

Lean In, Hang Tough, Let Go: Individual Longitudinal and Directed Coaching For Physicians With or Near Burnout.

An individualized physician coaching engagement with a focus on optimizing work/life balance, developing leadership skills, enhancing academic interests, improving communication skills, (re)bolstering sense of physician meaning in patient care, fostering skills of resilience and acceptance, and moving from surviving towards thriving.

Introduction

Physician Wellness is not a trite cliché. Physicians are struggling with a variety of challenges that negatively affect many aspects of their professional and personal lives (Boet). Many admit to feeling burnout, moral distress, dissatisfaction, depression, anger and even fear. Symptoms of burnout are classically described as feelings of exhaustion, negativism and reduced personal efficacy at work. Physician burnout is associated with an increase in medical error, higher rates of patient mortality, high job turnover, depression, and suicide (Wallace, Ishak). Many of the contributing factors are extremely difficult to manage from an individual and institutional perspective as they are simply too broad in scope (aging population, erosion of primary care, health staffing challenges, resource allocation and limitations, etc). Thankfully some positive strategies, specifically physician coaching, exist on an individual and physician community level that can be learned, harnessed and propagated (Boet). The purpose of this longitudinal, individualized and directed physician coaching engagement is to try and do just that.

Background and Problem

Physician well-being is suffering. While potentially helpful measures are underway from local, regional and provincial bodies, the day to day challenges faced by physicians working to provide timely, compassionate and comprehensive patient care are legion. And are likely to persist for months/years to come. Physician coaching is a demonstrated, readily available and positive intervention towards improving burnout (Boet).

Professional coaching has been found to improve well-being and performance across many industries including corporate, government and finance (Theeboom). Coaching uses inquiry around perceptions, beliefs, and habits to define, reframe, and align work with personal values. The International Coaching Federation (ICF) defines coaching as "a thought-provoking and creative process that inspires (participants) to maximize their personal and professional potential." Delivered by trained coaches, coaching is a proactive and action-oriented intervention intended to empower individuals and teams with self-discovery, strength-building and self-efficacy (ICF).

Targeted physician coaching is a relatively new construct. Available literature shows that it has positive effects in the arena of better managing work/life balance, ameliorating workplace communication, understanding personal values and meaning, directing individual and team development, enhancing present moment awareness, mitigating symptoms of burnout, fostering resilience and improving overall job satisfaction (Boet, Gazelle, Guck, Dyrbye).

Intervention and Usability

This program involves a certified ICF coach/physician engaging in 6-10 one-hour 1:1 sessions with a physician client. The coach and client are expected to meet virtually for one hour every 2-3 weeks where through a variety of lessons, tools and exploration, an individualized approach towards optimizing work/life balance, developing leadership skills, enhancing academic interests, improving communication skills, (re)bolstering sense of physician meaning in patient care, fostering skills of resilience, acceptance, and self-compassion, and moving from surviving towards thriving, will be established.

There will be one hour/week of independent study for each physician client; mostly focused on reflection and awareness of their skill development.

Measurability and Scalability

To assess baseline and post intervention symptoms of burnout and self-compassion, participants will complete both the Maslach Burnout Inventory (Maslach) and the Neff's Self-Compassion Scale (Neff) before and after the course. A brief post course qualitative survey will also be solicited from all client participants.

Expected outcomes based on literature review and personal experience is for a positive and useful effect. Given the breadth and scope of physician involvement in patient care, this positive effect has the potential to spread in part to all relevant interacting teams and systems.

References:

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