THE TOP 10 CAUSES OF UNPROFESSIONAL CONDUCT

PRESENTATION TO THE
SPRING CONFERENCE 2005 OF
THE COLLEGE OF LICENSE PRACTICAL NURSES
OF ALBERTA
APRIL 29, 2005

James T. Casey, Q.C.
Field LLP
200 Oxford Tower
10235 – 101 Street
Edmonton, Alberta
T5J 3G1
Phone (780) 423-7615
Email: jcasey@fieldlaw.com
**The Top Ten Causes of Unprofessional Conduct**

Based on my experience over the years with hundreds of unprofessional conduct cases in a broad range of professions, the following is my unscientific list of the top ten causes of unprofessional conduct. In no particular order:

1. **Failure to maintain currency of professional knowledge and competence:**
   - Professions and the health care system evolve. Professionals must keep pace with the change.
   - There are many complaints of unskilled practice about professionals who once were very competent but who have not maintained their competence.
   - “That’s how we did it when I was trained 20 years ago”, is not a valid defence.
   - **What you can do:**
     - Maintaining competence on an ongoing basis is a central tenet of professionalism.
     - Maintain a current knowledge base.
     - Continuing Competence Programs are ideal tools. Use them.
     - Take advantage of continuing education opportunities.
     - Be familiar with your employer’s policies and procedures.
     - Understand the standards of practice for your profession.
     - Be active in professional organizations; read professional publications.

2. **Failure to seek assistance or make appropriate referrals.**
   - Professionals may encounter difficult situations for which they do not have the necessary skills. Unprofessional conduct may occur where the professional “ploughs ahead” without getting assistance.
   - **What you can do:**
     - Recognize that we all have limitations.
     - Realize that seeking assistance is not a form of weakness; it is a sign of professional strength.
     - Where necessary seek assistance from trusted colleagues or from your supervisor. Don’t be afraid to ask a colleague for a second opinion. Where appropriate, refer the patient to someone with the necessary skills.
3. **Difficulties in a professional’s personal life affect their work-life.**

- We rarely have “water-tight compartments” in our lives. Our work can affect our personal and home-life and difficulties in our personal and home-life can negatively affect our work.

- Personal difficulties might be related to problems with marriages, relationships, children, finances, or depression.

- It is common for serious personal difficulties being experienced by a professional to “spill-over” into the workplace giving rise to a risk of unprofessional conduct.

- **What you can do:**
  
  - If you are experiencing serious difficulties in your personal or home-life, then realize the potential for the “spill-over effect.”
  - Also realize that you might not be the most objective person with respect to whether your work is being adversely affected.
  - If you are having difficulties coping with problems in your personal life and there begins to be a “spill-over” to work, then get help. Seek out family, friends, trusted colleagues. Consider taking some time off work. Consider counselling through Employee Assistance Programs.

4. **Alcohol and drug addictions**

- Alcohol and drug addictions are the root cause of some of the most serious cases of unprofessional conduct.

- **What you can do:**
  
  - Keep yourself well.
  - Realize that addiction to prescription drugs is a danger for health care professionals because of easy accessibility.
  - Many professionals with substance abuse problems have destroyed their entire professional career because they have either refused to seek help or sought help too late.
  - Get help. Seek counselling. Contact Employee Assistance programs.
  - There are addiction recovery programs in Alberta specially designed for health care professionals.
5. Poor communication

- Many unprofessional conduct complaints are caused by poor communication between the professional and the patient or between a professional and their colleagues.

- What you can do:
  
  o Appreciate that part of being a true professional is being a good communicator.
  o Ask yourself: Are you a really good listener? Could you be a better communicator? Would it be useful to take an effective communication course?
  o Realize that effective communication is at the heart of the “informed consent” process.
  o Consider how your remarks are perceived by others. Avoid cavalier or “smart-aleck” comments in the presence of patients. These types of comments tend to startle and alarm patients and may prompt a complaint. Many comments that are appropriate when made only in the presence of colleagues are not appropriate in the presence of patients. “Don’t wash your dirty laundry in public.”
  o You care about your patients. Do your patients understand that you care? Do your actions and your verbal and non-verbal communication demonstrate that you care? Retain professional distance and demeanour but demonstrate to your patients that you do care. How would you want to be treated if the situation was reversed and you were the patient? What would you expect if the patient was one of your family members? Very few patients file unprofessional conduct complaints about health professionals who they perceived to be caring. Patients who leave a health care facility feeling, “No one cared about me”, are more likely to file complaints.

6. Failure to appropriately address patient concerns.

- A patient or a family member with a concern about a patient’s care or a professional’s conduct will typically first approach the professional or a manager about their concerns. Many unprofessional conduct complaints are filed because the person felt that their concerns were not taken seriously by the institution or the professional.
- **What you can do:**
  
  o Take all concerns and complaints seriously. “Actively listen” to the person making the complaint.
  
  o Be careful of labelling a patient as a “whiner” or a “complainer”. Patients, and their families, can often be difficult and sometimes unreasonable. However, we must remember that the patient and their family are often under significant emotional and physical stress in an environment which they do not fully understand. An individual who feels that a professional or an institution has been dismissive about their concerns is much more likely to file a formal professional conduct complaint.
  
  o Understand the power of the “15 second apology” acknowledging the feelings of the person complaining. Example: “I am so sorry that all of this has resulted in you being distressed about your daughter’s care. I will advise my manager of your concerns.” You can often effectively address a person’s concerns without getting into a long debate about who was wrong or right.
  
  o Persons who feel their complaint was taken seriously and effectively addressed rarely file a complaint of unprofessional conduct with a regulatory college. For most people, filing such a complaint is a last resort when they perceive that nothing else has worked.

7. **Environmental Factors**

- Various environmental factors can be a contributing cause to a professional engaging in unprofessional conduct. For example, there may be excessive work demands, a lack of mentoring and supervision, or inappropriate workplace practices. A professional may also be assigned tasks by their employer which the professional is not completely competent to perform due to inexperience or lack of training in a particular area.

- **What you can do:**

  o Remember that regardless of the environment, it is the professional’s personal obligation to ensure that their own work meets professional standards. If you have failed to maintain professional standards, a defence of “that’s how we all do it at work” is unlikely to be successful.
  
  o If you have concerns about the environment’s effect on your ability to practice in a professional manner, seek advice from trusted colleagues. Raise the issue with your supervisor. If you do not obtain any assistance from your supervisor, seek the advice of your professional organization.
8. **Personality conflicts escalate to unprofessional conduct.**

- It is not unusual for the roots of unprofessional conduct to be in a personality conflict between a professional and a colleague, between a professional and his or her supervisor, or between a professional and a patient. A serious personality conflict can cause a professional to lose their objectivity and a minor dispute which should have been resolvable may escalate to a major confrontation.

- **What you can do:**
  
  o Understand that there will always be colleagues, supervisors, and patients with whom it is difficult to get along. However, this does not alleviate you of the central obligation of maintaining a professional demeanour and professional interactions. If you are experiencing a personality conflict, ask yourself honestly whether it is affecting the quality of your work. Are your interactions still meeting professional standards?
  
  o If you are experiencing a personality colleague with a colleague, deal with the issue privately and not in the presence of patients.
  
  o If there is a serious personality conflict with a patient, consider arranging for the patient’s care to be provided by a different person. If you have been assigned to provide exclusive care to the patient, then you should obtain the patient’s consent to the transfer.

9. **Complacency about professional standards**

- Some professionals with a great deal of experience become complacent about professional standards and begin to develop “sloppy” practices.

- **What you can do:**
  
  o Remember that a commitment to professionalism is a life-long commitment. Professional standards apply as much to a new graduate as a professional with 30 years experience.
  
  o Regularly work on refreshing your understanding of professional standards.
  
  o Don’t count on your experience and seniority to help you get away with sloppy practices.
10. Professional Documentation

- A failure to adequately chart or document causes significant problems for professionals.
- If you have acted professionally and appropriately, then proper documentation will be your best defence.
- Many unprofessional conduct complaints are referred to a hearing because of significant disagreements about what actually happened. If a case comes down to, “He said, she said,” then you are at risk. Appropriate documentation can objectively demonstrate what really happened.

- What you can do:
  - Follow professional charting and documentation practices.
  - Understand and follow your employer’s documentation practices with respect to critical incidents, patient complaints, etc.
  - Document in accordance with professional standards: write legibly, write accurately, record concisely, record events chronologically, record information immediately or ASAP, ensure all documentation is dated and signed or initialled, write in ink, use uniform terminology and correct errors in documentation openly and honestly.
  - When you know that concerns are being raised by a patient or family member, ensure that every step you take is adequately documented.

Professionalism is not about perfectionism. All professionals make mistakes. However, we all need to ensure that we learn from our mistakes. By being alert to some of the root causes of unprofessional conduct we can do our very best in ensuring that we act as “true professionals”.

James T. Casey, Q.C.
Field LLP
2000 Oxford Tower
10235 101 Street
Edmonton, Alberta
T5J 3G1
Phone (780) 423-7615
e-mail: jcasey@fieldlaw.com