Joy in Medicine™

Physician well-being: A discussion on burnout and achieving joy in practice

AMA’s SL2 (Share, Listen, Speak, Learn) Series
December 2017
Share, Listen, Speak, Learn (SL2) Series

- Share existing resources
- Participate in the live event
- Join the conversation in the digital community
- Learn from resources in the Education Center
FYI…

Next scheduled webinars:

• Cybersecurity: A patient safety issue
  Wednesday, January 24th, 12 noon CST
  Registration link: https://cc.readytalk.com/r/mc1ahklewnlk&eom

• Developing a QI culture in a practice setting
  Wednesday, February 21th, 12 noon CST
  Registration link: https://cc.readytalk.com/r/sl0jwveaoc0g&eom
Polling Questions
Allison M. Winkler, MPH
Senior Practice Advisor
Today’s Objectives
Agenda:

• AMA physician satisfaction & sustainability

• State of affairs for physician satisfaction

• Joy in Medicine™ resources and tools
AMA physician satisfaction & sustainability
AMA’s strategic focus areas

- Improving Health Outcomes
- Professional Satisfaction & Practice Sustainability
- Medical Education
AMA physician satisfaction & sustainability

Professional Satisfaction and Practice Sustainability

- Practice Transformation
- Digital Health
- Payment and Quality

Infrastructure
AMA physician satisfaction & sustainability

• “One of the American Medical Association's core strategic objectives is to advance health care delivery and payment models that enable high-quality, affordable care and restore and preserve physician satisfaction.” – Friedberg et al.

• In 2013, AMA and Rand performed a joint study to identify the key determinants and impact of physician satisfaction.
AMA physician satisfaction & sustainability

• Key Findings:
  
  • Delivering high-quality care – The ability to practice and provide high-quality care is important to providers and leads to greater professional satisfaction. Barriers, such as, unsupportive leadership or payer restrictions contribute to dissatisfaction.

  • Pros and cons of electronic health records – EHR systems have improved information sharing and supported operational efficiencies. However, many applications are still lacking and contribute to additional provider documentation time leading to dissatisfaction.

  • The Value of Income Stability and Fairness – Majority of physicians are satisfied with income levels. Concerns arise with varying compensation models and disproportionate pay for time devoted to providing care.

  • The Cumulative Burden of Regulations – Consistent additions and alterations imposed by government, payers, and regulating bodies leads to time consuming activities that take away from providing direct patient care.
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Professional Well-being Initiatives:

1. Joy in Medicine Conference Series
   - CEO Consortium
   - Research Summit
   - Multi-Stakeholder Conference
   - CMO/CXO/COO Conference

2. STEPSForward™

3. Professional Burnout & Satisfaction Survey – Mini-Z
AMA physician satisfaction & sustainability

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Health Affairs Blog

Physician Burnout Is A Public Health Crisis: A Message To Our Fellow Health Care CEOs
John Noseworthy, James Madara, Delos Cosgrove, Mitchell Edgeworth, Ed Ellison, Sarah Krevans, Paul Rothman, Kevin Sowers, Steven Strongwater, David Torchiana, and Dean Harrison

March 28, 2017

Physician Well-Being: The Reciprocity of Practice Efficiency, Culture of Wellness, and Personal Resilience

Article / April 26, 2017
AMA physician satisfaction & sustainability

**Furthering Research**
- Academic partnerships
- Peer-reviewed journal articles
- Demonstration projects

**Convening communities**
- Networking/Communities project
- Annual Conference
- C-suite and stakeholder summits
- Executive circles & boot camps
- Learning/innovation labs
- “Magnet” & award program

**Advocating change**
- Reducing administrative burden
- Accelerating team-based care
- Influencing regulators and technology vendors

**Activating healthier organizations**
- Burnout assessment Program
- Steps Forward modules
- Joy in Medicine calculators
- Joy in Medicine metrics
- Joy in Medicine dashboard
State of affairs for physician satisfaction
State of affairs for physician satisfaction

Today’s healthcare providers are currently experiencing unprecedented levels of burnout resulting in disjointed care, poorer health outcomes and rising costs of care for the entire nation.

• **Key Statistics:**

  - During a 3-year study interval, the percentage of physicians experiencing at least 1 symptom of burnout increased significantly, rising from 45.5% in 2011 to 54.4% in 2014

  - 400 US physicians are dying by suicide each year, a number comparable with the graduating classes of two or three medical school classes annually.

More than **HALF** of U.S. physicians experience burnout. Each 1 point increase equates to a **43% greater** likelihood of clinical reduction within 24 months.

It costs approximately **$500K to $2M and 12-14 mos.** to replace a physician.

Burnout is shown to increase the risk of medical errors by **200%**.

It is estimated that **80%** of burnout is related to organizational factors.
Allocation of Physician Time in Ambulatory Practice: A Time and Motion Study in 4 Specialties

Christine Sinsky, MD; Lacey Colligan, MD; Ling Li, PhD; Mirela Prgomet, PhD; Sam Reynolds, MBA; Lindsey Goeders, MBA; Johanna Westbrook, PhD; Michael Tutt, PhD; and George Bli, MD

Background: Little is known about how physician time is allocated in ambulatory care.

Objective: To describe how physician time is spent in ambulatory practice.

Design: Cross-sectional study (dual-diary method).

Setting: New Hampshire ambulatory practices.

Participants: 21 physicians, 430 hours worked.

Results: Total time on direct clinical face time with patients and 49.2% of their time on EHR and desk work. While in the examination room with patients, physicians spent 52.9% of the time on direct clinical face time and 37.0% on EHR and desk work. The 21 physicians who completed after-hours diaries reported 1 to 2 hours of after-hours work each night, devoted mostly to EHR tasks.

- 50% day EHR/desk
- 1 hr F2F: 2 hr EHR
- 1-2 hr EHR at night
State of affairs for physician satisfaction

- 53% - Critical Care
- 52% - Emergency Medicine
- 50%
  - Family Medicine
  - Internal Medicine
  - General Surgery
  - Infectious Disease

Current State – Changing Landscape

- Patient Expectations
- Mergers & Acquisitions
- Clinician Isolation
- Technology
- Population Health
- Expanding Clinical Knowledge Base
- Performance Measurement
- Big Data
- Regulations, Policies, and Payment
- Payor Pressure
- Big Data
- Expanding Clinical Knowledge Base
- Performance Measurement
- Payor Pressure
Drivers of Physician Burnout

- Loss over control of work
- Increased performance measurement
- The increasing complexity of medical care
- The implementation of Electronic Health Records (EHR)
- Profound inefficiencies in the practice environment

All of which have altered work flows and patient interactions

These drivers are directly attributable to Burnout (experiences of emotional exhaustion, depersonalization, and feelings of low achievement and decreased effectiveness)
Joy in Medicine™ resources and tools
Joy in Medicine™ resources and tools

- AMA is committed to enhancing professional satisfaction with physician partners across the nation. Through collaborative partnerships, targeted analytics, and expert resources, the AMA has helped practices promote actionable steps to improve physician wellness and to drive success.

- **Our goals:**
  - Enhancing and improving health outcomes
  - Boost productivity and physician retention
  - Optimizing your bottom line by increasing revenues and reducing costs
Joy in Medicine™ resources and tools

SURVEY: A ten question survey assessing burnout and satisfaction for healthcare professionals. This validated instrument is able to identify key local drivers of burnout within your organization, as well as, offer comparisons against national benchmarks. The Mini-Z survey will be able to apply a total satisfaction score to your organization along with sub-scale scores for supportive work environment and technology stressors.

Key Features:

• Customization by provider type, site, age, gender, clinical specialty, etc.

• Organizational burnout score, data analytics and custom report

• Comparisons against national benchmarks

• Identify key drivers of burnout and satisfaction

• Field-test solutions for optimization
# Definitions and Targets

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<tr>
<th>Measure and Definition</th>
<th>Calculation</th>
<th>Success Criteria</th>
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<tr>
<td><strong>1. Joyful Workplace</strong> (Mini-Z Scores)</td>
<td>Sum of questions 1-10 Range = 10-45**</td>
<td>a joyful workplace ≥ 80%*</td>
</tr>
<tr>
<td><strong>2. Supportive work environment</strong> (Subscale 1)</td>
<td>Sum of questions 1-4. Range = 4-20</td>
<td>a highly supportive practice ≥ 16</td>
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<tr>
<td><strong>3. Work pace and no EMR stress</strong> (Subscale 2)</td>
<td>Sum of questions 5-8. Range = 4-20</td>
<td>an office with good pace and manageable EMR stress ≥ 16</td>
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*Mini-Z target is 40 out of 50 (80%). However, for the national benchmark study, the target is 36 out of 45 (80%) because Q10 was not asked. Therefore, percentages are used to compare the two.
Executive Summary

Two out of three clinicians at ABC Health say they are satisfied with their current job, while 19% are dissatisfied.

However, two-thirds of ABC Health clinicians also describe themselves as burned out or having symptoms of burnout. Burnout level is quite high when compared to 29% among clinicians in the general population.

Mini-Z scores confirm that satisfaction levels are below target for zero burnout.
2 out of 3 ABC Health clinicians are satisfied with their current job; 1 in 5 (19%) are dissatisfied. Satisfaction levels among ABC Health clinicians are lower than the 80% in the national benchmark study.

**Satisfaction with current job**

- **ABC Health**:
  - Satisfied: 47%
  - Dissatisfied: 20%
  - Mean = 3.65

- **NATIONAL BENCHMARK**:
  - Satisfied: 57%
  - Dissatisfied: 23%
  - Mean = 3.91

Overall, I am satisfied with my current job:

- (5) AGREE STRONGLY
- (4)
- (3)
- (2)
- (1) STRONGLY DISAGREE
Burnout levels among ABC Health clinicians are high at 66%, when compared to the 29% recorded in the national benchmark study. Only 10% say they have no symptoms of burnout. Burnout levels at ABC Health are the highest observed among hospital groups in AMA burnout studies.

Using your own definition of burnout, please select which of the following statements best describes you:

(1) I feel completely burned out. I am at the point where I may need to seek help.
(2) (3) I am definitely burning out and have one or more symptoms of burnout.
(4) (5) I enjoy my work. I have no symptoms of burnout.
Joy in Medicine™ resources and tools

Suggested solutions for sites:

1. Implement a team-based model of care
2. Enhance communication based on team huddles/co-location
3. Develop clinician “float pools” for life events
4. Ensure that metrics for success include clinician satisfaction and well-being
5. Develop schedules with flexibility and clinician control
6. Incorporate mindfulness and resilience training
7. Develop a wellness committee and infrastructure
8. Perform a Rapid Improvement Exercise on reducing stress and burnout
Joy in Medicine™ resources and tools

The AMA STEPSForward™ platform can assist with leading change:

- Modules and Tools for improving physician satisfaction
Joy in Medicine™ resources and tools

Making the business case for systemic change…

Creating the Organizational Foundation for Joy in Medicine™

Organizational Cost of Physician Burnout

Projected cost of physician burnout in terms of turnover. (Other costs of burnout, in terms of medical errors, malpractice liability, patient satisfaction, productivity and organizational reputation, are not included.)

- # 500 (Number of physicians at your center)
- 54% (Rate of burnout of physicians at your center, Rate of burnout national mean: 54%)
- 7% (Current turnover rate per year, Current turnover rate national mean: 7%)
- $ 500,000 (Cost of turnover per physician, Cost of turnover per physician national mean: $500,000)
- 12.5 (Number of physicians turning over due to burnout per year)
- $6,136,364 (Projected cost of physician turnover per year due to burnout)
Next Steps
Post-webinar Questions
Transforming Clinical Practice Initiative

• The Transforming Clinical Practice Initiative is designed to help clinicians achieve large-scale health transformation.

• The initiative is designed to support 140,000 clinicians over four years in sharing, adapting and further developing their comprehensive quality improvement strategies.


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Implementation support or Share Your Story

• The AMA is committed to helping you implement the solutions presented in this module.
  
  • If you would like to learn about available resources for implementing the strategies presented in this module, please contact us.

• Please share your story of implementing today’s content by sending us an email.
Your MISSION is Our MISSION