

PROFESSIONAL BEHAVIOR FOR HEALTHCARE PROFESSIONALS: AVOIDING THE “DISRUPTIVE PHYSICIAN” LABEL

Presented by:



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OBJECTIVES

- Identify what it means to be a disruptive physician
 - Identify pitfalls of social media
 - Identify acceptable and unacceptable professional behavior
- 


DISRUPTIVE PHYSICIAN




DEFINITION

- Disruptive behavior consists of a pattern of behavior that interferes with the physician's effective clinical performance
 - Disruptive behaviors negatively impact the persons with whom the physician interacts
 - The behaviors include inappropriate anger or resentment, inappropriate words or actions, and inappropriate responses to patients' needs or staff requests
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FOLLOW MEDICAL STAFF POLICIES

- Medical staff and hospitals develop behavioral standards
 - Bylaws define appropriate and disruptive behavior
 - Medical staff bylaws, policies and procedures should be consistent with hospitals' regulations, and with federal, state and local laws
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HOW BEHAVIOR IS IDENTIFIED

- Patient complaints and surveys
 - Peer assessments
 - Reviews that utilize feedback from coworkers, including:
 - Physician peers
 - Nursing staff
 - Administrators
- 


YOU MIGHT BE A DISRUPTIVE PHYSICIAN IF...



YOU MIGHT BE A DISRUPTIVE PHYSICIAN IF YOU...

- Yell
 - Use foul and abusive language
 - Publically criticize coworkers
 - Insult or shame others
 - Slam, throw or break objects
 - Are physically aggressive
- 

YOU MIGHT BE A DISRUPTIVE PHYSICIAN IF YOU...


- Use hostile avoidance or the “cold shoulder”
 - Intentionally miscommunicate
 - Are unavailable for professional matters
 - Not answering pages from certain people
 - Use implied threats
 - Use racial jokes or slurs
 - Joke about a person’s appearance
- 

DISRUPTIVE PHYSICIANS


- Personality Traits

- Highly-skilled
- Well-read
- Intelligent
- Articulate
- High-achieving
- Confident


- Problem Traits

- Arrogant
 - Intimidating
 - Controlling
 - Vindictive
 - Failure to self correct
 - Entitled
- 


IMPACT OF DISRUPTIVE PHYSICIANS IN THE WORKPLACE

- Lower staff morale
 - Increased turnover
 - Negative reputation of healthcare system
 - Poor patient satisfaction
 - Increased cost of care
 - Lawsuits
- 


PERSONAL IMPACT OF BEING LABELED A DISRUPTIVE PHYSICIAN

- Being proven to be a disruptive physician may lead to:
 - Adverse action against clinical privileges resulting in a NPDB report
 - Action to drop the physician from insurance panels
 - Adverse action by the state medical board
 - Loss of specialty certification
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IF YOU ARE TAGGED AS A DISRUPTIVE PHYSICIAN

- Educate yourself about the issue
 - Avoid conduct labeled as “disruptive behavior”
 - Seek professional counseling
 - Respond to the complaint, but do so with your attorney
- 

FALSE ACCUSATIONS

- Bylaws should include a due process component
 - Complaints should not be considered without a complaint verification process
 - Bylaws should include an appeals process with an option for a fair hearing
- 

SOCIAL MEDIA



PHYSICIANS USING SOCIAL MEDIA


- 87% use social media for personal use
- 67% use social media for professional purposes
- 35% have received friend requests from patients or their family members




USING SOCIAL MEDIA & SOCIAL NETWORKING IN MEDICAL PRACTICE

- Federation of State Medical Boards released “Model Policy Guidelines for the Appropriate Use of Social Media and Social Networking”


PROFESSIONALISM

- Physicians should:
 - Use separate personal and professional social networking sites, profiles and e-mails
 - Report any unprofessional behavior to the proper authorities
 - Observe the same standards of ethical conduct online that would be observed offline
- 


MEDICAL BOARD SANCTIONS AND DISCIPLINARY FINDINGS

- State medical boards have the authority to discipline for inappropriate online conduct, including:
 - Inappropriate communication with patients
 - Use of the internet for unprofessional behavior
 - Violations of patient confidentiality
 - Proof of impairment
- 


MEDICAL BOARD SANCTIONS AND DISCIPLINARY FINDINGS

- Including:
 - Failure to reveal conflicts of interest
 - Derogatory remarks regarding a patient
 - Depiction of intoxication
 - Using discriminatory language or practices
- 


INTERACTING WITH PATIENTS

- Physicians should refrain from interacting with past or current patients on personal social media sites
 - Never discuss information pertaining to the physician-patient relationship
- 


PRIVACY/CONFIDENTIALITY

- Patient privacy and confidentiality must be protected at all times
 - Physicians can discuss their clinical experience but should refrain from including details that may identify a patient
- 


DISCLOSURE

- Physicians may write online about their experience as healthcare professionals, but they must reveal existing conflicts of interest and be honest about their credentials as physicians
- 


POSTING CONTENT

- Physicians must realize that any information they post online can be disseminated without their consent to a huge audience
 - Content can be taken out of context and will remain online forever
- 


DISCUSSION OF MEDICINE ONLINE

- Physicians must ensure that information exchanged on these sites remains confidential
 - Physicians must ensure that non-physicians do not rely on the online discussion as medical advice
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TIPS TO AVOID HIPAA VIOLATIONS IN SOCIAL MEDIA

- Don't talk about patients, even in general terms
 - “We had a fifty-year-old male in the ER last night with alcohol-induced liver disease.”
 - Do talk about conditions, treatments and research
- 


TIPS TO AVOID HIPAA VIOLATIONS IN SOCIAL MEDIA

- Don't be anonymous
 - If you wouldn't say it in the elevator, don't put it online
 - Check the tone of your social media presence
 - Be careful when complaining or joking
- 


TIPS TO AVOID HIPAA VIOLATIONS IN SOCIAL MEDIA

- Don't mix your personal and professional lives
 - Create separate professional pages
 - Don't friend patients
 - Check privacy settings


HIPAA LIST OF IDENTIFIERS

- Names
 - Including initials
 - All geographical subdivisions smaller than a state
 - All elements of dates (except year) for dates directly relating to an individual
- 

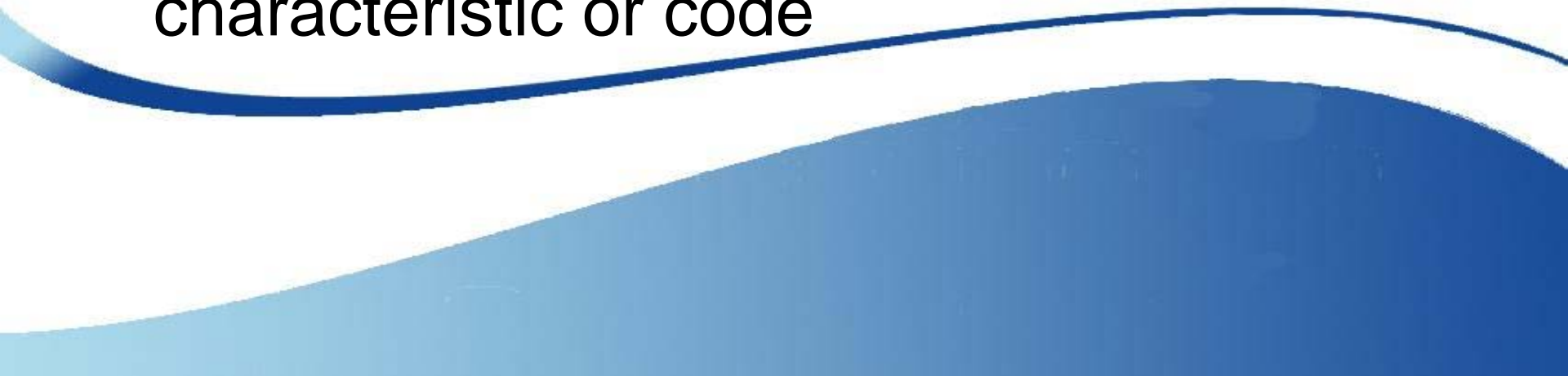
HIPAA LIST OF IDENTIFIERS

- Phone numbers
 - Fax numbers
 - E-mail addresses
 - Social Security numbers
 - Medical record numbers
- 

HIPAA LIST OF IDENTIFIERS

- Health plan beneficiary numbers
 - Account numbers
 - Certificate/license numbers
 - Vehicle identifiers and serial numbers
 - Device identifiers and serial numbers
- 


HIPAA LIST OF IDENTIFIERS

- Web Universal Resource Locators (URL)
 - IP address numbers
 - Biometric identifiers
 - Full face photographic images
 - Any other unique identifying number, characteristic or code
- 


HIPAA VIOLATIONS

HIPAA Violation	Minimum Penalty	Maximum Penalty
Individual did not know (and by exercising reasonable diligence would not have known) that he/she violated HIPAA	\$100 per violation, with an annual max. of \$25,000 for repeat violations (Note: max. that can be imposed by State Attorney General regardless of the type of violation)	\$50,000 per violation, with an annual maximum of \$1.5 million
HIPAA violation due to reasonable cause and not due to willful neglect	\$1,000 per violation, with an annual maximum of \$100,000 for repeat violations	\$50,000 per violation, with an annual maximum of \$1.5 million
HIPAA violation due to willful neglect but violation is corrected within the required time period	\$10,000 per violation, with an annual maximum of \$250,000 for repeat violations	\$50,000 per violation, with an annual maximum of \$1.5 million
HIPAA violation is due to willful neglect and is not corrected	\$50,000 per violation, with an annual maximum of \$1.5 million	\$50,000 per violation, with an annual maximum of \$1.5 million

HIPAA VIOLATION?

- Facebook post from a OB/GYN
 - “So I have a patient who has chosen to either no-show or be late (sometimes hours) for all of her prenatal visits, ultrasounds and NSTs. She is now 3 hours late for her induction. May I show up late to her delivery?”
- 

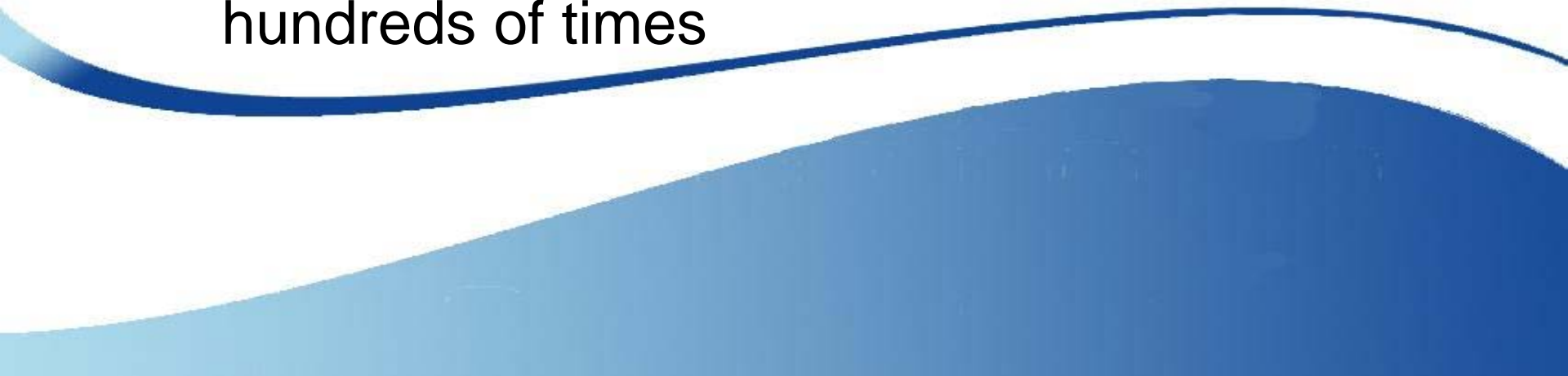
HIPAA VIOLATION?

- Facebook post about patient with nickname “Benz” because her name was Mercedes
 - Discussed diagnosis and treatment for oncoming physician
- 


PROFESSIONAL BEHAVIOR



ACCESSING RECORDS

- Do not access records of patients you are not seeing
 - Nurse fired for looking at Tiger Woods' medical records
 - EMR tracking
 - Current case involving stalking by physician who looked up demo information for address hundreds of times
- 

BOUNDARY ISSUES

- Investment/business relationships
 - Reciprocal treatment agreements
 - Prescription exchanges
 - Treatment of friends and relatives in general
 - Inter-office dating
- 



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