

Burnout Prevention & Education



... not just for clinicians

Cancer practices and programs are supported by numerous staff members in non-clinical roles. These employees may be responsible for reception, billing, scheduling, financial management, and other tasks that support patient care. All too often, these roles can be overlooked when clinicians are credited for being the “heart” of a practice. But the responsibilities of non-clinical staff are essential elements in the multidisciplinary teams that support patient care.

Though physicians and nurses typically receive formal and ongoing training opportunities about how to manage and cope with the emotions that can surface when treating very ill patients, non-clinical staff are usually given little to no such training. Yet these staff members also work in a fast-paced environment that caters to patients with a variety of clinical, psychosocial, and practical needs. Like physicians and nurses, non-clinical staff interact daily with patients and caregivers, often forming bonds with them as their treatment progresses. Accordingly, their daily tasks and roles in patients’ lives can make them susceptible to the same stress and burnout that can affect clinicians.

Defining Burnout

Burnout has become a familiar buzzword in patient care. More than stress, burnout is a condition characterized by emotional exhaustion, depersonalization, and decreased feelings of personal accomplishment.¹ It manifests itself when employees feel over-extended, emotionally depleted, physically drained, or unable to fulfill workplace responsibilities. Left untreated, burnout in the patient care environment can lead to negative, hostile, and cynical attitudes, resulting in a loss of empathy and the depersonalization of patients.

Being aware of how burnout manifests itself can help supervisors and staff identify the condition early. Staff may not be aware of the severity of burnout or how it can negatively affect their professional performance.

Burnout is common among healthcare workers. According to the 2019 *Medscape National Physician Burnout, Depression & Suicide Report*, nearly 44 percent of today’s physicians say that they experience burnout; 34 percent of hospital nurses report experiencing burnout.² However, no study has examined the prevalence of burnout among non-clinical staff in cancer programs. Non-clinical staff members must deal with the same time pressures, long work hours, inefficient processes, interpersonal clashes, leadership conflicts, regulatory demands, and emotional intensity that can burn out some clinicians. Despite evidence that the prevalence of burnout continues to rise in the patient care arena, educating employees about how to prevent and deal with it is not standard in most cancer programs.

Stress or Burnout?

Although stress and burnout are terms often used interchangeably, they are two distinct psychological states. Burnout is often the result of prolonged overwhelming stress, but it does not have the same meaning as too much stress. Stress occurs when someone feels pressured due to excessive mental and physical demands; burnout is characterized by feelings of emptiness, exhaustion, and apathy (see Table 1, this page).

Being aware of how burnout manifests itself can help supervisors and staff identify the condition early. Staff may not be aware of the severity of burnout or how it can negatively affect their professional performance. For example, staff in the early stages of burnout may make more mistakes or be less productive. Staff and coworkers may attribute this to a poor attitude or loss of motivation. But left unaddressed, burnout can escalate and lead to depression or other serious conditions (see Table 2, right).

Detecting Burnout

Although burnout is most often associated with work stress, that is not its sole cause. Anyone who feels overworked and undervalued—either at home or in the office—is at risk for burnout. When assessing for burnout, it is important to also consider the role played by a person’s lifestyle and personality traits. When combined with a stressful work environment, these factors can put certain types of people at risk for burnout. Below are some factors that can increase the likelihood of burning out.

Lifestyle factors:

- Excessive work
- Social isolation
- Lack of close or supportive relationships
- Too many responsibilities
- Inadequate sleep
- Inadequate exercise
- Poor diet
- Inadequate down time

Personality factors:

- Perfectionistic tendencies
- Pessimistic view of self
- Cynical view of others
- Need to be in control
- Inability to delegate
- Inability to accept help
- Type A personality

Workplace factors:

- Little or no control over the scope of work
- Lack of autonomy
- Lack of recognition
- Unclear expectations
- Demanding schedules and timelines
- Lack of support or close relationships
- Monotonous or unchallenging work
- Chaotic or high-pressure environment
- Limited opportunities for advancement
- Poor leadership.

Table 1. Stress and Burnout Refer to Two Distinct Psychological States

Stress	Burnout
Too much effort	No effort
Strong emotions	No emotions
Sense of urgency	Sense of helplessness
Loss of energy	Loss of motivation and hope
Leads to anxiety disorders	Leads to detachment and depression

Because burnout develops gradually, its symptoms are subtle at first and then worsen over time. Although all the symptoms listed above could be red flags, the list of questions in Table 3, right, provides a more effective gauge of how excessive stress may be affecting a person’s daily life.

People who are experiencing any of these symptoms should assess the amount of stress they have in their lives and find ways to reduce it. Making a few practical changes can go a long way toward preventing burnout.

An often-overlooked tool in derailing impending burnout is being able to detect when someone is rationalizing his or her symptoms. People who have recovered from burnout often say that they justified their symptoms as they grew in severity. Being able to identify those justifications can be another tool in preventing burnout. Table 4, page 60, is a list of the cognitive justifications that people suffering from burnout may use to deny the helplessness they feel.

Self-Care Strategies

When people better understand their personal triggers and how the patterns of their daily life influence their well-being, it becomes easier to prevent or recover from burnout. Creating a self-care plan is essential to doing this, because it lists the factors over which individuals have the most control (see box on page 61). Writing down your plan gives you more ownership of it, helping you enact behavior changes and maintain them over time. A self-care plan should incorporate elements that include the physical, emotional, social, and professional aspects of your life. Some tips for developing an effective self-care plan include³:

- *Assess your stress level at the same time each day.* Connecting your stress assessment with a recurring daily activity

(continued on page 60)

Table 2. Symptoms of Workplace Burnout

Physical	Behavioral	Emotional/Cognitive
Exhaustion	Lateness	Irritability
Chronic fatigue	Angry outbursts	Hypersensitivity
Headaches	Apathy	Cynicism
Muscle tension	Alienating others	Apathy
Gastrointestinal problems	Absenteeism	Depression
Sleep changes	Alcohol/drug use	Slowed cognitive processing
Appetite changes	Relationship problems	Rigid thinking

Table 3. Are You Burning Out?

You may be in danger of burning out if:	Yes	No
Every day is a bad day.		
You are always exhausted regardless of how much you sleep.		
Most of your day is painfully boring or overwhelming.		
You feel unappreciated and unable to make a difference.		
You feel numb and detached from work and home relationships.		
You have to drag yourself out of bed and have trouble getting started in the morning.		
You become irritable or impatient with coworkers, family, or friends.		
You find it difficult to concentrate.		
You derive little to no satisfaction from your work.		
You are cynical or critical of people.		
You lack the energy to be consistently productive.		
You feel isolated.		

Table 4. Rationalizing Burnout: Examples of Cognitive Justifications

I am fine.	It's your nagging that stresses me.
I love my job.	I am happy to take more on.
I just need some time off.	No one else can do this.
Everyone is depending on me.	It will be better when this project is over.
If people would just leave me alone. ...	If these new systems worked, I would not be upset.
I have to work late; there are too many interruptions.	People need to get over themselves.

Promoting awareness about burnout and teaching how to prevent it should be woven into the fabric of a cancer program. This can start with potential staff members during the interview process.

(continued from page 58)

increases the likelihood that you will do it regularly. For example, you may want to assess your amount of stress each morning when you turn on your work computer.

- **Combine your daily assessments at the end of each week to check your progress.** This monitoring can help you determine whether your self-care goals are on track.
- **Write down your cognitive and behavioral self-care strategies.** Having a written list can help you identify coping mechanisms during times of high stress.
- **Review and tweak your self-care plan periodically.** Self-care strategies should be modified to accommodate any changes to your personal or professional life.
- **Make weekly, monthly, and annual goals, and write them down.** It is important to make your goals reasonable and attainable. Being able to “see” your progress will encourage you to accomplish more.

An effective self-care plan addresses physical, cognitive, and relational behaviors. Suggestions for effectively addressing each of these domains are below. Taking these actions can help you adopt strategies that ward off burnout.

Physical:

- Develop and follow a balanced eating plan.
- Minimize alcohol and caffeine intake.
- Exercise every day.
- Walk in a green space.

Cognitive:

- Avoid criticizing yourself unnecessarily.
- View your abilities realistically.
- Focus daily on your accomplishments.
- Create a space in your home that feels serene and peaceful to you.
- Keep a gratitude journal to focus on the things that are positive in your life.
- Change how you think about and do work:
 - Stop multitasking and focus on one thing at a time.
 - Work at a reasonable, steady pace.
 - Break down large projects into smaller, achievable sections.
 - Celebrate your small accomplishments along the way.
 - Avoid working unnecessary overtime.

Relational:

- Establish boundaries for what you will and will not do.
- Be comfortable saying no.
- Avoid or reduce exposure to toxic people and situations.
- Become comfortable saying, “I don’t know.”
- Avoid media that includes disturbing images or messages.
- Stay connected with your friends, family, and community.

Management’s Role

Though empowering yourself is important, so too is the role that management can play in helping staff avoid burnout and thrive in the workplace. Some ways in which management can help support non-clinical staff include:

- Ensuring that expectations are clear and understood.
- Ensuring that staff have adequate tools to do their jobs.
- Providing ongoing training in job responsibilities, stress management, and burnout prevention.
- Consistently expressing the value that non-clinical staff bring to the cancer program.
- Maintaining reasonable working hours.
- Continually assessing workload and redistributing responsibilities as needed.
- Helping staff prioritize tasks during busy times.
- Encouraging teams to support one another and demonstrate respect for all staff.
- Promoting physical movement throughout the workday.
- Enabling staff to spend some time away from their screens during the workday.

Awareness and Education


Promoting awareness about burnout and teaching how to prevent it should be woven into the fabric of a cancer program. This can start with potential staff members during the interview process. Job seekers may not realize the emotional toll that can come with working in oncology. Hiring managers should use the interview process as an opportunity to teach potential staff members about the stressors they may face in the workplace and identify individuals most suited to the job.

Onboarding is another prime teaching opportunity. Typically, onboarding is a time reserved for teaching new staff members processes, procedures, and technical skills. But the onboarding process also provides an opportunity to educate staff about the signs of burnout and teach them effective coping mechanisms.

Mandated office trainings (such as those dealing with HIPAA and compliance requirements) also provide opportunities to incorporate education related to burnout. This approach respects staff members' crowded schedules and communicates that their health and wellness are priorities to their supervisors. Burnout training may also take place at monthly staff meetings, before or after tumor boards, or as part of lunch and learn sessions. But be wary of "death by PowerPoint." Though slide presentations can be a quick and useful way of conveying information to a large group of people, do not treat burnout training like it is another box to check off.

Performance evaluations serve as appropriate platforms for employers to encourage staff members to share any concerns they may have about their working environment. If management has concerns about a staff member's ability to handle stressful situations, this is a good time to discuss those concerns and suggest healthy methods for dealing with stress. If managers present a safe space that encourages staff members to be honest about their feelings, they will be more likely to share their concerns and be receptive to honest feedback.

Task forces that include representatives of all elements of the multidisciplinary cancer care team may be especially effective in promoting burnout awareness and engaging employees. Task forces enable both clinical and non-clinical staff to collaborate and learn from one another. For example, the causes of stress for non-clinical staff may be invisible to clinicians. Frequent and unanticipated workflow changes can occur at the leadership level with minimal discussion, compelling non-clinical staff to improvise to get the job done. When clinicians understand how the operations of a practice affect the daily work of support staff, they are more likely to take their concerns into account.

Given that support staff work alongside patients and providers, it is essential that all staff in an oncology practice or program receive training about the unique stressors and potential burnout that can result from working in a patient care environment. 

What is a Self-Care Plan?

"A self-care plan is a thoughtfully constructed and intentionally engaged guide (wellness curriculum) to promote our health and wellbeing. A self-care plan takes the concept of being a life-long learner and engages the person in building a curriculum of knowledge, skills and attitudes to support their wellbeing." A self-care plan has three prerequisites:

1. Evidence-based with empirically supported practices to foster our physical, emotional, social and spiritual well-being.
2. Practice-based with observable self-care activities (specific, measurable, attainable, realistic, time bound) for which we can track performance and outcomes.
3. Culture-based with a work and learning environment in which the organization and the employees appreciate how our wellbeing supports the mission of the organization, the quality of our care for others, our morale and engagement.

Source: Marshfield Clinic: Division of Education.⁴

Monique Dawkins, EdD, MPA, is assistant director, Education Programs, Association of Community Cancer Centers, Rockville, Md. Jeffrey Kendall, PsyD, is director, Oncology Supportive Care, University of Minnesota Cancer Care, Minneapolis, Minn.

References

1. Cañadas De la Fuente GA, Vargas C, San Luis C, García I, Cañadas GR, De la Fuente EI. Risk factors and prevalence of burnout syndrome in the nursing profession. *Int J Nurs Stud.* 2015;52:240-249.
2. Kane L. *Medscape National Physician Burnout, Depression & Suicide Report 2019.* Available online at: [medscape.com/slideshow/2019-lifestyle-burnout-depression-6011056](https://www.medscape.com/slideshow/2019-lifestyle-burnout-depression-6011056). Last accessed May 13, 2019.
3. Brown, LW, Quick, JC. Environmental influences on individual burnout and a preventive approach for organizations. *J Appl Biobehav Res.* 2013;18(2):104-121.
4. Marshfield Clinic: Division of Education. Self-care plans: what and why. Available online at: [marshfieldclinic.org/education/residents-and-fellows/well-being-committee/well-being-topics/quality-of-life/self-care-plans-what-and-why](https://www.marshfieldclinic.org/education/residents-and-fellows/well-being-committee/well-being-topics/quality-of-life/self-care-plans-what-and-why). Last accessed May 23, 2019.