
Created by the American Medical Association in conjunction with other societies and organizations, there are currently 44 free practice transformation toolkits at www.stepsforward.org that cover these topics. Toolkits with practical, actionable guidance are available to help a practice tackle nitty-gritty details in areas such as improving workflow, supporting professional well-being, improving patient care, and leading change.

The toolkits are approved for CME and also qualify as Improvement Activities (IA) within the new MACRA legislation. Many toolkits have quality improvement metrics built in, and, in 2017, will be approved for part IV maintenance of certification credit.

In order to make these “one-stop shopping” resources, the toolkits contain sample checklists, policies, teaching curricula, and calculators that allow you to enter practice variables and estimate how much time or money you may save with an innovation. We went around the country obtaining video of best practices and included clips of the innovations in action in many of the toolkits.

Why is the AMA involved in improving professional satisfaction and practice sustainability with work such as the Steps Forward™ tool kits? Approximately five years ago all of the work at the AMA was reoriented around three strategic priorities:

1. Better health for patients;
2. Improved education for medical students; and
3. Thriving practices for physicians.

Many SGIM members may be familiar with the consortium of medical schools that is working to create the medical school of the future. Others may be aware of the partnership between the AMA, Johns Hopkins, and the CDC to improve care for patients with hypertension and pre-diabetes.

For the last two years, I have worked in the third strategic focus area as vice president of Professional Satisfaction (my husband calls me the “Veep of Joy”) with a mission to improve the health and well-being of patients by improving the health and well-being of physicians and their practices. The Steps Forward™ tool kits are one product of this work. In addition, we are working with the regulatory community, such as The Joint Commission and CMS, to debunk urban myths and reduce regulatory pain points.

We have also collaborated with the Rand Corporation and Dartmouth on research initiatives related to professional satisfaction. The Rand study looked at drivers of physician career satisfaction and dissatisfaction. We learned that time spent on EHRs and away from patients was a major driver of professional dissatisfaction. In a follow-up with Dartmouth, we performed a time-motion study and found that fully half of a physician’s workday is spent on EHR and deskwork. Additionally, for every one hour of direct clinical face time with patients, a physician must spend nearly an additional two hours on EHR and deskwork.

As part of this investigation, we recently held a “Joy in Medicine Research Summit” that brought together 35 researchers from the United States, Canada, and Europe to outline a research agenda. The next day we brought together CEOs from 12 of the largest institutions in the country to elevate awareness and action around the critical issue of physician burnout.

Mark Linzer’s work demonstrates that one of the most effective ways to reduce physician burnout is to improve workflow. I invite you to take a look at the Steps Forward™ practice transformation tool kits, designed to improve workflow, build greater mastery of our craft, and create room for joy in practice. I also invite you to give feedback—what’s working, what’s missing, and how can we make these better.

Ours is such a wonderful profession, inherent with joy, purpose, and meaning. With more than half of U.S. physicians exhibiting signs of burnout, I believe we have an enormous opportunity to be forces for good, by reengineering the way we do our work, eliminating waste when possible, empowering teams when appropriate, and creating the conditions where physicians can spend the majority of their days doing the work for which we are uniquely trained. This will be a win.
for the patients, for care teams, and for physicians.

References


