



Professionalism: Beyond a Hidden Curriculum

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Learning Objectives

- Recognize specific competencies of professionalism can be taught
- Describe how knowledge, attitudes, and skills of professionalism can be assessed.
- Realize that professional identity as lifelong adaptive learners, scientist physicians, system citizens, and patient-centered physicians is a developmental process.

When I say professionalism, you say:



Other ideas?
Type in the chat or
raise your hand.



Historical Context

1754 BC- First oath of medical ethics, The Code of Hammurabi

5th Century BC- Hippocrates

In 1957 Merton stated :

- The task of medical education is to “shape the novice into the effective practitioner of medicine, to give him (her, them) the best available knowledge and skills, and to provide him (her/them) with a professional identity so that he (she/they) comes to **think, act, and feel** like a physician”.



More Historical Context

- 1990's-Behavioral Model of Professionalism-**performance**
- 2009-A professional presence(Hafferty)-**what one is** rather than what one does
- 2014-Identity Model(Richard and Sylvia Cruess)-**values, developmental process, and being socialized**
- Validation of the importance of assessing professionalism
 - LCME
 - ACGME



Hidden Curriculum: Practical Definitions

- Seeing in the real world (clinical rotations) how people behave and what is valued as compared to what is taught in the classroom or even the OSCE Suites.
- A secret code of professionalism and for developing a professional identity.
- Knowing the real playbook.
- It's how to be accepted into a professional fraternity.

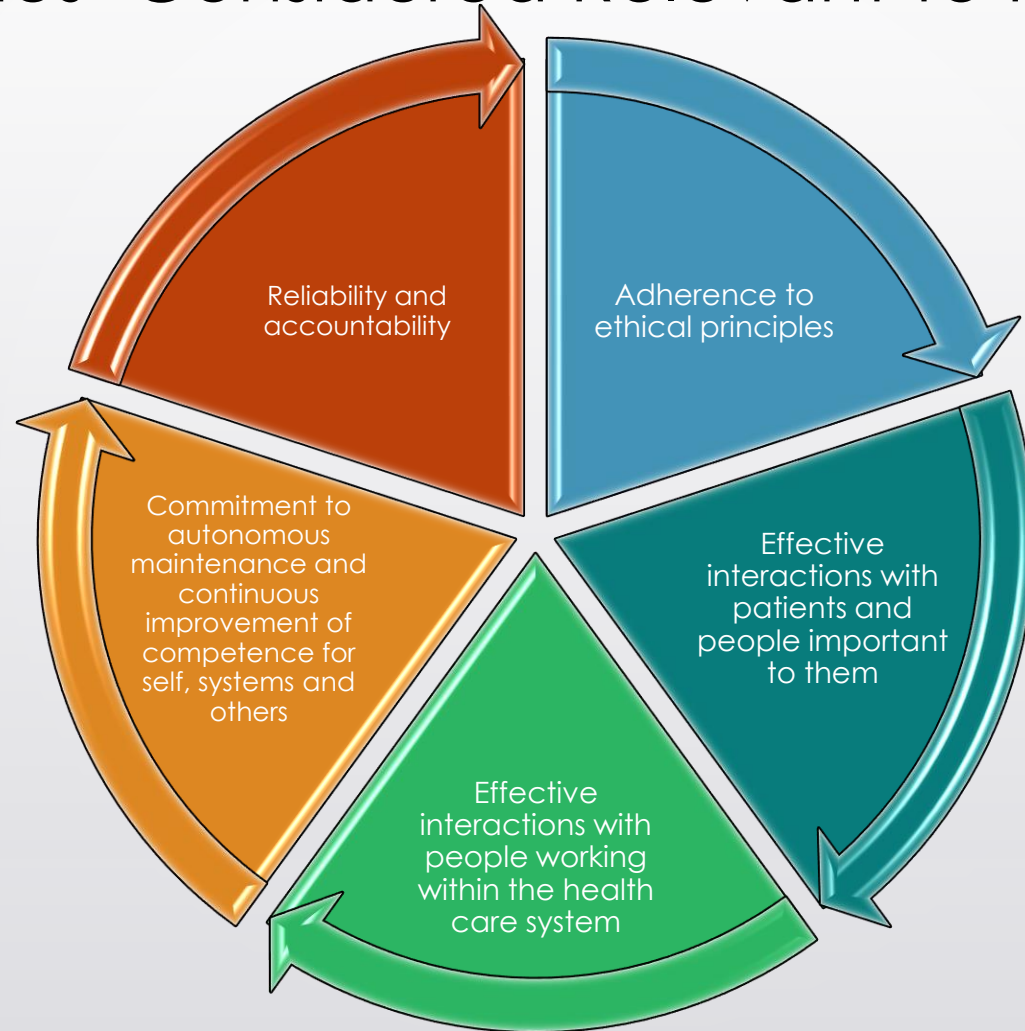
Other more formal ideas? Type in the chat or raise your hand.



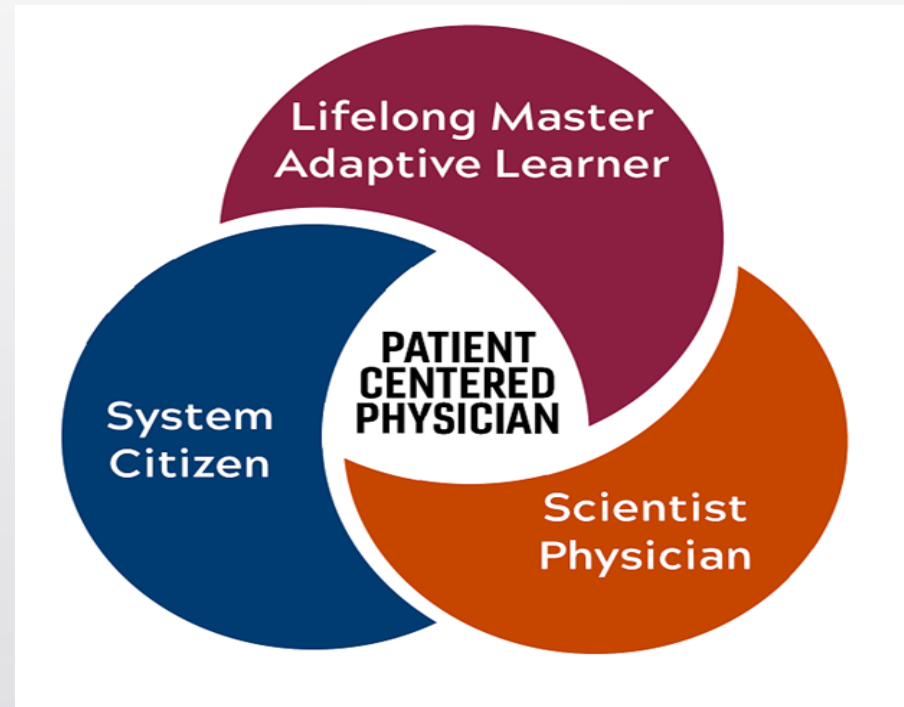
Hidden Curriculum: Case Example

- I can't believe this place. After this morning's Surgical Grand Rounds about work-life balance and well-being, I figured I would ask my new attending about days off. I need to attend a wedding this rotation. I showed my schedule with weekends that I need to be off to the attending. He immediately asked me if I realized how demanding surgery is as a specialty. He even encouraged me to rethink my specialty choice.
- Now I am worried about my grade and getting a letter of recommendation. What's up with the disconnect with what is said and what is done?

Competencies Considered Relevant to Professionalism



VTCSOM's Professional Identities





Our desired outcomes of Professional Identity Formation (PIF)

- Physician who possesses skills and qualities related to learning, adaptability, ability to thrive in changing environments, and ongoing personal and professional development
- Physician leader who uses a systems thinking mindset in his/her professional role to develop/use the knowledge and skills necessary to contribute to the holistic needs of patients, populations of patients, and health systems to achieve the best outcomes.
- Physician who has the ability to integrate clinical medicine and scientific inquiry and research, bridging the gap between bench sciences and direct patient care.



Attributes of Professionalism: VTC SOM Student Handbook

- Commitment to Engaged Learning
- Compassion
- Conscientiousness
- Respect
- Self-awareness
- Self-care
- Sense of Duty
- Social responsibility
- Teamwork
- Trustworthiness



Competencies of Professionalism

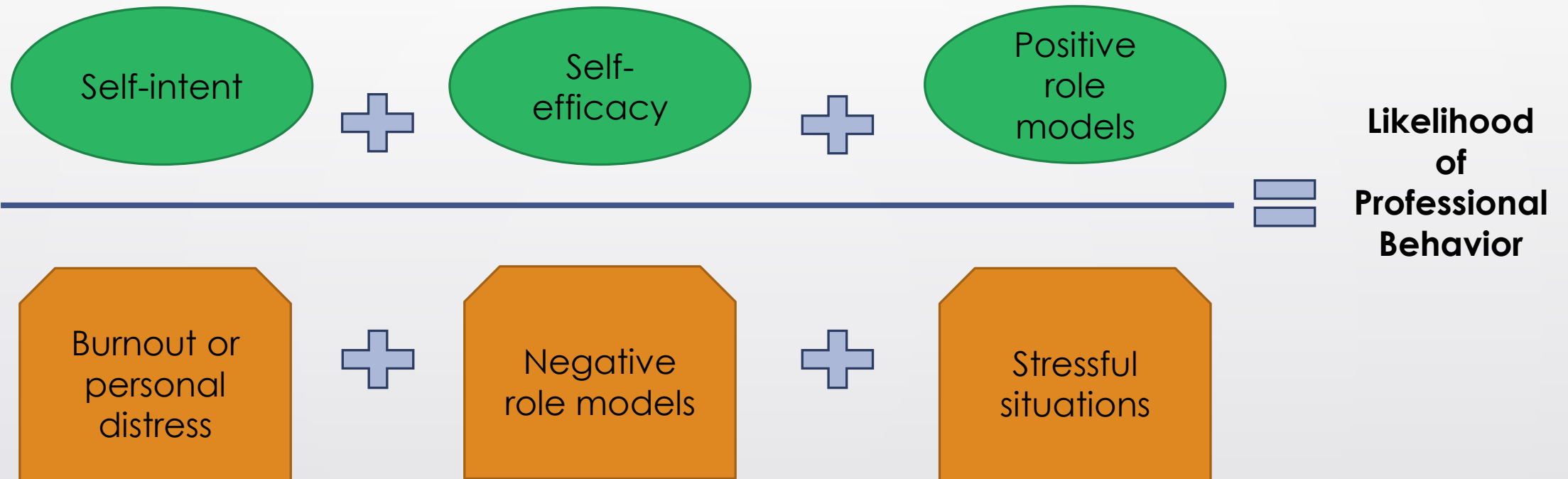
How do we teach the attributes of professionalism?

- Knowing the concept of the hidden curriculum we must make the words and values real and demonstrable in actions. We must role model these behaviors and correct our actions when we deviate off course.
- Patient case examples
- Peer input
- Narrative reflections of what was done well and what could be done better



Key Points on Professionalism Development

- Demonstrating professionalism depends on multiple competencies including knowledge, attitudes, and skills necessary to navigate complex situations.
- The ability to reflect, analyze options, and act professionally in challenging situations can be developed throughout a career: from medical student, to resident, to practicing physician.
- Professional resilience, the ability to handle complex situations, can be enhanced by addressing issues in both the work and personal environments.
- Teams can develop a culture to support and foster the ability of the team members to manage professionalism challenges.



Professionalism lapses are common in daily practice and can be viewed as opportunities for learning, rather than requiring punishment.



Societal Context

- Social media – posts reflect the individual, the institution, and the profession. Learners (others) may not consider the consequences
- Generational - experiences, norms, and worldviews
- Example- Boomers(formal in title, you don't sound that sick, what are you sick with?), Gen X (I am so understaffed but we will make it work), Millennials(I am sorry to hear that, are you actually going to the concert? I have you covered and be sure to set your settings on private), Gen Z (not the vibe, I will send food)



Professionalism Breeches


National Survey of Internal Medicine Clerkship Directors

- **Four main categories** of unprofessional behavior by medical students on the internal medicine clerkship
- Involvement (timeliness, engagement...)
- Integrity (following rules, teamwork...)
- Communication (verbal and nonverbal)
- Introspection (self-reflection, response to feedback...)



VTCSOM: Professionalism Locales

- Courses, content, activities
 - Orientations
 - Code of Conduct
 - Class Guiding Principles
 - Virginia Tech Principles of Community
 - Role modeling in LACE
 - “Recognitions” Gold Humanism Honor Society, ?Inclusion in letters of recommendation, MSPE, honors for clerkships
 - “Regulations” student government, LEAC, MSPPC, Honor Code, Safe Watch



VTCSOM Curriculum and Activities: Room to Expand

- New course being developed - Profession of Medicine and Identities (POMI)
- Peer assessments with feedback
- Expansion of formal recognitions
- Consideration of peer professionalism award
- More visibility of student organizations with professionalism and humanism as core values



What and how might we assess professionalism?

- The deficit framework perpetuates a rigid dichotomous characterization of behavior as either unprofessional or professional rather than a spectrum of behaviors.
- In clinical science, basic science, research, and health systems and interprofessional practice we expect and accept knowledge and skill acquisition as continuous and cumulative.
- Why not so for professionalism? Why is it more of a switch of on or off?

Assessment: Harmonized Milestones

	Unsatisfactory	Novice	Practicing	Met Milestones
<u>Accountability/Conscientiousness</u>				
Conscientious Behaviors				
Attendance				
Timely completions of assignments				
Attention to course expectations and details				
<u>Interprofessional and Team Communication</u>				
Teaming				
Language values team members				
Communication				
Communicates information effectively with team				
Solicits feedback on performance with team				
Uses active listening to adapt communication style to fit team needs				
Communicates concerns and provides feedback to peers and learners				
<u>Commitment to Personal Growth and Reflective Practice</u>				
Reflective Practice				
Identifies the factors which contribute to gap(s) between expectations and actual performance				

Thank you: Dr. Jed Gonzalo, Dr. Brock Mutcherson, and the Medical Education Team

Professional Identity is defined as:

The integration of knowledge, skills, values, and behaviors of a profession with one's preexisting identity and values.





Professionalism and Professional Identity Formation

Three Theoretical Perspectives:

- Individualist
- Social-contextual
- Both individualist and social-contextual



Professional Identity: Individualist

- **Reflective writing and narratives**
- Often focused on identity-challenging events such as
 - Complex or ambiguous circumstances
 - Rites of passage activities
 - Hard conversations in clinical care



Professional Identity: Societal Context

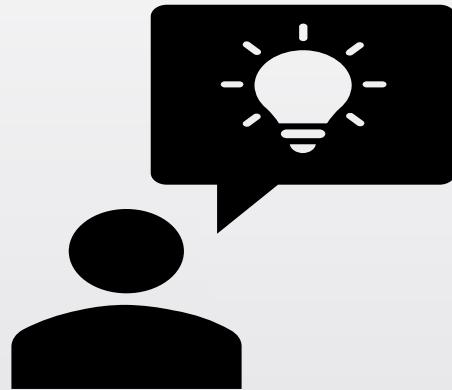
- Education interventions frame PIF through a **social group** or interactions
 - Interprofessional teams
 - Students partnered with patients to influence patient-centered and patient-valued approach
 - Communities of practice which will have their own professional and moral values and code of ethics




Professional Identity: Individualist and Societal Context

- **Active process** which incorporates the individual within a social/team/group context-different roles over time
- Reflective and narrative writing **across longitudinal experiences**

Professionalism and Professional Identity Formation: Does early behavior matter?




What do you think?
Type in the chat or
raise your hand.



Professionalism and Professional Identity: Does early behavior matter?


- What predicts later behavioral issues?
- Wake Forest study-Preclinical indicators for poor professionalism evaluations during the clinical years
 - Negative peer assessments during preclinical years
 - Multiple unexcused absences



Professionalism and Professional Identity: Does early behavior matter?

- Peer assessment adjective choices in the Wake Forest study

Positive Peer Assessments			Negative Peer Assessments		
Accountable	Fair	Organized	Apathetic	Immature	Pessimistic
Altruistic	Honest	Reliable	Argumentative	Lazy	Prejudiced
Caring	Introspective	Respectful	Arrogant	Loner	Sarcastic
Cheerful	Kind	Tactful	Competitive	Manipulative	Self-centered
Conscientious	Nurturing	Wise	Disrespectful	Moody	Unreliable
Empathetic	Open Minded		Entitled	Overbearing	Unstable



Professionalism and Professional Identity: Does early behavior matter?

- UCSF Alumni study 6330 alums (1943-1989) resulted in 70 cases
- Medical Board disciplinary action
 - 95% of all board actions were for professionalism issues
 - Students with unprofessionalism comments in evaluations were more than 2 times as likely to be disciplined than those without such comments
 - Grades and standardized test scores did not predict disciplinary action



Conclusions

- Defining, teaching, and assessing professionalism has an extensive history
- Be aware of the hidden curriculum and intentionally role model excellence
- Teaching professionalism should incorporate content for the acquisition of knowledge and the development through practice and observation of skills and attitudes
- Professionalism is a continuum, not an on off dichotomy
- Include development and set expectations rather than identify/punish a deficit



Questions or Comments



Thank you!