

An Environment of Integrity

New Faculty Orientation

2017

Integrity in

- Education
- Clinical Care
- Research

Speakers for this session:

Ann Brown, MD, MHS

Vice Dean for Faculty
Professor of Medicine

Stephen Lisberger, PhD

George Barth Geller Professor
Chair of the Department of
Neurobiology

Donna Kessler, PhD

School of Medicine Research
Integrity Officer

Catherine Kuhn, MD

Director, Graduate Medical
Education

Associate Dean, Graduate Medical
Education

Professor of Anesthesiology

Thomas Owens, MD

Senior Vice President and Chief
Clinical Officer

Duke University Health System

Associate Professor of Medicine
and Pediatrics

Duke University Medical Center

After this session you will be able to:

- Describe policies that support integrity
- Identify institutional resources to support professionalism
- Appreciate the importance of being able to talk about questionable behaviors

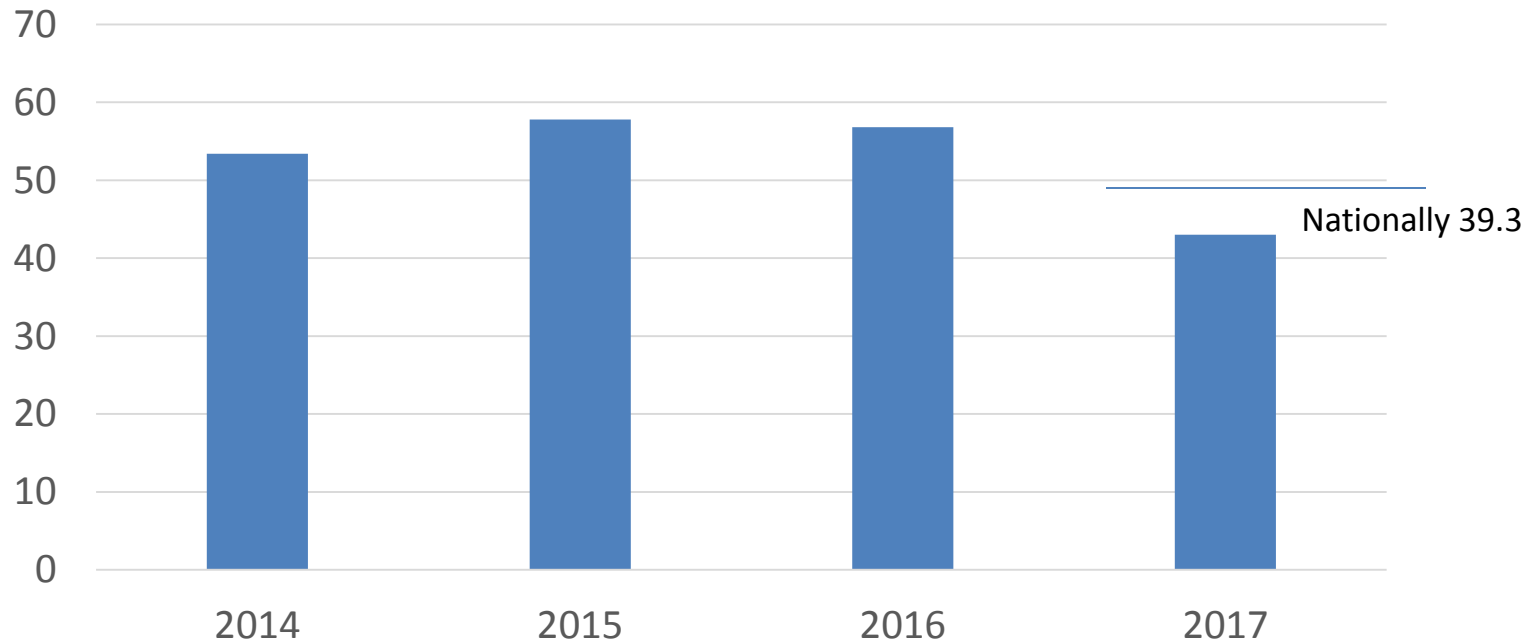
Student Mistreatment on AAMC Graduation Questionnaire

% of students who indicated they personally experienced negative behaviors, excluding “publicly embarrassed”

Year	Duke students % saying “yes”	National % saying “yes”
2014	53.4%	39.9%
2015	57.8%	38.7%
2016	56.8%	38.1%
2017	43%	39.3%

GQ (MS4) data from 2017

Percent of Duke MS4s reporting "yes" for mistreatment (excluding public embarrassment)



Student Mistreatment on AAMC Graduation Questionnaire

Sources of publicly humiliated only behaviors

	2014	2015	2016	2017	All
Pre-clerkship faculty	0%	0%	3.7%	1.1%	0.9%
Clinical faculty (classroom)	4.5%	0%	2.5%	0%	1.2%
Clinical faculty (clinical setting)	17%	12%	14.8%	16.1%	13.3%
Resident/Intern	14.8%	16.9%	19.8%	9.7%	9.8%
Nurse	5.7%	2.4%	6.2%	1.1%	3.8%
Administrator	1.1%	1.2%	1.2%	2.2%	0.6%
Other institutional employee	1.1%	1.2%	0%	3.2%	1.1%
Student	1.1%	1.2%	2.5%	1.1%	1.5%

2017 Survey of Second Year Experiences

If you experienced mistreatment, what were the sources?
(students could pick more than one)

Source	2017 Percent (%)	2017 Total Number (n)
Residents/interns	65.5%	36
Clinical faculty in wards/clinics	61.8%	34
Nursing staff	20%	11
Other hospital staff	7.3%	4
Other students	7.3%	4
Clinical faculty in classroom	5.5%	3
Administrators	1.8%	1
Patients	1.8%	1
Non-clinical faculty in classroom	0%	0

2017 Survey of Second Year Experiences

Types of Mistreatment

	All the time	Often	Occasionally	Rarely	Never	Not Sure
I experienced discrimination	0%	1.6%	11.1%	25.4%	58.7%	3.2%
I experienced harassment	0%	0%	4.8%	9.5%	82.5%	3.2%
I experienced sexual harassment	0%	1.6%	1.6%	4.8%	92.1%	0%
I experienced verbal abuse/intimidation	0%	0%	17.5%	39.7%	42.9%	0%
I experienced physical abuse or intimidation	0%	0%	0%	4.8%	95.2%	0%
I experienced requests for personal favors	0%	0%	3.2%	17.5%	79.4%	0%
I experienced neglect	3.2%	17.5%	49.2%	15.9%	12.7%	1.6%

Policy on Appropriate Treatment of Learners

- Policy is on flash drive.
- Duke is “committed to creating and maintaining a positive learning environment for learners that is respectful and appropriately attentive to their learning needs and free from conduct by teachers that could be interpreted by learners as mistreatment”
- Contact: Ed Buckley MD, Vice Dean for Education

Statement on faculty professionalism

- Covers questionable research practices and academic endeavors
- Contact: Ann Brown MD MHS, Vice Dean for Faculty

Statement on Faculty Professionalism (1)

- All School of Medicine faculty are expected to uphold the highest standards for professional conduct and ethical behavior. Faculty are expected to treat colleagues, learners, team members, patients and visitors with courtesy, respect, and dignity. Faculty are responsible for cultivating a respectful and inclusive work environment, for modeling professional conduct, and for responding to unprofessional behavior on the part of others. All faculty are expected to adhere to applicable Duke University and Duke University Health System policies and procedures.

Statement on Faculty Professionalism (2)

- Unprofessional behavior includes that which is disruptive, intimidating, threatening, violent, inappropriate, illegal or in violation of University or Health System policy. To foster a just and safe community, unprofessional behavior will be addressed, with interventions aimed at promoting accountability, insight, and appropriate changes in behavior. Disruptive behavior may result in sanctions, up to and including the initiation of termination proceedings.

Integrity Line

- Available 24/7/365 for any faculty or staff to report complaints, including about faculty professionalism
- Reports can be made anonymously
- Managed by outside company
- **If you see it, report it**

Integrity Line

800-826-8109

Faculty Professionalism Process

- Complaint referred to Dean
- Dean refers to Dean's Council on Faculty Conduct
- Peer Review Committee makes recommendation to Dean

Clinical Professionalism: PACT

The Duke University Health System **Professional Accountability Program (PACT)** provides a framework for ensuring physicians (and other healthcare providers) are consistently exhibiting behaviors that support the DUHS Core Values.

“Caring for Our Patients, Their Loved Ones and Each Other”

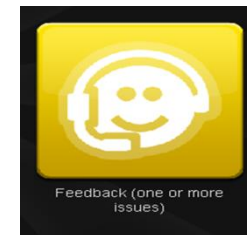
Teamwork | Integrity | Diversity | Excellence | Safety

Duke Professional Accountability Program (PACT)

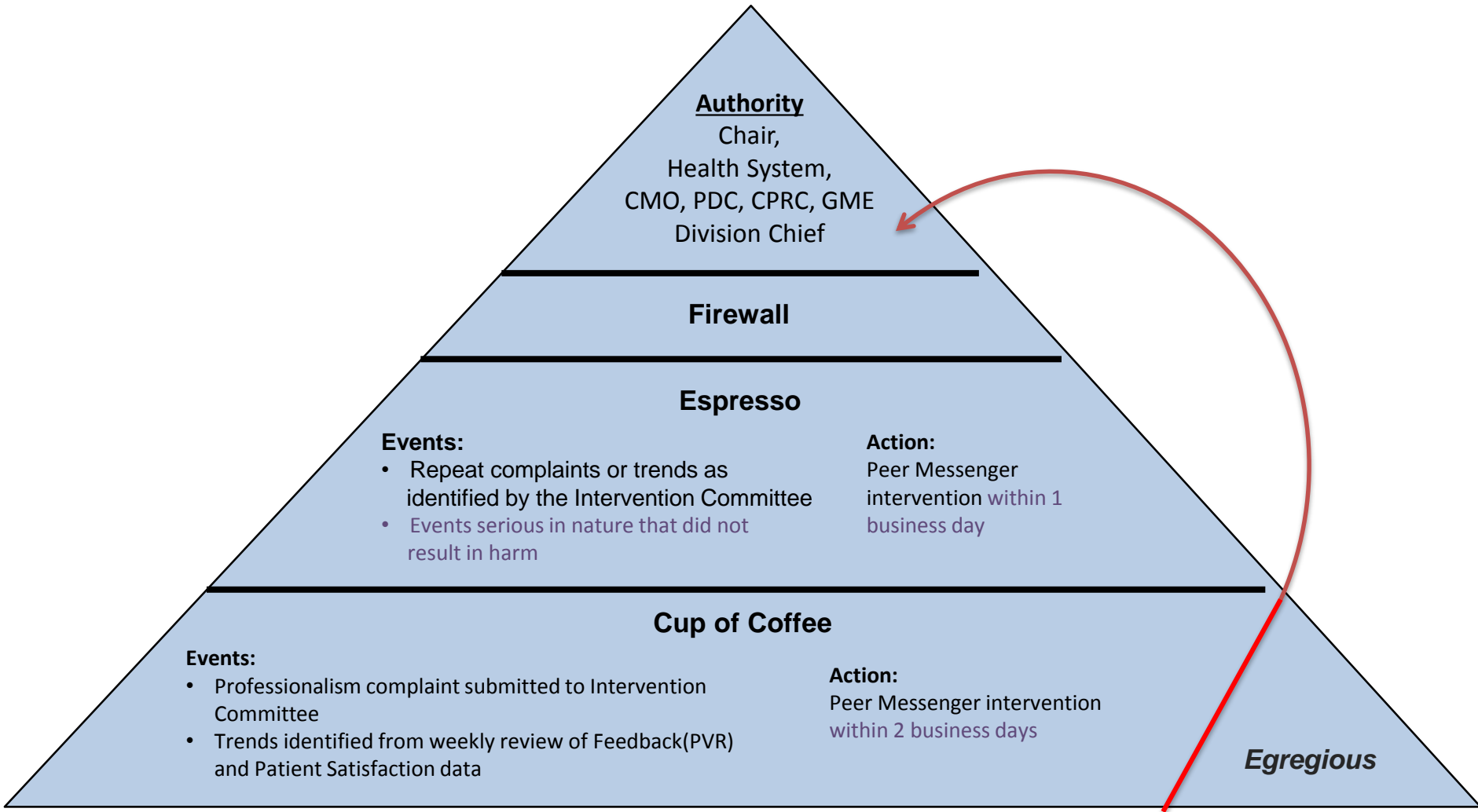
- Promote behaviors consistent with DUHS core system values
- Apply the principles of a Just Culture (Accountable Culture) to the behavioral choices / responses of providers that may negatively impact patient safety and quality
- Improve communication and thus effectiveness and efficiency of the healthcare team
- Support the delivery of high quality patient-centered care
- Reduce medical malpractice risks
- Uphold the Duke Health Code of Conduct: Integrity in Action

Sources of Data for PACT

- The **Safety Reporting System (RL6)** provides a centralized location for reporting concerns 24hours a day, 7 days a week by peers, staff, and learners.
- Allows confidential reporting that is protected by attorney-client and peer review privileges
- The Safety Reporting System (RL6) allows voluntary reporting of issues and concerns related to
 - Communication
 - Care and Treatment
 - Health Care Provider Concern/Respect
 - Accessibility and Availability



PACT Process



Information on Duke Health Intranet Site

The screenshot shows a web browser window displaying the Duke Medicine Intranet. The address bar shows the URL <https://intranet.dm.duke.edu/SitePages/PACT.aspx>. The page header includes the Duke Medicine logo and the text "Duke Medicine Intranet". A navigation menu lists various departments: DUH, DRH, DRAH, DHCH, DCI, PDC, DPC, DHTS, PRMO, SOM, SON, and DUHS Nursing. A search bar is present with the text "Search this site...".

The main content area displays an email announcement titled "DUHS Professional Accountability Program (PACT)". The email header includes:

- To: Duke Medicine Clinical Faculty
- From: Tom Owens, MD, Chief Medical Officer, DUHS
William Richardson, MD, Professor Orthopaedic Surgery
- Re: Introduction of New Professional Accountability Program
- Date: June 22, 2015

The body of the email states: "As part of our commitment to fostering a healthy work climate, on July 1, 2015, Duke University Health System (DUHS) will introduce a new Professional Accountability Program (PACT) to provide a framework for ensuring physicians are consistently exhibiting behaviors that support our important health system values."

Below the email text, there are several links:

- Professional Accountability Program (PACT) Resources for Faculty
- Professional Accountability Program FAQ
- DUHS Safety Reporting System
- Support Services Resources for Faculty
- School of Medicine -- Resources for Faculty Professionalism

A red arrow points to the "Support Services Resources for Faculty" link.

On the left side of the page, there is a "Quick Links" menu with various options such as "Intercom for Managers", "Transforming Our Future", "DUHS Compliance", "Duke Buses & Shuttles", "Duke Medicine Policy Center", "Duke@Work", "DukeShift", "Human Resources", "Interpreter Services", "Learning Management System", "News & Announcements", "Outlook WebMail", "Phonebook", "Safety Reporting System", "Send a Page", "Time and Attendance", and "More...". At the bottom of the menu is "All Site Content".

Intranet.dh.duke.edu - search for PACT

PACT Program Contacts

William J Richardson, MD

Professor Orthopaedic Surgery

Email: richa015@mc.duke.edu

Phone: 919-684-5711

Cynthia Gordon, RN

Administrative Director

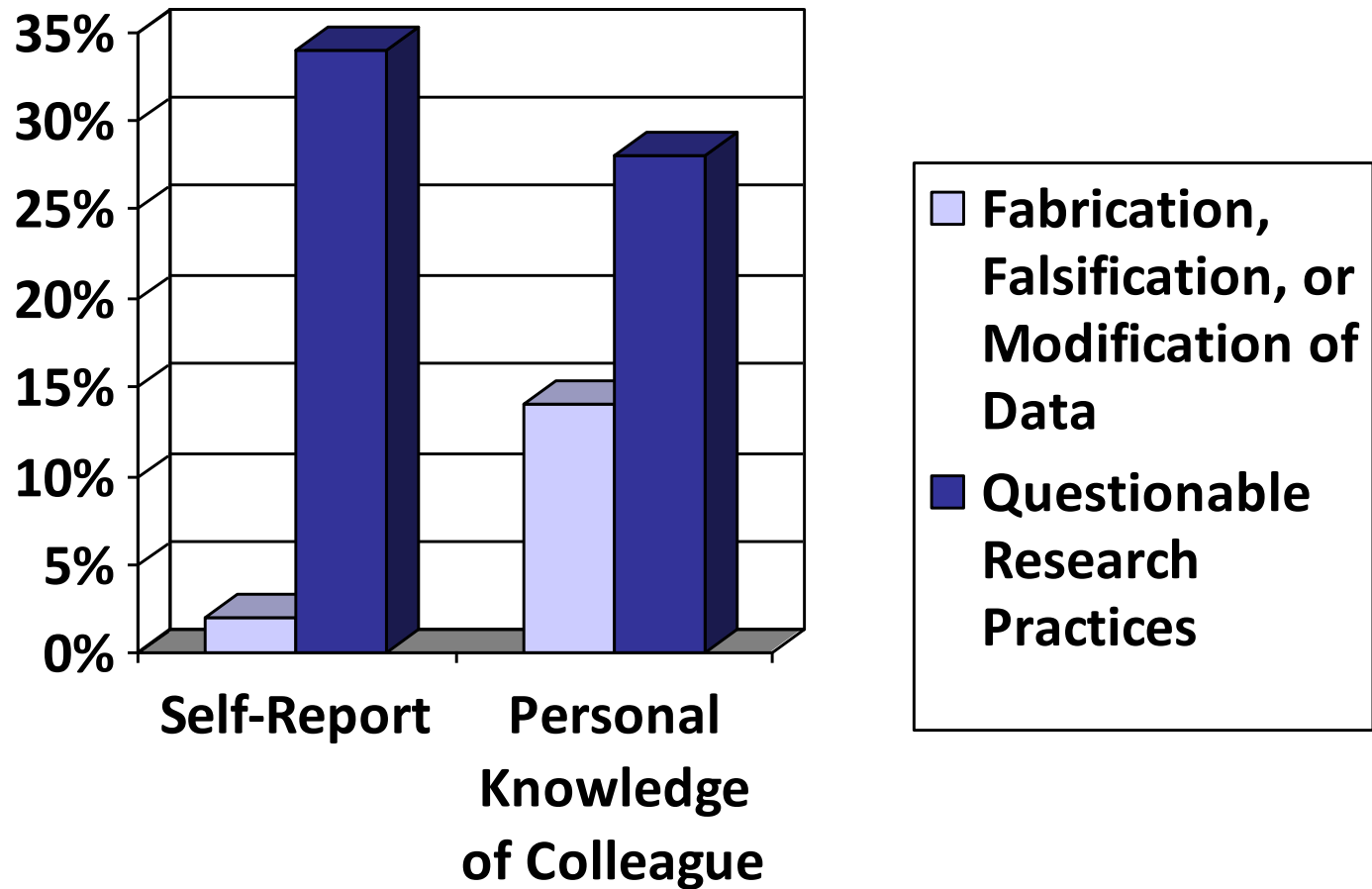
Administrative Director, Duke Patient Safety Center, DUHS (Patient Safety, Nursing)

Email: cynthia.gordon@duke.edu

Phone: 919-681-3906

SCIENTIFIC INTEGRITY

Recent meta-analysis on scientific misconduct:



Three principles:

- 1. Getting it RIGHT is the first priority
 - Getting it into Nature or Cell is less important
- 2. Honesty
 - Designing experiments
 - Collecting (blinded) and analyzing data, statistics
 - Reporting- data selection, methods, attribution and authorship
- 3. Respect
 - Colleagues
 - Experimental subjects (animals and people)

How to avoid misconduct

1. Just do it right. Set an example.
2. Create a culture of scientific accountability in your lab.
3. Be involved in what is going on. Look at lab notebooks with your staff. Look at the data in the lab as it comes in.
4. Nip problems in the bud.
5. Get help from your elders.

NIH “High Crimes” of Misconduct

Fabrication

Falsification

Plagiarism

Committed recklessly or intentionally.

Fabrication is ...

making up data or results and
recording or reporting them.

Recording fake data in lab books is misconduct even if not
used for publication or in grant applications.

Falsification is ...

manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

Changing data

Cherry-picking data

Using inappropriate statistics

Intentionally misleading report of data or methods

Plagiarism is...

- 1. Substantial textual copying** of another's work (Use quotation marks when using an exact quote or paraphrase to convey concept)
- 2. Misappropriation of intellectual property** includes the unauthorized use of **ideas**.

Examples of actions that could be misconduct at Duke, but not at NIH

1. Retribution of a whistleblower
2. Sabotage of another's research
3. Some authorship disputes

Regulatory/Compliance Violations (not scientific misconduct)

1. Financial malfeasance (criminal)
2. IRB or IACUC violation
3. Conflict of interest violation

Misdemeanors in Research = Questionable Research Practices

1. Improper data collection, analysis and storage [Duke requires 5 year retention]
2. Data ownership disputes; Duke owns your data and an MTA is required for data to be transferred.
3. Refusing to provide reagents
4. Premature release of data to media

QRPs: Authorship

- Who should be an author?
- What is the order of authorship
- Recognition of collaborators
- Mostly cured by good communication before and during the work.

QRPs: Mentor/Mentee relations- training is largely by an apprenticeship model

1. Inadequate supervision and responsiveness
2. Inadequate communication- expectations, goals
3. Hostile or disrespectful environment

Process of Investigating Misconduct

Duke Faculty Handbook

1. Allegations made to Research Integrity Officer, Donna Kessler; Duke Integrity in Action Line **(800-826-8109)**
2. Standing committee (Grand Jury)
3. Ad Hoc committee decides
4. Vice Chancellor, Dean Klotman, sanctions
5. ORI (NIH) notified

Duke ASIST

Advancing Scientific Integrity, Services & Training

- Mission: to foster an environment of excellent in scientific research
 - Promoting a robust culture of scientific accountability and integrity
 - Improving the reproducibility of scientific findings
 - Providing data management resources and
 - Delivering educational materials to the SOM research community

Contact

asistoffice@duke.edu

424 Davison Building

919-681-2683

<https://medschool.duke.edu/research/research-support-offices/advancing-scientific-integrity-services-and-training-office>

Discussion of Case Studies

(4 Scenarios, ~15 minutes each)

Instructions for each scenario:

1. Discussant will introduce the scenario to the group
2. Each person will be asked to respond to a question using a text-in audience response system
3. Discussant will facilitate group discussion

Scenario 1: Missing Data

Discussant: Donna Kessler, PhD

Bob is a student trying to replicate experiments performed by a previous student who is no longer at Duke. When he is unable to reproduce the findings, Bob approaches you, his faculty mentor, for advice. You suggest Bob review the former student's raw data in the notebooks he left behind. Bob scours the lab but is unable to find any evidence of the raw data. The results of this experiment are an integral part of Bob's hypothesis for his research project. The student who supposedly made the original findings has gone on to fellowship at another institution. His findings have been submitted for publication at a mid-level journal.

Discussion Questions

- Why would the missing data concern you?
- Who is responsible for keeping primary data?
- How could this be prevented?
- What should be done about the pending publication?
- Should you contact the institution where your former student is now a fellow?

Scenario 2: Frustrated Physician

Discussant: Tom Owens, MD

You are a clinician who sees patients 4 days a week in a Duke clinic. In between patients you observe a fellow physician in a heated exchange with a member of the clinical staff. This exchange is taking place in the hall, where it can be seen by other clinical personnel and possibly by patients on their way from the waiting room to their exam rooms. You don't catch the entire conversation, but you gather that the physician is frustrated about an issue with the electronic medical record. You hear the physician slam a paper down and tell the nurse involved, "Fine! Then you can do it yourself!" before walking away.

Discussion Questions

- Should you say something to the physician? To the nurse?
- Should you report what you just saw?
- What will happen if you report?
- What implications does this scene have from a patient perspective?

Scenario 3: Appropriate Feedback

Discussant: Catherine Kuhn, MD

You are the clerkship director and you observe another faculty member yelling at a female medical student during rounds. You have received numerous complaints from students that this particular attending is intimidating to work with, criticizes students in front of others, and penalizes anyone who shows up late to rounds. You have also noticed that his evaluations of students are often late and seem generic.

Discussion Questions

- What elements are related to faculty conduct?
- What resources are available at Duke to help the students in this situation?
- Is there discrimination at play here?
- What impact might generational differences have?

Scenario 4: Review Article

Discussant: Steve Lisberger, PhD

A publisher contacted Duke to inform us that a recently-submitted book chapter was an almost verbatim copy of a review article written by someone else. The data and tables in the chapter were an exact match to the previously published review article. The chapter was “written” by a fellow working with a senior faculty member. The faculty member said the fellow brought him a draft of the book chapter, which he only edited. He had no idea about the relationship to the review article.

Discussion Questions

- Was this misconduct?
- What role does trust play in this scenario?
- How would you detect this?
- How else might plagiarism happen?
- What can you do to prevent it?

Resources

- SoM Professionalism Initiative (flyers in your packets and website on your flash drive)
- Departmental accountability plans
- Duke ASIST
- [PACT Program Information:](https://intranet.dh.duke.edu/SitePages/PACT.aspx)
<https://intranet.dh.duke.edu/SitePages/PACT.aspx>
- Integrity Line: 1-800-826-8109

"Your daily efforts to foster a healthy work climate are integral to our productivity and success as a School. I want to thank you for the work you do to cultivate a respectful and inclusive work environment in the School of Medicine."

Nancy Andrews, MD, PhD
Dean, Duke University School of Medicine

PROFESSIONALISM IN THE SCHOOL OF MEDICINE

Professionalism is a core value and expectation of all Duke University School of Medicine faculty, staff and trainees. As a community, each of us affirms our commitment to professionalism through our daily interactions with each other. We build a healthy work environment by managing concerns about unprofessional behavior in a manner that is fair, balanced and respectful. The Statement on Faculty Professionalism, described in this brochure, is meant to specifically address faculty professionalism, and to complement existing policies concerning staff and trainees.



INSTITUTIONAL RESOURCES

Vice Dean for Faculty
(919) 684-4139
ann.brown@duke.edu
Available to discuss concerns, assist with problem resolution and connect with other Dean's Office resources.

Scientific Misconduct
(919) 668-5115
donna.cookmayer@duke.edu

Conflict of Interest
(919) 684-3121
nocomm@dm.duke.edu

Employee Occupational Health & Wellness (EOHW)
(919) 684-3136 (option#2)

Office of Diversity & Inclusion (ODI) (919) 613-2628
ODI@dm.duke.edu

Offers assistance in creating diversity strategic plans, searches, and providing education and coaching on unconscious bias.

Personal Assistance Service (PAS) (919) 415-1945
www.hr.duke.edu/pas
A resource for faculty, staff and their immediate family members for free and confidential short-term counseling on personal or work-related issues.

Duke University Ombudsman
faculty_ombudsman@duke.edu
A resource for faculty with concerns about academic freedom, academic tenure, and equal treatment in employment.

School of Medicine Student Ombudsman
ombudsman@mc.duke.edu
Supports medical, graduate, PA and PT students and all post-docs in the School of Medicine.

Office for Institutional Equity (OIE) (919) 684-8222
Handles concerns about harassment and compliance in the areas of equal opportunity or affirmative action.

 Duke University School of Medicine

Duke University Health System Compliance Office
(919) 668-2573
compliance@mc.duke.edu
intranet.dukemedicine.org/compliance/default.aspx
Scope: Joint Commission, Patient Privacy

Duke School of Medicine Compliance Office
(919) 684-2475
medschool.duke.edu/compliance
Scope: Research Integrity and Privacy

This brochure is distributed by the Office of the Vice Dean for Faculty

