

Psychologists analyze links between provider burnout, quality of care, patient safety

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Michelle Salyers, PhD is a professor of psychology in the School of Science at Indiana University-Purdue University Indianapolis Credit: School of Science at Indiana University-Purdue University Indianapolis

Health care provider burnout is known to have a relationship with both quality of care and patient safety. Psychologists from the School of Science at Indiana University-Purdue University Indianapolis conducted the first study to systematically, quantitatively analyze the links between health care provider burnout and health care quality and safety across medical disciplines.

The meta-analysis of 82 studies focused on links between burnout and [quality](#) as well as between burnout and [safety](#). The studies involved almost 211,000 physicians, nurses and other clinicians.

The IUPUI scientists examined relationships between various aspects of provider burnout—including emotional exhaustion, depersonalization and reduced personal accomplishment—and the quality of care as perceived by providers and as perceived by

patients (patient satisfaction). The scientists also examined the link between provider burnout and [health care](#) safety in the studies.

Provider self-reported quality ratings had a stronger correlation with burnout than did patient satisfaction. Similarly for safety concerns, provider burnout had a stronger relationship with perceptions of safety than with reported safety events including close or near misses; however, both relationships were still statistically significant.

"The Relationship Between Professional Burnout and Quality and Safety in Healthcare: A Meta-Analysis" is published online ahead of print in the *Journal of General Internal Medicine*.

In their meta-analysis, the IUPUI scientists combined data from different types of studies conducted at numerous locations around the world with a variety of types of clinicians. Meta-analysis enables compression of large amounts of information, permitting analysis and dissemination of composite findings.

"We found a consistent relationship—technically a medium effect size—between higher levels of provider burnout and lower levels of both quality and safety," said study corresponding author Michelle Salyers, professor of psychology at IUPUI. She directs the school's clinical psychology program and is director of the Assertive Community Treatment Center of Indiana.

"These are important observations; however, we don't know the direction of the correlations," she said. "Does burnout cause care quality to diminish, or does poor quality cause clinician burnout? Or is there another factor causing both provider burnout and poor quality?"

Studies were weighted to account for the number of providers involved. The IUPUI scientists also rated the rigor of the studies to determine if the correlation between burnout and quality or between burnout and safety varied by study size and thoroughness of investigation. They found that it did not. They did, however, note roles for other predictors of quality and safety including organizational policies, staffing ratios and communication.

"While burnout is not the primary cause of poor quality health care nor the primary cause of patient safety issues, links between provider burnout and care quality and [patient safety](#) are real and should be recognized," said Salyers. "Our work provides a message for health care funders, policymakers and those who 'run' health care in a variety of settings—clinic, hospital and system administrators—that as they work to improve patient outcomes and safety, they should pay attention to the well-being of their workforce."

More information: Michelle P. Salyers et al. The Relationship Between Professional Burnout and Quality and Safety in Healthcare: A Meta-Analysis, *Journal of General Internal Medicine* (2016). [DOI: 10.1007/s11606-016-3886-9](#)

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