

Taming clinical chaos means fewer physicians eyeing exit: study

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Physicians and other clinicians who find professional satisfaction in practices where the workflow is well designed and team communication is strong are less likely to experience burnout and much less likely to be tempted to take their talents elsewhere, according to newly published research that draws on a year's experience at dozens of Midwestern and East Coast clinics.

For the new study, published in *Health Affairs*, researchers examined how physician satisfaction affects burnout and doctors' intent to leave their practices. The study used data from the Healthy Work Place (HWP) trial—a randomized clinical trial performed for the Agency of Healthcare Research and Quality—to better understand how a physician's professional satisfaction relates to work conditions and outcomes for clinicians and their patients.

The baseline data showed that 74 percent of physicians reported job satisfaction, which was linked to less chaos, more cohesion, better communication and closer values alignment at work. Following up a year later, physicians that reported an increase in their satisfaction were nearly three times more likely to report improved burnout scores and almost nine times likelier to indicate reduced intent to leave the practice.

For the follow-up, 135 clinicians in 32 clinics were available. Burnout scores improved for 38 percent of physicians with improved satisfaction (20 physicians, or 16 percent of 129 physicians) and for only 13 percent of those who did not show improvements in satisfaction. Intent-to-leave scores improved for 34 percent of more-satisfied clinicians, but for only four percent of those without improved satisfaction.

“The strength of these findings were more than we had ever known before,” said Mark Linzer, MD, lead author of the study and principal investigator of the HWP trial. He co-wrote the *Health Affairs* study with general internist and AMA Vice President of Professional Satisfaction Christine A. Sinsky, MD, and others.

Researchers also “found several organizational predictors” of physician satisfaction, meaning they have discovered the “ways that organizations can improve the joy in practice and, therefore, obtain these beneficial outcomes,” said Dr. Linzer, director of the Division of General Internal Medicine and the Office of Professional Worklife at Hennepin County Medical Center in Minneapolis.

Improved satisfaction among physicians led to decreases in burnout and intent to leave among clinicians and advanced practice providers, which suggests the joy in practice to be of “considerable importance to primary care clinicians and their practices,” says the study.

“We found that practices with less hectic environments, more cohesion, better communication between provider groups and closer values alignment between clinicians and leaders had physicians with more satisfaction,” Dr. Linzer said.

The findings appear to buttress a growing business case for addressing physician burnout, as argued by Dr. Sinsky and her co-authors in a recently published *JAMA Internal Medicine* essay. They noted “extensive evidence” indicating “that burnout is a major driver of physician turnover.” Physicians’ intent to leave is correlated with actual physician departures from health care organizations, the authors wrote, with burned-out physicians experiencing a two-year turnover rate double that of non-burned-out physicians.

What drives satisfaction

Interventions aimed at improving communication between provider groups or ones that emphasized specific practice interventions in workflow redesign to address issues identified by clinicians were shown to be the best for improving clinicians’ satisfaction. Practices that underwent these interventions were three times more likely to demonstrate improved physician satisfaction, the study says.

The data support the need for workflow redesign to reduce the daily pressures experienced by busy physicians. It also adds the importance of adding interventions that improve communication.

With the rapid pace of change in medicine, the benefits of frequent and effective communication from leaders, and between clinicians and clinic staff members, cannot be overemphasized,” the study says.

Taming practice chaos

Physician satisfaction was significantly improved with workplaces that were less chaotic. When a practice exhibits chaos, it often predicts adverse outcomes for physicians and their patients. The study stated that chaos in the workplace has been shown to be prevalent (found in 40 percent of primary care practices) and associated with less teamwork and professionalism.

In prior work by Dr. Linzer’s team, chaos in the office was associated with more bottlenecks during patient registration and check-out, phone calls and the pharmacy. Practices with chaotic work environments also experienced more medical errors. Dr. Linzer and team suggest that careful attention to the pace within an organization and creating “quiet spaces” for easy connections and communication may provide improved benefits for both physicians and their patients.

“The first step to improving work-life wellness is to have an infrastructure with wellness champions or a wellness committee within a practice or organization,” said Dr. Linzer. “That committee should be tasked with measuring these work-life aspects and outcomes on at least an annual basis. Then interventions can be designed to address them.”

“We have new instruments that are very brief—only 10 questions long—that would give a great deal of information about these issues,” he added.

The AMA offers online CME to improve physician wellness. The AMA’s STEPS Forward collection features 49 practice-improvement modules, including more than a dozen that focus on how to change key workflows and processes, such as pre-visit planning and synchronized prescription renewal. Several come thanks to a grant from, and in collaboration with, the Transforming Clinical Practices Initiative (TCPI).

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