

**BACKGROUND**

- The COVID-19 pandemic led to influx of patients that hospitals and clinics were not prepared for leading to changes in care to accommodate the care of all (Braithwaite, 2021).
- Healthcare worker burnout is characterized with physical and emotional exhaustion, as well with a lowered sense of personal accomplishment (West et al., 2018).
- Current studies have focused on patient experience but few have centered around the impact the pandemic had on healthcare worker (Austin et al., 2020).

**OBJECTIVE**

To analyze the causes of healthcare worker (HCW) burnout during the COVID-19 pandemic and effects on patient care quality in the US.

**METHODS**

- A mixed methods cross-sectional study was conducted among healthcare workers (N=41) in the United States.
- On April 18-30 2022, a survey was distributed across healthcare worker Facebook groups SubReddits and StudentDoctor forums. Results were collected via convenience sampling
- The Qualtrix survey asked about stress levels, job duty satisfaction, changes in care, burnout and mental health resources.
- Demographic questions included gender, age, ethnicity, occupation, and years of healthcare experience.

**RESULTS**

Demographics	Categories	n	Percentage (%)
Age	21-30	13	30.95
	31-40	18	42.86
	41-50	5	11.90
	51-60	6	14.29
	61+	0	0
	Total	42	
Occupation	Doctor (M.D.)	4	9.52
	Nurse	16	38.10
	Physician Assistant/Associate	1	2.38
	Medical Assistant	1	2.38
	Other	20	47.62
	Total	42	
Ethnicity	Caucasian	34	80.95
	Asian	2	4.76
	Hispanic/LatinX	3	7.14
	Black/African American	0	0
	Native American	1	2.38
	Pacific Islander	1	2.38
	Prefer not to say	0	0
	Other	1	2.38
	Total	42	

**RESULTS**

Figure 1

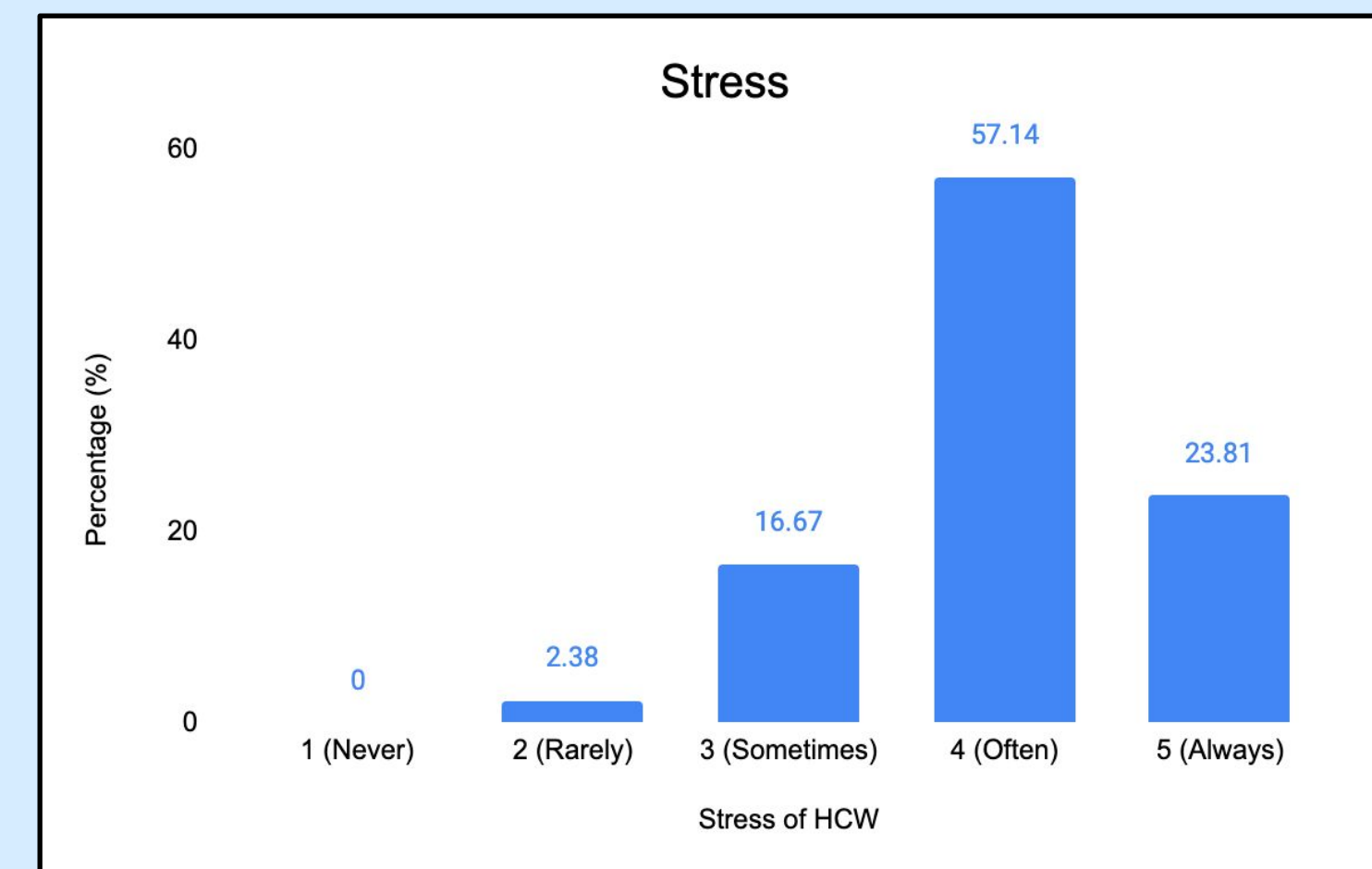


Figure 1: HCW often felt stressed in their workplace during COVID19. 57.14% often felt stressed and 23.81% always felt stressed.

Figure 3

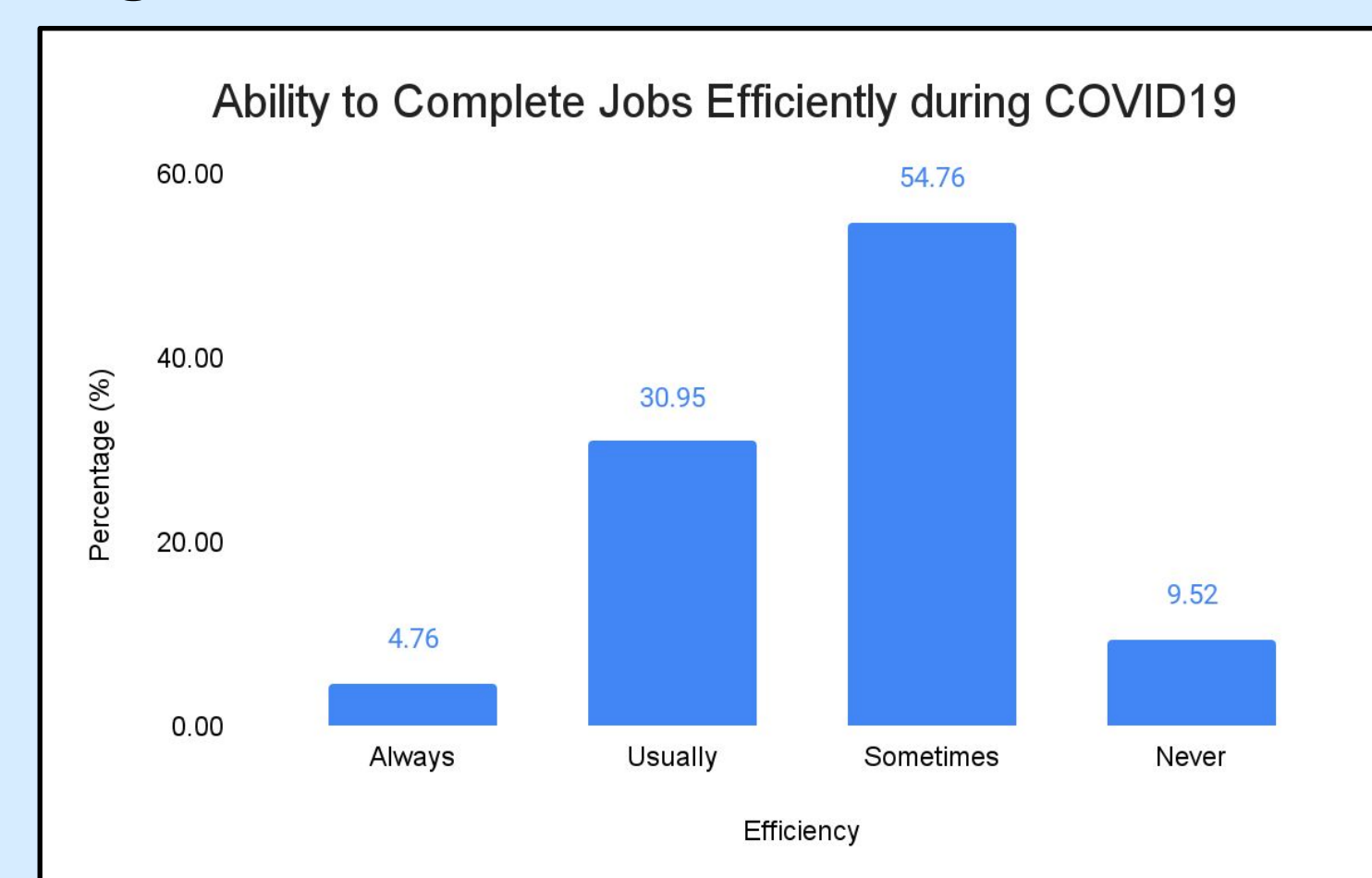


Figure 3: 54.76% of HCW sometimes complete their tasks efficiently

Figure 5

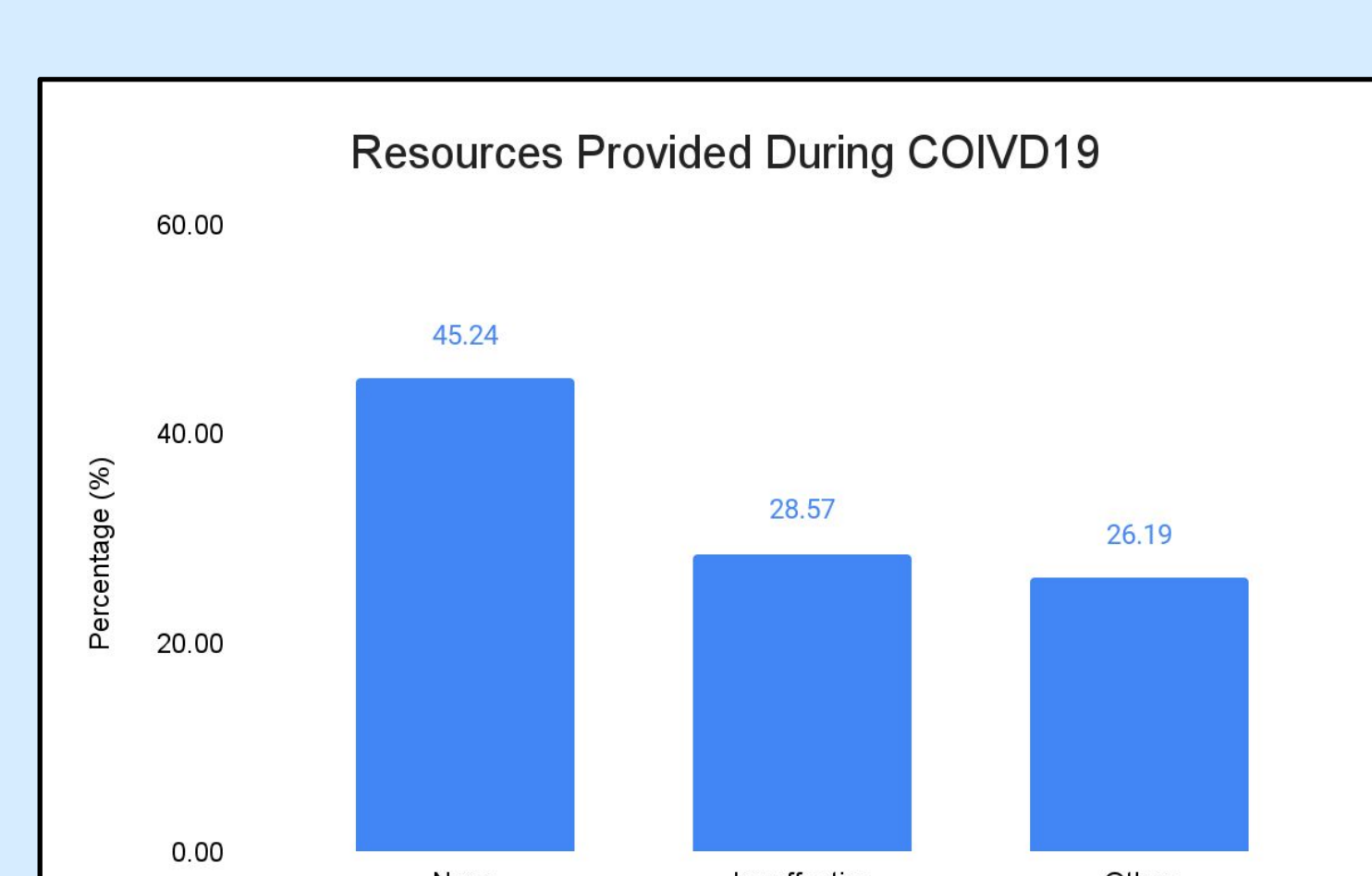


Figure 5: 45.24% of HCW responded there were no resources available to cope with mental health and stress during COVID-19 and 28.57% claimed provided resources to be ineffective during this time.

Figure 2

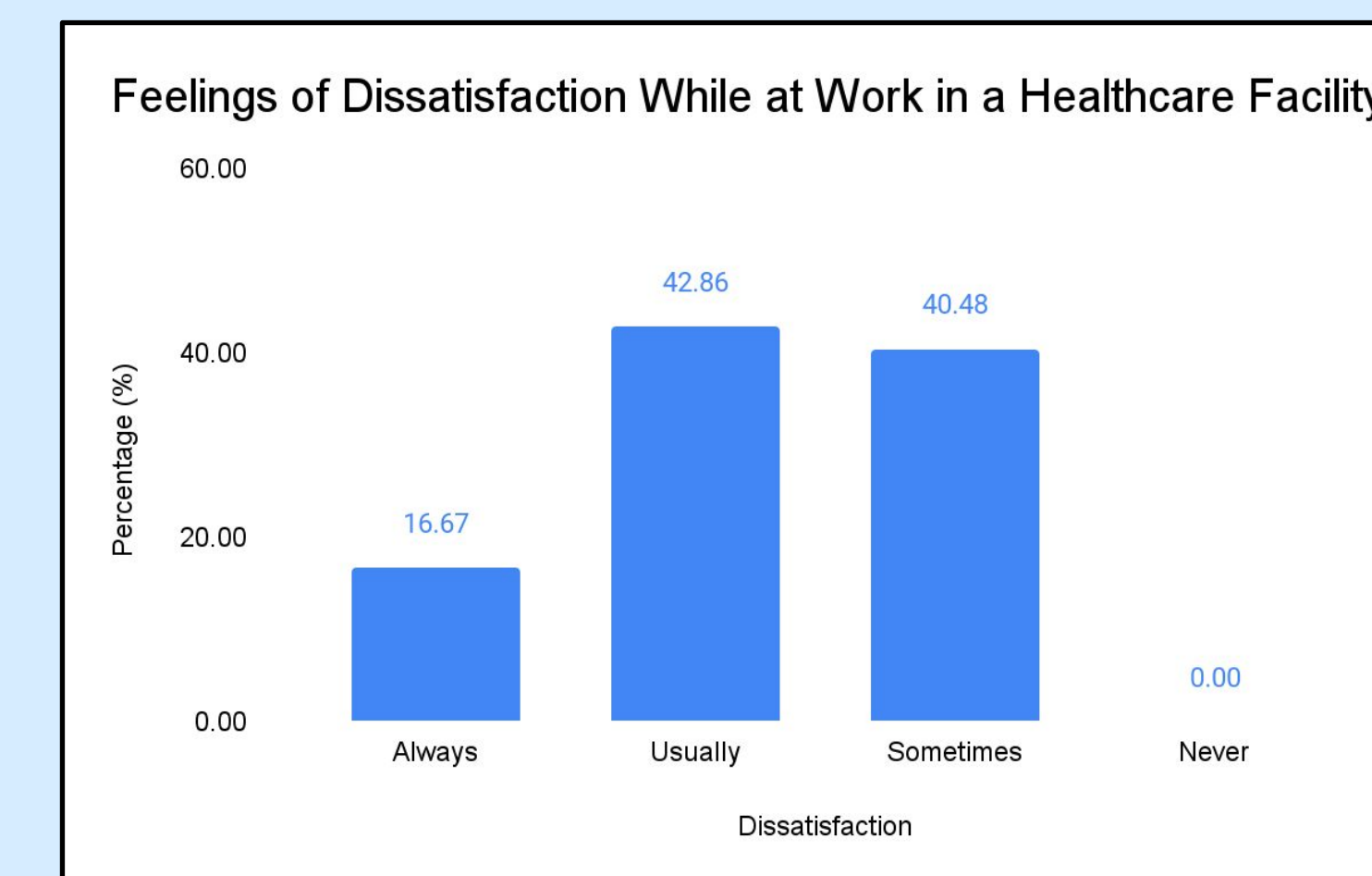


Figure 2: 42.86% of HCW usually had feelings of dissatisfaction in healthcare facilities.

Figure 4

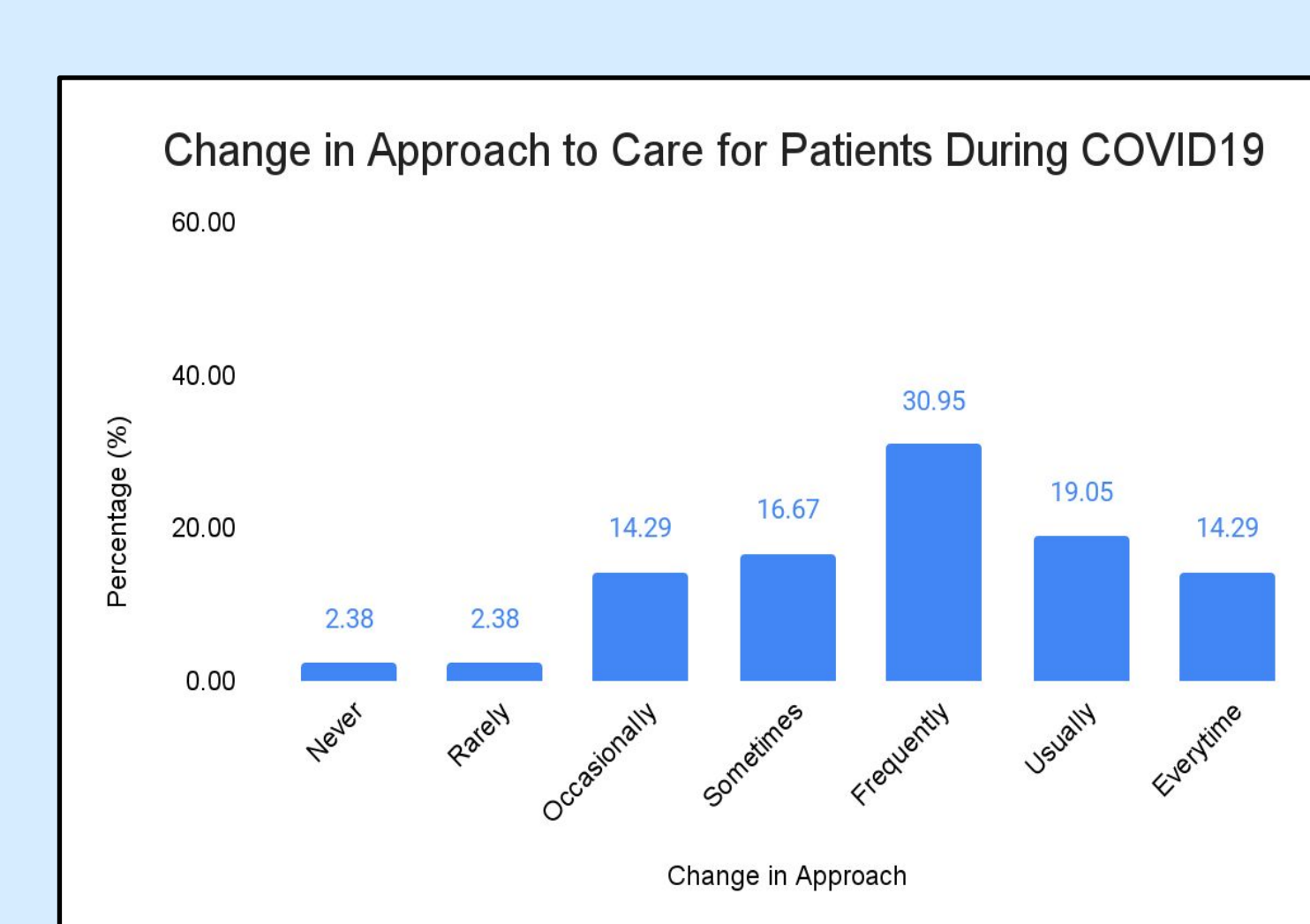


Figure 4: 30.95% HCW changed their approach frequently in caring for their patients compared to before the pandemic.

Figure 6

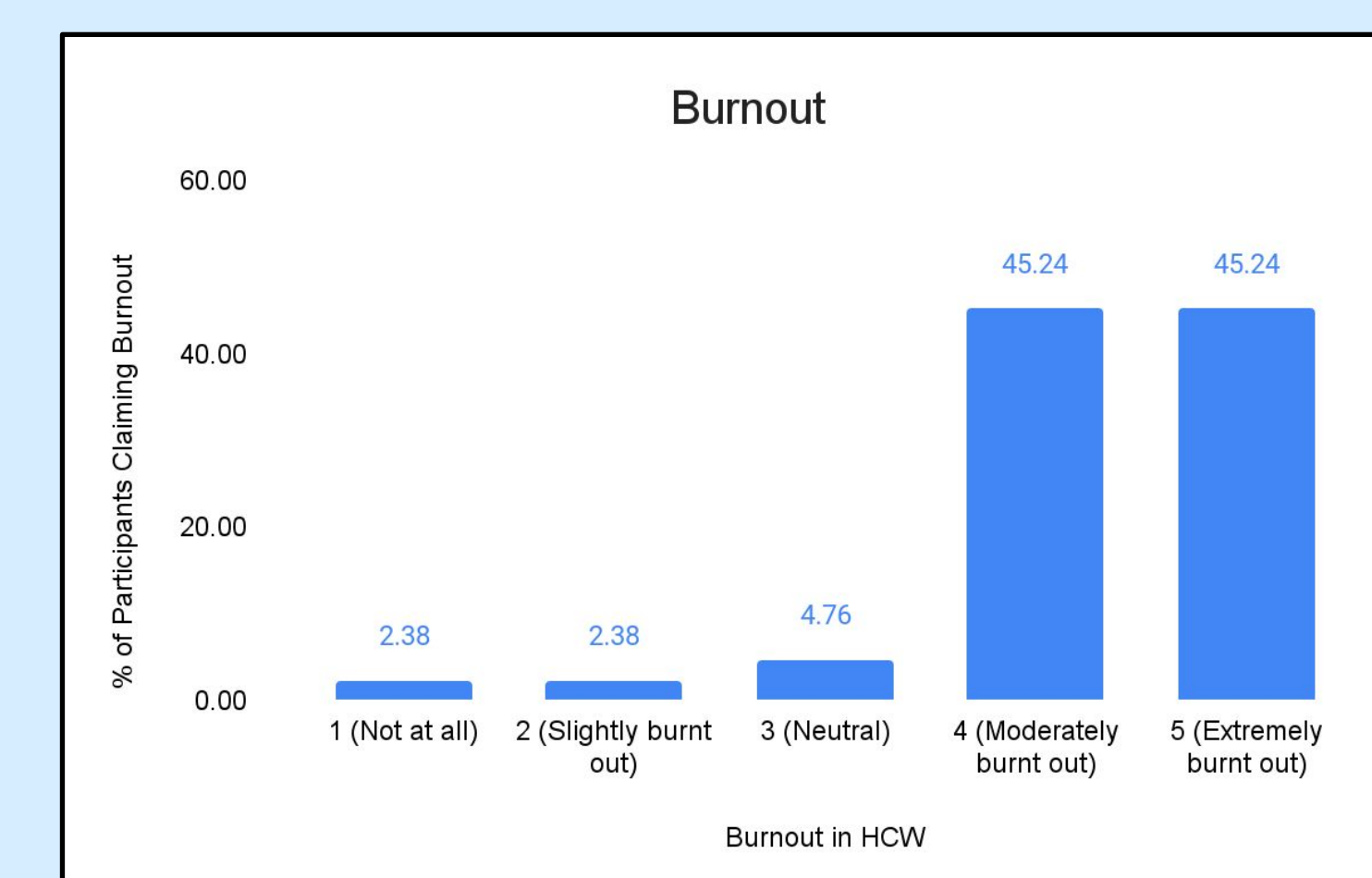


Figure 6: 90.48% were moderately and extremely burnt-out during COVID-19.

**CONCLUSIONS**

- Survey responses highlight healthcare worker burnout during the COVID-19 pandemic
- Changes in approach and care of patients led to less time spent with patients and prioritization for those with better chances of positive outcomes
- A majority of HCW expressed feelings of burnout, negative mental health states, and feelings of dissatisfaction while on the job
- Little to no resources were available to healthcare workers during the pandemic

**POLICY IMPLICATIONS**

- Policies that provide readily access to mental health resources are needed especially during a stressful time like the COVID-19 pandemic
- Qualitative and quantitative data suggested that healthcare worker stress was high among our sample and many expressed a lack knowledge and access of mental health resources available to them

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