

New branch in medicine's ivory tower: scholar of wellness

JUN 17, 2019

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Fliers were posted. Teams visited different departments across campus. And physicians from all specialties were called on to apply to become “scholars of wellness.”

Over the course of 10 months, the Northwestern Medicine funded program aims to “create a critical mass of wellness experts to drive meaningful change” by equipping the 10 participating physicians with the knowledge and tools needed to effectively lead a wellness project or initiative that will positively affect the well-being within their teams.

“My main reason for applying was because I was seeing colleagues of mine really get burned out and discouraged in primary care,” said Anne Schultz, MD, an internist and physician lead at Northwestern University Feinberg School of Medicine. “I want to try to make some changes that would make what we do and what we love much more sustainable.”

“I knew there was an opportunity within this program to be much more innovative than if I had to wait for everything across the system to change,” said Dr. Schultz, governor-elect for the American College of Physicians. “This was an opportunity for me to just take out a small project with support in my office—you just couldn't get any better than that.”

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.

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 Northwestern program—created by Gaurava Agarwal, MD, and Joan Anzia, MD, both psychiatrists—is in its inaugural year and includes physicians from emergency medicine, radiology, internal medicine, anesthesiology, oncology, obstetrics and gynecology, ophthalmology, colorectal surgery and psychiatry.

Help on business case for well-being

This program helps physicians become exposed to a body of scholarly materials regarding physician burnout and well-being. It creates professional development by providing physicians with expertise in this area through educational sessions three times a month. Scholars are expected to attend 80% of the classes and receive 5% protected time for their participation.

“The other part of it that’s been very helpful is they’re also giving us resources, administrators that work for the hospital, process-improvement people” and more, said Dr. Schultz. “That really makes it much easier so we can get our presentations and our data analyzed.”

Physicians are also taught how to talk to members of the C-suite to better present their ideas for change.

“They’re really giving us the education so we can talk their language and our presentation will be developed with that in mind,” she said. “They give us somebody to meet with us once a month to actually put these materials together so we’re both talking the same language. That’s a piece that has been so helpful.”

Identify a focus area

Each month the program scholars work with their coach and the wellness medical director to establish a plan for their project. For Dr. Schultz, the check-ins have helped her to identify a specific area to focus on: previsit planning.

“They’ve helped me develop and get my project narrowed down. The big thing I learned is I wanted to do so much and they said, ‘You can’t possibly do that. You need to do just this one area.’ That was a big learning curve,” said Dr. Schultz.

She decided to focus on previsit planning because of the need for “a better way to redistribute” physicians’ work.

“We have very bright, very motivated medical assistants in our office and I saw this as a win-win,” she said. “They would be able to show how they can step up and do a lot of these tasks that really don’t require medical decision-making and being more of a team.”

Some of the work requires a “touch point or a handoff,” which is where previsit planning comes in. That eliminates the need to chase the medical assistant down during the day to get the immunization or to collect pieces of data.

“It really came out of the initiatives from Medicare that are asking primary care doctors for depression screens, fall risk, pneumonia vaccine, colonoscopies and trying to make some of this work team-based so it doesn’t all fall on primary care physicians,” said Dr. Schultz.

The program culminates in August with a presentation or poster session of their projects to the other program scholars, senior leadership, department chairs and peers to share and spread best practices. The second year of the program will begin in September with a new cohort of scholars of wellness who will now be funded for an entire year of development.