

HCCIntelligence™ present
Self-Care: Avoiding Burnout and Maximizing You and Your Team

Q: How do I recognize when stress moves to burnout in my staff?

A: Stress is a body reaction to change and many people can recognize when a change has occurred and individual or team has stress around the situation. However, burnout is the manifestation of prolonged stress. Burnout can appear as a lack of motivation, depersonalization, and removal of an individual from a situation. Look for low effectiveness, expression of exhaustion, isolation, and low achievement in provider or office staff. If stress is the first building block to burnout, it is better to address it before it gets to that level. Recognize when staff has stopped showing passion in their work. The people that used to come with solutions and now have demonstrated a different approach to issues. While formal assessment forms are available, we do not use them at HomeCare Physicians. There is an informal periodic check-in with my providers in the office, and regular staff and provider meetings and discuss stressors related to work.

There are challenges, and the stress is how we react to it. We can deal with stress and burnout on three different levels: 1) take courses that talk about how to deal with stress; 2) as a practice or staff come together to talk about it and how to share the burden; and 3) remember that is rewarding and challenging at the same time. How we respond as individuals also helps us cope with stress. Coaching that helps recognize cognitive errors – black or white thinking, jumping to conclusions, doing catastrophic thinking – all of which can add to personal stress. Having someone help coach you through these cognitive errors can help you cope with stress as well. Taking care of complex patients at home as the lone provider is one of the unique stressors for HBPC providers. Stepping into challenging home environments (such as clutter or odor, or dysfunctional functional dynamics) are additional stressors for providers. Having the desire to fix all of the patient’s ailments quickly and feeling overwhelmed by medical and social complexities can be challenging for providers as well.

Q: What are some stressors that exist within the home-based medical practices that I should know about if I haven’t started my practice yet?

A: New practices can face a myriad of challenges, including, but not limited to: financial concerns, staffing issues, compensation practices, administrative and logistical issues. During times of growth and transformation, all size organizations go through growing pains. It’s important to create a culture that aligns with your mission and vision. Providing your team with clarity during unclear times is challenging, but necessary to help reduce stress.

Q: What are some motivating team appreciation events or activities? Do you have a process to recognize team members?

A: There is no one right way to motivate a team or individual. It’s important to be dialed into the motivations of your staff. If you can find the right motivator, your team will follow you. Some ideas are big: company picnic, holiday parties, recognition lunches. Smaller, more personal forms of recognition are sometimes more impactful: a handwritten thank you note for a job well done, a public shout out for success, a giftcard, or small gift. Recognizing individuals in the way that makes them feel more motivated will pay dividends for the success of the team, the company, and ultimately the patient. We have seen branded polos and vests which might just

feel like a thing, but it can mean pride in the organization that they work. It is a unifying look and feel that can be comforting.

Dr. Chiang provided a few examples of what HomeCare Physicians does within their offices:

1. Caught in the act bucket – where you write down something that was done and celebrate that at a staff meeting.
2. Thankful bucket – write down something you are thankful for in your personal or professional life – and add it to the bucket.
3. Jedi skills bucket – what skill do you have that is amazing?
4. Wish list – something that a staff member wishes of the health system.

Additionally, Dr. Chiang added that it is important to encourage yourself that you are on a bigger mission in life rather than RVUs and money. This can help get through those challenging and difficult days.

Q: At the Fall UCD Neurology Conference, we had a very enlightening talk by a psychiatrist who heads an anonymous web site for medical professionals to help reduce burnout and save lives from suicide. Stanford also has a program online.

A: Reach out to psychologists in the local community who has experience in work stress, burnout, and cognitive errors who may be able to come to an office staff meeting to educate providers on stress management, cognitive errors and/or counseling. It is proactive on an administrative policy standpoint to make sure the resources are provided early. We don't talk about it enough before a suicide event has happened, and that is something that looking into resources is very important. There are national and local resources that are provided, EAP programs have opportunities to talk to someone, FMLA and how to use that to help meet personal needs.

Q: I would ask where someone could find more information or counseling on cognitive errors as mentioned by Dr. Chiang; this would be tremendously helpful to my homebased team.

A: It was heard about at a pain conference originally. Our patients are prone to it; i.e. it is all or nothing, this is never going to work, etc. There are caregivers that can feel this too because they feel like they are never giving/doing enough. There are resources out there which can be helpful but costly. A professional speaker or motivational speaker can go to practices and aid in dealing with stress and burnout. There are podcasts which cover the topic that can be great talking points. Psychology Today also provides an overview of 50 common cognitive distortions and ways to become mindful of them:

<https://www.psychologytoday.com/us/blog/in-practice/201301/50-common-cognitive-distortions>

Q: From a provider's perspective, any tips on how you've maintained a work-life balance? Please include feedback/information on compartmentalizing as this was something many of the learners related to.

A: It is difficult to reestablish the balance. Dr Chiang provided some suggestions: 1) clearly define roles of each member in the office so that everyone can work efficiently; 2) maximize work efficiency. This may involve improving documentation skills in EMR (such as smart phrases and templates), geographic

scheduling, pre-charting, and or using voice recognition software to minimize keystroke, 3) Complete phone calls and charting while at work and avoid bringing work home (minimize or eliminate "pajama time"), 4) Have a "reasonable" work load each day, 5) Protect "off time" by sharing on call duties, turning off the cell phone, 6) Connect work to a larger purpose or calling/mission; something that is bigger than oneself. Compartmentalizing your life, compartmentalize work. Charting should be done as much as possible during work and bringing work home doesn't help with stress and burnout. "Pajama time" as it is known can add to the stress and burnout of providers. Things change, they can change over time and vary by person. Earlier in your career you may need more time, whereas later you might need less time. We care for people who care for others, so we need to ensure that we are renewed enough to be there for them. Some use exercise as a way to think about work while others use that as their time, for example. Watch for your body and family life to make sure you watch for those balances. Realize that you can set boundaries and it is okay to do so. Work on contingency plans for after hours, if there is something that is inappropriate you can ask for help, and when documenting – if there is time during business hours to get it completed it can give some more time back in the home.