



Assessment of professionalism in family medicine residents

Turning the mirror around

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Addressing professionalism within the medical field has been a priority over the past while. This evolved from events highlighted in the media but also from within our profession. At a fall 2015 meeting of the Canadian Medical Forum, which brings together leaders of national medical organizations to discuss issues of priority to physicians, their patients, and the health care system, professionalism was a topic of substantial discussion. The Canadian Medical Association (CMA) discussed their strategic initiative around professionalism.¹ The CMA aims to define a progressive and values-based vision for medical professionalism through face-to-face and online engagement. The CMA noted that there was an overwhelming response to their e-panel on this topic, which will help inform their work. Many of the organizations believed that this was a high priority and were supportive. More broadly, a recent document from the Australian Medical Association highlights the challenges to medical professionalism, including the ever changing modern health care environment, which has barriers such as bureaucracy, rising consumerism, and changing perceptions of the medical profession.²

These discussions led me to examine how we look at professionalism within our organization. I did not have to look far: I reviewed my worn copy of the evaluation objectives for daily use in assessing competence in professionalism.³ This 2010 document describes the professional behaviour of family medicine residents working in our offices, hospitals, long-term care institutions, emergency departments, and patients' homes. This document needs to be more broadly used. It is more than just an assessment tool for competency in this area. It describes how we value professionalism as family doctors, as practising family physicians were surveyed to describe this behaviour.

This document describes 12 themes of professionalism.³

- Day-to-day behaviour reassures one that the physician is responsible, reliable, and trustworthy.
- The physician knows his or her limits of clinical competence and seeks help appropriately.
- The physician demonstrates a flexible, open-minded approach that is resourceful and deals with uncertainty.
- The physician evokes confidence without arrogance, and does so even when needing to obtain further information or assistance.

- The physician demonstrates a caring and compassionate manner.
- The physician demonstrates respect for patients in all ways, maintains appropriate boundaries, and is committed to patient well-being. This includes time management, availability, and a willingness to assess performance.
- The physician demonstrates respect for colleagues and team members.
- Day-to-day behaviour and discussion reassure one that the physician is ethical and honest.
- The physician practises evidence-based medicine skillfully. This implies not only critical appraisal and information-management capabilities, but incorporates appropriate learning from colleagues and patients.
- The physician displays a commitment to societal and community well-being.
- The physician displays a commitment to personal health and seeks balance between personal life and professional responsibilities.
- The physician demonstrates a mindful approach to practice by maintaining composure and equanimity, even in difficult situations, and by engaging in thoughtful dialogue about values and motives.

When I look at these themes and the observable behaviour further described in the document,³ I reflect on how well they align with the 4 principles of family medicine and the expectations that patients have of us. This fits our societal obligation—our contract as public servants. This theme has also come up as I have spoken with family medicine interest groups at medical schools. Students struggle in their career decisions, especially as they relate to personal expectations of family medicine. My message to this energetic, highly motivated group is that embodying these 12 themes of professionalism ensures that we meet patients' needs by learning the right skills and adapting them as their needs change and our interests develop.

Maybe I should print off a new copy of the themes of professionalism. I will continue to use it a lot. It is a good self-reflection tool—a mirror or lens to add to my own continuing professional development tool box. 

References

1. Canadian Medical Association. *CMA board of directors October 2015 meeting highlights*. Ottawa, ON: Canadian Medical Association; 2015.
2. Australian Medical Association. *Medical professionalism 2010. Revised 2015*. Canberra, Aust: Australian Medical Association; 2015.
3. CFCP. *Defining competence for the purposes of certification by the College of Family Physicians of Canada: the evaluation objectives in family medicine*. Mississauga, ON: CFCP; 2010.

Cet article se trouve aussi en français à la page 182.