

“Social Skills for Essential Hospital Physicians”

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What are the challenges ?

To make this presentation as rich as possible – please take 30 seconds each – share what is your one big question?

(Caitlyn to coordinate)

What We Like

- Hard science
- Certainty
- Highest form of evidence
- Double blind studies
- Gold standards

Social Sciences

- No certainty
- “Soft sciences” Vs. “Hard sciences”
- Pattern recognition
- Works most of the time
- Trip to Las Vegas 85%

Agenda

- Share some of my background
- Organizational socialization-Acc/enculturation
- Orientation Vs. Effective Enculturation (EE)
- Program dynamics
- Research results
- Discussion

Experience

- Practiced as a hospital based physician
- Practiced as an academic physician
- Practiced as an office based physician
- Senior leader in a large medical group
- DABEM and DABPM(OccMed)
- PhD in Management
- CMO of large academic medical CTR

Organizational Socialization (Enculturation) of Physician Entering a Complex Healthcare System

“In effect, we must teach our students to become change-agents, whatever their disciplinary specialty turns out to be. We must teach them how to influence their organizations from low positions of power without sacrificing their professional values in the process. We must teach them how to remain creative individuals in the face of strong organizational pressures.”

(Schein, 1968 p.10)

Why This Is Important - 1

- Medical training is packed with “essential” information on how to be technically competent
- Little if any time is available to learn group interaction such as collaborative processes
- Training is focused on independent thinking

Why This Is Important - 2

- Support in the literature that \$300,000 is lost if a physician leaves a medical group (FY 2000)
- Healthcare reform
- Essentially all healthcare solutions involve formation of groups-(ACO's) or Foundation models

“The Problem”

The problem is that prolonged or ineffective integration into a medical group may cause physician dissatisfaction, physician turnover, and delay in integration into the medical group resulting in wasted dollars that may otherwise be used to deliver healthcare (Bender, DeVogel, & Blomberg, 1999; Dunstone & Reames, 2001).

“The Problem”

- Bender, et al., in the Mayo study estimated that it took five years for a new physician joining the Mayo Clinic Medical Group to reach his or her full potential as a group member
- Losing a technically competent physician due to cultural issues wastes precious medical resources

Ph.D. Management and Decision Sciences

- Developed a nine month “enculturation” program at Kaiser Permanente
- Meet every other week for 90 mins
- Seven years of data – 300 physicians

Literature Gap

Partnership Is a State of Mind, Not a Piece of Paper –Pitts 2003

An Exploratory Case Study: Effects of a Physician Organizational Socialization Program – Pitts 2009

Organizational Socialization of Physicians Into a Large Medical Group Practice – Pitts 2011

So Who Cares Beyond KP?

Dr Pitts

“Thank you for sending me your excellent article on enculturation. I very much enjoyed reading it. We are in the process of slowly realizing how important organizational socialization is – we are quite far behind in this regard and thus I would appreciate any further guidance that you could provide for me. Many, many thanks and kind regards.”

Sincerely,

Ralph V. Clayman, M.D.
Dean - School of Medicine
Professor - Department of Urology
University of California, Irvine

Dear Richard,

“Thank you for the very valuable information. Your work will positively influence many medical centers, including our own at UCI. ”

Lari Wenzel, Ph.D.
Professor
College of Health Sciences
University of California, Irvine

Orientation Vs. Enculturation

- HIPPA
Review/Principles
- Resp. Protection
- Payroll&Benefits
- Pharmacy Operations
- Infection Control
- Library
- Security.... etc
- DNA of Group
- Social Networking
- Support Systems
- Leadership
- Time Management
- Where to go for help
- The “Why” of being here.

Key Points in Enculturation-I

- Pre-encounter phase leads to psychological contract
- Encounter phase can lead to mis-match between reality and psychological contract
- Organizational socialization (enculturation) occurs either intentionally or unintentionally

Key Points in Enculturation-II

- Lack of formal O.S. may yield a default culture
- Formal O.S. can help to shape culture
- Institutional Vs. individual O.S. yields different outcomes
- Incumbents Vs. mentors
- Good Mentors Vs. bad mentors

Effective Enculturation (EE)

- Remember physicians are adult learners
- EE program needs a skilled facilitator (SF)
- SF needs to weave everything together
- SF needs to do pre-work with all presenters
- Small group learning-peer discovery
- “Company” invests in “newcomer”

Research questions

Research Questions - I

- What are characteristics of an effective physician member?
- What are the elements of a physician O.S. program?

Research Questions - 2

- In what way(s) do physicians benefit from an O.S. program?
- In what way(s) can an O.S. program for physicians benefit large medical group organizations?

Key Points Enculturation

- Decrease confusion => decrease intention to leave
- Increase information
 - Increase job satisfaction
 - Increase commitment
 - Decrease intention to leave
- Inc. Dr.satisfaction => increase patient satisfaction
- Inc. Dr. satisfaction => increase org. bonding
- Satisfaction between medical group physician and patient is highly interdependent

Successful Organizational Socialization-1

- Decrease role conflict
- Decrease role ambiguity
- Increase organizational commitment
- Decrease intention to quit

Successful Organizational Socialization-2

- Relationship building
- Understand political structure
- Learn how to get things done
- Build organizational identity

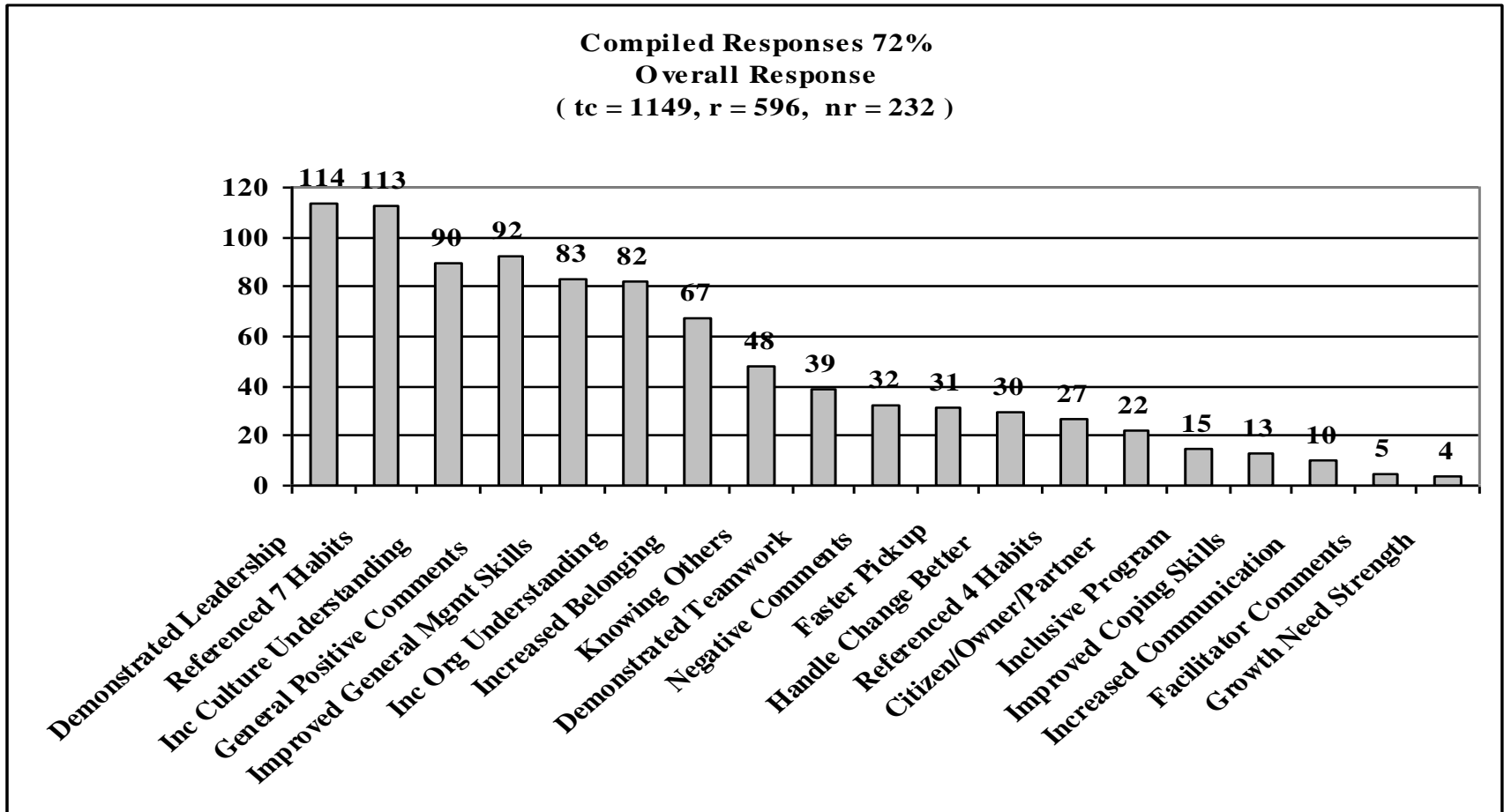
Successful Organizational Socialization-3

- Membership in organization networks
- Increase job satisfaction
- Know organization's culture
- Move from outsider to insider

Results Seven Years of Enculturation

- Anonymous survey to physicians
- 300 potential respondents from seven years
- 30% return rate **
- Open ended questions
- Compiled responses
- Anecdotal evidence

Compiled Responses



Anecdotal Evidence

Something's Different !

Questions Remain

- Problem of current physicians not studied
- OS is standard in most complex industries
- Disney –D-Think
- Add agenda
- Add key articles

Appendix A

Program Content

Selected survey responses

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