



The Coalition for
Physician
Well-Being

QUARTERLY NEWSLETTER



8th Annual Coalition for Physician Well-Being Conference

August 1st-3rd, 2018

JW Marriott San Antonio Hill Country Resort & Spa, San Antonio, Texas

COALITION CONFERENCE
[REGISTER HERE](#)

We invite you to join us for our eighth annual meeting of the Coalition for Physician Well-Being on August 1-3, 2018, at the JW Marriott San Antonio Hill Country Resort & Spa in San Antonio, Texas. The conference convenes at 6:00 pm Wednesday and concludes at noon on Friday.

JW MARRIOTT RESORT
[RESERVE HERE](#)

JW Marriott San Antonio Hill Country Resort and Spa
23808 Resort Parkway
San Antonio, TX 78261
Reservation: 877-622-3140
Group Rate: \$239.00/per night

CONFERENCE INFO
[AGENDA PREVIEW](#)

Introducing a new GME track to better understand ACGME requirements on physician well-being and learn how other GME programs are implementing and promoting wellness.

WEBINAR REMINDER

EARLY IDENTIFICATION FOR PHYSICIAN SUICIDE

Jan Donley, PhD and Anne Like, MD

June 15, 2018 @ 12:00 PM EST

Sinking Feeling? Know your Plimsoll Line

Loice Swisher, MD, FAAEM



I met David on the Internet. It was to become one of the closest, most intense relationships of my life. For you see, a few months before he crossed my path his daughter finished the same protocol for the same type of brain tumor that my daughter just had started. They had successfully traversed the waters that to me were completely unknown - and frankly terrifying. On the pediatric brain tumor listserv, he seemed to know the pitfalls, the warning signs, the hard stuff as well as ways to make the best of life no matter the circumstance. David became my anchor keeping me from washing away while enduring the torture of watching my daughter deal with the harsh side effects of her treatment. During that time, I would often call or write every day. A couple of cycles into chemotherapy, I was having a tough time. The hits seemed to keep coming for my girl. She had been neurologically devastated by surgery. Radiation had taken her hair - hopefully temporarily. The tattoos though would be a reminder for life. A wicked gastroparesis was a gift from vincristine. Some weeks there was little in and nothing out. The thief, cisplatin, now was stealing her hearing. Clearly, I was overwhelmed drowning in sadness and angst.

My voice trembled as I tried to convey my fears, regrets, guilt and total lack of a vision for a long term. Even through the airwaves, one could see that I was on the verge of tears - ready to fall apart at any moment. Then my friend asked me, "Have you ever noticed how cruise ships are

two-toned? They are white at the top and red or blue at the bottom."

Over the many weeks, I had gotten to know my friend. I thought he was trying to distract me - to give my mind something else to think about. He must be reaching to try to pull me out of the whirlpool of despair that was sucking me down. Perhaps he had some interesting story to tell of the ships that pulled into the port near his home. He went on to muse that it might be good if people were the same way. David had succeeded in getting my attention.

The English citizen proudly talked about the seafaring history of his heritage island. Unfortunately, in the mid 1800's the insurance business made it profitable when ships sank as well as when they reached their destination. The practice of overloading boats with goods to the point of capsizing in less than ideal weather became so commonplace that cargo ships were called "coffin ships". A social-justice minded MP, Samuel Plimsoll, championed the safety for the sailors by advocating for a line to be placed on ships so that anyone who saw the vessel would know if it was at risk.

It was such a simple thing - a visible line to know overload. And if one couldn't see the line, it was time to either get rid of some stuff or get to a safe harbor. Yes, wouldn't it be fantastic if people were that way. We could instantly see whether they were at risk, the reason for

Sinking Feeling? Know your Plimsoll Line - continued

floundering or just be there to be the safe place to unload.

But people aren't like boats. Sometimes it is hard to see - and even more difficult to ask for help.

Over the years, this became our shorthand - an emergency flare - to clue the other that one or the other was in a precarious place. When the answer to "How are you?" was returned with "Beyond my Plimsoll line", each of us knew to be ready to be a safe harbor and be ready for a dump of stuff coming one's way. Everyone needs someone to be a safe harbor. It can make all the difference in the way one sails through life. ~



An Interview with Coalition Member:

Mary A. Wolf, MS, LPC-MH, CEAP

Coalition: What is your current position? Are you involved in any direct efforts to support physician wellbeing?

Mary: I am the Program Director for the Avera LIGHT (Live, Improve, Grow, Heal, Treat) Program which is the wellbeing program for Avera Medical Groups physicians, nurse practitioners and physician assistants. Avera is a Christian Healthcare system headquartered in Sioux Falls, SD with facilities in IA, MN, NE.

While I am a licensed counselor, I spend most of my time as a certified executive coach. Coaching provides a confidential and productive avenue to help our providers. Together, we create a strategy for gaining new skills and developing a plan to thrive. I have found physicians to be excellent clients because they are smart, motivated and they actually do their homework! Due to the demand for coaching, I have trained 7 physicians to be peer coaches.

Besides coaching, we offer CME's, Schwartz Rounds, presentations on wellness topics, consultation with administration, retreats, retirement prep class, a spouse engagement

committee, and a website - www.avera.org/light.

We were humbled to accept the Achievement Citation Award from the Catholic Healthcare Association last year for the LIGHT program. Here is the link to the video that CHA created for the award.

https://www.youtube.com/watch?v=RPdSP_ew9a4

Coalition: What led you to be interested in supporting the wellbeing of physicians?

Mary: As Director of Avera EAP for 21 years, I noticed that physicians did not reach out for help until they were at an acute stage of depression, substance use, disruptive behavior or burnout. It was only then that they were mandated to seek assistance so we decided that we had to offer something different, more proactive and more focused on wellness. We had to find a way to shift our culture so physicians would feel safe in reaching out for help at any stage for any issue. This led to the formation of a steering committee and the beginning of the LIGHT program. I now enjoy helping our providers with challenges anywhere along the wellness continuum.

Coalition: What roles have you been in with the coalition?

Mary: I have enjoyed being a member of the engagement committee and to also lead the program development committee. We have big plans for our conference in San Antonio and hope to double our numbers in attendance this year!

Coalition: What one or two suggestions would you have for physicians that struggle to maintain wellbeing?

Mary: I would tell physicians to seek help as soon as they start to feel overwhelmed. There is no need to suffer alone.

When I'm coaching physicians, I encourage making decisions from the heart when it comes to their health, family and relationships. We focus on self-compassion, healing processes, recharging, and that they are appreciated for who they are, not just for what they can produce. Also, I encourage a mindfulness practice.

Coalition: What about organizations that want to support physician well-being?

Mary: Healthcare systems need to dedicate a budget commitment for programming and staff to lead the initiatives for enhanced wellbeing of their physicians and providers. Also, I recommend a dyad leadership model for a wellbeing program.

It has been very beneficial to present and create programs together with both clinical and administrative perspectives.

Also, having our CMO for the Avera system, Dr. Tad Jacobs, champion the program has been extremely helpful. He supports and advocates the importance of provider wellbeing and the increasing need for the program.

Leaders need to focus on the processes, technology, and efficiencies that could be improved to reduce administrative/clerical time. This component is key as highlighted by the Stanford model: Culture of Wellness, Efficiency of Practice and Personal Resilience. These are often the most difficult projects but also the most impactful.

Coalition: Have you attended any relevant conferences or educational sessions that you found informative? If so, tell us about it.

Mary: I have been most impressed with the May 2nd National Academy of Medicine Action Collaborative on Clinician Wellbeing and Resilience and their webinar on establishing clinician well-being as a national Priority. Their clinician Well-being Knowledge Hub offers many useful resources:

<https://nam.edu/resource-toolkit-clinician-well-being-knowledge-hub/>

Coalition: Have you read any good books or articles that you recommend on relevant topics?

Mary: Most of my recent reading has been focused on coaching:

The Obstacle is the Way by Ryan Holiday

Taking People with You: The only way to make BIG Things Happen by David Novak

Half Time: Moving from Success to Significance by Bob Buford

Coalition: What is important for us to know about your life outside of work?

Mary: My husband, Chuck Weis and I try to keep up with our 13-year-old son, Landon. We will spend our summer going to Landon's baseball games and listening to him play guitar with our church band. I also enjoy biking, cooking, traveling and time in my hammock!

