

Dealing with a Problem Trainee



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CORE Faculty Development



Learning Objectives

- Participants will be able to:
 - Define a problem trainee
 - Identify trainee problems: disciplinary or academic performance
 - Discuss effective methods in handling a problem trainee



Problem Trainee: A Definition

- Trainee experiencing difficulty in performance resulting from problems with cognitive/emotional and/or personal issues and who comes to the attention of evaluators.



Levels of Training Where Problem Identification Occurs

- Medical school admission screening
- Medical school
- Post graduate training years
- Practice



Major Sources of Problem Identification

- Fellow trainees
- Patients
- Ancillary staff
- Teaching faculty



Troublesome Behaviors

■ Affronting Behaviors

- Challenged our experience
- Treated patients insensitively
- Resisted feedback
- Disorganized
- Uncooperative
- Arrogant
- Overconfident

■ Avoiding Behaviors

- Lacked initiative
- Overly dependent
- Avoided responsibility



Problem Emerged - - Problem Identified

Caveat: A strong emotional reaction to a troublesome behavior should serve as an indicator of a need to talk with another faculty member or program director.

Identification

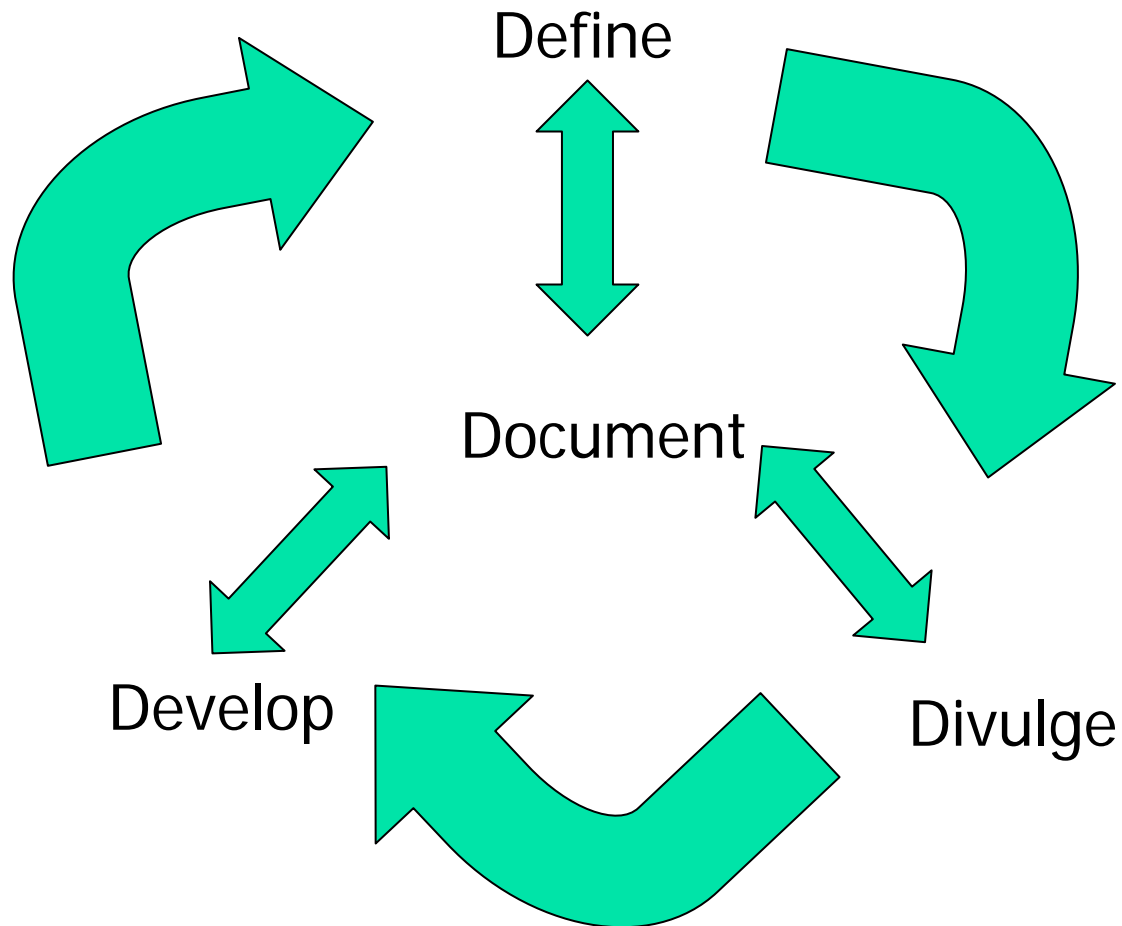
- 1) Academic insufficiency
 - a) Knowledge
 - b) Skills
 - c) Attitudes
- 2) Disciplinary offenses
- 3) Mental/physical impairments
- 4) Inadequate performance resulting from teaching deficits
- 5) "unhappy" resident



Categorizing the Problem Trainee

- Knowledge base
- Judgment
- Attitudinal/Motivational
- Stress/Coping
- Multifactorial

4-D Model (MSU) for Approaching the Problem Trainee





Define

- Identify a “problem trainee”
- Categorize the problem(s)



Divulge

- Refer to “Tips for Performance Appraisal Interviews”



Develop

- Help the trainee select and implement a remediation strategy
- Provide resources
- Follow-up on progress or lack of it



Develop: Remediation Strategies

■ Problem

- Knowledge base
- Judgment
- Attitudinal
- Stress
- Multifactorial

■ Remediation

- Reading, Program Testing
- Paper Problem Scenarios, Exams
- Counseling, Mentor, Family Involvement
- Support Group, Counseling, Mentor
- Combination of strategies



Document

- Refer to “Diagnostic Work-Up For the Evaluation of Problem Residents”



Problem Prevention

- Orient the trainee, provide clear information and expectations (program, program director, attending, and resident)
- Expectations (e.g. commitment to patient care, collaboration, self-confidence, self-awareness, appearance, good clinical judgment, competent)



Problem Prevention

- Develop a climate of trust
 - *Indicate what the evaluation process is intended to achieve (e.g. help the resident to grow and develop) and discuss when and how evaluations will occur.
- Talk frequently with the trainee and listen carefully to his/her needs and interests.
- Observe and give feedback to your trainee.
- Communicate frequently with the trainee.



Problem Assessment

- If the problem is complex – assess it by asking yourself two questions:
 - Is it real? (or was it just a bad day?)
 - Is it important? (what would happen if nothing were done?)
- If the answer is yes to both questions, look into it further by asking the trainee about it and by asking colleagues.



Guidelines for Handling Academic Performance Problems

- Information taken from Irby, D. and Milam, S. (1989). Legal guidelines for evaluating and dismissing medical students. Academic Medicine.
- Accurately and sufficiently document the nature and occurrence of the problem.



Guidelines for Handling Academic Performance Problems

- Identify the source of the problem:
 - Academic: professional evaluation of performance relative to existing standards and requirements.
 - Disciplinary: violations of institutional rules or policies regarding academic or professional conduct.



Guidelines for Dealing with a Problem Resident

- Information is taken from Wagner, RF (1993). "Medical Student Academic Misconduct: Implications of Recent Case Law and Possible Institutional responses". Academic Medicine.



Guidelines for Dealing with a Problem Resident: Academic

- Ensure fair and equitable treatment for all trainees: develop a public evaluation method, review the entire record of performance, avoid arbitrary and capricious actions by sticking to the facts and following established review process.



Guidelines for Dealing with a Problem Resident: Academic

- Provide sufficient notification of problem and consequences if problem is not resolved, written notification is preferable.
- Provide a formal hearing for trainee to respond.
- Establish a probationary period during which time the individual is closely observed and scrutinized using a remedial plan with a follow-up review date.



Guidelines for Dealing with a Problem Resident: Academic

- Collect information during the probationary period and conduct follow-up review on the established date.
- Make one of the following decisions:
 - Accept resolution of the problem.
 - Continue probationary period.
 - Dismiss trainee promptly for failure to meet the academic standards.



Guidelines for Dealing with a Problem Resident: Disciplinary

- Prevention is the Key: Clearly define the problem, delineate the 3 P's (policies, procedures, penalties), Provide this information in catalogs, brochures, handbooks, and other publications, Obtain information from the hospital's legal office on how to conduct "disciplinary hearings".



Guidelines for Dealing with a Problem Resident: Disciplinary

- When a disciplinary problem occurs: Collect information regarding the accusation of misconduct to a level that is “beyond a reasonable doubt”, assess the “mental state” of individual using the Model Penal Code as a guide, conduct a fair “disciplinary hearing” for the accused, decide on an appropriate punishment based on the “proscribe act” and the individual's mental state in accordance with your institutional policy.



Dealing with a Problem Trainee

- Is not easy.
- Is not fun.
- Is important to do.