



# To achieve a healthcare home run, we need to tackle burnout

By Peter Aran, M.D. | August 24, 2016

Perhaps it's because we're in the thick of baseball season, but lately I've been thinking about the most thrilling play in sports: A daring batter attempting to stretch a safe and achievable triple into the potential for an inside-the-park home run.

In healthcare we have our own version of the triple, known as the "Triple Aim." This concept, first introduced by the Institute for Healthcare Improvement, challenged our delivery systems to improve the health of populations, improve the patient experience of care, and reduce the cost of care. While being more meaningful and complex than other attempts to summarize our industry's mission, the Triple Aim fails to address an important component: the well-being and engagement of caregivers.

Many doctors, for example, feel they have less and less time to actually doctor. They are burdened by administrative work all day and finishing their patient records at home in the evening just to keep their heads above water. As such, they may not have time to even reflect upon, let alone, contribute effectively to the noble cause of the Triple Aim.

And yet, we know that physician, nursing, and advanced care practitioner engagement and

leadership is crucial to driving change in our industry. It would be safe to say that most healthcare leaders know about and have possibly experienced physician and nurse burnout first-hand. While this issue is often discussed in the context of physicians, it is prevalent across the entire care team. Taken by itself, burnout is unquestionably an issue of crisis proportions.

But considered against the backdrop of the lofty ambitions and demands of the Triple Aim, it should concern us all.

**"Our providers should feel appreciated and unencumbered by administrative burdens."**

Caregiver burnout prevents our industry from truly achieving higher quality care, better patient experience, and decreased costs. Without physicians and other members of the care team bringing their best selves to each patient/family encounter, it will be difficult to treat our patients as we would want our own families to be treated.

So, others have advocated for a "Quadruple Aim," which acknowledges that we will never attain the Triple Aim unless we also concentrate on the well-being of our caregivers. While acknowledging the

problem or tacking it on to the Triple Aim concept is insufficient, it is a valid first step. The ensuing steps require a longer and more complex journey.

## So what can we do?

According to a Rand Corporation survey, the primary driver of physician satisfaction is the capacity to provide quality care. It is therefore our responsibility as healthcare leaders to design care improvements and other initiatives that incorporate processes to both improve the quality of care delivered and make it more fulfilling, so caregivers can deliver the type of patient care necessary and be proud of what they are doing. Our providers should feel appreciated and unencumbered by administrative burdens.

Rather than designing our care improvement initiatives from a traditional process indicator point of view, healthcare leaders must design from the point of view that provides caregivers with a sense of fulfillment. This can only be accomplished when we partner with frontline doctors, nurses, pharmacists, and social workers early in these design phases.

Another common experience is the difficulty in attracting younger physicians to serve on committees or become involved in administrative tasks. In some circumstances this lack of engagement in the organization's larger vision and strategy may actually be a symptom or early indicator of the burnout problem.

If we pressure our doctors to dedicate time to these administrative duties without laying the appropriate groundwork, they are unlikely to give their time freely in the belief that they are contributing to improvements in care.

Contrary to the old adage of doctors not caring for themselves, members of the healthcare team do need to treat themselves to prevent burnout. More than that, however, organizations need to holistically take care of their providers and engage them if we are serious about achieving the Triple Aim.

Only in this way will we stretch a satisfying triple into the home run needed to win the game.

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