

## Utilizing an Ombudsperson for Education to Promote a Culture of Well-Being in the Clinical and Learning Environment: The C.A.R.E (Coach, Advocate, Resolve, Empower) Program

### **Need:**

Despite ongoing efforts to improve the clinical and learning environment and address well-being, depression and burnout persist among physicians and trainees. Negativity bias is also known to be reinforced serially in medical education among physicians and trainees which leads to creating a culture of fear and retribution, perceived mistreatment and adverse consequences on personal and professional well-being. Tools and skills utilizing positive psychology, coaching, the art of asking open honest questions have been shown to be powerful to counteract the negativity bias and aid in achieving a desired culture change and ensure a humanistic positive clinical learning environment for physicians and current and future trainees. In an attempt to create this culture of trust many programs have created the position of Ombudsperson for ” to promote a positive learning climate. An Ombudsperson serves as an official, independent, impartial party who acts as an advocate and resource to address complaints or concerns regarding training-related issues and by working alongside Graduate Medical Education (GME) leadership including the Designated Institutional Official (DIO) and Director of GME to resolve conflicts.

### **Goal:**

The position of Ombudsperson for GME is created to assist in promoting a positive climate for residency and fellowship education. The Ombudsperson will serve as an independent, impartial, informal, and confidential resource for residents and fellows with training-related concerns.

### **Methods:**

This evidence-based interactive and experiential session will be available to each departmental program faculty quarterly (will serve as faculty development also).

The session will focus on a discussion of the ombudsman principles and services.

Through facilitated discussions, self and shared reflection and worksheets, the participants will have an opportunity to practice and share the tools necessary to take on the role of an Ombudsperson or create a program in their own department.

**Learning Objectives:**

1. Explore the guiding principles in creating an Ombudsperson program.
2. Develop skills to be peer coaches.
3. Experience the tools required for coaching, advocacy and relational trust.
4. Practice the art of asking open honest questions and empowering.

**Appointment:**

- Ombudsperson for non-surgical specialties
- Ombudsperson for surgical specialties
- Department Chair will be exempt from consideration as an Ombudsperson as this might conflict with his or her Chair role versus serving as a resident or fellow resource.
- The Resident Advisory Board and/or House Staff Association can also recommend (by majority vote) the two faculty or staff members being considered. The Associate Dean for Well-Being and the DIO will review and approve the candidates based on their experience and skills as outlined below.
- The Ombudsperson will serve a term of 2 years, with an unlimited number of terms available.

**Role and Responsibilities of the Ombudsperson:**

*The Ombudsperson C.A.R.E (Coach, Advocate, Resolve, Empower) programs needs a person who role models C.A.R.E (Compassionate & Concerned, Attentive & Analytical, Responsible & Realistic, Ethical & Enthusiastic)*

- Advocate on behalf of residents and fellows when needed during any program, staff, or disciplinary action to ensure that the resident is being treated fairly and that policies and procedures are being followed.

- Provide a safe and confidential opportunity and space for residents and fellows to be authentic and be heard regarding their suggestions and concerns.
- Assist in identifying options and providing resources to advocate on behalf of residents and fellows and resolve concerns.
- Educate about policies and procedures regarding GME.
- Empower and coach individuals and when necessary refer individuals to appropriate formal processes and resources.
- Facilitate communication between conflicting parties (as needed in conjunction with the parties involved, Departments, Director of GME and DIO)
- Report to the DIO and Director of GME regarding confidential recommendations about operations, systems, policies, and processes that could implement change to improve the Clinical Learning Environment.
- Share feedback about trends and concerns that would be important for CLER.

The Ombudsperson:

- \* Provides a neutral safe and confidential environment to talk
- \* Listens to concerns and complaints and discuss appropriate options
- \* Helps to evaluate those options
- \* Assists residents and fellows to resolve those options
- \* Mediates conflicts and convenes meetings with parties needed
- \* Provides information and refers to appropriate resources when necessary

The Ombudsperson does not:

- \* Adjudicate or determine guilt of any party in a dispute
- \* Get involved in any formal litigation or testify in court
- \* Provide legal advice
- \* Assign sanctions on individuals

- \* Replace any official university official, department, or process, including complaints that should be filed with the UTHSC Office of Equity and Diversity, grievances or appeals.
- \* Keep records of students and/or conversation.

### **What is the role of an Ombudsperson?**

The Ombudsperson's has the following principal functions: Receives, reviews, investigates and resolves concerns or complaints and undertakes a range of additional functions that fit within the broad category of integrity oversight.

The Ombudsperson always observes an independent and impartial approach to the conduct of investigations as well as observing procedural fairness at all times. Information obtained by the Ombudsperson in an investigation is confidential.

### **Skills:**

- **Active Listening, Negotiation and Communication** - Giving full attention to what other people are saying, taking time to understand the points being made, asking questions as appropriate, and not interrupting at inappropriate times. Speaking with others to convey information effectively. Bringing others together and trying to reconcile differences.
- **Critical Thinking and Complex Problem Solving** - Using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusions or approaches to problems. Identifying complex problems and reviewing related information to develop and evaluate options and implement solutions.
- **Systems Analysis, Coordination, Collaboration and Social Perceptiveness** - Determining how a system should work and how changes in conditions, operations, and the environment will affect outcomes. Being aware of others' reactions and understanding why they react as they do. Adjusting actions in relation to others' actions. Being open to change (positive or negative) and to considerable variety in the workplace.
- **Innovation:** creativity and alternative thinking to develop new ideas and solutions

**References:**

1. <http://www.acgme.org/Residents-and-Fellows/Report-an-Issue/Office-of-the-Ombudsman>
2. <https://news.aamc.org/medical-education/article/academic-medicine-aims-foster-more-supportive-lear/>
3. <http://med.umkc.edu/gme/ombudsman>
4. Haizlip J<sup>1</sup>, May N, Schorling J, Williams A, Plews-Ogan M. Perspective: the negativity bias, medical education, and the culture of academic medicine: why culture change is hard.
5. <https://medschool.duke.edu/education/student-services/office-student-Ombudsman>

Adapted from the above references