

Economic Impact of Disruptive Physician Behavior

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Impact on Disruptive Behavior

- Patient Safety and hospital operations
- Clinical outcomes
- Medical student and resident education
- Staff turnover
- Leadership resources diverted
- Performance

What is Disruptive Behavior?

- Anger outbursts
- Profanity
- Throwing
- Demeaning
- Physical violence
- Sexual Harassment
- Racial/ Ethic jokes
- Alcohol or drug
- Chronically late
- Ignoring pages/calls
- Ignoring questions, warnings, suggestions
- Derogatory comments
- Refusal to follow policy
- Body language-eye rolling

What is Disruptive Behavior?

- Falling asleep in lecture
- Not participating in discussion (eg texting)
- Postings on blog/Facebook

Yelling



Photo courtesy of [iStockphoto.com/jhorrocks](https://www.istockphoto.com/jhorrocks)

6 ways Physicians Yell

1. The Mad Dog Look
2. Pounding on the Table
3. Interrupting
4. Personal Attacks
5. Violate personal space
6. Raised voice

<http://www.richardwinters.com/yelling>

Disruptive Behavior can

- Foster medical errors
 - Contribute to poor patient satisfaction
 - Contribute to preventable adverse outcomes
 - Increase cost of care including malpractice
 - Lead to turnover of qualified staff
-
- Joint Commission SA #40 July 9, 2008

Joint Commission Requirements

Hospitals establish a formal Code of Conduct

Leadership creates a process for reporting,
evaluating and managing disruptive behavior

Disruptive Behavior: The Numbers

- 10% residents are impaired
- 12% staff leave because of disruptive behavior
- 99% physicians believe disruptive physician behavior impacts patient care

Incidence of disruptive physician behavior

- Survey of 840 physicians
- 70% of physicians reported disruptive physician behavior occurs at least once per month
- 10% of physicians reported disruptive physician behavior occurs on a daily basis

Who was surveyed?

- 60% held leadership positions
- Medical Director (34%)
- Chief Medical Officer (12%)
- Department Chair (10%)
- Vice President Medical Affairs (4%)
- President of Medical Staff (3%)
- 35% Private practice vs 33% hospital based physicians vs 18% academic

Impact of disruptive physician behavior

- 99% physician surveyed believed that disruptive behavior ultimately affects patient care
- 60% physicians surveyed their organizations had received complaints from patients or families
- 50% physicians reported patients changing doctors or leaving a practice due to disruptive behavior
- 26% of physicians admitted to engaging in disruptive behavior at one time in their career

Staff Turnover

- 2.4 nurses left hospital per year due to disruptive behavior

Rosenstein, AH. Original Research: Nurse-physician relationships: Impact on nurse satisfaction and retention. *American Journal of Nursing*. (2002). 102(6). 26-34

Rosenstein, AH. Russell, H. Lauve, R. (2002) Physician behavior contributes to nursing shortage. *Physician Executive*, Nov-Dec 2002, 8-11

- Employer turnover costs are typically estimated to be 1.5 to 2.5 times the salary paid for the job (or \$50,000 on average per departing employee across U.S. industries and occupational classifications)

Porath and Pearson The Cost of Bad Behavior

What is the incidence of impairment in Residents?

- 10-20% estimated incidence
- How many residents/fellows would that be in your program?
- How many residents/fellows would that be nationally?

Treatment of Impaired Physician

- 72 hour observation
- 90 day inpatient treatment
- Alcoholics Anonymous/Narcotics Anonymous/
Counseling

Total time for One Impaired Resident

- Discovery (12 hours)
- Decision/Treatment (55 hours)
- Return to work (9 hours)
- Graduation/Future employment (6 hours)
- Total time (82 hours) or 8 days of 52 days
Program Director Administrative time

AAMC GQ

- Annual General Survey of graduating medical students

<https://www.aamc.org/download/350998/data/2013gqallschoolssummaryreport.pdf>

<https://www.aamc.org/download/300448/data/2012gqallschoolssummaryreport.pdf>

<https://www.aamc.org/download/263712/data/gq-2011.pdf>

2012 AAMC GQ-graduating medical students

- Public humiliation 34.3% or 4127 students
- Medical students threatened with physical harm 1.5% or 183 students
- Subjected to sexist remarks 15.7% or 1899 students
- Medical students subjected to unwanted sexual advances 4.6% or 559
- Asked to exchange sexual favors for grades or other awards 0.2 % or 24 students

Peer reviewed literature

- 1990- 80.6% of senior medical students reported being abused

Silver et al JAMA 1990; 263 (4):527-532

- In a 13 yr long longitudinal study of medical students in a proactive environment attempting to reduce/eliminate medical student mistreatment dropped from 75% to 57%

Fried et al Acad Med 2012; 87:1191-98

Food for Thought

- Medical errors = 30% price of healthcare
- 100,000 patient deaths/ yr
- >50% medical errors are preventable
- Medical errors = 10-15% operating \$
- Dysfunctional MDs= 0.5-1% operating budget

Cost Estimates

- 400 bed hospital
- Disruptive Physician Behavior (staff turnover, medication errors, procedural errors)
- \$1 million

The Cost of Disruptive and Unprofessional behavior in Health Care Rawson, Thomson, Sostre, Deitte, Academic Radiology 2013; 20:1074-1076

Impact of disruptive physician behavior

- Patient leaves practice
- Patient's family members and friends stop using physician/hospital for care
- Prevents Culture of Safety
- Physician or Staff leaves and needs to be replaced

Strategies

- Written policies
- Training to recognize and manage
- Prevention
- Forum to discuss
- 360 evaluations
- GRU Policy combines impaired and disruptive behavior into one policy

Summary

- The cost to the individual programs is hard to estimate
- Using conservative estimates the \$\$\$ are significant
- Indirect effects to the residents, faculty and patients is significant and more difficult to estimate
- We need to be alert to recognize an impaired resident early

Food for thought

- “A million here, a million there, pretty soon you’re talking real money”

–Senator E. Dirksen

Thank you

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