

Faculty Professionalism Concerns: A Framework for Standard Process

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Background

- Unprofessional or disruptive behavior is common in healthcare, with 77% of respondents in one large survey having witnessed such behavior in physicians.(1)
- Most leaders in healthcare deal with unprofessional faculty behavior at some point but many feel uncomfortable with the process.
- At my institution there are varied approaches to dealing with behavior issues ranging from ignoring to termination.
- To improve physician engagement, we need early, progressive, and educational interventions regarding behavior issues.

Purpose / Objectives

- Create structured expectations and progressive steps that are standardized.
- Offer team based support to leaders dealing with disruptive behavior that integrates appropriate documentation and input from leaders in key areas like legal and human resources (HR).
- Create a confidential means of sharing and storing information so it is available when needed.

Process

- Reviewed literature about successful programs and discussed challenges with current process during leadership interviews.
- Reviewed current medical staff policies and regulations.
- New professionalism policies reviewed with key leaders and received feedback.

Results

- Formalized the Faculty Matters committee and educated about its purpose.
- Implemented a small committee for the intake process.
- Implemented new medical staff policy and manual that clearly outlines progressive steps and templates for all activities.
- Formalized the writing and use of performance improvement plans.
- Realized the need for training for interventions, including use of coaching cohorts.

Concern raised to Chief Medical Officer, Chair, or HR Additional Review Required Faculty Matters (In conjunction with Department Chair / Institute Director) Interventions A. no issue B. Educational letter, providing counsel C. Collegial intervention D. Performance improvement plan for

E. Refer to Medical Executive

Medical Executive

Committee (MEC)

Discussion

- There was concern that standardization would reduce autonomy of Department Chairs to manage physician behavior.
- Perception that "nothing ever happens" to offending physicians and that the outcome is never known to the reporting individual.
- Leaders are more comfortable with a structured process. Tools to create accountability and graded approach is educational and less punitive.
- Faculty Matters team as a resource is appreciated.
- Many behavior concerns are both professional and clinical.

Summary / Conclusions

- A standard, progressive approach to physician behavior issues is desirable and should lead to improved outcomes.
- A multi-disciplinary team including physician leaders,
 College of Medicine leaders, HR and legal is ideal.
- Clear documentation and confidentiality issues are paramount.

Next steps

- Educate the entire staff, use the process and find the opportunity areas.
- Expand coaching cohorts.
- Plan additional education and training for peer interventions.
- Measure improvement in engagement survey.

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