

## Organizational Fairness and Professionalism - Evaluation and Intervention Worksheet

*The job of those entrusted to safeguard Professionalism and Just Culture is to protect and promote robust learning systems. Reliably excellent patient centered care is dependent on healthcare departments that are effective learning systems. They routinely identify their defects and then eliminate or ameliorate them. They routinely highlight good ideas and act on them. Individuals bring to light defects and ideas only when they trust others and feel safe about voicing insights and concerns. Professionalism and Just Culture create trust and psychological safety, essential foundations for all learning systems. Evaluators should consider system and human factors in their assessments of the events and actions. When possible, the caregiver should participate in the investigation and analysis of the event, and in teaching the lessons learned to others.*

### Event or Near Event

**Step 1: Exclude** those with impaired judgment or whose actions were malicious.

- Impairment may result from legal or illegal substances, cognitive impairment, or severe psychosocial stressors. Refer to Human Resources, Risk, Senior Leaders or Professionalism Office.

**Step 2: Characterize participant actions** as either **RECKLESS, RISKY** or **UNINTENTIONAL** as defined below. Consider every action independently.

**RECKLESS ACTION**

*The caregiver knowingly violated a rule and/or made a dangerous or unsafe choice. The decision appears to be self serving and to have been made with little concern about risk.*

**RISKY ACTION**

*The caregiver made a potentially unsafe choice. Their evaluation of relative risk appears to be erroneous.*

**UNINTENTIONAL**

*The caregiver made or participated in an error while working appropriately and in the patients' best interest.*

**Step 3: Perform a Substitution Test to evaluate system influences:** Ask 3 others with similar skills if they, in a similar situation, would have behaved or acted similarly.

**Step 4: Evaluate** whether the individual has a history of unsafe or problematic acts.

- Organizations should have a reasonable and agreed upon statute of limitations for taking these actions into account.

**Step 5: Combine the Evaluation of Individuals and System to determine next steps.**

**A: If actions are**

- RECKLESS: Retraining and/or disciplinary responses are warranted.
- RISKY: Coaching is warranted.
- UNINTENTIONAL: Focus on correcting systems issues to better support individual action.

**B: If there is a history of repeated evaluations** for problem actions, consider if individual is in the wrong job.

**C: Finally, apply the Substitution Test. Individuals are:**

- MORE accountable if others would not act similarly, and
- LESS accountable if others would act similarly.
- Leader accountability increases as individual accountability lessens, because the system supports reckless behavior OR risky behavior OR an environment that is not effectively supportive of personnel.

### Professional Behavior

**Step 1: Receive Report of Concerning Behavior:** Conduct confidential conversation with reporter regarding Focus Person (FP) behaviors. Categorize types of behaviors as well as frequency and severity. Conduct confidential interviews with others.

- Behavior categories include: Demeaning/angry, hypercritical, uncollegial, shirking responsibilities, misconduct, sexual harassment, patient communication concerns, boundary issues, substance abuse, blaming, and otherwise acting in a manner that undermines trust and learning.

**Step 2: Feedback Conversation Coaching:** If the concern is deemed an isolated incident, the FP has not had any other issues, and the reporter feels safe to do so, provide coaching for the reporter on how to give the FP direct feedback regarding behaviors. If the situation is more complex, proceed to Step 3.

**Step 3: Assessing Concerns:** To validate the concerns and assess their frequency and severity, conduct multisource interviews to provide comprehensive insight into, and corroboration of, alleged behavior.

**Step 4: Involve Supervisor:** Share findings of assessment with FP's manager, department chair, division chief, or supervising physician. Discuss a plan for feedback intervention (Step 5) if deemed necessary.

**Step 5: Feedback Intervention**

Involved Supervisor and professionalism representative meet with FP to discuss/review:

- specific disruptive behaviors
- FP's perspective on factors (including systems) that may be contributing to the behavior
- resources for facilitating behavioral changes
- plans for monitoring behavior
- unacceptability of retaliation
- (if applicable) potential consequences for not adhering to behavioral expectations

A follow up email is sent to the FP summarizing the meeting.

**Step 6: Monitoring and Support**

- Inform those reporting concerns that an intervention has occurred.
- Inquire of them and others over time regarding subsequent behaviors.
- Have FP's supervisor address any systems issues discussed in Step 5.
- Keep process discrete and respectful to FP.

**Step 7: Intervention to Address Subsequent Lapses**

Develop a plan of action with institutional administration and legal counsel. Selected institutional administrators meet with FP to detail expected behavioral changes and consequences, including termination.

**Step 8: Evaluate the individual for a history of unsafe acts:** Evaluate whether the individual has a history of unsafe or problematic acts. If they do, this may influence decisions about the appropriate responsibilities for the individual i.e. they may be in the wrong job. Organizations should have a reasonable and agreed upon statute of limitations for taking these actions into account.



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