



Survey week: June 22, 2020  
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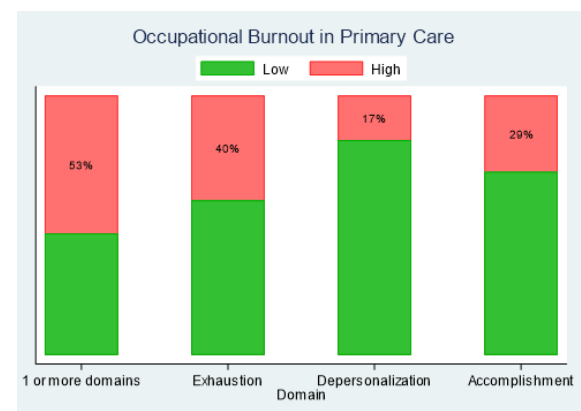
## LIVING & WORKING IN PRIMARY CARE DURING COVID-19

A research study to understand how  
the primary care professional is  
personally affected during this crisis



**Week 6:** Thank you everyone for your participation and for sharing your experiences during this challenging time in history. This week's questions continued to focus on occupational burnout (see graphic) and started examining personal impact of COVID-19. 98% of respondents (n= 97) this week indicated that COVID-19 was putting a strain on them (7% reported a severe impact).

Based on participant feedback, organizations may consider the following to reduce strain: frequent updates via huddles, meetings, emails recognizing the strain, changes, longevity and abnormality of these multifaceted crises; providing and supporting PPE for all; everyday pep talks; not pushing RVUs; reducing workload; providing wellness strategies, free counseling, peer support, designated relaxation room; prioritize best practices vs. finances; praise for sharing safety concerns/feedback; standardizing effective and efficient safety measures (sanitization, testing, required mask-wearing, physical distancing). Note: PPE/safety protocols may add to feelings of work safety; however, the extra burden (described as physically uncomfortable, making day-to-day tasks more challenging, and distressing due to constant change) may add to strain and burnout. Unfortunately, pay cuts/furloughs are adding to strain and sometimes described as the only changes (positive/negative) that have been experienced during COVID-19.



**Methods:** REDCap online survey was distributed starting May 18, 2020 to primary care professionals and organizations nationally, including: NAPCRG, AAFM, CFHA, SGIM, UVM Medical Center, Kaiser Northern California, California Nurses Association, reddit, Twitter, Facebook, etc. Recruitment efforts will continue throughout the COVID-19 crisis. Participants can choose to complete the survey once or several times. The survey occurs weekly and is dynamic to include pressing questions.

**Participants:** As of June 29, 2020, we have had 488 respondents from 48 states. Including 40% physicians, 7% nurse practitioners and physician assistants, 18% nurses, 10% medical assistants, 15% behavioral health providers, 6% administrative support staff, 4% other role or preferred not to say. 77% of participants are women, 82% white, and the average years working in their current role is 10 years (median; 0.1 to 70 years); 84% work full-time.

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Note: These preliminary results should be interpreted with caution. The small sample size makes the current findings not generalizable. Meaning that we cannot assume these data represent all primary care professionals. Additionally, the aMBI (Riley, et al., 2017) was modified to assess acute (weekly) aspects related to occupational burnout (range of each subscale: 0-12). Therefore, the results cannot be compared to other samples using the aMBI. Higher scores indicate more burnout (personal accomplishment was flipped for ease of interpretation).