

# Reducing Clinician Burnout through Servant Leadership and Organizational Behavior Management

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## Introduction

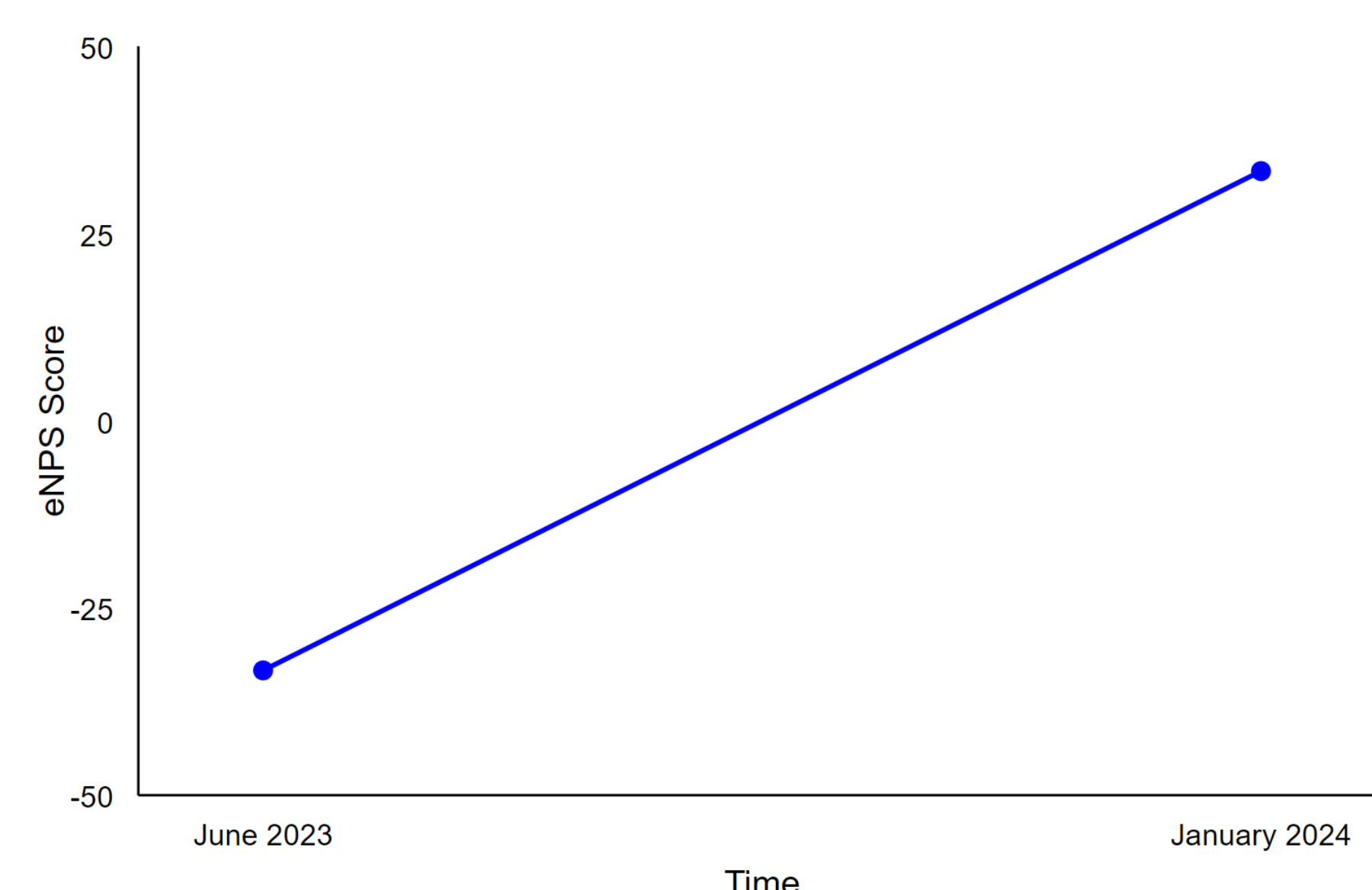
- A common challenge we face in ABA is increasing job satisfaction while pushing for high clinical balance with responsibility to employers.
- Organizational culture aligned with key performance indicators is critical for quality service delivery (Silbaugh & El Fattal, 2021).
- Part of ensuring high clinical quality services and positive client experience is meeting clinical productivity metrics.
- This study set out to increase clinical productivity metrics while maintaining work life balance for staff members by implementing servant leadership.

## Methodology

- **Participants**
  - Director of Clinical Services
  - Area Director of Clinician Development
  - Ten Supervising Clinicians
  - Seven Directors of Clinician Development
  - 70 Behavior Analytic Trainees
- **Setting:**
  - Early Intervention clinic setting in Arizona
- **Measures:**
  - Independent variables
    - Servant leadership framework with 5 principles
  - Dependent variables
    - Employee Net Promoter Score (eNPS)
    - Clients meeting minimum standard of supervision and family engagement
    - Average learning opportunities per hour across the clinic
    - Percent of clinician productivity achieved
    - Clinician turnover
    - Leadership turnover (senior clinician or Director of Clinical Services)
- **Procedures:**
  - **Baseline:**
    - Data was collected using Care Connect and Power Bi across one month for clients meeting minimum standard of supervision and family engagement, average learning opportunity, and clinician productivity
  - **Intervention:**
    - A framework with the principles of Organizational Behavior Management (OBM) and Servant Leadership was implemented across 12 months
      - Building relationships: A foundation of trust was built by dedicating time to focus on personal and professional rapport with everyone on the team.
      - Providing clarity surrounding expectations and goals: Discussions occurred surrounding what expectations were, how they were to be met, and why they were important.
      - Align personal values to the goals created: The director spent time providing additional information on how each goal was tied to a better client and employee experience and aligned with clinicians' personal values.
      - Visibility creates success: Team members were trained on self-monitoring of progress towards each goal and review progress on individual and group goals weekly through Care Connect and Power BI.
      - Review, Reflect, Revise: Intentional reflection practices were implemented to make modifications, maintenance of goals met, or other interventions needed.

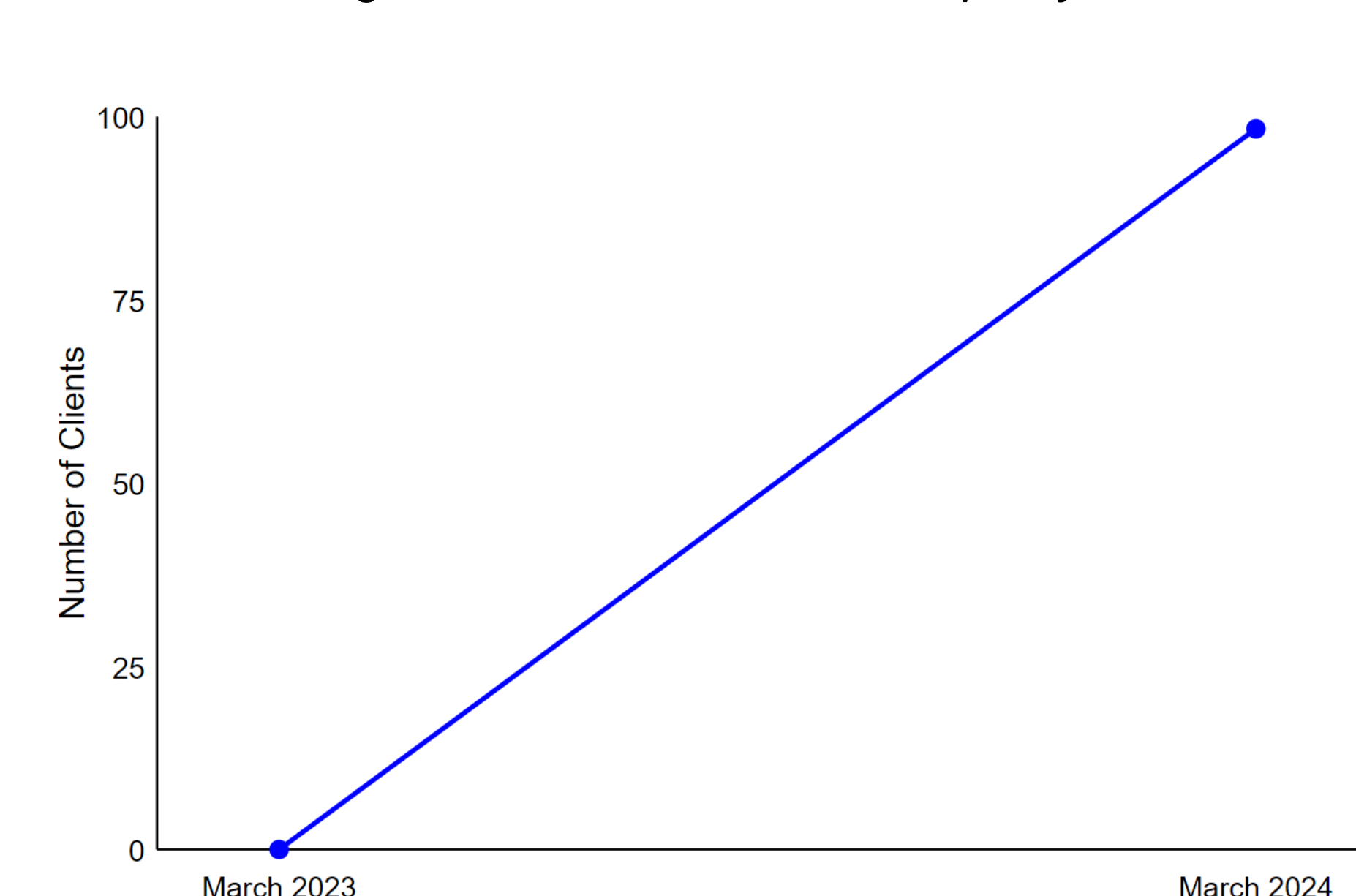
## Results

**Figure 1**  
Employee Net Promoter Score



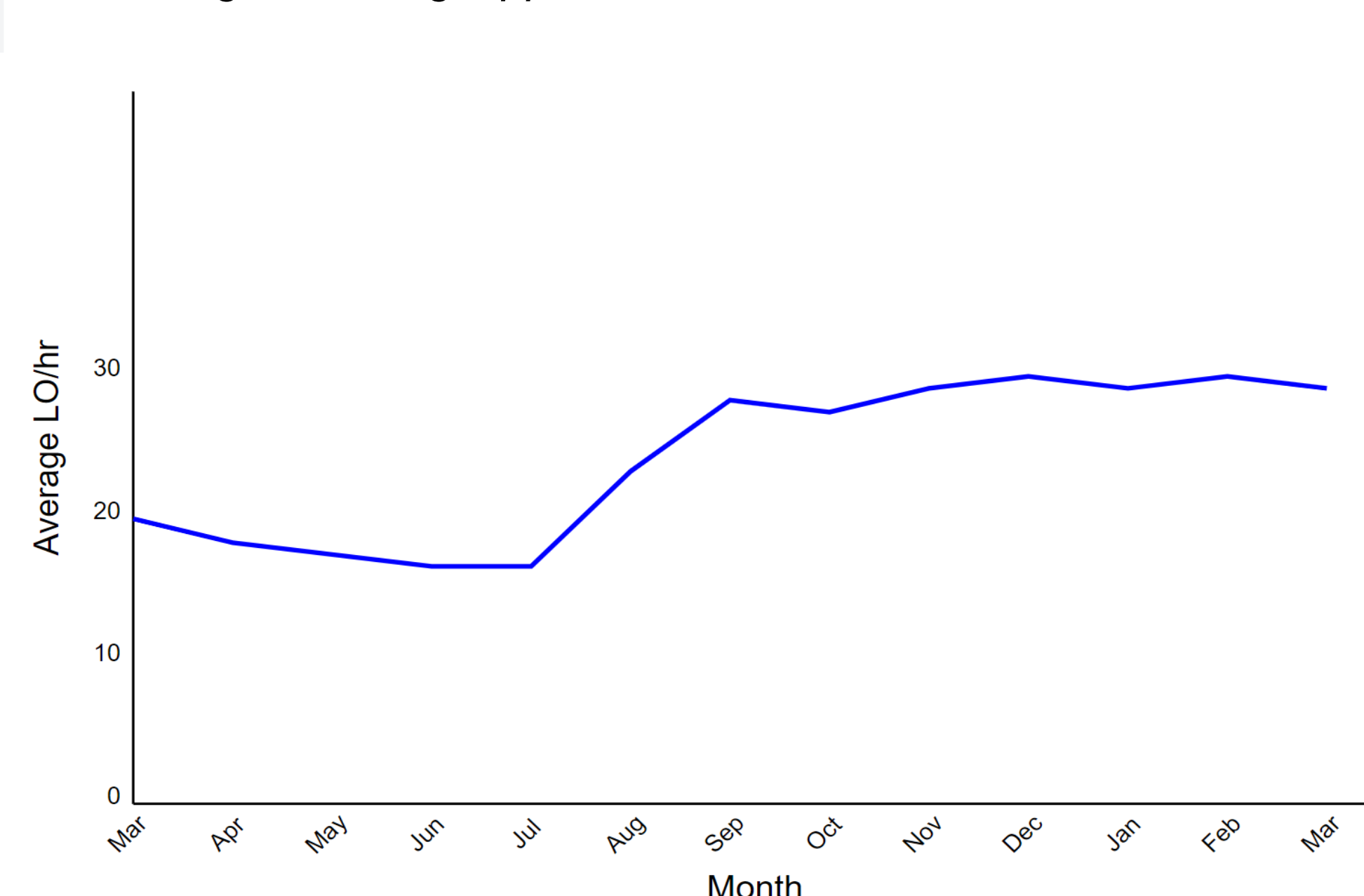
Note. Figure one shows the Employee Net Promoter Scores (eNP scores) from Jan 2023 to Jan 2024.

**Figure 2**  
Clients receiving minimum standard clinical quality metrics



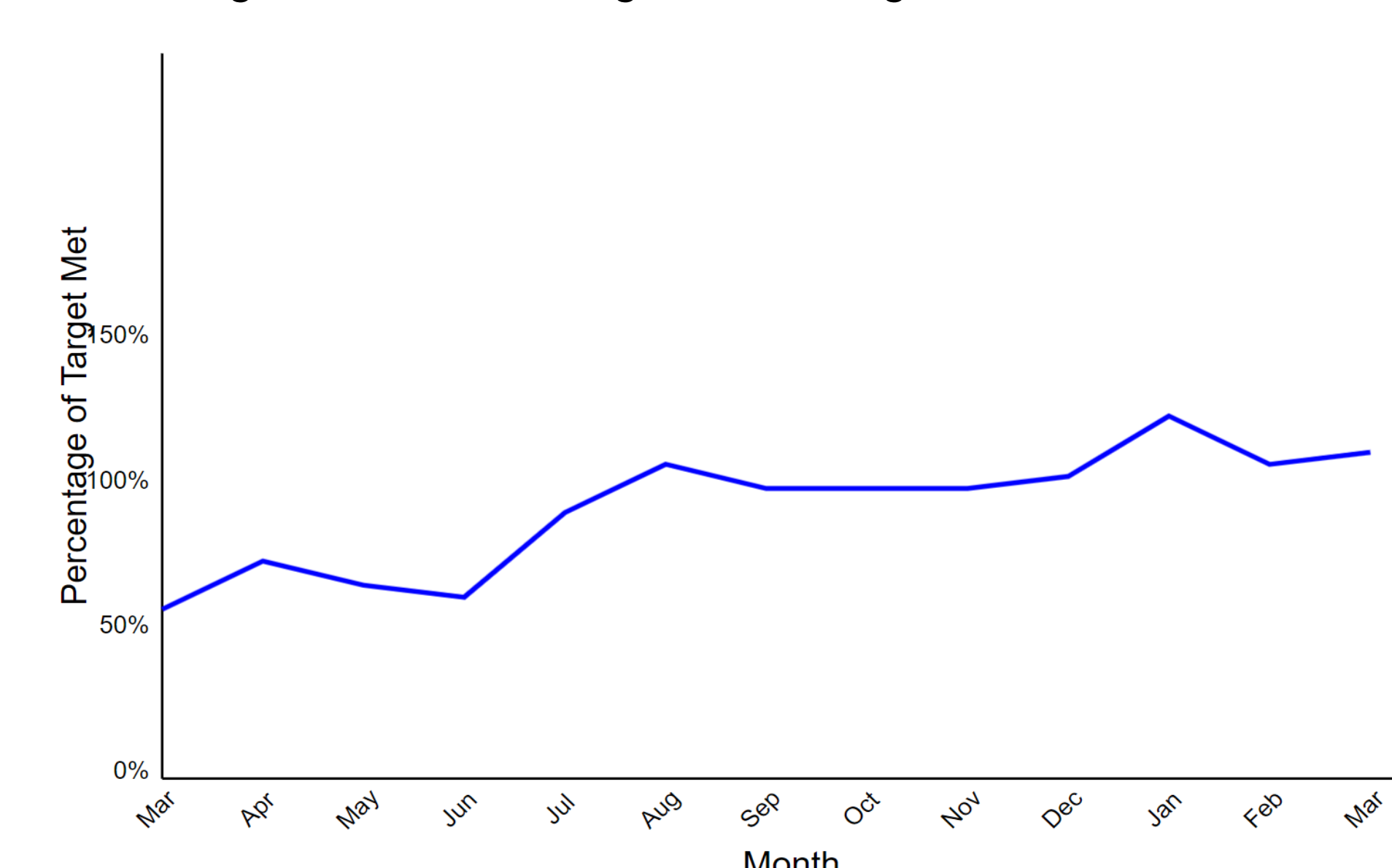
Note. Figure two the number of clients receiving clinical quality metrics from March 202 to March 2024.

**Figure 3**  
Average Learning Opportunities Per Hour



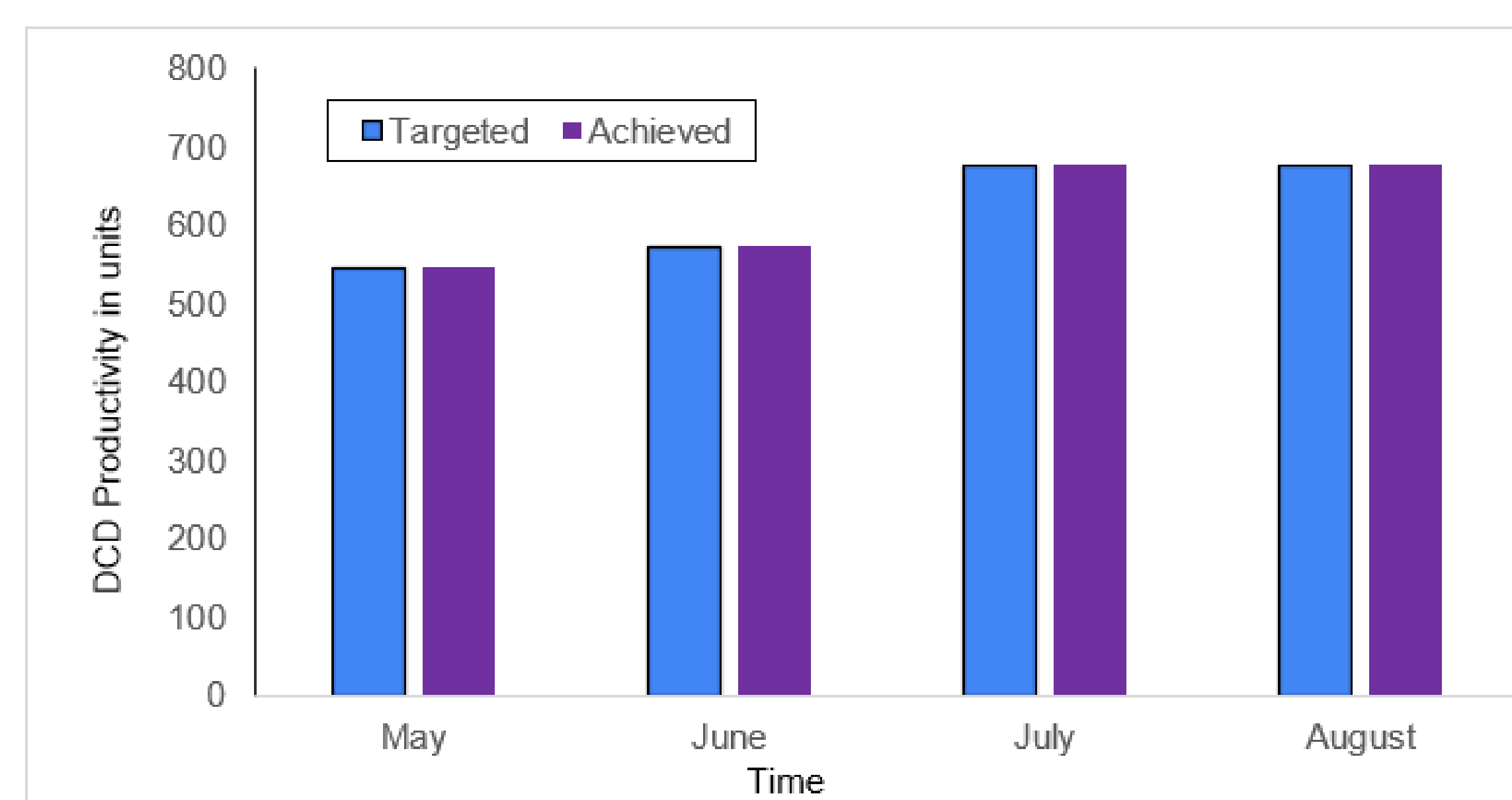
Note. Figure three shows the average number of learning opportunities per hour across March 2023 to March 2024.

**Figure 4**  
Percentage of Team Meeting Billable Targets



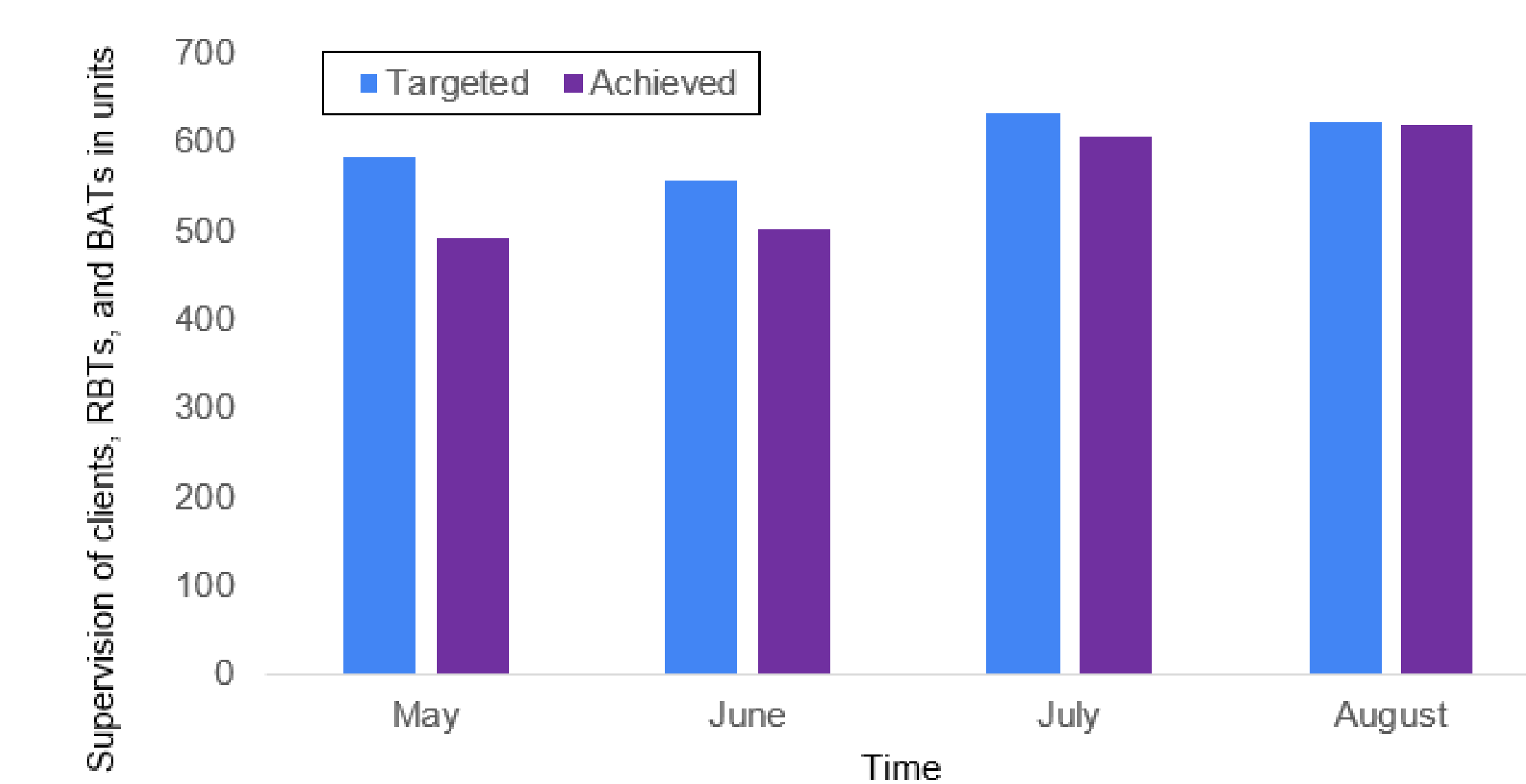
Note. Figure four shows the percentage of individuals meeting billable targets each month from March 2023 to March 2024.

**Figure 5**  
Percent of team productivity for Department of Clinician Development.



Note. Figure five represents the percent of billable hours met by the overall clinician development team.

**Figure 6**  
Arizona supervision goals met for all clients, behavior analytic trainees, and technicians



Note. Figure 6 represents overall supervision completed by a licensed behavior analyst across clients, behavior analytic trainees, and registered behavior technicians from May to August of 2024.

## Discussion

- The results of the intervention demonstrated a positive impact across staff retention, employee satisfaction, client satisfaction, clinician productivity, and clinical quality metrics.
- Clinician turnover reduced from 3 clinicians in 6 months to 1 clinician across 8 months
- Clinical director and senior clinician turnover decreased significantly. Previously, three directors had left within an 18-month period. After implementing changes, turnover dropped to zero. Moreover, the director of clinical services got promoted to area level director of clinician development.
- Clinician productivity increased from an average of 71% of the total billable target to consistently exceeding 100%. This remarkable growth culminated in a peak performance of 131% of the total billable target in January 2024.
- Clinical quality metrics, including a minimum of 10% supervision and 1 hour of parent engagement, improved from a baseline of 2% of clients receiving the minimum clinical quality standards to 98% of clients receiving at least the minimum clinical quality standards.
- When the framework was applied to a team of Directors of Clinical Development, similar trends in data occurred.
- Director productivity increased from achieving 84.47% of the team's billable target to 95.35% of the billable target in just three months of intervention.
- DCD goals included all behavior analytic trainees receiving their BACB requirements for fieldwork supervision, Registered Behavior Technicians receiving board-required supervision requirements, clients receiving contacts by a Licensed Behavior Analyst, and accurate documentation being submitted by the LBA and each BAT/RBT. The data display an increase of compliance across all targets from 84.47% to 99.52%
- **Limitations:**
  - A notable limitation of this study was that data impacted due to attrition of clinicians during baseline and intervention period. Several clinicians resigned from their position, which could have impacted consistency in trend of the data.
  - Lack of access to data for family satisfaction surveys for pre and post intervention. Data from family satisfaction surveys would have given more insight into the impact the intervention had on the client experience.
  - Documentation fidelity at month-end likely underestimated actual performance due to notes submitted after the reporting cutoff date.
  - Accuracy of documentation due to the tedious nature of cross-checking fieldwork trackers compared to Care Connect, to collect interobserver agreement.
- **Future Research:**
  - Generalizing this intervention across behavior technicians to increase retention and improvement of overall clinical performance.
  - Implementation of servant leadership and organizational behavior management (OBM) with the operation team.

## Implications

- These findings could restructure business approaches to employee performance by focusing on relationships between leaders and staff, placing a strong emphasis on clarity of goals (including what the goals are, why they are important, and how to achieve them), increasing autonomy of employees to track their own performance data, and implementation of reflective practices.
- Post-intervention analysis should be a catalyst to process modification when intervention data shows stagnation or regression of employee performance.