Engaging Physicians

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About 24,100,000 results!!!

Hot Topic!!!
• “Employment Engages Physicians”
• “Credible Data Motivates Improvement”
• “Committed Hospital Leadership Engenders Physician Support”
• “Physician Champions Foster Broader Participation”
• “Effective Communication Spurs Involvement”
What is the Culture of Physicians?

• “Culture eats process for lunch” Ancient Proverb

• Culture is the shared:
  – Attitudes
  – Beliefs
  – Goals
  – Practices

• I think you’ll agree that nursing culture and physician culture are different—yes?

• Take a look at these…
Myers Briggs

• Nurses—Feeling and Judging
  – ISFJ—Nurturer
  – ESFJ—Providers

• Doctors—Thinking and Judging
  – ISTJ—Inspector
  – INTJ—Mastermind
Google Images—which are doctors and which are nurses?
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• I think you’ll agree that nursing culture and physician culture are different—yes?
• We have to be good sociologists and approach culture as NOT inherently bad, right?
Physicians Attitudes

• What are some attitudes you have learned that typify physicians?
Physicians Attitudes

- I do not need someone to tell me how to do it.
- If you will listen, I’ll help you understand.
- I have achieved my position by working hard.
- I am overburdened by regulations.
- Hospital administrators are suspect.
- I know quite a bit about everything.
- People like me.
- The hospital is fortunate to have me on staff.
Physicians Beliefs

• What are some beliefs you have learned that typify physicians?
Physician Beliefs

• I practice as good as the next doctor, or better.
• “There are lies, there are damned lies, and then there are statistics.”
• Patients who don’t take their medicines are just noncompliant.
• The government is inept.
• Electronic records will slow me down.
• When I write an order, it ought to be followed.
Physicians Goals

• What are some goals you have learned that typify physicians?
Physicians Goals

- Be considered highly competent by peers
- Good relationships with patient
- Improve patients’ health
- Engage colleagues
- Get home at reasonable time
Physicians Practices

• What are some practices you have learned that typify physicians?
Physician “Practices”

• Compulsive about details
• Organized in daily life
• Discuss concepts
• Routines are important
• Focus on Big Picture
• Make decision and move on
Step 1: Consider yourself an ambassador to another culture

- Based on the Culture of physicians, where are the opportunities to engage them?
  - What are our shared goals?
  - What are the attitudes we can use to get their attention?
  - What are the practices that will provide our team strength?
Kotter’s *eight steps* to leading organizational change
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**Step one:** Establish a sense of urgency

**Step two:** Create coalition of power

**Step three:** Develop a vision and strategy

**Step four:** Communicate the vision

**Step five:** Empower others to act

**Steps six:** Generate short-term wins

**Step seven:** Consolidating improvements

**Step eight:** Institutionalize new approaches
Kotter’s *eight steps* to leading organizational change

**Step one:** Establish a sense of urgency

- I believe Value-based Purchasing is a VERY URGENT issue
- What are the other things occurring in Medicine that are URGENT?
Kotter’s *eight steps* to leading organizational change

**Step two:** Create coalition of power

- Who are the power brokers among the physicians?
- Do they have power under control, or are they destructive?
- Blessed are the meek for they will inherit the earth!
Kotter’s *eight steps* to leading organizational change

**Step three:** Develop a vision and strategy

- Based on what we have been learning, how can we ensure that physicians feel like the “own” the vision and the strategy?
- How much time might it take to develop a shared vision and strategy with physicians here?
Kotter’s *eight steps* to leading organizational change

**Step four:** Communicate the vision

- What kind of communication works with physicians?
- What “language” do physicians speak?
- Considering their culture, what needs to be in the message?
Kotter’s *eight steps* to leading organizational change

**Step five:** Empower others to act

- How are you going to empower physicians?
- Believe it or not, the past 20 years have led physicians to feel fairly powerless in the hospital.
  - When people feel powerless, what do they do? How do they act?
  - Withdrawal? Bad behavior? Rebellion?
- What can you do differently to empower them?
Kotter’s *eight steps* to leading organizational change

**Steps six:** Generate short-term wins

- What short-term wins do you think physicians would appreciate? What kind of wins, based on their culture would engage their support?
Kotter’s *eight steps* to leading organizational change

**Step seven:** Consolidating improvements

**Step eight:** Institutionalize new approaches

- These are steps that will only occur if you are successful in steps 1-6.

- Considering the culture of physicians, what are the hazards that might jeopardize your relationships at this point?
  - Recognition
  - Losing their engagement—what’s next?
Schon: Change in Social Systems

- Schon wrote about the *Stable State*.
- Groups believe in a Stable State because it protects them from the anxiety of *Uncertainty*.
- Institutions have *Dynamic Conservatism*, and fight to stay the same.
- In Reality, there is NO stable state. Social Systems are constantly in flux.

Schön, D. A. (1973) *Beyond the Stable State*. 
Your Stories

• What has engaged physicians at Your Institution in the past? How did it happen? What were the positive (and negative?) outcomes?
What is Saint Luke’s Care?

• We are a physician-led organization.
• We place clinicians in the “driver’s seat” to impact care delivery in their clinical settings.
• SLC improves patient outcomes by implementing evidence-based medicine and standardizing practice.
What is Saint Luke’s Care?

• Ten Evidence-based Practice Teams (EPTs) have developed and deployed over 200 standardized order sets, nursing guidelines, and physician education modules. —organized around specialty and product-line.
Evidence-Based Practice Teams

- Medicine
- Anesthesia
- Critical Care
- Neuro
- Cardiovascular

...or should we say Value-based Purchasing Teams?
What is Saint Luke’s Care?

• We obtain ideas for our initiatives from national quality recommendations and the most up-to-date, high-quality research.
  • Subgroups of clinicians from our EPTs develop these ideas into projects,
  • Disseminated to SLC members seeking their comments and feedback.
  • Data on the effects of the projects are tracked by SLC and presented back to the EPT for further refinement.
What is Saint Luke’s Care?

• Over 60% of SLHS staff physicians have volunteered to be members of SLC.
  • Only a third of these are employed by SLHS.
  • 85% of our admitting physicians are SLC members
• In order to improve patient outcomes, member engagement is critical.
  • We update physicians through email, newsletters, EPT meetings, and informing our Board of Directors.
Why Physicians Join Saint Luke's Care

• In Summary…
  – SLC is an innovative organization focused on improving quality and efficiency of medical practice.
  – SLC is a physician-led team.
  – SLC physicians are recognized publicly for a commitment to quality.
  – SLC physicians are involved in the development and implementation of system-wide best practices.
SLC Membership in 2009 said:

- 91% of the physician respondents would recommend Saint Luke’s Care membership to others.
- 86% believed that Saint Luke’s Care initiatives have improved patient care!
- 86% ranked their satisfaction with the six Evidence-based Practice Teams (EPT) as “good” to “excellent”.

- 259/515 (51%) of members responded
Case Study: What could you do to engage your physicians?

• Your CNO is concerned about urinary catheters. The CMS Value-based Purchasing plan for 2014 includes a new process measure of Post-op Urinary Catheter Removal (SCIP-INF-9).

• CAUTI is already NOT reimbursed by CMS.

• Data at CMS for our hospital shows:
Surgery patients whose urinary catheters were removed on the first or second day after surgery.

Top Hospitals 100%

The rates displayed in this graph are from data reported for discharges January 2010 through June 2010.

- Average for all Reporting Hospitals in The United States: 90%
- Average for all Reporting Hospitals in Kansas: 86%
- Their Hospital Center: 95%
- Other Hospital Center: 99%
- Our Hospital Center: 78%

Top Hospitals represents the top 10% of hospitals nationwide. Top hospitals achieved a 100% rate or better.
Case Study: What could you do to engage your physicians?

- CNO comes to your group and asks you to develop an initiative that will:
  - Decrease foley catheter days
  - Ensure foley catheter removal by POD #2
  - Decrease CAUTI

- Taking what you have learned today into consideration, how can you engage the doctors and meet these goals?