

# **STRIKING THE RIGHT BALANCE: PERSONAL AND PROFESSIONAL FACTORS ASSOCIATED WITH WORK-LIFE BALANCE AMONG PHYSICIAN ASSISTANTS/ASSOCIATES (PAs)**

Mirela Bruza-Augatis, PhD, MS, PA-C

Andrzej Kozikowski, PhD

Kasey Puckett, MPH

Colette Jeffery, MA

Dawn Morton-Rias, EdD, PA-C, ICE-CCP, FACHE

Alicia Quella, PhD, PA-C

Sheila Mauldin, MNM, ICE-CCP,

Joshua Goodman, PhD

# Learning Objectives

- At the conclusion of this session, participants should be able to:
  - Describe and quantify the characteristics of PAs who report being satisfied with their work-life balance, including demographics and practice characteristics
  - Identify independent factors strongly associated with PA workforce work-life balance

# Agenda

- Background
- Brief Review of Literature
- Purpose of the Study
- Methodology
- Results
- Conclusions
- Q&A

# Background

Work-life balance (WLB) is pivotal in determining career satisfaction and averting burnout<sup>1,2</sup>

There is an increased awareness that the medical profession needs to respond more to the work-life balance concerns than other healthcare workers<sup>3</sup>

Despite its importance, there is a lack of comprehensive studies on this topic among PAs



1. Shanafelt TD, Boone S, Tan L, et al. Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Arch Intern Med.* 2012;172(18):1377-1385. doi:10.1001/archinternmed.2012.3199
2. Dyrbye LN, West CP, Halasy M, O'Laughlin DJ, Satele D, Shanafelt T. Burnout and satisfaction with work-life integration among PAs relative to other workers. *J Am Acad Physician Assist.* 2020;33(5):35-44. doi:10.1097/01.JAA.0000660156.17502.e6
3. Pattnaik T, Samanta SR, Mohanty J. Work-Life Balance of Health Care Workers in the New Normal: A Review of Literature. *J Med Chem Sci.* 2022;5(1):42-54. doi:10.26655/JMCHMSCI.2022.1.6.

## Keeton et al. (2007)

- **Predictors of physician career satisfaction, work-life balance, and burnout (n=935, response rate: 48%)**
  - “Physician gender, age, and specialty were not strong independent predictors of career satisfaction, work-life balance, or burnout”
  - “The strongest predictor of work-life balance and burnout was having **some control over schedule and hours worked**”

## Shanafelt et al. (2012)

- **Burnout and satisfaction with work-life balance among US physicians relative to the general US population (n=7,288, response rate: 26.7%)**
  - “Compared with a probability-based sample of working US adults, **physicians were more likely to [be] .....dissatisfied with work-life balance** (40.2% vs 23.2%;  $p<0.001$ )”

## Dyrbye et al. (2020)

- **Burnout and satisfaction with work-life integration among PAs relative to other workers (n=600, response rate: 29.5%)**
  - “...41.4% of PAs had burnout symptoms, and 65.3% were satisfied with their work-life integration”
  - “**PAs who were not satisfied with their work-life integration were nearly threefold more likely to have burnout**”

## Bodendieck et al. (2022)

- **The work-life balance of general practitioners as a predictor of burnout and motivation to stay in the profession (n=188, response rate: 13.3%)**
  - “positive correlation between GPs’ WLB and all dimensions of burnout as well as physicians’ motivation to stay in the profession”

# BRIEF REVIEW OF LITERATURE

# Purpose of the Study

- The purpose of this study is to investigate various aspects that may be associated with work-life balance (WLB), including demographics, practice characteristics, and other potential factors among PAs

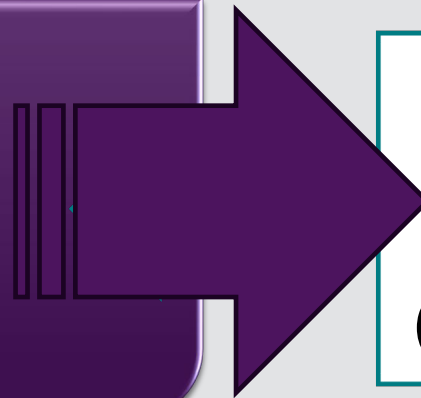
# Methodology

- Cross-sectional quantitative study
- **Data Source:** 2023 NCCPA's PA professional profile dataset
- **Sample**
  - 149,909 board certified PAs updated, reviewed, or completed their profile
  - 86,000 PAs responded to the work-life balance question
  - Response rate: 57.4%
- **Analysis:** descriptive and bivariate statistics and multivariate logistic regression



# PRIMARY OUTCOME VARIABLE

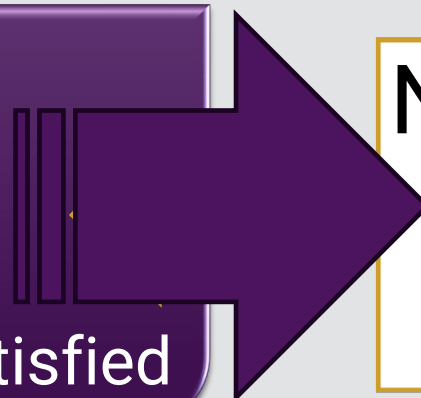
Completely Satisfied  
Mostly Satisfied  
Somewhat Satisfied



**Satisfied  
with WLB**  
(n=61,642; 71.7%)

VS.

Completely Dissatisfied  
Mostly Dissatisfied  
Somewhat Dissatisfied  
Neither Dissatisfied nor Satisfied



**Not Satisfied  
with WLB**  
(n=24,358; 28.3%)



# ANALYTICAL PLAN

## Predictors

<b>Demographics</b> (gender, age, race, ethnicity, highest degree completed)	<b>Educational debt</b> (none, <\$ 49,999, \$50,000-\$ 99,999, .. \$200,000+, etc.)	<b>Practice geographic setting</b> (urban, rural/isolated)	<b>Region</b> (Northeast, Midwest, South, West)	<b>Primary specialty</b> (primary care, hospital, emergency medicine, etc.)	<b>Practice setting</b> (hospital, office-based, etc.)	<b>Patients seen weekly</b> (<40, 41-60, 61-80, 81-100, 101+)	<b>Hours worked weekly</b> (<30, 31-40, 41-50, 51+)	<b>Secondary position</b> (no; yes, but nonclinical; yes, 2 or more clinical roles)
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## Logistic Regression Model

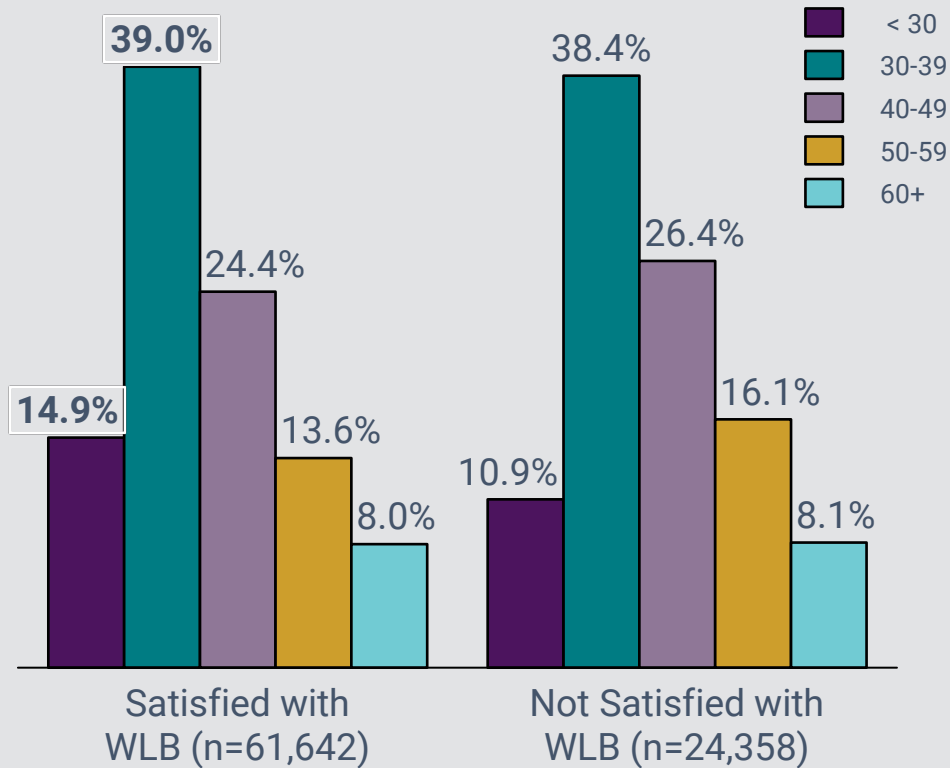


## Satisfied vs. Not Satisfied with Work-Life Balance

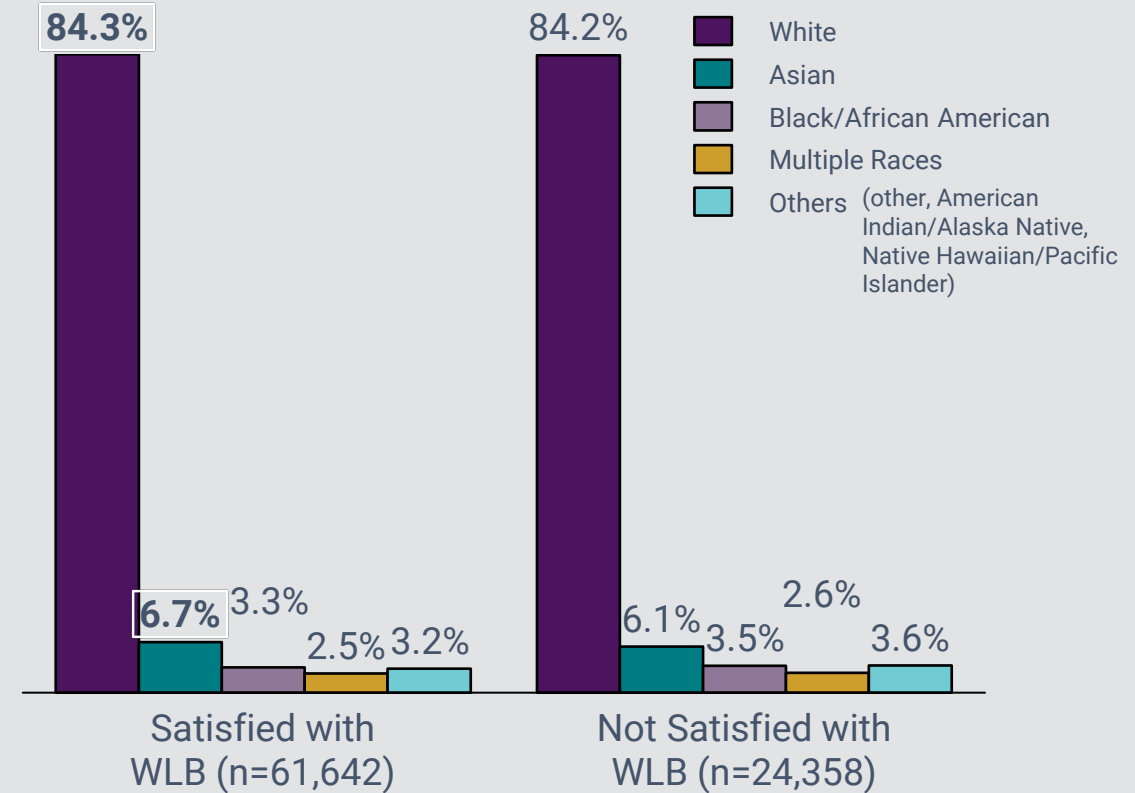
# BIVARIATE RESULTS:

## PAs SATISFIED WITH WORK-LIFE BALANCE VS. PAs NOT SATISFIED WITH WORK-LIFE BALANCE BY DEMOGRAPHIC CHARACTERISTICS

Age groups (p<0.001)



Race groups (p<0.001)



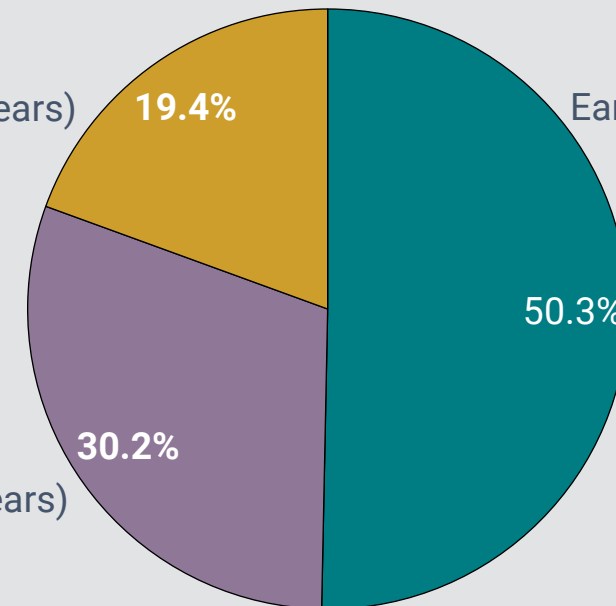
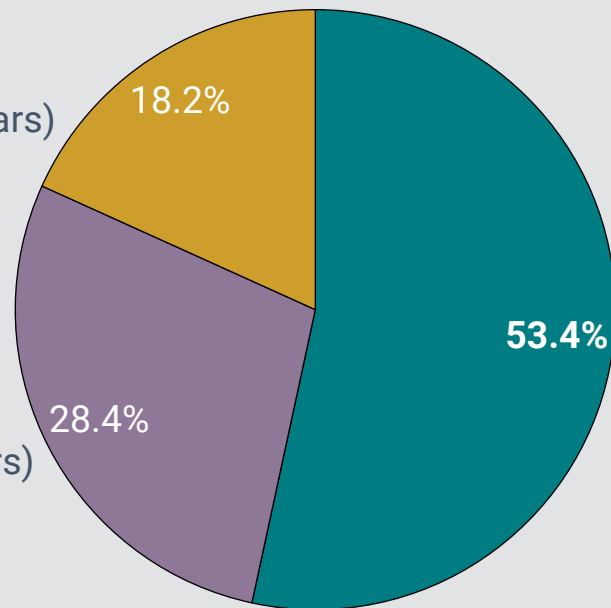
✓ Among the highest rates of satisfaction with WLB were observed for PAs less than 30 years of age (14.9%), those identifying as White (84.3%), and Asian (6.7%) groups

# BIVARIATE RESULTS: CAREER STAGES/YEARS CERTIFIED AS A PA

PAs Satisfied with WLB vs. PAs Not Satisfied with WLB by Career Stages/Years Certified (p<0.001)

Satisfied with WLB (n=61,642)

Not Satisfied with WLB (n=24,358)



- ✓ 53.4% of PAs in the early stage of their career are satisfied with WLB
- ✓ While a higher proportion of PAs in mid-career (30.2%) and late-career stages (19.4%) reported not being satisfied with WLB

# BIVARIATE RESULTS:

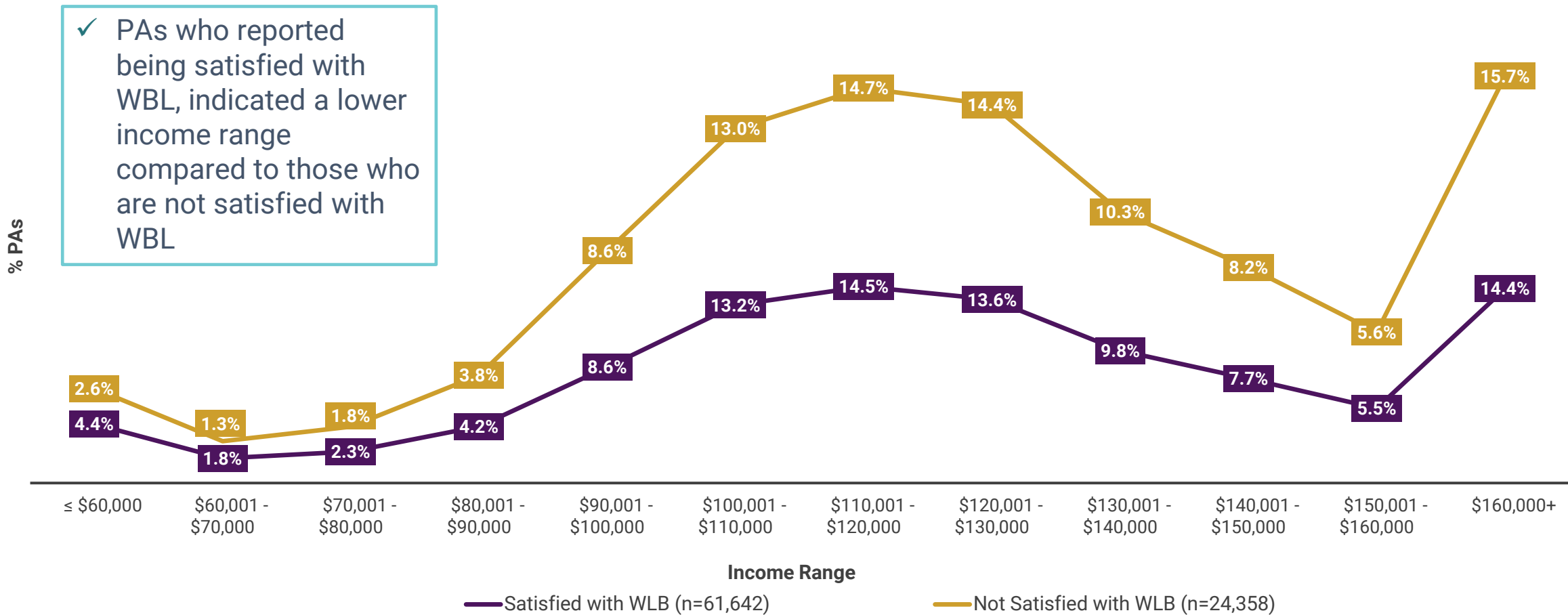
## PAs Satisfied with WLB vs. PAs Not Satisfied with WLB by Practice Characteristics

Current practice area	Satisfied with WLB (n=61,642)	Not Satisfied with WLB (n=24,358)	P-value
Primary care	21.5%	<b>25.9%</b>	<0.001
Surgery - Subspecialties	17.6%	18.5%	
Internal Medicine - Subspecialties	<b>9.9%</b>	9.7%	
Emergency Medicine	9.6%	<b>11.8%</b>	
Dermatology	<b>4.9%</b>	3.0%	
Hospital Medicine	<b>3.6%</b>	3.2%	
Surgery - General	<b>3.1%</b>	2.6%	
Psychiatry	<b>2.6%</b>	2.4%	
Critical Care Medicine	<b>2.1%</b>	1.8%	
Pain Medicine	<b>1.6%</b>	1.2%	
Other	23.5%	19.7%	
Primary practice setting/location			
Hospital	40.4%	41.0%	<0.001
Office-Based Private Practice	<b>37.4%</b>	36.3%	
Urgent Care	<b>6.3%</b>	5.9%	
Community Health Center (FQHC)	2.6%	<b>3.5%</b>	
Federal Government	4.6%	<b>4.8%</b>	
Rural Health Clinic (Federally Certified)	1.4%	<b>1.7%</b>	
Other	7.4%	6.9%	

\*Primary Care includes Family Medicine, Internal Medicine - General, and Pediatrics - General

# PA's SATISFIED WITH WLB VS. PA'S NOT SATISFIED WITH WLB BY INCOME RANGE (P<0.001)

✓ PA's who reported being satisfied with WBL, indicated a lower income range compared to those who are not satisfied with WBL

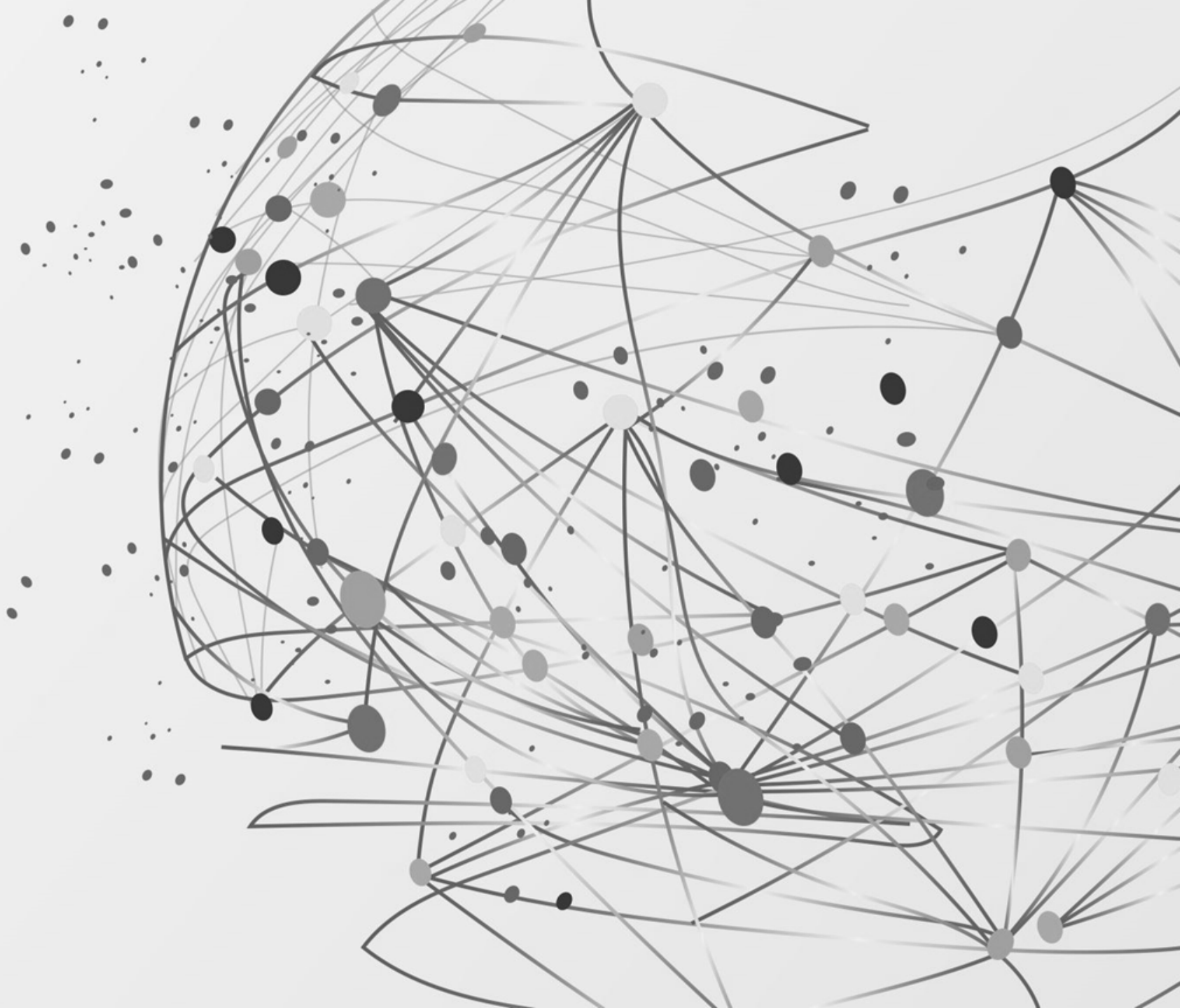


# Satisfaction with Position Attributes and Career (all $p < 0.001$ )

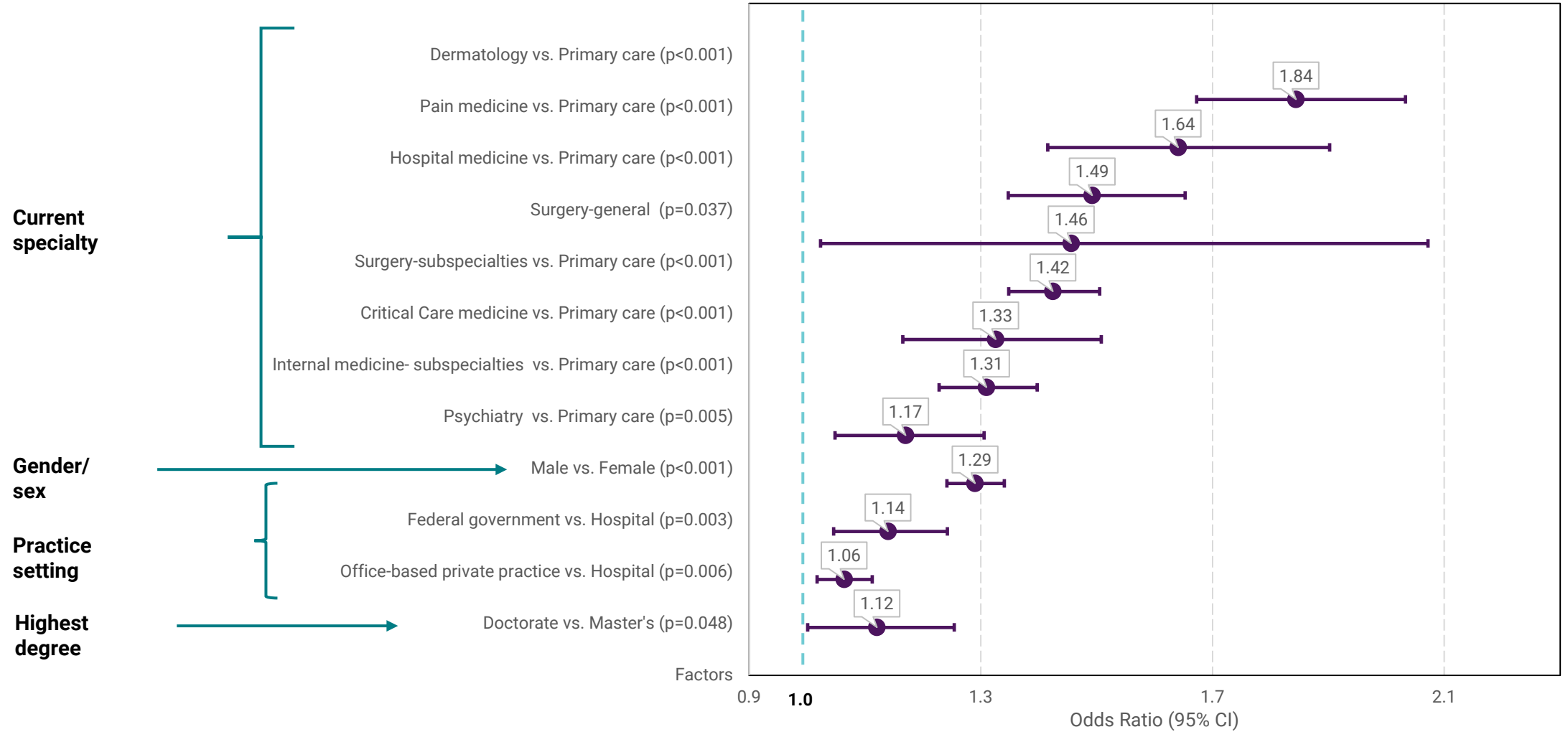
- ❖ When examining various aspects of job satisfaction, PAs who reported satisfaction with WLB were more likely to be satisfied with their present job, career as a PA, number of hours worked, income, benefits at work, and their employer

Satisfaction with:	Satisfied with WLB (n=61,642)	Not Satisfied with WLB (n=24,358)
<b>Present job</b>		
Satisfied	93.1%	56.2%
Not Satisfied	6.9%	43.8%
<b>Career as a PA</b>		
Satisfied	95.5%	64.3%
Not Satisfied	4.5%	35.7%
<b>Number of hours</b>		
Satisfied	97.0%	28.2%
Not Satisfied	3.0%	71.8%
<b>Income</b>		
Satisfied	87.4%	44.7%
Not Satisfied	12.6%	55.3%
<b>Benefits</b>		
Satisfied	82.3%	49.0%
Not Satisfied	17.7%	51.0%
<b>Geographical location of principal position</b>		
Satisfied	90.9%	61.3%
Not Satisfied	9.1%	38.7%
<b>Employer</b>		
Satisfied	86.6%	43.7%
Not Satisfied	13.4%	56.3%

# MULTIVARIATE LOGITS REGRESSION

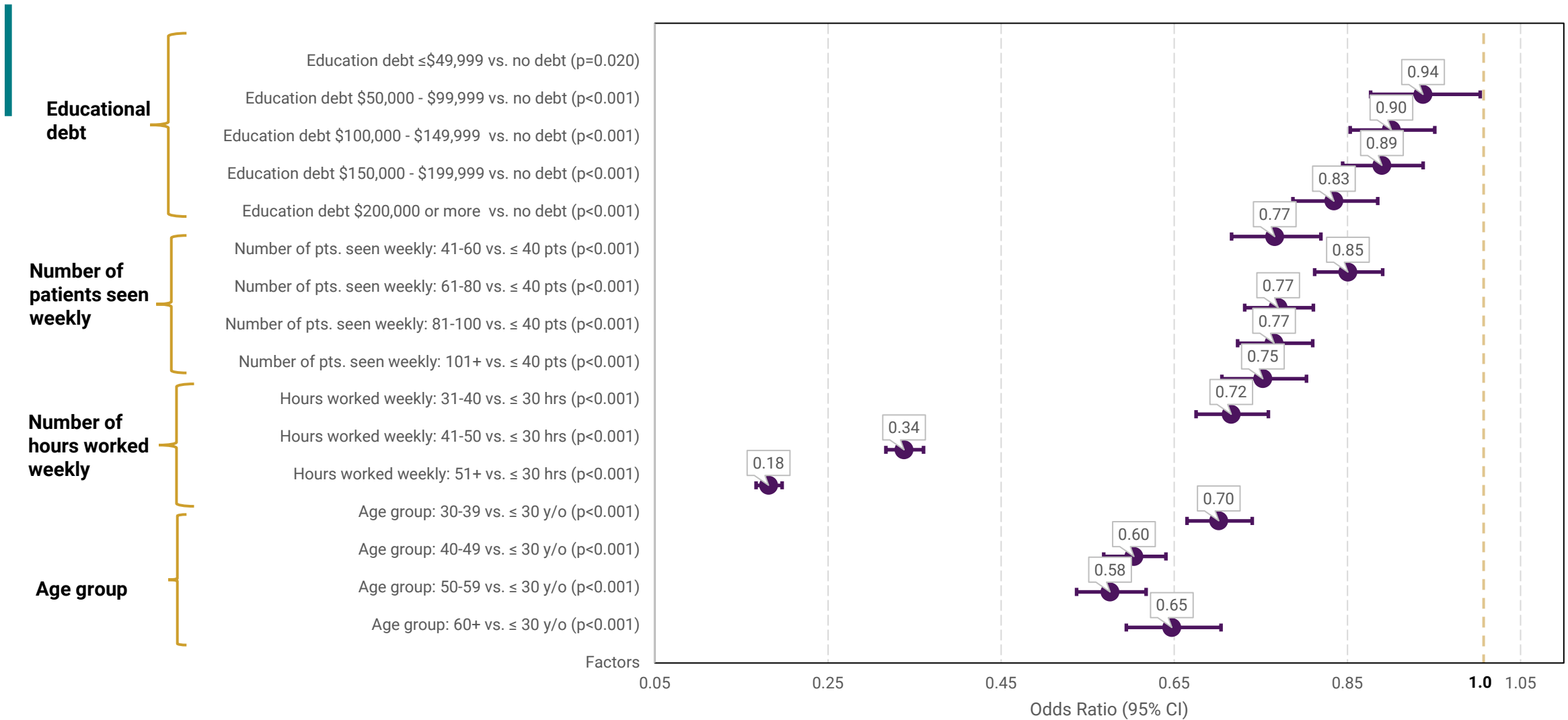


# Multivariate Logistic Regression Results: Significant Predictors Associated with Increased Odds of Satisfaction with WLB Among PAs

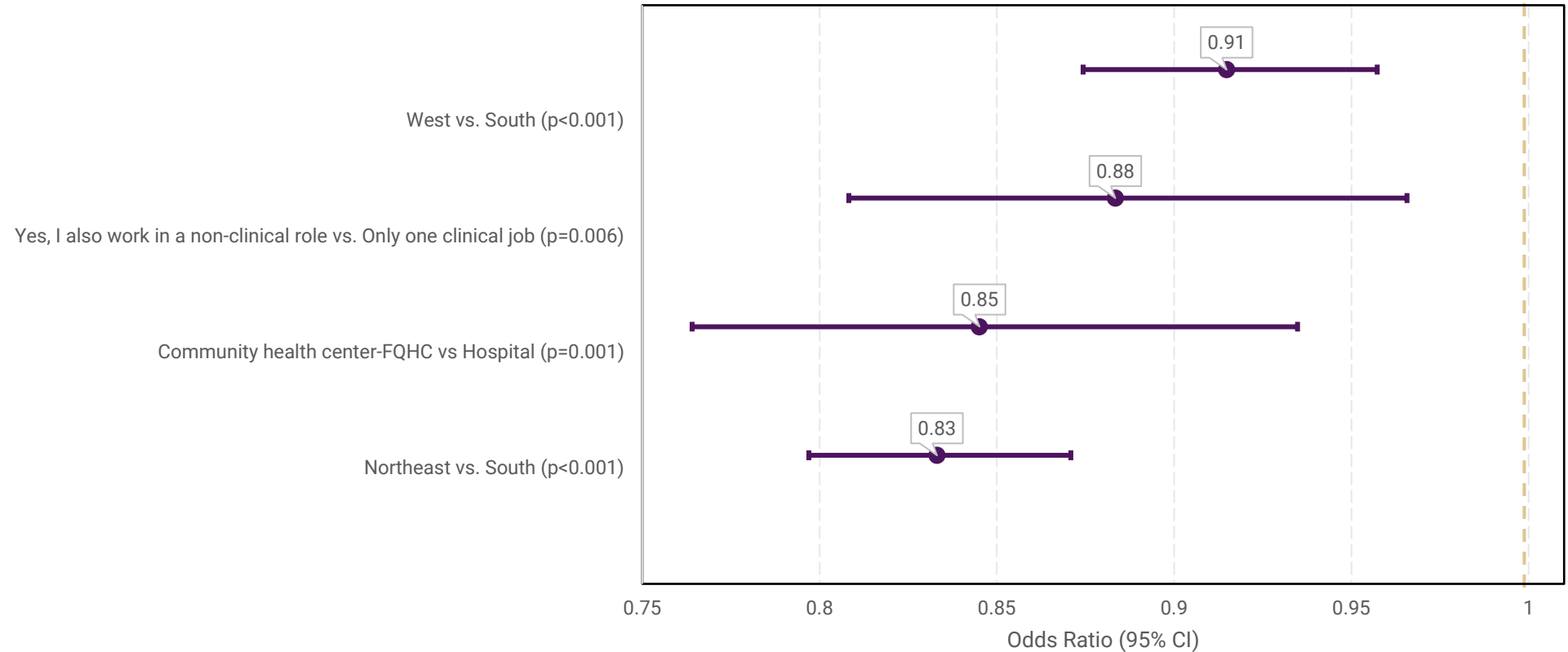




# Multivariate Logistic Regression Results: Significant Predictors Associated with Decreased Odds of Satisfaction with WLB Among PAs



# Multivariate Regression Results: Significant Predictors Associated with Decreased Odds of Satisfaction with WLB Among PAs



*Urban/rural setting and race/ethnicity groups were not statistically significant*

# Limitations

- Cross-sectional nature of the study
- Self-report measures, which are susceptible to response bias
- Transformation of the outcome variable – dichotomized into 2 categories
- Unmeasured variables: social factors, family dynamics/norms, financial status, and number of children

# KEY FINDINGS

❖ **72% of PAs reported being satisfied with WLB vs. 28% of PAs who were not.**

Non-primary care specialties were the strongest factors associated with increased odds of WLB satisfaction

- Dermatology (84% higher odds vs. primary care)
- Pain med. (64% higher odds vs. primary care)
- Hospital med. (49% higher odds vs. primary care)

Lower odds of being satisfied with WLB were observed with any education debt, seeing more than 40 patients weekly, or working over 40 hours a week

WLB satisfaction by gender

- Men (vs. women) had nearly 30% higher odds of being satisfied with WLB

Satisfaction with WLB was not statistically significant among PAs from different race/ethnicity groups and urban/rural settings

## Conclusions

- ✓ Provider satisfaction and quality of patient care go hand-in-hand
- ✓ WLB is not a problem to solve but rather a chronic issue to be managed
- ✓ Intervention focusing on WLB – greater flexibility and predictability of PAs' schedule (re-thinking practice models), shorter week schedule, and job sharing (Pattnaik et al., 2022)
- ✓ Institutional policies and interventions should foster components of employee engagement, work satisfaction, and effective organizational commitment that are focused on mitigating stressors (Pattnaik et al., 2022)
- ✓ Qualitative studies focusing on understanding gender family norms among PAs

# References

1. Shanafelt TD, Boone S, Tan L, et al. Burnout and satisfaction with work-life balance among US physicians relative to the general US population. *Arch Intern Med*. 2012;172(18):1377-1385. doi:10.1001/archinternmed.2012.3199
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3. Essary AC, Bernard KS, Coplan B, et al. Burnout and Job and Career Satisfaction in the Physician Assistant Profession: A Review of the Literature. *NAM Perspect*. Published online 2018. doi:10.31478/201812b
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5. National Commission on Certification of Physician Assistants. *2022 Statistical Profile of Board Certified PAs, Annual Report*. December 18, 2023; 2023. [www.nccpa.net/resources/nccpa-research/](http://www.nccpa.net/resources/nccpa-research/)



**THANK YOU!**

For more information, please contact, Mirela Bruza ([mirelab@nccpa.net](mailto:mirelab@nccpa.net))