

Erasmus School of  
Health Policy  
& Management

# Addressing Poor Performance of Healthcare Professionals

Experiences from the Netherlands

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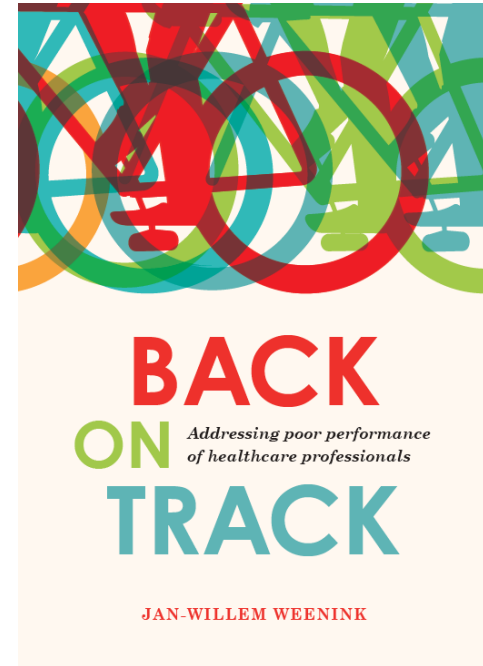
9 March 2018

**Erasmus University Rotterdam**



# My PhD thesis

- Academic Collaborative with Dutch Healthcare Inspectorate
- How do professions and professionals address poor performance of individual healthcare professionals?
- 8 licensed professions



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Survey on knowledge and experiences with poorly performing colleagues

*BMJ Qual Saf 2015*



Interviews with disciplined professionals about impact on personal and professional life

*BMJ Open 2015*



Interviews with professional associations about support and policies regarding poor performance

*Int J Qual Health Care 2017*

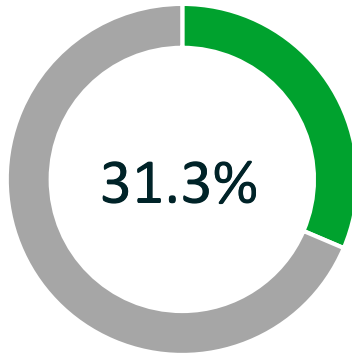


Systematic review on outcomes of remediation and rehabilitation programmes

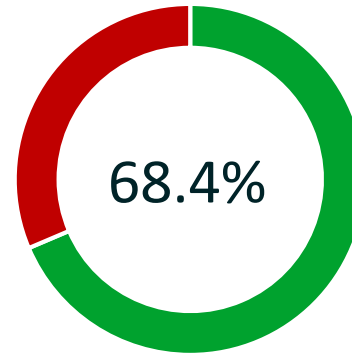
*BMJ Qual Saf 2017*

# Poorly performing colleagues

Experience in previous 12 months



Indicated to have taken action



- For physicians: a protocol with steps to take in case of a poorly performing colleague
- For dentists and pharmacists: a place where one can report a poorly performing colleague (aimed at support and recovery)

# Disciplinary process

- Aim: quality assurance
- Scope: professional performance of individual professionals
- ±1500 complaints per year, mostly by patients or relatives
- Measure intended as correction rather than punishment



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# Impact

Psychological: misery, fear and long-term impact

*“It gets you down and almost makes you depressed, although you get over it as well.”*

*“I don't relive being in front of the disciplinary board anymore. For about a year I would wake up every night at 3 AM and would start to explain what had happened.”*

Professional: work, defensive practice and financial

*“Yes, I'm constantly hedging.”*

*“...And after they've visited me, they search the internet, and then immediately cancel their treatment.”*

A handwritten signature in black ink, appearing to read "Erasmus". The signature is fluid and cursive, with a large initial 'E'.

# Enhancing factors

Publication of measures, media coverage  
and duration of the process

*“A criminal is only listed with his initials,  
and they have done something wrong on  
purpose.”*

*“Patients can say whatever they want in  
the media, but a doctor can't defend  
himself because when he does say  
something, he violates the law of  
confidentiality.”*

*“It's terrible, and it goes on and on. The  
complete process lasted four years.”*

The logo for Erasmus, featuring a stylized, handwritten-style script of the word "Erasmus" in a dark color.

## A corrective measure?

- Follow-up research shows that 17% of disciplined professionals agree with the verdict
- Measure not meant as punishment, but (some) professionals do experience it as such



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# Programmes to get back on track

In the Netherlands, there are programmes for addicted physicians and for dentists and pharmacists with performance concerns



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# 38 studies on national or state programmes

Majority from USA (58%), about physicians (79%), focusing on SUD (63%)



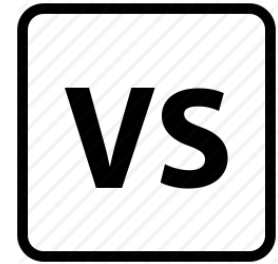
Substance use disorder

High programme completion  
80-90% employed after  
treatment



Knowledge and skills deficits

Mixed outcomes across studies



Comparing problems &  
professions

???

# Concluding remarks

In my thesis, I argue that it is necessary to:

- Create and clarify reporting opportunities
- Take into account the impact of investigation
- Structure recovery for professionals with performance problems

**Current issues in the Netherlands...**

The Erasmus logo, featuring the word "Erasmus" in a stylized, cursive script.

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# Thank you

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# Literature

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