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# Moral Injury And Burnout In Healthcare Are Becoming Everyone's Problem

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Careers in healthcare were once sought after as prestigious, noble and well-paid, but I have witnessed how they have lost their appeal for many in recent years. This emerging workforce crisis is the result of factors like long hours, non-competitive pay, overall burnout and—while traditionally studied in the context of military personnel but now more commonly applied to those practicing medicine—moral injury.

#### The Current State Of The Healthcare System

Those in the industry need to fundamentally rethink healthcare staffing and what makes it unappealing to many people, both young and old. We need to help prevent the erosion of our healthcare system not only for the sake of our workforce but for all who will need care.

Looking to the future, the current pace at which people are leaving or retiring from healthcare careers versus the rate at which new highly qualified candidates are allowed (program size, residency slots, etc.) or attracted to entering the field is looking to leave us without enough professionals to provide proper care.

According to a study conducted by the Association of American Medical Colleges, over the next decade, the demand for physicians is looking to outpace its supply, leading to a shortage of between 37,800 and 124,000 physicians.

The same is true for nurses. In fact, the medical industry is currently witnessing a surge in retirement rates among doctors and healthcare professionals in general. This has resulted in a significant decline in the overall number of registered nurses (RNs), with a decrease of over 100,000 recorded from 2020 to 2021. This decline is the most significant drop observed in the past 40 years.

Regardless of advancements in AI or new models in training lay community health workers, if we continue along this trajectory, I don't foresee having enough healthcare staff to take care of our high-volume aging population. Creating a healthy population goes hand in hand with creating the right kind of clinical workforce.

#### **Proposed Solutions For Healthcare Workforce Shortages**

To combat these issues, I think health systems and provider organizations should be examining their workforce model. This includes gaining a deep understanding of comparative wage rates, real-time staffing optimization and alternative care designs that can leverage virtual sitters and advanced monitoring. We can think of this problem as we would any other supply chain issue.

Leaders will need to reach all the way down into grammar school to build a pipeline of candidates and holistically address the funding, educational commitment (e.g., more six-year programs or two-to-three-year PA programs), lifestyle and lack of respect plaguing healthcare workers. To improve the overall desirability of clinical professions, employers must heavily focus on compensation, work/life balance and—as we saw grow rapidly as a concern during the pandemic—safety measures for those on the job.

Short of this, the demographic bomb of aging looks to outpace births, and combined with the lack of attractiveness of the career, it is looking to pose a significant threat to revenue streams, medical liability and the ability to provide effective care.

And it would be hypocritical, not to mention the necessary reckoning between investment and spending on actual clinical care and administrative overhead. Whether it's the soaring insurance expenses, prescription rebates, health system overheads or excessively priced technology, the way we allocate our spending is severely imbalanced.

## **Care And Community**

Not only do labor shortages affect clinical operations and capabilities, but these negative impacts can have a domino effect on other businesses.

The more time people have to spend dealing with the hassles of seeking and managing healthcare for themselves and their loved ones, the lower their productivity and labor participation as a whole. Prime-age workers will be sandwiched between aging parents and children and the desire to work. Therefore, I see this as everyone's problem.

Funding is simply misallocated, and many in the industry have a mindset that prioritizes creating supply. To address this, it's essential to recognize that there is an abundance of financial resources available if we approach this as a matter of national security, reallocating funds toward education and training to better prepare for and address the upcoming challenges in the healthcare industry.

### **Looking Ahead**

In short, our system for creating clinical labor is currently broken, and we are behind the rest of the world. No other country in The Organisation for Economic Co-operation and Development takes as long to educate a physician or does so with the incredible debt burden that many students have on graduation.

As we look ahead and work to create actionable change in these labor areas, an overarching goal should be to continue to keep people healthier longer while simultaneously driving interest among those considering a clinical healthcare profession.

As leaders, business owners and healthcare consumers ourselves, we must create a positive framework to power the future of healthcare consumerism to combat these problems. While many of these changes need to happen on a governmental level, we can still take action, like allowing employees to have flexibility in medical appointments and enabling proactive treatment rather than reactive treatment, which ultimately costs more time and money for all parties involved.

We can also aid in the overall mindset toward clinicians; there is a significant reform that must be accomplished, which, once again, is largely out of our control, but emphasizing the respectful treatment of healthcare workers can aid in fewer people being driven away from the profession whether they are 35-year veterans or at the beginning of their training.

I continue to see advancements in healthcare with major breakthroughs in the research space, but no matter how significant the discoveries made, we will still need our essential healthcare workers to talk to and see patients for true patient care.