Prioritizing Wellbeing in your Practice

Michelle Solik MD MS
Indiana ACP Wellness Champion
“People – even more than things – have to be restored, renewed, revived, reclaimed and redeemed; never throw anyone out.”
Goals for Today

- Recognition of burnout
- Importance of wellbeing
- How to ‘make the case’ for wellbeing
- Ways to focus on wellbeing in your practice
- Resources available through the ACP
Burnout is Pervasive

- 54% of US docs had one symptom of burnout
- The highest rates of burnout were observed amongst general internists and subspecialists
- Undermines purpose/altruism
- Leads to depression/anxiety, suicidal ideation, substance abuse, medical errors, poor patient outcomes, decreased patient satisfaction, decreased productivity
Burnout rates headed in wrong direction

Shanafelt et al, 2015
Mayo Clinic Proceedings
Where are we on this graph?
The Unrealistic Workload

• Increased volume/demand on providers
• Rise of EHRs made to improve billing
  • Increased documentation time
  • Altered patient interaction
• Rising negative views of doctors
• In GME: Duty hours
  • Same amount of work in less time
Other Factors that Contribute to Burnout

- The changing culture of medicine
  - Patient comes first
  - A “Culture of Endurance” or “Code of Silence”
  - A sense of isolation/lack of recognition or resources
Measuring Burnout

Mini Z burnout survey
The 4th AIM: Physician Wellness

REFLECTION

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.

ACP Endeavors to Combat Burnout

Annals of Internal Medicine

Putting Patients First by Reducing Administrative Tasks in Health Care: A Position Paper of the American College of Physicians

Shari M. Erickson, MPH; Brooke Rockwern, MPH; Michelle Koltov, MPH; and Robert M. McLean, MD; for the Medical Practice and Quality Committee of the American College of Physicians*

This American College of Physicians (ACP) position paper, initiated and written by ACP's Medical Practice and Quality Committee and approved by the Board of Regents on 21 January 2017, reports policy recommendations to address the issue of administrative tasks to mitigate or eliminate their adverse effects on physicians, their patients, and the health care system as a whole. The paper outlines a cohesive framework for analyzing administrative tasks through several lenses to better understand any given task that a clinician and his or her staff may be required to perform. In addition, a scoping literature review and environmental scan were done to assess the effects on physician time, practice and system cost, and patient care due to the increase in administrative tasks. The findings from the scoping review, in addition to the framework, provide the backbone of detailed policy recommendations from the ACP to external stakeholders (such as payers, governmental oversight organizations, and vendors) regarding how any given administrative requirement, regulation, or program should be assessed, then potentially revised or removed entirely.


Annals.org

For author affiliations, see end of text.

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ACP’s Physician Well-being & Professional Satisfaction Initiative

**Fostering Local Communities of Well-being**
Trained ACP Well-being Champions supporting their ACP chapter members, practices, and organizations in combating burnout.

**Advocating for Systems Changes**
Policy recommendations through ACP’s Patients Before Paperwork initiative that call for simplifying, streamlining, and reducing excessive administrative tasks that detract from patient care and contribute to physician burnout.

**Improving the Practice and Organizational Environment**
Providing ACP members with high quality information, resources, tools, and support to help their practices thrive in the growing value-based payment environment.

**Promoting Individual Well-being**
Offering online resources and educational courses at ACP’s Internal Medicine Meeting and chapter meetings to help ACP members manage issues related to well-being and satisfaction.
ACP Patients Before Paperwork Initiative

What is Patients before Paperwork?
ACP's Patients Before Paperwork initiative’s goal is to reinvigorate the patient-physician relationship by reducing administrative complexities and eliminating unessential tasks that detract from patient care and contribute to physician burnout.

Policy Development
ACP policies provide a cohesive framework for identifying and evaluating administrative tasks, and offer detailed recommendations to analyze administrative tasks to determine whether they need to be challenged, revised, or eliminated entirely.

Tools You Can Use
Resources and tools help physicians put ACP’s policies into practice. They include resources that assess practice efficiencies and resources on physician well-being and professional satisfaction.

Collaborating with Stakeholders
ACP engages with key regulatory agencies and stakeholders to help streamline regulations imposed by insurers, federal regulators and other external entities to reduce administrative burdens for physicians.

Advocating for Internists
ACP has long identified reducing administrative complexities or burdens as a priority. ACP works to advocate for changes in our health care system that simplify excessive administrative burdens that put a strain on physicians and patient care.

For more information, visit, www.acponline.org/pb4p

ACP American College of Physicians
Leading Internal Medicine, Improving Lives

CO7009
Mitigating Burnout

Organizational Change

Personal Resilience

Wellness
FIGURE 2. Key drivers of burnout and engagement in physicians.
Wellbeing Champion Training
National ACP NOLA April 2018
Engage Members to Improve Resiliency

- Wellness Committee
- Chapter Social Activities
- Events at Chapter Meeting
- Wellness Track at Chapter Meeting
- Chapter Mentoring Program
- Chapter Coaching Program
How to Make the Case

- Identify your crowd
- Know your data: 1 doc = up to $1M

Versus:

- $10,000/yr Wellness Committee
- $25,000/yr scribes
- $100,000/yr float (part-time)
- $8,000 resiliency training
- $0 customized scheduling, listening, aligning values and emphasizing balance
ACP Practice Advisor®

Subscribe to the premier online practice management tool! Based on the Patient-Centered Medical Home model, ACP Practice Advisor® will help your practice enhance patient care and office efficiency.

Engage your entire team. Use the ACP Practice Biopsy® and Resource Library to guide your team towards improving practice performance and patient care.

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Making the Case to Address Clinician Burnout

Learning Objectives:

- Start a conversation with leadership about clinician burnout/well-being
- Articulate the reasons to address clinician burnout/well-being
- Facilitate a constructive meeting with leadership on the topic

* The American College of Physicians designates this PI CME activity, ACP Practice Advisor® module Making the Case to Address Clinician Burnout, for a maximum of 20 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

* Successful completion of this activity, which includes participation in the evaluation component, enables the participant to earn up to 20 Practice Assessment points in the American Board of Internal Medicine’s (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for an activity. It is the CME activity provider’s responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

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Ways to Promote & Prioritize Wellbeing

- Identify yourself
  - The Medical Student/Resident/Fellow
  - The Hospitalist
  - The Primary Care Provider
  - The Academic Clinician
- Identify your needs
  - Yearly survey
- Identify low cost/high yield interventions
Promoting PERSONAL well-being

- Honor your values
- Do what you love
- Assume best intentions
- Practice positive psychology
- Seek joy
- Get an ergonomics evaluation
- Practice mindfulness
Tips: Eating & sleeping

- **Eating**
  - Keep a healthy diet
  - Don’t skip meals

- **Sleeping**
  - No screen time after 9PM (except on call)
  - Avoid caffeine after noon
  - Minimize ambient light during sleep
  - Keep a regular sleep schedule
Tips: Exercising

- Exercise with others, at work
- Incorporate rewards
- Take the stairs, Park in the back
- High intensity brief work-outs
Tips: Stay connected

- Have diverse social resources and varied interests
- Be available for your partners, friends, family
- Invest your resources in positive spirals
- Try to keep work at work
- Get help from others when you need it
Promoting PROFESSIONAL wellbeing

- Reduce time pressure, promote more control
  - Ensure a manageable census
  - Consider scribes, MA order entry
  - Define new roles for all team members
  - Orient new staff

- Support team work and care coordination
  - Pre-visit planning
  - Huddles
  - Care protocols
  - Standing orders
Learn your EMR to reduce time at work

- Customize EMR training and get frequent training during work hours
- Create ‘dot phrases’
- Monopolize your order sets
- Double-screen computer stations
- E-prescribe
- Maximize printer availability/connectivity
- Create lounges that promote work efficiency
- Advocate for and employ ‘at the elbow’ help
- Minimize interruptions
Promoting PROFESSIONAL wellbeing

- Tie the work we do to our sense of purpose
- Incorporate our values into meetings
- Reward and recognize our peers
- Develop good bosses & hold them accountable
- Allow autonomy with schedules
- Develop processes that optimize workflow: APEX
- Provide resources for a “Physician Satisfaction and Wellbeing Committee”
E/M Service Documentation Provided By Students (Manual Update)

MLN Matters Number: MM10412
Related Change Request (CR) Number: 10412
Related CR Release Date: February 2, 2018
Effective Date: January 1, 2018
Related CR Transmittal Number: R3971CP
Implementation Date: March 5, 2018

PROVIDER TYPES AFFECTED

This MLN Matters Article is intended for teaching physicians billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

Change Request (CR) 10412 revises the Medicare Claims Processing Manual to allow the teaching physician to verify in the medical record any student documentation of components of E/M services, rather than re-documenting the work. Make sure your billing staffs are aware of
Medical Licensure Questions and Physician Reluctance to Seek Care for Mental Health Conditions

Liselotte N. Dyrbye, MD, MHPE; Colin P. West, MD, PhD; Christine A. Sinsky, MD; Lindsey E. Goeders, MBA; Daniel V. Satele, BS; and Tait D. Shanafelt, MD

Abstract

Objective: To determine whether state medical licensure application questions (MLAQs) about mental health are related to physicians’ reluctance to seek help for a mental health condition because of concerns about repercussions to their medical licensure.

Methods: In 2016, we collected initial and renewal medical licensure application forms from 50 states and the District of Columbia. We coded MLAQs related to physicians’ mental health as “consistent” if they inquired only about current impairment from a mental health condition or did not ask about mental health conditions. We obtained data on care-seeking attitudes for a mental health problem from a nationally
Ways to Promote & Prioritize Wellbeing

1. Limit work hours and offer flexible work arrangements.
2. Invest in leadership development.
3. Create a “Wellness Committee.” Identify a “Wellness Champion” and create a “Wellness Toolbox” that includes ingredients for changing residency culture to be in support of wellness, as opposed to simply ‘preventing burnout.
4. Establish wellness as a quality indicator for the practice. Distribute an annual wellness survey and use the results to create interventions to address burnout and enhance wellbeing.
6. Establish a culture in which teamwork and relationships with patients, peers and colleagues are prioritized.
7. Provide relationship-centered communication skills training for physicians.
8. Conduct workflow and QI projects aimed at addressing clinician concerns.
9. Implement the “Listen-Act-Develop” model to study burnout and ways to promote wellbeing.
10. Proactively work to reduce the stigma associated with mental illness by encouraging clinicians to seek help when they need it and create safe spaces for asking for help.
Introducing a New Theory of Well-Being

PERMA

- Positive Emotions
- Engagement
- Positive Relationships
- Meaning
- Accomplishment
10 Bold Steps to Prevent Burnout in General Internal Medicine

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KEY WORDS: burnout; prevention; general internal medicine.

P hysician burnout is an escalating problem receiving little attention from health care leaders. Burnout is a long-term stress reaction which includes emotional exhaustion, depersonalization, and a lack of sense of personal accomplishment. Physician burnout rates range from 30–65% across medical specialties, with the highest rates experienced by those at the front line of care, including emergency medicine and general internal medicine. ¹ Recruitment of medical students into general internal medicine is declining despite its broad scope of practice. We offer suggestions for addressing these challenges. The fact that burnout is a long-term stress reaction allows time to measure and intervene. To combat burnout, organizations need to identify stress in its earlier stages (Fig. 1), and choose programs to prevent burnout before it occurs. Following this quality improvement (QI) model for organizational self-care can produce a sustainable workplace for clinicians, with high quality and accessible care for patients (see Table 1).

INSTITUTIONAL METRICS

1. Ensure that metrics for institutional success include physician satisfaction and well-being. Any system that does not measure, monitor and optimize clinician well-

Center for Patient and Provider Experience
Joy In Medical Practice: Clinician Satisfaction In The Healthy Work Place Trial
Indiana ACP Wellbeing

Indiana Chapter Wellness Events

- 2-3 events per year
- Keynote speaker on wellness
- Resident breakout sessions
- Fitness activities (fun run, yoga)
- Healthy cooking classes
- Vendor fair demonstrating leisure activities
- Resident interest groups (music, cooking, fitness, etc.)
- Mentoring groups
Make Your Voice Heard:
Administrative Tasks and Best Practices Survey:

Administrative Tasks and Best Practices Survey

We at ACP thank you in advance for helping us collect information from our members on the administrative tasks you are facing and also best practices to deal with those tasks. We recognize that completing online surveys is one more administrative task for you to perform and we appreciate your willingness to help us!

Tell us about yourself

Welcome back

Now that you've told us a bit about yourself and your practice environment, please submit arc:

ADMINISTRATIVE TASK
or
BEST PRACTICE

How would you categorize this administrative task:

Choose one or two
- Clinical documentation requirements
- EHR functionality-related tasks
- Billing and insurance-related tasks
- Quality measure reporting
- Prior authorization tasks
- Patient referral paperwork
- Durable medical equipment paperwork
- FMLA paperwork
- Other prescription-related paperwork
- Other:

Other:
Know Your Tools: Resources to Help Prioritize Wellbeing

Physician Wellbeing and Professional Satisfaction

ACP’s Physician Well-being & Professional Satisfaction Initiative

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www.acponline.org/physician-well-being
Open Forum

- What can I do for your as your WBC?
- Are there any particular topics you want more information on (i.e. bring a national speaker)?
- What activities would you find enjoyable?
- How can I help those who are struggling from burnout?
Questions?

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