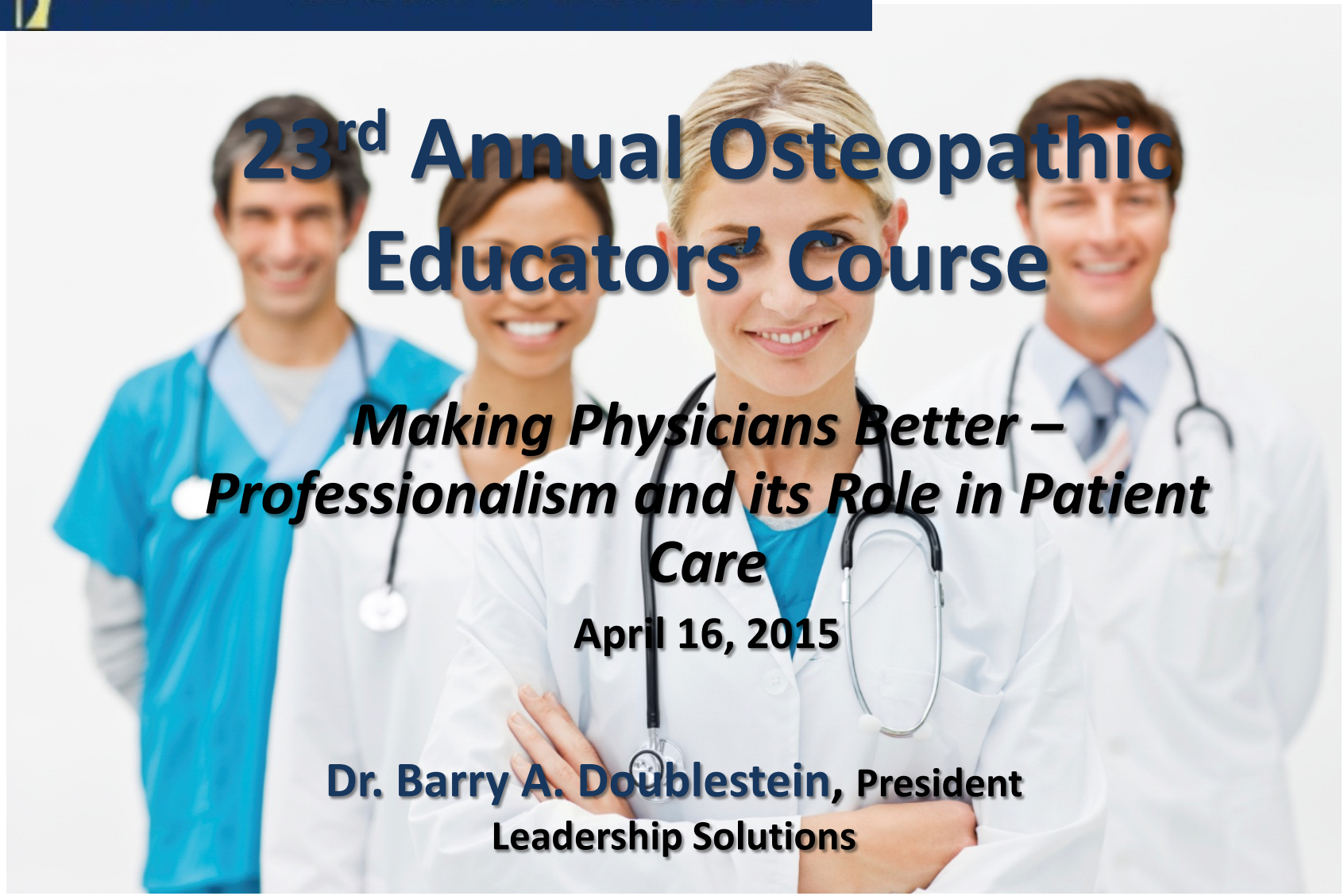
AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS



23rd Annual Osteopathic Educators' Course

Making Physicians Better – Professionalism and its Role in Patient Care

April 16, 2015

Dr. Barry A. Doublestein, President
Leadership Solutions

How would you define professionalism in medicine?

Have you experienced a lapse of professionalism around you in the last 30 days?

What behaviors would you consider un-professional?

Michael Clarke, Syracuse surgeon, accused of slapping sleeping patients, feds say

Published: April 6, 2014 5:41 PM
By THE ASSOCIATED PRESS

A Google street view image of the St. Joseph's Hospital Health Center in Syracuse, N.Y. (Credit: Google)

SYRACUSE, N.Y. - Federal investigators say a Syracuse surgeon often slapped anesthetized patients on the buttocks and insulted them before surgery.

Joan Rivers's Doctor Allegedly Took Selfie During Throat Procedure: Report

241 SHARES | Share on Facebook | Tweet | Pin | + | SUBSCRIBE

Joan Rivers

http://www.people.com/article/joan-rivers-doctor-allegations-yorkville-clinic. Retrieved: March 3, 2015

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

DAILY NEWS NEW YORK | NEWS | POLITICS | SPORTS | ENTERTAINMENT

DR. ZORRO TO PAY PATIENT $1.7M

BY DON SINGLETON , SUNDAY NEWS , STAFF WRITER / NEW YORK DAILY NEWS / Sunday, February 13, 2000, 12:00 AM

A A A

An obstetrician who came to be known as "Dr. Zorro" will apparently pay $1.

7 million to a new mother whose abdomen bears his carved initials, a source said yesterday. Dr. Allan Zarkin, 61, admitted using a scalpel to carve his initials into the midsection of Dr. Liana Gedz, whose baby he had just delivered by Caesarean section at Beth Israel Medical Center Sept. 7. Gedz, a 31-year-old dentist, filed a $5 million lawsuit against Zarkin and the hospital in November, but during subsequent grand jury testimony, she asked prosecutors to spare Zarkin from criminal charges. "Dr. Gedz has released Beth Israel Medical Center from all claims and liability arising out of the incident with Dr. Zarkin, without payment of any kind by Beth Israel," the hospital said in a statement released yesterday. "We understand that Dr. Gedz has settled her lawsuit against Dr. Zarkin for an undisclosed amount.

" A source familiar with the settlement told the Daily News that the amount was $1.

Pediatrician Gets Probation In Child Peeping Case

March 20, 2012 5:28 PM

Share 5 Tweet 2 Share 1

iStockphoto

Related Tags: Ann Arbor, doctor, pediatrician, Peeping, peeping tom

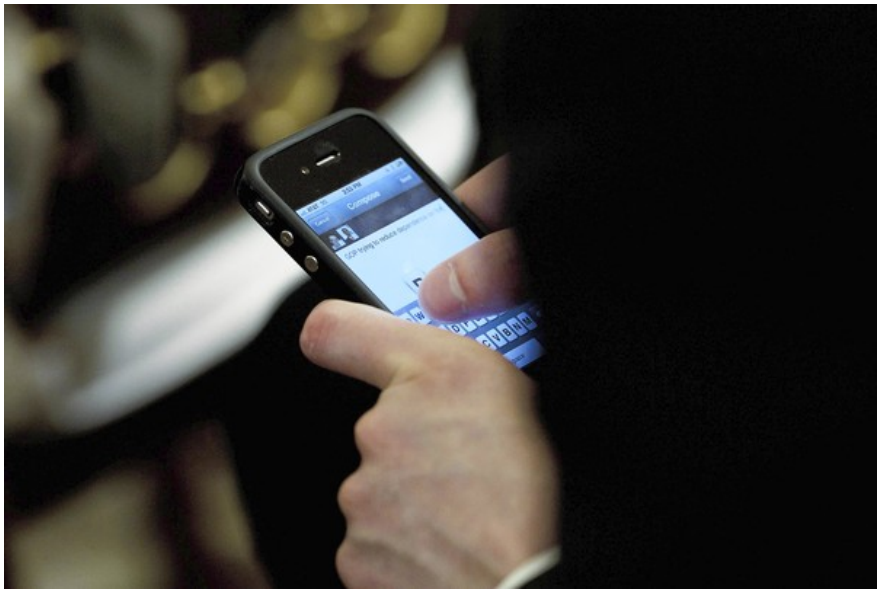
ANN ARBOR (WWJ/AP) - An Ann Arbor pediatrician charged with looking out his window to watch a 12-year-old girl change clothes has been sentenced to five years' probation and ordered to move.

A judge Tuesday said Howard Weinblatt must move from his Ann Arbor home within 30 days and register as a sex offender.

The 65-year-old Weinblatt pleaded no contest in January to surveilling an unclothed person. He faced up to two years imprisonment on the felony.

http://detroit.cbslocal.com/2012/03/20/pediatrician-gets-probation-in-child-peeping-case/. Retrieved: March 3, 2015

Professional?



AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

2. Does your health care organization ever experience behavior problems with doctors and nurses?

Response	%	Count
Yes	97.4%	2,088
No	2.6%	55
answered question		2,143
skipped question		14

Johnson C. Bad Blood: Doctor-Nurse Behavior Problems Impact Patient Care. Physician Executive Journal. Nov.-Dec., 2009. https://www.ache.org/policy/doctornursebehavior.pdf. Retrieved: April 23, 2014.

4. Generally speaking, how often do behavior problems arise between doctors and nurses at your health care organization?

Response	%	Count
Daily	9.5%	168
Weekly	30.0%	530
Monthly	25.6%	452
Several times a year	30.9%	547
Once a year	2.9%	51
Less than once a year	1.2%	21
answered question		1,769
skipped question		388

Johnson C. Bad Blood: Doctor-Nurse Behavior Problems Impact Patient Care. Physician Executive Journal. Nov.-Dec., 2009. https://www.ache.org/policy/doctornursebehavior.pdf. Retrieved: April 23, 2014.

5. **In the last year, what types of behavior problems have you experienced at your health care organization between doctors and nurses? (Check all that apply.)**

Response	%	Count
Yelling	73.3%	1,294
Cursing	49.4%	873
Degrading comments and insults	84.5%	1,493
Refusing to work together	38.4%	679
Refusing to speak to each other	34.3%	606
Spreading malicious rumors	17.1%	302
Inappropriate joking	45.5%	804
Trying to get someone disciplined unjustly	32.3%	570
Trying to get someone fired unjustly	18.6%	328
Throwing objects	18.9%	334
Sexual harrassment	13.4%	237
Physical assault	2.8%	50
Other	10.0%	177
answered question		1,766
skipped question		391

Johnson C. Bad Blood: Doctor-Nurse Behavior Problems Impact Patient Care. Physician Executive Journal. Nov.-Dec., 2009. https://www.ache.org/policy/doctornursebehavior.pdf. Retrieved: April 23, 2014.

"A substantial barrier to progress in patient safety is a dysfunctional culture rooted in widespread disrespect."

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 1: The nature and causes of disrespectful behavior by physicians. Academic Medicine. 2012 Jul;87(7):845-852.

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 2: Creating a culture of respect. Academic Medicine. 2012 Jul;87(7):853-858.

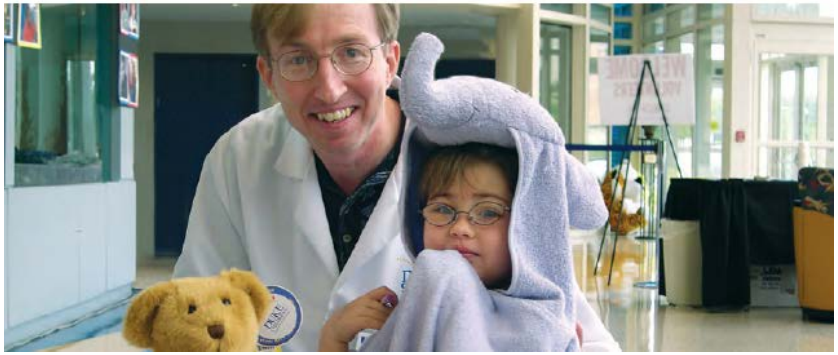
"Disrespect is a threat to patient safety because it inhibits collegiality and co-operation essential to teamwork, cuts off communication, undermines morale, and inhibits compliance with and implementation of new practices."

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 1: The nature and causes of disrespectful behavior by physicians. Academic Medicine. 2012 Jul;87(7):845-852.

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 2: Creating a culture of respect. Academic Medicine. 2012 Jul;87(7):853-858.

Living Our Values

Caring for our patients, their loved ones, and each other



How to Live Our Values Every Day

- Smile and make eye contact.
- Have a clean, neat and professional appearance.
- Keep a clean and uncluttered environment.
- Maintain low noise levels.
- Be courteous and provide prompt service.
- Conduct personal phone calls and conversations in private.
- Provide directions and walk patients, families and visitors to their destinations.
- Wear my ID badge at chest or neck height so it is easily visible.
- Behave respectfully toward patients, their loved ones and coworkers.
- Ask, "Is there anything else I can do for you?"
- Pick up trash and clean up spills.
- Knock on doors and properly greet patients and loved ones.
- Take personal responsibility for patients and family requests.
- Acknowledge my coworkers for providing outstanding service.

Are we left with…'you know it when you see it?'

Is there a way to define it easily, discover its components, assess where one falls in the continuum, and devise a plan for improvement?

The key concept in getting us there is the term…

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Why Professionalism?

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Medical Education Goals

Flexner -- 1910:

- Standardization
- Integration
- Habits of inquiry and improvement
- Professional formation

Flexner 2 -- 2010

- Standardization and individualization
- Integration
- Habits of inquiry and improvement
- Professional formation

Cooke, M., Irby D.M., O'Brien B.C. (2010). *Educating Physicians: A Call for Reform of Medical School and Residency*. San Francisco, CA: Jossey-Bass; 2010 The Carnegie Foundation for the Advancement of Teaching.

Medical Education Goals

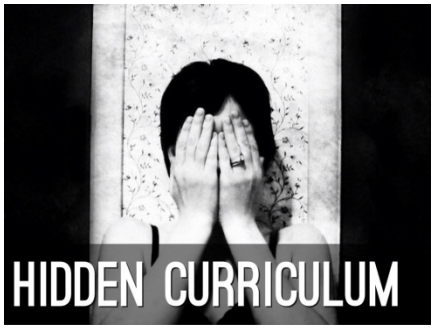
Professional formation:

- ***Promote formal ethics instruction***
- ***Address the underlying messages expressed in the hidden curriculum***
- ***Offer feedback on assessment of professionalism***
- ***Promote positive role models***
- ***Create collaborative learning environments committed to excellence and continuous improvement***

Cooke, M., Irby D.M., O'Brien B.C. (2010). *Educating Physicians: A Call for Reform of Medical School and Residency*. San Francisco, CA: Jossey-Bass; 2010 The Carnegie Foundation for the Advancement of Teaching.

Hidden Curriculum

- More than transmission of knowledge and skills
- Socialization process
- Norms and values transmitted that undermines the formal message
- Implicitly taught by example
- It is a major problem



Mahood, SC. Medical Education: Beware the hidden curriculum. Canadian Family Physician. September, 2011 vol. 57 no. 9 983-985

Hidden Curriculum

- Causes students to move from being opened-minded to closed-minded
- Move from being intellectually curious to narrowly focused on facts
- From empathy to emotional detachment
- From idealism to cynicism
- From civility and caring to arrogance and irritability

Mahood, SC. Medical Education: Beware the hidden curriculum. Canadian Family Physician. September, 2011 vol. 57 no. 9 983-985

Hidden Curriculum

- **Erodes ethics in medical students**
- **62% of medical students had done unethical behaviors:**
  - **Pretending to examine patients, or making up vitals**
  - **Ignoring contamination**
  - **Obtaining informed consent without knowledge of the procedure**
  - **Withholding results from patients**
  - **Doing unnecessary procedures for experience**

Feudtner C, Christakis DA, Christakis NA. Do clinical clerks suffer ethical erosion? Students' perceptions of their ethical environment and personal development. Acad Med 1994;69(8):670-9.

Need for a Definition

- **Cannot offer feedback on assessment without a commonly-accepted definition of professionalism**
- **Cannot assess something without a model**

Huge Push to Focus on Professionalism in Medical Education

ACGME: New Accreditation System

Josiah Macy Foundation

Arthur Gold Foundation

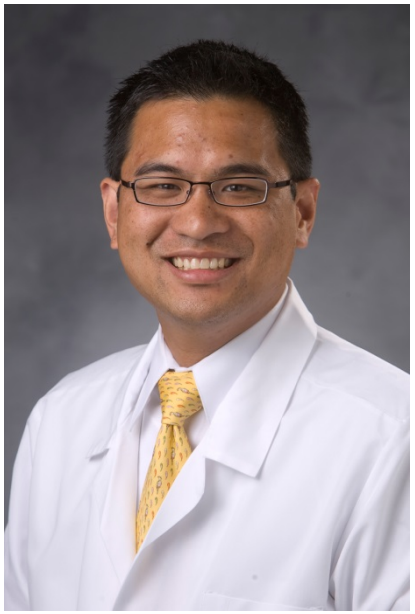
Duke University Medical Center

Focus on Professionalism at Duke University Medical Center

Duke Otolaryngology – Head & Neck Virtues:

- Integrity
- Initiative
- Accountability
- Self-discipline
- Responsibility

Raymond Esclamado, MD



Walter Lee, MD

Leadership Lived Out:

- Professional Intervention

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Lessons Learned

- Can produce positive change
- Culture trumps global change
- Better results moving to UME or sooner
- Requires a commitment to excellence and self-betterment
- Faculty/department chairs are not exempt from intervention

Lack of Professionalism in Medicine

- **Jeopardize Patient Care[1]**
- **Aimless Leadership – opening doors for others to lead[1]**
- **Limits Currency – lifelong learning which leads to mastery of communication, behavioral and attitudinal skills in patient care[1]**
- **Early lapses in professionalism in medical education correlates with lapses later in practice[2]**
- **Loss of key virtues necessary in excellent patient care through improper or inadequate learning environments – those without professionalism focus or strong negative role models**
- **Loss of balance between 'heart' and 'mind' of medicine – humanism vs. cognitive intelligence focus[3]**

1. Doukas, DJ, McCullough, LB, Wear, S., Lehmann, LS, Nixon, LL, Carrese, JA, Shapiro, JF, Green, MJ, Kirch, DG. The Challenge of Promoting Professionalism Through Medical Ethics and Humanities Education . Acad Med. 2013;80:892–898
2. Papadakis, M., Teherani, A., Banach, M., Knettler, T., Rattner, S., Stern, D., Veloski, J., Hodgson, C. (2005). *Disciplinary Action by Medical Boards and Prior Behavior in Medical School.* New England Journal of Medicine; 353:2673-2682.
3. Coulehan J. Viewpoint: Today's professionalism: Engaging the mind but not the heart. Acad Med. 2013;88, No.11:1-6.

Model Built Upon Certain Premises

- **Every Physician is a leader: Self, Patient, Team, Organization/Vocation**
- **Cognitive, Emotional, and Leadership Intelligence can be modified/improved through direct intervention programs**
- ***One's level of professionalism is not so much about a Quotient (number) but is more about balance between the three intelligences***

Defining Professionalism

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Defining Professionalism

PROFESSIONALISM INTELLIGENCE MODEL

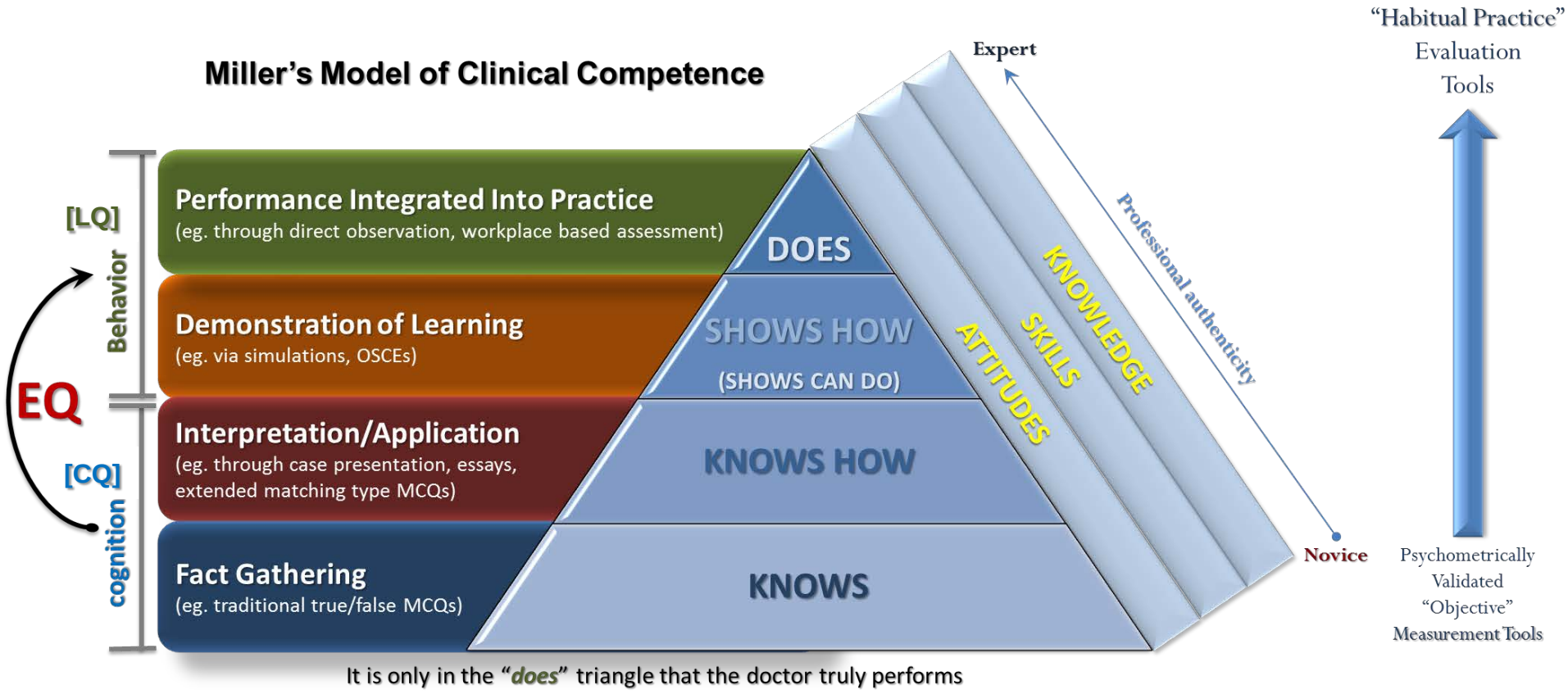
AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Defining Professionalism

Behaviors are conditioned by one's cognitive and emotional intelligences and tempered by a certain set of virtues

Defining Professionalism

Miller's Prism (Pyramid) of Clinical Competence



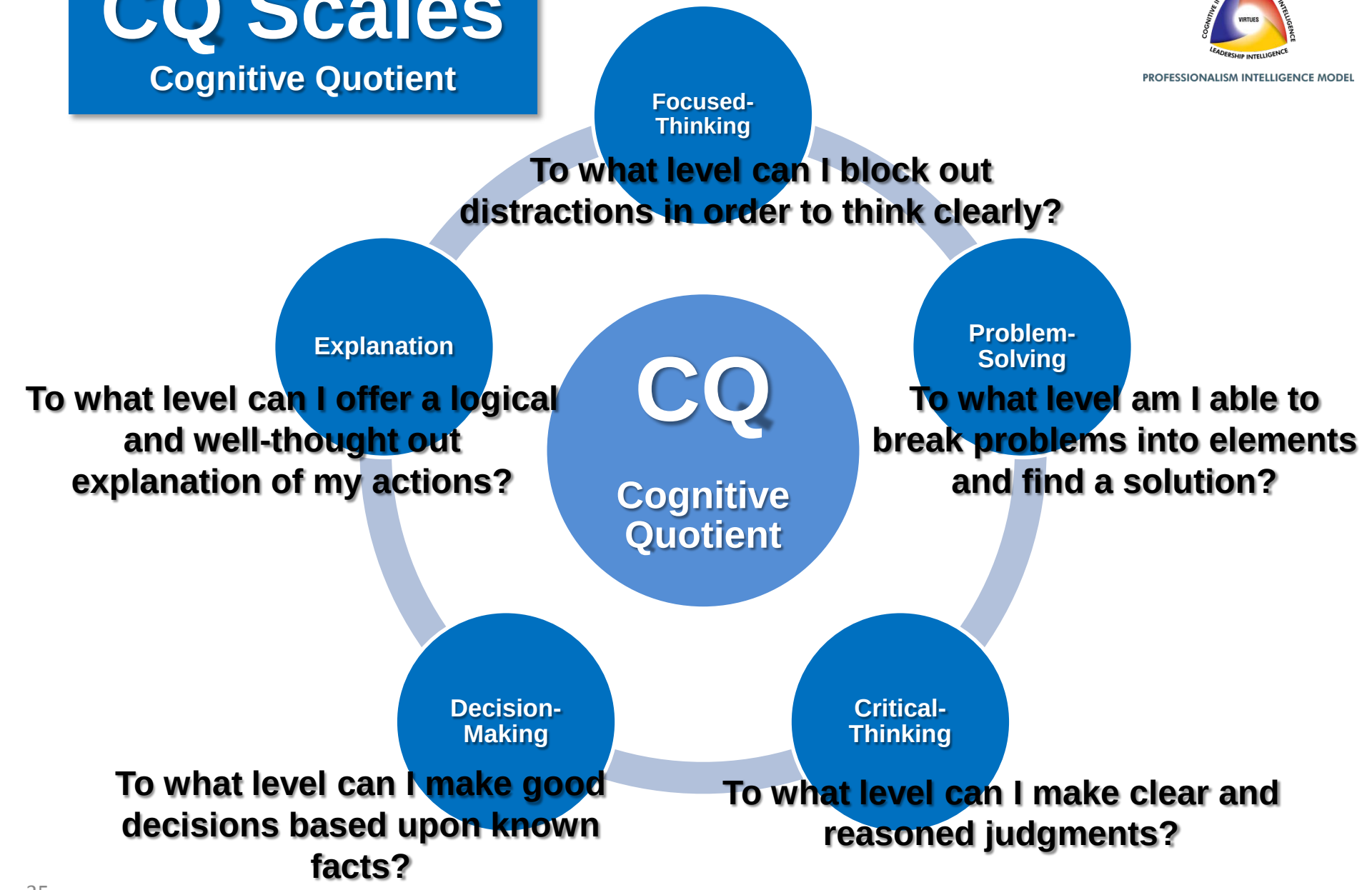
It is only in the "*does*" triangle that the doctor truly performs

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

CQ Scales

Cognitive Quotient

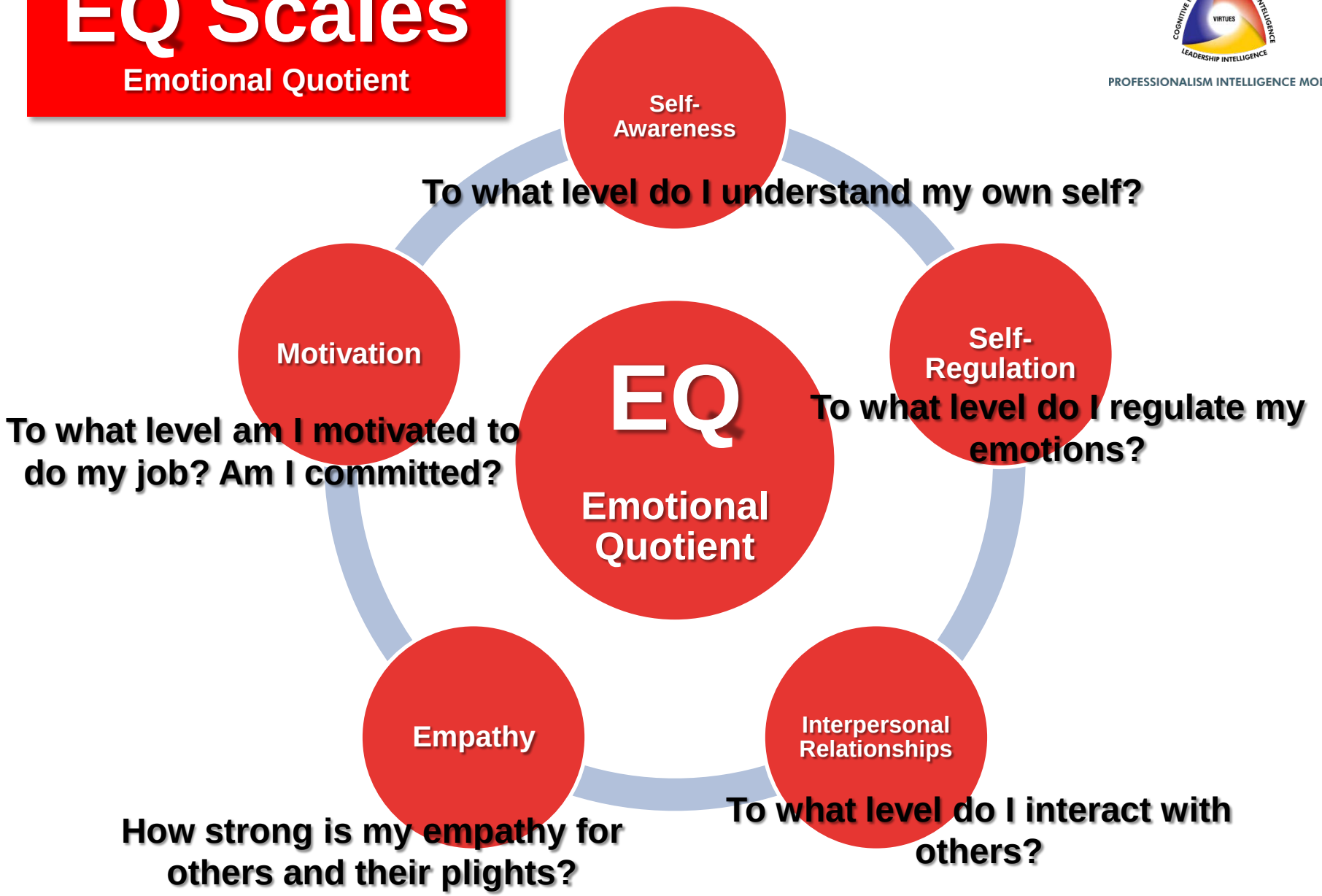
PROFESSIONALISM INTELLIGENCE MODEL



EQ Scales

Emotional Quotient

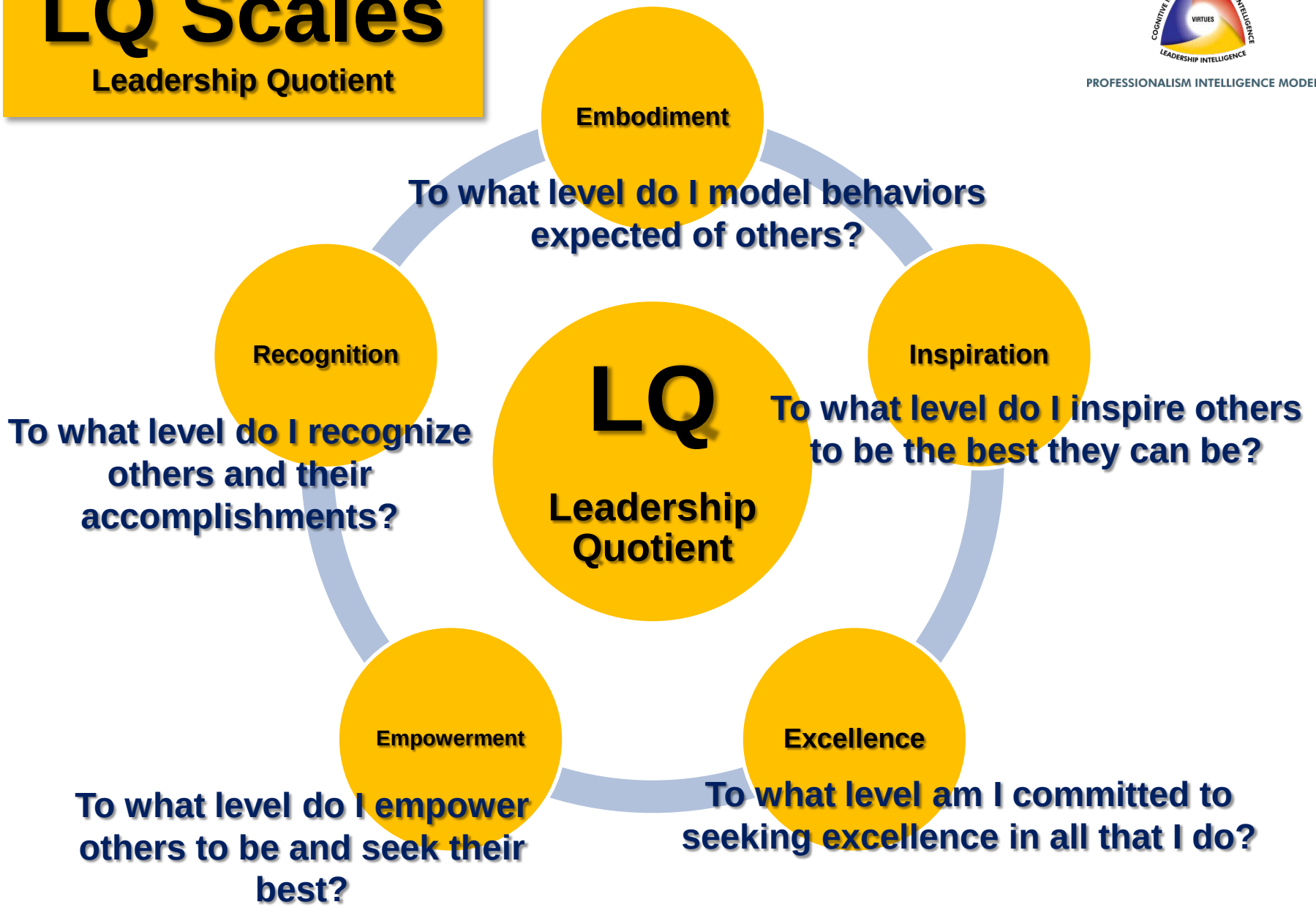
PROFESSIONALISM INTELLIGENCE MODEL



LQ Scales

Leadership Quotient

PROFESSIONALISM INTELLIGENCE MODEL



"A substantial barrier to progress in patient safety is a dysfunctional culture rooted in widespread disrespect."

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 1: The nature and causes of disrespectful behavior by physicians. Academic Medicine. 2012 Jul;87(7):845-852.

Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. A culture of respect, part 2: Creating a culture of respect. Academic Medicine. 2012 Jul;87(7):853-858.

The leader sets the culture…

"When people feel safe, they trust."

-Simon Sinek

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

Action Steps

- Recognize ways in which you can promote professionalism now (at home, work, play)
- Consider developing an internal professionalism intervention program
- Elevate professionalism to one of the top five goals of your GME program
- Consider implementing a progressive professionalism evaluation protocol

Contact Information

Dr. Barry A. Doublestein, President

Leadership Solutions

5303 Holly Brooke Lane

Loganville, GA 30052

- **E-mail: barry@leader-solutions.net**
- **Phone: (678) 894-0051**

AOAO AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS