

**INOVA FAIRFAX MEDICAL CAMPUS
GRADUATE MEDICAL EDUCATION POLICY**

Institutional Policy on Professionalism

I. Purpose:

To establish a policy for all post graduate training programs at Inova Fairfax Medical Campus to establish minimum expectations regarding professional behavior towards patients and colleagues and to ensure ongoing education of house staff and faculty members regarding the professional responsibilities of physicians.

II. Scope:

This policy applies to all programs, house staff and teaching faculty members who are currently participating in graduate medical education programs at Inova Fairfax Medical Campus. All information in this policy shall be used as minimum criteria for evaluation. More detailed expectations may be further specified by the respective Review Committee.

III. Definitions:

“House Staff/House Officer” refers to all interns, residents and fellows enrolled in a graduate medical education training program.

IV. Minimum Requirements:

House staff and faculty members must demonstrate a commitment to carrying out their professional responsibilities and adherence to ethical principles. Professionalism is expected during all interactions, whether in person, over the phone, video, e-mail or via social networking technologies. Minimum expectations include the ability to demonstrate the following on an ongoing basis:

- A. Compassion, integrity and respect for others. This includes patients, families and all members of the health care team.
- B. Responsiveness to patient needs that supersedes self-interest.
- C. Respect for patient privacy and autonomy.
- D. Accountability to patients, society and the profession with a commitment to excellence and ongoing professional development.
- E. Sensitivity and respect to a diverse patient population including but not limited to gender, age, culture, religion, disabilities and sexual orientation.
- F. Commitment to ethical principles pertaining to honest, timely and accurate completion of required documentation by residents/fellows.
- G. Fulfillment of educational and professional responsibilities including scholarly activities.

V. Personal Responsibility and Patient Safety:

- A. House staff and faculty members must demonstrate an understanding and acceptance of their personal role in caring for patients and patient safety.
 - i. Minimum requirements include but are not limited to the following:
 - 1. assurance of the safety and welfare of patients entrusted to their care; including the ability to report unsafe conditions and adverse events

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2. provision of patient and family centered care
3. an obligation to be appropriately rested and fit to provide patient care
4. management of time before, during and after clinical assignments
5. management of time before, during and after educational assignments
6. recognition of impairment to include illness, fatigue or substance abuse in themselves, their peers, and other members of the healthcare team
7. recognition that under certain circumstances, the best interests of the patient may be served by transitioning that patient's care to another qualified and rested provider
8. commitment to lifelong learning
9. monitoring of their patient care performance improvement indicators
10. honest and accurate reporting of clinical and educational work hours, patient outcomes and clinical experience data
11. honest and accurate reporting in the medical record

VI. Institutional/Program Responsibilities:

- A. The Sponsoring Institution will provide ongoing education on the topic of professionalism for all house staff and teaching faculty regarding their aforementioned professional responsibilities. Venues for education include but are not limited to: orientation, Educational Grand Rounds and availability to the AMA-GME Competency Education Program modules available to all trainees and teaching faculty members.
- B. Each program will be responsible for ongoing education, assessment and monitoring of professionalism within their department. Program must provide a professional, respectful and civil environment that is free from mistreatment, abuse and coercion of house staff and faculty. Programs must have a confidential process for reporting, investigating and addressing professionalism concerns.
- C. Any program identifying lapses in house staff professionalism will address these concerns through the program leadership, departmental Clinical Competency Committee and/or the remediation process in place (Evaluation of House Officers Policy). In addition, program effectiveness with professionalism education will be assessed as part of the Annual Program Review which is provided to the DIO and GMEC.
- D. Each program must conduct ongoing evaluation of its faculty members in the area of professionalism. This ongoing evaluation must include feedback from the resident evaluation system and any information from the residents must ensure resident anonymity. Any faculty member found to be deficient in the area of professionalism should be referred to the Department Chair (or designee) for further action and/or the medical staff office.
- E. Any house officer who witnesses or experiences mistreatment must be able to report concerns in a protected manner that is free of reprisal. Residents/Fellows are encouraged to speak to their Program Director and/or Department Chair. Alternatively, residents/fellows may take their concerns to the Director of Graduate Medical Education/DIO and/or the Resident Advisory Committee or the Graduate Medical Education Committee through their duly elected representatives.