

Wellness Strategies for a Healthy Practice Team

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JULY 23-24, 2021

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Conflicts of Interest

- Member of AAAAI Practice Management Committee
- Member of AAAAI PMW Planning Committee

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Overview

- Recalibrating Work Hours
- Staggering Work Hours
- Split Days
- Job sharing
- Lunch breaks
- Staff Involvement
- Thank you

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New challenges

- Pandemic has created new challenges
- Staff fear of loss of hours or loss of employment
- Some organizations laid off all allied health providers, other large physician groups fired all medical assistants

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Recalibrating Work Hours

- During early pandemic, changes to schedule were drastic- decreased volume of patients and actual patient care hours may have decreased
- All employees worked from home for two months- some challenges- internet issues
- One employee continues to work from home- insurance verification, visit confirmation
- Flexible hours for at home staff- early morning or later evening- work better for confirmation calls or contacting insurance companies

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Staggering hours

- Flexibility is key
- Recalibration is important, as often as needed
- Some employees may prefer early morning hours, start before 8 am and leave before 4 pm
- Others may prefer coming in later, and able to stay later- “Win-win”
- Opportunity to expand office hours- positive for patient care
- Have time clock or some way to keep track of hours

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Split days

- Days from home- Telemedicine only
- AM In office patients
- PM Telemedicine

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Job sharing

- Full time is not preferred by some employees
- Job sharing benefits: Employees work together to share skills and time, Cross-coverage in case of emergency is built in
- Part-time staff that alternate or split days- MD, RN, MA

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Lunch breaks

- Team takes lunch at staggered times
- Everyone eats in a different location thanks to pandemic
- Buying breakfast or lunch for staff periodically as thank you
- Celebrate birthdays, special occasions- Graduation, Passing boards

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Involve Staff

- Keep track of staff morale weekly
- Ask staff if they have ideas- what works well or what does not work
- Ideas for what can work better
- Staff needs our emotional support as well

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Thank you

- A simple thank you regularly goes a long way for staff
- Remember everyone has been through a lot during the pandemic storm, but some people have a better boat to keep them afloat than others

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Take Home Message

- Wellness should be at the forefront
- Pandemic has created new challenges
- Involve Staff
- Importance of wellness checks

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Overview

- Optimizing Telehealth
- Workflow Essentials
- Telehealth Etiquette
- Creating Workflow
- Measure Success of Telehealth
- Sample Workflows

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Telehealth

- New opportunities to provide patient care exist
- Many practices went from full in office to entirely Telehealth within days
- What works for one practice may not work for another
- The public health emergency is in effect until July 2021- Biden administration likely extended through end 2021
- Consider how you will continue virtual visits

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Optimizing Digital/Telemedicine Services

- Decide whether you will do full Virtual visits and In office days or mix
- What works for one practice may not work for another
- Large practice versus smaller practice may have different needs

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Optimizing Digital

- Technology can lead to burnout- use of scribe, dictation for some, EHR auto text and order sets to make like easier
- Automated appointment reminders
- Ensure documentation is complete to provide information required for billing- Start and End time, Document “via Telemedicine visit” from “location” and who was present, Consent obtained

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Choosing the platform

- Available through HER, billing software companies, doximity, doxy.me
- Free version and paid versions available- HIPAA compliant
- Some have contracts by month or year- per provider or for office
- Online forms through platform- free HIPAA compliant forms
jotforms.com
- If one does not work, you can change

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Resources

- AMA Telehealth Implementation Playbook- excellent resource
- <https://www.ama-assn.org/system/files/2020-04/ama-telehealth-playbook.pdf>
- Workflow sheets available

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APPENDIX G.4: DESIGNING THE WORKFLOW

Telehealth Visit Etiquette Checklist



This checklist is intended for clinicians and care team members who will be hosting the telehealth visit to ensure that the professional standards of in-person care is maintained in a virtual environment.

The list below is not exhaustive but rather some key considerations to make when preparing to conduct telehealth visits.

TELEHEALTH VISIT ETIQUETTE CHECKLIST

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Environment <ul style="list-style-type: none"> <input type="checkbox"/> Ensure privacy (HIPAA) <input type="checkbox"/> Clinically appropriate exam room location, size, and layout <input type="checkbox"/> Avoid background noise <input type="checkbox"/> Adequate lighting for clinical assessment <input type="checkbox"/> Equipment <ul style="list-style-type: none"> <input type="checkbox"/> Desktop computer vs. tablet <input type="checkbox"/> High-speed internet <input type="checkbox"/> Web camera <input type="checkbox"/> Microphone <input type="checkbox"/> Dual screens for EHR documentation note taking <input type="checkbox"/> RPM dashboard (if using) <input type="checkbox"/> Headphones <input type="checkbox"/> Dress <ul style="list-style-type: none"> <input type="checkbox"/> The same level of professional attire as in-person care | <ul style="list-style-type: none"> <input type="checkbox"/> Communication <ul style="list-style-type: none"> <input type="checkbox"/> Turn off other web applications and all notifications <input type="checkbox"/> Review patient complaints and records before beginning call <input type="checkbox"/> Adjust webcam to eye level to ensure contact <input type="checkbox"/> Narrate actions with patient (if you need to turn away, look down to take notes, etc.) <input type="checkbox"/> Verbalize and clarify next steps, such as follow-up appointments, care plan, prescription orders <input type="checkbox"/> Pause to allow transmission delay <input type="checkbox"/> Speak clearly and deliberately <input type="checkbox"/> Choose empathetic language <input type="checkbox"/> Use non-verbal language to signal that you are listening |
|--|---|

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GENERAL CONSIDERATIONS

- ❑ How will the telehealth technology integrate with the EHR if it isn't through your existing EHR setup?
- ❑ How will clinicians document telehealth visits?
- ❑ How will telehealth visits fit into the clinic/clinician schedule?
- ❑ Where will telehealth visits take place in the clinic (e.g., administrative office, specific exam room)?
- ❑ How do patients first hear about telehealth? (e.g., from health care practitioner (HCP) during appointment, read in waiting room, read on website, email announcement)
- ❑ How do patients learn more about telehealth? (e.g., designated staff, website, email)
- ❑ How do patients register for telehealth?
- ❑ What reimbursement model makes most sense for your practice (e.g., bill insurance, flat fee for patient)?
- ❑ Who will keep track of developing reimbursement policies?
- ❑ Are the appropriate codes available in the EHR system?
- ❑ Do the care team members know what documentation is required for telehealth billing?

Key Considerations When Designing a Telehealth Workflow (Cont.)

PRE-VISIT	DAY OF/DURING VISIT	POST-VISIT
Identification <ul style="list-style-type: none"> ❑ How will eligible patients be identified for telehealth appointments? ❑ How do patients know if they and/or their case is eligible for a telehealth appointment? (e.g., digital triaging of patients to in-person or telehealth) ❑ When there is coordination between providers, how will information exchange occur? ❑ How do we ensure the clinician is licensed in the patient's state? Education <ul style="list-style-type: none"> ❑ What type of preparation education is needed? (e.g., how to download and use platform, visit expectations) ❑ Who educates the patient on telehealth? Communication <ul style="list-style-type: none"> ❑ How will patients be reminded of appointments? ❑ Who sends appointment reminders? ❑ Who will field patient questions? ❑ How are appointments scheduled? (e.g., time blocks vs. throughout the day; digitally vs. manually) ❑ How will you ensure eligible and interested patients are covered? Managing Coding and Billing <ul style="list-style-type: none"> ❑ Who will verify insurance eligibility and manage authorization? 	Administrative <ul style="list-style-type: none"> ❑ How will patients "check in" for their appointment? ❑ Who will get patients set up on the platform (e.g., "room"/them)? ❑ How will patient consent be obtained and stored? ❑ Who ensures the HCP's room is set up? (e.g., clean, quiet, Wi-Fi working) ❑ Who troubleshoots with the patient and/or HCP? ❑ How many people need to be ready to answer patient and/or HCP questions? ❑ How does the handoff to the provider take place? Clinical <ul style="list-style-type: none"> ❑ Which care team member(s) is providing virtual care? ❑ What is the record-keeping workflow? (e.g., codes and modifiers to include in notes) ❑ What are the protocols for telehealth patients? 	Clinical <ul style="list-style-type: none"> ❑ How are prescriptions or follow-up tests ordered? ❑ How is the care plan entered? Administrative <ul style="list-style-type: none"> ❑ When and how will patient follow-up be conducted? ❑ How often are patients expected to have an in-person visit and how is that communicated to patients? ❑ How is feedback collected? Managing Coding and Billing <ul style="list-style-type: none"> ❑ How is payment collected? ❑ Who will manage reimbursement paperwork? ❑ Who will track reimbursement status? ❑ Who will work with insurance companies to ensure billing is correct? ❑ Who will follow up on rejected reimbursements?

Disclaimer: This document is for informational purposes only. It is not intended as medical, legal, financial, or consulting advice, or as a substitute for the advice of an attorney or other financial or consulting professional. Each health care organization is unique and will need to consider its particular circumstances and requirements, which cannot be comprehensively addressed in this Toolkit.

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Technology

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Telehealth Workflow Example*

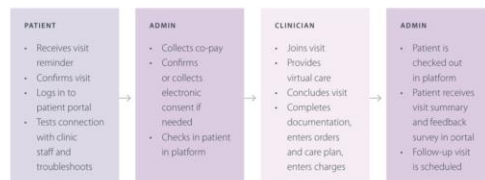
Your telehealth workflow will vary depending on your organization, type, size, and structure.

The example provided below illustrates an effective clinical telehealth workflow that involves a coordinated effort between the patient, administrative team, and clinician.

SCHEDULING FIRST TELEHEALTH APPOINTMENT:



DAY-OF/DURING VISIT:



*This illustration purposes only, not to be interpreted as advice specific to your organization.
**Telehealth visit can be offered as an option but should ultimately be up to the patient if they want to visit that way.
Source: CHA

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APPENDIX C.3. DEFINING SUCCESS

Identifying Measures of Success for a Telehealth Program



A helpful way to organize the goals for your telehealth program is to organize success criteria by the Quadruple Aim of Healthcare, inclusive of Health Equity.

Specifically, think about how telehealth will improve health outcomes, patient experience, and provider satisfaction while also reducing costs.

In doing so, your implementation is more likely to deliver value to the organization, result in a positive ROI, and set you up for success when Making the Case in Step 5.

Below are some specific areas of value to consider when you and your organization are defining the success of your implementation.

HEALTH OUTCOMES	PATIENT EXPERIENCE	REDUCED COSTS	PROVIDER SATISFACTION
Improved: <ul style="list-style-type: none"> <input type="checkbox"/> Health outcomes <input type="checkbox"/> Continuity of care <input type="checkbox"/> Compliance with standards of care <input type="checkbox"/> Insight about population health <input type="checkbox"/> Quality of life <input type="checkbox"/> Medication management Reduced: <ul style="list-style-type: none"> <input type="checkbox"/> ER visits <input type="checkbox"/> Complications <input type="checkbox"/> Admission Rates 	Improved: <ul style="list-style-type: none"> <input type="checkbox"/> Patient satisfaction <input type="checkbox"/> Patient engagement <input type="checkbox"/> Patient retention and loyalty <input type="checkbox"/> Convenience of care <input type="checkbox"/> Care plan compliance <input type="checkbox"/> Safety <input type="checkbox"/> Access to care Reduced: <ul style="list-style-type: none"> <input type="checkbox"/> Wait time to receive care 	Reduced: <ul style="list-style-type: none"> <input type="checkbox"/> Cancellations/No-Shows <input type="checkbox"/> Labor costs <input type="checkbox"/> Cost per case <input type="checkbox"/> Costs due to readmission penalties <input type="checkbox"/> Non-reimbursable care <input type="checkbox"/> ER visits Improved: <ul style="list-style-type: none"> <input type="checkbox"/> Patient reach 	Reduced: <ul style="list-style-type: none"> <input type="checkbox"/> Burnout <input type="checkbox"/> Turnover rate <input type="checkbox"/> Appointment length Improved: <ul style="list-style-type: none"> <input type="checkbox"/> Continuity of care <input type="checkbox"/> Efficiency of care delivery <input type="checkbox"/> Care team/patient communication

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Workflow essentials

- Be clear on expectations from all employees
- **Make checklist:**
 - Front office ensures all office paperwork in chart- Forms/ID/Insurance card/consent
 - Front office collects co-pay/ co-insurance prior to visit***
 - Medical assistant/Nurse call for preliminary information- enter pharmacy, PMH
 - Physician/ APRN/ PA continue the visit

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Assess and reassess

- Take a step back and review the workflow
- What is working?
- What needs to be changed?

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Sample AM schedule

- 9:00 Telemedicine
- 9:30 In-office skin testing
- 10 AM Telemedicine
- 10:30 AM In-office
- 11 AM Telemedicine
- 11:30 In-office skin testing
- PM In office

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Alternate AM sample schedule

- 9 AM Oral challenge
 - 10 AM Telemedicine
 - 10:30 AM In- office
 - 11 AM Telemedicine
 - 11:30 in- Office
-
- PM Telemed

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Utilizing office space

- Telehealth presents the unique opportunity to provide medical care without the need for more examination rooms
- Some practices may be able to add a practitioner for Telehealth without need for more office space

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Promote your practice

- Use of social media to communicate with your patients
- Send emails to patients who have consented to email communication

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Thinking outside the box

- Telemedicine use for supervision of oral challenge
- Telemedicine use for remote patient monitoring- asthma patients

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Take Home Message

- Opportunities exist to provide medical care to patients in areas we normally would not be able to reach
- Take time to reassess how Telemedicine services are going– ask patients and staff
- Make changes as often as necessary

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Wellness Strategies for the Practice Team

Theresa A. Bingemann, MD
Associate Professor of Pediatrics and Medicine
University of Rochester



Conflicts

■ None



Outline

- How is your team doing?
- Identifying trigger points and stressors?
- How to manage/overcome the trigger points and stressors
- Team wellness strategies



Stress in the workplace

- 60% of Americans say their jobs are a source of stress
- Job stress > family responsibilities, personal health and economic concerns


<https://www.opensourcedworkplace.com/news/how-to-successfully-deal-with-7-most-common-workplace>



Job stress



Challenging
work



Factors that impact job stress


- Office morale
- Style of management
- Job responsibilities
- Career concerns
- Traumatic events
- Work environment

<https://www.opensourcedworkplace.com/news/how-to-successfully-deal-with-7-most-common-workplace-stressors>



Factors that impact job stress

- Workload
- Unrealistic events/demands
- Organizational change
- Job ambiguity
- Lack of recognition
- Poor relationships in the workplace




Ask, Ask, Ask (about trigger points/stressors)

- Meet with your team and reaffirm that trust and open communication with each other is the mutually desired goal. Have each member discuss what this means to them.
- Ask if there are any outstanding issues that need to be discussed. For example:
 - Do we have any unresolved concerns about communication between ourselves or management?
 - Do our duties or roles need clarifying?
 - Are resources to do our jobs lacking?



Listen, Listen, Listen

- What are they saying?
- What are they not saying?
- Ask clarifying questions



Creating the culture(of wellness)

- When a culture of wellness is present, leaders prioritize the personal and professional growth of its team members.
- Behaviors within the organization emphasize compassion for the self and others.
- Lead by example

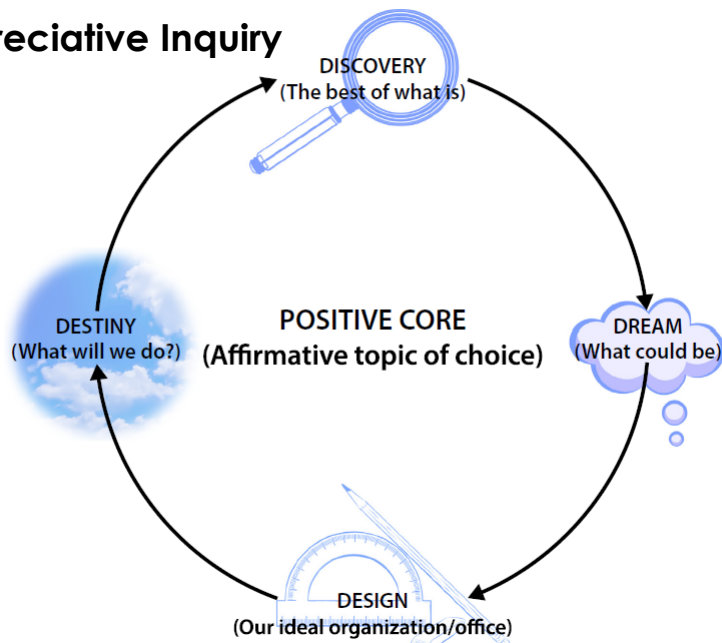
Ann Allergy Asthma Immunol 126 (2021) 219e227

Managing trigger points/stressors

- Ask employees for possible solutions
- What would help you find professional fulfillment?
- What is most important to your employees?
- Use the principles of Appreciative Inquiry

Appreciative Inquiry

T.A. Bingemann and S. Laubach / Ann Allergy Asthma Immunol 126 (2021) 219–227



Evaluate your leadership style

- “Truly effective leaders are distinguished by a high degree of emotional intelligence, which includes self-awareness, self-regulation, motivation, empathy and social skill.”

■ Daniel Goleman

Best of HBR 1998 What Makes a Leader?

TABLE 3. Leadership Qualities of Immediate Supervisors and the Prevalence of Burnout and Satisfaction in the Physicians They Supervise

Leadership quality	Burnout (% [95% CI])			Satisfaction (% [95% CI])		
	Prevalence of those rating leader favorably	Prevalence of those rating leader unfavorably	P value	Prevalence of those rating leader favorably	Prevalence of those rating leader unfavorably	P value
Holds career development conversations with me	36 (34.1-38.4)	51 (47.5-55.2)	<.001	82 (80.2-83.5)	51 (46.6-55.1)	<.001
Inspires me to do my best	36 (33.6-37.8)	52 (48.6-56.3)	<.001	83 (81.6-84.8)	46 (42.2-50.5)	<.001
Empowers me to do my job	35 (33-37.1)	56 (52.4-60.4)	<.001	86 (84.9-87.8)	46 (41.8-50.1)	<.001
Is interested in my opinion	36 (33.7-37.9)	54 (49.6-57.5)	<.001	85 (83.4-86.5)	48 (44.1-52.5)	<.001
Encourages employees to suggest ideas for improvement	37 (34.5-38.6)	52 (48-56.4)	<.001	86 (84.9-87.8)	53 (48.7-57.1)	<.001
Treats me with respect and dignity	38 (35.6-39.5)	56 (50.7-61.9)	<.001	94 (93.1-95.1)	69 (64.7-72.5)	<.001
Provides helpful feedback and coaching on my performance	35 (33.1-37.4)	50 (46.5-53.6)	<.001	78 (76.2-79.7)	41 (37-45.4)	<.001
Recognizes me for a job well done	36 (33.9-38)	53 (48.6-56.5)	<.001	84 (82.8-85.9)	48 (43.5-51.9)	<.001
Keeps me informed about changes taking place at Mayo Clinic	37 (34.5-38.6)	53 (49-57.7)	<.001	88 (86.7-89.4)	54 (49.8-58.1)	<.001
Encourages me to develop my talents and skills	35 (33.2-37.3)	54 (50.4-58)	<.001	84 (82.1-85.3)	45 (40.4-48.8)	<.001
I would recommend working for your immediate supervisor	36 (34.1-38.2)	53 (49.3-57.6)	<.001	87 (86-88.8)	49 (44.9-53.3)	<.001
Overall, how satisfied are you with your immediate supervisor	36 (34-38.1)	53 (49-57)	<.001	87 (85.3-88.2)	47 (42.5-50.7)	<.001

Mayo Clin Proc. 2015;90(4):432-440

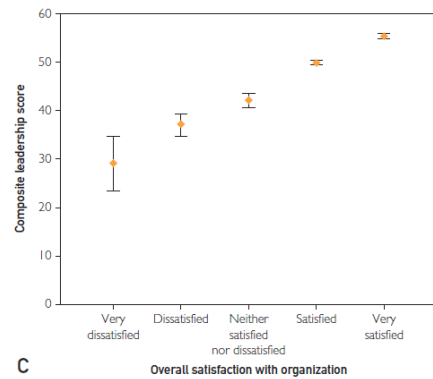
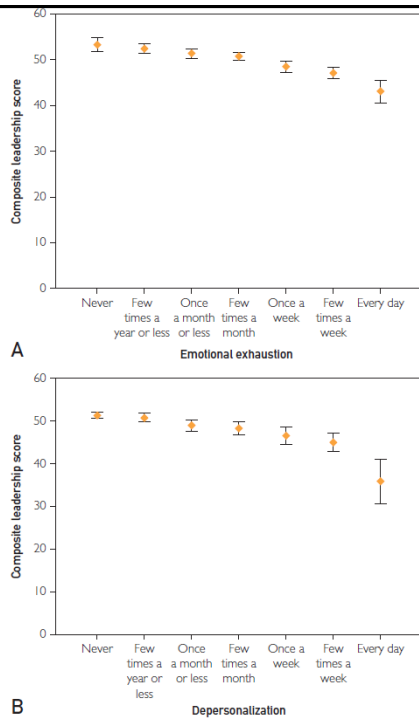



FIGURE 1. Relationships between mean composite leadership score of the immediate supervisor and physician emotional exhaustion (correlation coefficient=0.217; $P<.001$) (A), physician depersonalization (correlation coefficient=0.213; $P<.001$) (B), and physician satisfaction (correlation coefficient=0.504; $P<.001$) (C). Error bars indicate 95% CIs.

Mayo Clin Proc. 2015;90(4):432-440



Figure 2. Personal resilience—basic principles.

Ann All Asth Imm 126(2021)228-234



Humor, Seriously

- Having a sense of humor
 - 23% more competent
 - 15% more satisfied with job
- Look for more reasons to laugh
- Try to create small moments of joy for someone else
 - Leave a nice note



Conclusions

- Ask your staff how things are going
- Listen attentively
- Implement changes where you can
- Be a model of wellness
- Assess your leadership style- where can you improve?
- Create an atmosphere where people enjoy coming to work



Further resources

- The New One Minute Manager
 - Ken Blanchard, PhD and Spencer Johnson, MD
- Help Them Grow or Watch Them Go: Career Conversations Employees Want
 - Beverly L. Kaye and Julie Winkie Giulioni
- Appreciative Inquiry in Healthcare –Positive Questions to Bring Out the Best
 - May, N. et al
- What Makes a Leader? Harvard business Review Classics
 - Daniel Goleman
- The Rabbit Effect
 - Kelly Harding MD, MPH