

Redefining and Advocating New Models of Care Breakout Session

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Beyond Resiliency Training: Organizational Strategies to Alleviate Burnout and Increase Wellness in Academic Medicine



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Redefining and Advocating New Models of Care

- Structural / organizational solutions have proven effective in impacting physician burnout:
 - Local experience 1: Scribes to assist with physician documentation:
 - Labor models vary
 - Pros and cons



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- Structural / organizational solutions that have worked:
 - Local experience 2: Physician Productivity measurement/compensation structure
 - RVU model
 - Activity based model (panel size and complexity)
 - (Private practice physician burn out)
 - (PCC referrals/downstream)



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- Structural / organizational solutions that have worked:
 - Local experience 3: Advanced practice provider (APP) care model
 - Less optimal utilization of APP force
 - Reimbursement difference
 - Single specialty deployment rather than general practitioner role
 - Change in physician mindset



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- Structural / organizational solutions that have worked:
 - Other experiences:
 - Telemedicine clinic
 - Technology assistance in tumor board
 - Global health experience, to provide better international benchmark



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- What are the challenges in marshalling support from organizational leadership?
 - Fear of change
 - Financial evaluation as dominant method to determine care delivery remains fee-for-service
 - Rigid interpretation of rules and regulations



Thank You



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