

I, We, They – Self-, Team-, and Patient- Leadership Education in GME

Presented By:

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President – Leadership Solutions

Partners in Medical Education, Inc.

Your Presenter.....




Barry A. Doublestein, DSL

- President of Leadership Solutions
- President & COO of the Osteopathic Institute of the South since 1989
- Passionate about physician-professionalism
- Certified AOA Osteopathic Graduate Medical Education Consultant



Agenda


- Defining Professional Formation
- Discuss why it is important in GME
- Discuss self-leadership as the foundational element in Professional Formation
- Discuss team-leadership and the principles surrounding effective practice
- Discuss patient-leadership that results in excellent care



**Are you aware of the
ACGME requirements
for professional
formation?**



**Do you have an institutional
plan to meet these
standards?**



**Are you satisfied that this
plan is effective and
complete in what it is
attempting to assess?**



Why Profession Formation?

Medical Education Goals

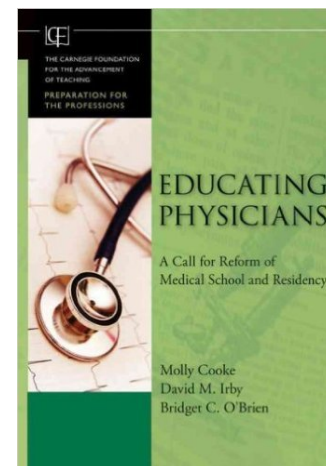
Flexner -- 1910:

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



Flexner 2 -- 2010

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



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*

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Cooke, M., Irby, D., O'Brien, BC. (2010). *Educating Physicians: A Call for Reform of Medical School and Residency*. Carnegie Foundation for the Advancement of Teaching.

Huge Push to Focus on Professionalism in Medical Education



Thomas Nasca, MD
CEO, ACGME



AAMC

Darrell Kirch, MD
President & CEO,
AAMC





Defining Professional Formation

Narrowing the Focus

Professional Formation

- *Traits, Traditions, Trappings, and Mores of being a physician*



Professional Competency

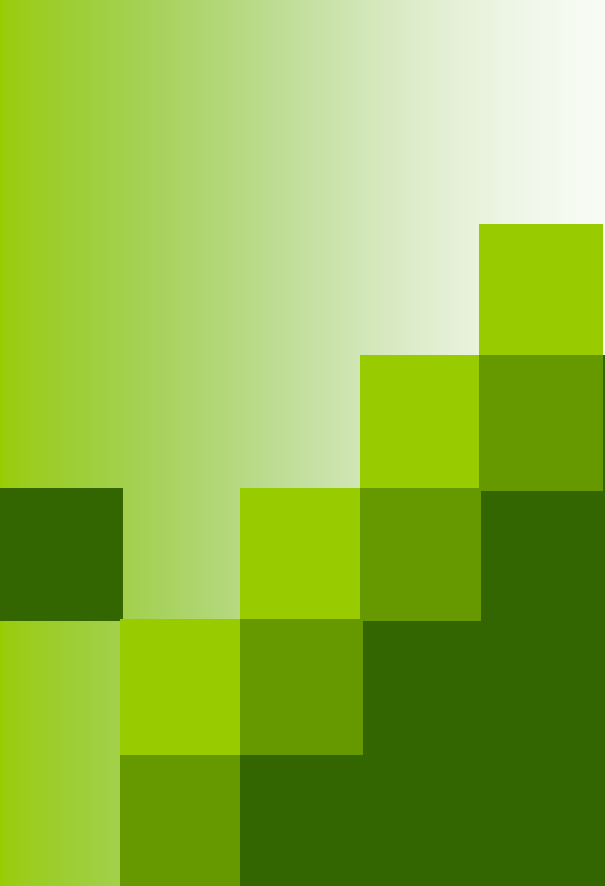
- How these Traits, Traditions, Trappings, and Mores are carried out in the patient/team encounter
- Personalized



Professionalism

- **Adept professionals – Think, Feel, and Act in certain ways...**

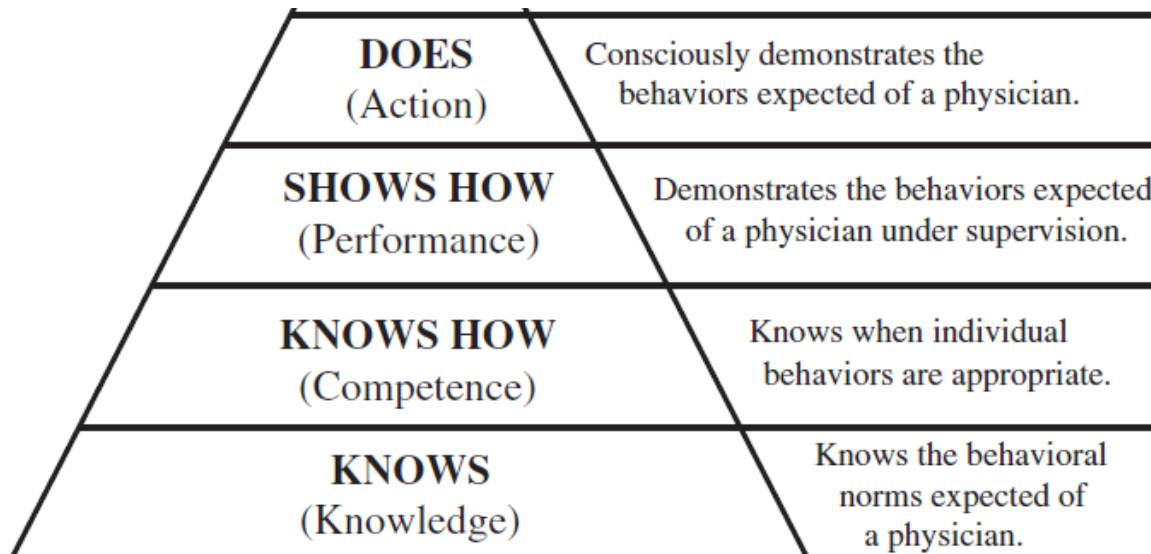




Why Should This Matter to Us?

Miller's Model of Clinical Competence -

Becoming



Cruess, RL, Cruess, SR, Steinert, Y. *Amending Miller's Pyramid to Include Professional Identity Formation*. Academic Med. Oct. 2015.

Patient Safety Issue

- **Professional lapses in medical school or residency programs correlate with lapses later in practice**
- **Earlier intervention mitigates the issues**

Papadakis, M., Teherani, A., Banach, M., Knettler, T., Rattner, S., Stern, D., et al. (2005). *Disciplinary action by medical boards and prior behavior in medical school*. NEJM, 353(25), 2673-2682.

Patient Safety Issue

- **Patients are more likely to comply with physician orders if the physician demonstrates an understanding of patient's condition**



Kim, SS, Kaplowitz, S., Johnston, MV. *The effects of physician empathy on patient satisfaction and compliance*. Eval Health Prof., 2004 Sep;27(3).

Patient Safety Issue

- Physicians with **higher levels of Emotional Intelligence** experience **less stress, cynicism, and burnout** – things that directly affect patient's safety.



Gleichgerrcht, E., Decety, J. *Empathy in Clinical Practice: How Individual Dispositions, Gender, and Experience Moderate Empathic Concern, Burnout, and Emotional Distress in Physicians*. PLoS One. 2013; 8(4): e61526.

Patient Safety Issue

- **Rudeness by fellow team members cause cognition impairment that directly endangers patients.**



Riskin, A., Erez, A., Foulk, TA, Kugleman, A., Gover, A., Shoris, I., Riskin, KS., Bamberger, PA. *The Impact of Rudeness on Medical Team Performance: A Randomized Trial.* Pediatrics. Sept. 2015 Vol. 136(3).

Patient-centered Care

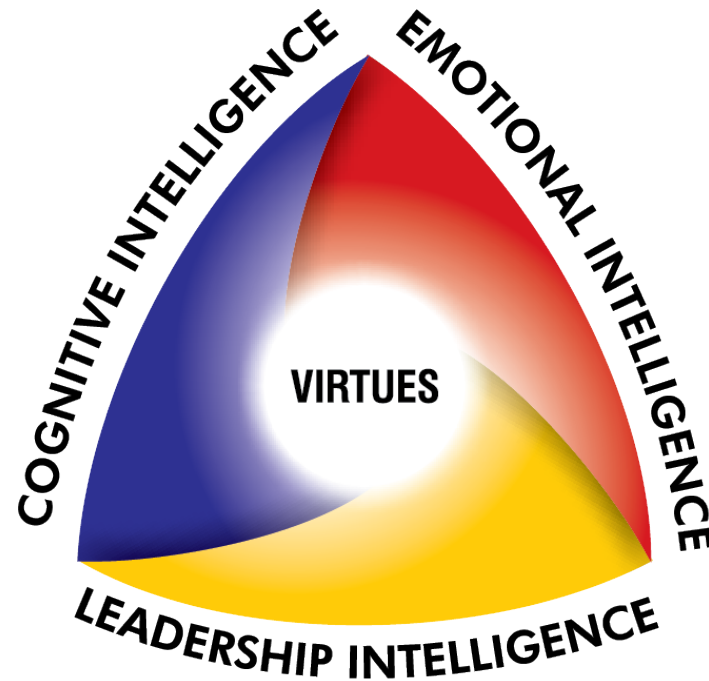
- **Physicians need to be aware of the skills involved in patient-centered medicine.**





Professional Formation is Individual and Distinct

Defining Professionalism



PROFESSIONALISM INTELLIGENCE MODEL



Self-Leadership

“I”



Characteristics of Admired Leaders

- They have been mentored – Have you been mentored?
- Humble – submitting to a mentor
- Committed to self-improvement
- Honest
- Consistent
- Competent
- Able to accept responsibility
- Able to communicate

Kouzes, J., Posner, B. (2010). *The Truth About Leadership*. San Francisco, CA: Jossey-Bass



Cognitive Skills



Cognitive Skills

- Able to break problems into workable parts
- Seek counsel from competent others
- Draw conclusions on basis of gathered data
- Explain oneself and their actions



How Do We Do This?

- Case studies – M&M
- Open atmosphere of inquiry
- Considering alternative ways to view problem – asking Why?
- Make this process habitual through practice



Five Elements of Practice

- Designed to specifically improve performance
- Has to be repeated a lot
- Feedback must be continuously available
- It is highly demanding mentally
- It isn't that much fun



Emotional Skills



Emotional Skills

- Foundational element – Why? What is one's motivation for doing what they are doing?
- Must know oneself – self-assessment
- Must be dedicated to self-betterment
- Must be able to control oneself
- Must consider others as important as they
- Must have compassion and empathy

Unprofessional Behaviors

Maxine Papadakis, MD



- **Irresponsibility – to patients and duty**
- **Impaired relationships with patients**
- **Impaired team relationships**
- **Diminished capacity for self-improvement**

Papadakis, M. (2015). Medical Professionalism Best Practices. Alpha Omega Alpha Honor Medical Society. Menlo Park, CA.



Team-Leadership

“We”



Work Group vs. Team

- Teams share:
 - Collective responsibility
 - Selflessness
 - Shared Sacrifices
 - Common Objectives
 - Rewards



Team Principles

Building Trust

Lencioni, P. (2012). The Advantage: Why Organizational Health Trumps Everything Else in Business. San Francisco, CA: Jossey-Bass.



Team Principles

Mastering Conflict

Lencioni, P. (2012). The Advantage: Why Organizational Health Trumps Everything Else in Business. San Francisco, CA: Jossey-Bass.



Team Principles

Achieving Commitment

Lencioni, P. (2012). The Advantage: Why Organizational Health Trumps Everything Else in Business. San Francisco, CA: Jossey-Bass.



Team Principles

Embracing Accountability

Lencioni, P. (2012). The Advantage: Why Organizational Health Trumps Everything Else in Business. San Francisco, CA: Jossey-Bass.



Team Principles

Focusing on Results

Lencioni, P. (2012). The Advantage: Why Organizational Health Trumps Everything Else in Business. San Francisco, CA: Jossey-Bass.



Patient-Leadership “They”



Simplicity

- Physicians and Patients share:
 - Collective responsibility
 - Selflessness
 - Shared Sacrifices
 - Common Objectives
 - Rewards



Take Action

Take Action

Do a Q-sort – shared virtues:

- This is a one-time assessment that is open to various members of the GME program
- It ranks virtues
- Identifies agreed-upon virtues

Take Action

Improve interviewing/on-boarding process:

- Use of ethical-dilemma scenarios
- Require applicants to take the Professionalism Quotient Inventory 360
- Directed letters of recommendation



Take Action

Outline shared values:

- Identify shared values
- Publicize shared values
- Reinforce shared values

Take Action

Practice open feedback:

- Program commitment to providing feedback
- Practice feedback
 - Oral
 - M&M
 - Formal -- written

Take Action

Welcome conflict:

- Encourage open/constructive conflict
- Radical: create it if it does not happen naturally
- Commit to 'appropriate method' of confrontation

A decorative graphic in the top-left corner consisting of a grid of squares in various shades of green. The squares are arranged in a pattern that tapers off to the right and bottom, with some squares missing, creating a stepped effect.

Questions?

Partners' Online Education



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Refining the Annual Program Evaluation for Self-Study Visits

Wednesday, March 2, 2016
12:00pm – 1:00pm EST

“Ask Partners” – Spring Freebie

Thursday, March 24, 2016
12:00pm – 1:00pm EST

Self-Study: Who, What, Why & How?

Tuesday, April 12, 2016
12:00pm – 1:00pm EST

GME Check-up: Is Your GMEC Meeting Its New Responsibilities

Thursday, April 21, 2016
12:00pm – 1:00pm EST

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