

HARJOT SINGH, M.D. PRESENTS

SIX WAYS HEALTHCARE  
LEADERS **WASTE MONEY**  
ON PHYSICIAN RETENTION,  
RECRUITMENT, AND  
WELLBEING.

EVEN HHS AND HRSA ARE  
GETTING BIG CHUNKS OF IT  
WRONG!

A SPECIAL REPORT BY:

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# DID YOU KNOW...

...that it costs anywhere from \$100k- 1 million or more to recruit just one doctor? And how does it feel to lose the same doctor in 6 months?

On top of that, it feels like the doctors only care about money. Whole armies of recruiters and headhunters try to bring in doctors, and their main tactic is to offer more money. For retention, again, compensation and money are the only currency (no pun intended!) that seems to run the show. Every smart leader knows that paying more doesn't work long term. Studies show that It doesn't even create happiness for long. Then what gives?

In this report, you will learn that at the root of the recruitment, retention, and engagement problems are a series of errors that lead to wasteful spending, and then you will learn what to do instead.

Let me tell you a story.

A hospital CFO called me, frustrated. They had a wellbeing program run by nurses, burnout program (unfunded) for doctors, and an engagement program that was mainly a compensation plan run by HR. Every 3-6 months, he would hear a passionate appeal by a C-suite leader or a manager for wellbeing for employees. They would fund an event - a picnic, or a speaker event, or a meditation program, support groups - and not know what the outcomes were. Just verbal feedback here and there - "We love it" or "people hate it." He had just listened to one such talk and decided to call me.

In the middle of all this, their annual engagement survey scores were "tanking".

You may ask, what is wrong with this picture?

In a word, plenty.



When we discussed further, the following questions were not addressed:

1. Were tracking metrics applied to measure the success or failure of these programs?
2. Were those metrics considered when establishing program funding?
3. Was the return on investment reviewed?
4. Can the existence of any of these programs be justified with confidence to the CFO?

Anyone who answers “no” to these questions is not alone. This scattershot approach to physician recruitment, retention, or wellbeing existed before COVID-19. The pandemic only uncovered its inadequacy, just like a storm uproots trees and reveals their undersides.

Now try answering these questions so your mind will come into sharper focus about your own doctors.

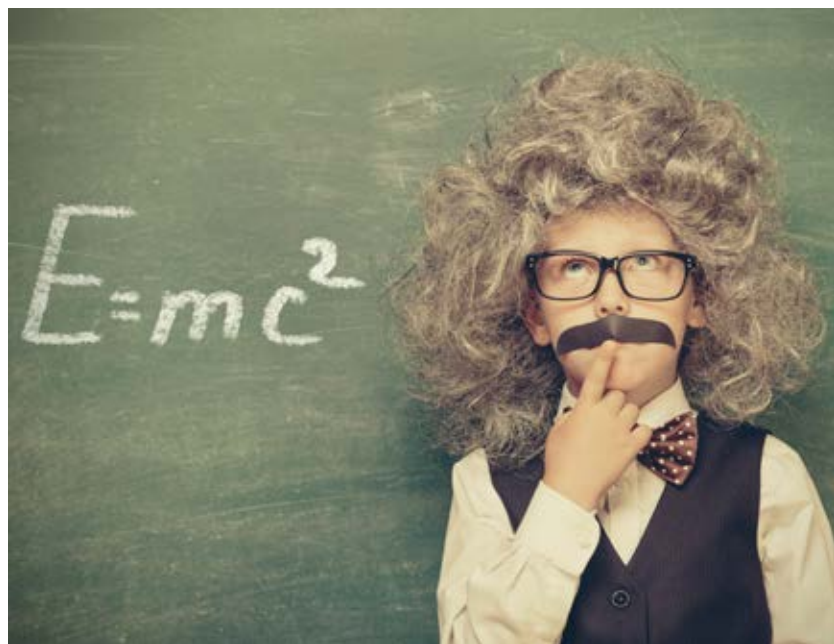
1. One of your departments is experiencing 70% turnover. How do you plan to tackle that problem?
2. A doctor in your organization has suicidal thoughts? What will help them?
3. You want to recruit new employees in a department. How many of your current employees will call their alma maters to tell them to send their graduates to your workplace because it is an awesome place to work?
4. What plan do you have in place to make your workplace attractive to locum doctors and traveling nurses?
5. When you did the engagement, or burnout, or satisfaction survey, what plan did you have in place before you did the survey?

These are serious and darkly real questions. They are all tied directly to money. They also point to what a physician recruitment, retention, and well-being programming should look like- and what it shouldn't be like.

## A QUICK REVIEW.

Decades of research shows that workplace wellbeing/happiness is another word for workplace engagement, and engagement is the exact opposite of burnout. And they are all linked to energy. There are three parts of burnout - exhaustion, cynicism, and inefficacy.

Exhaustion is depletion of your physical energy.  
Cynicism and compassion fatigue are the depletion of your mental energy.  
Inefficacy is loss of your spiritual energy - your purpose and meaning.



The Engagement aka Flow aka Workplace wellbeing is the exact opposite - vigor, absorption and dedication.

The research also shows that the financial impact can rock even the most stable organization. And yet most organizations don't have a proper program to tackle them. It's because there are way too many myths, misconceptions, and mistakes about retention, recruitment, and wellbeing. These give rise to misbeliefs that lead to misplans that lead to misactions - worse outcomes and wasted money. Let's go over the six most common problems. Then we will review what to do about them.

### 1. Not making it a strategic priority with urgency:

According to MGMA, in 2021, 1 in 3 practices saw doctors leave due to burnout. In 2017 and 2018, about 20% of healthcare organizations had a program for employee engagement or burnout. Did this number get higher during the pandemic? No. The 2021 data show that only 14% of healthcare leaders have a strategic plan for this. We are not even talking about the quality of those programs. To ignore the financial aspects of employee wellbeing and engagement is a rookie mistake.

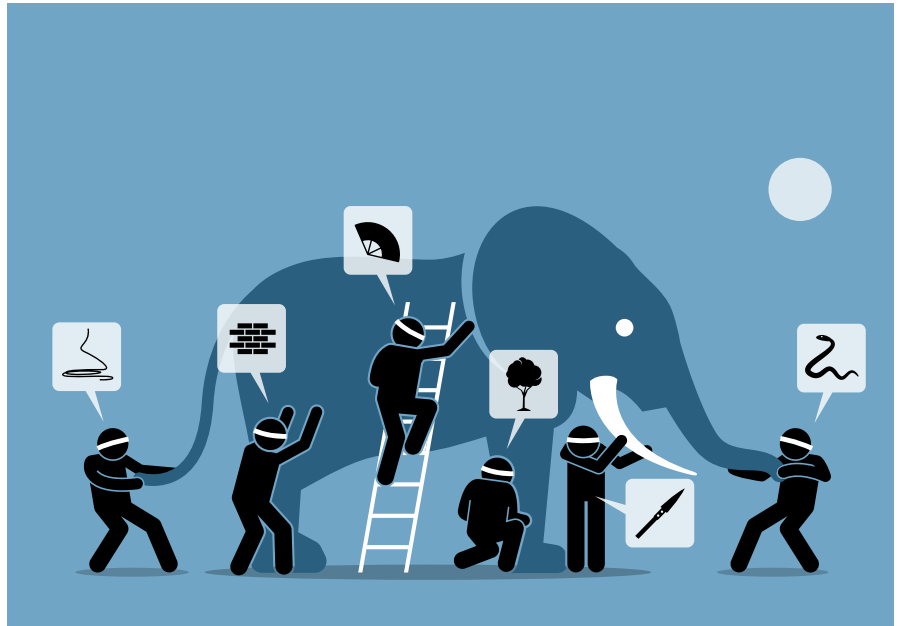
And your CFO depends on you to make this business case. The strategic initiatives live or die based on this. Do you have your local data to make your business case? You can't make this a priority based on national data, you need your own information. How can you get it?



### 2. "I know what it is and what'll work"

Workplace Wellbeing has too many names - wellbeing, wellness, joy, thriving, flourishing, resilience, work-life balance, engagement, burnout, alignment, grit, moral injury - I could go on. This creates confusion and even well-meaning leaders end up trying programs based on whatever may have worked for them and now they

want everyone else to do it. Like the story of the blind men and the elephant - the part of the elephant you happened to touch, feels like the whole elephant. Either the problems are ignored, or one-off, top down, short term fixes are tried, hoping they will work. Now when the IHI, AMA, and National Academy of Medicine are recognizing that the Physician Burnout is a serious problem, someone has let an idea out that doctors need to be made more resilient. Sounds like a good idea! Actually it's a terrible idea- it blames the doctor instead of holding the workplace responsible. Hundreds of articles can be found online on the topic. For the last 7 years, countless doctors have gone through resilience training programs. Did the burnout numbers budge? No.



For the first time, probably the only properly done study on the topic published in JAMA in 2020 shows that doctors have higher resilience than the general population. Did that change anything? No.

And guess what happens when HHS and HRSA ask for RFP's worth \$ 103 million in 2021 to lower physician burnout by boosting physician resilience? You have people line up to write proposals to do exactly that. And those proposals will become plans and the plans will become programs and you will be mandated to take part in them. Are you living off of the hope that the good programs will fall from above?

The reality is that hope is not a strategy. And neither are well-meaning ideas. All of it wastes money and creates scattered programs without any connection to measured performance. This confusion also gives irresponsible leadership a free pass because they can now check the box about if they have a workplace wellbeing program or not just by doing a lecture or two. While at the same time, evidence based information is going ignored.

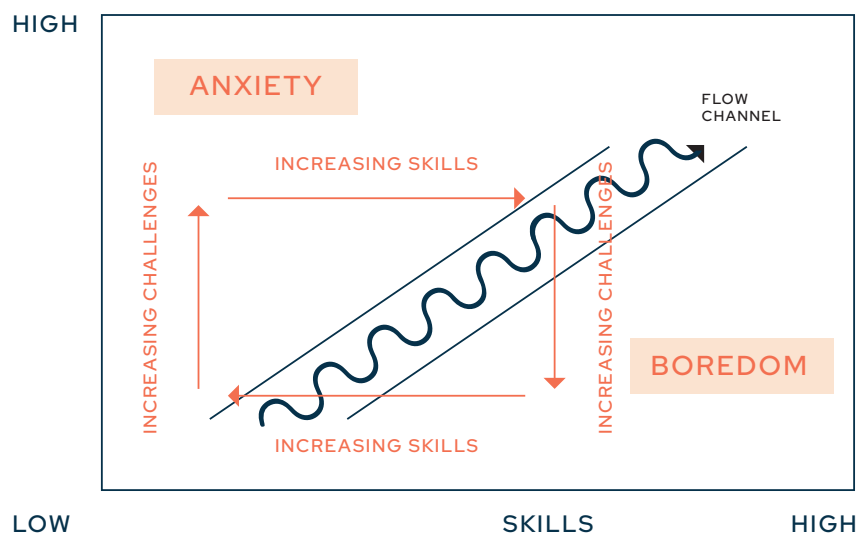
### 3. Work-life balance aka "Wellbeing is anti-work" or "Work is anti-wellbeing"

Here is the overall premise- "work" is bad and you are supposed to balance it with "life". This "universal truth" is passed on culturally and generationally not only in place of work but in places of education and training too. God forbid if a resident happens to like the program director, or a doctor happens to like the EMR. Other workers look at them like they've grown horns. People who like work stay quiet whereas it is perfectly okay to talk about unhappiness, and spread misery.



This has a devastating effect on morale in a workplace and it spreads virally. I have a lot of compassion for bosses and employees caught up in this tribal culture of misery. The bosses don't know better because they don't have emotional memories of being taken care of at work. Compassion has not been a part of their worklife. According to Dike Drummond, from TheHappyMD.com, "You can't give what you ain't got".

**The reality** is that the work-life balance idea creates a false dichotomy. Humans who have wellbeing at work are not only happy, they also live longer. Mihalyi Csikszentmihalyi's five decades of work published in his book, called Flow will help you understand this. Here is how you understand Flow.



Each employee with their unique skills and challenges comes to work everyday. They have their own individual immediate and proximal experience with their work. When the challenges are too much and skills are low- there is anxiety. For example, a new hire. And when the skills are too high, and challenges are low, there is boredom. In my experience, there are a lot of mid-career physicians who are languishing in this boredom not having anything stimulating to do. At this time, less than 1 in 6 employees enter the flow channel even once a day. Burnout data from the Mayo Clinic shows that if less than 20% of your work consists of things you love, you are at high risk of burnout.

Yes, the workload can be unsustainable and needs time to destress. But stimulating work doesn't even feel like work. No matter how much you try to balance, if work stinks, it stinks. The leader's job is to help people create work they will love instead of loathing it or languishing in it, and then leaving it.

#### 4. Lumping all the physicians together

Everyone is a unique individual, yet efforts to engage them continue to be focused on top-down all-inclusive efforts. This leads to spending an inordinate amount of resources on devising compensation plans - thinking of money as the only motivator and wellbeing creator for everyone. The reality is that each employee is a separate human being who has spent years accomplishing some of the most demanding physical and intellectual tasks to get to this level of expertise. Sometimes the organization has also spent money developing this employee. Each of your knowledge workers brings hundreds of thousands to up to millions in revenue each year. Owners of champion horses that garner this kind of revenue have special diets, groomers, caretakers, and strategies for each of their horses. They would not expect a win from a poorly fed, overworked, and neglected horse—especially one whose individual needs were ignored. Each individual's physical, emotional, financial, and spiritual needs are distinct from one another. And a leader helps them grow one by one.



## 5. Culture interventions and Ignoring the immediate and proximal -

The boss and the team:

According to Gallup 70% of workplace wellbeing and engagement is directly due to the actions of the immediate boss. The immediate and proximal people, place, and situation have more impact on workplace wellbeing - your team, workload, how your boss treats you, and how these people communicate matters more than anything else.

In short, people leave toxic or disengaged bosses, no matter who is responsible at the top or whatever the policy or culture. The reverse is also true - employees stick around for a workplace where an energizing boss creates an engaging immediate work environment.



The team is also important. If you did an engagement survey today in two hospitals, there will be less difference in scores between the two hospitals than in-between different departments within the same hospital. Top leaders spend too much time and money trying to create "culture" whereas frontline people don't even know what is going on. Focus on proximal people in a team under a boss if you want to make any improvement in your turnover and retention.

## 6. Missed opportunities to create retention and engagement -

Lost opportunities are lost money. Your workplace has bosses and teams and they meet each other regularly. These bosses have no training or even an incentive to create engagement or retention. Here are some examples of wasted, time, money and opportunities -



## A. Team meetings:

People dread meetings. According to Doodle's 2019 State of Meetings report, the cost of poorly organized meetings in 2019 will reach \$399 billion in the U.S. and \$58 billion in the U.K. This is almost half a trillion dollars for these two countries alone -- a tremendous drag on the effectiveness of businesses. In healthcare, daily huddles & debriefs are a perfect example of this - many hospitals do these without doctors present, they are not used for enhancing practical skills, celebrations are not done, chances to give and get praise are lost, time to do work is lost, unclear plans lead to confusion, irrelevant attendees slow progress, workarounds are not shared...and so on.



## B. Performance evaluation:

Talk about an opportunity lost. There is usually a wooden awkward meeting, and only work-related immediate things are talked about. No effort is made to engage the employee to know them or grow them or create flow. It changes from one boss to another - interrater reliability is poor. Usually, the performance is not connected to outcomes. Either the "halo" of good performance in one area overshadows problems, or the "horn" effect is in play - one negative quality overshadows others. Not much is connected to rewards or even punishments. Even performance development has become a dirty word - reserved for when an employee has messed up.

## C. The employee is unhappy:

After many requests, an employee is finally able to schedule time alone with "the boss." Because other opportunities to improve engagement were never implemented successfully, this meeting often devolves into desperate ultimatums from the employee. "If you don't pay me X dollars, I am going to leave." This encounter may be the only time when even a haphazard attempt is made to genuinely find out what can be done to make things better, but it is often too little too late.

This kind of communication infrastructure is a prescription for disaster – deteriorating engagement, increasing disengagement, and growing burnout. It creates stress for the leader and manager and is a threat to the organization because of high turnover, reduced full-time employees, low productivity, and failed implementation of initiatives.



Putting it all together, this combination of

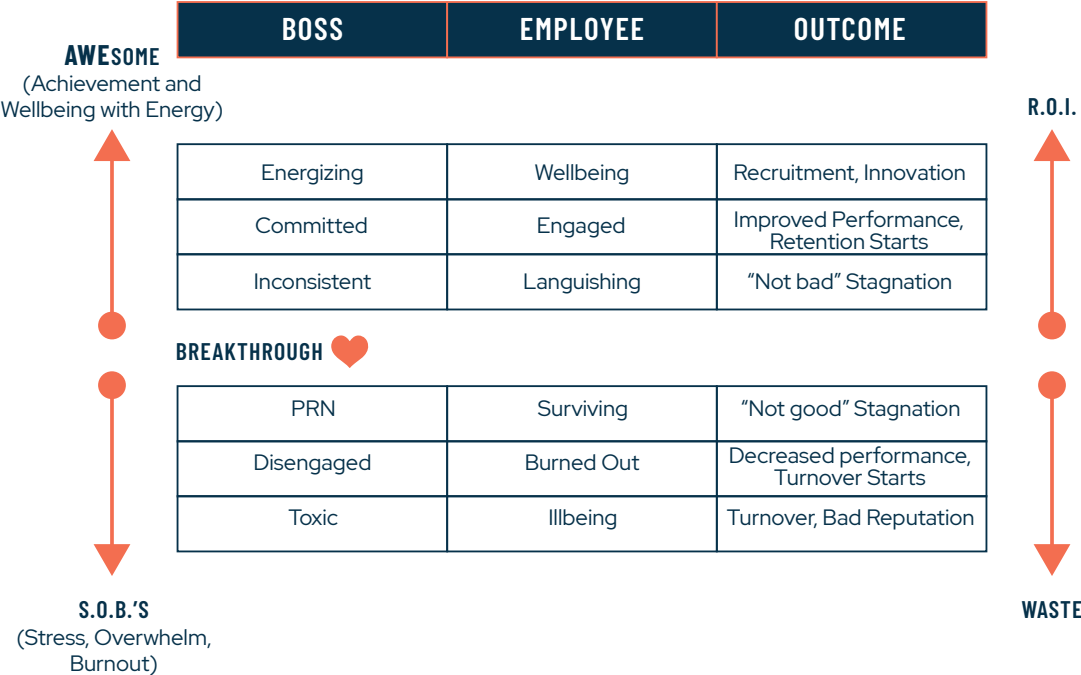
- a. individualized experience of
- b. immediate and proximal work with
- c. immediate and proximal people

is the Occam's razor to understand this whole situation.

**Summary: Why do you need to create workplace wellbeing and engagement and create recruitment and retention?**

This organizational energy ladder will help you understand this.

Which rung do you and your employees stand right now?



# THE ORGANIZATIONAL ENERGY LADDER

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Wellbeing in the workplace is a ladder of energy on which an **employee, their boss, and organizational outcomes sit together** on one rung or another - not too far from each other. A toxic boss isn't going to create engaged employees and an energizing boss is more likely to have engaged employees with wellbeing.

The stress, overwhelm and burnout are on the one end and the feeling of AWEsomeness on the other - the Achievement and Wellbeing with Energy.

As you go down the ladder the waste of time, money, and resources happens, and as you rise up - the ROI, retention, productivity, and wellbeing start to happen.

At the three lower levels- stress, fear and anxiety rule. Psychological safety doesn't exist. The mind is in the survival mode, and in this lower level of brain functioning, even the smartest people show up to work in a blown up state of mind. The negative spiral has a drag to pull everybody down.

Here comes **the breakthrough**. Right in the center, the heart is there to signify your heart, your will- your emotional wish to see employee engagement and energizing happen. Your compassion - which puts your empathy in action is needed for this to succeed.

In these top 3 states, safety, energy and excitement replace stress, fear and anxiety. The mind is in the performance mode, and in this higher level of brain functioning, even the low energy people show up to work in a lit up state of mind. The positive spiral has a pull to raise everybody up.

## How to create retention, recruitment, & wellbeing, and lower burnout in your workplace?

By having energizing bosses who communicate with compassion regularly and individually.

Because of their lack of experience, a boss needs to be trained in these communications. The program should have paid time built in to train the bosses, and they also need to be paid for the time they will spend engaging the employees. And before any of this happens, the leadership needs to prepare about how to do it.



Let me tell you a quick story of how it looks in action.

A Chief Medical Officer that I have been coaching reported on his homework he had done over the week before. He had held five 1:1 meetings with 5 different direct reports.

Meeting 1- he helped a medical director solve problems with a doctor who was not doing EMR on time.

Meeting 2 - With another medical director, they discussed how he himself had become a CMO and how it was going for him. They planned a few mentoring sessions.

Meeting 3 - The third doctor needed help connecting with the financial advisor the hospital had.

Meeting 4 - The fourth doctor who had been thinking about moving had decided to stay- retention. They had needed help with their child with autism and the therapist the CMO had helped them find was working out good for them.

Meeting 5 - the CMO had been helping a fresh graduate doctor not overdiagnose certain conditions and they discussed how that progress was going.

Can you see how he is helping everyone feel wellbeing, even going beyond worklife? Not only that, now he feels like he is accomplishing things, and doesn't feel helpless when others bring up their problems - he is having a blast leading others.

You can see that the most effective straight path to solve these problems once and for all is to know your employees to help them remove their pains, have flow at work, and to help them grow. And it is their immediate boss who can accomplish this in compassionate communications, done regularly. Workplace pains are the easiest things for employees to talk about, and then they'll watch what you do with them. If you create trust, they'll share the next level of problems. It isn't going to happen if you don't do anything. No current employee is going to call their place of training to tell them that this is an awesome place to work, if they don't perceive yours to be an awesome place to work. Help your bosses create retention, recruitment and engagement by getting them trained and coached in compassionate communications on a calendar.



**EMAIL ME NOW TO LEARN MORE ABOUT HOW YOU CAN TAKE THE NEXT STEPS.  
LET'S MAKE THIS WORK FOR YOUR ORGANIZATION AND YOUR EMPLOYEES!**

If you want to open up this discussion with your team,  
email me to book lunch and learn.

Harjot Singh, M.D. is a keynote speaker and a leadership consultant. He helps leaders and doctors master skills never taught in training so they can lead for success and live with joy. He speaks at national level meetings and in boardrooms across the country on leadership and wellbeing. He also focuses on organizational level change, working with C-suite leaders to design tailored programs especially for workplace wellbeing, engagement, and burnout. Bridging the gap from a technical expert to a leader is what Harjot does best. He is passionate about helping people discover who they really are - like how Yoda helps Luke discover what a powerful Jedi he is. He believes that a mind once expanded never goes back to its old state.

A practicing physician, chief of telemedicine at Kingsview Behavioral Health, and faculty at American College of Healthcare Executives, Harjot's work is informed by all three perspectives. He has authored several textbook chapters - the latest one called Enhanced Physician Engagement, 2021, by Healthcare Administration Press.

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