

# Coaching physicians

*A former surgeon's story of how coaching benefits healthcare practitioners*



By ICF member  
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## Mistakes Happen

Jackie, my nurse, sheepishly said, "I think I gave him Penicillin by mistake."

"You think or you know you gave him Penicillin?" I questioned. Reading her face, I knew the answer before she spoke.

"I gave him Penicillin and I'm so sorry Dr. Cassatly." I told her to call the emergency number 911 and say we had a patient about to go into anaphylactic shock; the most severe life-threatening type of allergic reaction.

Will, an emergency patient bleeding from a facial laceration due to slipping on his boat, had walked into my office just as we were closing after a busy day of surgery. Now, looking him directly in the eyes, I told him straightforwardly, that my nurse had mistakenly given him Penicillin.

"I told you all, I almost died once from Penicillin," he blurted very upset. "I heard you tell her to give me Erythromycin. It's her fault."

As I started an IV to administer some drugs to counteract the allergic reaction, I calmly mentioned the Emergency Medical Service (EMS) was on the way. Jackie appeared in the door with tears in her eyes. She apologized. Will just glared back at her. I touched his shoulder and reassured him he was going to be alright.

Will and I spent the next six hours in the emergency room at the nearby medical center. I held his hand, got him a warm blanket as the drugs caused him to shiver and brought him a cool wet towel after he vomited. We became friends. I learned of his messy divorce, his daughter he only was allowed to visit once a week and his elderly mother who drove him crazy. And he hated his job.

While in the ER, I also spent time on the phone calming Jackie down, reassuring her that mistakes happen and that we would review proper protocol later.

Will never initiated a malpractice suit against me or my staff.

## Coaching to the Rescue

Although I did not know it at the time, coaching, now my second career, has shown me that the reason Will did not sue me was because I built a real relationship with him. In fact, in my previous career as an oral and maxillofacial surgeon, I now realize I built real relationships with all my patients. I always took the time to ask them about their lives, to discover their personalities and develop relationships outside of the doctor patient relationship thrust upon us. Patients do not sue doctors they like and Will liked me. Why? Because I had treated Will as a "whole" person, not just a patient from whom I could generate an insurance claim and make money.

As coaches, we all can attest that our clients' improved performances are partly due to enhancement of their interpersonal communication and relationship building skills. Physicians, too, desperately need coaching to improve their communication skills, as they interrupt patients an average of 18 seconds into the patients' descriptions of their presenting problem.

In addition to developing their clinical expertise, physicians need to improve their communication skills as well, which in turn leads to real relationships and better outcomes. I have

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coached many health care practitioners, some I knew from my first career as a surgeon and some as clients that know me as a coach. Subsequent to my coaching, they all claim better communication, not only with their patients, but also with their staff, peers and in their personal lives.

How do I coach them to be better communicators? Believe it or not, my first objective is to teach them some of the coaching skills we all use. I have found that a coachable physician can easily become a very good active listener. Once they become an active listener, the physician is ready to view the situation from the patient's perspective and the bond of the patient-physician relationship begins to strengthen.

The hardest part, I have found, is for the physician to view the situation from the patient's emotional perspective. Many physicians, in order to persevere in the face of adversity, have adapted by walling off their emotions. How else can a physician deliver effective medical care in emotionally challenging situations, such as traumatic injuries or painful deformities of a child? In many, the walls constantly surround them in all encounters with patients, even when they are not necessary. Ironically, the walls can often hinder treatment. Coaching physicians to have the emotional intelligence to recognize when walls are not necessary to render effective treatment improves their relationships with patients. I have found physicians are very willing to work at building relationships with their patients once they realize more successful patient outcomes translate into more free time in their schedule. They quickly pick up on the fact that

the additional time could be used to see new patients and generate more income. Other benefits physicians gain are a personal feeling of satisfaction, less personal stress and a less stressed office staff.

Professional coaching benefits the healthcare system by reducing overall healthcare costs. Patients who trust their physicians are more satisfied with their healthcare and are three times more likely to follow their physician's advice. In turn, better patient outcomes means reduced inpatient and outpatient diagnostic testing costs, reduced malpractice suits and reduced costs of malpractice insurance.

The current healthcare crisis in the US presents daunting challenges for my country, but also some worthwhile opportunities. As coaches, we can play an impactful role in the current crisis afflicting healthcare systems throughout the world. We know how much coaching improves the performance of our clients. It is time we start directing our services toward healthcare providers.



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