

# Patient and Community Roles in Transdisciplinary Professionalism

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# Case Study - 1

## Patient and Community

- You are a runner training for a marathon. When you start to increase your mileage significantly, you develop pain in your right knee that forces you to stop. You go to an orthopedic clinic to have it checked-out.
- While filling out forms in the waiting room, you are approached by a technician to receive an x-ray of your knee prior to seeing the orthopedist. You refuse the x-ray knowing nothing in your knee is broken.
- You are then approached by the head of the clinic who asks why you are refusing the x-ray and whether you understand the potential ramifications of such a refusal, including that your insurance might not cover the visit and that you will not be able to get an MRI without the x-ray, should one be needed.

# Case Study – 1 (cont'd)

- Given the pressure, you decide to have the x-ray. When getting the x-ray the technician comments that she wished more people would question this practice.
  - **Discuss your power as a patient and how confirmation of your suspicions affects your opinion of the health care system**

# Case Study - 2

## Patient and Community

- You live in a poor, peri-urban neighborhood that has a large number of persons receiving public assistance and Medicaid. In your community, there are much higher than national average rates of illiteracy, alcohol abuse, and teenage pregnancies; crime is a major issue; and more than 40% of the members of your community are obese, with many suffering from diabetes, heart disease and depression.
- Although you are not aware of it, an effort is underway to control Medicaid spending in your state, and a pilot study is being undertaken in your neighborhood.

# Case Study – 2 (cont'd)

## Patient and Community

- Your neighborhood has been the target for countless health projects. Most of them are pretty good for some of the community members, but all the interventions are short-lived and none of them have been sustained beyond a year or so. The community is a bit fatigued by the short-term interventions.
- **What is your reaction when you hear your neighborhood is being targeted for a health intervention?**
- **What is your reaction when a health professional speaks at your church to get a group of parishioners to give their views on your community's needs?**

# Can diverse health professionals be held accountable for their collective actions **by patients and society**?

If so, how & what factors might come into play? (If not, why?)

NO – Need collective for collective action

YES – Need:

1. Community group assessment (example India)
  - accountable to whom? who does the accounting?
  - requires transparency; allows mutual understanding of challenges all players face
2. Be knowledgeable & speak truth to power about the hard things
  - Connecting people to powerful partners
3. Start conversation at local/regional levels
  - build momentum & agreement about where we're trying to go before starting national dialogue

Can diverse health professionals hold **each other** accountable for decisions made collaboratively?

If so, how and what factors might come into play? (If not, why?)

1. Shift from culture of blame to culture of safety
  - there will be barriers (organizational, legal)
2. Mutual respect among professions – they are not whole unless/until they are together
  - Early professional education & socialization together
  - Rethink scope of practice from individual to team
  - Assess/evaluate learners as individual & as team member
3. Organizational behavior (delivery systems & academic orgs need reform)
  - how we are treated influences how we treat others

What specific/measurable attributes should *organizations* & training programs exhibit to create & support the preparation of health care providers, patients & communities for transdisciplinary professionalism?

1. Change in culture needed – putting patients at the center and letting them lead/guide us
2. Education / Training – Join in Authentic Work
  - Education together – early and often
  - Integrate faculty from different professions
  - Patients as teachers and learners (contract concept)
3. Organizations – change requires wisdom & courage
  - Upend expert paradigm / model
  - Collaborative leadership
  - CEOs must be accountable for making contact with communities