

The nursing burnout crisis is also happening in primary care

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Following the COVID-19 pandemic, nurses across the U.S. are facing a burnout crisis. Many nurses report concerns with their work environment, including strained relationships with managers and

colleagues, a lack of input into organizational decision-making, few opportunities for professional advancement, and limited resources and support.

Thirty years of research by Penn Nursing's Center for Health Outcomes and Policy Research has shown that these characteristics of a poor work environment can lead to nurse burnout, [poor patient outcomes](#), and turnover—especially in hospitals.

The study, "Characteristics, Work Environments, and Rates of Burnout and Job Dissatisfaction Among Registered Nurses in Primary Care," was published on June 15, 2023 in *Nursing Outlook*.

However, little is known about these issues in other settings where nurses work, such as primary care offices and clinics. Primary care practices are increasingly hiring registered nurses (RNs), yet practices vary widely in the roles their RNs perform.

While some practices empower RNs to lead care coordination and chronic disease management programs, many others largely relegate nurses to secondary roles such as triage, intake, and clerical duties. Prior studies have shown that when primary care RNs spend most of their time in administrative roles, such as triage, they experience higher rates of burnout and job dissatisfaction.

Moreover, primary care RNs are especially central in clinics serving low-income individuals, such as federally qualified health centers (FQHCs), but these clinics are often limited in resources, potentially contributing to poor work environments and adverse job outcomes.

Using surveys of primary care RNs in four large states, we analyzed the association between the quality of the nursing work environment and rates of burnout, job satisfaction, and intent to leave one's current job.

We also compared the [work environment](#) against the rates of each outcome across four different types of primary care settings: private practices, nurse-managed clinics, retail and urgent care clinics, and community clinics (i.e., FQHCs).

We found that across all primary care settings, better work environments were associated with lower rates of burnout and higher rates of job satisfaction. In fact, nurses in the best work environments had just a 7% likelihood of being burnt out compared to those in the worst environments.

In addition, nurses in FQHCs and other community clinics had the highest rates of burnout, intent to leave, and poor work environments, with nearly 40% of them, including many Black and/or Hispanic/Latino nurses, experiencing burnout. This finding was particularly concerning and has potential implications for [patient care](#) and workforce diversity in underserved settings.

The crisis of nurse burnout extends beyond hospitals, impacting the growing ranks of nurses in ambulatory settings such as primary care. To address burnout in these settings, administrators could explore several strategies:

- Leverage RNs' expertise and education in primary care delivery. RNs have advanced clinical skills that are highly transferable to primary care—such as interdisciplinary care coordination, patient education, and chronic disease management. Administrators should make efforts to understand the unique contributions of primary care RNs, and identify the resources and supports they need to be successful.
- Ensure nurses have "a seat at the table" in organizational decision-making. Nurses are key informants of the quality of care

provided in their organizations. Primary care administrators should partner with nursing staff to develop innovative solutions to achieve high-quality care and equitable patient outcomes.

- Approach nurse burnout with an equity lens. There has been historic disinvestment in primary care practices that serve racially diverse communities. These [nurses](#), who are more likely to be Black and/or Hispanic/Latino, are left to feel the impact, reporting higher job dissatisfaction and intent to leave. Addressing [nurse burnout](#) will require targeted investments to community clinics and [primary care](#) practices serving patients from historically marginalized communities.

More information: Jacqueline Nikpour et al, Characteristics, work environments, and rates of burnout and job dissatisfaction among registered nurses in primary care, *Nursing Outlook* (2023). [DOI: 10.1016/j.outlook.2023.101988](#)

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