

Doctors in Difficulty and Difficult Doctors

A R Mundy

Institute of Urology/UCLH

London

10.00 Chair A.M.'s Introduction: Dr Caroline Walker Psychiatrist, Therapist, Trainer, Coach & Founder The Joyful Doctor

10.10 Managing Doctors in Difficulty, and Doctors exhibiting challenging behaviour

Prof Tony Mundy

Medical Director

University College London Hospitals NHS Foundation Trust

- how do you ensure early identification of concerns
- doctors in difficulty and difficult doctors: what's the difference?
- how to diagnose the nature of the issue
- ensuring open and honest communication
- behavior and conduct: setting the ground rules
- confronting inappropriate or disruptive behavior
- understanding the root cause of the problem and tackling concerns
- developing an approach based on values based leadership

10.00 Chair A.M.'s Introduction: Dr Caroline Walker Psychiatrist, Therapist, Trainer, Coach & Founder The Joyful Doctor

10.10 Managing Doctors in Difficulty, and Doctors exhibiting challenging behaviour

Prof Tony Mundy

Medical Director

University College London Hospitals NHS Foundation Trust

- 1 how do you ensure early identification of concerns
- 2 doctors in difficulty and difficult doctors: what's the difference?
- 3 how to diagnose the nature of the issue
- 4 ensuring open and honest communication
- 5 behavior and conduct: setting the ground rules
- 6 confronting inappropriate or disruptive behavior
- 7 understanding the root cause of the problem and tackling concerns
- 8 developing an approach based on values based leadership

1. You can't ensure. (Daily Mail)
2. You can usually help doctors in difficulty; you usually can't help difficult doctors
3. Doesn't usually matter. In the end it's all about insight and personality
4. Impossible. It's all about insight and personality
5. See below-it's all the same
6. See above-it's all the same
7. See all the above, especially about insight (and personality)
8. I don't know what 'values based leadership' is

Summary and Conclusions

- Separate out the doctors in difficulty (with insight) from the difficult doctors (without insight) and help them, as you usually can
 -
 - Talk to the difficult doctors individually and collectively
 - Get them to behave properly
 - Supervise them for a while, on a regular weekly or monthly basis
 - Confront them if they continue to 'misbehave' and make sure it is widely witnessed
 - Deal with them if they persist and make sure everybody knows

Rationale of Group Handling

- You can never assume people are being honest with you
- You can never assume their behaviour with you is their normal behaviour
- Their words and behaviour are most likely to be a response to you and to the situation they are in
- So meeting on several occasions and in teams or other groups is best to enforce consistency

Doctors in Difficulty

- Struggling with their job
- Struggling with their career
- Struggling with their lives

Difficult Doctors

- Inappropriate personal behaviour
- Inappropriate professional behaviour

Doctors in Difficulty

Four Types of Problem

- Doctors in Difficulty in their job – usually trainees
- Doctors in Difficulty with their career – usually trainees
- Doctors with Difficulties outside their job – usually family
 - Difficult doctors with Difficulties – Oh Dear!

Difficulty at Work

1. Manifestations

- Can't work (probably remediable but....)
 - Won't work (probably not so...)
- Often perpetual locum or other short term appointments

Difficulty at Work

2. Underlying or Predisposing Causes

- Loss of the 'Firm' structure (in hospitals)
- On call rotas / Days off in lieu / 'Statutory' teaching
 - Rotational training
 -
- No consistent team with simple lines of contact for advice or help

How To Deal With Doctors in Difficulty?

Usually Fairly Straightforward

- Discussion*
- Documentation
- Formal /Informal management maintaining a clear distinction
 - Follow up

Difficult Doctors

- Inappropriate personal behaviour
- Inappropriate professional behaviour

Presenting Problems

- Rudeness
- Swearing
- Abusive
- Threatening
 - Lying
- Poor social skills
- Situational difficulties
- Failure to engage
 - Unavailable
- Inappropriate behaviour
 - Unable to cope
 - Clinical error
 - Complaints
 - Incidents
- Whistleblowers

Three Levels of Difficulty

- No harm, just a bloody nuisance
- Potential Harm or Risk to individuals or reputational
 - Harm or Serious Risk

Three Confounding Factors

- The Influence of Social Media (especially Twitter) eg Mesh
 - Medical Organisational Structure
 - Woke Thinking eg Gender

Also

- Conflicts usually relate to different perspectives or different objectives even when if everybody is behaving themselves
 - Arguing about the meaning of words
- Complaining/reporting/whistle-blowing has a stigma
 - Lack of confidence
- Reluctance to confront

One Overriding Critical Factor

- **Insight – or Lack of it**

How To Deal With It?

- Discussion*
- Documentation
- Formal /Informal management and be careful not to move inappropriately between the two
 - Follow up

Why Is This A Problem?

- It involves interacting with people to investigate it and to deal with it
- Judging when to look for help outside the organisation
 - Nothing is ever cut and dried!

Why Is This A Problem?

Clinical Practice

- Practical
- Coping
- Prioritising
- Adapting

-

- Outward looking and Variable
 - Actions
- Colleagues

GMC, NHS, DoH

- Didactic
- Processes
- Procedures
- Codes of conduct

-

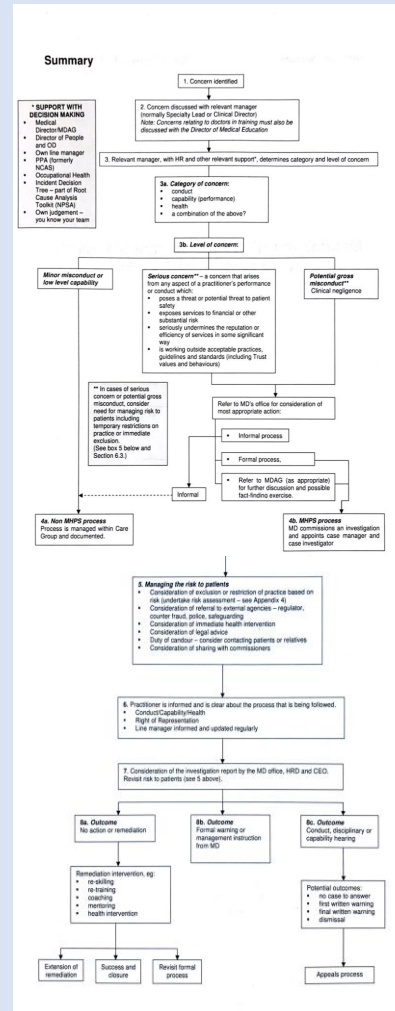
- Introspective and Fixed
 - Words
- Lawyers

GMC

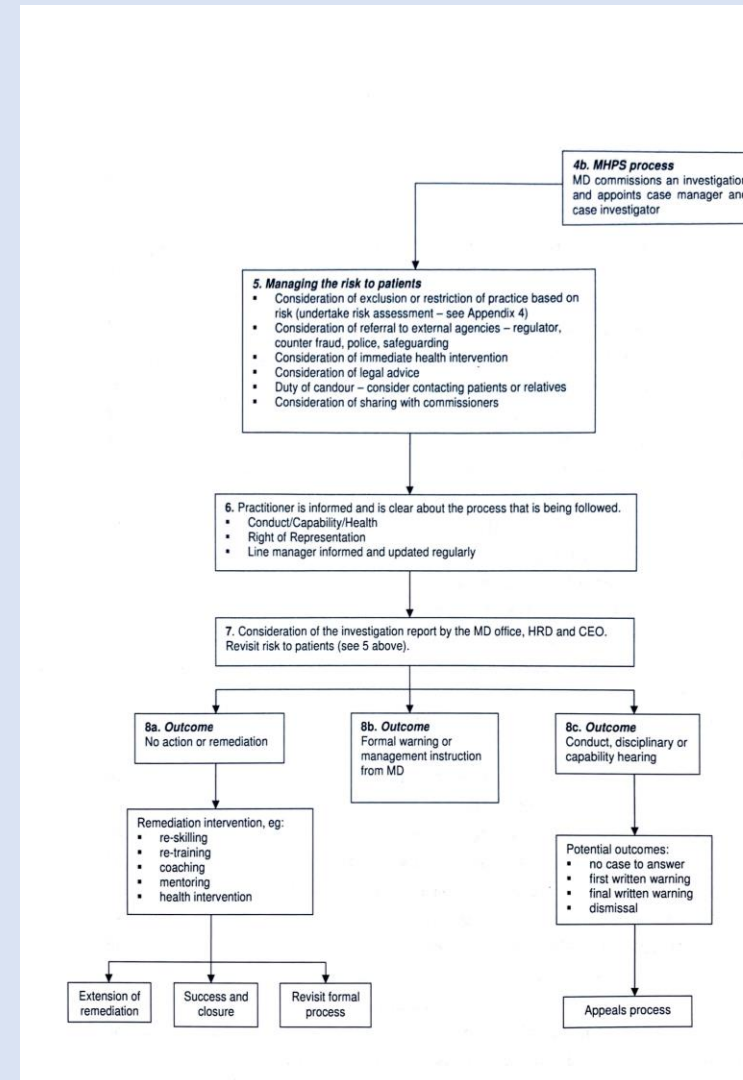
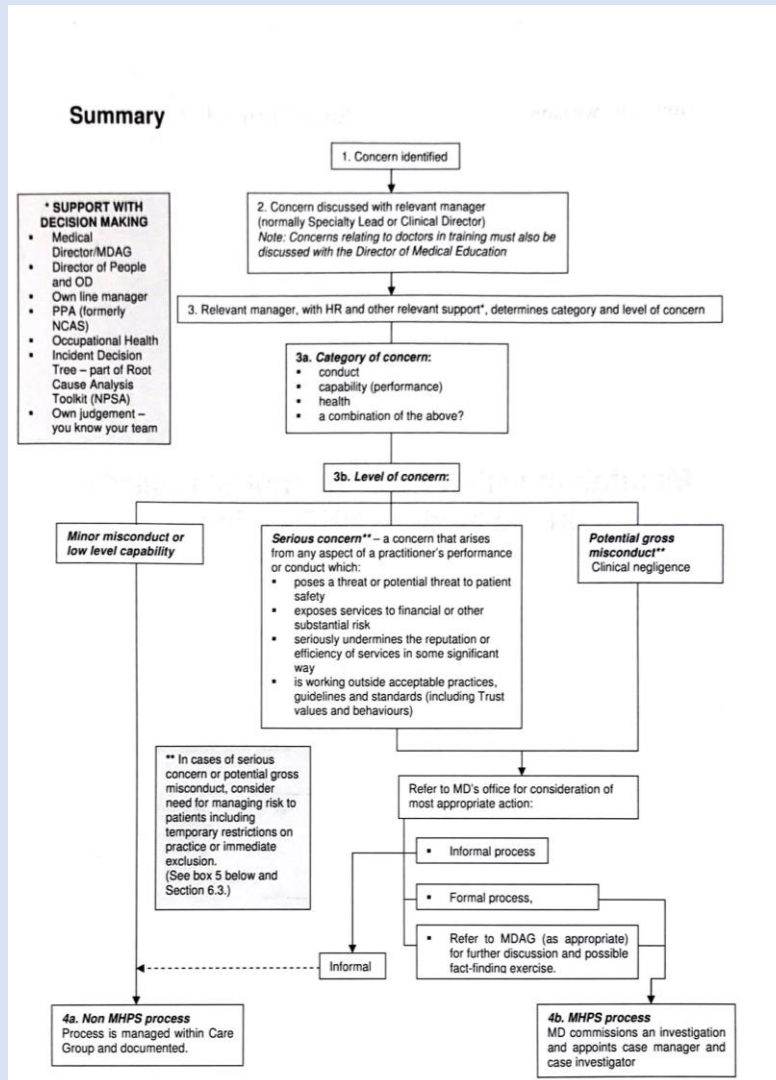
- Health
- Conduct -Attitude and Behaviour
- Capability -Knowledge, Skills and Performance
 - Safety and Quality
 - Communication, Partnership and Teamwork
 - Maintaining Trust

So What Are We Going To Do?

Maintaining High Professional Standards



Let's Make That Easier For You



But...

- Sometimes necessary – e.g. the GMC for serious misconduct
- Occasionally helpful but always consider arranging a College review or an independent ‘expert’ review first

Summary and Conclusions

- Separate out the doctors in difficulty (with insight) from the difficult doctors (without insight) and help them
 -
 - Talk to the difficult doctors individually and collectively
 - Get them to behave properly
 - Supervise them for a while on a regular weekly or monthly basis
 - Confront them if they continue to 'misbehave' and make sure it is widely witnessed
 - Deal with them if they persist and make sure everybody knows