



NEWS RELEASE

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Media Contact:

Katie Bronk
Corporate Communications
(630) 792-5175
kbronk@jointcommission.org

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Professional development course improves unprofessional physician behaviors, according to new journal study

Unprofessional behaviors by physicians positively modified by brief education program

(OAKBROOK TERRACE, Illinois, Jan. 24, 2020) – Unprofessional physician behaviors can result in serious consequences including decreased physician and staff productivity, increased staff turnover and adverse patient outcomes. A 2004 survey found that more than 95% of physician executives encountered “disturbing and potentially dangerous behaviors on a regular basis.”¹

A new study published in the February 2020 issue of [The Joint Commission Journal on Quality and Patient Safety](#) evaluates the effectiveness of a professional development program on unprofessional physician behaviors. Findings show that the “Program for Distressed Physicians” (PDP) helped positively modify unprofessional behavior by physicians.

In the study, “[A Professional Development Course Improves Unprofessional Physician Behavior](#),” a pre-post study design was used to measure changes in physicians’ unprofessional behaviors using the B29™, a 35-item, web-based survey. The survey was completed as a 360-degree assessment by peers, colleagues, administrators and staff, as well as a self-assessment from the physician.

Between the pre- and post-survey, physicians completed the PDP. The three-day course, followed by three one-day sessions spread over six months, taught physicians how to:

- Replace unprofessional behavior with professional behavior
- Promote peer accountability and support
- Identify risk factors and prevention strategies
- Practice new skills
- Promote effective leadership skills

Twenty-four of 28 physicians in the study experienced an improvement in professional behavior. The mean decrease of unprofessional behavior for all 28 physicians was 51.1% and lowest-rated items improved an average of 53.5% overall. Negative behaviors that declined after

¹ Weber DP. Poll results: doctor’s disruptive behavior disturbs physician leaders. *Physician Exec.* 2004;30(5):6–14.

the PDP included egregious behaviors and passive-aggressive behaviors. Positive behaviors that increased after the PDP included teamwork, peer relations, and patient/family orientation and empathy.

“Hospitals, physician practices and other health care institutions should not only have written standards and policies that set expectations for physician professional behavior but should also address unprofessional behavior in a strict but fair way, using an approach that escalates from coaching and counseling to punitive measures if the undesirable behavior persists,” notes Gautham K. Suresh, MD, DM, MS, FAAP, in an [accompanying editorial](#).

Also featured in the February issue:

- [“Do 30-Day Reoperation Rates Adequately Measure Quality in Orthopedic Surgery?”](#) (University of Chicago Medicine, Chicago)
- [“Improving and Maintaining On-Time Start Times for Nonelective Cases in a Major Academic Medical Center”](#) (Massachusetts General Hospital, Boston)
- [“What Are the Determinants of Health System Performance? Findings from the Literature and a Technical Expert Panel”](#) (RAND Center of Excellence on Health System Performance, Santa Monica, California)
- [“Persistent Barriers to Timely Catheter Removal Identified from Clinical Observations and Interviews”](#) (University of Michigan Hospital, Ann Arbor, Michigan)
- [“Effects of Accessible Health Technology and Caregiver Support Posthospitalization on 30-Day Readmission Risk: A Randomized Trial”](#) (University of Michigan Hospital; Ann Arbor U.S. Department of Veterans Affairs, Ann Arbor, Michigan; and MidMichigan Health, Midland, Michigan)
- [“The Use of Patient Digital Facial Images to Confirm Patient Identity in a Children’s Hospital’s Anesthesia Information Management System”](#) (Children’s Hospital Colorado, Aurora, Colorado)
- [“Impact of an Initiative to Improve the Administration of Anticoagulation in High-Risk Patients”](#) (Walter Reed National Military Medical Center, Bethesda, Maryland)

For more information, visit [The Joint Commission Journal on Quality and Patient Safety](#) website.

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Note for editors

The article is [“A Professional Development Course Improves Unprofessional Physician Behavior,”](#) by William H. Swiggart, MS; James L. Bills, EdD, MS; J. Kim Penberthy, PhD, ABPP; Charlene M. Dewey, MD, MEd, MACP; and Linda L.M. Worley, MD. The article appears in *The Joint Commission Journal on Quality and Patient Safety*, volume 46, number 2 (February 2020), published by Elsevier.

The Joint Commission Journal on Quality and Patient Safety

[The Joint Commission Journal on Quality and Patient Safety](#) (JQPS) is a peer-reviewed journal providing health care professionals with innovative thinking, strategies and practices in improving quality and safety in health care. JQPS is the official journal of [The Joint Commission](#) and [Joint Commission Resources, Inc.](#) Original case studies, program or project reports, reports of new methodologies or the new application of methodologies, research studies, and commentaries on issues and practices are all considered.