# **Building Engagement Rebounding Engagement After Crisis**

Emilie Davis, PA-C

Assistant Vice President of Advanced Practice Providers

Ochsner Health

Emilie.Davis@ochsner.org

### **Objectives**



Discuss key lessons learned from leading during a crisis



Manage APP Growth while Maintaining Engagement



Describe the factors that impact turnover



Recover and rebuild again

### **Disclosures**

• I have no relevant relationships with ineligible companies to disclose within the past 24 months

### **Ochsner Health Statewide Network**



#### LEGEND

- Owned / Managed
- Clinically Affiliated
- Financially Integrated
- Strategic Collaboration Agreement
- 30+ Owned & Managed Hospitals
- 11 Partner Hospitals
- 3,000+ Aligned Providers
- Serving Over 1 Million
   Unique Patients Per Year

# Impacting Lives Across Louisiana, The Nation & The World

Ochsner serves patients from across

# LOUISIANA, EVERY STATE in the nation, and more than 70 COUNTRIES.



Ochsner seeks to move
Louisiana into the
top 40th healthiest states
with America's Health Rankings
by the year 2030.

Ochsner is .....

### LOUISIANA'S LARGEST

not-for-profit health system and one of the largest independent academic health systems in the United States. 47

Owned, Managed, & Affiliated Specialty Hospitals 36K



**Employees** 

2.4M Clinic Visits

1,304,351

**Patients Served in 2021** 

370

Health Centers & Urgent Care Centers

90

Medical Specialties & Subspecialties

4,600

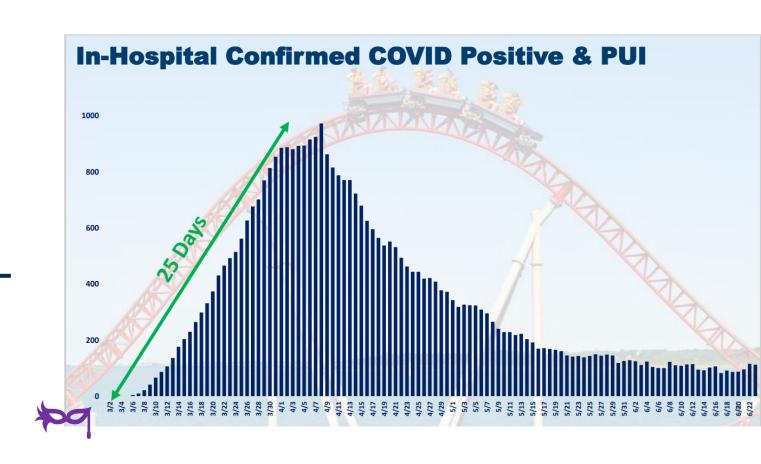
Employed & Affiliated Physicians

660+ clinical research studies



### My Story

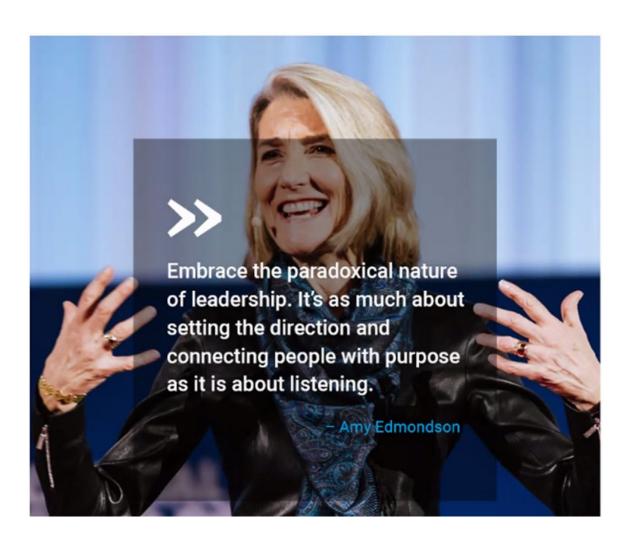
- Hospital Medicine PA for 6 years at Ochsner Medical Center – New Orleans
- Transitioned to Formal Leadership Role in 2018
- Implemented System Wide APP Leadership Structure in October 2019
- March 6, 2020 first confirmed positive COVID 19 patient at Ochsner
- March 26, 2020 (+) COVID 19



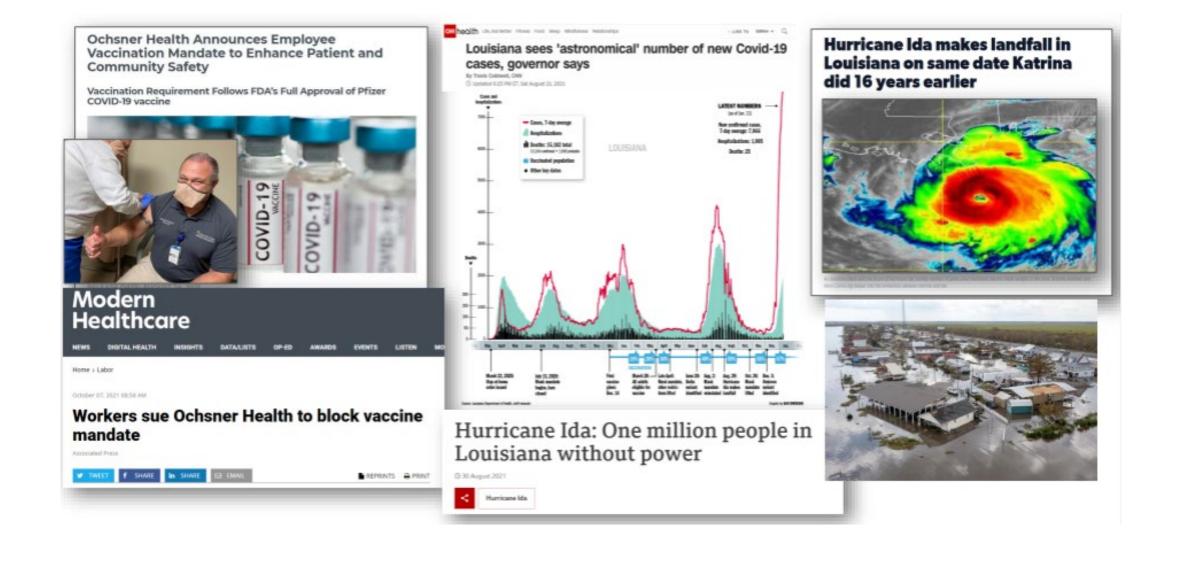
### **Leadership Paradox**

Technical skills account for 80% of your success as an individual contributor."

"People skills account for 80% of your success as a <u>first-level leader.</u>



### 2020 to 2022



### **Leading in Tough Times**

In a Crisis, the role of the leader is to navigate *Point to Point* 

Practice Self-Leadership

Seek Wisdom from Others

Try New Things & Normalize Failure

Communicate, Communicate, Communicate



"You're not made in a crisis – you're revealed." – Jack Kinder

### **Growth After Trauma**



Education

Emotional Regulation

Disclosure

Narrative Development

Service

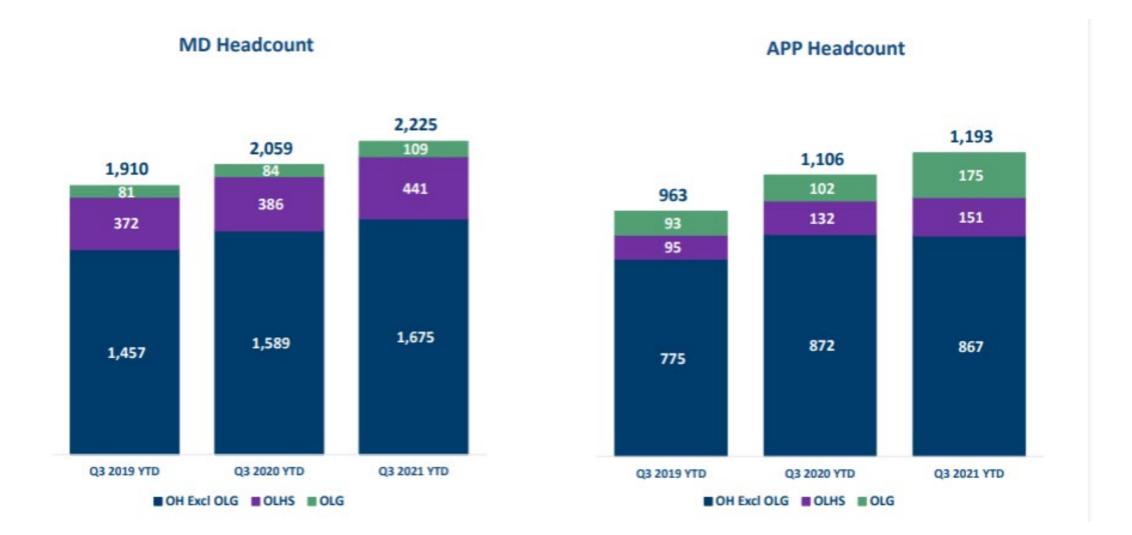
Connection to Shared Purpose



"If you're offered a seat on a rocket ship, don't ask what seat. Just get on."

- Sheryl Sandberg

### Meanwhile ....





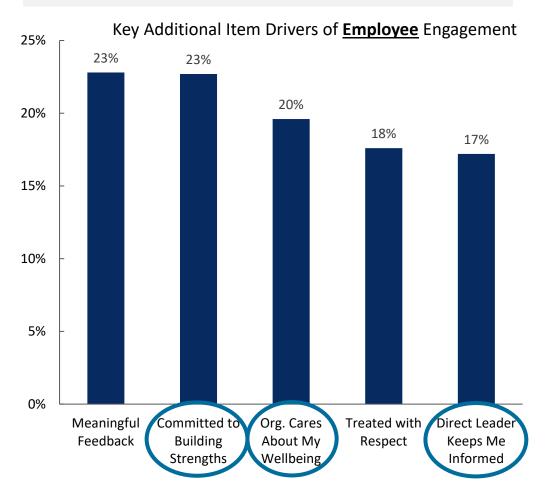
#### **APP Engagement**





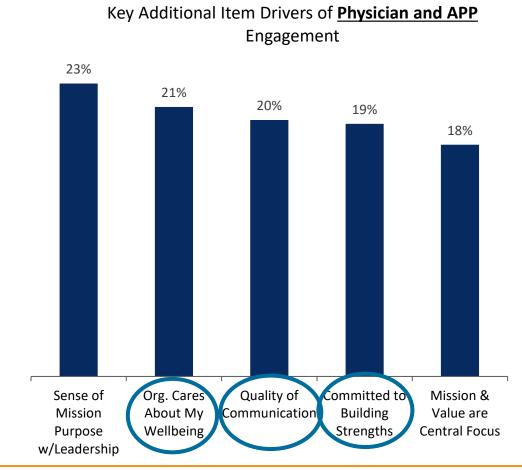
### **Drivers of Employee, Physician & APP Engagement**

The five items below explain a substantial portion (82%) of the behaviors that engage employees. Focus in these areas will provide the greatest improvement for the effort.



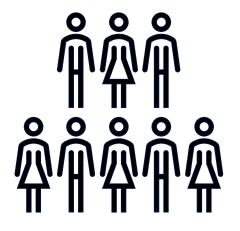
The five items below explain a substantial portion (80%) of the behaviors that engage Physicians/APPs. Focus in these areas will provide the greatest improvement for the effort.

Key Additional Item Drivers of Physician and APP





### What Now?



Only <u>one</u> thing, but <u>only</u> one thing, for you and your team Share results with your team

What are *local* opportunities or expectations that impact our APPs well-being, inclusion, and engagement?

Solicit input & discuss decisions that impact practice?

What is *one* thing you can focus on to improve experience within your department?

### APP Engagement Action Planning

- Message & role model values & behaviors from the top
- Connect APP Engagement with Performance
- APP & Physician explore their Purpose

**Making Work Easier** 

- APP Compensation Redesign
- System Wide Review of APP Utilization
- Automation and EMR efficiency

Start with the "Why"

TRUST & BELONGING

**Voice of the Team** 

- Enhanced Professional Development for APPs
- Enhanced Onboarding Process
- APP Leader Evaluations: OPALA

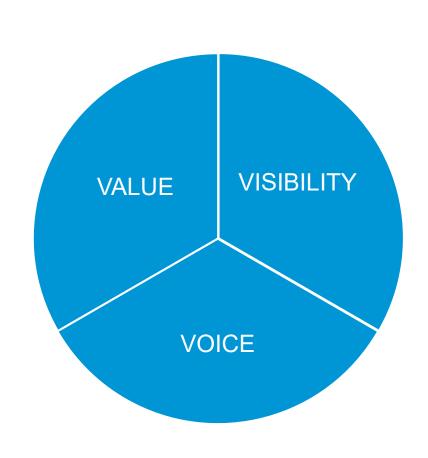
Meaningful Feedback



System APP Leadership Structure Implementation

- System APP Council & Regional Open Forums
- Individual Region and Service Line action planning

### **APP Organizational Structure**





## Get the **full value** from your advanced practice providers

Four must-have characteristics of a scalable model for NPs and PAs

Medical groups are hiring more advanced practice providers (APPs) than ever, yet few are realizing the full value these providers offer. The average medical group leaves \$49³ on the table for each primary care visit led by a physician that could be conducted by an APP. Even if that happens just once a day, it quickly adds up to an annual loss of \$10,000 per physician.

Fully realizing the financial and productivity gains APPs offer requires deploying and managing these providers at scale. To do this, medical groups must adopt a group-wide model for APP use instead of leaving those decisions up to individual physicians. Just as a symphony orchestra has four instrumental sections, a scalable APP model has four components. Each component plays a critical role in ensuring the harmonious use of APPs within the medical group.



#### **DEPLOYMENT**

#### Consider group needs when deploying APPs

Key to success: Groups should deploy APPs to support one of three group goals: access expansion, population health management, and/or expansion into a new business.

Group role: Design APP roles that meet predefined goals.

Specialty role: Identify the most important specialty or practice priority and deploy APPs in the corresponding role.

#### Make sure APPs are used as intended

Key to success: Groups must develop a mechanism to hold teams accountable for using APPs to meet predefined goals.

**Group role:** Develop a metric picklist to measure impact against group goals.

Specialty role: Pick the most relevant metrics by which to measure success.



#### TRAINING

#### Combine physician and APP onboarding

Key to success: To save time, groups should use one process for all provider onboarding, but pair newly hired APPs with tenured APP mentors.

**Group role:** Reevaluate existing physician and APP onboarding programs.

Specialty role: Assign an APP mentor to each new APP.

#### Design a more efficient clinical training curriculum

Key to success: A more efficient training program relies on APPs to lead training and focuses on specific skill gaps.

Group role: Develop a list of core competencies on which to train all newly hired APPs and assess APPs against it.

Specialty role: Start a preceptorship program to train APPs on specialty-specific competencies.



#### **EVALUATION**

#### Hold APPs to the same standards as physicians

Key to success: APPs working at top-of-license should have the same impact on group performance as physicians, so they should be held to the same standards.

Group role: Evaluate APPs on same performance metrics as physicians (e.g., productivity, quality, patient experience).

Specialty role: Choose specialty-specific metrics to measure.

#### Move APPs to a performance-based compensation model

Key to success: Using a base + bonus compensation model for APPs incentivizes them to improve their performance on group goals (e.g., productivity, quality, patient experience).

**Group role:** Create a standard set of compensation frameworks to use for each APP role.

**Specialty role:** Incorporate specialty-specific metrics into variable compensation.



#### **LEADERSHIP**

#### Create a mechanism for APP self-governance

Key to success: Groups should create an APP leadership structure to empower APPs to problem solve and reduce the amount of time group leaders spend on APP-specific issues.

Group role: Launch a group-wide APP council with representatives from all constituencies.

Specialty role: Appoint APPs to serve on the group-wide council.

#### Elevate APPs to group-wide leadership positions

Key to success: Include an APP in group-wide leadership roles to enable their input in strategy development and boost their engagement in the group.

**Group role:** Select at least one APP to serve on group-wide leadership bodies (e.g., committees, board).

Specialty role: Nominate APPs to serve in leadership roles.





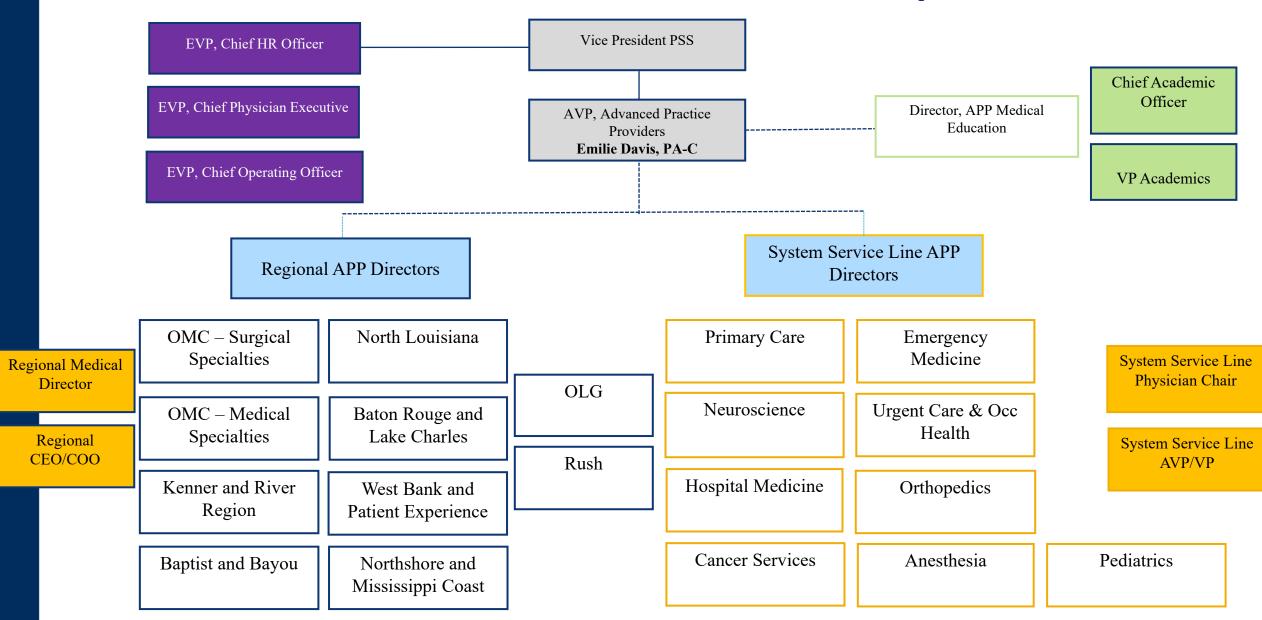
pnysician rate.

2) Work relative value unit.





### **Advanced Practice Provider Leadership Structure**



#### Ochsner Physician and APP Leadership Assessment (OPALA)

The feedback is scored on a 1-5 Likert Scale (5=highest) on the following questions:

- 1. My direct leader regularly recognizes me for a job well done.
- 2. My direct leader cares about me as a person.
- 3. My direct leader encourages my development.
- 4. My direct leader is interested in my opinions.
- 5. My direct leader keeps me up to date on changes happening within Ochsner.
- 6. In the last six months, my direct leader at work has talked to me about my progress.
- 7. My direct leader motivates me to do my best.
- 8. Overall, I am satisfied with my direct leader.

The leadership qualities of physician and APP supervisors have a direct effect on the personal well-being of the team they lead. These findings have important implications for the selection and training of leaders. The results also provide new insights into organizational factors that impact physician and APP well-being.

"Impact of Organizational Leadership on Physician Burnout and Satisfaction"

Tait D. Shanafelt, MD; Grace Gorringe, MS; Ronald Menaker, EdD; Kristin A. Storz, MA; David Reeves, PhD; Steven J. Buskirk, MD; Jeff A. Sloan, PhD; and Stephen J. Swensen, MD

Mayo Foundation for Medical Education and Research

### **APP Turnover**



INTERNAL VS EXTERNAL FACTORS



GATHER DATA



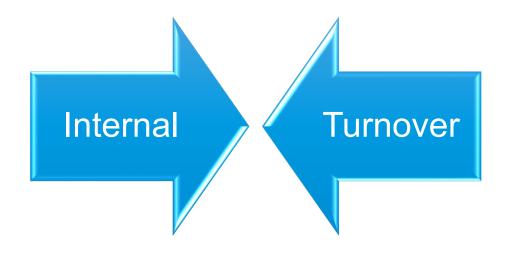
UNDERSTAND TRENDS



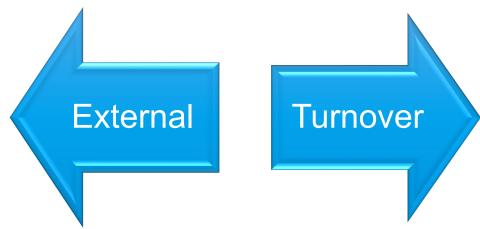
ACTION PLAN IN HIGH IMPACT AREAS

### **Internal Vs External**

(+) RetentionWork EquityPay EquityLifestyle ImpactTeam DynamicRegional Variation

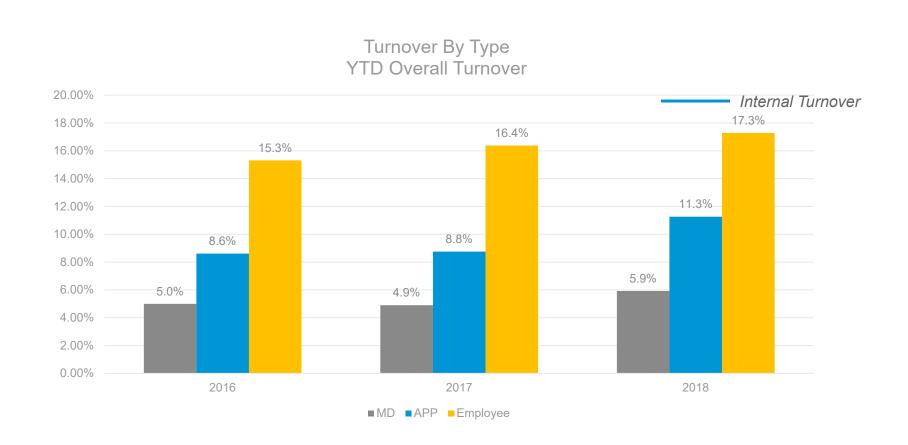


Leadership
Utilization
Professional Status
Compensation
Cultural Fit
Geographic Location
Unfit for Duties

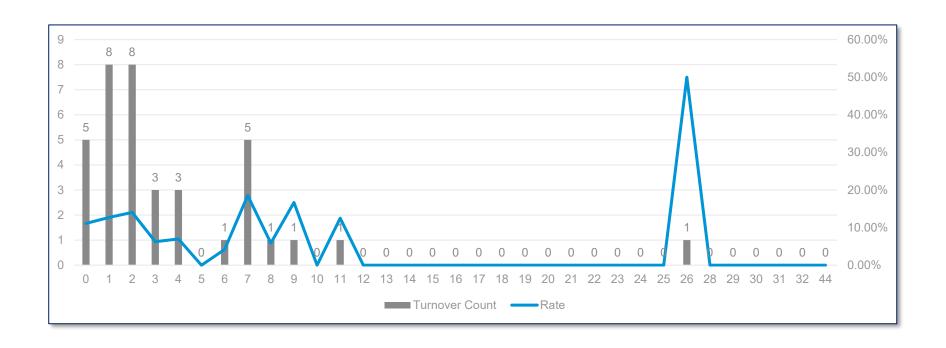


Approximate Cost of APP Turnover ranges from \$85K to \$114K+

### **Overall External Turnover By Type**



### **Turnover by Year of Service**



- YTD Turnover by Year of Service
- Estimated Turnover rate by Year of Service

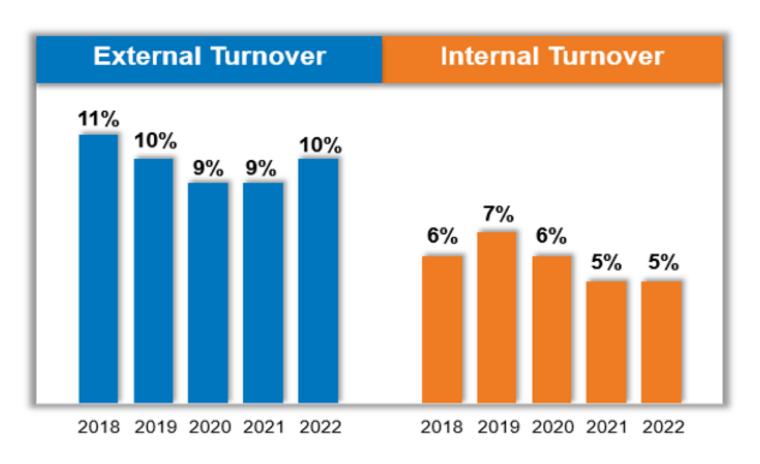
### **National Comparison**

#### SullivanCotter APP Preferences Survey (48 Orgs, ~8,900 respondents)

Top three elements that impact desire to leave an organization

- Utilization score being minimal
- Lack of alignment between APPs and physicians perception on whether the care team practices collaboratively
- Lack of alignment between APPs and physicians perception on the understanding of the APP role and capabilities on the clinical care team.

#### Average Turnover Rates



Source: SullivanCotter 2018-2022 Advanced Practice Provider Compensation and Productivity Survey Report

### The Golden Circle

#### WHAT

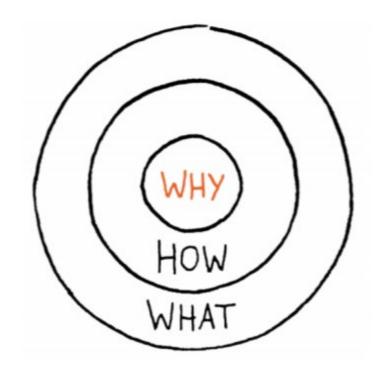
Every organization on the planet knows WHAT they do. These are products they sell or the services they offer.

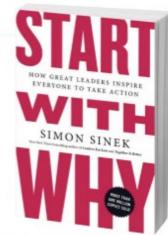
#### HOW

Some organizations know HOW they do it. These are the things that make them special or set them apart from their competition.

#### WHY

Very few organizations know WHY they do what they do. WHY is not about making money. That's a result. WHY is a purpose, cause or belief. It's the very reason your organization exists.



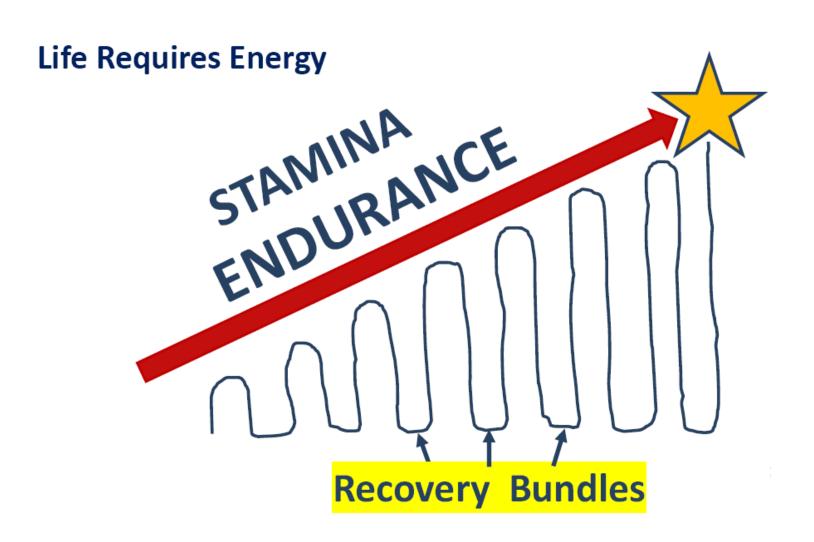




Inspired organizations act from the inside out



### **Becoming a Healthcare Athlete**



### **Self-Leadership**



### **Key Takeaways**

- Who We Are Is How We Lead
- Leadership Skills Can Be Learned
- Leadership Mindset Shift:
   I am responsible for my results



I am responsible for delivering results through other people

- Start with the WHY
- Inspire Trust
- Try New Things without Fear of Failure

#### **TRUST**

The first job of a leader – at work or at home – is to inspire trust. It's to bring out the best in people by entrusting them with meaningful stewardships, and to create an environment in which high-trust interaction inspires creativity and possibility.

- Stephen M.R. Covey



## Thank you

#### The Man In The Arena

"It is not the critic who counts, not the man who points out how the strong man stumbles, or where the doer of deeds could have done then better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasms, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who neither know victory nor defeat.

Theodore Roosciele