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## Healthcare Leader Burnout: What You Should Know About Leader Resiliency

Department of Executive Office, Research  
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## OVERVIEW

Building a resilient workforce is currently front and center in the minds of healthcare leaders. Identifying and addressing the causes of staff burnout is an important component of attracting and retaining talented staff. Healthcare worker burnout at all levels is a long-standing issue; the events of the past two and a half years have given this issue a new sense of urgency.

This white paper presents the results of our study of burnout among healthcare leaders. Burnout among physicians, nurses and other front-line healthcare workers has been attentively studied both well before and after the onset of the pandemic. In June 2021, the American College of Healthcare Executives collaborated with Thom A. Mayer, MD, FACHE, founder, BestPractices, medical director, NFL Players Association and executive vice president, Leadership, LogixHealth, Bedford, Mass; and Stanford University researchers Tait Shanafelt, MD, Jeanie & Stewart Ritchie Professor of Medicine and chief wellness officer, Stanford Medicine, director, WellMD Center and associate dean, Stanford School of Medicine; and Mickey Trockel, MD, PhD, clinical associate professor, Department of Psychiatry and Behavioral Sciences, Stanford School of Medicine, to examine burnout and other stress-related symptoms among healthcare leaders. Along with presenting key data from this survey, this white paper summarizes pertinent information about burnout and its causes. It also presents advice, collected from the leaders answering our survey, about the most effective ways for healthcare executives to prevent and address job burnout.

## WHAT IS BURNOUT?

“Burnout” is a frequently used term that needs to be clearly defined for it to be effectively addressed. Our current understanding of burnout dates to the work of Herbert Freudenberger [1], Christina Maslach and Michael Leiter [2], [3], first conducted in the 1970s. Mayer provides a simple definition of burnout: **Burnout occurs when job stressors exceed the individual’s adaptive capacity or resiliency to deal with those stressors** [4]. Burnout is characterized by three symptoms: high emotional exhaustion, high depersonalization or cynicism, and a low sense of efficacy or personal accomplishment. It is quite distinct from fatigue, which can be addressed with rest.

Burnout can be measured in a number of ways. In our study, burnout in healthcare leaders was measured using the Stanford Professional Fulfillment Index [5], which is a well-validated tool that has been used by organizations around the world to assess burnout [6]–[8]. Burnout was scored from responses to questions about emotional exhaustion and interpersonal disengagement.

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Emotional exhaustion was assessed based on scores assigned by respondents to the following statements about their past two weeks at work: “I have felt a sense of dread when I think about the work I have to do,” “I have felt physically exhausted at work,” “I have felt lacking in enthusiasm at work” and “I have felt emotionally exhausted at work.” Interpersonal disengagement was assessed based on scores assigned by respondents to the following statements about how their job contributed to the way they felt at work during the past two weeks: “Less empathetic with people at work,” “Less empathetic with my colleagues,” “Less sensitive to others’ feelings/emotions,” “Less interested in talking with people at work,” “Less connected with people at work” and “Less connected with my colleagues.”

## WHAT IS RESILIENCY?

Creating resilient care teams is very much on the mind of healthcare leaders. Resiliency, engagement and passion for work are individual characteristics that mitigate the risk of burnout. Put simply, resiliency is the **adaptive capacity to cope with stress and thrive in the face of adversity** [4].

## WHAT DO WE KNOW ABOUT BURNOUT?

Some relevant things we know about burnout from the research are discussed below.

**Healthcare burnout did not start with the pandemic.** Although the COVID-19 pandemic unquestionably magnified the prevalence and impact of staff burnout on healthcare, burnout among clinicians and executives was recognized well before then. Burnout in physicians has been studied for several decades. According to the results of a 2018 study conducted by Shanafelt and colleagues, approximately 44% of physicians were experiencing some symptoms of burnout characterized by emotional exhaustion and depersonalization at that time, similar to levels of burnout physicians experienced in 2011 [9]. Multiple studies demonstrate occupational burnout is markedly more common in physicians than workers in other fields, even after adjusting for demographic factors, level of education and work hours [9]–[12]. The American Medical Association championed a movement to address physician burnout beginning in 2013 [13]. Burnout among nurses has also been researched for decades [14]. Burnout among executives, fueled by increased workloads and cultures where putting in long hours is revered and rewarded, has also been recognized for decades [15]. With burnout already a significant issue, the healthcare field was not well positioned to withstand the stress brought on by COVID-19. The pandemic has made addressing healthcare worker burnout an urgent priority.

**Burnout is having a profound impact on healthcare.** Extensive evidence has demonstrated a relationship between physician and nurse burnout and medical errors, [16], [17] quality of care [18], [19] and patient experience [20] during the last 20 years. Multiple studies have also demonstrated a relationship between burnout and decreased clinical productivity [21], as well as increased turnover [22], [23]. These factors, in combination with staffing shortages, resulted in healthcare leaders reporting serious concerns about shortages of front-line hospital staff, including registered nurses, physicians and technicians, long before the pandemic [24]. Reasons cited for these shortages included competition with other hospitals for staff, insufficient numbers of staff graduating from schools and staff losses to retirement. Hospital leaders were struggling with a trend for nurses to become travelers rather than being employed by a single hospital or health system. Some entry-level staff were being lured to careers in other industries that offered better hours and pay [25].

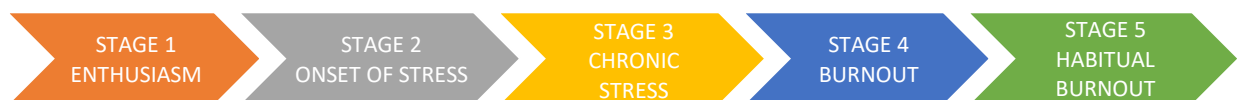
The pandemic only added pressure to the situation. It brought on layoffs and pay cuts for some, and oversized workloads, long hours and significant safety concerns for others. The enduring nature of the crisis and tensions between those supporting vaccinations and those opposing them are other factors that have added stress to the lives of healthcare workers. One widely quoted statistic is that one in five healthcare workers have left their jobs since the start of the pandemic [26], although some report that the impact is not quite that high since some changed positions while remaining in the healthcare field [27]. **There has been little to no published information we can find to this point about the impact of the pandemic on the availability of qualified healthcare administrators.** Nonetheless, burnout results in poorer performance and loss of staff, both of which are costly to healthcare provider organizations in terms of the quality of patient care, as well as financially [28].

**Causes of burnout.** Those in different positions and organizations face different stressors, and causes of burnout for those in various positions can vary in their particulars [4], [29]. That said, in general causes of burnout include [30], [31]:

1. Mismatch of job stressors and adaptive capacity or unsustainable workload.
2. Perceived lack of control or autonomy.
3. Insufficient rewards for effort.
4. Lack of a supportive community.
5. Lack of fairness.
6. Mismatched values and skills.

As we tested the scales we used to measure burnout in this study with healthcare executives, we encountered an interesting dimension to what healthcare leaders felt made their day-to-day work meaningful. A number of executives mentioned that “being in the information loop” or having their ideas heard or used was an important part of finding satisfaction in their jobs.

**Burnout does not happen overnight.** Research suggests that burnout does not occur suddenly; it progresses through a number of stages over time. A characterization of these stages adapted from Freudenberger’s work is [32]:



The first stage is characterized by enthusiasm for the job and has been referred to as the “honeymoon phase.” The onset of stress, Stage 2, is characterized by irritability, inability to focus, reduced quality of sleep, avoidance of decision-making and neglect of personal needs. If not addressed, Stage 3 occurs, characterized by chronic exhaustion, procrastination, apathy and cynicism, among other things. Burnout, Stage 4, is characterized by obsession with problems, a pessimistic outlook, self-doubt, social isolation and similar symptoms. If an individual moves to Stage 5, habitual burnout, they are likely to experience chronic sadness, chronic mental and physical fatigue, and depression. Physical, mental and emotional exhaustion increase as the stages progress. The good news is that an understanding of this progression and an ability to recognize these signs leading to burnout and address their causes can help prevent progression to later stages.

**Preventing burnout needs to be addressed both at the individual and organizational levels.** Creation of a resilient team involves actions both by individuals and organizations to prevent and address staff burnout. There are things that individuals can do to address their own ability to withstand stressors, and later in this white paper we present advice that healthcare executives in our survey would give to their colleagues to avoid and address job burnout. Organizational leadership has shown to have a significant impact on levels of staff burnout as well [33]. Examples from a rich literature on clinician burnout include the work of Shanafelt, Trockel, Lisolette N. Dyrbye, MD, Colin P. West, MD, PhD and fellow researchers who have demonstrated the significant effects of the work environment and organization culture on burnout among physicians and nurses, as well as the link between the leadership qualities of physician supervisors and the well-being and satisfaction of physicians working in healthcare organizations [33], [34], [35]. Excessive workloads, lack of autonomy and insufficient recognition for work performed, all causes of burnout, are clearly impacted by organizational leadership styles, practices, performance expectations and cultural norms. Advice for organizations to address staff burnout is beyond the scope of this white paper, although we direct the reader to a resource for some information on this topic [4]. We also expect to see more definitive studies to provide evidence-based methods of creating resilient organizations in the future.

## MORE ABOUT THE SURVEY METHODS

We conducted our survey to measure and understand stressors in the work lives of healthcare leaders in June of 2021. This was a little more than a year after the first major outbreak of the pandemic in the United States, after vaccines to prevent it had become widely available, but while infection and death rates were still high due to uneven adoption of the vaccine and other preventive measures and the emergence of COVID-19 variants.

The survey was sent electronically to 5,670 ACHE members holding positions of department head/director and above in healthcare provider organizations. Those who did not respond to the survey were sent a reminder one week after initial delivery of the questionnaire and a second reminder was sent one week after that. We received 1,269 responses, resulting in an overall 22% response rate among eligible respondents who received the survey. With respect to position, department heads were the most likely to respond to the survey, while CEOs and those serving in the military were the least likely. With respect to age, members under the age of 40 years were less likely to respond. Those in the military or public health organizations were somewhat less likely to respond than those in other types of healthcare provider organizations.

## WHAT DID WE FIND OUT ABOUT BURNOUT AMONG HEALTHCARE EXECUTIVES?

Analysis of the survey results revealed that one-third, 33%, of the healthcare leaders in the study had burnout scores in the high range based on their responses to questions about emotional exhaustion and interpersonal disengagement. The percentage of leaders with burnout scores in the high range is shown in Table 1, classified by position.

Table 1. **Percent with burnout scores in the high range by position**

<b>Position level</b>	<b>Percent with burnout scores in the high range</b>
CEO	28.8%
Other members of the C-suite or senior vice presidents	27.3%
Vice presidents	39.4%
Director/Department head	34.7%
Manager	38.5%

Proportions of leaders with burnout scores in the high range increase markedly in positions of vice president and below although when controlling for other factors, managers stood out as more at risk of burnout than those in any positions above them. The survey did not collect information about the reasons for this difference, although several hypotheses can be proposed. Those in positions of vice president and below have less autonomy, lower rewards and may be in more direct contact with front-line workers experiencing burnout than those in senior vice president or C-suite positions. It may also be that those who achieve the most senior positions in their organizations are more likely to have developed effective strategies for dealing with job stress.

## RECOMMENDATIONS

The guidance that healthcare leaders have provided to their teams in response to the pandemic has been critical in our country's ongoing recovery from this crisis. Leaders set the direction, standards and tone for their teams and are responsible for the morale of those reporting to them. That one-third of the healthcare leadership workforce is showing high burnout scores is worthy of concern and attention. Previous research by Shanafelt and Trockel has demonstrated that leaders' own well-being (burnout, professional fulfillment, sleep health) impacts their independently rated leadership effectiveness as assessed by the members of their team [36].

Burnout will not go away on its own. As noted earlier, organizational leadership has a strong impact on levels of staff burnout, and the results of this study suggest that healthcare providers need to examine workloads and how their care models, supervisory practices and culture can be shaped to provide a sense of autonomy to the staff and meaningful recognition for their work, at a minimum.

There are also things that individuals can do to prevent work stressors from leading to burnout and address them when they start to become overwhelming. Respondents to our survey were asked: *"What advice would you give to a colleague in a similar position about recognizing and addressing job stressors for himself or herself?"*

The following is a summary of the advice they offered to leaders regarding what they can do for themselves as individuals.

### *Prioritize self-care*

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The response given most often to the question of what advice leaders would give to colleagues for preventing and mitigating job stress, made by 363 of the 863 people who answered the question, was to make self-care a priority. Respondents advised that to maintain physical, mental, emotional and spiritual health, leaders need to schedule time for themselves, defend it against other demands and hold themselves accountable for this aspect of their self-care. This included taking breaks during the day and time off. It also included the advice that when a challenging situation arises, the best thing leaders can do is to take a minute for themselves and “breathe;” that taking a centering breath was a good way to begin effectively dealing with difficult, emergent situations.

Some respondents urged that this time for oneself should be taken without guilt; that leaders need to take care of themselves before they can take care of others. As one respondent put it: “You cannot pour from an empty cup.” A few respondents described how much their ability to do their jobs well improved after taking vacations where they completely separated themselves from work.

Taking care of oneself physically was an important component of self-care, according to those answering the survey. A healthy diet, exercise, sleep and avoidance of too much alcohol were all suggestions appearing in respondents’ comments.

Others mentioned kindness to themselves as an important aspect of self-care. Some spoke of leaders needing to be gentle with themselves, to recognize that they will make mistakes and that they be able to forgive themselves for doing so. We note that the observation is consistent with research from Trockel on the importance of self-valuation and self-compassion [37], [38].

Some respondents were clear that self-care is something that leaders need to for themselves; that no one else will do it for them. They advised leaders to develop the habits for preventing and counteracting burnout in place before they were needed. They counseled: “Work will always be there.” A few urged that senior leaders should be role models for setting boundaries that maintained all aspects of their overall health.

Some respondents were frank that this simple-sounding advice to take care of oneself is easier said than done. When asked what advice he would give a colleague to recognize and address job stressors one leader said he would advise that colleague to take time for herself and followed that with the words: “... then tell the rest of us how you accomplished this task.” Such comments underlined how intentional finding ways to practice self-care needs to be

### *Maintain a work/life integration*

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The second most-often-offered piece of advice, mentioned by 208 survey respondents, was to maintain a balance or integration between work and the other important things in life. Respondents emphasized the importance of giving attention to personal/family life and leaving work at the office. Some spoke of the benefits of taking true vacations where they “unplug” from electronic devices and leave work behind, noting they were able to do their jobs more effectively afterwards. Some spoke of work/life



balance, while a few suggested that “balance” was unrealistic and advised leaders to aim at integration between their work and personal lives so that one adds value to the other. Some mentioned the need for leaders to be role models in having well-rounded lives and encourage this in their staffs. A few mentioned that one consideration in choosing a workplace is to select one that allows a healthy personal/family life.

### *Seek support*

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Ninety-five respondents said they would counsel a colleague looking to manage job stressors to seek out someone with whom to talk. Collectively, respondents suggested that this could be a colleague, peer, mentor, supervisor, family member, friend, coach or counselor. Some advised building relationships to forge a support network and asking for help when needed. Some pointed out that just sharing experiences with others can be helpful. Further, one respondent advised: “Listen to those around you. If someone asks if you’re doing ok, getting enough sleep, etc., it’s a sign you actually are under stress (even if you think you have it under control).”

### *Maintain perspective*

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Seventy-six respondents said they would advise a colleague to manage job stress by doing what it takes to maintain a healthy perspective. “Pace yourself” and “take one day at a time” were two commonly offered pieces of advice. Others counseled patience, maintaining a positive attitude toward work and keeping in mind that, no matter what the crisis, “this, too, shall pass.” Others advised “relax” and “don’t stress too much about all the little things.” There were those who noted that stress could be self-induced, that leaders can be harder on themselves than others would be and perfection is not necessary. A few respondents mentioned keeping in touch with patients, which is one of the things that makes the job meaningful, and keeping in touch with what it was that made them choose this profession.

### *Be proactive*

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Sixty-seven leaders answering the survey advised that an effective way of dealing with job stressors was to be proactive about identifying and addressing them. Respondents suggested a number of ways to accomplish this. They advised that leaders maintain self-awareness, understand their own triggers, recognize when stress was building and take steps to mitigate it sooner, rather than later. While some issues are out of a leader’s control many are not, and one respondent urged: “Don’t be a victim.” Respondents also advised leaders to confront issues and address things promptly, rather than ignoring or minimizing them. This referred to organizational issues as well as identifying signs of stress in themselves or others.

### *Set boundaries*

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“Set and maintain boundaries” was the advice of 43 respondents for avoiding and mitigating job stress. They advised leaders to learn how to say “no” or “not right now.” Some noted that boundaries need to be communicated and adhered to. This referred to activities on the job, as well as maintaining boundaries between work and personal life.

### *Focus on what you can control*

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Thirty-two respondents said they would counsel a colleague looking to mitigate job stress to maintain a focus on job responsibilities and top priorities. They advised setting goals and keeping attention on achieving them. One very common piece of advice throughout these comments was: Keep your focus on what you can control or impact and do not be distracted by what you cannot.

### *Find the right workplace*

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Thirty respondents advised that job stress may be a sign that a leader should consider a different job or profession. They would advise a fellow leader not to stay in a situation where the leader’s values do not match those of the organization, or the job does not fit with what is important to that leader, or where they are not treated well. They advised having faith in oneself, getting out sooner rather than later, and not to stay in a position that was unfulfilling because “you think you need it.” Some noted the deleterious effects of an unhappy work situation on health. One particularly poignant comment was: “Don’t stay in an unhealthy situation as long as I have.”

### *Gain knowledge*

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One piece of advice for mitigating job stress given by 29 respondents was that leaders should continue to find the time to invest in themselves, and to continue to learn about their profession, organizations and the environment. They also advised leaders to position themselves to advance their careers. As one respondent put it: “Be prepared to learn something new every day.” Some advised leaders to volunteer for projects or assignments outside of their normal “umbrella” of activities to expand their knowledge and stimulate their thinking. One respondent also advised obtaining a master’s degree in one’s field to gain critical thinking skills, analytical strategies and software tools useful to produce time-constrained deliverables.

### *Set realistic expectations*

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Twenty-two respondents said they would caution a colleague looking to handle job stress to know their limits and to not have unrealistic expectations about what they can accomplish. As one respondent said: “Don’t take on more than you are capable of doing well.” Another cautioned: “Don’t take on more than you can handle/accomplish during ‘normal business hours.’” A third advised: “Be cautiously eager about taking on new responsibilities.”

### *Know your worth*

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Eighteen respondents provided advice for addressing job stress that is characterized by the following quote: “Competency and confidence in your capabilities is a great stress neutralizer.” Respondents urged leaders to be confident in themselves and not allow issues to sidetrack them from being the best they can be. Authenticity was important to another respondent who said: “Be true to yourself so you can sleep at night.” Others advised leaders to reflect on the value they add to the organization and celebrate impactful moments and accomplishments.

### *Find meaning in your work*

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Fourteen respondents would counsel colleagues to combat job stress by maintaining focus on their “why.” This includes finding what that leader values most and making sure that is part of a leader’s work and personal life. Some respondents spoke of the importance of finding meaning, fun and joy in their work.

### *Accept realities of the job*

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Fourteen respondents advised that acceptance of the realities of the job is an effective means of addressing job stress for healthcare leaders. One respondent best captured the intent of these comments in the statements: “Healthcare is not for the faint of heart. High stress and long hours are often required.” A few spoke of healthcare leadership as a 24/7 job, and as one leader said: “It does not matter where I am in the community, I am the CEO of the hospital.” Two respondents mentioned that it can be an isolating and sometimes a job that feels thankless. Understanding that this is part of the job of a healthcare leader should be a consideration for those contemplating entering the field.

Survey respondents also offered advice about how healthcare administrators can address and mitigate their job stressors in their role as leaders. A summary of that advice is presented below.

### *Prioritize*

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Fifty-eight respondents emphasized the importance of prioritizing tasks to prevent and address job stressors. They advised careful planning to make sure that the highest-priority items are addressed first, and that others are postponed or delegated. Respondents advised breaking large tasks into smaller initiatives and setting realistic timelines. As one respondent noted: “Not all objectives are achievable simultaneously.” They also advised that leaders take an inventory to see how their time is spent and ensure their use of time supports the completion of the highest priorities and getting needed work done. One respondent cautioned leaders to plan their calendars around their priorities, not those of others. One respondent suggested that leaders “Be mindful of meetings overload.” This advice about the importance of setting priorities referred both to leaders and their teams. As one respondent said: “The amount of ‘stuff’ that comes at you in healthcare is unlike any other industry ... you have to be masterful at prioritizing not only for yourself, but those you lead.” Some respondents emphasized the

need to allow time for contingencies and to expect staffing challenges. A final piece of advice was: “Do not procrastinate, as it will pile up.”

### *Delegate and trust your team*

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Thirty-nine respondents emphasized the need to delegate work to team members. “You can’t do everything yourself” was a theme in these comments. Some respondents saw it as necessary for sustainability that leaders “don’t do any work that could be delegated to an employee of yours.” They advised supporting team members while being careful not to take over or micromanage. Some noted that having team members take responsibility for their tasks was an important component of their development as leaders.

At the same time, respondents acknowledged that leaders must retain the responsibility to ensure that the results of delegated tasks still met organizational needs. “Trust but validate” was the advice given by several. A few noted that some team members may reveal themselves to not be up to their tasks, and developing a team you can trust may involve changing staff. As one respondent said: “If you have to make every decision, you have the wrong team.”

### *Communication is key*

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Thirty-one respondents emphasized the importance of good communication skills for keeping job stress at bay. This advice is best summed up by one respondent, who said: “Communication solves 95% of all problems.” A number of aspects of good communication were touched upon by respondents. They urged making sure communication with staff is continual; that roles, responsibilities and expectations are communicated with clarity; and that feedback is given often, promptly and constructively. One respondent mentioned that leaders need to be proactive in providing information for decisions that have to be made in their absence. Having good communication with peers, and with those to whom you report, were mentioned in the responses. One respondent described some of the themes in the comments well by saying: “Be more vocal and proactive in discussion with those you report to and those who report to you about needs, pressures, time constraints, and set clear deliverables.” Transparency in communications and good listening skills were also mentioned in response to this question.

### *Build a good team and support them*

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Twenty-two respondents emphasized the importance of leaders building a good team around them. As one respondent said: “Surround yourself with intelligent, dedicated people; it makes your job so much easier.” A few specifically mentioned that good teams allow leaders to take needed time off. Some respondents spoke of the need to have teams where members trust one another, have the same values, and are comfortable giving ideas and feedback. Respondents touched on several aspects of supporting their teams, from giving clear direction and holding them accountable, to providing outlets and resources for people to get help as needed. As one respondent said: “We need to show up and serve our employees.” A few acknowledged the challenging aspects of maintaining a strong team. One pointed out that it is important to be honest with the team about the limitations of the organization or situation

and keep the focus on doing the best they can with what they have. Another commented that you cannot always change attitudes but you can influence behavior, and sometimes have to settle for the team “acting” like a team.

### *Be a role model*

Five respondents specifically called out the need for leaders to “Be the leader you wish you had” and model servant leadership for their teams and front-line staff. This includes looking in the mirror and asking for help when needed.

### *Engage with senior leaders*

Finally, four respondents suggested various aspects of engaging senior leadership with the rest of the organization as an antidote to job stress for healthcare leaders. This included asking for the involvement of senior leaders, maintaining communications between departments and senior leaders, and, as a senior leader, focusing on developing leaders.

## CONCLUSION

This white paper presents results from a 2021 survey that measured burnout among healthcare executives who are ACHE members. In addition to reviewing information about the definition and causes of burnout based on the research literature, this paper also presents the advice respondents would give to other executives like them to avoid and mitigate job stress.

*ACHE wishes to thank the healthcare leaders who responded to our survey for their time, consideration, and service to their profession and to healthcare leadership research.*

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