

# When Coaching Physicians with Wellness, Don't Always Lead with Mindfulness

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Times of great change and transformation usually cause people to reflect on their careers and on work-life balance and evaluate what brings meaning and joy to their day. After the great recession, I realized that I wanted to contribute to the business world to grow leaders into meaningful and rewarding careers, and purposely changed my career path to achieve that. When the COVID-19 pandemic reaches a manageable state, I believe that healthcare providers and physicians more specifically, will begin to review their place in the healthcare ecosystem and explore what brings them meaning and purpose. We may experience an exodus of clinicians from healthcare, or at least a restructure of roles in the medical center or physician practice.

Over the past years, physicians have been forced to change the way they interact with patients, embracing new laws, new compliance expectations, electronic medical records, and an ever-changing insurance reimbursement landscape. Academic physicians and those in teaching hospitals may also have the expectation to provide clinical education or contributions to research to maintain a clinical appointment or obtain a higher faculty status.

If one chooses the physician leader track, additional responsibilities may be added, such as:

- \* Translating institutional expectations to an already taxed physician population
- \* Managing shrinking budgets and clinical space
- \* Sustaining patient pipelines and ongoing expected revenue
- \* Mediating behavioral issues and improving quality standards

And frequently physician leaders are given no training for the new skills they will need to lead people and organizational strategy.

Get the picture? Think about the younger generation of physicians who are spending their evenings documenting patient records and answering emails while spending time with their families and raising their children. Work has taken over what we call “pajama time”, and there is no time left to rest, recover, and rejuvenate. Add now the stress of our COVID pandemic, and we have a recipe for a public health crisis among physicians.

Physicians, who became doctors to focus on healing, caring, and improving people’s lives, are mired in tasks that take them away from their own healing and care, and from the reason they entered the profession in the first place.

How can we help?

Enter coaching. Several recent studies of the effect of coaching on physician wellness have shown promising results. One such study published in the Journal of the American Medical Association (JAMA)

in 2019 is based on a clinical trial conducted at the Mayo Clinic. In it, the coaching of 44 out of 88 identified physicians over 6 months reduced absolute rates of emotional exhaustion by 29.3% over the control group and reduced absolute rates of burnout by 22% over the control group. This same study found that compared to two other common support interventions, mentoring and peer support: “Coaching...involves inquiry, encouragement, and accountability to increase self-awareness, motivation, and the capacity to take effective action... We hypothesized that professional coaching would result in measurable improvements in well-being, job satisfaction, resilience, and fulfillment in physicians and measurable reductions in burnout.”

They were right!

In my work with physicians and physician leaders in academic medicine, I quickly learned that physicians are highly self-reflective and are aware of the pressures and demands that they face. However, physicians are frequently the last to ask for help, if they do at all, and the first to deprioritize their own self-care. This has led to high suicide rates in the overall physician population.

For coaches partnering with this population to explore burnout, balance, and well-being, leading with mindfulness as a first practice could cause an adverse reaction. This happened to me when a colleague and I held a workshop on physician wellness and began the session with mindfulness. Several people left the room and a few others spoke up immediately, indicating that what they needed as help was not mindfulness, but solutions for inefficient processes and help with increased demands from their medical coding departments. We did not make that mistake again!

These professionals are overwhelmed and in a state of raw coping, rather than thriving, and are far away from any tools to support ongoing resilience. They are just trying to get through the day and meet their goals. Oh, and take care of their patients. Leading with mindfulness as a first solution can be seen as “another thing to do” in an already packed schedule or can make physicians feel angry, or “wrong” or “guilty” for not already trying something that seems so simple. It can also cause the physician to close down to exploring other solutions.

Of course, we know that mindfulness is a powerful tool, and can help physicians be more self-aware and navigate physical and emotional reactions to stressors, but timing and context is key. How can we partner with them to understand the issues they face, and help them frame and reframe a path forward?

As coaches, we have tools that can help. First, we must create a sense of trust and safety with the physician so that they understand we are there to help them find their own path forward. This seems like an obvious statement given that Building Trust and Safety is one of coaching’s core competencies, but physicians, if they are provided coaching through the organization may suspect that this is an offering provided to help make them more productive. Once we have established trust, and the physician can verbalize and frame their personal set of stressors, there are other tools to help them categorize and prioritize a way forward.

The Maslach Burnout Inventory (MBI), a psychological inventory and proven war horse, is one tool we can employ to help the physician prioritize their experiences and the negative outcomes those stressors create. The report is categorized into five dimensions: Emotional Exhaustion, Depersonalization, Cynicism, Personal Accomplishment, and Professional Efficacy. In this framework Emotional Exhaustion,

Cynicism, and Depersonalization contribute to burnout, while Personal Accomplishment and Professional Efficacy reduce burnout. The individual report provides physicians some action steps and prioritization to help them understand where to focus and where they have power to make change toward thriving. The MBI also has group and team assessments and reports for work with intact teams or groups of physicians

The National Wellness Institute, in their framework on Resilience and Thriving, has a tool a physician can use to evaluate levels of stress across six domains: Relationships, Health, Financial, Work and Career, Spiritual and Emotional. The tools available also help the client evaluate reactions to various levels of stress, and help them understand their coping mechanisms, and how to move toward thriving, resilience, and potentiation.

The best tool to identify and prioritize sources of stress and burnout may be a simple coaching conversation. Physicians rarely get focused time to explore their individual needs and desires. Once trust and safety are established with the client, it may be extremely easy for them to explore items that pull them farther and farther from personal meaning and self-care. Once those items are identified, if the client responds well to visual representation of their current situation, the Wheel of Life tool can be used. Many versions of the Wheel of Life can be customized to include specific dimensions of career or home life, that the physician can use to visualize and prioritize the levels of stress across those domains. Doing this simple exercise can help the overwhelmed physician more clearly understand the specific areas where high stress is impacting them the most. The Wheel can also be used as a Wheel of Leadership for Physician Leaders to understand additional stressors presented by their leadership role.

Some questions that can be useful when coaching physicians around burnout and wellness might be:

- \* What would more wellness look like/feel like in your life?
- \* What would you be able to do more of?
- \* What do you need to let go of, or de-prioritize?
- \* What's keeping you from connecting to the meaning you desire?

During this process, Mindfulness may well arise as an immensely helpful tool to support the physician client in navigating through daily stressors and exploring new frames of reference toward their goals.

We may always find physicians that are seeking mindfulness as a helpful and immediate tool for coping in stressful situations, but when approached as the first tool as part of a coaching engagement, it could cause the client to react negatively or close down to exploring a path forward.

So, when we are coaching physician clients with burnout and wellness, remember, don't always lead with mindfulness.