‘The one that happened to me… that disturbed me greatly… I was watching a colonoscopy with the consultant and there was a reasonably young woman… and she was very anxious about having the colonoscopy… she was sedated but [the sedation] barely even touched the sides, it looked like she was still completely lucid… she started having the colonoscopy… and it was incredibly painful for her and they couldn’t advance the colonoscope… he [consultant] was being… unnecessarily rough and she was screaming… she hadn’t had the full amount of painkiller… he kept advancing it, he didn’t kind of reassure her… she was just a body to him and it was so frightening… at one point the nurse came in and… really tentatively suggested, “Shall we give her more painkiller?” and he said, “No” and the woman was still screaming on the table completely conscious looking at her colon on the screen in front of her and he just kept pushing and pushing and pushing and then it got to the point where the nurse came in and… asked again about the painkiller and he said, “I said no!”… I was just standing there with my hand on the patient going, “Oh my God!”… He didn’t back down, he continued with her colonoscopy and finished it and meanwhile the patient was screaming… the patient left to go to recovery and I kind of walked back out to… the nurses’ station… I looked at the nurse and… just started bawling, it still makes me cry.’

Fiona, female, year 3, medical student, Australia

Professionalism matters: it is the cornerstone of safe and dignified healthcare practice. This book, intended chiefly for healthcare students, but with healthcare trainees and educators also in mind, aims to help raise professionalism standards in healthcare, to benefit learners, qualified practitioners and patients. Healthcare students and trainees learn professionalism and how to become professional through various learning activities. While they are taught professionalism through codes of practice mandated by regulatory bodies, they often witness and participate in events that breach those codes, including serious lapses of patient safety and dignity, as illustrated in Fiona’s narrative. Events like these are relatively commonplace during healthcare education and comprise what we term in this book ‘professionalism dilemmas,’ that is, day-to-day experiences in which individuals witness or participate in something that they believe to be unprofessional, unethical or immoral, which causes them some angst. These can be seen as professionalism ‘lapses’ too, another term we use in our book, although...
dilemmas and lapses are not always synonymous (students may, for example, witness or participate in professionalism lapses that are not apparently troublesome for them, such as e-professionalism lapses). Ultimately, professionalism dilemmas can cause individuals like Fiona to experience emotional distress, with learners often left feeling unable to act on their own professionalism ideals because of structural challenges like healthcare hierarchies. Ultimately, healthcare students and trainees who feel unable to act professionally might eventually experience their own professionalism standards eroding as they develop a non-reflexive (un)professionalism, resulting in less resistance to (and distress within) future professionalism dilemmas. Given the current drive towards increasing professionalism standards within healthcare worldwide, we need to develop stronger professionalism standards and practices within the healthcare workforce, including those among students and trainees.

This textbook is based on our decade-long programme of professionalism research in which we have collected over 2000 narratives (i.e. stories) of professionalism dilemmas from thousands of healthcare (dental, medical, nursing, pharmacy and physiotherapy) students from four different countries (Australia, Sri Lanka, Taiwan and the UK: including England, Northern Ireland, Scotland and Wales). These narratives are essentially stories of professionalism dilemma experiences with beginnings, middles and ends that have entered into the biographies of the students who narrate them. Students shared their experiences with us as part of six interrelated funded research projects using either individual or group interviews (oral narratives) or online questionnaire surveys (written narratives). While we have published many of the results of these studies in journal articles, this book still contains original findings and scores of narratives (all with pseudonyms) not previously published.

While we know that innumerable examples of good professional practice and exceptional role modelling exist in the healthcare workplace, our programme of research did not employ appreciative inquiry. It has instead focused on ‘dilemmas’, which are inevitably negative, challenging and troublesome. We chose narrative inquiry for our research programme because the act of storytelling can help individuals make sense of their experiences, as well as their actions within those experiences, and their developing identities. As a reader of this book, you will come to understand narratives as sense-making activities through reading the real-life narratives from healthcare students, starting with Fiona’s, in this book. You will also come to understand that narratives have a social function in that narrators are motivated to portray themselves in a positive light. One therefore needs to be continuously mindful that the stories in this book are representations of the structure of students’ experiences rather than accounts of what happened exactly.

This book comprises an evidence-based approach to educating healthcare students, trainees and educators about commonplace professionalism dilemmas encountered in the healthcare workplace, and how to respond appropriately when faced with such professionalism dilemmas. Using practical activities, and illustrated through authentic narratives providing real-life case studies, this textbook aims to facilitate a robust and reflective approach for addressing professionalism dilemmas, including learners having a better understanding of how dilemmas come about and how they can be prevented and managed for the good of the learner, the wider healthcare team and the patient. The book is organized into three parts, with Part I giving an overview of healthcare professionalism education, Part II illustrating common professionalism dilemmas recounted
by healthcare students, and Part III synthesizing cross-cultural differences across professionalism dilemmas, namely by country and by healthcare professional group. While all three parts are pertinent to both healthcare learners and educators, Part I is especially germane to healthcare educators, and Parts II and III to healthcare learners.

Part I includes Chapters 2–4. Chapter 2 will help you understand healthcare professionalism codes of conduct common in the Western world, the diverse ways in which professionalism is defined across different professions and English-speaking countries, different discourses (ways of thinking and talking) in which professionalism is framed and finally, how *phronesis* (or practical wisdom) interacts with students’ developing professional identities. Chapter 3 will discuss why teaching and learning professionalism is important, what constitutes professionalism curricula and the different teaching and learning methods, curriculum-related professionalism dilemmas and finally, how learners might act in the face of curriculum-related dilemmas. Chapter 4 will help you understand why and how professionalism is assessed, the key challenges facing professionalism assessment, assessment-related professionalism dilemmas, and how learners might act in the face of assessment-related dilemmas.

Part II includes Chapters 5–10. Chapter 5 will help you understand what identities are and why they are important, relationships between educational transitions and identity dilemmas, different identity-related professionalism dilemmas and their impact and finally, how learners can act in the face of identity dilemmas. Chapter 6 will discuss what consent is and why it matters, common myths about patient consent for student involvement in healthcare, consent-related professionalism dilemmas and their impact, and how learners might act in the face of consent dilemmas. Chapter 7 will outline what patient safety is and the factors affecting patient safety, patient safety-related professionalism dilemmas, the role of students in facilitating safe workplace cultures and finally, the prevention and management of patient safety lapses. Chapter 8 will help you understand what patient dignity is and why it matters, patient dignity-related professionalism dilemmas and how they arise, the impact of dignity dilemmas and how learners can act during dignity dilemmas. Chapter 9 will outline what workplace equality, diversity and dignity are and why they matter, relationships between power and workplace abuse, the causes and consequences of workplace abuse, abuse-related professionalism dilemmas and finally, how they can be prevented and managed. Chapter 10 will help you understand what comprises online social networks and how their use intersects with professionalism, policy-related e-professionalism guidelines, e-professionalism-related dilemmas and how they come about, and finally how e-professionalism lapses can be prevented and managed.

Part III includes Chapters 11–13. Chapter 11 will help you understand what culture is and how it influences professionalism, different dimensions of professionalism found across different countries, relationships between how professionalism dilemmas are interpreted according to different cultural frames of reference, strategies for engaging effectively in intercultural interactions and finally, the range of professionalism dilemmas occurring across different countries. Chapter 12 will discuss the key roles of different healthcare professionals, differences in professionalism dilemmas across different healthcare professions, interprofessional dilemmas and how they come about, students’ reactions to interprofessional dilemmas and finally, how interprofessional conflict can be prevented and managed. Finally, we conclude our book with Chapter 13 by discussing key cross-cutting themes including power, hierarchy, conformity and resistance on
the one hand, and negative emotions, empathy and moral distress on the other. We consider how we can move the current professionalism state of play forward through education and research, and we end the chapter and book with our own reflexivity around how we have simultaneously shaped this professionalism research and been shaped by it.

With the exception of this introduction and our conclusion chapter, all chapters are specifically designed to facilitate your learning. With specified learning outcomes for each chapter, numerous real-life narratives, ‘stop and do’ activities, summary points, discussion points, extra learning activities and recommended reading, we hope that you will engage with this text actively, reflecting critically on what you are reading and making links and connections between what you see on the page with your own experiences of being a healthcare learner or teaching healthcare students. While we have written this book to be read chronologically, each of the chapters can be read as stand-alone chapters, so you can dip in and out of the book (and at random) depending on what best suits your needs and at what time. Ultimately, we hope that this book will help you navigate your way through inevitable professionalism dilemmas occurring in the healthcare workplace learning environment, to better protect yourself, your colleagues and most importantly, your patients.

References


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