ABMSCONFERENCE

2017

Professionalism: A Dynamic and Assessable Competency

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ABMS Board of Directors

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ACHIEVING IMPROVEMENT THROUGH ASSESSMENT AND LEARNING. **TOGETHER.**

Highly Publicized
Illegalities
Involving Physicians

Disruptive Physicians

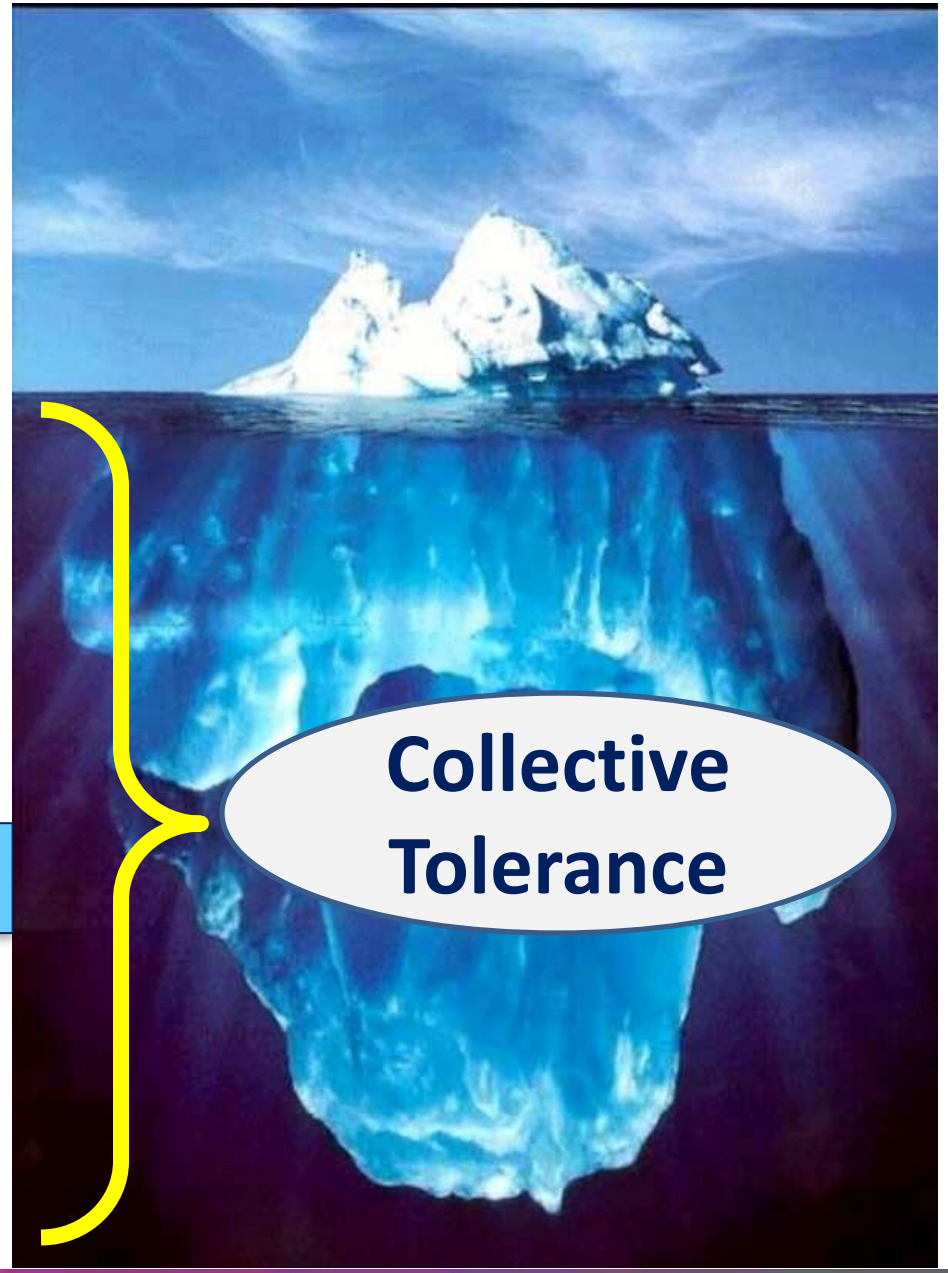
Learner Mistreatment

Conflicts of Interest

Boundary Transgressions

Disregard of EBSP

Daily Incivilities



The Gap between Real and Ideal

- Intention- Behavior gap exists in practicing physicians (*Campbell 2007)*
- The majority of nurses and physicians in ORs, EDs, L&D units have witnessed unprofessional behavior in their departments. (*Rosenstein and Naylor 2012, Saxton 2012).*
- 25-50% of Residents report witnessing >4 episodes of disrespect in the health care environment. *(Billings 2011)*
- Almost all surveyed students report witnessing unprofessional behavior in residents and faculty. *(Wiggleton 2010)*

Consequences of that Gap

- 75% of personnel in a 100 hospital survey believed that disruptive behavior (passive or overt) contributed to poor quality of care; 18% had personally witnessed such an event. *(Rosenstein 2008)*
- Intimidation of a nurse or pharmacist by a physician caused 7% of medication errors in one hospital. *(Smetzer 2005)*
- Two-thirds of nurses subjected to verbal abuse reported a transient decrease in critical thinking. *(Saxton 2012.)*
- Residents exposed to an environment of verbal abuse have higher rates of burnout and cynicism *(Billings 2011)*

The Shifting Sands of Professionalism

Figure. Systems View of Professionalism

JAMA. 2010;304(24):2732-2737

Strategies to strengthen professionalism

- Develop individual competencies
- Promote physician leadership and supportive organizational culture
- Encourage physician advocacy and engagement in system reform

Professionalism Lapses, Like Medical Errors

- ✓ Prevalence is common and inevitable
- ✓ Severity and impact vary widely
- ✓ Negligence is uncommon
- ✓ Caused by good people with transient deficiencies in knowledge, judgment or skills
- ✓ Nature of challenges changes with advances in science, technology, expectations
- ✓ Systems may set people up to fail

Professionalism Challenges: Dueling Conflicts

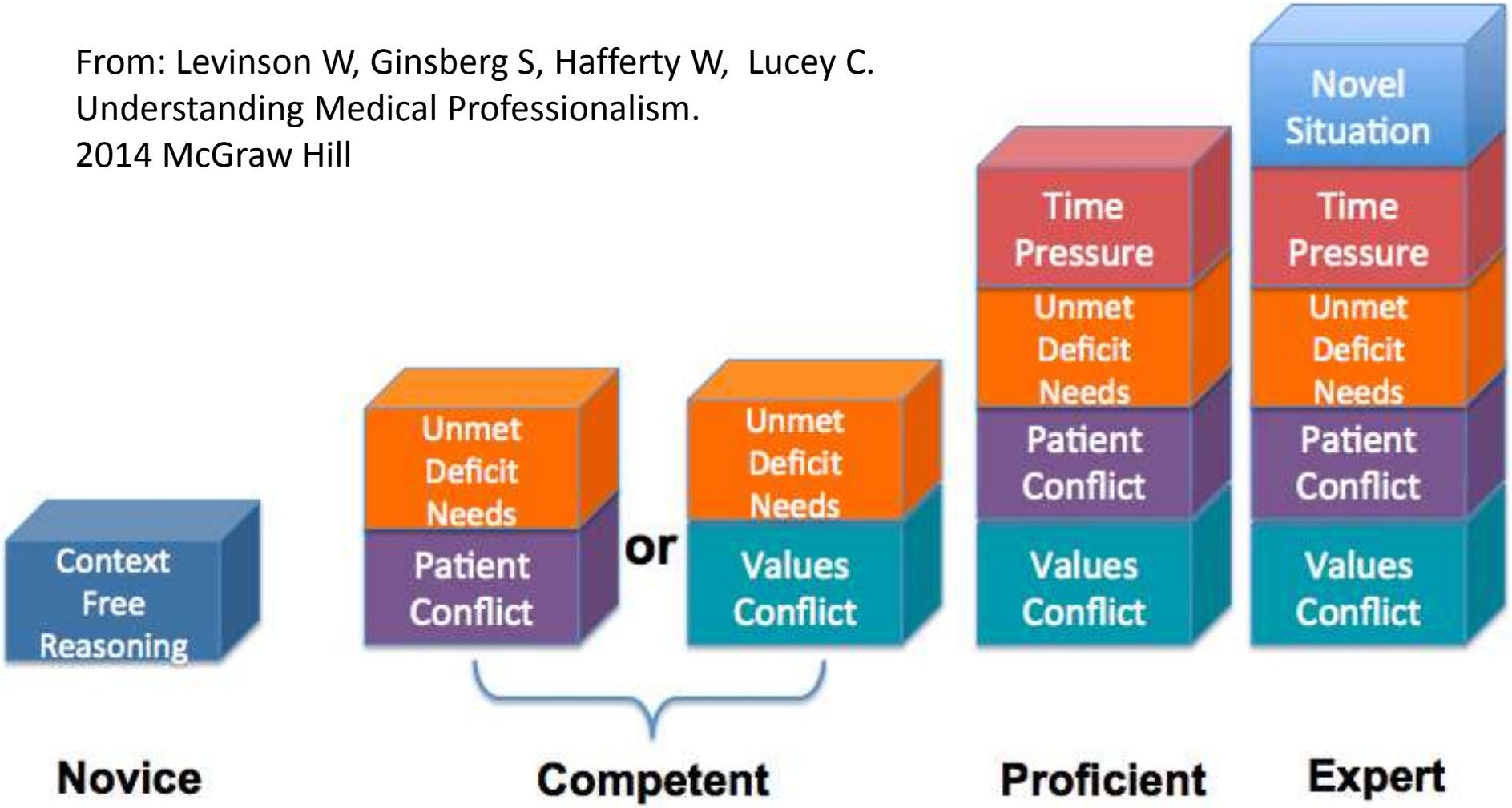
Values, Patients, and Maslow Conflicts

- **Ginsberg S et al. *Acad Med* 2002; 77(6):516**
- **Bryan CS. *The Pharos* 2005; 68(2): 4**
- **Ginsberg S et al. *JGIM* 2003; 18(12):1015-22**

Managing a Professionalism Challenge Requires Judgment and Skill

Situation-Competency Mismatch may cause Lapses

From: Levinson W, Ginsberg S, Hafferty W, Lucey C.
Understanding Medical Professionalism.
2014 McGraw Hill



Seven Competencies for Building Professionalism Resilience

1. Self Awareness and Control
2. Situational Awareness
3. Alternate Strategy Development
4. Crisis Communication
5. Managing Boundaries
6. Coaching and Intervention
7. Effective Apologies

Acad Med. 2007 Oct;82(10 Suppl):S109-16.

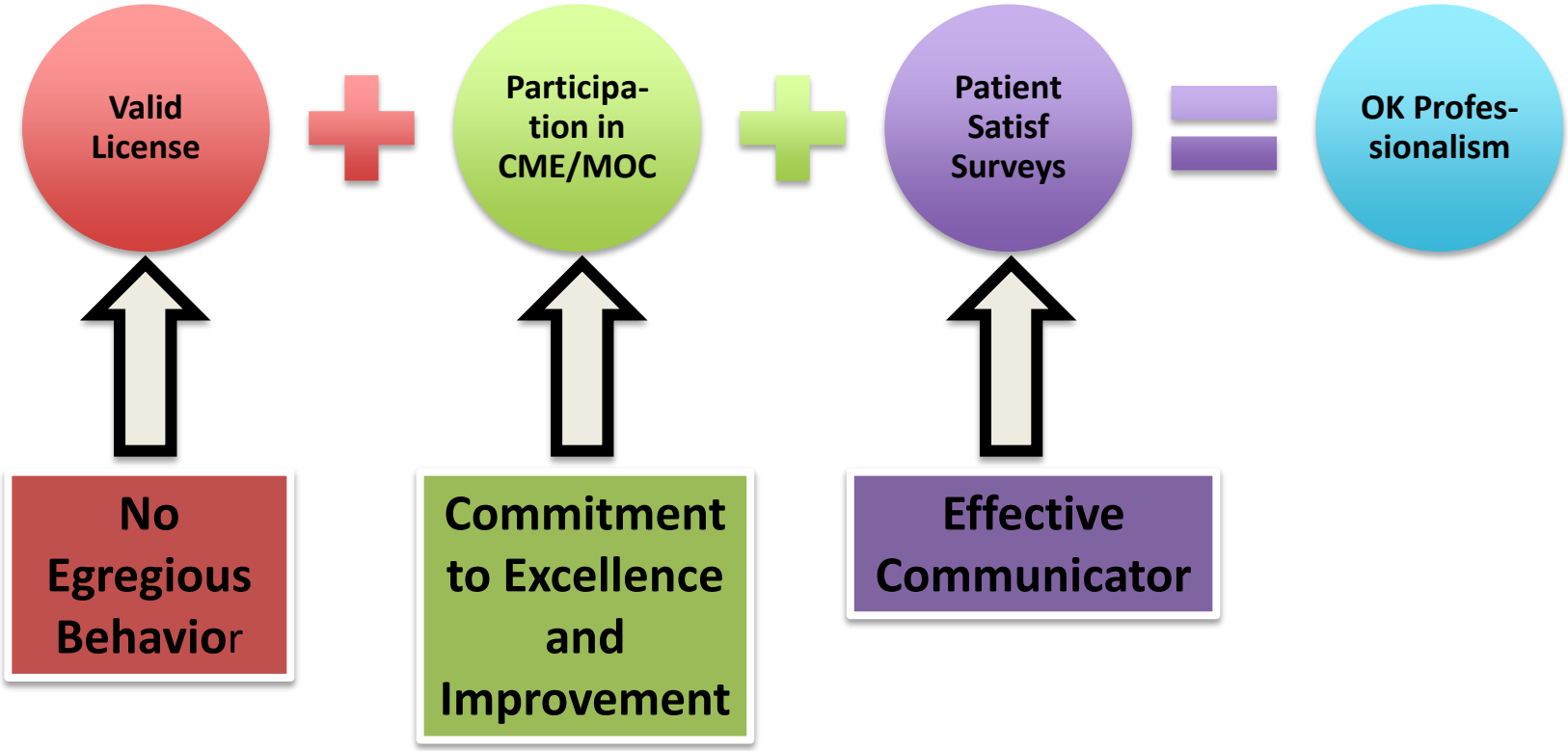
Slowing down when you should: a new model of expert judgment.

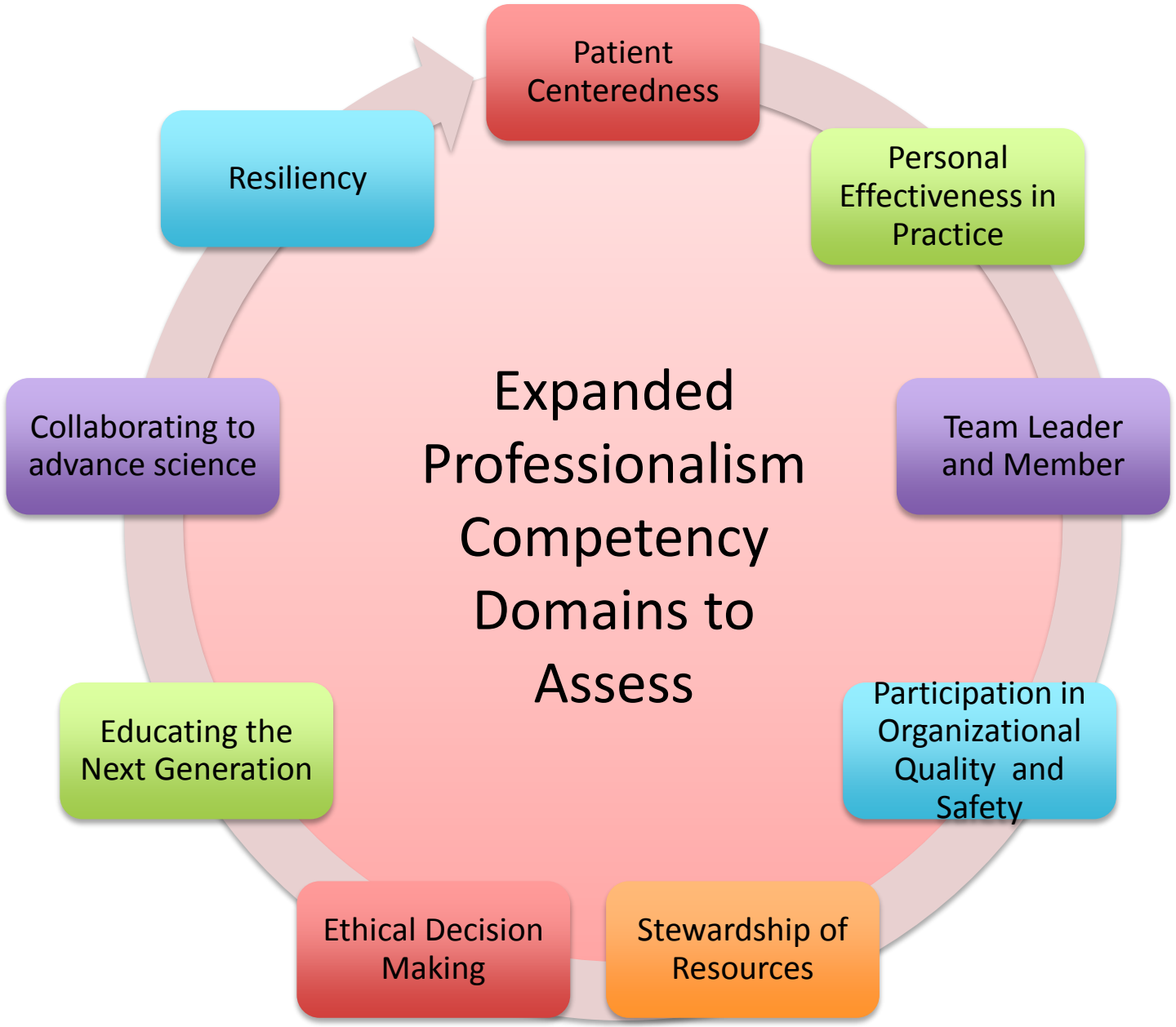
Moulton CA[1], Regehr G, Mylopoulos M, MacRae HM.

Implications for Maintenance of Certification

- ✓ Professionalism, as an individual competency, can either advance or decay based on how it is managed across a career.
- ✓ Professionalism is influenced by advances in biomedical science, care delivery and teamwork, and patient expectations.
- ✓ Thus, professionalism must be a focus of both continuing medical education as well as maintenance of licensure and maintenance of certification programs.

Current MOC Professionalism Assessment




Expanded Professionalism Competency Domains to Assess
Patient Centeredness
Personal Effectiveness in Practice
Team Leader and Member
Participation in Organizational Quality and Safety
Stewardship of Resources
Ethical Decision Making
Educating the Next Generation
Collaborating to advance science
Resiliency

Modifying Existing MOC Tools and Strategies to Assess Professionalism

- ✓ **MCQ Exams**: content related to ethics and professionalism challenges
  - ✓ Requires a different type of MCQ than single best answer
- ✓ **MCQ Exams:** stewardship concepts imbedded in clinical decision making.
- ✓ **Self Evaluation or Performance Improvement Modules**: Reflection on a professionalism challenge

New Tools and Strategies to Evaluate Professionalism Competencies

- **Multisource Feedback:**
- Physician Achievement Review (PAR) {Alberta, Canada} *(Violato et al 2008)*
  - Multisource feedback from patients, peers, coworkers and self
  - Evaluated as valid, reliable, feasible and helpful
- Effectiveness and Respect Questionnaires for physicians who teach *(Papadakis et al)*
- Structured Letters of Recommendation: Relative Percentile Methods *(McCarthy J. 2001)*

Thank you!