



The Importance of Understanding the Aspirations of Physicians in the Workplace in Motivations for Improving Healthcare Service Quality

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ABSTRACT

The management of hospitals are often at a loss to understand the cues and strategies to enhance physician engagement strategies to help avoid physician burnout. The departure of physicians from the healthcare profession is frequently attributed to their disengagement from their professional calling, which may result in lowered quality of service and patient care in the institutions they serve. The transformational leadership theory served as the underlying theoretical lens of this qualitative single case study where the aim was to explore the engagement strategies healthcare middle and senior-level managers used to help avoid physician burnout. The participants of this study were seven middle and senior-level healthcare managers holding a minimum of five years of employee management experience who effectively used physician engagement strategies to help avoid physician burnout at a Central Pacific United States healthcare organization. Interviews yielded data from semistructured interviews via telephone, reflective journal, and publicly available media and organizational documents. The thematic approach using a process of constant comparison was used to analyze the primary data. The principal theme of this research is the importance of encouraging career progression and professional development. A key recommendation for middle and senior-level healthcare managers is to take the time initially to get to know the goals of each physician to understand their professional motivations. The implementation of strategies for increased physician engagement is instrumental in delivering optimal patient services, ranging from clinical to helping address socioeconomic disparities for patients within the community who can benefit from healthier lifestyles.

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Introduction

Ensuring Physician engagement in institutions to deliver consistent quality care is a strategic goal in many healthcare institutions (Perreira et al., 2018). The loyalty of physicians to an institution with commitment is essential in a constantly changing field of healthcare quality care, where the quality of care is a critical service differentiator. Physician engagement in hospitals and medical institutions is a predictor of quality service to patients and the institution (Kaissi, 2014). It is incumbent upon management to deftly improve optimal engagement outcomes for physicians, communities, and the staff within the organization. The purpose of this qualitative single case study was to explore the management strategies of success enacted by middle and senior-level healthcare managers to increase physician engagement.

From available data from previous years, it is estimated that more than 40% of U.S. physicians experience burnout and feel disengaged (Owens et al., 2017). The general business problem is that there often is a negative effect of physician disengagement on profitability in healthcare organizations. The specific business problem is that some middle and senior-level healthcare managers lack engagement strategies to help avoid physician burnout.

The targeted population for this study comprised seven middle and senior-level healthcare managers at a Central

Pacific United States healthcare organization with successfully engaged physicians. Middle and senior-level healthcare managers can use the results of this study to contribute to positive social change by enhancing their understanding of effective physician engagement strategies, which can result in the delivery of higher-quality healthcare. Engaged physicians demonstrate increased participation during decision-making processes about patient safety and quality care, which could produce improved patient well-being at lower costs.

Principal Research Question

The principal research question for this study was: What engagement strategies do middle and senior-level healthcare managers use to help avoid physician burnout?

Theoretical Lens and Underpinning

Burns (1978) postulated the transforming leadership theory in its earliest forms, which Bass (1985) further expounded upon, and later renamed as transformational leadership theory, which served as the underlying conceptual framework for this study. Bass expanded on the seminal work of Burns by identifying four components of transformational leadership, notably: individualized consideration, inspirational motivation, idealized influence, and intellectual stimulation. The postulations of the transforming leadership

theory may indicate how leaders can influence employees to work toward common goals by motivating and encouraging positive employee behavior (Burns, 1978). Utilizing a transforming leadership style in the workplace could potentially influence positive changes in people's lives and improve organizational success (Burns, 1978). Transformational leadership theory as envisioned by Burns and Bass, provided the lens through which strategies healthcare managers use to engage physicians was explored. Transformational leaders usually improve followers' engagement, often by changing work perceptions and helping followers grow the skill sets necessary for attaining organizational objectives (Burns, 1978); thus, transformational leadership theory was appropriate for this study.

Significance of the Study

The findings of this study may be of significance to middle and senior-level healthcare managers who use strategies to improve physician engagement, patient safety, and organizational profitability during the transformation of healthcare delivery.

The findings and discoveries from this study may offer knowledge to provide middle and senior-level healthcare managers with ways to overcome physician disengagement. Addressing physician disengagement may mean middle and senior-level healthcare managers take active measures to improve physician engagement while controlling costs and catalyzing positive social change in communities. Middle and senior-level healthcare managers often involve physicians in the process of delivering safe, affordable care tailored to the individuals within surrounding at-risk communities. Disengaged physicians can hinder the organizational goal of lowering healthcare costs, which affects the patients served. Middle and senior-level healthcare managers could invest the money spent on replacing a physician in improving the quality of healthcare. Engaged physicians can fight socioeconomic barriers so patients can benefit from healthier lifestyles. Engaged physicians also serve as advocates for issues in patients' daily lives.

Drawing from a Repository of Professional and Academic Literature

The overarching research question of this study was: What engagement strategies do healthcare managers use to help avoid physician burnout? I selected peer-reviewed scholarly articles published from 2014 to the present to ensure that they reflected an analysis of recent and relevant publications. I used academic databases and search engines to undertake this review, including EBSCO, Business Source Complete, Elsevier, Walden University Library, and Google Scholar. The keywords searched were *transformational leadership theory*, *physician engagement*, *practitioner*, *global healthcare*, and *value-based care*. The literature review contained 91% peer-reviewed sources, of which eight percent of the articles were peer-reviewed and published in 2015, 19% were peer-reviewed and published in 2016, 22% were peer-reviewed and published in 2017, 22% were peer-reviewed and published in 2018, while 8% were peer-reviewed and published in 2019, and the remainder 12% were published before 2015. The review of the literature was crucial in understanding the effects of transformational leadership on physician engagement.

Leadership

How an organization's leaders guide others to complete and meet organizational goals indicates an organization's success or failure (Al Khajeh, 2018). Any organization

requires effective leadership to achieve domestic and global success. However, in many organizations, the lack of effective leadership results in issues such as low productivity, poor profitability, and a lack of employee engagement (Al Khajeh, 2018). Although no organizational leader sets out to fail, few organizations have the right leadership to increase employee engagement. Some business leaders do not understand the correlation and effects of leadership style on employee engagement. Al Khajeh (2018) explored the six most utilized leadership styles to understand their impact on organizational performance, finding that a specific organizational problem might require multiple leadership styles.

Several researchers have found that organizational leadership correlates with improved performance; however, other researchers oppose that view, instead believing that leadership style does not indicate employee performance (Madanchian et al., 2017). Some scholars have asserted that effective leadership styles often manifest in immediate performance results. Contrary to this belief, it is challenging to measure the outcomes of an improved leadership style (Madanchian et al., 2017). Like Al Khajeh (2018), Madanchian et al. (2017) found that leadership effectiveness varies by situation. A one-size-fits-all leader or theory therefore does not exist as different outcomes may have a role in the effectiveness of leadership and leadership theories. A great leader can turn around a failing system, but a weak leader can ruin a great plan and the employees within an organization (Madanchian et al., 2017). A continually changing healthcare organization hence may require effective leadership and high employee performance, especially from physicians.

Study Participant

Participants have integral roles in qualitative research. Researchers selectively determine the criteria for participation based on the research purpose. If researchers do not adequately consider the participant selection process, they could negatively affect the study results. Participants in this study were seven middle and senior-level healthcare managers in the Central Pacific United States, holding a minimum of five years of employee management experience.

Wolff et al. (2018) cautioned researchers to know the type of participants needed and clearly define the requirements for participation. Researchers may perhaps select participants with extensive knowledge of the study topic to produce a free flow of information (Hawkins, 2018). Participant selection criteria are standard practices when developing research protocols (Patino & Ferreira, 2018). Eligible participants for inclusion in this study were middle and senior-level healthcare managers in the Central Pacific United States with a minimum of five years of employee management experience and currently employed with the selected healthcare organization for this case study. There was assurance that all participants met the inclusionary criteria for this study.

Access to participants and leaders throughout the research process sometimes influences the results of the study (Riese, 2018). Researchers may find gaining access to participants difficult, especially in healthcare organizations, as organizational leaders have the authority to grant or deny access to the facility, personnel, and data (Loring et al., 2017; Sing & Wassenaar, 2016). Vuban and Eta (2019) suggested that researchers become familiar with gatekeepers who control gain access to leaders and participants. There were e-mails, telephone calls, and requests for face-to-face meetings

with the point-of-contact administrative assistant to establish a working relationship. In the invitation e-mail to the administrative assistant, there was a request for a face-to-face meeting with the organization's leaders to describe the study's purpose and benefits. At the preliminary meeting, the importance of the study and the social value for the organization was explained, as well as answering any questions regarding the study.

Lancaster (2017) underscored the importance of gaining participants' trust through the organization's leaders by e-mailing and requesting an appointment to meet. Guest et al. (2016) recommended that researchers post flyers at the facility to recruit participants; therefore, I posted flyers listing requirements for participation on information boards throughout the facility as well as the organization's electronic bulletin board. The flyers included personal contact information for interested participants to contact me. Additionally, there was a request for an organizational list of managers who supervise clinical physicians to verify eligibility to participate.

Data Collection Instruments

Castillo-Montoya (2016) described the interview protocol as the inquiry instrument used to obtain specific information about the research question. The interview protocol in this single case qualitative study included open-ended questions administered through face-to-face discussions with middle and senior-level healthcare managers. McGrath et al. (2018) cautioned researchers to be cognizant during interviews regarding the impact on responses and results. All participants were greeted and ensured that they knew about the participation requirements. Researchers potentially can conduct interviews in such a way as to define themes from the participant's viewpoint (Moser & Korstjens, 2018). The responses provided during the semistructured interviews were used to gain insight into the experiences of the participating managers.

Data Collection Techniques

DeJonckheere and Vaughn (2019) described the different types of interviews: face-to-face, telephone, text/e-mail, individual, group, and in-depth. The data collection techniques that were used are semistructured, face-to-face interviews with open-ended questions as well as archived organizational data to collect data for this qualitative single case study. Semistructured, face-to-face interviews using open-ended questions were utilized for the participating middle and senior-level healthcare managers. Face-to-face interviews are the most direct interactions between researchers and interviewees (Oltmann, 2016). DeJonckheere and Vaughn (2019) mentioned how face-to-face interviews are a better means for conducting interviews because they provide researchers with opportunities to discern nonverbal indicators. Researchers who select participants with extensive knowledge of the researched topic increase the amount of in-depth data collected (Hawkins, 2018).

Semistructured interviews may provide flexibility for both the researcher and the participant (Young et al., 2018). The use of open-ended questions is a way for researchers to potentially avoid bias, as the participants can provide subjective answers without suggestions from the researcher (Desai, 2018). Another advantage of open-ended questions is that researchers can use participants' verbatim responses to capture rich data and explore how participants understand the questions and arrive at answers (Singer & Couper, 2017). Open-ended questions facilitate participants to express personal feelings and attitudes in answers, thus potentially

providing the researcher with a better understanding of the phenomenon (Oltmann, 2016).

Participants were able to select a desired meeting place to ensure distraction-free environments, vital to feeling at ease. Crozier and Cassell (2016) posited that audio recordings are a reliable way to capture phenomena as they emerge. Therefore, all semistructured interviews were audio recorded, and nonverbal interactions were recorded in a reflective journal. Breaks were incorporated within the interviews to give participants opportunities to rest and perhaps regroup their thoughts. In addition, cancellations and rescheduling were accounted for by spacing appointments for days.

Data Analysis

DeJonckheere and Vaughn (2019) described how researchers can present findings after data collection by identifying themes that show a comprehensive view of the phenomenon. Emerging themes were categorized from the semistructured interview data as a way to manage the results for data analysis. Similar themes were gathered and grouped from each interview into codes while determining the main ideas. Belotto (2018) recommended color-coding data to identify potential and emerging themes. Color coding techniques were applied using ATLAS.ti version 9.0 while sorting the collected data. Yin's five-phase analysis for qualitative case studies of the interview data is incorporated in this study's findings

Presentation of Findings

This qualitative single case study intended to explore the engagement strategies middle and senior-level healthcare managers used to help avoid physician burnout. The COVID-19 global pandemic along with disease prevention guidelines prevented face-to-face interviews and entrance into the designated organization. Heesen et al. (2019) described how researchers most likely can use multiple approaches to data collection for synthesis, to ensure the reliability of results. Semistructured interviews were conducted via telephone and documents from the Central Pacific organization were reviewed via publicly available media, executive minutes, and Microsoft Teams virtual meeting. Interview questions were open-ended, allowing participants the opportunity to discuss strategies used to increase engagement and avoid physician burnout. I utilized the interview protocol and requested consent forms be signed before conducting interviews. Each participant was asked the same questions in the same order during their morning, afternoon, or evening pre-arranged interview time. The sample size for this study included 7 middle and senior-level healthcare managers. Participant codes were used for this study and were P1, P2, P3, P4, P5, P6, and P7, which served to maintain confidentiality. Thematic analysis was utilized from the interviews to gain an in-depth understanding of the phenomenon. Coded data analysis was derived from interview answers considered significant from the interviews and secondary data obtained from publicly available documents and meeting agendas.

Principal Theme: Encouraging Career Progression and Professional Development Opportunities

The principal theme that emerged from data analysis was encouraging career progression and professional development opportunities. Bartels et al. (2019) posited well-being is more than an emotion, for employees it also involves development and growth, personally and professionally. Reza (2019) described the importance of leaders pushing employees beyond their comfort zones to achieve personal, professional, and organizational success. Similar to Reza's findings, P2

stated getting to know physicians' strengths and weaknesses helps with engagement; whatever those are, "find them out and exploit them." P1 affirmed residents need engaged mentors during their residency for an enhanced educational experience that potentially will make for a more well-rounded physician. P5 believed having an ear to hear what physicians need is healthy in understanding their perspective as well as trying to eventually develop strategies to improve engagement and avoid burnout.

P2 further expressed, that "having initial conversations to gain a better understanding of physicians" can be important to support engagement opportunities. P2 emphasized, that finding out what motivates a physician to get out of bed is just as important as the credentials and skills he or she possesses. Knowing your people and the niches that spark their interest early on can work to the advantage of the manager and the organization as well.

Organizational needs that arise are better paired with the right physician that best fits the vacancy need because of "personal insight into the physician and who they are and what their interests are," described P2. However, this may not be popular for the physician who is selected nor is it always a sure fit for the needs of the organization.

Be that as it may, P2 also conveyed the long-term effects of these opportunities how they could "play a part in a future promotion or non-selection of promotion" and how these same opportunities are a part of a bigger picture. "Great leaders and managers," advised P2, "understand where people are in their career and make mental notes of how certain opportunities can set them apart when it is time for promotions or career advancements."

Xenikou (2017) detailed how transformational leaders develop and initiate their unique strategies to avoid disengagement that does not always align with the status quo. In support, P3 believes hands on approaches, and not just formal feedback to show discrepancies, provide better direction for personal and professional improvement opportunities. P3 conveyed, "Demonstrating how to correct bad practices for the residents becomes influential in their development for correction thus, making them better physicians."

The next level of care is dependent on physicians providing the best possible care and being thorough. When physicians are allowed to be innovative and creative, their sense of empowerment is stimulated which produces results far beyond the employee's perceived potential (Al-Sawai, 2013). Physicians can improve discrepancies that are critical to quality healthcare sometimes by visually seeing how their role impacts the continuum of care. P3 described how simple tasks like "telephone consults" can impact the next level of care if not handled properly. Demonstrating the proper way to document and explaining the importance of what may seem to be a mundane task is an opportunity for physicians to visually understand how documentation can affect a patient's care at all levels.

Aligning with P3's experience, P5 expressed how online training and telephone consults begin to falter when burnout emerges. Managers can help avoid burnout and disengagement by supporting desired professional development. Wirba (2017) cautioned managers that burnout causes employees to become disenfranchised, which leads to other negative outcomes for the organization. For healthcare, this would be further compounded, and negative outcomes would be passed to the patients as well. P5 shared, that something as simple as a course on how to be a better writer,

a course that has nothing to do with being a physician, helped to enhance writing skills when performing administrative duties. This support for personal or professional educational opportunities had a huge impact on my future engagement.

P5 recommends leaders and managers connect the dots between growth and process improvement projects. Transformational leaders can help employees overcome challenges that may inhibit growth by providing opportunities for improvement (Gozukara & Simsek, 2016). Lessons not taught or learned in a classroom nor measured by job performance can become vital experiences. Job performance and productivity are related when middle and senior-level healthcare managers help physicians understand there is a genuine concern for career progression. P5 supports career development by conducting "senior rater sessions" and going over "individual development plans" to help physicians "think about their goals five to 10 years out." P5 suggested incorporating specialty consultants for a more detailed analysis of each physician's specialty to aid in analyzing incentive and retention rates. P5 consistently emphasized how specialty consultants can help to provide a smaller, but personalized viewpoint for current and future career progression goals. One important opportunity for future career progression, P5 noted, is fellowships. Fellowship opportunities for physicians can affect whether a physician remains with an organization or may potentially be forced to seek new employment ventures. Lastly, P6 cautioned managers to have discussions to help physicians with improving professionally even if the desired outcome is not achieved initially or hurt feelings are displayed. P4 stressed the idea that ultimately physicians will take ownership and initiative to become involved in organizational opportunities for career progression and professional development. The potential reward is a stronger physician professionally who has been reformed on subpar practices, provided opportunities for advancement, patients who potentially will receive improved quality of care and a profitable and productive organization. The following table represents whether participants manage staff, residents, or both.

Encouraging career progression and professional development opportunities links to the literature reviewed discussing transformational leadership theory. The transformational leadership theory construct of idealized influence is congruent with this theme. Ghasabeh and Provitera (2017) suggested leaders potentially can foster opportunities for employees to collaborate on projects that lead to organizational improvements. In support, healthcare organizations depend on healthcare managers to engage with physicians to understand their needs professionally and personally to meet the needs of the organization (Al Khajeh, 2018). The participants' strategy of encouraging career progression and professional development opportunities supports the facet of idealized influence where managers implement collaborative approaches that provide influence on the career of physicians and the needs of the organization. Fletcher et al. (2018) discussed the positive outcomes because of an employee's ability to grow professionally and the freedom to be successful when provided opportunities. For healthcare organizations, engaged physicians who see themselves as successful and thriving, possibly become more active in the organization's overall goals. Money spent on disengaged physicians could be reallocated within the organization for items to improve patient care rather than on replacing a disengaged physician. Participants from this study who invested in employees saw positive results in employee

engagement and increased organizational support. The middle to senior-level healthcare managers also helped to foster organizational connections with personal interests to increase the promotion potential of physicians while also supporting organizational objectives.

Transformational leaders can support organizational needs while simultaneously focusing on the needs of physician employees. Alexander and Ruffin (2015) discovered transformational leaders understand best how to draw out the hidden talents in employees and stimulate them to produce higher-than-average productivity output. Fletcher et al. (2018) mentioned transformational leaders could lead followers to become successful as well as foster organizational success. It is a personal accomplishment to be considered as producing meaningful results while contributing to personal professional growth as well as organizational growth.

The postulated transformational leadership facet of idealized influence may best represent the findings from this important theme. Collaborative approaches to goals for the organization as well as the employee, often lead to an improved vision and connections in the workplace (Ghasabeh & Provitera, 2017). Transformational leaders usually inspire employees to create success for themselves while fostering success for the organization (Fletcher et al., 2019). Participants alluded to their desire to help physicians understand how to best achieve their success for career progression while participating in organizational initiatives.

The Relevance of Study Findings to Professional Practice

The findings from this study may provide middle and senior-level healthcare managers with some ideas on how successful strategies can be implemented and the importance of these strategies to the organization. Further, middle and senior-level healthcare managers may use the findings to discover new strategies to improve engagement and help avoid physician burnout. The results from this study when applied, may also bolster leadership's involvement in the commitment to physician engagement of providing value-based healthcare while improving organizational competitive advantage. Healthcare organizations potentially could use revenue generated from engaged physicians to invest in modern medical equipment and technologies that may directly impact patients and the communities in which they live, according to results from Owens et al. (2017). The effects of increased engagement and avoiding physician burnout have a global effect as well. Motyka (2018) described employee engagement as a global problem. Efforts to implement strategies to increase engagement and avoid physician burnout have the potential to affect the world's healthcare outcomes.

Conclusion

The purpose of this qualitative single case study was to explore successful strategies middle and senior-level healthcare managers used to help avoid physician burnout. Engagement is an important aspect of any healthcare organization as it directly impacts productivity and profitability. Physician engagement can play an important role in an organization's productivity and profitability. Only 34% of US employees are engaged at work (Commons et al., 2018). Healthcare organizations cannot afford the astronomical cost of disengagement and therefore need actively engaged physicians. The current business problem is some middle and senior-level healthcare managers lack strategies to engage physicians to help avoid burnout. Engagement is an ongoing business problem that requires

continuous research according to the literature reviewed. There are many challenges, internally and externally, for managers to develop successful strategies, which can potentially help increase profitability, productivity, and improve competitive advantage within the organization, local communities, and the global healthcare industry.

After the analysis of the data, one theme that emerged was: encouraging career progression and professional development opportunities despite bureaucratic obstacles, with four subthemes consisting of mentoring, communication, peer-to-peer support, and wellness. Middle and senior-level healthcare managers may use the findings from this study and the identified themes as valuable knowledge in implementing strategies to improve engagement and help avoid physician burnout. The strategies used aligned with Burns' and later Bass' transformational leadership theory and constructs. The principal theme appeared to align with the facets of individualized consideration, inspirational motivation, idealized influence, and intellectual stimulation. The results of this single case study may be congruent with the importance of using the positive effects in implementing successful strategies when used in tandem with the right leadership style. The benefits for healthcare organizations to avoid physician burnout and improve engagement can have a great impact on the quality of care, and the application of the findings of this study may serve to achieve this goal.

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