

Time for a new way to approach physician performance reviews

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Sara Berg, MS

Senior News Writer

While AMA member Lynne Fiscus, MD, was having coffee with her colleague, Sarah Smithson, MD, the topic of annual physician performance reviews came up. Dr. Smithson shared how she “met” or “exceeded” expectations in her first performance review out of residency, but the anonymous 360-degree feedback from staff in the clinic stated she was tough and asked a lot of the team. This negative experience contributed to Dr. Smithson’s leaving that particular practice, feeling isolated because it did not engage her as part of the team or support her development—it was a failing on the part of the practice.

This “demonstrated powerfully some of the human cost and what we’re doing to our clinicians,” Dr. Fiscus said. She is President and CEO of the University of North Carolina (UNC) Physicians Network—a part of UNC Health—and addressed physician performance reviews during a session at the International Conference on Physician Health, which is a collaborative meeting of the AMA, Canadian Medical Association and British Medical Association. Read this article about humanizing the performance review written by Drs. Fiscus and Smithson.

When Dr. Fiscus, an internist and pediatrician, joined UNC Physicians Network, the Network was “in the bottom third in the United States with regard to physician engagement.” One-third of the network’s “physicians were either ambivalent about our organization or actively disengaged,” she said, noting that the reviews were “really identified as an early opportunity for us to change the tone of how we interact with our physicians.”

So, UNC Physicians Network kicked the traditional 360-degree review with anonymous feedback to the curb and welcomed new, bidirectional annual reviews. Over the course of two years, overall physician engagement scores within UNC Physicians Network jumped from the bottom third in the country to the top 25%. The percent of actively disengaged physicians also improved, decreasing from 6.4% to less than 1%.

Use a continue, start, stop exercise

“Feedback from team members is very important to performance improvement, but it has to be done in the spirit of process and performance improvement and not as a grading exercise for one physician versus another in their practice,” said Dr. Fiscus.

Using the continue, start, stop exercise, teams are asked what physicians should continue to do that they’re doing now, if there are things they should start doing, and if there is anything they should stop.

“The feedback has become much richer, much more future facing and much more constructive using this tool,” Dr. Fiscus emphasized.

Implementation of team dynamics tool

“There was no explicit focus on teamwork—it was all on individual performance in the past,” said Dr. Fiscus. “And since then, we had implemented a tool called - Simpli5 that looks at individual and team dynamics.

“We include that information in the review process to remind people what their individual communication styles and preferences are,” she added, noting that they also include the same information for “their team and how they function within the context of the team that’s providing care to the patients and communities.”

Discover how friendly feedback can improve emergency department environments.

Have bidirectional conversations

“We ask every clinician, every year: What do you love about your job? How often do you get to do it?” Dr. Fiscus said. “How can we get you more of what you love to do? What accomplishments are you the most proud of in the last year?”

“It’s really wonderful to be able to hear and read what our clinicians are proud of because they have so much to be proud of,” she said, adding that “we want them to be able to sit in that pride and accomplishment through this process.”

Explicit content on burnout

“We also include explicit content to promote a conversation about burnout,” said Dr. Fiscus. “There’s a sheet ... in all of our reviews with exactly how much vacation time people have in the bank.

“And most often with us physicians, it’s—you’re not taking enough of your vacation time, please start taking vacation time,” she added. “And let’s talk about burnout. Let’s talk about what you’re doing in wellness and self-care—we can get you plugged into resources if needed.”

Read about why physicians should ask their health care colleagues for feedback.