IN THE TRENCHES: COACHING PHYSICIANS ON BURNOUT

Steve Adelman, MD– Physician Health Services, Massachusetts
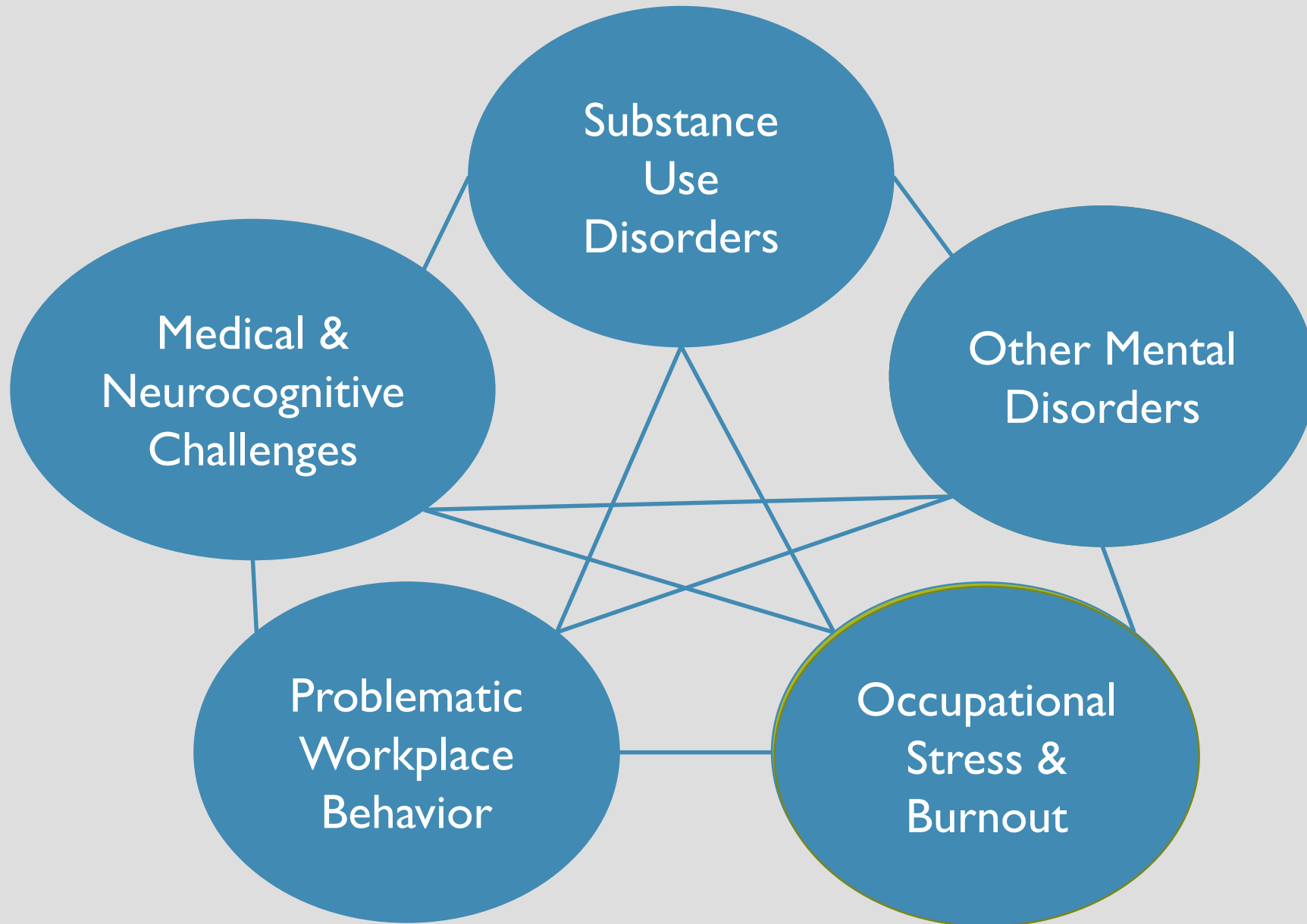
Les Schwab, MD

INTRODUCTION

- Steve Adelman, MD: Career Trajectory & Current Role

- Physician Health Programs:

    History; Evolution; 57+ Varieties; the Burnout Conflagration

- Physician Health Services, Inc. (PHS)

PHYSICIAN HEALTH SERVICES, INC.

- Non-profit 501(c)3 subsidiary of the Massachusetts Medical Society

- Promote recovery, professionalism, health, wellness, improved self-care

- Confidential & peer-review protected

- Identify, assess, refer to treatment, support & monitor

- Independent of the Board of Registration in Medicine (BRM)

- Upon physician request, PHS provides documentation to others (BRM, employers & credentialing agencies)

- Professional staff of psychiatrists, addiction physicians, attorney and others with physician health expertise

PHP SCOPE

Substance Use Disorders

Other Mental Disorders

Medical & Neurocognitive Challenges

Problematic Workplace Behavior

Occupational Stress & Burnout

MORE PHYSICIAN HEALTH & WELLBEING ISSUES

Work/Life Balance

Self-Care

Joylessness; Unhappiness; Dissatisfaction

Disorganization

Professionalism; Boundary Slippage; Communication
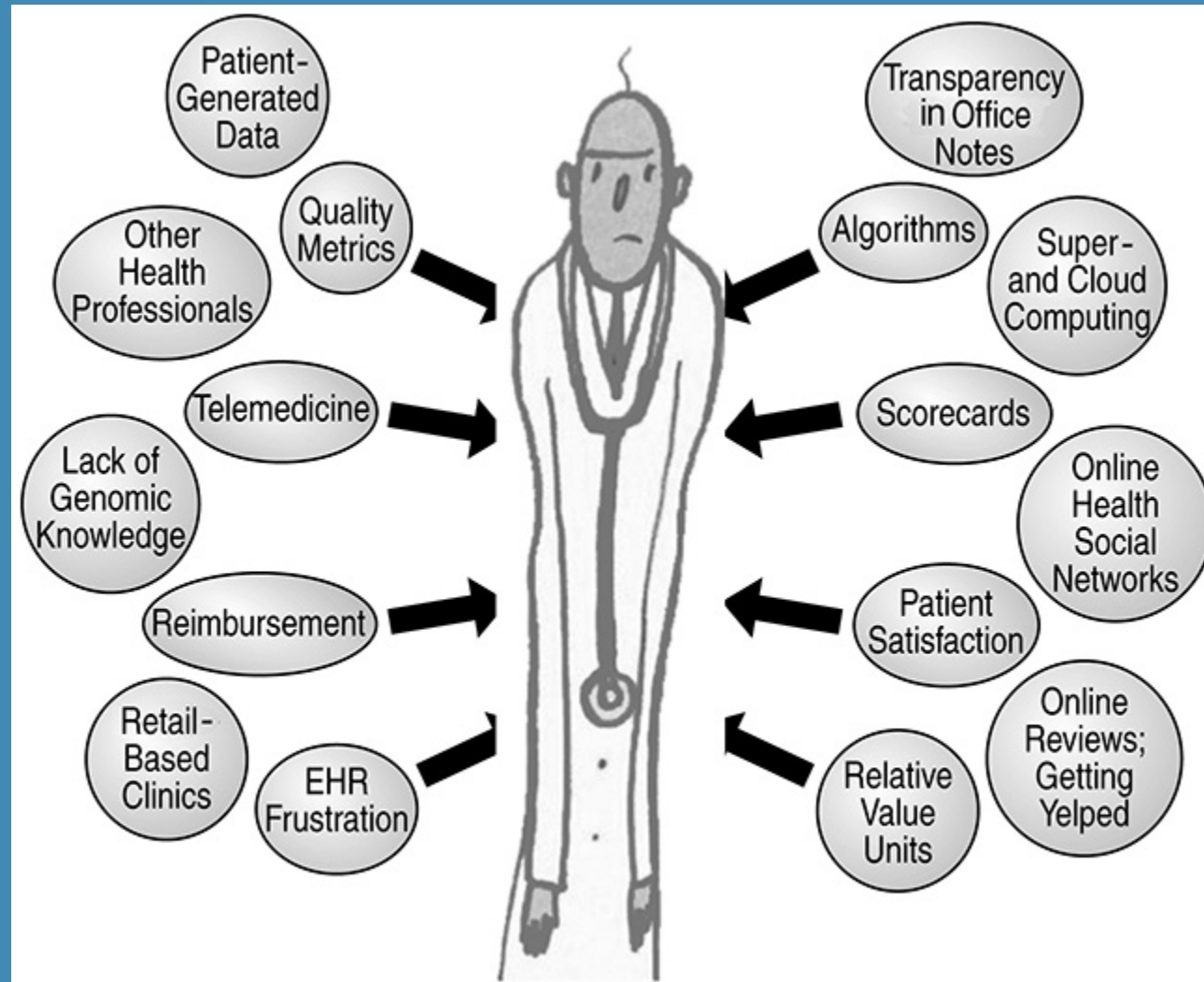
Personal & Interpersonal Ineffectiveness

Accepting, Embracing & Managing Change

Transition Planning

Doctors Are Getting Squeezed
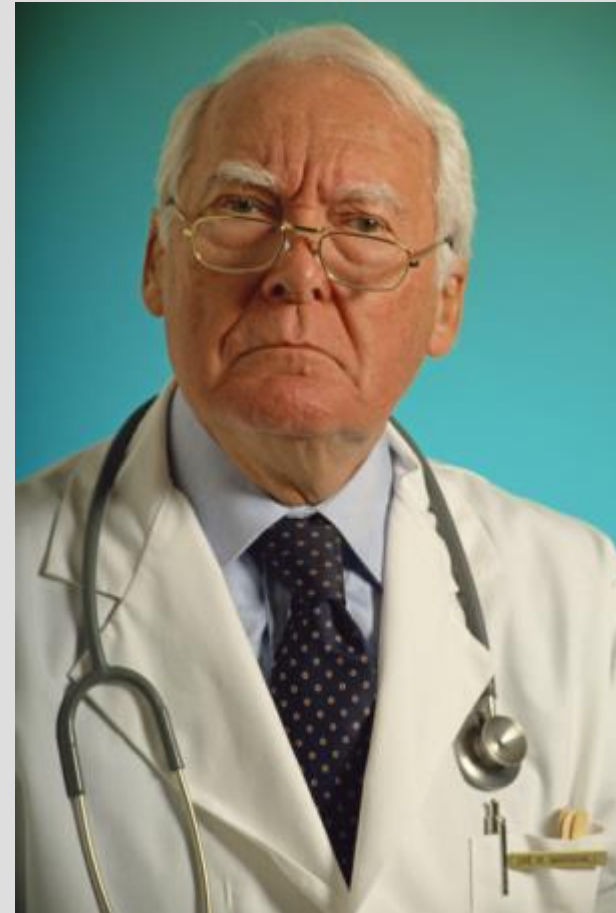## Eric J. Topol, MD
February 18, 2015

I'M MAD AS HELL AND I'M NOT GOING TO TAKE IT ANYMORE

OCCUPATIONAL STRESS & BURNOUT

- Exhaustion
- Depersonalization
- Feeling of no longer being effective

THE DISEASE OF MEDICINE

HEALTHY PHYSICIANS GIVE BETTER CARE!

Decreased medical errors

Increased patient satisfaction

Better treatment recommendations

Increased treatment adherence

Lower malpractice risk

Better attitudes toward work

Higher team functioning

Lower turnover

ENVIRONMENTAL DRIVERS OF PHYSICIAN BURNOUT

Workload and time constraints

Inefficiencies/frustration (EHR)

Lack of autonomy/control

Ineffective leadership

Mission/values mismatch (loss of meaning)

Culture of incivility

Perception of fairness and respect

Diminished rewards

"...THE MORE TIME I SPEND AT MY COMPUTER, THE MORE I WORRY I BECOME LIKE MY COMPUTER – COLD, INDIFFERENT, AND LACKING EMOTION."

Jayshil J. Patel, MD, Division of Pulmonary & Critical Care Medicine, Department of Medicine, Medical College of Wisconsin, Milwaukee

~JAMA 8/18/15~

INDIVIDUAL DRIVERS OF PHYSICIAN BURNOUT

- Perfectionism
- High achievement orientation
- Difficulty setting boundaries
- Intellectualization
- Delay of gratification
- Compartmentalization
- Materialism

Figure 5

SYSTEM LEVEL BURNOUT COUNTERMEASURES

- Acknowledge and assess the problem
- Harness the power of leadership
- Develop and implement targeted work unit interventions[a]
- Cultivate community at work
- Use rewards and incentives wisely
- Align values and strengthen culture
- Promote flexibility and work-life integration
- Provide resources to promote resilience and self-care
- Facilitate and fund organizational science

Figure 3

Addressing Burnout at Different Levels

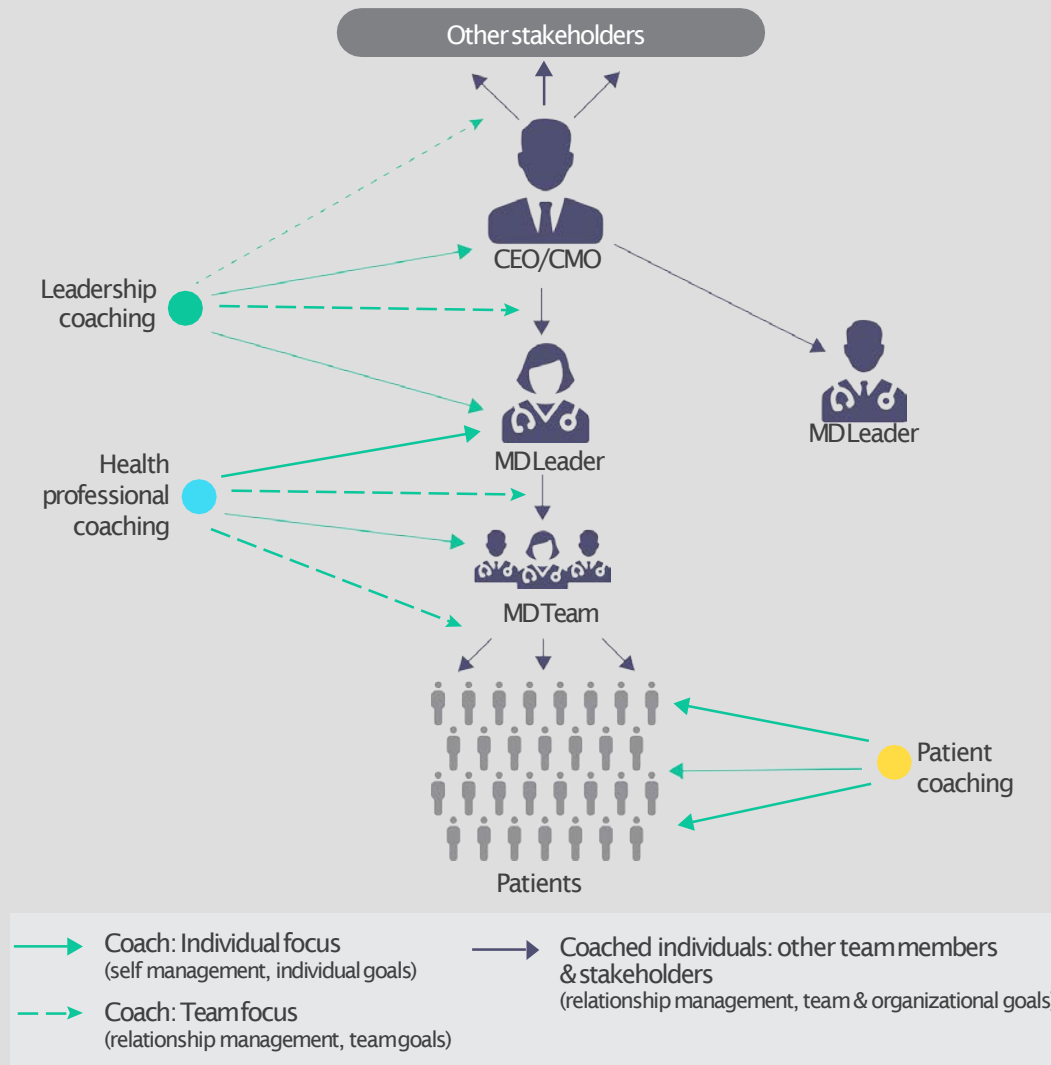| Drivers of burnout and engagement in physicians	Individual factors	Work unit factors	Organization factors	National factors
Workload and job demands	• Specialty • Practice location • Decision to increase work to increase income	• Productivity expectations • Team structure • Efficiency • Use of allied health professionals	• Productivity targets • Method of compensation -Salary -Productivity based • Payer mix	• Structure reimbursement -Medicare & Medicaid -Bundled payments -Documentation requirements
Efficiency and resources	• Experience • Ability to prioritize • Personal efficiency • Organizational skills • Willingness to delegate • Ability to say "no"	• Availability of support staff and their experience • Patient check-in efficiency/process • Use of scribes • Team huddles • Use of allied health professionals	• Integration of care • Use of patient portal • Institutional efficiency: -EHR -Appointment system -Ordering systems • How regulations are interpreted and applied	• Integration of care • Requirements for: -Electronic prescribing -Medication reconciliation -Meaningful use of EHR • Certification agency facility regulations (JCAHO) • Precertifications for tests/treatments
Meaning in work	• Self-awareness of most personally meaningful aspect of work • Ability to shape career to focus on interests • Doctor-patient relationships • Personal recognition of positive events at work	• Match of work to talents and interests of individuals • Opportunities for involvement -Education -Research -Leadership	• Organizational culture • Practice environment • Opportunities for professional development	• Evolving supervisory role of physicians (potentially less direct patient contact) • Reduced funding -Education -Research • Regulations that increase clerical work

Addressing Burnout at Different Levels
(continued)

Drivers of burnout and engagement in physicians	Individual factors	Work unit factors	Organization factors	National factors
Culture and values	- Personal values - Professional values - Level of altruism - Moral compass/ethics - Commitment to organization	- Behavior of work unit leader - Work unit norms and expectations - Equity/fairness	- Organization's mission -Service/quality vs profit - Organization's values - Behavior of senior leaders - Communication and messaging - Organizational norms and expectations - Just culture	- System of coverage for uninsured - Structure reimbursement -What is rewarded - Regulations
Control and flexibility	- Personality - Assertiveness - Intentionality	Degree of flexibility: -Control of physician calendars -Clinic start/end times -Vacation scheduling -Call schedule	- Scheduling system - Policies - Affiliations that restrict referrals - Rigid application practice guidelines	- Precertifications for tests/treatments - Insurance networks that restrict referrals - Practice guidelines
Social support and community at work	- Personality traits - Length of service - Relationship-building skills	- Collegiality in practice environment - Physician configuration of work unit space - Social gatherings to promote community - Team structure	- Collegiality across the organization - Physician lounge - Strategies to build community - Social gatherings	Support and community created by medical/specialty societies
Work-life integration	- Priorities and values - Personal characteristics -Spouse/partner Children/dependencies -Health issues	- Call schedule - Structure night/weekend coverage - Cross-coverage for time away - Expectations/role models	- Vacation policies - Sick/medical leave - Policies -Part-time work -Flexible scheduling - Expectations/role models	- Requirements for: -Maintenance certification Licensing - Regulations that increase clerical work

Coaching Interventions Up & Down the Health Care Ecosystem

Other stakeholders

CEO/CMO

MD Leader

MD Leader

MD Team

Patients

Leadership coaching

Health professional coaching

Patient coaching

→ Coach: Individual focus
(self management, individual goals)

⇢ Coach: Team focus
(relationship management, team goals)

→ Coached individuals: other team members
& stakeholders
(relationship management, team & organizational goals)

NEJM Catalyst

COACHING: THE MISSING LINK

Coaching for practicing health care professionals ! (Burnout, self-care, work/life balance, performance, organization, communication..)
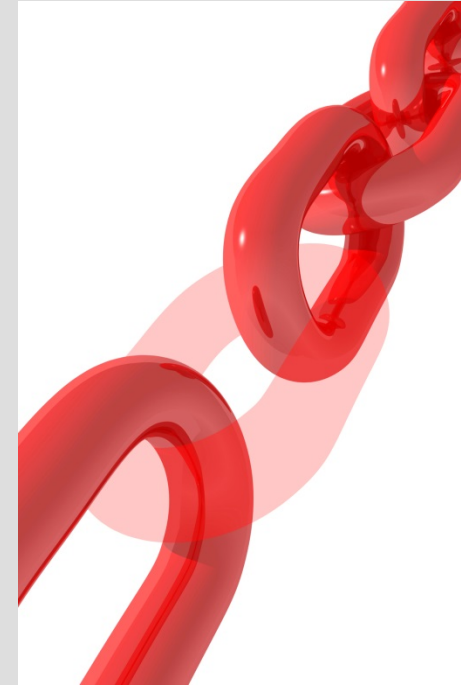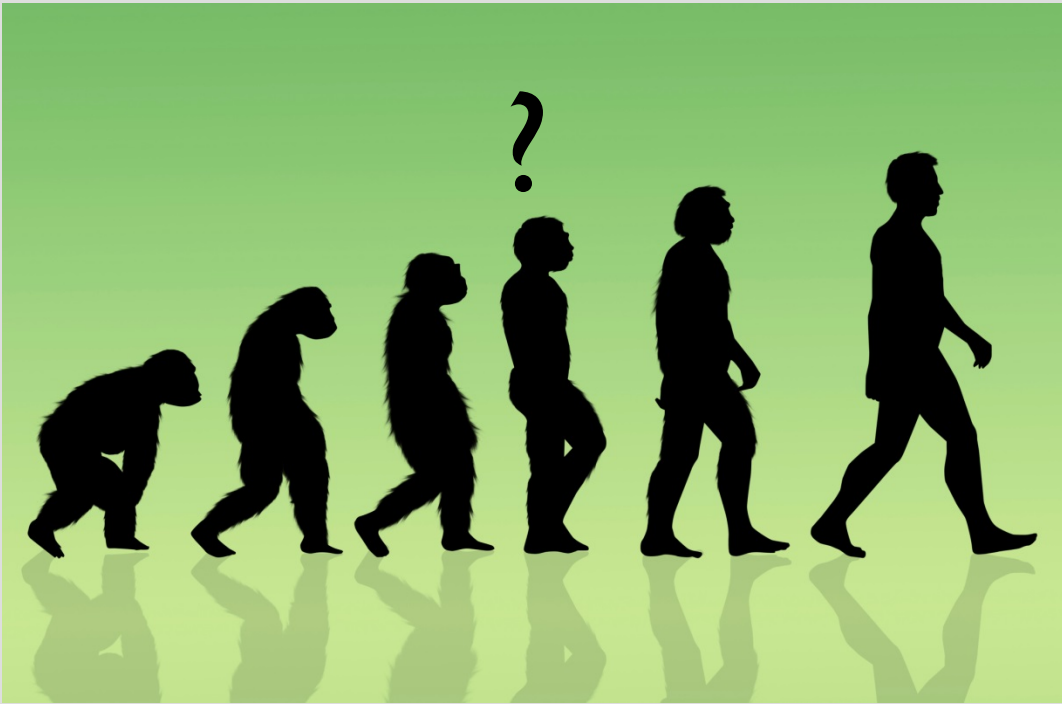
COACHING: A STRATEGY FOR ADDRESSING WORKPLACE CHALLENGES

- Set goals and solve problems
- Enhance professional skills: communications, workflow, interactions, etc.
- System interventions

COACHES HELP CLIENTS IDENTIFY GOALS & TAKE ACTION

Improve:

- Self-awareness
- Social awareness
- Emotional intelligence
- Problem-Solving
- Communication
- Organization

Diminish:

- Self-Defeating Thoughts
- Self-Defeating Behaviors (e.g. perfectionism; compulsive thoroughness; tardiness)
- Outbursts; Loss of Control; Passive-Aggressive Behaviors

Develop Skills:

- Flexibility
- Resilience
- Saying "No" & "Getting to Yes"
- Mindful Practice
- Stress Management

Align:

- Personal Values with Professional Duties
- Individual, Team & Organizational Goals

SO WHERE DOES COACHING FIT INTO THE MIX AT PHS?

- Self-referrals for Burnout

- Referrals for Problematic Behaviors Not Due to Mental Disorders or Substance Use Disorders

- Role of Structured Monitoring Agreements

- Leaders & Practices Looking for Resources

- How are Matches Made?

- Managing Workplace Conflict & MedPEP

- Handoff to Dr. Schwab

PHYSICIAN
HEALTH
SERVICES, INC.
A Massachusetts Medical Society corporation

MASSACHUSETTS
MEDICAL SOCIETY

DATE
MARCH 22-23, 2018

Massachusetts Medical Society
Headquarters at Waltham Woods
Waltham, Massachusetts

PHYSICIAN HEALTH SERVICES, INC.

Managing Workplace Conflict
IMPROVING LEADERSHIP AND PERSONAL EFFECTIVENESS

CONTINUING EDUCATION
A RISK MANAGEMENT PROGRAM

DESCRIPTION

This program is an educational forum for all physicians (both those in clinical practice and those in administration and leadership) to explore the relationships that drive the medical work environment. Disruptive behaviors and managerial miscommunications can impact a physician's ability to practice medicine effectively or a medical organization's ability to function smoothly. This course aims to allow participants to develop techniques to improve relationships with physician colleagues, coworkers, and patients — thereby improving the quality of the overall work environment. This course will help attendees assess difficult relationships and stressful situations in the workplace and consider ways to minimize conflicts. This is an experiential course that uses real (de-identified) workplace conflicts supplied in advance by attendees as examples for exploration and change. The program combines didactic presentations with roleplaying and focused feedback in an interactive style to learn and practice improved interactive techniques and communication methods. The program also focuses on developing skills and motivation to make lasting changes. Attendees are then invited to return for a facilitated session three months after each course is offered to provide feedback and updates on their ability to effectuate and sustain change at their worksite.

AUDIENCE

The program is designed for physicians who strive to improve their leadership skills and personal effectiveness with relationships at work, and to enhance their skills for addressing difficulties that arise in the workplace environment, both as practitioners and as leaders.

OBJECTIVES

After participating in this activity, learners should be able to:

- Discuss the mutual challenges faced by practicing physicians and physician leaders.

- Listen and communicate more effectively as a leader and/or as a member of a team.

- Apply negotiation and conflict resolution skills with peers in practice situations and with leaders in the institution.

- Implement changes in personal and organizational practices that fit your style and organizational culture.

- Promote behavioral change in the workplace using new methods and problem-solving skills acceptable to the workplace and conforming to professional standards.

- Demonstrate a range of approaches for handling intensive situations that meet with current professionalism standards.

- Understand and analyze personal stress and its effects on interactions.

- Exhibit appropriate boundaries with staff, colleagues, and patients.

- Increase self-awareness and accountability, and identify signs and symptoms of behavioral problems that might exacerbate interpersonal communication challenges.

- Develop, promote, and use health and wellness approaches to make positive changes.

For more information, go to
www.massmed.org/cme/events, or contact PHS at 781.434.7404.