

a VITAL WorkLife article

# The Value of Peer Coaching and its Promising Benefits

By Liz Ferron, MSW, LICSW



## Coming up in the article:

- How to create an atmosphere promoting physician well being through peer coaching.
- The differences between “coaching,” “counseling” and “therapy.”
- A look at the major misunderstandings surrounding peer coaching.

No one responsible for a healthcare organization wants the clinicians on staff to be miserable, overly stressed, resentful, disengaged, on the verge of burnout or preparing to resign. Care may suffer, patient satisfaction scores may decline, team dynamics may go south—and the organization may be faced with the daunting costs of hiring and on-boarding someone new.<sup>1</sup> But the pressures of contemporary medicine are great, and these negative scenarios unfortunately play out across the industry every day.

What can be done? There are general strategies like building a culture of well being in the organization, for example, including open lines of communication so clinicians can have a stronger connection with leadership and influence over medical decisions.<sup>2</sup>

And then there are one-to-one tactics: ways a clinician who is struggling can engage with another person who understands their experiences. Such as using [well being advocates](#) or colleagues in the organization committed to spotting unhappy clinicians and lending them an understanding ear, while also [guiding them to available resources](#).

1. Tait Shanfelt, MD et al., “The Business case for Investing in Physician Well Being,” JAMA Internal Medicine, Sept. 25, 2017.

2. “Well Being Playbook: A Guide for Hospitals and Health System Leaders,” American Hospital Association and AHA Physician Alliance.



## Working with a Peer

An important one-to-one resource is peer coaching. Peer coaching is a professional relationship between a clinician who wants help and a certified professional coach who is also a healthcare professional—someone who understands the pressures of a life in medicine.

### **Peer coaching can be summed up as:**

- An opportunity to talk with someone who understands the unique work culture, job responsibilities, opportunities and trade-offs involved in the lives of medical professionals.
- Support, empathic listening, inquiry and guidance for increased well being, self-awareness and professional effectiveness.
- The ability to explore multiple areas of well being, including: emotional, relational, professional, spiritual, legal and financial.
- Assistance with personal and professional goal setting.
- An accountability partner for achieving goals.
- Resources and information for personal and professional development.



## The Coaching Difference

Many clinicians, when they hear the word “coach,” think “counselor” or “therapist”—and bridle at the idea of utilizing this resource. Is this an admission of a failure to their mental state? Are their families and childhoods going to be examined to see what’s “wrong” with them?

Coaching isn’t therapy, says Robert Leschke, MD, an emergency medicine physician and certified coach in Madison, Wisconsin. “Coaching assumes the client has all the tools they need to be successful. We’re asking clinicians to tell us where they are now and where they want to be, rather than looking back into their pasts to see where a problem came from, which is typical of therapy.”

Coaching is a collaborative enterprise, in which coach and client work together as equals in an external, action-oriented mode. Counseling or therapy is more reflective and internal, with the therapist seen as the guiding expert. While counseling usually focuses solely on intimate personal issues, coaching can address the client’s professional goals and steps to be taken to achieve them. Whereas therapy focuses on relieving emotional pain, coaching aims at unleashing the client’s potential, moving action forward, setting goals and advancing learning and performance.

While coaching and therapy can “work together synergistically,” as Leschke puts it, coaching is focused on giving the client the tools to progress in his or her life and career—to get out of “stuck” spots and become happier and more productive.

To this end, says Dr. Leschke, coaches help clients focus on values and goals, and changing their point of view about difficult or frustrating situations. “We start with values,” he says, “asking them what’s most important to them. Many of my clients say no one has ever asked them the question.”

Once a clinician articulates his or her values, the coach works with them to set personal and professional goals in line with those values—and to set goals for the sessions with the coach in order to make all of this happen.





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## From Resignation to Hope

As for the coaching process itself, Dr. Leschke says it often centers on “helping the clinician look at their situation from different perspectives. They get very used to seeing things from one vantage point. They may be resigned to a negative situation they believe will never change. If they can begin to see their situation from a different point of view, they can begin to move from the place where they’re stuck. The new point of view gives them a chance to try to do things differently.”

A physician who feels, for example, they have less and less autonomy, less control over their practice might be stuck in the feeling they have no control over their professional lives at all. They may be encouraged by the coach to look more closely at the things they actually do have control over.

“I might ask them, ‘Where do you want to have the most influence over your practice? What would be your perfect day? How do you want to influence your nurses or your clinic manager to gain their support or cooperation in order to move in this direction?’”

The point, Dr. Leschke says, “is to help them let go of what they truly can’t control and to put more energy and effort into the areas where they can make a difference. Even if their situation doesn’t change radically, they feel less helpless and more hopeful.”

## A Proactive Approach

One of the biggest misunderstandings of coaching—one shared by organizations as well as clinicians—is, according to Leschke, “the idea that clinicians have to be in trouble in order to start the coaching process. They’ve got to be burned out, yelling at nurses or throwing things.”

You don’t need to wait until a clinician is in crisis to activate the coaching process, he says. “Any suggestion that a clinician’s attitude or mood might be taking a little dip is an opportunity to be proactive and preventive rather than to be reactive to a crisis.” In many cases, says Dr. Leschke, coaching works well to simply get a clinician “back on track.”

For an organization, it’s an investment in heading off potential problems before they become actual ones.

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*Robert Leschke, MD*

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#### ABOUT VITAL WORKLIFE

VITAL WorkLife, Inc. is a national behavioral health consulting practice supporting all dimensions of well being. Our solutions are designed to meet the unique needs of physicians and healthcare organizations surrounding physician performance, satisfaction and retention. Our unique offerings include confidential support for physicians and providers, behavioral intervention programs, peer coaching, consulting, critical incident resources and a robust employee assistance program.



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As our Physician Practice Lead, Liz Ferron manages Physician Well Being Resources for VITAL WorkLife, as well as oversees all solutions of our healthcare clients. Liz provides training, consultation, counseling and coaching to healthcare

administrators and individual practitioners in many areas, including stress management, change management and conflict resolution. Liz is a Licensed Independent Clinical Social Worker and received her MSW degree in clinical social work from the University of Minnesota. She was also a consultant for the Earl E. Bakken Center for Spirituality & Healing at the University of Minnesota. She has served three terms as President of the Minnesota Employee Assistance Program Administrators and Counselors (MEAPAC) and is a former adjunct faculty member at the College of St. Benedict.

## Testimonials

Clinicians who have worked with VITAL WorkLife coaches have provided feedback indicating the process can truly get them “back on track” and in some cases, get them on promising new tracks, too.

*“I wanted to thank you for the services your organization provides. I felt like the rug had been pulled out from underneath me professionally, so I called VITAL WorkLife and was put in touch with [my coach] who has encouraged me to dig deep within myself and find my inner voice and strength.”*

*“[My coach] is kind, professional and a great communicator. Her prompt and powerful guidance has helped me choose my fellowship program and succeed in applying my passion in the area of holistic health and growing as a leader. I am very thankful for the opportunity to work with her and can foresee much more personal and professional growth in the future for myself as a result.”*

*“First, I want to say that my current level of well being would be a 9. I was probably at a 0 before coaching so everything has improved so much!”*

There is much work to be done on the part of healthcare organizations to set the conditions for reduced burnout and greater engagement. That being said, peer coaching can offer an important contribution in the areas of clinician well being and engagement.

[Download our Physician Well Being Resources Fact Sheet](#) or [contact us for more information about peer coaching](#), one of the several proactive resources offered within our [Physician Well Being Resources](#) solution, a unique and comprehensive well being program designed specifically for physicians and advanced practice providers.



#### Sources:

1. [Tait Shanfelt, MD et al., “The Business case for Investing in Physician Well Being.”](#) JAMA Internal Medicine, Sept. 25, 2017.
2. [“Well Being Playbook: A Guide for Hospitals and Health System Leaders.”](#) American Hospital Association and AHA Physician Alliance.