| 2017 | | EE + callous | EE + callous | |
| 2018 | | EE + callous | EE + callous | |
| 2019 | EE + callous | EE + callous | EE + callous | EE + callous |
| 2020 | EE + callous | EE + callous | EE + callous | EE + callous |
| 2021 | EE + callous | EE + callous | EE + callous | EE + callous |
| 2022 | EE + callous | EE + callous | EE + callous | EE + callous |

Variation by Gender and Age

Figure 1. Prevalence of burnout among board-certified family physicians by sex and age.

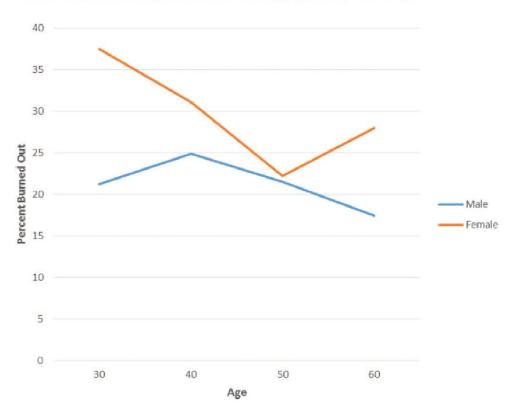
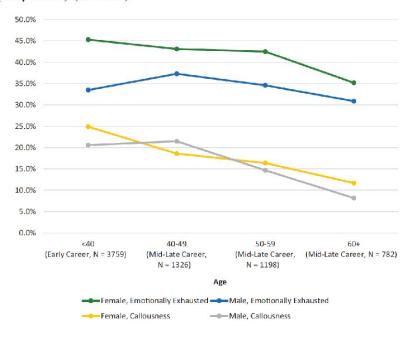


Figure 1. Presence of emotional exhaustion or callousness by gender and age of 2017 and 2018 American Board of Family Medicine Continuing Certification candidates (mid-to-late career) and respondents to the National Graduate Survey (early career) (n = 7065).



Burnout and Practice Features

Doctors have their own diagnosis: 'Moral distress' from an inhumane health system

August 2, 2023 · 11:48 AM ET

By Lisa Doggett, Public Health Watch



- Optimal perceived team efficiency was associated with lower odds of burnout in FPs with expansive care teams
- No rural vs. urban differences in burnout
- Physicians reporting high clinic capacity to meet patients' social needs reported lower burnout

Scope of Practice and Burnout

2016 Graduate Survey

- Among those primarily in continuity care
- Inpatient OR = 0.65 (0.52, 0.82)
- Deliveries OR = 0.66 (0.48, 0.80)

2017 and 2018 Continuing Certification

- No association between scope of practice score and burnout
- OR = 0.98 (0.96, 1.01)



Burnout Not Associated with Costs, ACSC admissions or ED visits, or Readmissions

| Main Analysis | Ambulatory care sensitive admission rate | Ambulatory care sensitive emergency department visits | 30-day readmission rates | total health care spending per patient |
|-------------------|--|---|--------------------------|---|
| All Patients | Relationship Between Physician Burnout And The | | | |
| Medicaid Eligible | e 0.03 (-2.10 to 2.12) | -1.34 (-3.37 to 1.15) | 0.05 (-5.47 to 7.37) | -\$1,034.14 (-3,185.84 to 1,585.97) |

The Impact of Practicing Obstetrics on Burnout Among Early-Career Family Physicians

Tyler Barreto, MD, MPH; Aimee Eden, PhD, MPH; Audrey Brock, MS

I kind of look at burnout as the sense of the loss of control. When you feel like you don't have control over your schedule or what you're doing with your patients, then you really start to feel like a cog in the machine. But I actually felt like when I had my OB patients I had more control.... – Male physican not performing deliveries

I think in some ways that [OB] contributes, [and] in some ways that [OB] protects. I think it's hard to say. But I think it's definitely usually a really fun part of my job, but definitely sometimes can be really stressful. (Female physician performing deliveries)

Gendered Responses to Burnout

- 2,200 family physicians in California and Illinois in 2019
- Female FPs were more likely to reduce work hours and hire domestic help
- Male FPs were more likely to spend time on hobbies
- 20% reported that their organization did not provide any type of well-being support



Burnout and Academic Achievement

- 2019 Graduating Residents
- 36.8% reported burnout
- Burnout not associated with being in lowest 25% of ITE scores
- Residents who were burned out had lower odds of meeting 3 of 4 professionalism milestones at graduation

Academic Achievement, Professionalism, and Burnout in Family Medicine Residents

Caitlin Davis, MD, MSc; Meenu Krishnasamy, MD; Zachary J. Morgan, MS; Andrew W. Bazemore, MD, MPH; Lars E. Peterson, MD, PhD

BACKGROUND AND OBJECTIVES: Physician burnout has been shown to have roots in training environments. Whether burnout in residency is associated with the attainment of critical educational milestones has not been studied, and is the subject of this investigation.

METHODS: We used data from a cohort of graduating family medicine residents registering for the 2019 American Board of Family Medicine initial certification examination with complete data from registration questionnaire, milestone data, in-training examination (ITE) scores, and residency characteristics. We used bivariate and multilevel multivariate analyses to measure the associations between four professionalism milestones ratings and ITE performance with burnout.

RESULTS: Our sample included 2,509 residents; 36.8% met the criteria for burnout. Multilevel regression modeling showed a correlation between burnout and failure to meet only one of four professionalism milestones, specifically professional conduct and accountability (OR 1.41, 95% CI 1.07-1.87), while no statistically significant relationship was demonstrated between burnout and being in the lowest quartile of ITE scores. Other factors negatively associated with burnout included international medical education (OR 0.60, 95% CI 0.48-0.76) and higher salary compared to cost of housing (OR 0.62, 95% CI 0.46-0.82).

CONCLUSIONS: We found significant association between self-reported burnout and failing to meet expectations for professional conduct and accountability, but no relationship between burnout and medical knowledge as measured by lower ITE performance. Further investigation of how this impacts downstream conduct and accountability behaviors is needed, but educators can use this information to examine program-level interventions that can specifically address burnout and development of physician professionalism.

(Fam Med. 2021;53(6):423-32.) doi: 10.22454/FamMed.2021.541354 ethnicity, yo of US medica have also fou prevalent in married and levels of fam

Recent lite physician b cal and inte like resilien self-care pra healthy pers els of resilier bility, and rob insulate phy of burnout.1 medicine, res their trainee ism milesto: ing. The mile specific descr competencie sion. The pro domain inclu reflect profe sional condu humanism a cy, and self-c between the

Changes in Burnout Over Time – Longitudinal (NGS to PDS)

| | Burnout By Survey and Year | | | |
|------|------------------------------|--------------------------|---------------------------------|--|
| Year | Initial Certification Cohort | National Graduate Survey | Continuing Certification Cohort | |
| 2019 | 37% | 44% | 37% | |
| 2020 | 36% | 40% | 41% | |
| 2021 | 37% | 43% | 35% | |
| 2022 | 43% | 45% | 44% | |

Factors for Burnout NURSES BREAK ROOM ntal "I've been working here twenty years and I've never seen anyone in there!"

 Summarizes interventions' literature



FACTORS MEDIATING BURNOUT

An Annotated Bibliography



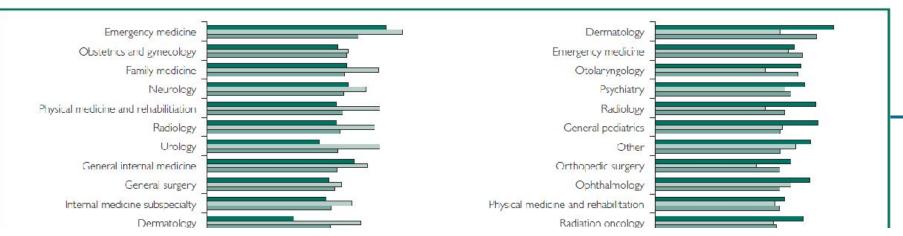
Caitlin Davis

Meenu Krishnasamy

Lars Peterson

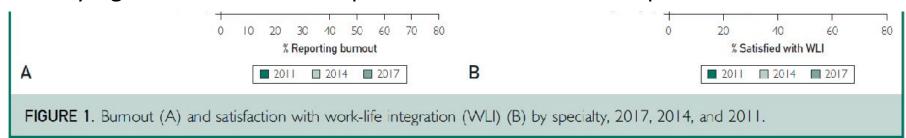
Lara Handler MSLS Andrew Bazemore
MD, MPH

Sco



2019 - Low, Zhi Xuan, et al. "Prevalence of burnout in medical and surgical residents: a meta-analysis."

- Meta-analysis of a total of 22,778 participants in 47 studies, looking at rates of burnout among resident physicians in surgical and non-surgical specialties.
- Burnout is slightly higher among surgical residents (53.27%) than non-surgical residents (50.13%), not statistically significant.
- Family Medicine residents have the lowest prevalence of burnout of any residency type, at 35.97% burnout rate
- No statistically significant difference in prevalence rates between specialties

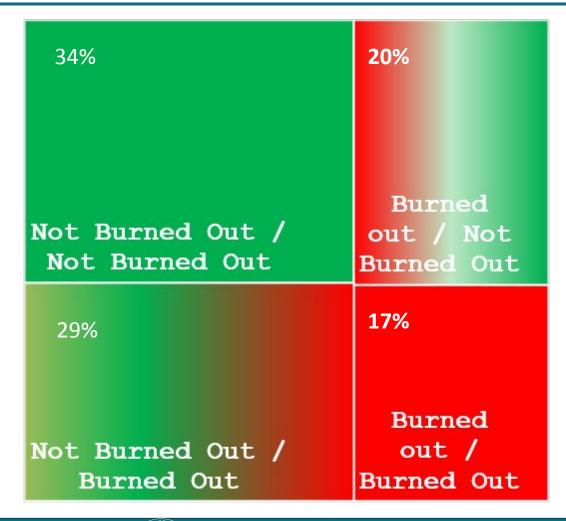




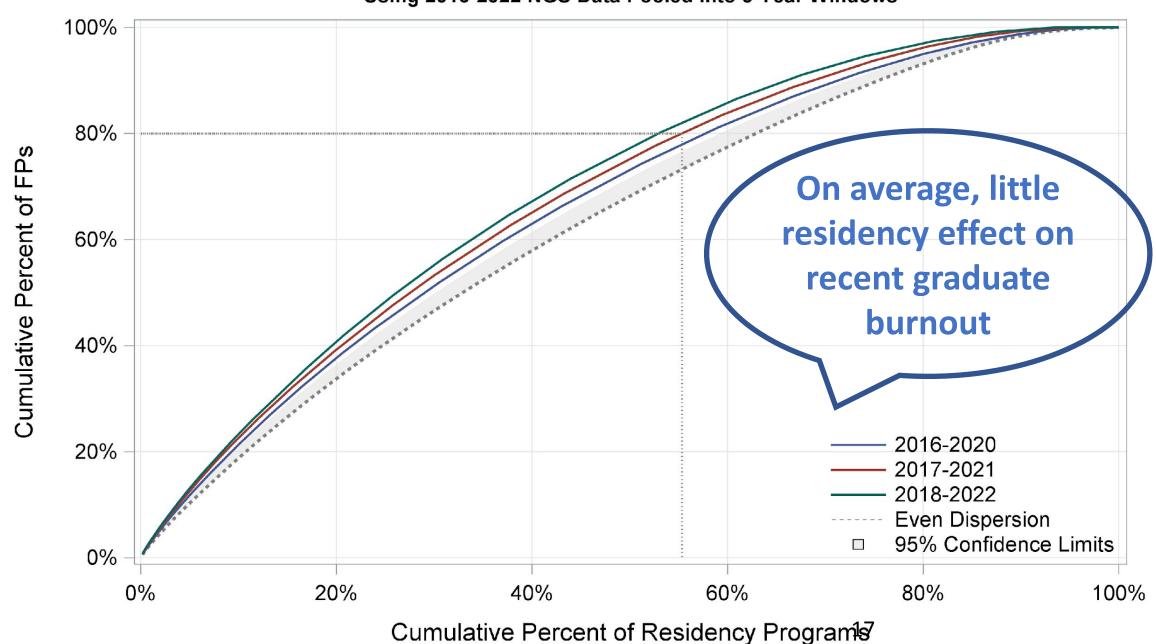
Ongoing Work

- Burnout by residency
 - Continue to explore whether there is evidence of imprinting
- Changes in burnout in the same physician over time
- Extensions of SWIM with Graham Center partners
 - Qualitative data analysis
 - Playbook for addressing burnout at personal and practice level
- Burnout Residua of COVID? Tracking pre/post, changes

Changes in Burnout Over Time – Longitudinal (Initial Certification to National Graduate Survey)



Cumulative Residency (%) vs FPs Experiencing Burnout (%) Using 2016-2022 NGS Data Pooled into 5-Year Windows



Questions

