

# Commitment to Clinician Well-Being and Resilience

Burnout is not new; however, COVID-19 has highlighted the challenges faced when administrative burden, sub-optimal communications systems, and uncoordinated teams collide with an extended crisis. In addition, the traumatic impact of COVID-19, in particular on care providers in hard hit areas, has amplified the need for support and efforts to improve wellness and well-being. At the same time, the health care workforce continues shifting and changing to reflect the growing diversity of the nation as well as needs and preferences of our communities. Clinician stress is associated with lower patient satisfaction, patient safety issues, overuse of resources and increased costs of care. Physicians with less control over their work environment and chaotic schedules and pace are more likely to report symptoms of burnout.

Burnout is directly tied to job satisfaction and stress. More importantly, burnout has a substantial effect on health care quality and safety. That's why improving the health of clinicians is a central focus of the [AHA Physician Alliance](#). "Be Well" is one of the three pillars of the Alliance's work.

Be Well is about improving the health and well-being of clinicians and reducing administrative burden. The Alliance employs a multi-faceted approach to cultivating resilience that encompasses unique immersion experiences, virtual expeditions and webinars, Questions with Clinician Leaders podcasts, issue briefs, guides and toolkits, as well as dedicated educational tracks at AHA flagship meetings. For example, we offer the AHA Physician Leadership Experience, a three-day comprehensive program to help clinicians achieve better work-life balance and improve their leadership, resiliency and wellness. In addition, the Alliance's work features an in-depth knowledge hub with research, insights and assessment tools dedicated to well-being.

The AHA recommends that hospitals and health systems consider the following actions to cultivate well-being:

- Acknowledge the complexity of burnout;
- Conduct a needs assessment;
- Use data to inform priorities and strategic planning; and
- Implement clear actions.

Furthermore, primary drivers of burnout also include regulatory and paperwork burden, deterioration of clinical autonomy, inefficient EHR design/interoperability and professional liability concerns.

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our clinician partners – including more than 270,000 affiliated physicians, 2 million nurses and other caregivers – and the 43,000 health care leaders who belong to our professional membership groups, the AHA fully supports the National Academy of Medicine's [Action Collaborative on Clinician Well-being and Resilience](#). We share our fellow collaborative partners' deep commitment to moving the field forward on this issue, are honored to serve on the Collaborative's Working Groups, and regularly provide hospitals and health system leaders with resources to [prevent clinician suicide](#), [tackle well-being and build resilience](#).

## About the American Hospital Association

The AHA is a not-for-profit association of health care provider organizations and individuals that are committed to the improvement of health in their communities. The AHA is the national advocate for its members, which include nearly 5,000 hospitals, health care systems, networks and other providers of care. Founded in 1898, the AHA provides education for health care leaders and is a source of information on health care issues and trends. For more information, visit [www.aha.org](http://www.aha.org).