APPLYING POSITIVE PSYCHOLOGY TO THE PRACTICE OF MEDICINE

By Scott E. Friedman, JD; Elad Levy, MD, MBA, FACS, FAHA
Our healthcare system has never been more complicated than it is today, and the shifting dynamics have exacerbated the incessant challenges for medical group practices. Keeping up with new rules, regulations and technologies has demanded increasing time commitments, creating new pressures with work distribution and on-call coverage.

Decision-making about fundamental business choices, such as whether to add or eliminate partners, terms of partnership buy-ins, profit sharing, or whether to sell a practice to a hospital system or merge with a larger medical group, has become increasingly complex. And then there’s the vast technology divide between physicians of different generations that is widening exponentially.

Significant new stresses have been created by these changes. Aside from generally understood economic stresses, challenges and changes to medical practices result in psychosocial stresses for physicians who sense they do not have the requisite resources or control to manage those challenges. If left unmanaged, these stresses can trigger feuding as medical group partners spend more time on challenging practice management issues and less time on patient care, family activities or personal time to recharge. These contentious elements of medical group practice are compounded by the ways in which our brains work to accomplish the tasks at hand.

**Addressing problems with science**

In his best-selling book, *Thinking, Fast and Slow*, Nobel Prize-winning author and professor Daniel Kahneman observes that “[b]y and large, the idea that our minds are susceptible to systematic errors is now generally accepted.” These systematic errors, the by-product of natural selection, include not simply making decisions quickly but decisions that are driven by imperfect memories, a propensity to exaggerate and tell “little white lies,” and a constrained ability to pay attention to all that is going on around us.

Perhaps one of the most significant challenges we face today results from our evolutionary heritage and our “modern” minds working much the same way they did for our ancestors who hunted wild animals or lived in caves and gathered around fire. This heritage has bequeathed us with the well-known “fight-or-flight” response that automatically kicks in to help us respond to real and perceived dangers. Only these days, those dangers are more likely to be petty inconveniences, frustrations, insults or misunderstandings — not existential threats to our livelihood.

This fight-or-flight response can create a bewildering cycle of overreactions inside a medical group practice, where staff members might experience countless and various types of fear, such as they are undercompensated or someone else is overcompensated, they don’t have sufficient control or they are losing control, or they are working too hard or someone else isn’t working hard enough or isn’t contributing his or her fair share.

Our inherited propensity for systematic errors in how we process information can prove disastrous in a medical group practice. Decisions driven by fear, irrationality, promises forgotten, inattention to information and simple incompetence for the tasks at hand can diminish trust, as physician colleagues come to view each other as unreliable, insincere and incompetent.

These negative emotions can naturally lead to infighting and short-term thinking, resulting in wasted time and resources, decreased productivity and diminished bottom lines. At a certain point, the essential ability to work together in even the most modest ways is completely lost, forcing individual physicians to leave a practice to seek a better alternative or the entire group might implode.

Fortunately, there are antidotes to the various challenges posed by our evolutionary legacy. Principally, the developing field of positive psychology can ameliorate some of the problems facing medical groups. These new strategies are empirically validated, demonstrably correlated to enhanced productivity as well as bottom-line success, and relatively easy to implement.

**In a nutshell**

Positive psychology is the scientific study of factors that contribute to the optimal functioning of people, groups and organizations. Scientific study suggests and confirms important insights about the correlation of a positive workplace culture with individual happiness and organizational success, according to Shawn Achor, author of *The Happiness Advantage: The Seven Principles of Positive Psychology That Fuel Success and Performance at Work*. [Hear Achor speak during the MGMA 2014 Annual Conference in Las Vegas, Oct. 29.]

For example:

- Happy people are more productive, work longer hours and take fewer sick days compared to unhappy people.
- Happiness increases dopamine and serotonin levels, which increase neural connections and allow us to be more thoughtful and creative.
- Teams with encouraging managers perform better than teams whose managers praise them less.

These findings explain why organizations with positive cultures are less burdened by politics than their counterparts with negative cultures. They also have higher morale, spend more time engaged in strategic thinking, focus on the pursuit of exciting possibilities rather than expending
negative energy on problem solving, and are able to attract and retain great talent. Individuals working in organizations with positive cultures build strong interpersonal relationships and generally enjoy work. These findings also explain why organizations with positive cultures outperform those organizations with negative cultures.

Medical groups can benefit from these insights by following a few simple steps:

**Step 1: Cultivate a positive culture.** There are an infinite number of ways individuals can work together to intentionally create a positive culture, such as:
- Giving credit to others
- Accepting responsibility for problems
- Practicing good manners, such as saying please and thank you
- Finding ways to be helpful such as volunteering to take call for a colleague who has an unexpected personal issue

Medical groups can create and formalize their own guidelines designed to foster a positive culture in a written code of conduct.

**Step 2: Foster a culture of understanding.** While physicians practicing in the same medical group share some things in common, they also have many differences. We are all individuals and tend to see the world from our own perspective. And that can create challenges in understanding where our colleagues are coming from. Medical groups can enhance understanding through various avenues, including establishing communication ground rules. For example:
- Give others your undivided attention during a meeting and, as much as possible, minimize text messages and maximize face-to-face meetings.
- Spend time understanding others, including their family and individual histories.
- Take a personality profile (Myers-Briggs) to understand and appreciate differences.
- Teach, practice and cultivate a culture of humility.

**Step 3: Clarify and commit to core principles.** Medical group professionals face myriad complicated and confusing decisions every day. In these fast-paced environments, too many decisions are made on an ad hoc and expedient basis. Take the time to clarify and agree on core principles, including values, vision, mission and purpose statements, which can be used as a shared decision-making compass.

**Step 4: Establish professional governance structures.** Clarify how governance works and, therefore, how decisions are made. Some decisions might be best made by a nonphysician administrator, others by one or a small group of physician members, others still by majority or supermajority vote of all of the group’s members. Medical groups, like other businesses, could benefit from creating a
These contentious elements of medical group practice are compounded by the ways in which our brains work to accomplish the tasks at hand.

**Step 5: Preempt conflict.** Too many groups wait for conflict to reach a boiling point before seeking to resolve it. By then, it is often too late. Rather than resolving conflict, medical groups would be well-served by establishing mechanisms that seek to preempt conflict by creating rules and structures. For example, first seek to address disagreements directly when they occur; don’t delay or address them through a third party. If that doesn’t work, seek the counsel of a trusted third-party mediator, the advice of the group’s board or, perhaps, outside professional advisors.

The University of Buffalo’s neurosurgery department has seen trickle-down benefits from the positive psychology espoused by its former department chair, L. Nelson Hopkins, MD.

“Though often faced with daunting disease states of the brain, our department’s approach is based on fostering 360-degree optimism [surgeon, patient and family],” Hopkins says. “It is imperative that all of the stakeholders have a unified sentiment regarding best medical practices and singularity of team focus [so that] patient outcomes will be maximized. We believe that our published patient outcomes in stroke [management] remain higher than accepted norms due to multifactorial processes through which positive psychology is woven.”

As medical professionals adapt to their constantly changing environments, some are recognizing the need to develop new strategies and techniques that are based on a more nuanced appreciation of how the human mind works. Physicians who vigilantly monitor the demands foisted on their personal lives while developing new practice management strategies will see higher morale and productivity, genuine teamwork, the ability to attract talent, lower turnover and enhanced individual and organizational success.

Most professionals admit that the status quo in today’s medical groups is resulting in higher rates of physician burnout at a time of increasing demand. As Albert Einstein said, “Insanity is doing the same thing over and over again, and expecting different results.”

Contact Scott Friedman at sfriedman@lippes.com and Elad Levy at elevy@ubns.com.

Notes:

Get more tips on how to employ positive psychology in your practice at the MGMA 2014 Annual Conference keynote session with Shawn Achor, author of *The Happiness Advantage*. Learn more about the session on page 32 and online: mgma.org/mgma14.