

Online and Simulation Based Professionalism Modules for Osteopathic and Allopathic Physicians

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Short Communication

With the advent and popularity of social media, physicians' lives are exposed to the public at greater amounts than in previous decades. Professionalism is a main competency in both Osteopathic and Allopathic domains. Training for osteopathic and allopathic physicians is a very stressful times where there is much work to be done. Many trainees do not have extra hours, and their energy and time is spent in the hospital or with the hospital on their minds. With the Single Accreditation System coming into effect there will soon be one accrediting body for postgraduate medical training in the United States, and no more separation of Osteopathic and Allopathic training pathways. This article seeks to illustrate how a professionalism training module could be included in both osteopathic and allopathic training institutions, and can even be spread to inter-professional training.

The need for professionalism training is evident by many recent articles available. One article, "Online professionalism Investigation by the State Medical Boards" showed possible scenarios physicians can face online [1]. Participation in social media platforms can present a professionalism risk for both osteopathic and allopathic physicians. A recent article shows that "young doctors are active members of Facebook" [2]. Oftentimes, medical trainees in osteopathic and allopathic residency are placed in situations that are hard to breach and even harder to discuss. Online and in person boundaries are more flexible and both osteopathic and allopathic residents can be exposed to online and in person professionalism risks. Malpractice claims, claims to the Office of Professional Medical Conduct, and state medical boards can also come about through inappropriate online relationships or poor online communication [3]. A study from the North Carolina Medical Board data of 2002-2012 showed that "failure of the physician to maintain an appropriate level of professionalism when confronted with a difficult or contentious patient" was a cited reason for complaints [3]. A study of the State Medical Board of Ohio showed that there was "no difference in severity of disciplinary action between osteopathic and allopathic physicians" [4].

A way to educate both osteopathic and allopathic physicians on professionalism is by providing workshops where physicians are exposed to possible professionalism scenarios. These cases can either be used in a simulation session or within various clinical modules online. These sessions can include an online self-assessment evaluation or a professional evaluation by a skilled educator who can show the learner how specific scenarios could be handled in a professional way. These scenarios can also highlight any behaviour that may seem unprofessional or that may put the provider or learner at risk. The scenarios can be graded and scored and could also serve as proof of

professionalism training. These scenarios can also be used to test both osteopathic and allopathic physicians on professionalism.

Some examples of professionalism scenarios that both osteopathic and allopathic physicians face include:

- A physician witnessing a medical student taking a picture of a unique tattoo on a patient and putting it on Facebook.
- Physicians being "friended" by a patient.
- Physicians seeing another physician from his or her hospital on a dating app.

All of these scenarios are realistic and could present a risk to a physician's professionalism. A simple Facebook message from a patient could turn into a catastrophic medical issue if the patient asks for medical advice, and is not answered in a timely fashion. Some of these types of professionalism questions both osteopathic and allopathic physicians are not prepared for especially with the growing trend of social media. "The popularity of Instagram and Snapchat allow for potential wide circulation" of inappropriate and unprofessional photos and memes [5].

The National Board of Osteopathic Medical Examiners released their medical competency domains in 2016, and the sixth competency is "professionalism in the Practice of Osteopathic Medicine" [6]. In the ACGME there is also a professionalism competency. In a perfect world the answer is obvious: "don't get into trouble or risk your professional integrity". However, ethics and professionalism standards are not always clear or self-explanatory. The ideal situation would be to educate both the osteopathic and allopathic community on the issue of professionalism, both online and in an office setting. According to the ACGME Program Requirements for Graduate Medical Education in Family Medicine, VI.A.5. "The program director and institution must ensure a culture of professionalism that supports patient safety and personal responsibility" [7].

Simulation workshops are one way to educate and evaluate physicians' professionalism. In a simulation workshop the physician is exposed to a didactic session and then they are exposed to a simulation session with a scenario that tests professionalism. "Simulation, in all its incarnations, is a tremendous tool for healthcare educators" [8]. The idea is that physicians can be exposed to professionalism scenarios and can see how they react and all the outcomes that can possibly happen in a scenario. Since cultural competence is also needed in the realm of professionalism, physicians who take care of non-traditional families "need to be informed about and be sensitive to their special concerns" [9]. These types of cultural competencies can be taught and tested in a simulated session. Another positive facet of these simulation sessions is that they can present a way where the physician can practice empathy in certain situations. Since "most patients want a physician who is both

competent and caring”, professionalism training can show how the provider prevents him/herself to the patient [10].

These types of workshops are mandated in the UK, where “the General Medical Council (GMC) uses structure based competency tools and tests to assess primary care physicians in training and out of practice” [11,12]. Internationally practicing primary care physicians are assessed throughout their practice. “In New Zealand and Australia a council will review a physician’s medical record to make sure written documentation is done correctly” [11,12]. In the United States in 2014, over 4000 citations were given to osteopathic and allopathic physicians due to professionalism complaints [11,13]. Even the Huffington Post wrote a recent article on “Doctors behaving badly in social networking sites: what would prompt state boards to Investigate?” [14].

This is the time for osteopathic and allopathic physicians to unite and require a professionalism curriculum to all practicing physicians. “Generally, disciplinary rates among physicians are low” [15]. But online professionalism complaints “are likely to change as the use of social media continues to grow” [16]. Both osteopathic physicians and allopathic physicians need to be educated and assessed to make sure physicians are aware of all the possibilities with regards to professionalism issues. Since “the American Osteopathic Association, the American Association of Colleges of Osteopathic Medicine, and the Accreditation Council for the Graduate Medical Education (ACGME) agreed to move forward with the single graduate medical education accreditation system”, both osteopathic and allopathic physicians have need for greater professionalism training, either through online modules or in person simulation based training [17].

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