Accountability and Leadership in Transdisciplinary Professionalism

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Key Comments of Breakout Group

• Context matters – leadership is driven by the needs of the patient and setting

• The system can look at the function of the team in analyzing the negative outcome through root cause analysis

• Insurance and the courts are unlikely to attribute causality to a team

• Put in place trust-worthy systems for teams and individuals to rely upon when leaders are asked to compromise their ethics
Can diverse health professionals be held accountable for their collective actions by patients and society?

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

Yes but we are not quite there
Can diverse health professionals be held accountable for their collective actions by patients and society?

- Society needs to be educated about health care
- Take into consideration the “organization”
- Ethical boards
- Issues of reimbursement
Can diverse health professionals be held accountable for their collective actions by patients and society?

• The Courts
• Move away from a blaming culture
• Patient comfort with teams
• Media / consumer advertising
• Communication
• Need help navigating the system
• Knowing the team and each of its members
• Good data and know the demographics
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?) – We should

• Need to involve non-health workers/professionals
• Avoid finger-pointing to achieve outcomes
• Consider power dynamics (hard to hold a supervisor accountable)
• Different values for different professions
Can diverse health professionals hold each other accountable for decisions made collaboratively?

- Changing employment situations (55% of doctors are employees)
- Efficient and effective teams
- Need, clear transparent systems of accountability
- Systems need to be congruent with other systems
Can diverse health professionals hold each other accountable for decisions made collaboratively?

• Promote/encourage identity formation among students (promote teams and less individual accountability)

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

- Need transparency
- Data
- Behaviorally oriented
- Targeted at the systems level
- Culture – hidden curriculum
What specific/measurable attributes should organizations and training programs exhibit to create and support the preparation of health care providers, patients and communities for transdisciplinary professionalism?

- Involve patients and society in the development of health care
- Measurable
- Culture of school should reflect the values expressed here
- Institutional scale
What specific/measurable attributes should organizations and training programs exhibit to create and support the preparation of health care providers, patients and communities for transdisciplinary professionalism?

• The structure: Need to see the whole person (not the individual parts) – Intergroup identity

• Time consuming and expensive – measure the time spent and not seen as a waste
What specific/measurable attributes should organizations and training programs exhibit to create and support the preparation of health care providers, patients and communities for transdisciplinary professionalism?

• Education is very transparent – are we moving there with health care? What would be the metrics – need to be transparent and valid

• Assessments should not be individual

• Incorporate behaviors into pre-existing measurement tools
What specific/measurable attributes should organizations and training programs exhibit to create and support the preparation of health care providers, patients and communities for transdisciplinary professionalism?

• Community – where most health care takes place – requires professionalism of a team with the care givers