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The Resilient Practice

Positioning the Practice for
Success Post-COVID-19

Module 3 | April 2021



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OF OPHTHALMOLOGY®

The Resilient Practice:

Positioning the Practice for Success Post-COVID-19

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What sets a practice on a steady path to successful recovery?

Great leadership skills.

The impetus for *The Resilient Practice* was to help practice leaders develop effective leadership skills and provide guidance on the most crucial recovery strategies. These modules highlight on-the-ground recovery strategies, leadership pearls and lessons learned from your Academy and AAOE colleagues. Robust learning resources are included for you to deepen your knowledge.

Leaders are not born; they are developed through study, practice and trial and error. The leadership skills of many physicians and administrators were newly forged during the pandemic crisis. Like you, these practice leaders quickly learned how to unite their eye care teams, lift morale, foster innovative problem-solving while continuing to provide excellent patient care and experience during the unprecedented outbreak of COVID-19.

Developing your personal leadership skills will take time but will be well worth the effort. We wish you success in your practice recovery.

—AAOE Recovery Task Force

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“Leadership is unlocking people’s potential to become better.”

—Bill Bradley
American Politician/Former
Professional Basketball Player

Module 3

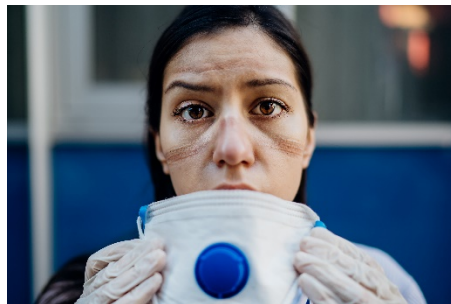
How to Reduce Burnout by Changing Your Practice Culture

Burnout is top of mind these days. The recent pandemic surges, the new COVID-19 variants and the chaotic vaccine rollout have taken a toll on our national mental health. For physicians and practice staff, burnout can create a toxic practice environment, leading to increased operational errors, risks of malpractice, diminished quality of care and patient experience as well as financial loss.

No doubt you've read strategies to reduce burnout: make time for mindfulness, exercise, meet with friends or write a gratitude journal. While these practices can help alleviate stress, they will not fix the problem entirely because burnout stressors are often systemic and stem from the environment or workplace culture.

COVID-19 and Burnout

Burnout is raging among frontline health care providers as the slow recovery from the pandemic drags on.



Andrew Jacobs reported in a Feb. 4, 2021 article from The New York Times, "A Parallel Pandemic Hits Health Care Workers: Trauma and Exhaustion," that "Some health care experts are calling for a national effort to track the psychological well-being of medical professionals, much like the federal health program that monitors workers who responded to the 9/11 terrorist attacks."

When we read strategies to reduce burnout, the onus of managing burnout is often put back on the individual rather than examining the larger role the environment or cultural context plays in how individuals experience burnout.

Lack of Trust + Nonsupportive Work Culture = Burnout

"Compared with people at low-trust companies, people at high-trust companies report 74% less stress, 106% more energy at work, 50% higher productivity, 13% fewer sick days, 76% more engagement, 29% more satisfaction with their lives and 40% less burnout."

— Paul J. Zak, Harvard Researcher

The third ranked stressor for physicians is nonsupportive work culture. Peter Drucker famously opined that, "Culture eats strategy for breakfast." No matter how successful your strategies might be, ultimately, your success will always be determined by the culture of your business.

50% of CEOs worldwide consider lack of trust to be a major threat to their organizational growth.

— [Global CEO Survey](#)

"Trust is the glue of life. It's the most essential ingredient in effective communication. It's the foundational principle that holds all relationships."

— Stephen R. Covey



Embrace Empathetic Leadership

“32% of ophthalmologists cited nonsupportive work culture as the third top contributor to burnout.”

— Medscape’s 2020 National Physicians Burnout & Depression report



“I believe our best opportunity for success in 2021 lies in our ability to learn from and follow the lead of our “health care heroes.” Doctors, nurses and health care workers all demonstrated a level of empathy this past year that we need to celebrate and replicate in our own professional lives....”

— Forbes Technology Council, “[Empathy: A Priority for Business Leaders in 2021](#)”

“A ‘landscape-scale crisis’ such as COVID-19 strips leadership back to its most fundamental element: making a positive difference in people’s lives. As our research has outlined, an imperative for leaders in such times is to demonstrate compassionate leadership and to make dealing with the unfolding human tragedy the first priority.”

— McKinsey & Co.’s “[Leadership in a Crisis: Responding to the Coronavirus Outbreak and Future Challenges](#)” by Nicolai Chen Nielsen, Gemma D/Auria and Sasha Zolley

Four Qualities for Compassionate Leaders

“We find that four qualities can mitigate these natural tendencies and help leaders find the compassionate voice to manage in crisis and shepherd their organization[s] into a postcrisis next normal. Start by creating space to attain a keener *awareness* of what is going on within and around you. Be bold in exhibiting *vulnerability* by lowering your guard and confronting what is unfolding. Demonstrate *empathy* to better tap the emotions others are feeling and act with *compassion* to make individuals and groups feel genuinely cared for. Cultivate these qualities in a balanced way by first tuning inward to understand and integrate your own emotions and fears, and then turning outward to alleviate pain, support others, and, over time, enable people and the business to recover.”

- McKinsey & Co., “[Responding to the Coronavirus Outbreak and Future Challenges](#),” Nicolai Chen Nielsen, Gemma D/Auria and Sasha Zolley

“As a recent example, as of May 2020, U.S. states with female governors have had fewer COVID-19 deaths than states with male governors, and an analysis of 1.2 million words of transcripts found that the women expressed more empathic concern in their briefings, demonstrating the importance of leaders’ ability to demonstrate empathy.”

- [Are Leaders Learning How to Be More Empathetic? If Not Now, When?](#), Stephen Young, PhD, and Cathleen Swody, PhD

“Empathy represents the foundation skill for all the social competencies important for work.”

- Daniel Goleman
Author and psychologist

“Empathy is the starting point for creating a community and taking action. It’s the impetus for creating change.”

- Max Carver
Actor and writer

“According to [Gallup’s analysis](#), only one in three workers in the U.S. strongly agree that they received recognition or praise for doing good work in the past seven days. At any given company, it’s not uncommon for employees to feel that their best efforts are routinely ignored. Further, employees who do not feel adequately recognized are twice as likely to say they’ll quit in the next year.”

— Annamarie Mann and Nate Dvorak, [“Employee Recognition: Low Cost, High Impact”](#)

“When employees can tap into a knowledge sharing culture, they are less likely to encounter bottlenecks and are more likely to productively collaborate and think innovatively.”

— Devon Maloney, [“Knowledge Sharing is Caring”](#)

Eight Tips to Build Trust

Paul J. Zak recommends eight oxytocin and adrenocorticotropin-generating strategies in [“The Neuroscience of Trust: Management Behaviors that Foster Employee Engagement”](#) that build a culture of trust.

While all eight strategies cannot be applied equally to every position within the practice, the data shows that two of the eight are stand-out strategies that all businesses should do: 1) recognize excellence and 2) share information broadly. Zak observed that “the average U.S. company could enhance trust by improving in these two areas — even if it didn’t improve in the other six.”

1. **Recognize excellence.**
Do it immediately and publicly.
2. **Share information broadly.**
Uncertainty breeds stress and leads to a breakdown in trust.
3. **Intentionally build relationships.**
Connection helps productivity and nurtures mutual respect and trust among peers.
4. **Induce “challenge stress.”**
Assign work that is challenging but achievable.
5. **Give people discretion in how they do their work.**
Whenever possible let your staff figure things out on their own as this engenders trust and motivation.
6. **Facilitate whole-person growth.**
Adopt a growth-mindset. This supportive approach helps staff to develop skills and will, in turn, nurture their trust and commitment.
7. **Show vulnerability.**
Leaders who ask for help increase trust and cooperation from colleagues.
8. **Enable job crafting.**
Trust employees to choose which projects they’ll work on.

More Trust-Building Strategies for the Practice

The following trust-building strategies are summarized in part from Dan Smiljanić, “[Building a Culture of Trust and Belonging](#),” and by Lauren O’Donnell, “[Managers: Are You Building a Culture of Trust?](#)”

1. Give immediate feedback.

Always be honest and avoid monologues. Instead, highlight your points, actively listen and seek mutual clarifications of any differences in perception.

5. Listen.

Recognize that everyone’s contributions make the practice run efficiently. Outline how their roles enable the practice to meet its goals and listen to their ideas and suggestions.

2. Let them know they make a difference.

You foster team building and commitment when everyone knows their contributions make the practice run effectively and efficiently.

6. Be consistent.

Avoid outliers and one-off decisions when it comes to decisions affecting staff. Trust is built and sustained with consistent equitable and fair treatment.

3. Keep your promises.

Be realistic about what you promise and deliver what you have said you are going to do. Nothing deflates trust and increases cynicism more than lack of follow-through.

7. Model the behavior you seek.

We’ve all heard, “Do as I say, not as I do.” In reality, this doesn’t work, and it undermines confidence and credibility in the practice culture.

4. Allow for failure.

Focus on failure or setbacks as a growth opportunity. The danger of punishing or creating a culture of fear of failure is that it will stifle innovation in your practice.

8. Build in accountability.

Practice leaders need to acknowledge their mistakes as well as successes — this honesty and transparency will model others to follow suit and willingness to follow your lead.

AAOE Practice Administrators Share Their Trust-Building Strategies for the Practice

Practice administrators shared their personal tips for creating a supportive practice culture during the pandemic. The main takeaway is “You are only as good as your team.”



How to Help Your Colleagues

Many Americans are struggling with mental health issues, anxiety, depression and burnout due to the continuing pandemic. Here's when and how to step in to help colleagues in your practice:

1. Look for These Signs

- A change in job performance, such as underperforming or inability to take on or complete tasks.
- Sudden changes in behavior such as moodiness, withdrawal, absenteeism, easily crying, overreacting or lashing out at colleagues.

2. Reach Out

- Everyone in the practice — from physician, administrators, managers and staff — needs to be attuned to how everyone is faring.
- Do frequent check-ins and make it part of your practice culture.
- Managers should reach out immediately to any staff who appear to be struggling with burnout. Relay with compassion the burnout signs you have observed. Let them know that they are not alone in feeling stress and burnout.
- Ask if they are okay and if they would like additional resources.
- Be sure to round back in a few days to see how they are doing, or if they need additional help or resources.
- Physicians and practice administrators bear the brunt of practice operations. Be sure to open a conversation with each other if you observe signs of distress or burnout.

3. Have Support Resources Ready

- Create and share a comprehensive list of resources for all staff.
- Be sure to include your organization's employee assistance program (EAP) and a link to the online portal.
- Develop a peer-to-peer training program to address burnout. Share how peers can help colleagues who are struggling. Sometimes having a peer who listens attentively to concerns can be an effective way to provide caring support. (See the list of resources on page 12.)



Physician-Recommended Burnout Strategies

The American College of Physicians provides the [Top 10 Culture Change Interventions to Reduce Burnout and Improve Physician Well-being](#) listed below.

1

Limit work hours and offer flexible work arrangements.

2

Invest in leadership development.

3

Create a wellness committee. Identify a wellness champion and create a wellness toolbox that includes ingredients for changing residency culture to be in support of wellness, as opposed to simply preventing burnout.

4

Establish wellness as a quality indicator for the practice. Distribute an annual wellness survey and use the results to create interventions to address burnout and enhance well-being.

5

Conduct facilitated physician discussion groups incorporating elements of mindfulness, reflection, shared experience, and small-group learning. Offer humanistic teaching, role modeling and narrative reflection combined with skills training using experiential learning.

6

Establish a culture (time, space, training) in which teamwork and relationships are prioritized: relationships with patients and relationships with peers and colleagues.

7

Provide relationship-centered communications skills training for physicians.

8

Conduct workflow and quality improvement projects aimed at addressing clinician concerns.

9

Implement the “Listen-Act-Develop” model, which is based on organizational psychology and social science, with integration from institutional efforts related to quality improvement, safety culture, burnout, engagement and leadership development. Proactively work to reduce the stigma associated with mental illness to encourage clinicians to seek help when they need it.

10

Proactively work to reduce the stigma associated with mental illness to encourage clinicians to seek help when they need it.

Your Practice Culture: How Did it Fare During the Pandemic?

The best way to start your practice culture assessment is by first asking yourself, “Am I feeling burnt out?” Chances are likely that you are not alone in feeling workplace burnout. Take a good look at your practice culture. The pandemic provides a good barometer of your practice culture and its ability to pivot quickly and address extreme challenges. Ask yourself and a trusted person in your practice to give honest feedback to these questions:

- How did your practice pivot during the pandemic? Did it bring out the best in your practice team or did it expose weaknesses that have not yet been addressed?
- How did your practice handle rapidly changing office and clinic protocols at the outset of the pandemic? Was it a team-based process with input from all staff or top down? Were team members encouraged to offer ideas or were they fearful to voice their opinions?
- Did your practice leadership style change during the pandemic? If so, how? Did it move in a positive or negative direction?
- What specific things about your practice are currently causing burnout? Do you believe these factors can be changed or that you can be successful in making changes to improve your practice culture?
- Do you feel you can honestly share your concerns without reservation with the other leaders in your practice?
- Do you have support? Do you feel respected?
- How is your current practice morale? Is the practice team supportive of each other? What does your practice do keep up morale during this difficult recovery period?
- Before the pandemic, did you have a high staff turnover? If so, what reasons can you attribute to this? What is your staff turnover now?
- Has the pandemic engendered a heightened sense of comradery or has it created more divisions?



Do a Practice Culture Assessment

How you’ve assessed your practice’s ability to handle the closing, reopening and the current recovery phase will shed light on your practice culture.

Practices that took more of a “we are in this together” approach, or had implemented lean practice culture, fared much better in getting their staff on board and boosting morale during one of the worst moments in recent history.

Resources for You



Practices that had implemented lean management in their practice culture prior to the pandemic were able to pivot more easily than many non-lean practices. They had embraced lean's team approach to process improvement which united the entire practice with a central operations vision.

Lean Process Strengthens Team Trust

Practices that had implemented lean management in their practice culture prior to the pandemic were able to pivot more easily than many non-lean practices. When the pandemic hit, Austin Retina Associates (ARA) was positioned to move quickly in setting up key positions for remote work, reworking their in-clinic procedures to include social distancing and virtual check-in. ARA implemented lean in 2016 and saw 8,000 more patients in their first year of implementation — all without overbooking schedules, increasing wait times or rushing patients through. Most importantly, they realized that lean processes enabled the practice to provide every patient with increased face-to-face time with physicians and techs. Clinic hours ended on time and staff were able to leave the practice on time and experience better work/life balance.

What Is 'Lean?'

Lean management provides a framework and tools to make practice operations more efficient. It emphasizes waste reduction and analysis of processes to identify and reduce bottlenecks and inefficiencies.

Lean processes also put patient satisfaction front and center because face-to-face time with physician is what patients most value. Long wait times devalue the patient experience.

Trust and the Lean Process

For the lean process to work effectively, physicians, practice administrators and the front-line team must actively collaborate to create a highly functioning practice. All perspectives are needed. Because the lean process works by trying out solutions, failure is inherently part of the process. You can't find out what works without trying a proposed solution. This requires openness, mutual respect and trust. With these characteristics, it's easy to see why practices employing lean processes were better able to weather the challenges posed by COVID-19 and maintain trust in the practice during one of most devastating global events in recent history.



The best way to start your practice culture assessment is by first asking yourself, “Am I feeling burnt out?” Chances are likely that you are not alone in feeling workplace burnout.

Burnout Self-Assessment

Physicians, administrators and managers, as practice leaders, should do a practice culture assessment. (See page 5.) The best way to start your practice culture assessment is by first asking yourself, “Am I feeling burnt out?”

If the answer is yes, examine the roots of your own burnout to determine if it stems from personal issues or specific issues encountered in your workplace. If it is the latter, chances are likely that you are not alone in feeling workplace burnout.

When people are overworked or bogged down by busy work that does not fulfill their desired purpose, they can experience some of the following:

- a. **Inability to concentrate on routine tasks and forgetfulness**
These are strong indicators of emotional exhaustion. When professionals become disengaged, they tend to forget routine tasks that can lead to poor job performance and pose malpractice risks.
- b. **Chronic fatigue**
Practice life is constantly busy and fast paced. When long hours in a demanding environment add up, chronic fatigue can set in and can last days or weeks.
- c. **Irritability and pessimism**
Disengagement and exhaustion can hinder people’s ability to handle normal ups and downs and problems can appear unsurmountable. Burnout can also cause people to have a reduced sense of empathy and may result in staff being curt or insensitive to patients.
- d. **Isolation**
Withdrawing from normal social engagement with peers is another indication of long-term exhaustion and depletion. Often times, burnt-out staff have a hard time keeping appointments and being on time. They may also forego group social activities or training sessions.

PHYSICIAN WELLNESS RESOURCES

- [AMA: Physician Health](#)
- [Kettering Health Network: Physician /APP Well-being](#)
- [Harvard Medical School: Lean Forward](#)
- [NorCal Group: Professional Wellness](#)
- [PBC Medical Society: Physician Wellness Resource Library](#)
- [American Psychiatric Association: Well-being Resources](#)
- [UC Davis Health: COVID-19-Specific Wellness Resources For Physicians, Health Care Professional Newsroom](#)

PHYSICIAN SUPPORT GROUPS

- [Physician Support Line](#)
- [The Center for Mind-Body Medicine](#)
- [Lorna Breen Heroes' Foundation](#)
- [The Frontline Workers Counseling Project](#)
- [CopeColumbia](#)
- [PeerRxMd™](#)

e. **Inability to be fully present.**

Burnout causes people to either spend time daydreaming or unable to disengage from work while at home. Remote work has increased the latter as the lines between personal and workspaces have blurred.

Review the symptom above. You can also opt to do an online self-questionnaire:

- [Stanford Medicine | WellMD](#)
- [MindTools: Burnout Self-Test](#)
- [Stress and Burnout Questionnaire](#)

AAOE Resources

Articles

- [Applying the Science of Quality Improvement to the Ophthalmology Practice](#)
- [Going Lean: How a Simple Change in Thinking Can Help Your Patients, Your Staff and Your Bottom Line](#)
- [Think Lean: Reduce Costs and Improve Profitability and Patient Satisfaction](#)



LEARN
MORE

Videos

- [Lean Management in the Ophthalmology Practice](#)
- [The Lean Office](#)
- [Think Lean: Reduce Costs, Increase Profitability and Improve Patient Satisfaction](#)

How to Get Started with Lean

AAOE has created multiple resources to get ophthalmic practices up to speed with Lean. Lean is a team effort. For those serious about implementing Lean, AAOE recommends that you first get buy-in by engaging a physician champion in your practice. It's crucial to your practice success to have your physician owner, practice administrator and/manager(s) on board at the outset.

AAOE has created the following resources that succinctly explain the Lean process and how to use Lean tools:

- [The Lean Practice: A Step by Step Guide to Running and Efficient and Profitable Ophthalmic Practice \(print\)](#)
- [The Lean Practice: A Step by Step Guide to Running and Efficient and Profitable Ophthalmic Practice \(ebook\)](#)
- [The Lean Practice: Mastering the Art of Lean Ophthalmic Practice](#)

AAOE has adapted the following Lean tools for the ophthalmic practice:

- [A3 Instructions](#)
- [Recovery A3 Sample](#)
- [Reopening and Recovery Standard Work Sample](#)
- [Spaghetti Mapping and 5S with COVID-19 Considerations](#)
- [Think About Your Future State Worksheet](#)
- [The 8 Wastes Worksheet](#)

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The American Academy of Ophthalmic Executives® (AAOE®), an affiliate of the American Academy of Ophthalmology, is the leading membership organization for ophthalmic practice management serving thousands of members. AAOE's mission is to facilitate the business success of ophthalmic practices through accurate and up-to-date coding and practice management resources.

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