

Family Medicine Rising: Becoming The Physician Leaders Our Patients Need Us To Be

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EXPLORE
HEALTHCARE SUMMIT

Learning Objectives

- Frame the physician leadership journey in 4 stages based on our personal statement archetype and how to improve patient care
- Contextualize Erik Erikson's Stages of Psychosocial Development (specifically Generativity versus Stagnation) in Family Medicine
- Leverage Starfield's 4 C's to measure how close we are to becoming the physicians we wrote about in our personal statements



Who is this dude?

- Medical Director @  **INTEGRATED HEALTH PARTNERS**
- #FamilyPhysician @  **KCS**
- Director @  **AMERICAN ACADEMY OF FAMILY PHYSICIANS**
- Co-Founder #FMRevolution
- Father • Husband • Co-Leader #TheIncredibLEEs
- #KoreanAmerican





The Physician Leadership Journey

Anatomy Of A Superhero Origin Story

- Give us a reason to care
- Don't make your hero a chosen one; give her a chance to prove herself
- It may be useful to tie your character's origin story to the villain's plot
- Is your character's background too exceptional?
- Give us a chance of a happy ending



Family Medicine Superheroes

- Let's give the American public a reason to care.
- None of us is a Chosen One; we must be given a chance to prove ourselves.
- Medicine's origins are tied to the fragmented, volume-based fee-for-service model of health care delivery in the US (and historically, we have been great at playing in the sandbox with that broken system but our time is now to fight for us and fight for our patients).
- None of us is too exceptional on our own (ok, maybe some of us) but together, we are exceptional (pretty much).
- And finally, with physicians leading change/transformation in US health care, we will have a chance for a happy ending.







FAMILY MEDICINE REVOLUTION

Family physicians are heroes.
Every hero has an origin story.

JOURNAL OF MEDICINE JANUARY 20, 2017 ISSUE
THE HEROISM OF INCREMENTAL CARE
We devote vast resources to intensive, one-off procedures, while starving the kind of steady, intimate care that often helps people more.
By Arnd Grosse

The RULES of #FMREVOLUTION FIGHT CLUB

- 1st RULE: You must talk, tweet, and FB post about #FMREVOLUTION FIGHT CLUB.
- 2nd RULE: You must TALK, TWEET, and FB POST about #FMREVOLUTION FIGHT CLUB.
- 3rd RULE: If they say "stop", tell them we are an unstoppable force for change in the U.S. healthcare system. If they go limp, tap out and start ACLS.
- 4th RULE: At least 128,300 family docs and medical students in our fight to transform the U.S. healthcare system.
- 5th RULE: One fight at a time: the fight to continue giving a damn and being there for our patients.
- 6th RULE: Shirts and shoes please (unless your family doc needs to examine you in which case wear one of those gowns).
- 7th RULE: Our fight to transform the U.S. healthcare system will go on as long as it has to.
- 8th RULE: If this is your first time at #FMREVOLUTION FIGHT CLUB, you HAVE to join our fight (yes, that includes you MedStuds; become the doctor that you wrote about in your personal statement).

HOW TO CHANGE THE WORLD

1. Realize yourself
2. Show up
3. Occupy the ground
4. Change the world

"Become the physician leaders our patients and communities need us to be."





Erik Erikson's Stages of Psychosocial Development

"Stay relevant"





Erik Erikson's Stages of Psychosocial Development

- Infant: Trust vs Mistrust
- Toddler: Autonomy vs Shame and Doubt
- Pre-Schooler: Initiative vs Guilt
- Grade-Schooler: Industry vs Inferiority
- Teenager: Identity vs Role Confusion
- Young Adult: Intimacy vs Isolation
- Middle-Age Adult: Generativity vs Stagnation
- Older Adult: Integrity vs Despair

Generativity vs Stagnation

- Generativity
 - Making commitments to other people
 - Developing relationships with family
 - Mentoring others
 - Contributing to the next generation
- Stagnation
 - Being self-centered
 - Failing to get involved with others
 - Not taking an interest in productivity
 - No efforts to improve the self
 - Placing one's concerns over above all else

Generativity vs Stagnation

- Benefits of Generativity
 - Better health
 - More positive relationships
 - Greater productivity
 - Greater fulfillment
 - Increased community involvement
- Consequences of Stagnation
 - Worse health
 - Lower quality relationships
 - Decreased life satisfaction

What is leadership?

Vision x Task x Relationship

Dream Big

Get SH*T Done


Know How To Have Fun

Passion & Talent

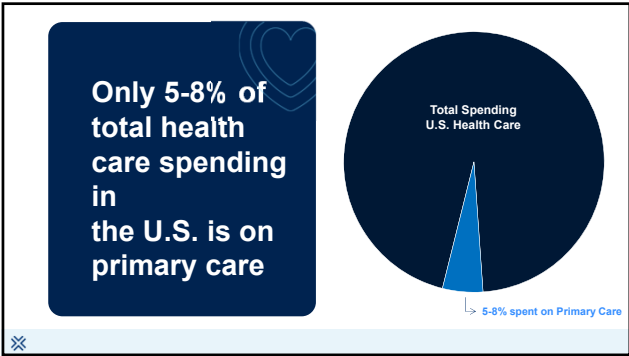
✕

Leveraging Starfield's 4 Cs to Better Measure Our Successes as Family Physicians

\$13 in savings for every \$1 spent in Primary Care



✕



- How Health Care is Organized**
"Competitive Forces"
- Care Delivery
 - Hospitals
 - Nursing homes
 - Home care agencies
 - Pharmacies
 - Physicians
 - Primary Care
 - Specialty
 - Other caregivers
 - Suppliers
 - Pharmaceutical companies
 - Medical supply companies
 - Purchasers
 - Organized
 - Business
 - Government
 - Individuals/patients
 - Insurers
 - Commercial insurance companies
 - Health maintenance organizations
 - Accountable Care Organizations

The Triple Aim + 1


Value (quality/cost)

Patient experience

Population health


Joy in Practice

Joy?



<http://www.fox.com/2015/05/19/joy-fox-2015-05-19/>


What is Primary Care?




<http://www.fox.com/2015/05/19/joy-fox-2015-05-19/>




First-contact



Continuous over time



Comprehensive and concerned for the whole patient



Coordinated across the system

How to Better Measure Our Value?

A New Comprehensive Measure of High-Value Aspects of Primary Care

Abstract

OBJECTIVE: To develop and validate a concise measure of primary care that is grounded in the experience of patients, physicians, and health care systems.

DESIGN: We used a mixed-method approach to develop a primary care measure. We first conducted a series of focus groups with patients, physicians, and health care systems to identify key aspects of primary care. We then used a Delphi process to refine the measure. Finally, we conducted a validation study to assess the measure's reliability and validity.

SETTING: The study was conducted in a large, multi-site health system.

PARTICIPANTS: The study included patients, physicians, and health care system leaders.

MEASUREMENTS AND MAIN RESULTS: The measure consists of 10 items that assess various aspects of primary care, including patient-centeredness, coordination, and continuity of care. The measure was found to be reliable and valid.

CONCLUSIONS: The primary care measure is a concise and comprehensive measure of high-value aspects of primary care. It can be used to assess and improve the quality of primary care.

KEYWORDS: primary care, patient-centeredness, coordination, continuity of care, high-value aspects of primary care.

INTRODUCTION: Primary care is the foundation of the health care system. It is the first point of contact for most patients and is responsible for a large portion of the costs of care. Therefore, it is important to measure and improve the quality of primary care. This paper describes a new measure of primary care that is grounded in the experience of patients, physicians, and health care systems.

CONCLUSIONS: The primary care measure is a concise and comprehensive measure of high-value aspects of primary care. It can be used to assess and improve the quality of primary care.

Item	Cross-validation (Within Site)			Cross-validation (Between Sites)		
	Mean	SD	ICC	Mean	SD	ICC
1. The patient is treated with respect and dignity.	4.2	0.8	0.71	4.1	0.9	0.68
2. The patient is treated with kindness and compassion.	4.3	0.7	0.73	4.2	0.8	0.70
3. The patient is treated with honesty and integrity.	4.1	0.9	0.69	4.0	0.9	0.67
4. The patient is treated with fairness and equity.	4.0	0.8	0.70	3.9	0.8	0.69
5. The patient is treated with respect and dignity.	4.2	0.8	0.71	4.1	0.9	0.68
6. The patient is treated with kindness and compassion.	4.3	0.7	0.73	4.2	0.8	0.70
7. The patient is treated with honesty and integrity.	4.1	0.9	0.69	4.0	0.9	0.67
8. The patient is treated with fairness and equity.	4.0	0.8	0.70	3.9	0.8	0.69
9. The patient is treated with respect and dignity.	4.2	0.8	0.71	4.1	0.9	0.68
10. The patient is treated with kindness and compassion.	4.3	0.7	0.73	4.2	0.8	0.70

Dr. G. Gayle Stephens
Family Medicine Revolution OG



"Be there"
"Give a damn"
The Job vs The Work

LEGISLATIVE PHYSICS:

Shifting the Health Care Value Vector towards Primary Care

FORCE = MASS X ACCELERATION AMPLIFICATION



THANK YOU!



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#FMRvolution
#FMRising
