

IV. Educational Program
A. Curriculum components
5. ACGME Competencies
e. Professionalism

Common Program Requirement:

5. *ACGME Competencies*
The program must integrate the following ACGME competencies into the curriculum:
- e. *Professionalism*
Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:
- (1) compassion, integrity, and respect for others;*
 - (2) responsiveness to patient needs that supersedes self-interest;*
 - (3) respect for patient privacy and autonomy;*
 - (4) accountability to patients, society and the profession; and,*
 - (5) sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.*
- [As further specified by the Review Committee]*

Explanation:

Proficiency in this competency domain is primarily behavioral and attitudinal and is demonstrated as part of all other competency domains. Therefore, teaching and evaluation is most effective when done in the context of patient care and related activities (e.g., conducting QI projects, leading a team, presenting M&M, reflections on practice, conversations with mentors). Evaluations are mainly perceptions, making it important that evaluators share a common belief about the components of professionalism and description of what those are. **The major components of professionalism are commitment, adherence, and sensitivity.**

- Commitment means respect, altruism, integrity, honesty, compassion, empathy, and dependability; accountability to patients and society; and professional commitment to excellence (demonstrated by engaging in activities that foster personal and professional growth as a physician).
- Adherence means accepting responsibility for continuity of care; and practicing patient-centered care that encompasses confidentiality, respect for privacy and autonomy through appropriate informed consent and shared decision-making as relevant to the specialty.
- Sensitivity means showing sensitivity to cultural, age, gender and disability issues of patients as well as of colleagues, including appropriate recognition and response to physician impairment.

Professionalism, including medical ethics, may be included as a theme throughout the program curriculum that includes both didactic and experiential components (e.g., may

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be integrated into already existing small group discussions of vignettes or case studies and role plays, computer-based modules) and may be modeled by the faculty in clinical practice and discussed with the resident as issues arise during their clinical practice.

Faculty development is critically important for **promoting professionalism behavior** because of past assumptions that since all physicians are professional, professionalism does not need to be discussed, taught or evaluated. Faculty development may include not only faculty but also residents as much as possible and include both structured workshops as well as ongoing discussion (e.g., inclusion as a discussion point in every M&M presentation). These discussions may address the impact of situational circumstances on the degree to which a professional manifests these attributes (e.g., post-call, times of personal stress, competing priorities). Such an approach will contribute to the development of a learning environment that explicitly values and encourages professionalism in all who teach, learn, and provide healthcare as part of the training program.

Remediation is important for all the competency domains, but may be especially critical in the domain of professionalism. It is challenging to teach and assess, and lapses may not be noticed until habits are formed that are then more difficult to address. There are many resources available to help. For example the LIFE Curriculum (Learning to Address Impairment and Fatigue to Enhance Patient Safety): <http://www.lifecurriculum.info/>) contains modules on disruptive behavior, substance abuse, impairment, and boundary violations. This resource is available free of charge. The April, 2006 issue of the ACGME Bulletin contains several articles about remediation: http://www.acgme.org/acWebsite/bulletin/bulletin04_06.pdf.

There may be specialty-specific requirements for professionalism.