

INSIGHT 1

Negative Patient Outcomes Increase with Surgeons Who Exhibit Unprofessional Behavior

Whether patients have problems after surgery could depend on their surgeons' behavior, a new study suggests. The study, published in the journal of JAMA Surgery, found that patients were at higher risk of complications if their surgeons were more often reported by colleagues for unprofessional behavior in the three years leading up to the surgery. In the study, 14.1% of patients whose surgeons

had been reported by coworkers at least four times experienced medical or surgical complications, including subsequent infections, lung, and kidney problems. The same was true for 10.7% of patients whose surgeons had zero reports.

The numbers -- which come from more than 13,600 patients and roughly 200 surgeons at two academic medical centers -- may seem like a small increase, but if they are representative of the country at large, that could mean more than half a million additional complications every year, just teasing out the effects of these unprofessional behaviors ... which also results in costs.

Surgeons might be reported for a range of unprofessional conduct - like yelling at co-workers or disregarding hospital policies - that need not include examples of direct harm or neglect to patients.

"It's not just how well you cut, sew and tie. It's how well you communicate, lead and explain that matters to how your patients do."

**Dr. Alex Haynes
Surgical Oncologist**

INSIGHT 2

Surgeon Non-Clinical Behavior is Associated with Malpractice Claims

Surgeon behavior (as assessed by the 360-degree review, which measures nontechnical skills) is associated with the risk of malpractice claims. This highlights the importance of nontechnical skills such as teamwork and communication in exposure to malpractice risk. Malpractice data were obtained on the 264 surgeons,

for whom it were available (from the original sample of 385 surgeons who underwent the 360-degree review). Out of the 264 reviewed surgeons, 237 (89.8%) came from general surgery (including cardiac, thoracic, vascular, and plastic surgery) and 27 (10.2%) came from orthopedic surgery. There were 8472 ratings by rater type: 4222 ratings by peer physicians (49.8%) and 4250 ratings by clinical and administrative staff/supervisors or managers (50.2%). The range of claims among these 264 surgeons was 0 to 8, with 48.1% of surgeons having at least 1 claim.

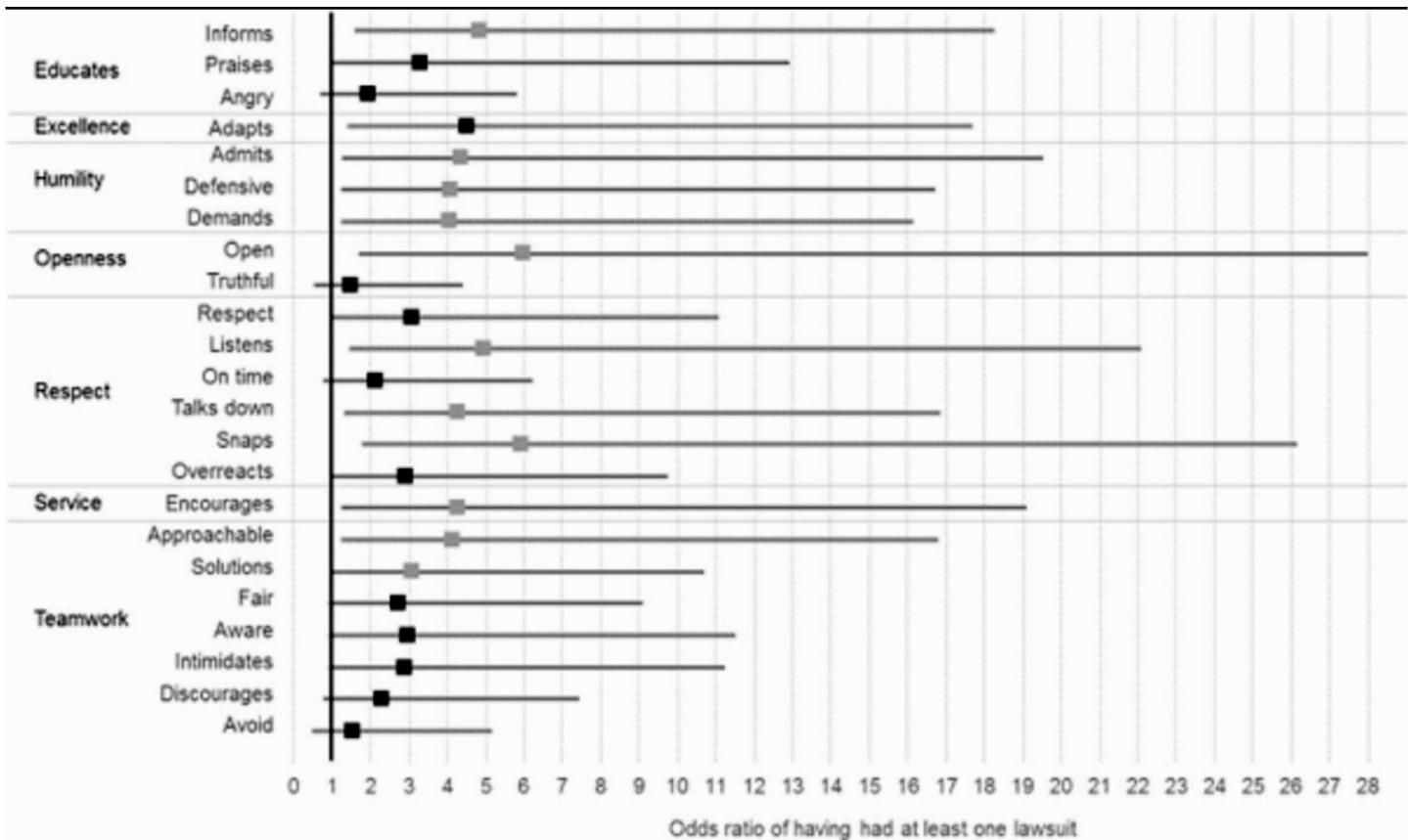
Figure 1 presents the 360-degree review and malpractice data. The overall directionality of the data shows an association between behaviors (as captured by the 360-degree review) and malpractice claims. Analysis on the association of malpractice claims with peer 360-degree review results, 8 of 14 positive behaviors were significantly associated with not having malpractice claims and 4 of 9 negative behaviors were associated with having malpractice claims ($P < 0.05$). Table 1 summarizes the highest odds ratios of having at least 1 malpractice claim given being in the bottom 10% in mean score on each question among peer physician ratings.

Table 1—Highest Odds of Having at Least One Malpractice Claim

Behaviors: Positive and Negative*	Odds Ratio
Snaps at others when frustrated*	5.92
Talks down*	4.28
Considers suggestions	5.99
Pays attention	4.97
Informs others	4.86

*Signifies negative behaviors.

Figure 1—Lawsuits versus mean score in bottom 10% on each question



Source Insight 1: Cooper WO, Spain DA, Guillaumondegui O, et al. Association of Coworker Reports About Unprofessional Behavior by Surgeons With Surgical Complications in Their Patients. JAMA Surg. Published online June 19, 2019

Source Insight 2: Multisource Evaluation of Surgeon Behavior Is Associated With Malpractice Claims, Annals of Surgery: July 2019 - Volume 270 - Issue 1 - p 84–90