RESOLUTION 2021 F

SUBJECT: Restoring an Equitable and Positive Learning Environment in Medical Training

SUBMITTED TO: Michigan Osteopathic Association House of Delegates

SUBMITTED BY: Macomb County Osteopathic Medical Association, Oakland County Osteopathic Medical Association, Council of Interns and Residents

REFERRED TO: Public Affairs Committee

Recommendation from Committee: Approve as Amended

ACTION AT MOA HOD: APPROVED AS AMENDED

Whereas, anti-harassment and anti-discrimination policies address abusive and disruptive behavior towards protected classes (i.e. race, color, sex, sexual orientation, national origin, or age), however, mistreated employees who do not fall into these categories do not have legal protections against such mistreatment with more than 75% of legal cases regarding abusive behavior not being within the scope of antidiscrimination laws; and

Whereas, many hospital and professional organization policies address overt mistreatment such as discrimination, criminal activity, sexual assault or physical abuse but do not formally address other forms of abuse such as bullying and intimidation, which includes behaviors such as humiliation, insults, threats, coercion, isolation, and overwork; and

Whereas, the Institute for Safe Medical Practices found that 88% of medical practitioners encountered condescending language or voice intonation, 87% encountered impatience with questions, 79% dealt with reluctance or refusal to answer questions, 48% were subjected to strong verbal abuse, 43% experienced threatening body language, and 4% reported physical abuse, while only 39% felt their organization dealt effectively with intimidating behavior; and

Whereas, the hierarchical system of residency training establishes an atmosphere of dominance, resulting in a fear of consequences, including the negative influence on career, an impaired learning experience, being labeled, and concern for greater mistreatment after reporting, and a subsequent culture of silence, rationalization, intimidation, and harassment as a part of training; and

Whereas, the Joint Commission reports intimidating and disruptive behaviors are often manifested by health care professionals in positions of power, which makes it difficult to confront aggressors and leads to underreporting of abusive behavior in up to 79% of physicians and 88% of residents; and

Whereas, the breakdown in effective communication secondary to abuse and intimidation can lead to medical errors impairing patient safety; and
Whereas, targets of abuse have reported manifestations including insomnia, depression, anxiety, gastrointestinal complaints, hypertension, chest pain, palpitations, weight loss, headaches, loss of libido, worsening of chronic illness, post-traumatic stress disorder and suicide; and

Whereas, the American Osteopathic Association (AOA) existing policy (H343A/17) recognizes the need to “address stressful issues during all stages of career development because failure to do so can have lasting ramifications for a physician mentally, emotionally, socially, and physically,” however, no policy exists to address abuse and disruptive behavior which clearly contributes to this stress; and

Whereas, organizations within the medical community, including the Joint Commission and the American College of Surgeons and the American College of Obstetricians and Gynecologists, issued a “zero tolerance” policy against disruptive behavior in the workplace, and/or, have addressed the need to address such behaviors within institutions through clear communication of definitions and impacts of disruptive behaviors, establishing confidential reporting systems and assistance programs, and adopting hospital-wide policy and procedure that is enforced; therefore, be it

Resolved, the Michigan Osteopathic Association (MOA) adopt a stance of zero-tolerance to abuse and disruptive behavior in residency training and consider such violations as a violation of the code of ethics; and be it further,

Resolved, the MOA support the council of interns and residents to collect data examining the prevalence and nature of abuse experienced by osteopathic trained residents in Michigan; and be it further,

Resolved, the MOA advocate for a mechanism for addressing abuse in medical training with the goals to restore an equitable and positive learning environment that eliminates abusive behavior and provides a resource to victims outside of their institution; and be it further,

Resolved, the MOA forward this resolution properly formatted to the American Osteopathic Association for national consideration and adoption.

Fiscal Impact: A 2020 task force has been formed by the MOA Council of Interns and Residents to address these issues and with the MOA’s support can continue their work in this area with adoption of this resolution and no further financial impact to the MOA organization. Any fiscal impact will be handled within the Council of Interns and Residents which has funds available to improve quality of life and training for Michigan osteopathic trainees. Similarly, we believe at the AOA level this would best be administered through the Bureau of Emerging Leaders (BEL) or similar committee.

Resources:

1. Institute of Safe Medication Practices. (2013). Disrespectful Behavior in Healthcare...Have We Made Any Progress in the Last Decade? Available at:


