Professional Satisfaction and Practice Sustainability Update

June 7, 2019
Negative forces pressing on physicians

- Quantity and pace of work
- Excessive documentation
- Arduous hunt for clinical information via EHR design
- Professional liability
- Inadequate reimbursement
- Prior authorization
- Conflicting payment models
- Burdensome quality reporting
- Negative online reviews
- Expanding knowledge base with insufficient tools
- Lack of autonomy/work control
- Excessive time pressure
- Regulatory burdens
- Lack of actionable data
- Insufficient staffing
- Inadequate reimbursement
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Burnout: Signs of Improvement

Percent of Physicians Reporting at Least One Symptom of Burnout

- 2011: 45.5%
- 2014: 54.4%
- 2017: 43.9%

“To what can the improvement in the prevalence of physician burnout over the past 3 years be attributed?... It should be noted...that many large-scale efforts have been initiated at the national level to address this issue....by influential national organizations and accrediting bodies [like the] AMA.”

How Do Physicians Compare?

- Higher than other professional degrees
- In all other fields more education is *protective*, in medicine it is a *risk factor*

Professional Well-being Research Trajectory
Practice Transformation Initiative

- 2 initial pilot sites (Cleveland Clinic and Samaritan Health)
  - Initial assessment and guided interventions underway
- 2019 Request for application
  - 8 health systems recently awarded
- 2020 Request for application slated for late 2019
- AMA/Physicians Foundation collaboration with state medical societies
  - Washington State, North Carolina, New Jersey
  - Conducted initial Boot Camp Training on April 26/27th in Chicago
AMA Organizational Assessments

MINI Z ASSESSMENT
Measuring your organization’s well-being

How healthy is your health system?
Not knowing can cost you.
Influencing the Development of New Healthcare Digital Technologies

Industry: Xcertia

Product Development: Physician Innovation Network

Practice Support: Digital Health Playbook
Debunking Regulatory Myths

Debunking regulatory myths
The AMA provides regulatory clarification to physicians and their care teams in an effort to aid physicians in their day-to-day practice environment.

Ancillary staff and/or patient documentation
Who on the care team can document components of E/M services and what is the physician required to do?

Medical student documentation
Are teaching physicians required to re-document medical student entries in the patient record?

Computerized Provider Order Entry (CPOE)
Can a nurse, certified medical assistant (MA) or non-credentialed staff enter orders in the EHR as requested by the physician?

Want to debunk a regulatory myth?
Share your regulatory myth.

Contact Us
American Conference on Physician Health

ACPH 2019 | AMERICAN CONFERENCE ON PHYSICIAN HEALTH
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### The Joy Award: Recognition program criteria—levels of transformation

<table>
<thead>
<tr>
<th>Joy Award recognition criteria</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
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<tbody>
<tr>
<td><strong>Commitment</strong></td>
<td>Sign charter</td>
<td>CMO on the executive leadership team (report directly to CEO/equivalent) and with at least 0.5 FTE</td>
<td>Organization activates a center for physician well-being</td>
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<tr>
<td><strong>Assessment</strong></td>
<td>Annual assessment of physician well-being using a validated tool</td>
<td>Organization identified tangible benefits and/or individuals and supports implementation</td>
<td>The costs of physician burnout are estimated annually and reported to the organization’s leadership board</td>
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<td><strong>Leadership</strong></td>
<td>Annual assessment of all leaders using the Mega Leadership Index or similar instrument, with feedback to leader</td>
<td>Lead development program that includes: training in transformational leadership; ability to foster productive work environment and guide physician careers; and mentoring</td>
<td>Department creates (or designates) a center for physician well-being</td>
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<td><strong>Efficiency of practice environment</strong></td>
<td>“Work outside of work”</td>
<td>Work outside of work measured via EHR Audit for selected specialties</td>
<td>WOW!, results reported to organization’s board and physicians</td>
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<td><strong>Teamwork</strong></td>
<td>Teamwork measured annually using AMRO Teamwork Safety Attitudes Questionnaire or similar assessment</td>
<td>Teamwork also measured in select specialties via EHR Audit</td>
<td>Teamwork results reported confidentially to the AMA</td>
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<td><strong>Support</strong></td>
<td>Prior support program that supports dealing with adverse events (e.g., patient violence)</td>
<td>Prior support program that supports wellness programs</td>
<td>Supports opportunities for community building among physicians</td>
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1. These criteria are a minimum to achieve a maximizing year.
2. Silver and Gold levels criteria not yet defined.