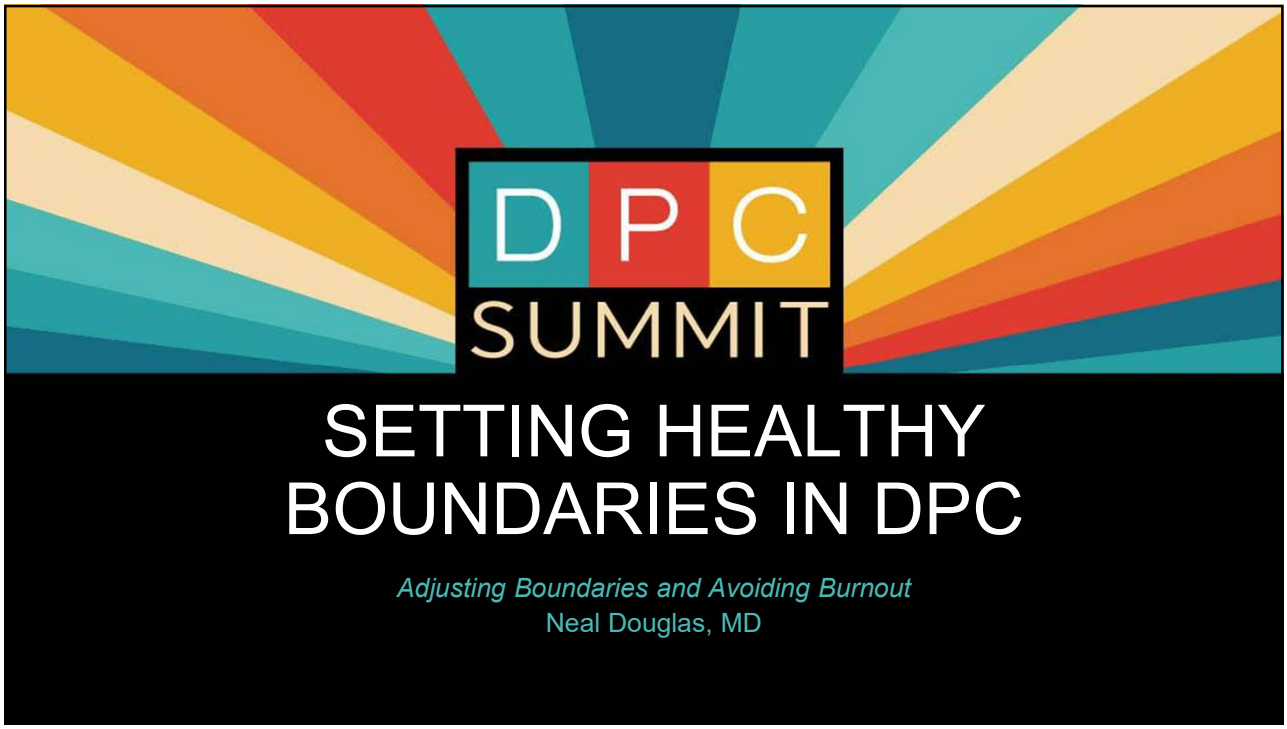
DPC
SUMMIT
SETTING HEALTHY BOUNDARIES IN DPC
Adjusting Boundaries and Avoiding Burnout
Neal Douglas, MD

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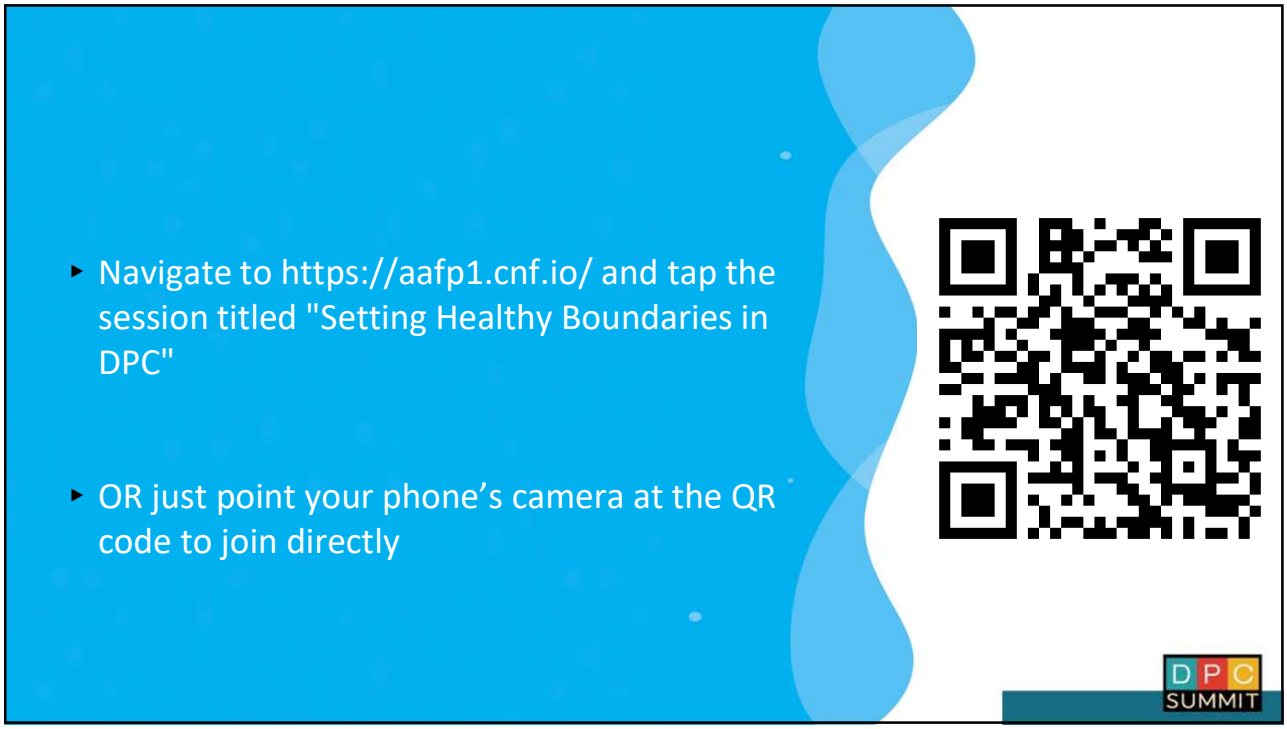
Navigate to https://aafp1.cnf.io/ and tap the session titled "Setting Healthy Boundaries in DPC"
OR just point your phone's camera at the QR code to join directly
DPC
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Learning Objectives

1. Identify common early-practice pitfalls that contribute to physician burnout and reduced patient satisfaction.
2. Apply strategies for effective patient communication, appropriate medical triage, and efficient care delivery to support high-quality practice operations.
3. Evaluate approaches to balancing patient access with protection of personal time to promote physician well-being and sustainable patient-centered care.

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Who Is Neal Douglas, MD? / Disclosures

- Family Medicine Physician
- Founder, Heritage Family Medicine — Hood River, OR
- Direct Primary Care Physician
- Disclosures: None

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The Struggle Is Real

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The Struggle Is Real

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The Struggle Is Real

9

The Struggle Is Real

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The Struggle Is Real

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Live Content Slide

When playing as a slideshow, this slide will display live content

Poll: Which Early Boundary Slip Sounds Familiar?

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Getting Off on the Right Foot

- Your patient contract should outline your MINIMUM level of coverage
- The contract is not a marketing tool
- Set your boundaries early — and stick to them
- Always, always, always under-promise…
- **OVER DELIVER**

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Layers of Protection

- Set your boundaries and stick to them
- Send frequent e-mails about clinic workflow
- Generate ‘automated’ messages
- Train staff to protect your time
- Consider a virtual medical assistant for routine calls

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The Power of Positives

Instead of Saying…

- "We don't have any visits Tuesday."
- "Sorry, we don't offer vaccines here."
- "That medication is not in stock."
- "You're not sick enough to warrant an urgent visit."
- "I am out of the office all next week."

Try This Instead…

- "Wednesday is better for us — do you prefer 11 am or 3 pm?"
- "We have a great relationship with the county health department."
- "Would you prefer we order it in and ship it to you, or send it to a local pharmacy?"
- "Try XYZ over the weekend — we'll reserve a Monday opening just in case."
- "My nurse will gladly help…"

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Let Technology Triage

- Text to triage: quick glance, saves family time, convert to a call as needed
- VOIP with virtual assistant, call routing, voicemails transcribed to email or text ($10/month per line)
- Auto-attendant features built into everyday phone platforms ($20/month)
- Explore RingCentral, RingOver, and similar call-routing tools

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Let the "Bad Cops" Do Their Job

- EMR
- Billing system
- Clinic policy
- Re-enrolment Fee
- Contract
- Medical/business license
- "I would love to refund your last 6 months of membership, but…"

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A Real Patient Message

Patient

I'm not currently a patient but I have the finances to cover membership and I believe I have enough cash on hand to also cover a visit today. I'm in Parkdale. I'm a 36yr old female and recently I e had bad swelling in both my legs this past week — there was moderate pitting and for the first time a "hot spot," lumpy/swollen and not perfect circle, and red but not hot to the touch. I have previously been pre-diabetic and this may be a factor. Additionally about 6 weeks ago out of nowhere I lost the range of motion and strength in my left upper arm and shoulder. It's very painful and even getting dressed and undressed or other daily tasks is very difficult without help. While I've got some of the swelling down last weekend, Chat GBT was very insistent that I do not delay having it checked by a doctor the following day (which has now been 5 or 6 days). Lastly, and possibly the most pressing issue — a few days ago I was told that police are looking for me (I hope it's for questioning as opposed to arrest, though I'm not actually sure) in regards to an alleged physical altercation sometime late last week (Thursday–Sunday). I'm not exactly sure what I'm being accused of but I was told it's a list of charges. However I was not even there and yet I'm being accused of an assault by the "victim." So it's imperitive that I have a thourough physical exam by a trained medical professional to document that I have no signs of being in such a situation as well as no offensive or defensive wounds or scratches or ol injuries. (Obviously if there are please state that, I want the truth accura…

06/20/26 5:34pm

Patient

Hello?

06/21/26 5:24pm

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Boundary Breakers

- Zero tolerance policy (racism, sexism, etc.)
- Mental illness is not an excuse
- Contract patients around a treatment plan (defined # of calls per week, hours acceptable to call, must establish with specialist by this date, etc.)
- Be prepared to dismiss if not following the plan of care and violating boundaries

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Enabled Vs Empowered

Enabled

- Relies on the physician to solve problems the patient could manage themselves
- Contacts at all hours, expecting an immediate response
- Tests or ignores agreed-upon boundaries
- Codependent dynamic — excessive, unhealthy responsibility for one another

Empowered

- Partners with the physician and takes ownership of self-management
- Uses the agreed channels — text-to-triage, portal, scheduled calls
- Respects the plan of care and the boundaries that protect it
- Healthy relationship — mutual respect and shared responsibility

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Master the Schedule

- Front-load your schedule:
  - Keep your skillset
  - Know your limits on growth
  - Shoot for 1–2 days a week reserved as ‘urgent care/admin/overflow only’
  - Schedule focused admin time for your ‘To Do’ list
  - Take time to HEAL and invest in yourself and your family

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Protecting the Time That Matters



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Thanks!

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Live Content Slide

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Social Q&A for Setting Healthy Boundaries in DPC

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QUESTIONS?

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