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When you think professional, ethical, quality healthcare, think physicians of Pulaski County Medical Society.



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Are Doctors the Canary in the Coal Mine of Medicine?

By Dike Drummond MD, CEO, TheHappyMD.com

Back in the day, coal miners always carried a canary with them in a small cage whenever they would go down in the mine. The canary is a very talkative bird, always singing and tweeting in a constant background of happy chatter. However, that is not why they are taken into the mine. Canaries have one more characteristic important to a miner – they die easy.

When there is bad air in the mine, the canary's sensitive lungs will cause it to drop over dead well before the miners even notice shortness of breath.

When the bird stops singing ... the miners head for the surface ... fast. The silence of that little bird is a lifesaving alarm.

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*You and a Guest
are Cordially Invited.*

The Pulaski County Medical Society
& Pulaski County Medical Exchange

*2017 Annual
Membership
Meeting & Dinner*

The Capital Hotel
Thursday, December 7, 2017

6:00 p.m.
Business Meeting & Elections

6:30 p.m.
Cocktail Reception

7:00 p.m.
Dinner

**Join us to honor the 2017 President's Award for a Lifetime
of Outstanding Contributions to Medicine Recipient
Dr. Kent Westbrook**

**Invited Speaker:
Governor Asa Hutchinson**

RSVP:
Before November 30th

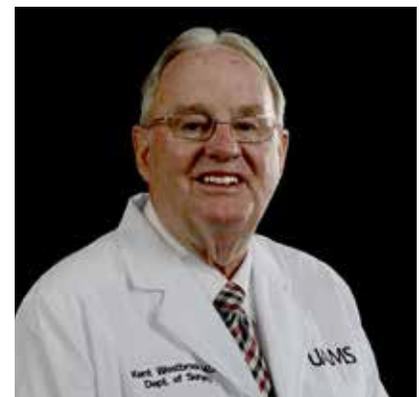
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Society to Honor Dr. Kent Westbrook



Dr. Kent Westbrook will be honored at the 2017 Annual Meeting and Dinner to be held Thursday, December 7, 2017 at the Capital Hotel. He will receive the 2017 President's Award For a Lifetime of Outstanding Contributions to Medicine. We invite you to attend and help us honor our 2017 recipient.



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As the US healthcare market continues its wild ride from Volume to Value and projections of physician shortages as high as 91,500 by 2020 come from respected sources, I believe we have a similar “coal mine” situation in healthcare.

Unfortunately, physicians appear to be the canary in the mine

Even before the pseudo-shortages of the Affordable Care Act, physicians were not in good shape. Historically symptomatic burnout is present in an average of one in three doctors on any given office day. A 2015 survey by the Mayo Clinic found 54% of physicians suffering from at least one symptom of burnout. (Mayo Clinic Proc, 2015 December 90:12, 1600–1613) The Physician’s Foundation reported that 60% of doctors would retire today if they “had the means”.

High patient volumes, the hassles of Electronic Medical Records (EMR), political uncertainty, mergers/acquisitions/consolidation at breakneck speed and changing reimbursement rates are all cited in surveys and online forums as new and increasing sources of stress for doctors. Online patient complaints always center on “the doctor seemed, rushed, didn’t listen or seem to care”, which are classic signs of overwork and burnout.

The biggest new burnout threat may be Pay for Performance (P4P)

Healthcare organizations will soon be paid bonuses for reaching certain care quality indicators and patient satisfaction thresholds. Patient satisfaction is incredibly important and should be tracked and rewarded. At the same time, if care organizations simply use these reimbursement changes to dump more stress on the doctors they will actually block the doctor’s ability to be present and care for their patients more effectively. Where is the tipping point ... where the canary falls off the perch?

How did we get here in the first place?

Healthcare is a classic giving profession. Doctors and nurses learn early that patients come first. Our job is to serve them as best we can, no matter how tired or drained we may be feeling. Their needs come before ours. Simply acknowledging our own needs is a challenge. Finding time

and tools to get them met is a struggle for most physicians. This conditioning of our medical education is a huge blind spot that sets us up for burnout.

Many healthcare organizations systemize this self care blind spot

It is rare for the physicians and staff to appear in the Mission Statement of a care organization. The patients and care quality will always be front and center in the mission. Any mention of the providers and staff is very rare.

[Take a quick look at your organization’s Mission Statement. Does it mention provider or staff health, wellness and satisfaction? If so, is your organization actually doing something about it?]

This creates a double bind where the providers are challenged to get their needs met and their organizations fail to acknowledge we have any in the first place.

The last American sweatshop

As a result, many healthcare workplaces feel like a classic sweatshop environment. There are too many patients to be seen, multiple systems come between the doctor and patient (EMR for instance) there are quotas to be made and no regard whatsoever is paid to the health, wellness or stress levels of the physicians and staff.

If the workplace resembles a mine, when will the physician/canary drop.

In my work with doctors with career threatening burnout, it is common to hear of hospital departments and group practices where the entire staff is just barely making it through their work week.

Thank god for work hardening

The only reason these toxic workplaces don’t implode is the stamina and work ethic of the doctors and staff in the system. On one level, residency is a work hardening program for physicians. We learn to take a tremendous amount of punishment and keep on seeing patients. If you become an employed doctor you might find your leaders count on the doctors to carry any load they pile on while taking no responsibility for the stress involved. It is just like putting a canary in a shaft where you know the air is bad and hoping it survives.

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Are Doctors the Canary in the Coal Mine of Medicine?

Everyone loses

Tragically, unless your group actually monitors for physician health and satisfaction, the toll burnout exacts on the doctors and their patients remains invisible.

Research shows burnout has a pervasive negative effect on every aspect of a physician's practice and life. Physician burnout has been linked to

- Lower quality of care and lower patient satisfaction rates
- Higher rates of medical errors and malpractice risk
- Higher physician and staff turnover
- Higher levels of divorce, alcohol and drug use and suicide for the physician - our Canary.

So how much longer can we simply pile more and more stress on the doctors? When will this canary be stretched beyond its limit and simply topple off its perch and crash to the bottom of the cage? Does anyone care or is this something doctors just have to take care of on their own?

There is a different path available to healthcare organizations.

This path results in a win:win:win situation.

- More patient satisfaction and higher quality care
- Happier, healthier doctors
- Higher profitability as the P4P trend continues

The key is to stop taking the canary down the mineshaft in the first place. Focus the same amount of effort on lowering stress in the workplace and creating a healthy environment for your physicians and staff as you do on patient satisfaction - for one simple reason.

Your doctors cannot produce consistently high patient satisfaction and quality care scores if THEY are not consistently healthy and happy at work.

Happy doctors naturally have happier patients. Put the canary in a sunny window and change the papers in the bottom of her cage. This is a fundamental shift with positive consequences for everyone in healthcare.

The most successful organizations in the near future will be those that acknowledge the universal presence of physician stress and burnout.

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PCMS NEWS



Rebecca Tutton, Arkansas Mutual Insurance Company

October Lunch & Learn Session News

On October 27th clinic administrators met to hear a presentation that helped demystify MACRA (Medicare Access & CHIP Reauthorization Act), and MIPS (Merit-Based Incentive Payment System) for their physicians. These helpful events are held throughout the year. Check the calendar of events for the next Lunch & Learn session.

- They will monitor for burnout and support the health of their providers and staff in multiple innovative ways.
- They will put physician health and wellness in their mission statement as a priority equal to that of patient satisfaction.

There are hundreds of proven ways for both physicians and organizations to make real and lasting changes in the physician experience as soon as this fundamental shift is recognized.

I also predict this type of organization will be rare

Leadership must stop simply loading on more work responsibilities and cracking the whip. Organizations must be committed to caring about the doctors and staff and constantly focused on creating a healthier and more efficient workplace.

With this new priority of physician wellness, these same organizations will be able to activate the power of a physician staff that is balanced and healthy, with their physical, emotional and spiritual needs met. This is the

natural foundation for consistent quality care and patient satisfaction.

Just imagine a work environment ...

... where you enjoy your work team and the practice environment, the systems work to let you care for patients smoothly and effectively and you know that your leadership “has your back” and really cares about the quality of your experience as a member of the group. What would that be like? What quality of care would doctors and staff in that organization offer to their patients naturally and automatically?

Our healthcare workplaces don't have feel like a coal mine. We don't have to sit around and wait for the canary to drop.

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Dike Drummond MD is a family physician and creator of the Burnout Prevention MATRIX Report with over 117 was to lower physician stress. He provides burnout prevention and treatment services for healthcare professionals at his website, The Happy MD.

calendar of events

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DECEMBER 7, 2017 2017 PCMS Annual Meeting & Dinner

The 2017 Annual Meeting & Dinner will be held at the Capital Hotel at 6:00 pm on Thursday, December 7, 2017. Governor Asa Hutchinson is our invited speaker, and we will be honoring Dr. Kent Westbrook with the President's Award For a Lifetime of Outstanding Contributions to Medicine. Join your colleagues and enjoy the Capital Hotel in its entire Holiday splendor.

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PCMS NEWS

CARTI Names Vice Presidents for Medical, Radiation Oncology



Patti Moser

CARTI has named two new members to its senior management team, according to Adam Head, president and chief executive officer of the statewide network of cancer care providers.

Patti Moser has joined CARTI as vice president of medical oncology, while Jeremy Land will serve as vice president of radiation oncology.



Jeremy Land

“We could not be more pleased to have both Patti and Jeremy on board at CARTI,” said Head. “Each of them brings the sort of credentials, leadership and experience that will undoubtedly contribute to the continued growth and success of our organization, and we believe they both will prove to be valuable additions to the leadership team.”



Arkansas Diabetes Symposium Draws Large Crowd

The 2017 Arkansas Diabetes Symposium was held Saturday, October 28, 2017 at the Marriott Hotel. The symposium provided information on current and future statistics of type 2 diabetes mellitus in Arkansas, talked about tools used in screening for prediabetes, and provided the attendees with Free CME. The speakers came from around the country to share their expertise.



UAMS Student Foot Clinic

PCMS Funded Student Project Making a Difference

Every fourth Wednesday of the month UAMS M2 student Rebekah Langston and her team of volunteers arrive at the Canvas Community Church in downtown Little Rock. Canvas Community Church, using a “Dinner and a Movie” platform every Wednesday, provides food and shelter to the homeless community of the city. At this event once a month this UAMS Student led team focus on the feet of the homeless because they are poorly protected, highly utilized as their primary mode of transportation, and at great risk for injury. They provide preventative foot care by washing the feet and performing a comprehensive foot exam as dictated by current best practice guidelines and the expertise of podiatrist Dr. Terri Cohen. Under the guidance and supervision of Dr. Cohen this interprofessional team trims nails, reduce/remove calluses, and treat minor wounds. These simple interventions can significantly improve foot health. During the visits blood glucose and blood pressure checks are performed as well. This basic helps identify risk factors associated with lower limb complications.

Many student projects are submitted each spring but the society cannot fund them all. If your or your clinic would be interested in funding one of the student projects that need a sponsor, please contact the PCMS offices.



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