

DIRECT PRIMARY CARE Summit



2018

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FAMILY PHYSICIANS



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Lines in the Sand: Boundaries & Sustainable DPC

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Submit your questions to: aafp3.cnf.io

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Learning Objectives

- Create boundaries prior to opening a DPC practice to pave a path for a sustainable practice.
- Modify their business model after opening to correct for unanticipated lifestyle challenges inherent to DPC.
- Compare and contrast challenges of DPC practices through an open-forum discussion.

AGENDA

Boundaries

Traditional
Boundaries in
Healthcare

The SPACE in
DPC

Contract

Structure

Sample
Structure
80/ 20 Rule

DPC
Boundary
Themes

Questions

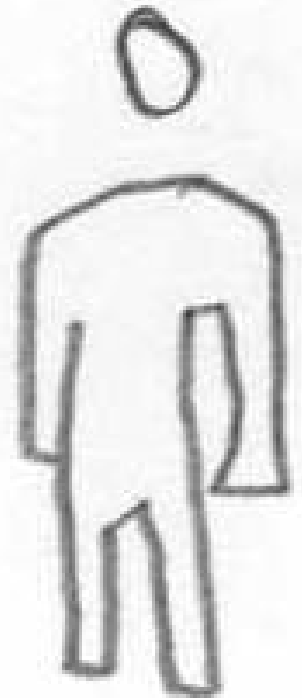
Boundaries

“Healthy boundaries are a crucial component of self-care in all aspects of our lives. For example, ‘in work or in our personal relationships, poor boundaries lead to resentment, anger, and burnout’(Nelson, 2016). . . a clear place where you begin and the other person ends”





SPACE



Traditional Boundary Challenges in Healthcare

1

Over-Familiarity

- Patients have your cel phone?
 - After hours availability
 - First-name basis
 - Home, T-ball, Daycare Visits?

2

Business Relationships

- Trading care for Advertising, Car repair, a real estate lease..

3

Gift giving & accepting

- Flowers, cookies, cards, blue jeans?

4

Treating friends, Staff &/or Family

- Caring for your accountant, real estate agent, mentor, lawyer etc??

Direct Primary Care is a *business* model. There are inherent ‘violations’ to traditionally held boundaries, but the SPACE between patient and physician remains. This space must be clearly outlined for patient, physician and practice well-being.



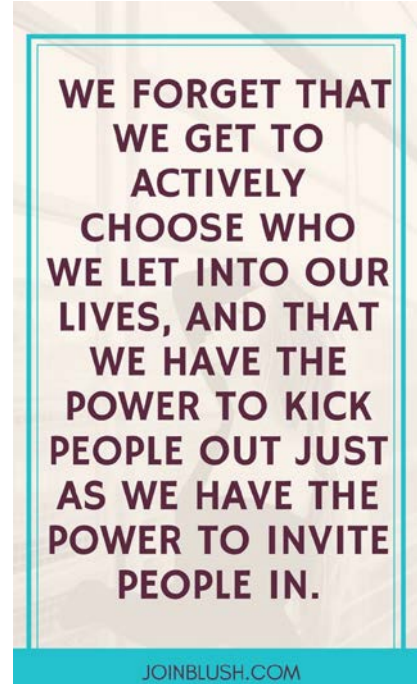
The SPACE in DPC: what
are you offering?

Patient Contract

Legally defines your services and the limits of the care you can and will provide.

A contract with your patient is a MUST.

Consider also having a welcome to the practice letter.



Practice Structure

Plan your day, even in the beginning

Structure = Sustainability

Everything all at once works when you're small

Registration Fee

Watch out for same day new patients

Establish a daily workflow.

Set aside time to work ON your business.

Decide practice rules on late patients, walk ins,
multiple cancellations & after-hours communication



A Day/Week in DPC: Example

7:30-8:30: Labs, Imaging, route work to MA's for day

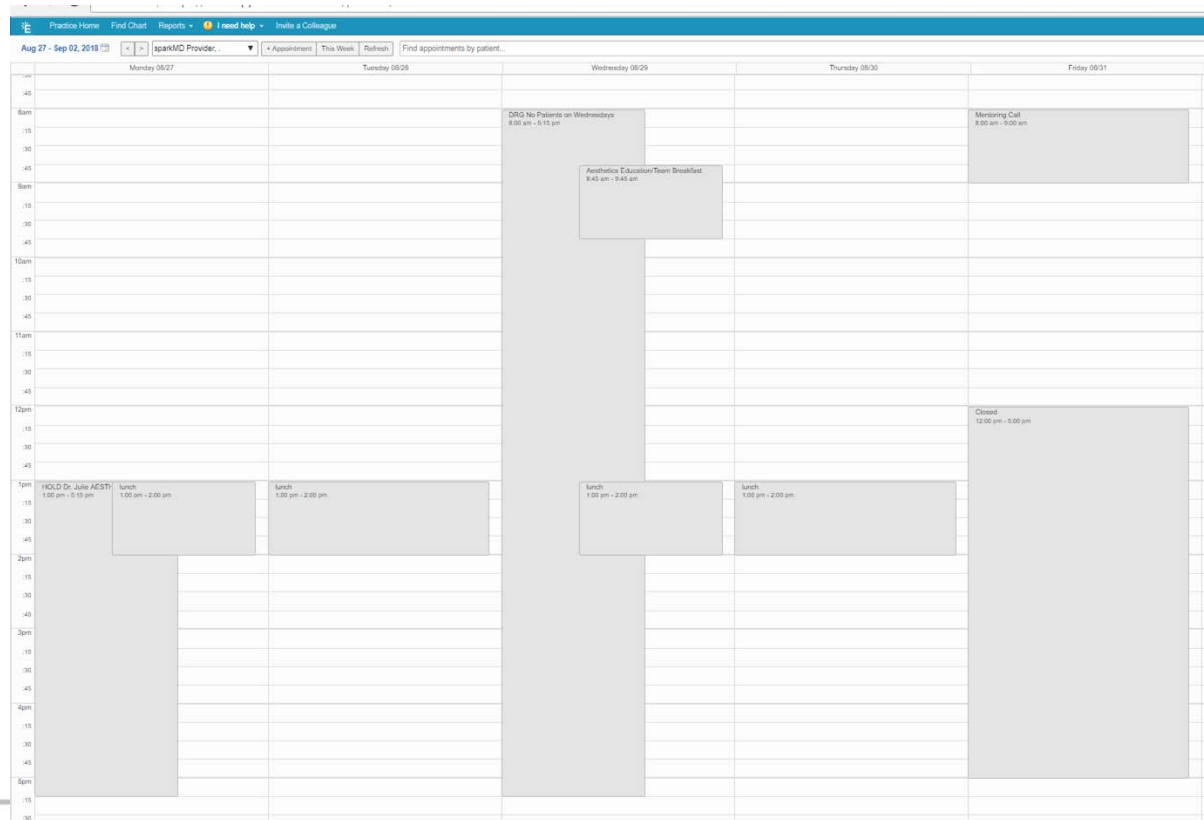
8:30-8:45 “SCRUM”

8:45: am lab draws start

9:00-1pm: patient care time

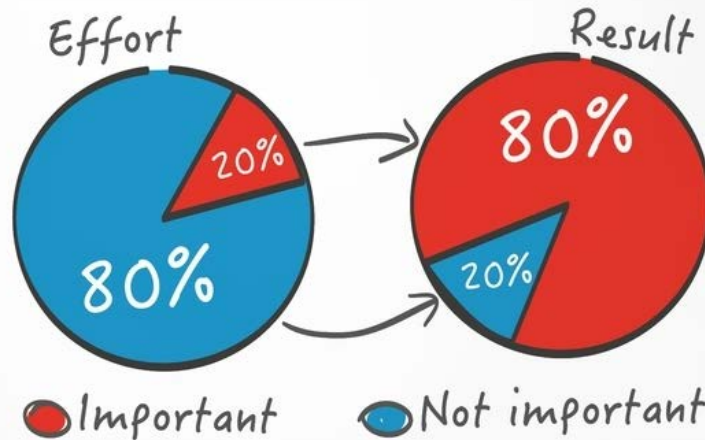
1:00-2:00 Lunch
(review labs/messages again)

2:00-5:00 Patient Care
(review labs/messages again)



PARETO'S PRINCIPLE

Expand your business
with the 80/20 rule



DPC & Boundaries: Themes



The “I’m paying so I am going to utilize you for e.v.e.r.y.t.h.i.n.g”

Entitlement to YOU can be a problem in DPC. Be very clear what you are selling.



The “I have to pay even when I don’t come in?” patient

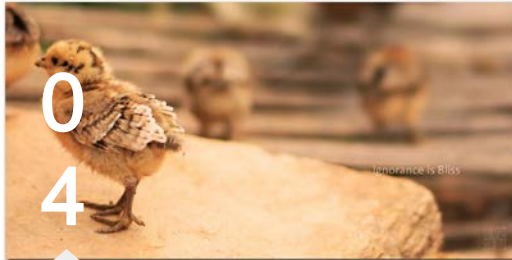
Your patient contract should solve this problem. A registration fee helps tremendously to establish that patients pay you directly for what you do.



The “just real quick” patient

DPC patients can feel like they are your ONLY patient. Be wary of enabling this feeling. Overtime

DPC & Boundaries: Themes



The afterhours communicator

Texting & email are E.A.S.Y. Be aware of when YOU choose to text patients. Do not reinforce unnecessary after hours communication. Schedule messages.



The patient “no one” can help

Your happiest patients are your greatest advocates. Be conscientious of what you're building.

The “You didn't tell me...”

Have a narcotic contract if you prescribe narcotics, stick to it like GLUE. Be VERY wary of borderline behavior- the patient has the disease NOT you.



“Daring to set boundaries is about having the courage to love ourselves even when we risk disappointing others.”

~Brene Brown

Questions?

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Don't forget to evaluate
this session!

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