



TIME TO ENGAGE OUR PHYSICIANS

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Organizations need enlightened leaders who recognize that health care is a human enterprise and not an assembly line product.

Ronald M. Epstein and Michael R. Privitera, 2016

Challenging Times

The health care field is experiencing unprecedented changes that threaten the survival of many institutions.² There is overwhelming evidence that to successfully overcome the challenges and maintain their mission, health care organizations must count on committed, productive and enthusiastic physicians working in close collaboration with the leadership.³

It is a fact that physicians are indispensable members of any health care organization, and the key players in the organization's efforts to fulfill its mission.

Unfortunately, a key finding of the *2016 Survey of America's Physicians* indicates that 54% of physicians rate their morale as negative, while as many struggle to provide patients with reasonable access to care.⁴ And several national studies show that over 45% of US physicians are

experiencing some degree of professional burnout, characterized by exhaustion, pessimism, and ineffectiveness at work.⁵

Burnout is not a reaction to hard work. For a period of time, genuinely satisfying work may require substantial personal sacrifice, but constant unrelieved work stress causes fatigue and diminishes the ability to sustain important work attributes such as effectiveness, satisfaction and caring.⁶

Physician engagement and participation are primarily an organization issue. Accordingly, meaningful progress will not be made until the drivers of burnout are addressed at the organization's leadership level. Too often health care organization executives erroneously assume that it is the sole responsibility of the individual provider, or that to cultivate physician well-being and

¹ Incorporated on December 31st 2015. Bijan Safai, MD, ScD, President of the Board; Luis R. Marcos, MD, Treasurer; Diana Goell Voigt, Esq., Secretary; Directors: Joseph T. English, MD; Rosa M. Gil, DSW; Balavenkatesh Kanna, MD; Andrew Wiznia, MD.

² Evans, M.: Hospitals face closures as "a new day in healthcare" dawns. *Modern Healthcare*, February 15, 2015.

³ Epstein, RM, Privitera, M.R.: Doing something about physician burnout. *www.thelancet.com* 388, 11, 5, 2016.

⁴ Survey of America's Physicians. Practice Patterns and Perspectives. The Physicians Foundation, September 2016. www.physiciansfoundation.org

⁵ Shanafelt, T.D., Hasan O., et al: Changes in Burnout and Satisfaction with Work-life Balance in Physicians and the General US Working Population 2011-2014. *Mayo Clinic Proc.* 90: 1600-1613, 2015.

⁶ Sharmila Dissanaik: How to prevent burnout. *The American Journal of Surgery* 212, 1251e1255, 2016.

motivation will conflict with other organizational objectives, or that all effective interventions will be cost prohibitive.⁷

Organization leadership must recognize and address physician burnout because it results in physicians' dissatisfaction and turnover, and undermines quality of care, clinician-patient communication, and patient experience,⁸ which are financially costly and deprive communities of needed care.

Low Physician Engagement at Home

Facing major financial challenges is the New York City Health + Hospitals System (NYC H+H), the organization responsible for the safety net hospitals and ambulatory services that provide care mostly to the city's underserved communities.⁹ Increasing competition from expanding private-nonprofit hospitals and community networks has become a serious threat to this municipal public health system, the largest in the country.

During 2014 and 2015, NYC H+H's operating loss increased to over \$1 billion annually as hospital admissions, clinic visits and revenue declined, and operating expenses edged upwards.¹⁰

In May 2015, Doctors Council –the physicians' union - with the support of the City, created “Collaboration Councils” and “Joint Committees” comprised of NYC H+H

managers and physician members with the purpose of allowing for the “input of frontline clinicians into decision making in order to enhance the organization's effectiveness of care.”¹¹

Regrettably, the potential impact of this initiative was undermined by persistent fears of layoffs and service closures. Those fears became a reality a few months later when 476 management positions were eliminated, and plans were developed to reduce administrators and clinicians from the medical affiliation budget, while NYC H+H's overall utilization and revenue continued to decline.¹²

In November 2016, NYC H+H hired Press Ganey Associates Inc. to conduct a Physician Engagement survey.¹³ Engagement is the antithesis of burnout and consists of high levels of enthusiasm, dedication, and absorption in work.¹⁴ The erosion of engagement with the organization leads to burnout. What started out as meaningful, and challenging work becomes unfulfilling, and meaningless.¹⁵

Not unexpected, the results of this engagement survey replicated the discouraging findings of the 2015 Press Ganey survey. Specifically, only 30% of the physicians participated, and their responses revealed an overall engagement score of 3.51, which placed NYC H+H physicians' engagement below 90% of all Press Ganey surveyed physicians or at the lowest 1st percentile of the National rank.

⁷ Colin P. West, Liselotte N. Dyrbye, Patricia J. Erwin, Tait D. Shanafelt: Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis. *Lancet*, 388: 2272–81, 2016.

⁸ Bernard P. Chang, Eileen Carter, Nina Ng, Caitlin Flynn, Timothy Tan: Association of clinician burnout and perceived clinician-patient communication. *American Journal of Emergency Medicine* (Accepted 2017).

⁹ www.nychealthandhospitals.org

¹⁰ Evans, M.: NYC Health and Hospitals sees operating loss soar. *Modern Healthcare*, November 26, 2015

¹¹ Memorandum of Agreement, Doctors Council SEIU, May 6, 2015.

¹² Alex Kacik: NYC Health & Hospitals eliminates 476 positions. *Modern Healthcare*, June 2, 2017. NYC H+H Key Indicators: FY17

¹³ Turner, Matt: NYC Health + Hospitals. 2016 Employee and Physician Voice Survey. Press Ganey, Jan. 2017.

¹⁴ Shimazu, A., et al: Work Engagement: an Emerging Concept. *Occup. Health Psychol. Biosci Trends* 2(1) 2, 2008.

¹⁵ Maslach, C., Wilmar B. Schaufeli, W.B., Leiter, M.P.: Job Burnout. *Annual Rev. Psychol.* 52:397–422, 2001.

In fact, the results showed evidence of low physician engagement relative to most health care organizations, including other safety net systems in the country.

Statements considered key drivers of physician engagement that were not endorsed or endorsed significantly below the national average included:

“This organization provides high-quality care and services.

“I have confidence this organization will be successful in the coming years.”

“I am satisfied with the overall performance of senior system administration.”

“I am satisfied with the recognition I receive.”

“I can easily communicate any ideas and concerns I may have to system administration.”

Physicians made known the lack of effective alignment and partnership with the organization leadership, and their written comments disclosed a negative appraisal of the work environment and adverse work experiences. These concerns were consistent with the August 2016 physician leaders’ expressed dissatisfaction about the lack of physician involvement in NYC H+H organizational decisions.¹⁶

The surveyor’s explicit warning: *“In the midst of unprecedented changes, improvement in quality, safety and financial outcomes hinges on strong working relationships with physicians.”*¹⁷

Strategies to Nurture Physician Engagement

There is a strong case for organizations to invest in efforts to increase physician engagement. And there is ample evidence that deliberate efforts to promote physician engagement can make a significant difference. Indeed, leadership and sustained attention from the highest level of the organization are the keys to progress.

Successful programs are those that consider physicians’ input and values as integral components of management policies and procedures, rather than viewing them as exogenous factors.¹⁸ Honest and transparent communication from the organization leadership, and physicians’ ability to join the discussion in meaningful ways are essential to engagement. “Physicians are the captains of the healthcare delivery ship, and if they are not on board with the leaders, no one will get far”.¹⁹

Recent publications, in particular by the Mayo Clinic, have identified successful strategies that promote physician engagement and prevent burnout.²⁰ They are summarized as follows:

- 1) Acknowledge the problem and measure physician engagement as a routine institutional performance metric critical to achieving the organization’s mission;
- 2) Select key physician leaders, and prepare them for their leadership role. The management style and behaviors of the physician leaders play a critical role in the engagement and motivation of the physicians they lead;

¹⁶ Communication from chiefs and senior physicians to the NYC H+H leadership. August, 2016.

¹⁷ Turner, Matt: NYC Health + Hospitals. 2016 Employee and Physician Voice Survey. Executive Overview. Press Ganey, January 2017 p.42.

¹⁸ Skillman, M., Caitlin Cross-Barnet, Friedman Singer, C., et al: Physician Engagement Strategies in Care Coordination: Findings from the Centers for Medicare & Medicaid Services’ Health Care Innovation Awards Program. *Health Services Research* 52:1, 2017.

¹⁹ M. Dowling: How to gain physician trust? Get back to the basics. *Becker’s Hospital Review*, July 19, 2017.

²⁰ Shanafelt, Tait D., Noseworthy, John H.: Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout. *Mayo Clin Proc.* 92(1): 129-146, 2017.

3) Be mindful of factors that influence the work culture, and periodically take stock of whether actions and values are aligned through honest self-appraisals;

4) Define the drivers of burnout by specialty and work unit, and address them locally. A general principle is to minimize clerical burden and maximize EMR support to facilitate physician efficiency;

5) Establish appropriate and achievable Incentives that will motivate physician engagement;

6) Promote policies of work flexibility. Physicians who spend 20% of their effort focused on the dimension of work they find most meaningful are at significantly lower risk for burnout e.g., caring for specific types of patients, patient education, quality improvement, community outreach, mentorship or teaching;

7) Cultivate peer support to help physicians share ideas and work challenges e.g., celebrate achievements, create doctors' lounge to foster peer connections;

8) Provide individual physicians with tools and resources to promote resilience e.g., address work-life integration, and personal health; and

9) Sponsor research to acquire new knowledge on how to promote engagement in physicians.

PAGNY Foundation Efforts

In December 2015, *Physician Affiliate Group of New York, P.C.* (PAGNY) established the *PAGNY Health and Research Foundation, Inc.* (PAGNY Foundation), a not for profit 501(c) (3) organization, to support the commitment of our physicians to enhance the delivery of health care to

the communities they serve, and conduct pertinent biomedical and population health research that will enhance the success of NYC H+H.

Specific to physician engagement, The PAGNY Foundation seeks collaborative grant opportunities to sponsor and support, in partnership with NYC H+H, specific initiatives to assess, improve and sustain physician participation and engagement that will contribute to better patient care and satisfaction.

First Steps

In 2014, PAGNY management embarked on a signage project throughout the affiliated hospitals to begin to address the lack of awareness of the community and patients about PAGNY physicians and the excellent care they provide, and to clearly express their alignment with the public mission of NYC H+H. PAGNY installed multiple banners in highly trafficked areas, brass plaques outside each hospital's main entrance, and an electronic version on the public monitors. This tribute to PAGNY doctors received the enthusiastic support of the physicians and the executive leadership of the facilities.

To boost physicians' work satisfaction, PAGNY management assessed the need for doctors' lounges in affiliated hospitals. Most institutions have not been kind to the Doctors' Lounge for fear of undermining physician productivity. However, the lack of a quiet place where physicians can interact with colleagues, de-stress or just catch up with paperwork has been a contributor to work dissatisfaction.²¹ In 2017, the PAGNY Foundation supported the renovation of the doctors' lounge at Harlem Hospital. PAGNY is planning additional doctors' lounges at other affiliated facilities.

²¹ Lowes, R.: Doctors' lounge: a tradition slowly dies. *Medical Economics*, 83(3); 28-30, 2006.

Focus: Physician Leadership

Evidence suggests that the leadership behaviors of the physician leader play a critical role in the engagement of the physicians they lead. For example, a recent study by the Mayo Clinic found that each 1-point increase in the leadership score of a physician's immediate supervisor (service chief/department chair) was associated with a 3.3% significant decrease in the likelihood of burnout, and a 9.0% increase in satisfaction for individual physicians.²²

In 2016, cognizant of the importance of physician leadership for the healthy engagement of the clinicians, PAGNY Human Resources, with the support of the PAGNY Foundation, engaged coaching experts, on a pilot basis, to provide one-on-one executive coaching to selected chairs and chiefs. The goals include assessment of the perception of own leadership effectiveness, level of physician engagement, drivers of motivation, and opportunities for improvement. This program has created much enthusiasm among PAGNY physician leaders.

In addition, to this individualized coaching, PAGNY Human Resources partnered with the PAGNY Foundation and with Lee Hecht Harrison, a global firm that specializes in leadership training. The purpose is to create a program to facilitate leadership skills development. The program is carried out in 7 modules with group and individual coaching.

The leadership program kicked-off with a group of 14 physician leaders from Jacobi Medical Center and North Central Bronx, and ran from April through July 2016. The individual coaching sessions continued through November 2016. The

program received outstanding evaluations from the participants.

A second leadership program was completed for a group of 13 physician leaders from Harlem Hospital, which ran from April through July 2017. The individual coaching continued through August 2017. Upon conclusion, the participants anonymously completed a self-evaluation questionnaire.²³ The results showed that 91% of the physicians saw improvement in the competencies of leveraging conflict and communicating internally; 83% saw improvement in leading optimal performing teams; and 82% expressed a marked improvement in their response to the key engagement question:

"I engage and enable the whole organization by gaining buy-in, enabling action and creating short term wins."

Discussions with physicians and hospital leadership are underway with the goal of providing the program to the next group of chairs/chiefs of service.

Next Steps

Encouraged by these preliminary positive results, and convinced that there are business and ethical imperatives to face and heal physician disengagement, the PAGNY Foundation is underwriting grant applications to work with the physician leadership at all PAGNY affiliated facilities with the objective of ascertaining the factors that influence physician burnout in safety net health organizations, and implement, with the support of NYC H+H, those reliable programs that will enhance and protect physician engagement.

²² Shanafelt, T.D., Gorringer, G., et al: Impact of Organizational Leadership on Physician Burnout and Satisfaction. *Mayo Clinic Proc.* 90(4): 432-440, 2015.

²³ Lee Hecht Harrison, PAGNY and LHH, Measuring Coaching Impact, September 2017.