ACLGIM e-Leadership

E-Info Management: Information Overload
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Can everyone just stop whining about information overload? I mean, in the knowledge economy, information is our most valuable commodity.

And these days it’s available in almost infinite abundance, delivered automatically to our electronic devices or accessible with a few mouse clicks. So buck up, already!

Wait a second: Can’t just stop whining about information overload?
Please read the attached e-mail about the e-mail I sent yesterday referring to the previous e-mail about flooding the system with unnecessary e-mails.

Please forward this e-mail to your entire S

Information overload. I'm going to kill those describing the problem.
E-mail a thing of past for business, young
By Michael B. Farrell

The Boston Globe
Large Group Discussion

• What are some of the problems with navigating your electronic information (e.g., email)?

• What are some of the consequences?
The Organizational Cost of Email

- 20% of emails cc'd unnecessarily to staff members other than the main recipient
- 13% of received emails were irrelevant or untargeted
- 41% of received emails were for information purposes
- 46% required an action but didn’t state the expected action
- 56% of employees remarked that email is used too often instead of telephone or face-to-face
- Almost half of employees (45%) felt that their own emails were easy to read

The fractured attention comes at a cost…. More than $650 billion a year in productivity is lost because of unnecessary interruptions, predominately mundane matters… That cost comes from the time it takes people to recover from an interruption and get back to work.
iChaos

- Fast paced, rapidly changing environment
- Large amount of information
- Conflicting “sources of e-truth”
- Multiple modalities
- Frequent updates, broadcasts
Large Group Discussion

• What are some strategies you use to help manage e-information?

• What are some challenges?
The GTD Method: GTD, or "Getting it Done," methodology arose from David Allen's popular and ground-breaking work-life management system. His techniques can be applied to nearly all aspects of work and life. The GTD method for processing email involves taking action on every piece of email that arrives in your inbox.

If the item requires action:
- 1) Do it (if it takes less than two minutes)
- 2) Delegate it,
- 3) Defer it

If the item does not require action:
- File it,
- Delete it
- Incubate it for possible action later

“By processing mail this way, you'll always have an empty inbox”
Challenges

- Manage volume
- Manage tasks, scheduling, and events
- Minimize disruptive interruptions

- Prioritization
- Focus awareness and attention
- Organization
- Automation
Cognitive Framework: Awareness & Priority

“I’ll take care of it now”
High Priority > High Awareness: Push Strategies

“I typically get to it at a certain time”
Intermediate Priority > Moderate Awareness: Fetch Strategies

“I’ll get to it when I have time”
Low Priority > Low Awareness: Pull strategies
“To Push or To Pull”
That is the question...

“Push”
- High priority, high awareness
  - Sent to you
  - VIPs
  - Important announcements
  - Patient-related

“Pull”
- Low priority, low awareness
  - Informational messages
  - Broadcasts

“Fetch”
- Intermediate priority, moderate awareness
  - Clinical tasks (e.g., reviewing discharge summary)

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- Intermediate priority, moderate awareness
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Enhancing Productivity

- Separate work and personal e-mail accounts
- Create contacts, calendar events, tasks
- Use cloud storage as your “single source of truth” for contacts, calendars, documents, spreadsheets, powerpoints, etc.
- Use mobile “apps”
- Social media?
A single source of truth: “The Cloud”

Access digital files from any internet connected device (e.g., desktops, workstations, tablets, smartphones)
Large Group Discussion

• What strategies do you use to manage email volume?
• What techniques can you use to reduce the perception of email overload?
• What tools can you use to manage your email tasks?
Reduce email volume
Reduce email volume

Unsubscribe
Reduce the *perception* of email volume

Work Email

Don’t mix work with pleasure!

Personal Email

“If anybody wants me, I’ll be in my office reading everyone’s personal e-mail.”
Reduce the **perception** of email volume

View emails by conversation thread

Multiple emails “collapse”
Reduce the **perception** of email volume

Create rules to automatically route emails into folders

Fewer emails left in your “inbox”
Tasks and Schedules:
Create Tasks and Calendar Events

Add a reminder to follow-up at another time

When possible, create calendar events
"A pace not dictated by electrons": an empirical study of work without email

Email can make us more anxious at work → more self-interruptions
Manage Disruptive Interruptions: Notification Settings
Manage Disruptive Interruptions & Stress: Notification Settings

Manage notification settings on your device(s):

“Push”

“Fetch”

“Pull” (Manual)
Email Management Tips & Advice: The Sender

• Use a subject line to *summarize*, not *describe*
• Give your reader *full context at the start* of your message
• When you copy lots of people (a heinous practice that should be used sparingly), *mark out why each person should care*
• *Clearly state action requests*
• Make your e-mail one page, preferably less
• *Separate topics* into separate e-mails ...up to a point
• Edit forwarded messages
• Use tools to set priority of message (!), but don’t abuse it!
• Avoid replying to all
• Avoid using email for scheduling a call or conference:
  – Use calendar invitations and include the topic in the calendar invitation
  – Use online scheduling apps when coordinating schedules of multiple people (e.g., TimeBridge, Doodle, etc.)
• Others???
Email Management Tips & Advice: The Reader

• If you don’t need it, delete it
• If you think you may need it, more than likely you won’t
• The assumption that you will be able read all your emails is false
• The quicker you reply, the quicker you’ll get a response – take your time, send out delayed responses to lower priority messages, or just ignore it if it’s not relevant and you don’t have time
• Check e-mail at defined times each day
• Triage messages before you do any follow-up
• If it’s important and you can’t respond immediately, create a reminder to prompt you at a later time
• If it’s really important, the information will ultimately get to you...have faith!
• There are plenty of other ways that information gets to you
  — Flat screen TV broadcasts, electronic calendar subscriptions, rss feeds
• Unsubscribe to list-serve emails that you don’t actually read
• Auto-filter lower priority and task specific messages into sub-folders
• View your email in conversation threads as the default
• If you are getting information pushed to you on other devices (e.g., mobile app), you don’t need a duplicate email notification
ACLGIM e-Leadership

E-Info Management: Social Media
Vineet Arora MD MAPP
Twitter: @futuredocs
varora@uchicago.edu
What is social media?

Social Networking Websites
Facebook, LinkedIn

Media Sharing Websites
YouTube, Vimeo, Pinterest

Blogs & Micro-blogs
Wordpress, Twitter
Social Media Exploits Strength of Weak Ties

**Group/Network**
Group members, because of their frequent interaction, tend to think alike over time. This reduces the diversity of ideas, and in worst-case scenarios leads to "groupthink".

**Weak Ties**
Weak ties are relationships between members of different groups. They are utilized infrequently and therefore don’t need a lot of management to stay healthy. They lead to a diversity of ideas, as they tie together disparate modes of thought.

**Strong Ties**
Strong ties are relationships between people who work, live, or play together. They are utilized frequently and need a lot of management to stay healthy. Over time, people with strong ties tend to think alike, as they share their ideas all the time.
Forrester Engagement Pyramid: Social Media

- **Creators**
  - Publish a blog
  - Publish your own Web pages
  - Upload video you created
  - Upload audio/music you created
  - Write articles or stories and post them

- **Critic**
  - Post ratings/reviews of products/services
  - Comment on someone else’s blog
  - Contribute to online forums
  - Contribute to/edit articles in a wiki

- **Collectors**
  - Use RSS feeds
  - Add “tags” to Web pages or photos
  - “Vote” for Web sites online

- **Joiners**
  - Maintain profile on a social networking site(s)
  - Visit social networking sites

- **Spectators**
  - Read blogs
  - Watch video from other users
  - Listen to podcasts
  - Read online forums
  - Read customer ratings/reviews

Source: The Impact Of Emerging Technology On Consumer Behavior And Marketing Strategy – Forrester
Facebook & Twitter

- Fastest growing social media site
- Microblog messages that are 140 characters or less to ‘followers’
Twitter Terminology

- **Tweet** – message that is 140 characters or less
- **Retweets** or “RT” – repeating the message
- **@ Reply** – a message to specific tweeter that is public
- **Direct message** or “DM” – a message to a specific tweeter that is private
Get short, timely messages from Vinny Arora.
Twitter is a rich source of instantly updated information. It's easy to stay updated on an incredibly wide variety of topics. Join today and follow @FutureDocs.

FutureDocs

All about social networks RT @nytimeshealth Better Health, With a Little Help From Our Friends http://nyti.ms/bvRLIm about 2 hours ago via Twitterrific

Medical Eponyms: Time for Name Change?
http://tinyurl.com/2732tpq (esp Wegener & Reiter with Nazi past) in Archives IM about 5 hours ago via web

RT @whatifwhynot Quality will drive doctor & hospital choices - chicagotribune http://bit.ly/adF9Ks #hcr features Northshore
Thanks!
1,265,381,596,000.00

MotherinMed Could do 3-3:30ish pm CST on Friday. Yes, let's talk about maybe doing one emphasizing + applications in med ed. I'm at [redacted]. Cool!
1,265,172,233,000.00

MotherinMed Next week sounds good. Especially M-T-W before I start back on wards. have you done any how-to social media workshops for meetings?
1,265,170,222,000.00

MotherinMed Blogging is a time commitment and many enjoy sites frequently updated. just a thought. our group blog format has worked really well.
1,265,143,571,000.00

MotherinMed Would love to talk. Your blog has a lot of potential given your twitter rep-great idea. What about having multi-authors - all about med ed?
1,265,143,452,000.00

MotherinMed Your tweets are so awesome, Vinny. I love them. Thanks for all the great info. Would love tips on how to filter all that info sometime.
1,265,139,513,000.00

GoldCareInMed Welcome to the Gold Foundation!
1,265,121,507,000.00

1,264,756,104,000.00
The Hierarchy of Tweets

www.theinnovationdiaries.com
www.twitter.com/kevmaguire

Self-actualization
- twooshing, meta-tweeting, “tweet better” tweets post-twitter tweets

Esteem
- retweeting, self-promoting, breaking the news, follow-baiting

Love/Belonging
- conversations, introductions, answering questions, hashtagging

Safety
- sharing knowledge, staying “in the loop”, popularity, personal health & security, non-user berating

Physiological
- eating, drinking, sleeping (alone), sleeping (with someone else), general “verbign”
40% of tweets are “pointless babble”
Breaking through the Babble: “Pulling” Meaningful Information

• Select followers carefully
• Create or follow Twitter list
• Save a hashtag search
  – “#meded or #ptsafety”
  – “#primarycare”
  – Healthcare Hashtag Project
• Use another program to aggregate tweets
  – Flipboard, Pulse, etc.
• Participate in a tweet–chat
  – Get ideas!
## Use Cases

<table>
<thead>
<tr>
<th>Activity</th>
<th>Example</th>
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<tbody>
<tr>
<td>Learning</td>
<td>Following a conference hashtag #SGIM13, follow a journal</td>
</tr>
<tr>
<td>Connecting</td>
<td>Join a Twitter chat (#meded chat)</td>
</tr>
<tr>
<td>Advocacy</td>
<td>Tell a story, join a movement (DFA #debatehealth)</td>
</tr>
<tr>
<td>Teaching</td>
<td>Teaching a MOOC (Massive Open Online Course)</td>
</tr>
<tr>
<td>Engaging</td>
<td>Recruiting patent champions</td>
</tr>
</tbody>
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Hospital Handoffs for Intern Orientation
by Vinoet Arora on Jun 20, 2010

Teaching video for new resident physicians highlighting the pitfalls of the handoff process
Only 4% of patients who had insurance and left AMA had payment denied

Financial Responsibility of Hospitalized Patients Who Left Against Medical Advice: Medical Urban Legend?

Gabrielle R Schaefer, BA¹, Heidi Matus, MD², John H. Schumann, MD³, Keith Sauter, BA⁴, Benjamin Vekhter, PhD⁵, David O. Meltzer, MD, PhD⁵, and Vineet M. Arora, MD, MAPP²,⁵
Debunking Medical Urban Legend

Like Mikey, the Life cereal kid who died from mixing Pop Rocks and Coke, or the spider eggs in Bubble Yum that help make it so soft and chewy, Medicine has its share of urban legends.

Did you know, for example, that if you're hospitalized and decide that you want to leave “Against Medical Advice” [AMA], that your insurer won't pay for the hospitalization?

Bunk.
Does leaving against medical advice stick patients with a bill?

JOHN SCHUMANN, MD | PHYSICIAN | MARCH 8, 2012

(All names and identifying features of characters in this story have been changed.)

Nora, a third year medical student, came to me in moral distress.

Ms. DiFazio, one of the hospitalized patients on her internal medicine rotation, was frightened to undergo an invasive (and expensive) medical procedure: cardiac catheterization.

The first year doctor with whom Nora was paired, Dr. White, vented to her:

“These patients come to us seeking our help and then refuse what we have to offer them,” Dr. White steamed.

At the bedside, the intern demanded to know why Ms. DiFazio refused the procedure.
leaving against medical advice

About 3,380,000 results (0.14 second)

Against medical advice - Wikipedia, the free encyclopedia
en.wikipedia.org/wiki/Against_medical_advice
Against Medical Advice, or AMA, sometimes known as DAMA, Discharge Against Medical Advice, is a term used with a patient who checks himself or herself out...

Does leaving against medical advice stick patients with a bill?
www.kevinmd.com/.../leaving-medical-advice-stick-patients-bill.html
Mar 8, 2012 – Don't let us doctors coerce you into staying by threatening you with the bill.

Do patients pay when they leave against medical advice? - The...
www.uchospitals.edu › About Us › Newsroom › 2012 Press Releases
Feb 3, 2012 – February 3, 2012: There are ways in which patients who leave the hospital against medical advice wind up paying for that decision.

Patients leaving hospital against medical advice fare worse | Fox...
www.foxnews.com/.../patients-leaving-hospital-against-medical-advice...
May 3, 2012 – Hospital patients who leave against medical advice may have an increased risk of being readmitted or dying within a month, a study at one ...

When a Patient Leaves Against Medical Advice
Surprisingly, there is a paucity of literature available describing the consequences of patients who leave against medical advice (AMA). Although logically ...

“I’m Going Home”: Discharges Against Medical Advice
www.ncbi.nlm.nih.gov › ... › Mayo Clin Proc › v.84(3); Mar 2009
by DJ Alfandary - 2009 - Cited by 29 - Related articles
If hotels billed like hospitals

Posted by Sarah Kliff at 11:45 AM ET, 02/16/2012

Via the Boston non-profit Costs of Care, an entertaining video reminder of how opaque health-care bills make understanding health-care costs a big challenge. Meet “Hotel Hospital,” a hotel with billing practices that mirror those of a hospital.
Tell Us About Your “Bright Ideas”

www.TeachingValue.org/Competition
Online Medical Professionalism: Patient and Public Relationships: Policy Statement From the American College of Physicians and the Federation of State Medical Boards

Jeanne M. Farnan, MD, MHPE; Lois Snyder Sulmasy, JD; Brooke K. Worster, MD; Humayun J. Chaudhry, DO, MS, SM; Janelle A. Rhyne, MD, MA; and Vineet M. Arora, MD, MAPP, for the American College of Physicians Ethics, Professionalism and Human Rights Committee; the American College of Physicians Council of Associates; and the Federation of State Medical Boards Special Committee on Ethics and Professionalism*

“Pause before posting”

Consider the content and the message it sends about a physician as an individual and the profession

Maintain separate personas, personal and professional, for online social behavior

Scrutinize material available for public consumption

Safeguards

Use of social media sites to gather information about patients
Use of online educational resources and related information with patients
Physician-produced blogs, microblogs, and physician posting of comments on others
Physician posting of personal information on public social media sites
Caution: Whatever happens on Twitter stays on Twitter.
Overcoming the Time Barrier

• Tie it closely to what you are doing anyway
• Use dead space in your day (i.e. better than watching the numbers on an elevator)
• NO GUILT if you miss anything!
• OK to lurk at first
• Get a Twitter mentor (“Twentor”)
Small Group Activity

• Name something that you want to spread using social media

• Develop a social media strategy to spread the word
  – Vehicle of spread?
  – Account name?
  – Why will it work?