

Minnesota Hospital Association

Public Statement of Commitment to Action around Healthcare Burnout

The Minnesota Hospital Association (MHA) is invested in serving and supporting staff and leaders who work in the healthcare system across the state. The MHA has convened a Chief Medical Officers Group since 2016 made up of physician leaders from across Minnesota. Early in this group's tenure, a charter was established to advance the quality of care being provided to patients, families and communities and address critical needs of clinicians across Minnesota. Burnout was identified as a key priority for the group and continues to drive several of the group's efforts. For MHA and its members, inclusion of the wellbeing of healthcare workers as part of the quadruple aim is critical to improving quality of care, enhancing population health, and reducing cost of care. MHA launched a statewide initiative focused on physician and advanced practice professional burnout in 2016 in order to quantify the prevalence of burnout across the state and more importantly identify drivers of burnout and test mitigation and prevention strategies that effectively *bend the burnout curve*. In the baseline year of the initiative, 104 individual hospitals (representing 56 healthcare sites/systems) participated in a baseline survey of burnout in their frontline clinicians. Of the 13,693 individuals invited to participate, 43% responded to the survey. CEOs and CMOs of sites/systems were encouraged to identify priority areas for action and to embark upon a collaborative improvement path toward reducing burnout in healthcare professionals. In 2017, MHA surveyed the front line again, this time involving 113 individual hospitals (representing 63 sites/systems) and inviting 19,350 physicians and advanced practice professionals to participate and yielding a response rate of 29%.

Efforts to develop a collaborative statewide quality improvement road map around burnout, focused on organizational level interventions and actions, practice level interventions and actions, and individual level interventions and actions, is underway, in partnership with Chief Medical Officers and CEOs from hospitals and healthcare systems across the state. Minnesota is well positioned to test and evaluate mitigation and prevention efforts across sites and across the state and to advance the meaningful work of reducing burnout among healthcare professionals and staff. The model being developed here will yield important lessons and may be translatable to other states and healthcare systems big and small across the country.