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Psychological Safety and its Relationship with Clinician Well-Being Among Advanced Practitioners in Oncology

Abstract: Advanced practice providers (APPs) have helped to bridge the gap to meet the demand of patient oncology needs; however, APPs remain at a higher risk of developing clinician distress. To address a “system in crisis,” particularly during the COVID-19 pandemic, teamwork and effective team functioning may be a necessary solution...

Full Abstract: Advanced practice providers (APPs) have helped to bridge the gap to meet the demand of patient oncology needs; however, APPs remain at a higher risk of developing clinician distress. To address a “system in crisis,” particularly during the COVID-19 pandemic, teamwork and effective team functioning may be a necessary solution. Psychological safety (PS) may be a contributing factor that affects team engagement in health care. Studies among PAs in oncology have demonstrated that high burnout rates could be associated with team leadership factors. Among APPs in oncology, the question remains whether PS correlates with clinician well-being (WB), including the risk of distress and adverse work-related outcomes. Purpose: This study examined the professional characteristics and team leadership factors that may contribute to PS among oncology APPs and determine whether PS was related to clinician well-being (WB). Methods: A national, cross-sectional survey of oncology APPs from two leading oncology APP professional societies was completed during a 60-day study period in the setting of the COVID-19 pandemic. Descriptive statistics were obtained, followed by a series of bivariate tests to identify which demographic, professional, and team-leadership variables were significantly related to PS and clinician WB. All explanatory variables that demonstrated a statistically significant relationship were included in multivariate analysis using multiple linear regression models. Results: The study consisted of 84 oncology APPs, and 28.6% (n = 24) reported WBI scores within the high-risk group of distress. On final multivariate analysis, high PS scores were associated with high leader inclusiveness and leader-member exchange scores, and low PS scores were related to those within the high-risk group of distress. Conclusion: APPs play a crucial role in providing high-quality patient care, but they remain at increased risk of developing clinician distress. Team-leadership factors may contribute to low PS, which may also be associated with lower well-being.