Addressing PA burnout

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Due to the COVID-19 pandemic, the US healthcare system has faced an unprecedented challenge in patient care. Clinicians have been exposed to unique long-term stressors and risk, further increasing their already high risk of burnout.¹ In light of this, we applaud the 2019 American Academy of PAs (AAPA) House of Delegates for its timely action in creating a task force to raise awareness of PA burnout and strategies to mitigate its risk. The task force was charged with evaluating research in the field, identifying institutional factors contributing to this problem, and convening stakeholder organizations to help develop strategies to manage and prevent burnout in the profession. The goal is to communicate what is known about PA burnout, destigmatize the experience, increase PA engagement at work, and improve the overall well-being of the PA profession.

RATIONALE FOR CREATION OF A TASK FORCE

The primary impetus for creation of the AAPA Task Force on Burnout arose from growing concern about the prevalence of burnout among healthcare professionals and its effect on PA practice. An emerging body of literature reveals that, similar to its high prevalence among physicians and nurses, burnout is common among PAs.² Furthermore, substantial personal and patient care consequences are related to burnout and involve job dissatisfaction, depression, compromised safety, and decreased quality of care.³ The task force, jointly appointed by the House of Delegates and AAPA Board of Directors, was created to address PA burnout through a multifaceted approach. As integral members of healthcare teams, PAs contribute to and benefit from interprofessional endeavors, such as the National Academy of Medicine Action Collaborative on Clinician Well-Being and Resilience, that work toward reversing trends in clinician burnout. Although these interprofes-

sional efforts are important, the task force was created to address the specific needs of PAs.

GOALS AND ACCOMPLISHMENTS

The task force's first notable accomplishment was drafting the white paper *Blueprint for Addressing Physician Assistant Well-being and Burnout*.⁴ The white paper provides a brief overview of what is known about PA burnout and well-being. More importantly, it also provides an enduring framework for increasing PA engagement at work and improving the well-being of those in the profession. The report includes nine recommendations to guide AAPA's support for PA well-being and the fight against clinician burnout, as well as identifying key knowledge gaps on PA burnout.

To address one of the key recommendations from the white paper, the task force created an educational platform on the AAPA website on PA burnout and well-being. The site serves to raise awareness about burnout in the profession, reduce the stigma associated with seeking care for burnout, and provide resources and education related to the issue. Original content for the site includes blog posts on PA burnout and well-being from the perspective of a PA in oncology, PA student, and a PA serving as the director of a center for provider well-being. The site also includes fact sheets on burnout, well-being, and moral injury. The task force white paper can be found on the site and we encourage you to review and share the report.

DIRECTION OF THE TASK FORCE

Recommendations set forth in the white paper will direct task force activities over the next 12 months. The task force will create ongoing opportunities for PA collaboration with stakeholders who influence clinician well-being. Task force initiatives will encourage PAs to advocate in their organizations and legislative communities to draw attention and resources to the topic of clinician well-being. The task force also will engage potential funders to support PAs conducting clinician well-being research, facilitate the inclusion of PAs on national well-being collaboratives, and promote incorporation of PA-specific considerations into system-level research agendas.

To disseminate evidence-based clinician well-being information, the task force will work with the AAPA to develop online offerings tailored to clinicians, administrators, and other stakeholders (<https://www.aapa.org/career-central/pa-burnout>). Using similar platforms, the task force will

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work to reduce the stigma associated with burnout by provoking thoughtful discussions and advocacy in health-care systems.

Finally, the task force is committed to integrating lessons learned during the COVID-19 pandemic into its advocacy efforts. In the context of the pandemic, PAs are experiencing work overload and job insecurity. Some are experiencing moral injury secondary to allocation of lifesaving resources using unprecedented ethical guidelines. PAs may be caught between safeguarding their own health and safety and continuing to care for sick patients. The consequences of these emerging stressors have the potential to manifest in ways similar to the post-traumatic stress experienced by members of the military returning from combat.⁵

Emerging task force initiatives will reflect topics relevant to PA well-being in the setting of the COVID-19 pandemic. The task force is humbled to be a part of such a significant

initiative and we are eager to serve the needs of the profession to improve PA well-being. **JAAPA**

REFERENCES

1. Dewey C, Hingle S, Goelz E, Linzer M. Supporting clinicians during the COVID-19 pandemic. *Ann Intern Med.* [e-pub March 20, 2020]
2. Essary AC, Bernard KS, Coplan B, et al. Burnout and job and career satisfaction in the physician assistant profession: a review of the literature. *NAM Perspect.* <https://doi.org/10.31478/201812b>. Accessed May 4, 2020.
3. Dyrbye LN, Shanafelt TD, Sinsky CA, et al. Burnout among health care professionals: a call to explore and address this underrecognized threat to safe, high-quality care. *NAM Perspect.* <https://doi.org/10.31478/201707b>. Accessed May 4, 2020.
4. American Academy of PAs Blueprint for addressing physician assistant well-being and burnout. <https://www.aapa.org/download/65276>. Accessed June 1, 2020.
5. BBC News. Coronavirus: why healthcare workers are at risk of moral injury. www.bbc.com/news/world-us-canada-52144859. Accessed May 4, 2020.