



Promoting Professionalism in Department Culture

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Background

- In 2018 a gap to promoting professionalism was identified in the orthopaedic surgery department - impacting interactions with patients, education of trainees, and smooth work of teams across the system.
- At same time UMMedical School was addressing professionalism
 - Faculty-wide Dean's Accountability Task Force
 - Universal training in HRO principles
 - Adoption of Vanderbilt PARS/CORS system for reporting unprofessional behavior

Program Objectives

- Using orthopaedic surgery as a pilot, we aim to create a helpful playbook for promoting professionalism that can be used at other departments and centers.
- Devise a set of professional presentation expectations about grand rounds to distribute to visitors and internal speakers. This can be shared with other departments to fill the identified gap.

Methods

- Obtain buy-in from leaders in dept.
- Partner w/medical school/clinical affairs to
 - Follow risk report data
 - Tools for faculty professionalism improvement
 - Provide access to wellness/resiliency resources
- Dept professionalism committee forms – start with faculty
- Provide literature, gather best practices
- Set professionalism expectations in committee
- Communicate expectations to faculty
- Measures tracked before and after with desired outcomes
 - Risk reports on professionalism decreased
 - Attendance tracked and improved
 - Faculty/staff engagement surveys improved
 - Clinical metrics improved
 - Service reporting by faculty

Results

- Committee formed.
- Expectations generated
 - Mandatory learnings complete
 - Effort certifications completed
 - Reporting COI
 - Attending expected meetings
 - Completion of trainee evals
 - Completion of documentation
 - Timely consultation
 - Participation in achieving clinical metrics
- Attendance being tracked
- Communication on expectations rollout FY21 and FY22
 - Tracking discussed on annual evals and expectations reinforced
- Surveys put on hold for COVID
- Clinical metric scorecards created and reviewed with each faculty
- Service measured by individual reporting
- Professionalism, ethics, leadership, wellness grand rounds begin in FY21 and continue in FY22
- Risk reporting system was put on hold for COVID

Discussion

- Leadership buy-in unanimous
- Extensive resources invested across system
- Risk report tracking has just restarted
- We expect a decrease in reports while system stopped and an increase due to the intro of high reliability organization principles

Next Steps

- Restart analysis of risk reports
- Continue grand rounds on ethics, professionalism, leadership, wellness
- Exemplar awards
- Consider ineligibility for certain incentives if not meeting minimums on documentation/attendance
- Assemble timeline, milestones, case studies for sharing

Collaborators

- Michigan Medicine/UM Medical School
- Dr. Marie Lozon – Chief of Clinical Affairs
 - Keith Gran – Chief Patient Experience Officer
 - Dr. Brian Zink – Interim Exec Dean Med Affairs
 - Dr. Asheesh Bedi – Divis Chief Sports Surgery

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