



IOC RESEARCH DOSE

Institute of Coaching
McLean Hospital, a Harvard Medical School Affiliate



Heal Thyself With Coaching

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Introduction

While physicians invest most of their days in caring for patients, there is much room for improvement in the care of physicians in today's healthcare climate. Symptoms of burnout are nearly twice as common among physicians as other US workers. There is much to be done to improve the work environment and processes that damage physician well-being.

In today's research dose, we feature a new Mayo Clinic study which shows that professional coaching of physicians is a potentially effective intervention to improve physician well-being. The authors report that physicians who completed six private sessions with a professional coach showed significant decreases in emotional exhaustion and overall burnout, in addition to increases in quality of life and resilience. These results offer

hope for physicians—as well as a new avenue of meaningful work for coaches.

Clinical Study of Coaching for Physician Burnout

Mayo Clinic physicians in Minnesota, Florida, Arizona, and Wisconsin with five to 30 years in practice volunteered to take part in a randomized clinical study of a coaching intervention. The 48 female and 40 male physician volunteers were split into two groups: an intervention group and a control group.

The coaching (telephone) involved a one-hour initial session, followed by five 30-minute sessions every two or three weeks within five months. The control group received no coaching intervention until after the end of the study when they were offered six coaching sessions over the following five months. Coaches were external, provided by Bluepoint Leadership Development, an established firm with experience coaching physicians as well as other leaders. The coaching cost was approximately \$1400 per physician.

The study used pre and post coaching surveys of participants to track measures of distress, well-being, career satisfaction and meaning in work, including the Maslach Burnout Inventory, the Global Job Satisfaction subscale of the Physician Job Satisfaction Scale, the Utrecht Work Engagement Scale, the Connor-Davidson Resilience Scale, an Empowerment at Work Scale, and a single-item linear analog scale to measure quality of life.

Coaching Results in Significant Reduction in Burnout

At the end of five months of coaching, high emotional exhaustion decreased by 19.5 percent in the intervention group and increased by 9.8 in the control group. Symptoms of burnout decreased by 17.1 percent in the intervention group compared to an increase of 4.9 percent in the control group. These results are higher than reported for other interventions. Improvements were also seen in overall quality of life and resilience. No improvements in job satisfaction, engagement and meaning at work were reported.

Coaching also provided other benefits - an ethical code of confidentiality, and the ability to explore personal needs, values, and goals outside the regular hierarchy. Physicians focused on themes outside work including

work/life balance, pursuing hobbies and recreation, engaging in self-care, increasing social support and community at work, and strengthening personal relationships. Work-related coaching themes included workload, improving efficiency, building social support and community at work, and developing leadership skills.

Coaching joins mentorship and formal peer support programs as interventions to reduce physician burnout. As with the other interventions, coaching has been linked to improvement in some aspects of well-being but not all. Another randomized study evaluating group support on preselected topics showed improvements in meaning and engagement at work. Ideally, healthcare organizations will address physician burnout with both individual interventions and organizational initiatives to improve work autonomy and meaning.

While the results are encouraging, the authors note study limitations:

1. Small sample size
2. Single organization (although multiple sites) and single source of coaches
3. No assessment of longer term results

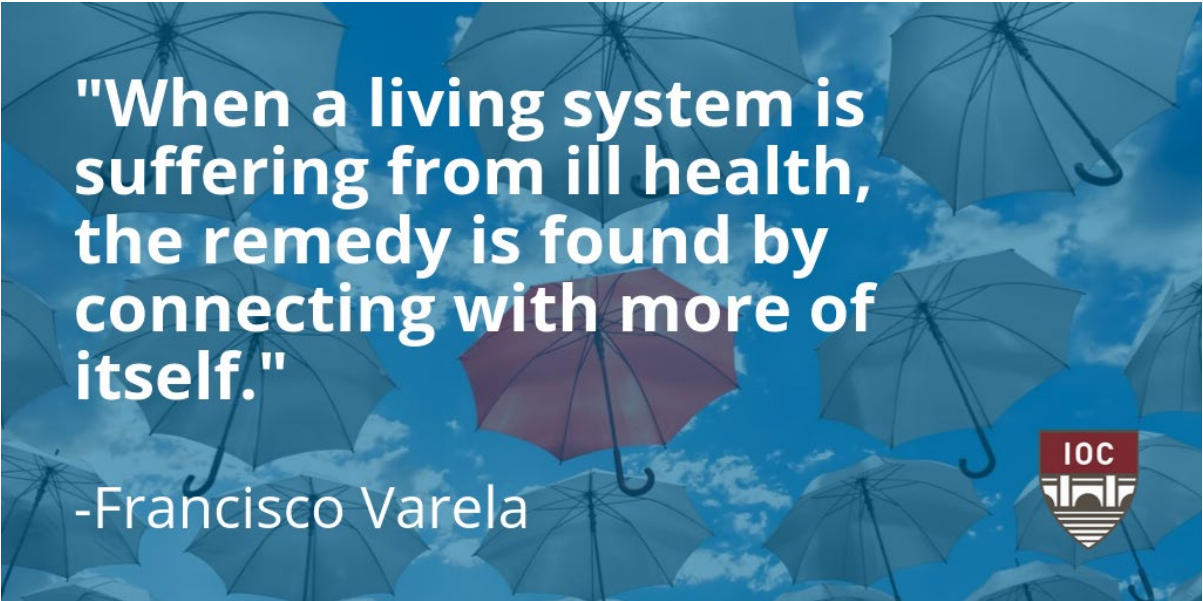
Further studies to continue this research could investigate a variety of coaching protocols - longer durations or repeats of coaching programs, group coaching, and combinations of individual, group, and peer coaching, along with pursuing both individual and organization-focused approaches.

Takeaways for Coaches

1. Brief external professional coaching over five months, six sessions totaling 3.5 hours, can improve physician well-being significantly.
2. Coaching physicians is a good complement to physician mentoring and peer support programs to support well-being and professional development.
3. Coaching is an attractive intervention to support professionals everywhere who are experiencing symptoms of burnout.

The last word?

Given that all of us are patients of physicians at one time or another, let's do everything we can to help physicians get the support and connections they need to take good care of us when we need them.



"When a living system is suffering from ill health, the remedy is found by connecting with more of itself."

-Francisco Varela



From the IOC Team

Coaching with science in mind

Featured Article

Dyrbye, Shanfelt, Gill, Satele, West. (2019) Effect of a Professional Coaching Intervention on the Well-being and Distress of Physicians. A Pilot Randomized Clinical Trial. *JAMA Internal Medicine*.

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<https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2740206>
