

Disclosure of Affiliations, Financial Support, and Mitigating Bias

Speaker Name: Dr Sarah Smith

Affiliations: List relationships with for-profit or not-for-profit organizations:

- Grants/Research Support: Nil
- Speakers Bureau/Honoraria: Nil.
- Consulting Fees: Nil.
- Other: Contracted Physician of Edson Hospital, Board Member and Owner of Edson Medical Centre, Owner/Director and Coach at Reach Career Coaching Inc, Physician Member of McLeod River Primary Care Network, Alberta College of Family Physicians Member Advisory Council Member

Financial Support: Please choose the statement(s) that best describes your disclosure:

- The Speaker has received honorarium from the Northern Ontario School of Medicine Mitigating Potential Bias: No medications or therapeutic goods will be discussed. This presentation is for educational purposes and not for marketing



Wife, Mother, Friend, Daughter, Entrepreneur, Small Farm Owner, Adventurer, Hobby Photographer



Welcome!

I'm Sarah Smith

Rural Family Physician

Charting Coach





Tips from the Charting Coach

Learning Objectives:

1.Identify techniques to make charting more efficient.
2.Describe ways to improve office management.

Why Physician Coaches and why a Charting Coach? Life Coaching can bring transformation in any area

We have evidence that General Life Coaching reduces emotional exhaustion and burnout in Physicians

Original Investigation | Physician Work Environment and Well-Being

August 5, 2019

Effect of a Professional Coaching Intervention on the Well-being and Distress of Physicians

A Pilot Randomized Clinical Trial

Liselotte N. Dyrbye, MD, MHPE¹; Tait D. Shanafelt, MD²; Priscilla R. Gill, EdD³; et al

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Results Among the 88 physicians in the study (48 women and 40 men), after 6 months of professional coaching, emotional exhaustion decreased by a mean (SD) of 5.2 (8.7) points in the intervention group compared with an increase of 1.5 (7.7) points in the control group by the end of the study (*P*<.001). Absolute rates of high emotional exhaustion at 5 months decreased by 19.5% in the intervention group and increased by 9.8% in the control group (-29.3% [95% CI, -34.0% to -24.6%]) (*P*<.001). Absolute rates of overall burnout at 5 months also decreased by 17.1% in the intervention group and increased by 4.9% in the control group (-22.0% [95% CI, -25.2% to -18.7%]) (*P*<.001). Quality of life improved by a mean (SD) of 1.2 (2.5) points in the intervention group compared with 0.1 (1.7) points in the control group (1.1 points [95% CI, 0.04-2.1 points]) (*P*=.005), and resilience scores improved by a mean (SD) of 1.3 (5.2) points in the intervention group compared with 0.6 (4.0) points in the control group (0.7 points [95% CI, 0.0-3.0 points]) (*P*=.04). No statistically significant differences in depersonalization, job satisfaction, engagement, or meaning in work were observed.

Conclusions and Relevance Professional coaching may be an effective way to reduce emotional exhaustion and overall burnout as well as improve quality of life and resilience for some physicians.

Participants received

a total of 3.5 hours of coaching over 6 months



Let's Talk Mental Load

When I ask Physicians about Mental Load, while it's occasionally the patient load More commonly it is the

Charting, Paperwork and Administration Burden

Interruptions Phone Calls Task lists and Inboxes Forms Outstanding Referrals Difficult Patients Too Many Issues in Consultations

Too Many Patients Business and Staff Issues Billing Insurance Requirements Printer Not Working It's your turn to do the CME talk this month

Patients not in Rooms
No Shows

17 clicks to Re-Prescribe One Medication "Can I ask you about the Covid Vaccine?"

Can you fit in her daughter as well?

200 items in your Inbox

Your Printer is out of paper

I left a message on your desk

Can you take a call from Mr. Smith

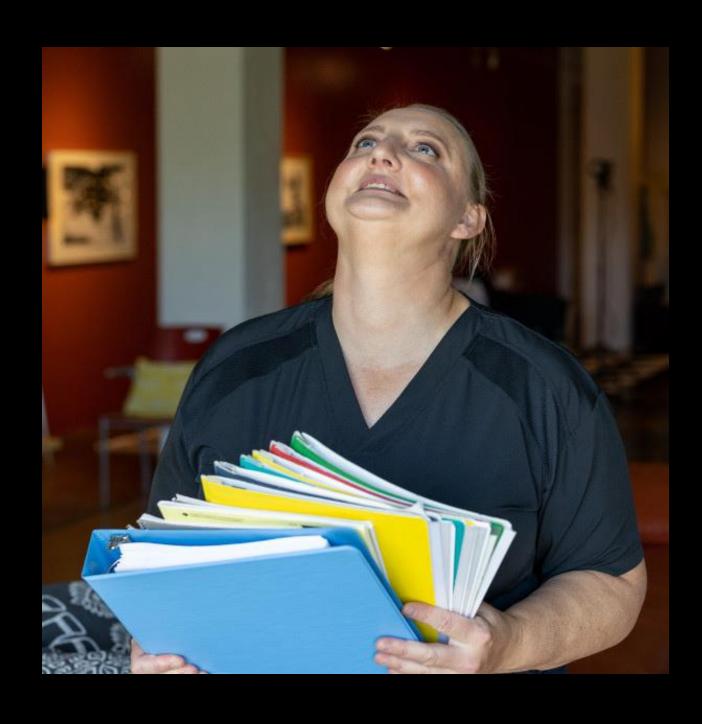
Repeat CT in 12 months Have you finished Mary's form yet Have you seen the Cryotherapy Flask? By the way, there's a meeting at lunch today The staff want to discuss Bonuses There's a critical lab call for you

Have you seen the PAP LIGHT!! I need a Chaperone 67 unread emails I forgot my Discharge Med list Can you renew my white pills? When was my last mammogram?

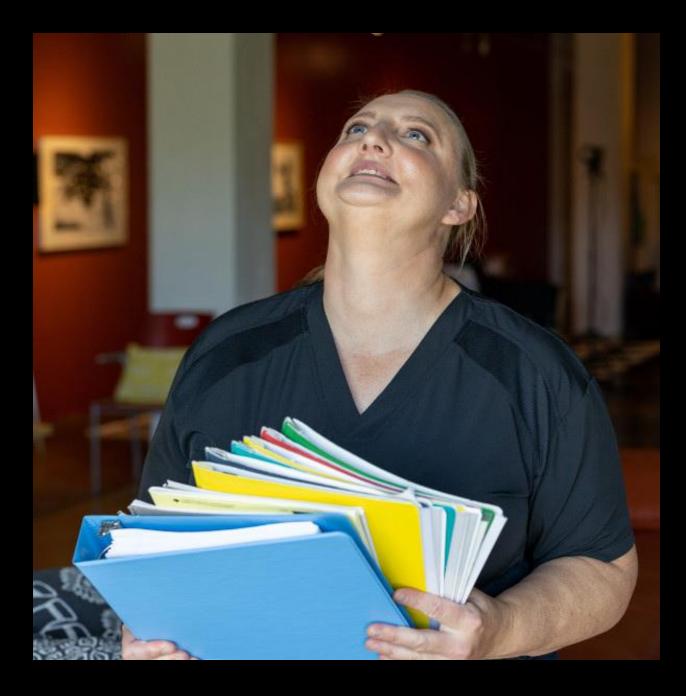
Oh, by the way Doc I also need this form to complete that referral I brought a list as I haven't seen you in a while While I'm here can I ask you about Johnny So, After all that, tell me again,
Why can't you get your Charting, Paperwork,
Messages and Forms Done?

So, After all that, tell me again, Why can't you get your Charting Done?

Decision Fatigue Burn-out Frustrated Overwhelmed Distracted Exhausted



- I'm never done.
- · Not even when I get home.
- I am not present.
- I chart at night.
- My holidays are often a relief as I can catch up on my charting.
- Shouldn't I be better at this by now?



- I would love my job if I could just be done
- I feel constantly distracted
- I dread going to work
- I don't want to refer patients as it's something to add to my worklist

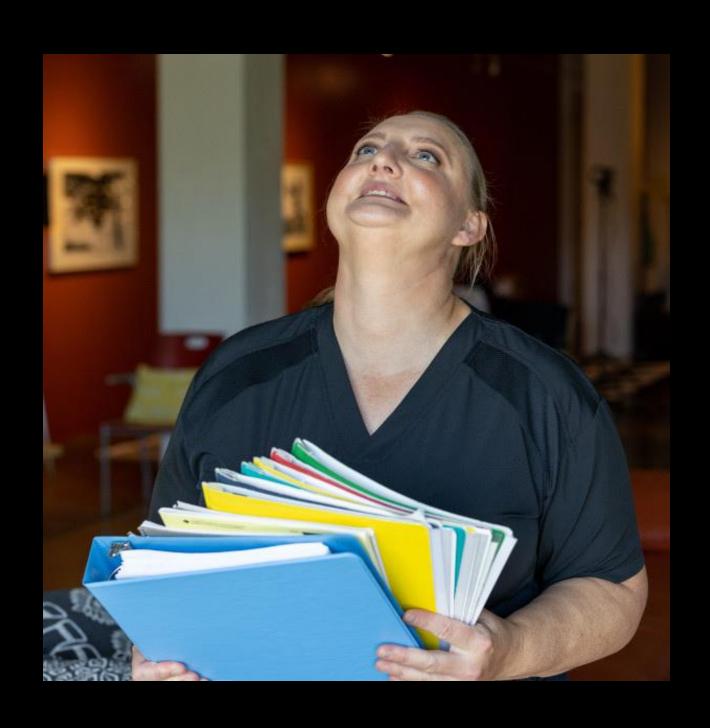


Or Perhaps: I've thought about leaving medicine, but this makes me feel enormous guilt and all because of the damn paperwork



At the end of the day after the last patient there is a sense of Relief for a brief moment

Followed by exhaustion and overwhelm



Do you start with the:

Charts Inboxes Messages Script Refills Phone Calls Referral letters Forms....



Of course, It really doesn't matter where you start because actually you have to go get the kids, and cook dinner. So you leave it for later...

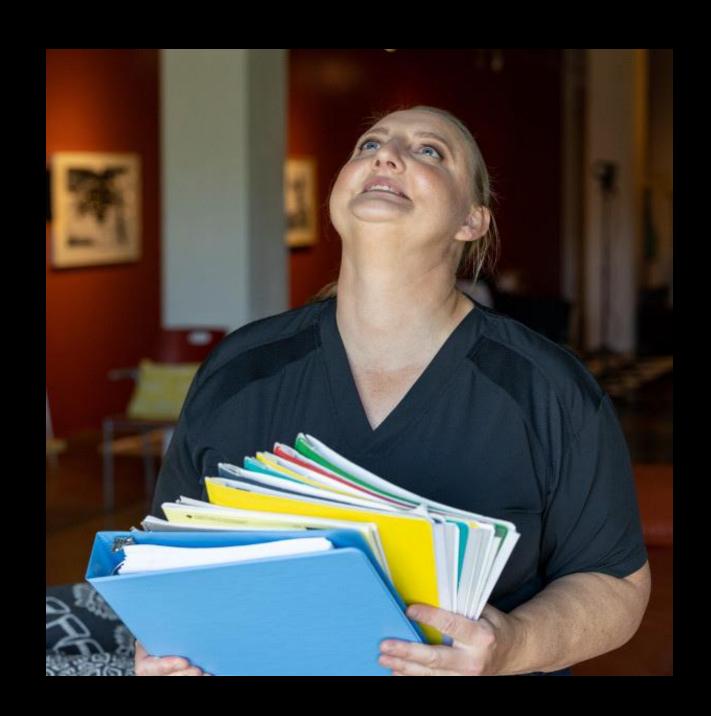


You know what that means...

Once the kids are in bed you push yourself to back in front of that damn computer. Wine in hand, Facebook on your phone leaning up against the computer.

You settle in for another round of Charting and Paperwork.

And Sometimes



You just can't

You go to bed instead
Only to be woken at 0200
with a little voice

"You're not sleeping anyway, you should just get those charts done"



Or Perhaps instead you refuse to Chart at Night

but I get up in the really early

Before everyone is up and

and spend two or three hours in the morning, Charting



Whether it's to help you get home earlier or enjoy work again or create time

It's Time to Help You

Stop Charting at Night



It's time to break you free of the Paperwork

Help you ease that
Mental Burden

And Bring back Joy to your Clinical Day



Let's talk about how to

Stop Charting at Night



We will need to take a 360 degree look at your Clinical Day

We will need to Overcome:
Overwhelm, Frustration
And take back Control
of your clinical day



How is that Possible?

What are the Actual Steps to make Permanent Changes in your Clinical Day?



Step 1: Complete your Charting

after every Patient, Even When...

Step 2: Evaluate and Lead your Consultations

Step 3: Develop your Exact Plan

for Inboxes, Worklists and Forms

Step 4: Evaluate Interruptions, Distractions

and System Processes in your Clinical

Environment



Step 1: Complete your Charting after every Patient, Even When...

This is the Most Important Step



Step 1: Complete your Charting after every Patient, Even When...

Even When....

- You are running 15 minutes late to clinic
- You are 20 minutes Behind
- There's a Baby crying in the next Room
- · You fit in an extra patient or two



But Charting every consultation is IMPOSSIBLE

Isn't it?

One Physician I coached found 139 reasons why this wouldn't work

and She was finishing her charts after every patient within days!



But Charting every consultation is IMPOSSIBLE

How is it Possible?



Charting every consultation How is it Possible?

Evaluate:

- What is in your notes and Why
- What is your brain telling you is more important than the note
- How and where could you get the note done if you wanted to
 - What stops you



Charting every consultation How is it Possible?

Evaluate:
What stops you?

We call these Obstacles



What stops you?

For every Obstacle you will need to find a Solution

We want to be on the lookout for your most SIMPLE Solution



Step 2: Evaluate and Lead your Consultations
What is Leading the Consultation?



Step 2: Evaluate and Lead your Consultations What is Leading the Consultation?

- Knowing your Value in the Room
- Evaluating all the Minutes and Seconds in the Room
- Making Decisions with Now and Later in mind



Step 3: Develop your Exact Plan for Inboxes, Worklists and Forms

What is an Exact Plan?



Step 3: Develop your Exact Plan for Inboxes, Worklists and Forms

What is an Exact Plan?

- Having a Structured Priority for Worklists
- Carving out Protected Time
- Building Strategies for the results that slow you down
- Overcoming Distractions



Step 4: Evaluate Interruptions, Distractions and System Processes in your Clinical Environment

But I have no Control over my Interruptions



Step 4: Evaluate Interruptions, Distractions and System Processes in your Clinical Environment

But I have no Control over my Interruptions

And I'm not a Clinic Owner so I can't make any system changes ...



Interruptions create Decision Fatigue Every interruption requires 5 decisions

- What is going on right now
 - How far behind am I
- Can I do that quickly or do I have to open the chart
- Can I do that today or will I task it for later
 - If I do that now

what is the consequence for the day



Interruptions create Decision Fatigue Every interruption requires 5 decisions

- If batch even some of your decisions, we will reduce your decision fatigue
- You can set boundaries and redesign some of the systems and processes
 - It will require you thinking about How you do Business,

not just being in the Busyness of your day



How will it ever Change?

Change will only happen when you start evaluating your current result and the process that creates that result and redesigning your day to get a different result

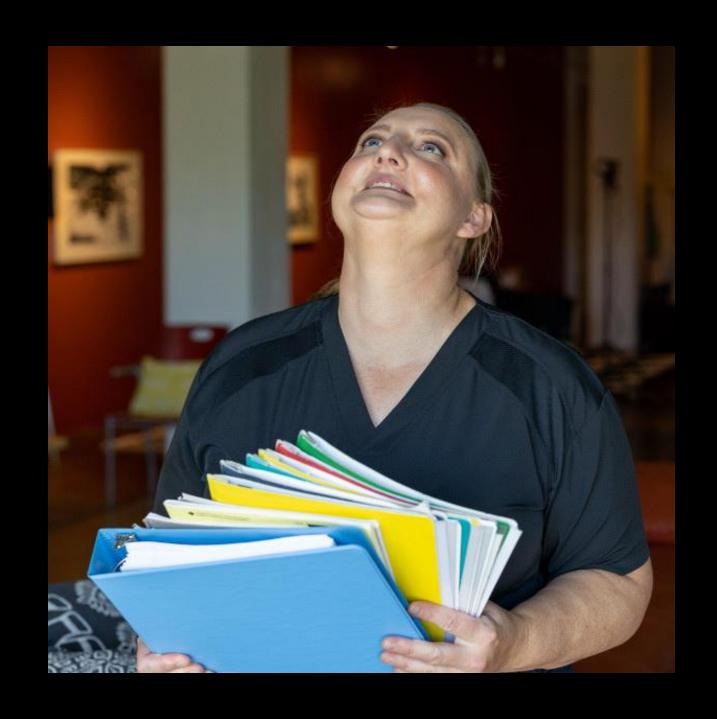


How many hours do you think You spend Charting, outside of the clinical workday, each week?

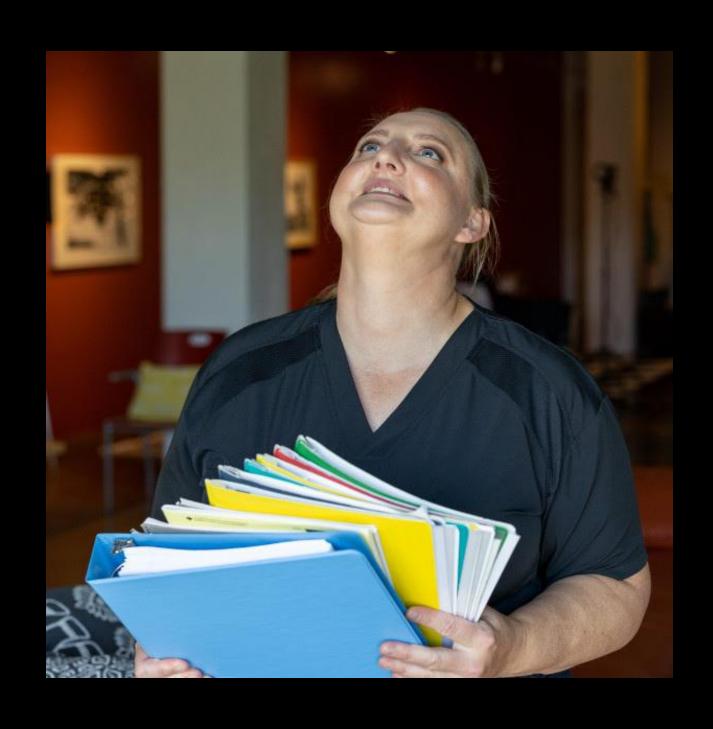


Many Physicians are spending at least 6 hours a week

What could you do with an extra 6 hours a week or 300+ hours a Year?



What is the true cost of Charting and Paperwork outside of your work hours?



Physician Mental Load

Unpaid Hours of Work contributing to Physician Underearning

Lost Time for Health, Family, Recovery



What would be different about your Clinical Day if your Charting was done?

Imagine walking into

the 12th Patient of the Day

and all your charting is done



What would be different about your Clinical Day if your Charting was done?



What would be different about your Clinical Day if your Charting was done?

I can see more patients
I get home Hours Earlier
I feel Energized at the end of the Day
I feel in Control of my Day
I don't dread work any more



What would be different about your Evening if your Charting was done?



What would be different about your Evening if your Charting was done?

Better Sleep
More Present at Home
Read a Book
Feel Reliable
Exercise



What would be different about your Evening if your Charting was done?

More relaxed
Free to explore hobbies
Enjoy time with the kids
Feel free to sleep in

Take Home Messages

If you consider your Charting, Consultations, Forms, Inboxes or Backlog, what would you love to create?

Ask your Brain to answer this question: "It Would be awesome if..."

Why do you want to Create this Result?

Take Home Messages

Take just one thing you learned today and start doing that.

What is one thing you could do Today to start moving toward that result?

Remember: If you are committed to achieving this result then Success and Failure are both amazing because they BOTH mean you are taking action toward your goal

Quitting is Optional and Wishing is just Quitting Ahead of Time.

References

Effect of a Professional Coaching Intervention on the Well-being and Distress of Physicians A Pilot Randomized Clinical Trial *JAMA Intern Med.* 2019;179(10):1406-1414