When Knowledge Isn’t Enough: Practical Exercises to Remediate Professionalism, Communication, and Clinical Reasoning

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Nothing to Disclose

The presenters have documented that:

- They have no relevant financial relationships to disclose.
- They have no conflicts of interest to resolve.
- Their presentation will not involve discussion of unapproved or off-label, experimental or investigational use.
Ok, You’re Right...We Do Have Something To Disclose

We love problem learners!
Introductions

- Who’s in the audience?
- How did you choose to come to this session?
- What is your greatest fear associated with remediation?
Session Objectives

- Apply principles of behavior change theory, deliberate practice and reflection in exercises to promote and remediate professionalism.
- Expand skills for helping learners refine communication with families and health providers.
- Gain practice using tools and meta-cognitive strategies for addressing problems with clinical reasoning.
Overview of Workshop

- Identification of Problem Learners
- Diagnosis of Problem Learners
- Creating a Remediation Plan
- Clinical Reasoning
  - Key Concepts
  - Small Groups Exercises
- Professionalism/Communication
  - Key Concepts
  - Small Groups Exercises
- Legal and Financial Aspects
- Introduction of Toolbox
- Audience Reflection
Prevention

PRIMARY PREVENTION:
- Orient the learner well.
- Set clear expectations and goals.
- Determine the learner’s goals and expectations.
- Reassess mid-course.

SECONDARY PREVENTION:
- Early detection.
- Pay attention to your hunches/clues.
- Initiate SOAP early.
- Give specific feedback early and monitor closely.

TERTIARY PREVENTION:
- Manage a problem to minimize impact.
- Seek help early.
- Don’t be a martyr.
- Do not pass a learner who has not earned it.

SOAP Approach

- Subjective: use experience and opinion to gain an individualized impression of the learner’s difficulty
- Objective: document specific examples of the problem
- Assessment: differential diagnosis
- Plan: develop and implement a plan to address the problem (plans may include: gathering more data, intervention, getting help)

Identifying Problem Learners
Diagnosing Problem Learners
Types of Learner Difficulties
(by Frequency and Degree of Difficulty to Fix)

Frequent & Difficult to manage:
- Bright, but poor interpersonal skills
- Excessively shy, nonassertive

Frequent & Less difficult to manage:
- Poor integration skills
- Overeager
- Cannot focus on what is important
- Disorganized
- Disinterested
- Poor fund of knowledge

Not frequent, but Difficult to manage:
- Cannot be trusted
- Psychiatric problem
- Substance abuse problem
- “Con artist” (manipulative)

Not frequent & Less difficult to manage:
- Hostile, Rude
- Too casual and informal
- Avoids work
- Does not measure up intellectually
- Avoids patient contact
- Does not show up
- Challenges everything
- “All thumbs”

Adapted from Hunt et al, Tonesk and Buchanan, and Metheny WP and Carline
Types of Learner Difficulties

- Cognitive Problems
- Behavior/Professionalism Problems
- Substance Abuse
- Mental Illness
- Workload and Stress Problems

Resources for Diagnosis

- Learner Self-Diagnoses
- Remediator
- Incorporating Other Educators
- Learning Specialists
- Mental Health Professionals
- Physician Wellness Committees
Creating Remediation Plans

- Gather written examples of learner’s deficits
  - Helpful to have multiple examples from multiple sources so it doesn’t become a case of “he says/she says”, but rather can show a pattern of how the learner is perceived
  - Types of evaluation:
    - Multi-source feedback/360-degree evaluations can be very helpful
    - Critical Incident Reports (e.g., Praise/Early Concern Card)
    - Professionalism Mini-Evaluation Exercise (P-MEX)
Creating Remediation Plans cont

1st Remediation Review Meeting

- Review evaluations with the learner
- Gather his/her ideas regarding who a good advocate and coach would be
Creating Remediation Plans cont

Create a remediation team

- **Advocate**: often his/her advisor
  - Role: Attend progress meetings and serve as an advocate for the learner

- **Coach (“neutral” mentor)**
  - Role: Guide the learner through remediation exercises, may perform some evaluation

- **Director(s):** often the program/clerkship director
  - Role: Final “decision-maker”
  - Note: If possible, this person should **not** do front-line evaluations

- **Front-line evaluators (multiple)**
  - Role: Provide input on learner performance/application of goals/skills
Creating Remediation Plans cont

Create a remediation plan

- Initial planning:
  - Decide which remediation exercises to use
  - Discuss plans with another educator initially and regularly to ensure more than one educator in agreement with plan
  - Contact GME Office/Medical School/legal department as appropriate
Creating Remediation Plans cont

Create a remediation plan continued

- Document domains of concern (diagnose problem learner)
- Document goals or expectations, especially *minimal expectations*
- Document how to achieve goals (# of sessions, content, expectations/homework)
- Document evidence of achievement
- Document action if remediation plan is not achieved
- Have all members of remediation team sign the contract

Create a calendar that details timing of coaching sessions and remediation review sessions
Creating Remediation Plans cont

- **Document**
  - Coaching sessions and progress
  - Interval progress review meetings with Director, Coach, Advocate, and Learner
  - Any meetings held about the learner in his/her absence
  - Record time spent
  - Record content of meetings (your best recollection, as detailed as possible) and have attendees sign the minutes
Creating Remediation Plans cont

- Note: It is controversial whether or not to share information with upcoming faculty
  - Able to help coach vs. unfair bias
  - Review policies in place at your own institution before “passing information forward”
  - Consider sharing information with lead supervisors only so that evaluators’ schedules can be lightened/adjusted accordingly while keeping information from front-line evaluators to ensure evaluations are as bias-free as possible