It takes a team to prevent doctor burnout. Meet the players.

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Only four years into practice, AMA member Kevin Hopkins, MD, was struggling with the clerical burdens of contemporary medicine. He was not a good typist, and he was not particularly good with using electronic devices. Every day was difficult.

“I found myself thinking, ‘Boy, how much more would I love my job if I could just go from the exam room to exam room and not have to touch the computer, not have to type as much, not have to do as much data entry and data input that I had never been trained to do,’” he said during the Team-Based Care Training Camp held by the AMA and Bellin Health.

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system-level, the AMA assesses an organization’s well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

Dr. Hopkins is a pioneer in advanced models of team-based care, a family physician, and medical director of the Cleveland Clinic Strongsville Family Health and Ambulatory Surgery Center, a multispecialty ambulatory location with about 150 practitioners in different specialties and about 400 caregivers on site on any given day.

The reality is that physicians “can’t do it alone in 2019,” he said, adding that “you can't do it alone and go home with your sanity—we need a team.”

Meet the members of Dr. Hopkins’ team and learn about their roles.

Team-care medical assistants

These professionals perform traditional readings, intake reviews of allergies, medications, and tee up
pending orders for refills of medications the patient is due for.

“They address health maintenance at every single visit before the doctor comes in the room,” he said. “For patients who are overdue for their pneumonia vaccine, they’ll say, ‘Dr. Hopkins is going to want you to have this pneumonia vaccine. Is it OK if we could give that to you today?’”

**Advanced practice providers**

Integration of advanced practice providers (APPs) in primary care helps increase patient access. One model implemented with the APPs was creation of additional slots for scheduling acute chronic visits.

Adding an APP to the team helped expand the panel size by about 3,500 patients while providing “great care for them” through shared scheduling. The APPs also complete about 80% of in-basket messages.

**Care coordination nurses**

These nurses help with care transitions by contacting patients with the highest risk or patients with a readmission risk of greater than 40% within 48 hours of discharge from the hospital.

Care coordination requires nurses to complete medication review, make sure patients have their follow-up visits scheduled and answer any questions. They help with the high-risk registry and patients have direct telephone access to care.

**Population health medical assistants**

“All these are medical assistants that help us with care-gap registries—our disease-process registries that show us gaps in care for a particular population of patients,” Dr. Hopkins said. “They are working that every single day and making lists of patients that need proactive targeted outreach.”

For example, MAs identify patients who have not had their mammogram in the past year. When a patient is identified, an MA will order the test, reach out to the patient, get her scheduled and send a message to get that closed.

**Medicare annual wellness visit nurses**
These are performed in Cleveland Clinic’s practices and are done with standard documentation. The nurses are focused on health maintenance and closing care gaps.

“They address advance directives—things that I don't always get the chance to do in my business,” said Dr. Hopkins. “It helps to offload those visits off the physician schedules and it increases retention and gives us an audit of these patients who’ve not had their annual Medicare wellness visit.”

**Embedded clinical pharmacists**

These pharmacists are “available for curbside consults—for real-time in-office medication consults,” said Dr. Hopkins. “They do telephonic patient contacts and telehealth, virtual visits and chronic disease management roles for medication adjustments.”

For example, if a patient needs help with diabetes or hypertension management, they are referred to the clinical pharmacist, which is “far more efficient than me doing it in three- or six-month chunks,” according to Dr. Hopkins.

**Primary care social work**

Behavioral health is embedded within the primary care clinics to help patients get into extended care facilities. There is a pediatric psychiatrist, an adult psychiatry nurse practitioner and one behavioral health social worker who is triaging—all committed to primary care patients.

This is a centralized, robust outreach program that allows the practice to reach out to patients who may need help with medication, transportation assistance, residential placement, or have lower health literacy.

The AMA Ed Hub™—your center for personalized learning from sources you trust—offers education and CME on a broad range of topics, including professional well-being from the AMA’s STEPS Forward™ open-access modules offering innovative strategies that allow physicians and their staff to thrive in the new health care environment. These courses can help you prevent physician burnout, create the organizational foundation for joy in medicine, create a strong team culture and improve practice efficiency.

The AMA also offers practice-transformation strategies and resources designed to increase professional satisfaction and physician well-being.

Prior to the 2019 American Conference on Physician Health™ (ACPH), the AMA will be hosting a
practice transformation boot camp. The boot camp has been designed to focus on the fundamentals of effective change strategies and workflow interventions that improve practice efficiency and promote professional well-being. Physicians, care team members and other health system professionals are invited to register.

Registration for the AMA-led boot camp and the ACPH—a scientific conference co-sponsored by the AMA, Mayo Clinic and Stanford University—is now open. This year’s theme for the ACPH is “Activating health system change to promote physician well-being.”