

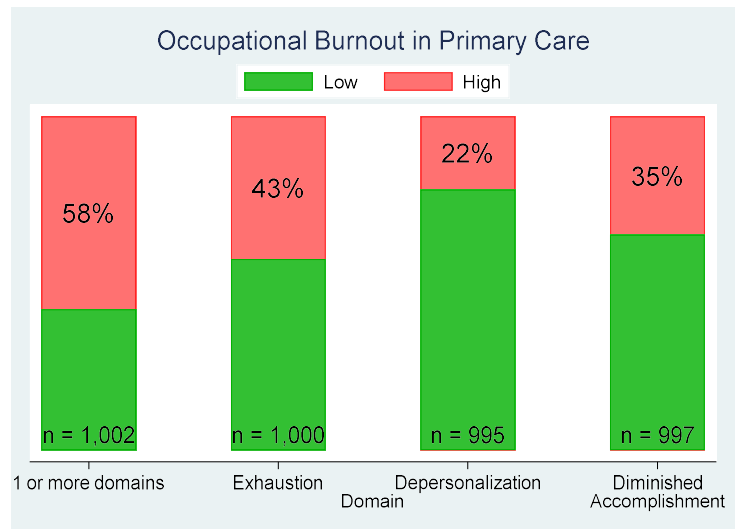


LIVING & WORKING IN PRIMARY CARE DURING COVID-19

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

Results: 58% of participants are experiencing burnout in one or more domains. Many participants indicated that their feelings of burnout were only in part due to the pandemic, sharing (continued from last week):

- “I think covid has exacerbated burnout by revealing underlying flaws of our healthcare delivery system.”
- “Our organization has seen a 30% increase in number of patients seen and as we know that reflects only a portion of the work that we do. I've also had stress at home that has increased during the pandemic, which makes it difficult to cope with work-related stress.”
- This level of burnout is significantly less since I transferred to a smaller hospital... Working at a level 1 trauma center through the pandemic was killing me. I dreaded going to work each day....
- “...I have limited ways to recharge, socializing with friends and other things I enjoyed doing to counteract my stress at work have been limited by pandemic, along with increased stress at work, longer work hours etc”



Methods: REDCap online surveys were distributed to primary care professionals weekly starting May 18, 2020. Participants can choose to complete the survey once or several times.

Participants: As of February 17, 2021, we have recruited 1002* participants from all 50 states: 39% physicians, 10% nurse practitioners and physician assistants, 16% nurses, 8% medical assistants, 17% behavioral health providers, 5% non-clinical, and 5% other clinical; 78% of participants are women, 89% white, and the average years working in their current role is 10 years (median; 0.1 to 70 years).

Contact Us: 802-656-4560 ° healthcare.covid19@med.uvm.edu ° go.uvm.edu/primarycare

Note: *Data cleaning has resulted in the removal of potential duplicates, incomplete responses, and ineligible participants (total of 43 removed from analysis to date). Interpret preliminary results with caution. The findings are not generalizable given the small sample size. In other words, we cannot assume these data reflect all primary care professionals. The number of respondents may change based on the questions posed for the week/month. The aMBI (Riley, et al., 2017) was modified to assess acute (weekly) burnout (range of each subscale: 0-12). Scoring: Exhaustion 6+; Depersonalization 3+; Accomplishment <7. Therefore, the results cannot be compared across studies using the aMBI. For tips/resources on coping with distress during a pandemic, click [here](#).