



Week of July 13, 2020
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LIVING & WORKING IN PRIMARY CARE DURING COVID-19

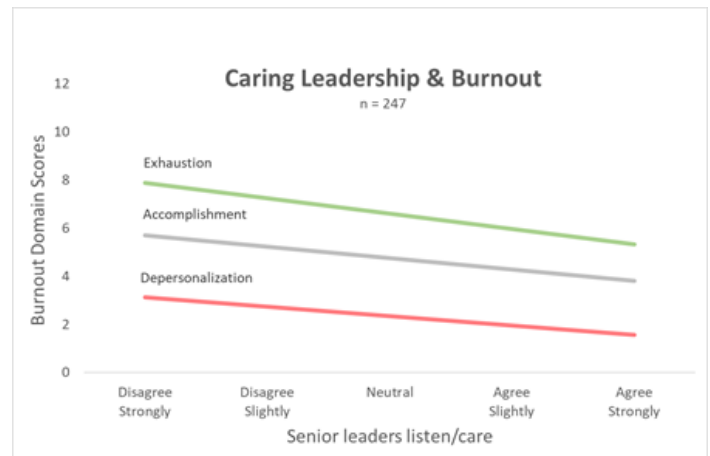
A research study to understand how the primary care professional is personally affected during this crisis

Week 9: We continue to examine occupational burnout, leadership and safety. Spearman's rho (ρ) analyses revealed a significant ($P < .001$) negative relationship between leadership listening/caring and emotional exhaustion ($\rho = -0.40$) depersonalization ($\rho = -0.36$), and personal accomplishment ($\rho = -0.36$). **In other words, feeling that leadership doesn't listen/care appears to be related to more burnout.**

Respondents ($n = 50$) were asked what change would make the biggest difference in their job satisfaction and if the change was likely. Only 18% of respondents indicated change was likely (most were related to time off). The majority of changes were related to:

- more support/appreciation/connection from leadership and their (fully-staffed) medical team as well as
- less administrative (i.e., paperwork/documentation) and operational stressors (i.e., workflows created by the medical team for the medical team).

COVID-related comments were primarily around PPE. PPE appears to be a double-edged sword where it's essential to have access to it yet wearing it all day can be distressing (i.e., heatstroke wearing PPE in hot weather; physically distracts from patient care; uncomfortable; time-consuming).



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, 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 in order to include pressing questions.

Participants: Thank you everyone for your participation and for sharing your experiences during this challenging time in history. As of July 20, 2020, we have recruited 621 respondents from 49 states. Including 36% physicians, 9% nurse practitioners and physician assistants, 16% nurses, 9% medical assistants, 13% behavioral health providers, 7% administrative support staff, and 8% other; 76% of participants are women, 82% white, and the average years working in their current role is 10 years (median; 0.1 to 70 years).

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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. The number of respondents change based on the questions posed for the week. 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). For tips/resources on coping with distress during a pandemic, click [here](#).