

Helpful Principles When Changing Physician Behavior

Source: MC Chapter 9 Physician Practice Behavior

1. Principle One: Relationships matter
2. Principle Two: Let the data speak for itself - present the data with peer comparison
3. Principle Three: Peers are powerful influencers of physician practice patterns
 - 3.1 The peer is doing exactly the same thing so has immediate acceptance
 - 3.2 Can answer objections from her own experience
4. Principle four: peer leaders must understand and communicate the big picture

Tools for Changing Physician Behavior

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1. Communicate, communicate, communicate
 - 1.1 Group meetings with physicians, office managers
 - 1.2 demonstrate Humility and empathy
 - 1.3 Social networking
2. Data
3. Mission clarity: understanding of what the organization is trying to accomplish

Programmatic Approaches to Changing Physician Behavior

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1. Formal Continuing Medical Education (CME)
2. Data and Feedback
 - 2.1 Providing data about performance is important for changing behavior
 - 2.2 Factors that improve the effectiveness of feedback
 - 2.2.1 Physicians must believe that their behavior needs to change
 - 2.2.2 Feedback must be credible
 - 2.2.3 consistent and usable
 - 2.2.4 closely related to what a physician is doing at the time
 - 2.2.5 Feedback must be regular
 - 2.2.6 Feedback should be linked to economic performance
3. Practice Guidelines and Clinical Protocols
 - 3.1 approaches using evidence based medical care
 - 3.2 accompanied by direct presentations by opinion leaders
 - 3.3 best done through combining several attributes:
 - 3.3.1 Efforts must be focused
 - 3.3.2 Focus on conditions occurring frequently with a lot of practice variation
 - 3.3.3 Accompanied by regular feedback
 - 3.3.4 Financial rewards such as pay for performance
4. Small group programs can produce positive changes

Addressing noncompliance by individual physicians

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1. Success factors

- 1.1 Geographic location, local practice attitudes, prior training received, financial conditions, acceptability of data, personality

2. Stepwise approach to changing behavior in individual physicians

- 2.1 First step is collegial discussion
- 2.2 Next, persuasion
- 2.3 Next, firm direction of plan policies, procedures, and requirements
- 2.4 Avoid global responses to individual problems
- 2.5 Final step is discipline and sanctions

3. Discipline and sanctions

- 3.1 Discipline may involve verbal warnings or letters
- 3.2 Ticketing
- 3.3 Disciplinary letter
- 3.4 Formal sanctioning
 - 3.4.1 Due process is a requirement
 - 3.4.2 Healthcare quality improvement act (HCQIA) formalized due process: the final step before removing a physician for poor-quality
- 3.5 Quality may be adequate, but may also terminate solely on the basis of contractual terms