

Situation

Physicians today face rapidly mounting workplace pressures. Although stressors vary across settings, changes in the healthcare landscape as a whole have resulted in a loss of physician-led care and autonomy and a concomitant increase in regulatory scrutiny, workload, and performance demands. 1-3 The role tension between organizational expectations and direct patient care further adds to the stress. 4 Moreover, the unique personality traits of physicians (e.g., strong sense of responsibility to others, tendency toward self-denial) combined with a culture that demands perfection predispose physicians to disengagement and burnout. 5,6

With prevalence rates estimated to be 1.5 times greater than the general US working population, burnout represents an epidemic within the profession. Not only is this having a dramatic impact on the personal well-being of physicians, it is also having deleterious effects on healthcare outcomes.^{7,8} Recent studies have found an impact on clinical productivity, quality of care,

professionalism, and patient satisfaction.⁹⁻¹¹ Furthermore, physicians who may be impaired by stress or are disengaged may exhibit behaviors in the workplace that interfere with the process of delivering quality care.¹² This comes at a high cost to healthcare systems. Roughly \$4.6 billion is lost annually due to reduced productivity, absenteeism, and turnover.^{13,14}

In contrast, engaged physicians have many positive outcomes for the patients, the organization, and the physicians themselves. These include better patient experience and satisfaction, lower complication rates, improved financial outcomes, and cost savings. ¹⁵
Engagement, defined as "an energetic state of involvement with personally fulfilling activities that enhance one's sense of professional efficacy," ¹⁶ has also been found to improve job satisfaction and contribute to a positive work environment. ¹⁷
Engaged physicians are necessary to lead the transformation of healthcare. ¹⁸



It is increasingly recognized that interventions are needed to help physicians navigate the rapidly changing healthcare landscape and remain engaged in the work, and many interventions have been implemented to address this issue. Although these interventions are an important step, systemic reviews of such interventions have found mixed results. 19,20 Many of the interventions are offered as short-term, self-care trainings (e.g., stress management training) that do not always generalize to the specific needs of the participants or practice groups. Moreover, evidence suggests that physicians are often hesitant to access such services for themselves. 21 This may be due to the lack of time, perceptions of stigma and shame

about seeking help, or the belief that their problems aren't bad enough to warrant intervention. Other interventions focus on specific workplace stressors (e.g., issues with documentation systems) that are often unsustainable due to limitations in resources.

While these interventions are important, substantive change is not found simply through in-service training or top-down, one-size-fits-all approaches. What is needed is a stigma-free approach that is tailored to meet the unique, lived experiences of the individual physicians. Professional coaching that focuses on the growth of the physician offers such an approach.

Why Coaching?

Professional coaching has long been used across many industries to improve leadership skills and well-being as well as reduce burnout. Coaching is emerging as a promising intervention for supporting physician well-being and larger organizational goals, as well.^{6,19,22} Coaching is a results-oriented, individually tailored process that builds on the strengths of the client to maximize potential and performance.²³ Coaching may be an appealing approach for physicians due to its flexibility and its focus on proactive, strengths-based development.⁶ A core pillar of the coaching process is the premise that the client has the internal resources needed to meet life's demands, though they may not be accessing them optimally.²⁴ Broadly, key coaching outcomes relevant to physicians include enhanced self-awareness, self-management, self-efficacy, and self-determination, all of which are critical antidotes to burnout.²⁵

How Coaching Works

Research suggests that coaching effectiveness is less a function of specific coaching techniques or interventions and is more linked to factors common to all coaching interventions, such as the quality of the coaching relationship, empathic understanding, and positive expectations. ²⁶ Therefore, the foundation of effective coaching is a collaborative, confidential, shame-free relationship between the coach and client. Coaches with backgrounds in helping professions such as counseling and psychology are uniquely positioned to bolster the coaching process. Their intensive training in the nuances of interpersonal relationships and intrapersonal patterns provides them with the skills necessary for facilitating deep change and growth. ²⁷

In addition to the relationship, a number of other factors are proposed to support change in the coaching process. Though the mechanisms vary with each coaching relationship, key drivers include the opportunity for self-reflection, cognitive reframing, self-generation of goals, and accountability for positive action.^{19,22} Through the process of examining thoughts, perceptions, and behaviors, coaching strengthens a client's ability to move from reactivity to responsive action that aligns with values and purpose.⁶



What Makes Pilgrimage Different

At Pilgrimage Development Group, all our coaches are trained in a professional psychology profession before becoming a coach and have deep experience in healthcare. This curated team of coaches possesses experience in both organizational psychology and leadership development. With this foundation, our coaches utilize assessments that explore personality-at-work along with performance feedback, to partner with the physician to target a specific set of goals. This approach along with periodic input from the work setting allows for high rates of goal attainment.





What does the Physician Development Program Entail?

The Physician Development Program (PDP) is a 6-month, integrated program that is designed to help physicians struggling with workplace adjustment. The process targets multiple professionalism competencies known to be integral to workplace effectiveness. Our approach incorporates comprehensive personality and behavioral assessment (with a MED360-°© -degree evaluation and a Workplace Big Five Profile) to provide accurate data on physician strengths and possible areas for development. A co-created development plan coupled with an accountability process for the physician makes coaching a powerful change process. We provide ongoing individual professional coaching with the physician for the duration of the program and followup evaluation to document progress. All participants have direct access to their coach's cellphone number so that they may reach out for support as needed. We work collaboratively with key stakeholders from the referring healthcare organization to ensure regular communication and progress reports. A follow-up MED360 is utilized to identify observable improvements in the physician's environment, both to demonstrate growth and to support future performance. Unlike individualized interventions, this program is designed to be longitudinal to maximize the likelihood of long-term success. We have the capability to deliver the service nationally and have a proven success record for those who complete the program.

References

- Mechanic D. Physician discontent: Challenges and opportunities. *JAMA*. 2003;290(7):941-946. doi:10.1001/ jama.290.7.941
- 2. Rosenstein A. Physician stress and burnout: what can we do? *Physician Exec.* 2012;38:22-26, 28, 30.
- Shanafelt TD, Mungo M, Schmitgen J, et al. Longitudinal study evaluating the association between physician burnout and changes in professional work effort. *Mayo Clin Proc*. 2016;91(4):422-431. doi:10.1016/j.mayocp.2016.02.001
- Perreira TA, Perrier L, Prokopy M, Neves-Mera L, Persaud DD. Physician engagement: a concept analysis. *J Healthc Leadersh*. 2019;11:101-113. doi:10.2147/JHL.S214765
- 5. Gabbard GO. The role of compulsiveness in the normal physician. *JAMA*. 1985;254(20):2926-2929.
- Gazelle G, Liebschutz JM, Riess H. Physician burnout: Coaching a way out. *J Gen Intern Med*. 2015;30(4):508-513. doi:10.1007/s11606-014-3144-y
- Vogel L. Even resilient doctors report high levels of burnout, finds CMA survey. CMAJ. 2018;190(43):E1293-E1293. doi:10.1503/cmaj.109-5674
- Li CJ, Shah YB, Harness ED, Goldberg ZN, Nash DB. Physician burnout and medical errors: Exploring the relationship, cost, and solutions. *Am J Med Qual*. 2023;38(4):196. doi:10.1097/JMQ.00000000000000131
- 9. 9. Hodkinson A, Anli Zhou, Johnson J, et al. Associations of physician burnout with career engagement and quality of patient care: systematic review and meta-analysis. *BMJ*. 2022;378:e070442. doi:10.1136/bmj-2022-070442
- Tawfik DS, Profit J, Morgenthaler TI, et al. Physician Burnout, Well-being, and Work Unit Safety Grades in Relationship to Reported Medical Errors. *Mayo Clin Proc.* 2018;93(11):1571-1580. doi:10.1016/j.mayocp.2018.05.014
- Yates SW. Physician stress and burnout. Am J Med.
 2020;133(2):160-164. doi:10.1016/j.amjmed.2019.08.034
- 12. Federation of State Medical Boards of the United States. Report of the Special Committee on Professional Conduct and Ethics: A Policy Document of the Federation of State Medical Boards of the United States, Inc. Federation of State Medical Boards of the United States, Incorporated; 2000.
- Han S, Shanafelt TD, Sinsky CA, et al. Estimating the attributable cost of physician burnout in the United States. Ann Intern Med. 2019;170(11):784-790. doi:10.7326/M18-1422
- Shanafelt T, Goh J, Sinsky C. The business case for investing in physician well-being. *JAMA Intern Med.* 2017;177(12):1826-1832. doi:10.1001/jamainternmed.2017.4340

- Prenestini A, Palumbo R, Grilli R, Lega F. Exploring physician engagement in health care organizations: a scoping review. BMC Health Serv Res. 2023;23(1):1029. doi:10.1186/s12913-023-09935-1
- Maslach C, Leiter MP. Early predictors of job burnout and engagement. *J Appl Psychol.* 2008;93(3):498-512. doi:10.1037/0021-9010.93.3.498
- 17. Monavvari A. Physician engagement is essential in designing the medical home. *Can Fam Physician*. 2019;65(9):609-611.
- James, Ted. Engaging Physicians to Lead Change in Health Care. Harvard Medical School. Published January 9, 2020. Accessed December 17, 2023. https:// postgraduateeducation.hms.harvard.edu/trends-medicine/ engaging-physicians-lead-change-health-care
- Boet S, Etherington C, Dion PM, et al. Impact of coaching on physician wellness: A systematic review. PLOS ONE. 2023;18(2):e0281406. doi:10.1371/journal.pone.0281406
- De Simone S, Vargas M, Servillo G. Organizational strategies to reduce physician burnout: a systematic review and meta-analysis. *Aging Clin Exp Res*. 2021;33(4):883-894. doi:10.1007/s40520-019-01368-3
- Bynum WEI, Sukhera J. Perfectionism, power, and process:
 What we must address to dismantle mental health stigma in medical education. *Acad Med.* 2021;96(5):621. doi:10.1097/ ACM.00000000000000004008
- McGonagle AK, Schwab L, Yahanda N, et al. Coaching for primary care physician well-being: A randomized trial and follow-up analysis. J Occup Health Psychol. 2020;25(5):297-314. doi:10.1037/ocp0000180
- ICF, the Gold Standard in Coaching | Read About ICF.
 International Coaching Federation. Accessed December 26,
 2023. https://coachingfederation.org/about
- 24. Kimsey-House H, Kimsey-House K, Sandhal P, Whitworth L. Co-Active Coaching: Changing Business, Transforming Lives. 4th ed. Hodder & Stoughton Limited; 2018.
- Glass DC, McKnight JD. Perceived control, depressive symptomatology, and professional burnout: A review of the evidence. *Psychol Health*. 1996;11(1):23-48. doi:10.1080/08870449608401975
- de Haan E, Culpin V, Curd J. Executive coaching in practice: what determines helpfulness for clients of coaching? *Pers Rev.* 2011;40(1):24-44. doi:10.1108/00483481111095500
- Williams P, Davis DC. Therapist as Life Coach: An Introduction for Counselors and Other Helping Professionals (Revised and Expanded). WW Norton & Company; 2007.

