

Managing a Burned-Out Employee

Proactive steps can mitigate this prevalent problem.

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ouldn't it be great if employee burnout occurred only in the worst and most spectacularly bad workplaces? That would mean that most healthcare executives would never have to deal with the problem. If only that were true. Unfortunately, employee burnout can occur practically anywhere. According to Campbell, a whopping 70% of employees struggle with burnout at least once in their careers. In fact, Campbell suggests, burnout is "imminent" when employees experience an overwhelming, relentless workload. Employees also will burn out when they perceive injustice in the workplace—as when they are being taken for granted or management treats employees unfairly. And those perceptions are what matter, not whether the injustice is real. As Campbell says, "It's not just the amount of work, but the experience and emotions surrounding that work." That is why emotional and mental exhaustion are crucial parts of employee burnout, Campbell says.

It can be difficult to know with certainty that an employee is burned out, because another problem may be at play. It also can be hard to know what to do to help employees who are burned out. And it can be especially challenging for the healthcare executive who has known a burned-out employee to be an enthusiastic, energetic, high performer in the past. You will feel sympathy and concern for the individual, and that can get in the way of your taking needed action. At the same time, you will have to balance the needs of your burned-out employee

motivating, and leading your employees, you can reshape their work life."

What Is Job Burnout?

The term burnout was first described in two scientific articles in 1974, one by Herbert Freudenberger³ and the other by Sigmund Ginsburg.⁴ Freudenberger used the term to describe the consequences of severe stress and high ideals especially in "helping" professions. As Heinemann

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with the needs of your healthcare organization, the rest of your team, and the patients you serve. Add to your challenges the fact that there is no quick fix for helping your employees deal with burnout. As Slide² warns, "Sending them off on vacation will not make the problem go away upon their return." A real change will be needed in their work, their work environment, and their emotional state.

Fortunately, the healthcare executive can have enormous influence in bringing about these needed changes. You may need to do some sleuthing to figure out what has been going on. You may need to institute new ways of doing things. And you may have to overcome your own frustrations. But as Slide suggests, "By communicating,

and Heinemann⁵ explain, "Doctors and nurses, for example, who sacrifice themselves for others, would often end up being 'burned out'—exhausted, listless, and unable to cope." Ginsburg, conversely, suggested that employees working in non-helping fields are likely to experience burnout. He focused his article on the burned-out corporate executive.

After 1974, Freudenberger made the term burnout popular in further publications. He is therefore widely considered to be the "founding father" of the burnout concept, Heinemann and Heinemann say. However, it is important to note that Freudenberger, a psychologist and psychotherapist, did not invent the term

Burned-Out (from page 127)

burnout. Instead, he deserves credit for systematically describing and analyzing a mental condition that he observed in some of his mental health colleagues, that he also experienced himself, and that his colleagues described as being "burned out."

A short explanation of job burnout is that it is a special type of work-related stress. In his original 1974 article, Freudenberger describes the state of being burned out as becoming exhausted as a result of excessive demands made on energy, strength, or resources in the workplace. As the Mayo Clinic⁶ suggests, burnout usually is a state of physical or emotional exhaustion that also involves a sense of "reduced accomplishment and loss of personal identity."

Often, burnout leads to lower performance and a negative attitude both inside and outside the workplace. As *Canada Life*⁷ explains, burnout is characterized by cynicism, ineffectiveness, and "chronic negative responses to stressful workplace conditions."

Symptoms of Job Burnout

In recent years, burnout has been one of the most widely discussed mental health problems. However, as Heinemann and Heinemann warn, despite the societal importance and extensive use of the term burnout in everyday life, there is still heated debate among scientists and practi-

Is Your Employee Experiencing Burnout or Depression?

As you can see, the healthcare executive cannot assume from observations of symptoms alone that an employee is burned out. Moreover, you cannot assume that burnout is the problem even when the employee tells you that it is. He may know that

Often, burnout leads to lower performance and a negative attitude both inside and outside the workplace.

tioners about what burnout actually is and what symptoms are associated with it. In his 1974 original article, Freudenberger explains that burnout is characterized by physical symptoms such as exhaustion, fatigue, frequent headaches, gastrointestinal disorders, sleeplessness, and shortness of breath. Behavioral symptoms include frustration, anger, a suspicious attitude, a feeling of omnipotence or overconfidence, excessive use of tranquilizers and barbiturates, and cynicism.

something is wrong but not diagnose the problem correctly. Or he may be trying to hide something from you. Therefore, your first task will be to do some investigating to figure out what has been going on. First, you will want to determine whether the employee is burned out or if he is depressed. What is the difference?

As Gibson° explains, "Many features of burnout are work-related, while the negative feelings and thoughts of depression pertain to all areas of life." Furthermore, a major depressive episode often includes hopelessness, suicidality, or mood-congruent delusions; burnout does not, Gibson says.

When you suspect that an employee may be burned out, pay close attention to what you and others have observed. Then, answer the following questions:

1) Are you noticing any impairment? A burned-out employee may have impaired job performance, Gibson says. For example, he may be less productive or make more mistakes or be more short-tempered. However, an employee experiencing a major depressive episode may exhibit functional impairment, such as difficulty speaking, memory loss, or difficulty solving problems.

2) When do the symptoms occur? Are you seeing the employee's symptoms all the time? Or do the symptoms seem to ebb and flow and worsen in certain situations? Do you have any evidence that the employee's symptoms continue to occur

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Keep in mind, however, that burnout is not considered to be a mental illness, and only rarely is it considered to be a medical diagnosis.

As Heinemann and Heinemann explain, "Today, burnout is an established medical diagnosis in only very few countries such as the Netherlands and Sweden; in most (industrialized) countries, it remains a contested diagnosis that is widely discussed but not officially recognized in the healthcare system." Nonetheless, burnout is a potentially serious mental health issue. It also can be complex. As the Mayo Clinic explains, some research suggests that some people who experience symptoms of job burnout do not believe their jobs are the main cause. Yet, sometimes the job itself is the root of the problem. Is it any wonder, then, that healthcare executives may not always know why their employees are burned out or how best to help them?

Since 1974, researchers have identified many additional burnout symptoms. For example, Slide suggests that increased and unexplained tardiness. absences, or leaving work early may suggest burnout. Campbell says that burnout may cause reduced professional efficiency and proficiency. Canada Life warns that an increase in errors and accidents, communication breakdown, and greater use of sarcasm may suggest burnout. Carter⁸ suggests that symptoms of burnout include heart palpitations, forgetfulness, loss of appetite, and anger. Finally, the Mayo Clinic says that burnout symptoms include difficulty concentrating, lack of satisfaction from achievements, overeating, and the feeling of having to drag oneself to work. Of course, each of these symptoms may indicate not burnout but other problems, such as trauma, abuse, grief, depression, or illness. This further complicates the healthcare executive's task.

Burned-Out (from page 128)

outside of work? As Gibson suggests, job burnout is generally job-related or situational. A major depressive episode, on the other hand, is general and context-free. So if your employee seems lackluster and exhausted every day at work but perks up at the end of the workday, chances are very good that he is experiencing burnout, not depression.

3) What is the employee's affect? Gibson suggests that a burned-out employee may have a variable affect. In other words, he may at times feature the symptoms associated with burnout but at other times feature much more positive behaviors. He may even use and respond to humor occasionally. On the other hand, an employee experiencing a major depressive episode is more likely to remain sad, blunt, and restricted regardless of what is going on around him, Gibson says.

4) What is the employee thinking about? Of course, you cannot know what an employee is thinking, only what he says. However, job burnout generally is characterized by the employee's preoccupation with work, Gibson says. In most cases, the burned-out employee's self-esteem is preserved and remains intact. Conversely, an employee experiencing a major depressive episode may speak of feelings of hopelessness, low self-esteem, and even suicide. He may also speak of himself frequently in self-deprecating terms. He may additionally harbor mood-congruent delusions, Gibson warns.

For example, he may think that a co-worker hates him or that everyone in your healthcare organization is out to get him, even though that is not true. Ninavaggi¹⁰ adds that inappropriate guilt, feelings of self-worthlessness and self-loathing, recurrent thoughts of death, and diminished interest or pleasure in life's activities may indicate that the employee is depressed, not burned out.

5) Can you identify a possible reason to explain the change in the employee? For example, is the em-

ployee grieving the loss of someone? Has a long-term relationship ended? Does he have financial or legal problems? Has the employee been sick or has he been recently diagnosed with a new medical condition? Is he undergoing treatment or taking a new medication? Is he a caregiver for someone who is very sick? Do you think the employee may be experiencing a high level of stress at home? Do you suspect that substance abuse may be causing at least some of the symptoms you have observed, or if not, making them more frequent and/or worse? If you can answer yes

helpless, suffering, or traumatized people or animals is possibly the motive. It is common for us to hail from a tradition of what is labeled 'other-directedness.'"

Simply put, those most susceptible to compassion fatigue were taught to care for the needs of those around them before caring for their own needs. Most healthcare executives can relate to this or easily identify employees who fit this description.

Transitional Support¹² likens compassion fatigue to the emotional residue that comes from working day in and day out with patients who

Like burnout, compassion fatigue is a set of symptoms, not a disease.

to any of these questions, chances are very good that you are dealing not with job burnout, but with other problems.

Is Your Employee Experiencing Burnout or Compassion Fatigue?

Your next task will be to explore whether your employee may be experiencing compassion fatigue. Like burnout, compassion fatigue is a set of symptoms, not a disease. As the Compassion Fatigue Awareness Project11 explains, "Compassion fatigue and its kin, such as secondary traumatic stress, PTSD, empathic distress, and vicarious trauma, create issues in our lives." Unfortunately, your front-line employees who must work regularly with emotionally taxing patient challenges are more likely to experience compassion fatigue than others.

The origins of compassion fatigue most likely took hold during our formative years. As the Compassion Fatigue Awareness Project explains, "Surviving a dysfunctional childhood aids in creating behaviors and patterns that can lead to high levels of compassion fatigue in caregiving." Surprisingly, people who are attracted to caregiving careers often enter the field already displaying symptoms of compassion fatigue. As the Compassion Fatigue Awareness Project explains, "A strong identification with

are suffering. As Transitional Support explains, "This creates a secondary traumatic stress in the helper." For example, prolonged exposure to patients' traumatic stories and their pain and illnesses, having to deliver bad news to a patient, or having to inflict pain to complete necessary tests and procedures makes some employees especially susceptible to compassion fatigue. Unfortunately, compassion fatigue looks a lot like burnout, so it is not always easy to identify, Transitional Support warns. It, too, can cause the employee to experience fatigue, anger, frequent headaches, sleeplessness, appetite changes, and similar symptoms.

There are, however, a few differences between burnout and compassion fatigue that you will notice if you pay close attention. Think of job burnout as being worn out by the job. It can affect a great many employees in pretty much any job or profession. However, as Portnov13 suggests, "Compassion fatigue is caused by empathy." In fact, Portnoy argues that compassion fatigue is the "natural consequence" of stress resulting from caring for and helping traumatized and suffering people. The impacts of burnout usually emerge gradually over time. The symptoms can easily be linked to stressors within the employee's

Burned-Out (from page 129)

working life. However, as Transitional Support explains, burnout almost always develops slowly, over a long period of time; compassion fatigue usually develops much more quickly. Furthermore, Transitional Support says, compassion fatigue generally has a faster recovery time than burnout, especially if it is identified early. Also, employees experiencing compassion fatigue are much more prone to nightmares and flashbacks than burned-out employees. Another good indicator that the employee is experiencing compassion fatigue is that she avoids or dreads working with specific patients, and that her symptoms increase significantly whenever she does, Transitional Support says. Finally, Portnoy suggests, an employee may be experiencing compassion fatigue when she "suddenly and involuntarily" recalls a frightening or upsetting experience while working with a patient or family.

Have a Meaningful Helping Conversation with the Employee

Once you have gathered and thought about your observations, it will be time to talk with your employee in private. A good approach is to express your concern and describe objectively what you have observed. Stick to the facts. What have you seen and heard, and what have others told you? Then, ask the employee to tell you what he thinks is going on. Do not say what you think. Be quiet. Give the employee time to respond. If he tells you that it is "nothing," tell him that you do not agree, that you think that it there is something going on. If he says, "I don't know," ask him to think about it some more. Then remain quiet until he speaks. If he lashes out, point out that he seems to be angry. Ask him if he is, and, if so, why.

If the employee cries, allow him the time and space to let out some of the emotions. When he calms down, ask him why he cried. In each case, see where the employee takes you, and go from there.

A common response is for the employee to assume that you are

about to reprimand him and to fear that you are about to take disciplinary action. He may apologize and promise to improve. If that happens, tell the employee that while you appreciate the apology and the promise, things did not always seem this way to you. Tell him that you have seen a change, and if you can, when you started to see it. Then reiterate your concern and your desire to know more about what is going on. Tell the employee that you would like to help him, not reprimand him.

However, that is not the end of the story. As *Canada Life* explains, the lie is in denying that the current situation is damaging to the employee's health and well-being and that changes are necessary. If the employee offers one of these lies to you, draw her out to learn more about what she means. Then, explain that not taking needed action will eventually lead to burnout and, possibly, deterioration of the employee's health, if those things have not already occurred.

Tell the employee that you want to work with her to figure out more precisely what is going on, not only for her sake, but for everyone in your practice.

Another common response is that the employee may try to downplay the problem or to say that the problem is not with her, but with someone or something else. As *Canada Life* explains, "Some employees who have recovered from burnout shared what they called 'the lies we told ourselves' related to denying the signs of burnout, even when loved ones pointed them out to them." These lies include:

- I am fine.
- It is your nagging at me that is stressful.
 - I love my job.
 - I am happy to take more on.
 - I am just tired.
- You don't understand; no one else can do this.
 - People are depending on me.
 - I really want to be helpful.
 - I will be fine once this is done.
 - This too will pass.
- I need to get back to the top of my game.
- I'll take a vacation and then be okay.
- If people just let me do my job, I would be fine.
- It's not me, it is everyone and everything else.

Canada Life says that most employees who say such things believe these statements to be true. And, to a certain extent and in some instances, there may be some truth to them.

Tell the employee that you want to work with her to figure out more precisely what is going on, not only for her sake, but for everyone in your practice.

As the conversation unfolds, continue to evaluate whether the employee may be experiencing burnout or if there may be another problem or problems causing the behavior changes. Depending on what the employee tells you, you may ask questions such as:

- Do you feel that your behavior has changed outside of work too?
- Has anything in your personal life changed recently?
- Have you discussed any of this with anyone else?
- Have you noticed anything else about yourself that has also changed within the last year or so?

Of course, the employee may try to hide a serious problem from you. For instance, she may not want to share with you her marital or financial problems, substance abuse, or anything else that she finds to be embarrassing or incriminating. Tell the employee that your conversation is confidential, and that you hope that she knows that she can trust you.

If the employee admits to you that the problem is an illness, grief, depression, or another personal problem, find out whether she has al-

Burned-Out (from page 130)

ready sought help. Discuss how that has been going. If she has not sought help, or if the help she sought is not working, explain why it would be a good idea to see a professional or to take advantage of other support resources in the community. Or suggest your healthcare organization's Employee Assistance Program (EAP), if it has one.

Ask the employee if she is willing to avail himself of those resources. If she is, offer to make a referral or to help her identify programs that may be beneficial. If the employee says that she is unwilling to see anyone about her personal problem, for instance, that she will be "fine" on her own, reiterate why you think that seeking help is a good idea. If she continues to resist, tell her that you will continue to be concerned for her well-being, but that you also will be continuing to monitor her behavior while at work. Set the date for a follow-up meeting no later than two weeks from the day of your initial conversation. Tell her that your If the employee does not think that she is experiencing compassion fatigue, of if she exhibits symptoms more clearly associated with job burnout, ask her if she knows what burnout is. If she does not, tell her. Then, if the employee believes she may be experiencing job burnout, tell her that you want to help her to feel more fulfilled, rewarded, and enthusiastic about work again. Also tell her that for that to happen, some changes are going to be needed.

as Slide suggests, "If everyone is doing some sort of tedious work, rotate it so that everyone can try something new." Ensure that workloads are distributed evenly and that no one is taking on the brunt of the work, Slide says.

2) Keep the workload manageable. Pay close attention to the amount of work you assign to your employees. Do not establish unreasonable deadlines. As Employee Performance¹⁴ suggests, be on the

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Eight Strategies That Can Help Burned-Out Employees

Doctors can help their burnedout employees feel better by making some simple changes. Be mindful, however, not to coddle your burnedout employees or to favor one employee over another. Rather, choose and implement strategies that will keep the work fresh for everyone. lookout for signs that employees are overburdened and losing their productivity. At the same time, be sure that your employees have enough to do. Frequent employee check-ins can help you monitor the workload.

3) Recognize and acknowledge good work. Regularly look for good employee work, even if it is among mundane tasks. As Slide suggests, "Maybe you'll find evidence of solid effort or accomplishment in an employee's customer service skills, or his e-mail etiquette." Your acknowledgments will help employees to feel appreciated and valued. It can mean a lot, especially to burned-out employees.

Evaluate whether work tasks are assigned properly given the unique abilities and interests of each employee.

door is open if she wants to speak with you again before your scheduled follow-up.

If the employee says that there is no personal problem in the background, and you believe her, pivot the conversation to what is happening at work. First, if the employee has exhibited symptoms of compassion fatigue, ask whether she has heard of it. If not, explain what it is. Then, ask whether she thinks that compassion fatigue may be what has caused the change in her behavior. If the answer is yes, tell the employee that compassion fatigue is not uncommon, especially among caring, empathetic people who work in healthcare, and that the employee may find it very beneficial to work with a qualified therapist.

Also be willing to make significant changes in the way you do things, and do not simply put a bandage on the problem. For example, while celebrating employees one day a year is nice, it will not make them feel appreciated the rest of the time. Likewise, adding a few healthy snacks to your vending machine will not make your employees believe that you care about their health, at least not in a significant way. Here are eight much more effective strategies:

1) Re-assign tasks. Evaluate whether work tasks are assigned properly given the unique abilities and interests of each employee. When employees are under-stimulated, assign new and exciting responsibilities that will push their existing skill sets. Or,

- 4) Send your employees to training. Discern which skills your employees need to improve and to move up the ranks so that they can perform to their full potential. As Slide suggests, "Training not only boosts productivity, it also boosts the spirits of your team." A burned-out employee may perk up if he sees training as a pathway to a better and more exciting job.
- 5) Limit overtime. Get your employees in and out of the office in the number of hours that were agreed upon at their hire. This may mean decreasing their workload, hiring temps, or hiring another employee altogether. As Slide warns, "While occasional overtime is harmless, consistent overtime only increases workplace burnout."

Burned-Out (from page 132)

- 6) Encourage and allow employees to unplug. Burned-out employees often work so hard that they skip breaks, skip their lunches, neglect to use their allotted vacation days, and take work home. Some organizations have developed a culture where everyone is expected to work or be on call all the time. However, this is unhealthy. Your employees need time to unplug, recharge, and come back to work rejuvenated. As Tho¹⁵ suggests, "Have employees stay offline from work outside of office hours and leave work at work."
- 7) Tie daily tasks to appealing long-term goals. Mundane daily tasks can feel like a dull and end-
- less grind to the burned-out employee. The Young Entrepreneur Council¹⁶ suggests that linking such tasks to big goals can help burned-out employees to feel that they are working toward something much more important and worthwhile. As the Young Entrepreneur Council explains, "Boredom and burnout at work can be a result of tunnel vision." Frequently remind your burned-out employees of your long-term goals and their progress toward them, and look for ways to tie goals to performance-based bonuses. That will make your goals even more appealing, the Young Entrepreneur Council suggests.
- 8) Set a good example. Think about the behaviors you are modeling for your employees. As Knight¹⁷

warns, if you are running from meeting to meeting and do not have enough time in the day to breathe, what message does that send? Set a good example by making your own downtime a priority. "Show your team that you don't always operate in full-throttle mode at the office," Knight says. Bring humanity back into the room.

9) Follow Up with your burnedout employee. Continue to monitor
and document the employee's performance. Follow up regularly. In time,
things may improve. However, sometimes they will not. As much as you
want to help, you cannot allow the
employee's undesirable behavior to
go unchecked. Keep offering help,

Continued on page 135

Which Employees Have the Highest Burnout Risk?

erbert Freudenberger,³ the founding father of the burnout concept, listed the personality factors that he believed predispose people to suffer from burnout. It is primarily "the dedicated and the committed" who are most likely to burn out, Freudenberger suggested. Nowadays, the term burnout is no longer used only for those practicing the helping professions. Anyone can suffer from burnout, from stressed-out executives and celebrities to overworked employees, homemakers, and even children.

Although burnout can affect anyone, some of your employees will probably be more susceptible to burnout than others. As Duchene¹⁹ suggests, "The ability to recover from stressful reactions quickly is what makes resilience key to preventing burnout." Duchene suggests that six different employee personas indicate lower resilience, thus putting them at higher risk for burnout:

- Soulful sufferers are employees with the highest risk for burnout. They have difficulty anticipating changes and are unable to temper their emotional responses when problems occur.
- Strivers are more likely to get frustrated when problems emerge and to disengage from their work. They also tend to have higher anxiety levels.
- Checked-out employees have high levels of stress about both work and money, coupled with few outlets for healthfully expressing their stress. They lack strategies to build relationships or to expand their problem-solving skill set.
- Status quo employees have a low sense of purpose and meaning about their work. They do not switch gears as needed when confronted with new problems, but, rather, keep everything the same.
- Stretched superstars go above and beyond in the workplace so often that they are more likely to suffer work–life balance conflicts.
- Change masters can anticipate change and temper their emotional responses, making them the least likely to suffer from burnout. Nonetheless, the group still faces some burnout risks when the demands they face exceed their capacity to cope.

Employees who find themselves in particular circumstances may be more susceptible to burnout. For example, as *Canada Life*⁷ suggests, burnout is more likely when employees expect too much of themselves, don't feel that the work they're doing is good enough, feel inadequate or incompetent, feel unappreciated for their efforts, have unreasonable demands placed upon them, or are not in roles that are a good job fit.

Canada Life also suggests that employees may have greater instances of burnout when they experience work overload (even when they say they can handle it) and when they lack predictable and clear expectations. The Mayo Clinic⁶ also cites a number of circumstances that lead to job burnout, including lack of control, unclear job expectations, dysfunctional work-place dynamics, extremes of activity (too little or too much), lack of social support, and work-life imbalance. PM

Burned-Out (from page 134)

but at the end of the day, take the disciplinary action necessary to safeguard your patients, the rest of your employees, and your organization.

Finally, if the burned-out employee ever speaks of the possibility of doing harm to herself, to anyone else, or to your workplace, take the threat seriously. As Fiss¹s suggests, "The first step is to reach out to the employee's emergency contact, if she has provided one, and urge the emergency contact to take the employee to get help." If the employee has no emergency contact, or if the danger is imminent, call security or the police. **PM**

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