FIRST CHOICE HEALTH PHYSICIAN ASSISTANCE PROGRAM

COMMITTED TO EXCELLENCE

PRACTICE MANAGEMENT STRATEGIES - PREVENTING WORKPLACE VIOLENCE

t was just a decade ago that the term "going postal" became popular. Even newer terms now exist to describe forms of conflict and anger that influence our personal and professional lives. For example, it is not uncommon to hear on the news about road rage, cell phone rage, desk rage (workplace anger), assaults and homicides and even the possibility of terrorist activity within the work environment. Last year there were over one million reported assaults and nearly 1000 homicides occurring within the workplaces of America.

The physician's office is equally prone to violence, and most practices, like other businesses, have given little planning to how to avoid or respond to violence and conflict at work.

Does your practice have a plan should a patient or employee turn violent? What would you do if a patient arrived at your office with a weapon? What about a patient who is verbally abusive or threatening toward a member of your staff? What about the patient who is quite angry you are no longer willing to write a prescription for a medication of abuse? The list of scenarios is probably endless. Violence usually cannot be predicted and is often an impulsive behavior.

So what can you and your practice do in the event of violence or aggressive behavior by a patient or a staff member?

• Try to understand the mindset of the angry patient or employee. What lead to this reaction - a poor performance review? Bad outcome on a procedure? The recent death of a spouse? Whatever the perceived wrong, it's real to the agitated person.

- Remain calm. Do not respond to anger with hostility or defensiveness. Tell the person you are willing to listen. Talk in a calm, low voice. Even though the person's angry outburst may be disruptive in your practice environment, with your staff's appropriate response, it can also begin to defuse the situation.
- Invite the patient or staff member to talk in a quiet and confidential location away from other patients or the waiting area. Do not engage in an argument or power struggle. With their permission, take notes (this demonstrates your concern). Ask the patient or employee to suggest a solution to the problem and let them know that if the request is reasonable you'll agree to make changes.
- Develop a Violence Prevention & Response Plan.
 This plan should be straightforward, containing a
 statement regarding your policies on conduct in
 the office. The policy should set clear expectations
 for appropriate behavior and interaction with coworkers. Establish a predetermined phrase for
 involving law enforcement, and post the appropriate
 numbers and the practice address by your phones (for
 staff members to use if violence seems imminent).

• Remember that the Physician Assistance Program has *Conflict Resolution Training* available online at our Web site for all your staff to use. If you

have an employee who is explosive or having trouble containing their anger, suggest or mandate that they connect to www.1stchoicedoc.com - then select the Practice Support button and take the training.

If you have a situation you would like to discuss regarding violence or anger in the workplace please call the Physician Assistance Program at 1-800-777-1323.

Being Prepared for the Unexpected

Here are a few key points for dealing with disaster or unexpected traumatic events in your practice.

- You can't possibly be prepared for every conceivable event, so start by deciding on the conditions that you want to plan for first: fire, earthquake, severe storm, terrorist event, violence etc.
- It's important to involve your whole staff in preparation planning, emergency drills, and when making revisions to your emergency plan.
- Store "essential materials" off site. This allows you to continue your practice if you cannot enter your building. This might include: Flashlight, Practice Partner's Phone Tree, Necessary Medications, Patient List and Contact Information, Employee List and Contact Information, Cell Phone, Prescription Pads, Insurance Forms, Progress Notes, Lab Request Forms, Paper, and Pens. Consider any equipment needed to practice until a new office location can be established (Stethoscope, Blood Pressure Cuffs, Crash Kit, IV/Phlebotomy Supplies, Medications and other essential supplies you would use on a daily basis).

Practice your emergency drills with your staff on a regular basis. You might also want to consider announcing the drill to patients in your waiting room and including people who are willing to be part of the process. Debrief after the drill to discuss effectiveness and any changes that might be helpful.

Compassion Fatigue



uch has been said lately about physician burnout and the feeling of physical, spiritual and emotional exhaustion experienced by doctors. Often we equate this with the

pressure of seeing more patients, doing more paperwork, negotiating more contracts, stress from increasingly demanding patients and (lets not forget) regulations like HIPAA. The medical profession, with its significant emotional and physical demands, seems to predispose doctors to *Compassion Fatigue*.

Compassion Fatigue is different from normal burnout and is usually experienced by those in the helping professions. Those dealing with traditional burnout might withdraw from work activities, refuse to take on more responsibility, loose enthusiasm for their work or even quit. The reverse is often true for physicians experiencing compassion fatigue. Physicians often try to be ever more attentive to their patients (trying to find more time to spend with them), with the result being a steadily increasing feeling of being pulled downward toward exhaustion.

Many physicians try to compensate for compassion fatigue by doing several things at once (e.g., charting or returning phone calls while eating lunch), or they eliminate healthy activities such as exercise or spend less time with the family to make the workday more "productive." Multitasking may work for a short time, but he routine eventually becomes exhausting. Please see "Multitasking Survival Guide" in our last Newsletter issue (online at www.Istchoicedoc.com).

The solutions to compassion fatigue are multilevel and beyond the scope of this newsletter article. However, we can point out that the first step in finding relief to compassion fatigue is to recognize its symptoms and put a plan in place to regain your balance. Make a commitment to lifestyle changes that will give you time to replenish your energy. That won't be easy, old habits are hard to change even when they're bad for us. Remember that your Physician Assistance Program provides expertise and confidential resources.

If you would like to complete a self-test for Compassion Fatigue developed by First Choice Physicians Assistance Program please visit www.1stchoicedoc.com (then select the Awareness Tools button).

Continued from our last issue:

HIPAA AND YOUR PRACTICE

April 14th has passed and everyone is compliant with HIPAA, right? It's highly unlikely. If all your compliance projects aren't yet finalized, you're not alone. Most practices have a Notice of Privacy Practices in place and may have done some degree of training for their staff. Other than that, the pace & forward motion of the HIPAA snowball is uncertain.

Consider these items as you review your compliance program:

- HIPAA is a program, not an event ("a journey, not a destination"). HIPAA is anything but black and white. Interpretation and integration of the regulations will continue to evolve. You will need to adapt your operating practices as these interpretations (at either a Federal or State level) filter down.
- Institute a regular monitoring program to ensure the policies and procedures you've spent so many hours creating are actually followed. Use this activity to look for areas to streamline those policies (don't assume you got it right the first time). For instance, the way that disclosures are tracked may be far more cumbersome in practice than intended. Solicit feedback from your staff.
- Make sure your business associate agreements are in place. This is a process that's simple to initiate but easy to lose track of. Keep a log.
- Don't forget the Security rule! Everyone thinks that since the deadline isn't until 2005 they don't have to worry about it. That is incorrect! You fundamentally need the provisions listed in the Security rule to ensure that safeguards are in place to implement aspects of the Privacy rule. Think of it this way: You can't have Privacy without Security. Think, plan and prepare now in regard to the Security rule.

After the long and dramatic buildup, it's natural to take a breather post April 14th, but remember to keep your eye on HIPAA. It's still a long and winding road that leads to the Transactions and Code Sets deadline in October and the Security deadline in 2005.

HIPAA information is provided by HIPAA Solutions, which offers a full range of products and services to assist healthcare providers with HIPAA compliance. Contact HIPAA Solutions at www.hipaarx.net.

"Doctor, My Stomach Hurts"

July is National Hot Dog Month. According to the National Hot Dog and Sausage Council, Americans consume more than 20 BILLION hot dogs each year.

ONLINE CONSULTATION

One message we have heard over and over from physicians is that traditional office visits for counseling and personal growth are difficult at best and for the most part impossible to schedule or find time for. We have listened and here is what we've heard:

"I can't come in for a 3PM appointment. I would need to cancel over two hours of appointments each week to come in and meet with you. Do you know what an hour of therapy really costs me?"

We now offer a workable solution: Confidential, encrypted and secure **Online Conference**. By visiting our web site and selecting the *Online Conference* button, you will be able to schedule a 45-minute visit with a licensed mental health professional. When your selected appointment day and time arrives, simply close your office

door and log on. You will be greeted by a qualified provider and given an opportunity to consult about your situation or concern. We realize that Online Conference will never take the place of face to face treatment, but it offers a convenient alternative for physicians who simply cannot find time for a traditional office visit.



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Summer Newsletter

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CONTACT US:

To request an appointment, ask a question, consult about an issue of concern or find out more about the resources & services available through the PAP:

Call us at 800-777-1323 (or via TDD at 800-777-4969)

Visit us on the Internet at:

www.1stchoicedoc.com

The First Choice Health Physician Assistance Program is dedicated to excellence in client care and customer service. We look forward to the opportunity to serve you - anytime a need arises.

QUALITY, CONVENIENCE, & RELIABILITY

This publication is designed to provide accurate and authoritative information in regard to the subject matter covered. If specific health or medical advice or assistance is desired, the services of a licensed healthcare professional should be sought. The information in the First Choice Health PAP Quarterly Newsletter is not meant to replace the advice or expertise of your physician or healthcare provider. If you are experiencing health problems or contemplating lifestyle changes such as diet or exercise, consult your healthcare provider ahead of time to ensure your well being.

The EAP Quarterly Newsletter is published by First Choice Health Physician Assistance Program



Bringing Balance to Work, Home, and Life