Aspiring to the Quadruple Aim
From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider

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ABSTRACT
The Triple Aim—enhancing patient experience, improving population health, and reducing costs—is widely accepted as a compass to optimize health system performance. Yet physicians and other members of the health care workforce report widespread burnout and dissatisfaction. Burnout is associated with lower patient satisfaction, reduced health outcomes, and it may increase costs. Burnout thus imperils the Triple Aim. This article recommends that the Triple Aim be expanded to a Quadruple Aim, adding the goal of improving the work life of health care providers, including clinicians and staff.

FOCUS ON THE GOAL NOT THE OBSTACLES
• Why is physician wellness important today?

• Why are physicians at increased risk for the adverse consequences of not being well?
Physician Attributes

• Highly conscientious
• People pleasing
• Sense of responsibility and guilt
• Chronic self doubts
• Perfectionists
• Ability to delay gratification
• Uncomfortable with approval
• Prefer to have control
ACP Mission and Vision

• Mission
  • To enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

• Vision
  • To be the recognized leader in quality patient care, advocacy, education and enhancing career satisfaction for internal medicine and its subspecialties.
ACP Priority Initiatives 2016-17

• Continue to advocate for timely reforms to ABIM’s MOC process
• Facilitate the transition to value based payment and new delivery models
• Increase ACP’s role and critical input as a national leader in optimizing performance measurement
• Expand ACP’s work in reducing the cost of healthcare
• Increase the number and engagement of ACP members
• Help ACP members experience greater professional satisfaction and fulfillment
• Expand approaches to delivering information and education
The ACP Gold Medal Team!
We are the ACP Wellness Champions!
The Wellness Champions Initiative

• Train the Trainer concept
• Facilitated by Mark Linzer, MD, FACP
• Initial cohort (October, 2015)
  • 20 participants
    • ACP Council of Early Career Physician members
    • ACP Governors-Elect
    • ACP Governors
    • ACP Regents
    • Geographically and demographically diverse
• 2-day program
The Wellness Champions Initiative

- **Objectives**
  - ACP leaders to serve as resources for the College and its Chapters
  - Create a data registry by establishing baselines and tracking changes over time
  - Formal organizational recognition of scope and severity of Internal Medicine physician burnout
  - Develop a curriculum and/or toolkit for Chapters
  - Encourage healthy lifestyles among members and healthy work environments that promote longevity, engagement and quality of care
  - Work to put patients before paperwork
What have we been up to?
AAIM/CHARM
• Dick Wardrop
• Carrie Horwitch
• Sue Hingle

AMA Study
• Pam Hiebert

AMA Speakers Bureau
• Eileen Barrett
• Carrie Horwitch
• Daisy Smith
  • Suja Matthews

International Conference on Physician Health
• Sue Hingle

National Academy of Medicine Collaborative
• Daisy Smith
• Sue Hingle
Starting the Conversation
Presentations

ACP Chapter Meetings
16 and counting

Local/regional Meetings
39 and counting

National Meetings/Organizations
ACP, AAIM, SHM, Association of Clinicians for the Underserved
Capitol Hill staffers
Mini-Z/ACP 2016 Member Survey

• 10% are not satisfied with their current job (76% satisfied)
• 58% feel a great deal of stress because of their job
• 19% have professional values that are not well aligned with those of their department leaders (59% have well-aligned values)
• 31% are burned out (69% do not feel burned out)
• 35% have marginal or poor control over their workload (35% have good or optimal control)
• 51% have insufficient (marginal or poor) time for documentation (22% have satisfactory time available)
• 40% describe the atmosphere in their primary work area as chaotic (5% describe it as calm)
• 4% have marginal or poor proficiency with EHR use (96% are proficient)
• 6% work with a marginally or poorly functioning care team (94% experience good teamwork)
Creating Resources
Development of Toolkit

• Topics included
  • Resource lists
  • Description/summary of ACP efforts
  • Time management skills
  • Negotiation skills
  • EMR efficiency
  • How to get credit for the work you do
  • Team based care
  • How to integrate wellness into medical education programs
  • How to develop a wellness committee
  • Personal wellness strategies
Patients Before Paperwork

- Policy paper under development – planned for early 2017 release
  - Major priority areas identified by our members include:
    - EHR usability
    - Performance measure reporting
    - Dealing with insurance companies – documentation, prior authorizations, etc.
  - To be followed by an action plan and additional educational materials

- Advocacy
  - Calls for CMS to reduce burden and simplify approaches on numerous fronts - via letters and direct outreach re: MACRA, billing documentation, health IT/EHR issues
  - And, they are listening:
    - For example, improvements to the Chronic Care Management code are coming – documentation and health IT requirements to be simplified
Patients Before Paperwork

• Practice Support Efforts:
  • ACP Practice Advisor® - www.practiceadvisor.org – online, interactive tool to help practices improve their workflows and operate more efficiently and effectively in the evolving environment.
  • The Physician and Practice Timeline – www.acponline.org/timeline - can help practices know key regulatory deadlines, including changes (and ideally improvements) in those programs, and prepare for them!
  • Coming Soon: ACP Quality Payment Advisor – will help physicians and practices to be successful under the new Quality Payment Program/MACRA
It is never too late to be who you might have been. -- George Elliot

BEING CHALLENGED IN LIFE IS INEVITABLE BEING DEFEATED IS OPTIONAL

CHALLENGES ARE WHAT MAKE LIFE INTERESTING. OVERCOMING THEM IS WHAT MAKES LIFE MEANINGFUL.

Joshua J. Marine
ADDICTEDTOSUCCESS.COM
ACP BOG Resolution 6-F16

Advocating for Formal Infrastructure to Support Expansion and Sustainability of Wellness Initiatives

• RESOLVED, that the Board of Regents creates and supports a formal infrastructure, such as a Center for Physician Wellness, that will allow for expansion and sustainability of its current and future wellness initiatives for physicians and physicians-in-training; and be it further

• RESOLVED, that the ACP Board of Regents becomes a leading voice in addressing areas such as burnout prevention, physician wellness, and professional satisfaction and collaborate with like-minded organizations and entities in these areas.
What Can You Do? Addressing Burn-out at Your Institution
Talking Points
Why should institutions care?

- Suicide
- Medical errors
- Turnover
- Productivity
- Patient access
- Patient satisfaction
- Staff satisfaction and turnover
- Disruptive behavior
- It’s the right thing to do!
Workplace Contributions to Burnout

- Workload
- Control
- Effort & Reward Balance
- Community
- Fairness
- Values

What can we do?
How can we create a healthy work environment?

- **Less time pressure, more control**
  - Extend appointment times
  - Offload non-clinician work
  - “Desk top” slots for busy clinicians

- **More order, less chaos**
  - Maximally utilize space

- **Support for work-home balance**
  - Support needs of parent clinicians in residents and faculty
  - On site childcare
  - Pilot unique schedules: “7 on, 7 off” in outpatient environment
Get Data!
Data is powerful!

Recent AHRQ grant: Creating Healthy Workplaces Study

- Randomized trial to improve work conditions
- 34 clinics in rural WI, Chicago, NYC
- Measured work environment and care quality at baseline and 12 months later

Power of data

- Clinics receiving data initiated change
- No overall group effect; but where improvement occurred, interventions succeeded (ORs 3.6-5.9)
  - Workflow
  - Communication
  - Chronic disease management QI projects
Get Others Involved!

- Provider wellness committee
- Develop peer to peer support programs
- Integrate wellness with faculty development efforts/programs
- Collaborate with partners
- Office of Professional Worklife (Hennepin model)
Considerations

Ask yourself

• Why are we doing this? Is this important?
• What behaviors are we trying to change/drive?
• How can I encourage my institution?
• What could I not be thinking of?
• How can I get others onboard?
• Who and what can help me succeed?

Be mindful of

• Telling the story, communicating the vision, developing your brand
• The impact to others
• Making visible investments
• Rate of change the institution can absorb, impact to the institution
• What’s in it for them, rewards and recognition programs
• Champions, managers, sponsors
WHAT YOU DO MATTERS, but WHY you DO IT MATTERS SO MUCH MORE.