

LIZ CHIARELLO, PHD



BARRIERS TO DISCIPLINE: CULTURAL AND ORGANIZATIONAL CONSTRAINTS

If medical boards are designed to protect the public from physician harm, why do they so often fail to do so?

If medical boards are designed to protect the public from physician harm, why do they so often fail to do so?

We need a cultural and organizational perspective.

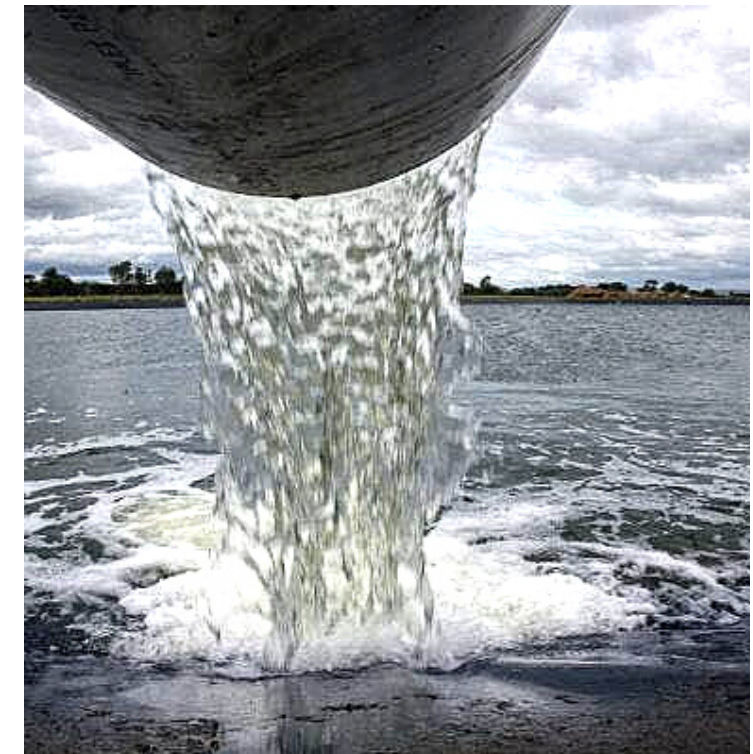
CULTURAL NORMS AND VALUES



**INPUT
BARRIERS**



**PROCESSING
BARRIERS**



**OUTPUT
BARRIERS**



INPUT BARRIERS



INPUT BARRIERS

FINANICAL AND
REPUTATIONAL RISKS



INPUT BARRIERS

FINANCIAL AND
REPUTATIONAL RISKS

LACK OF CONSEQUENCES FOR
FAILING TO REPORT

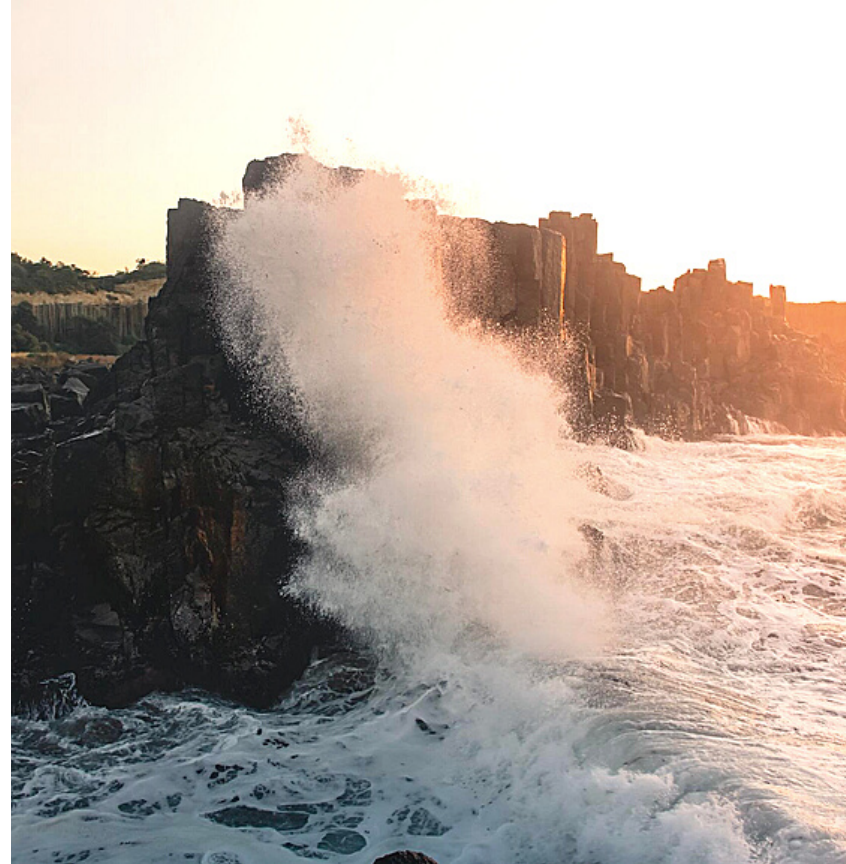


INPUT BARRIERS

FINANCIAL AND
REPUTATIONAL RISKS

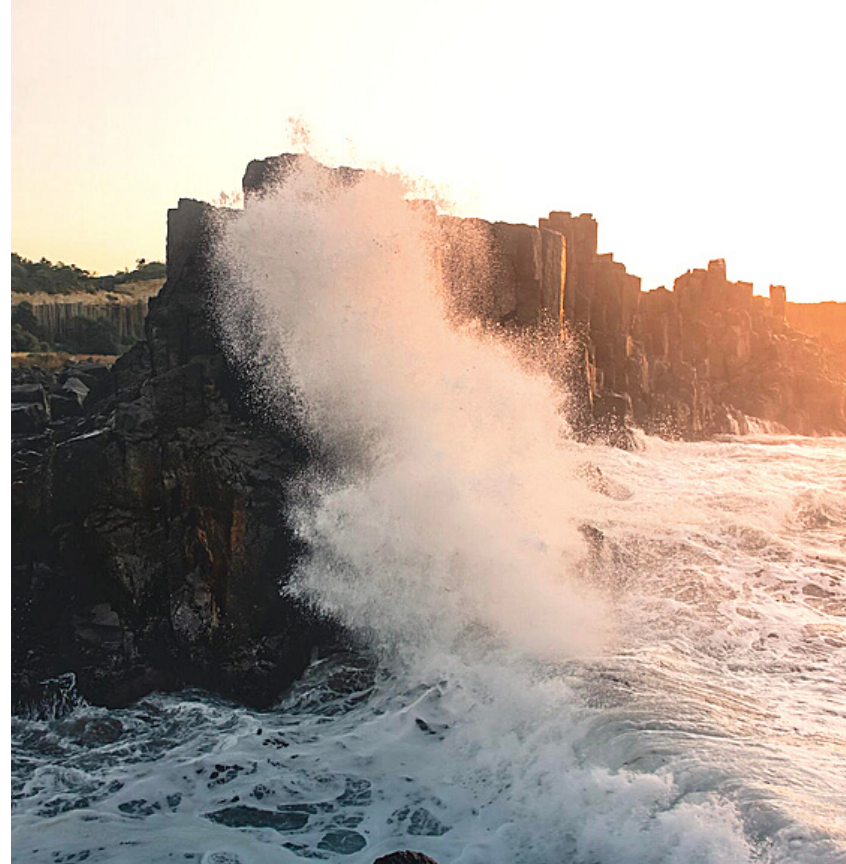
LACK OF CONSEQUENCES FOR
FAILING TO REPORT

ORGANIZATIONS PROTECT
THEIR OWN



BUFFERING

Shielding
perpetrators from
external
consequences



BUFFERING

Shielding
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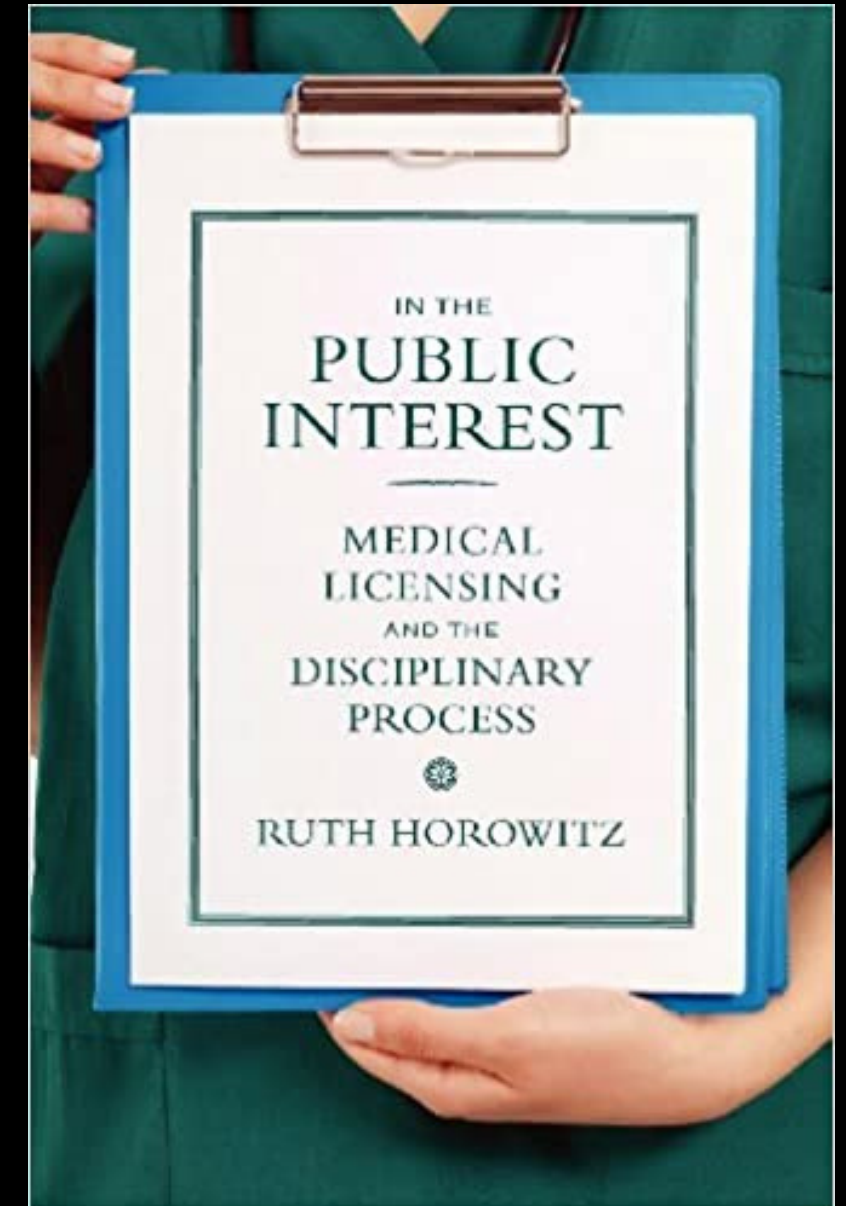
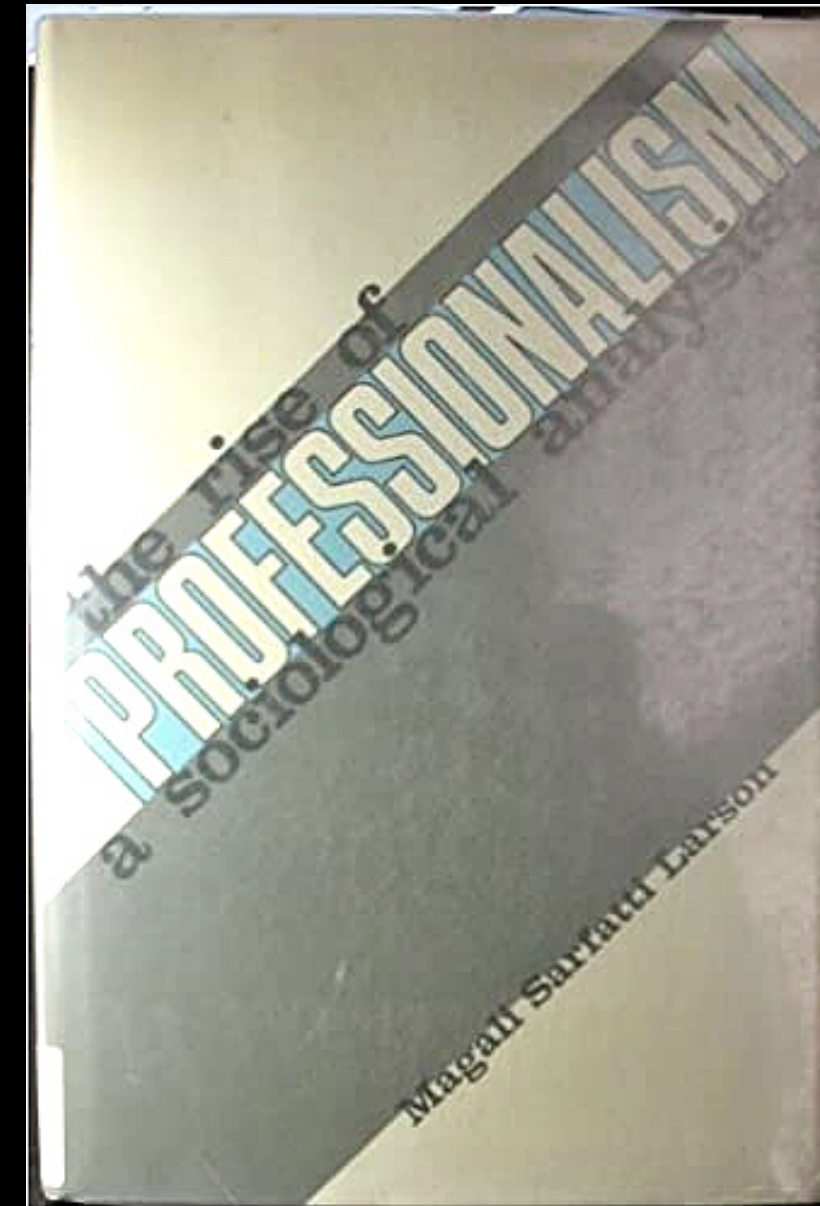
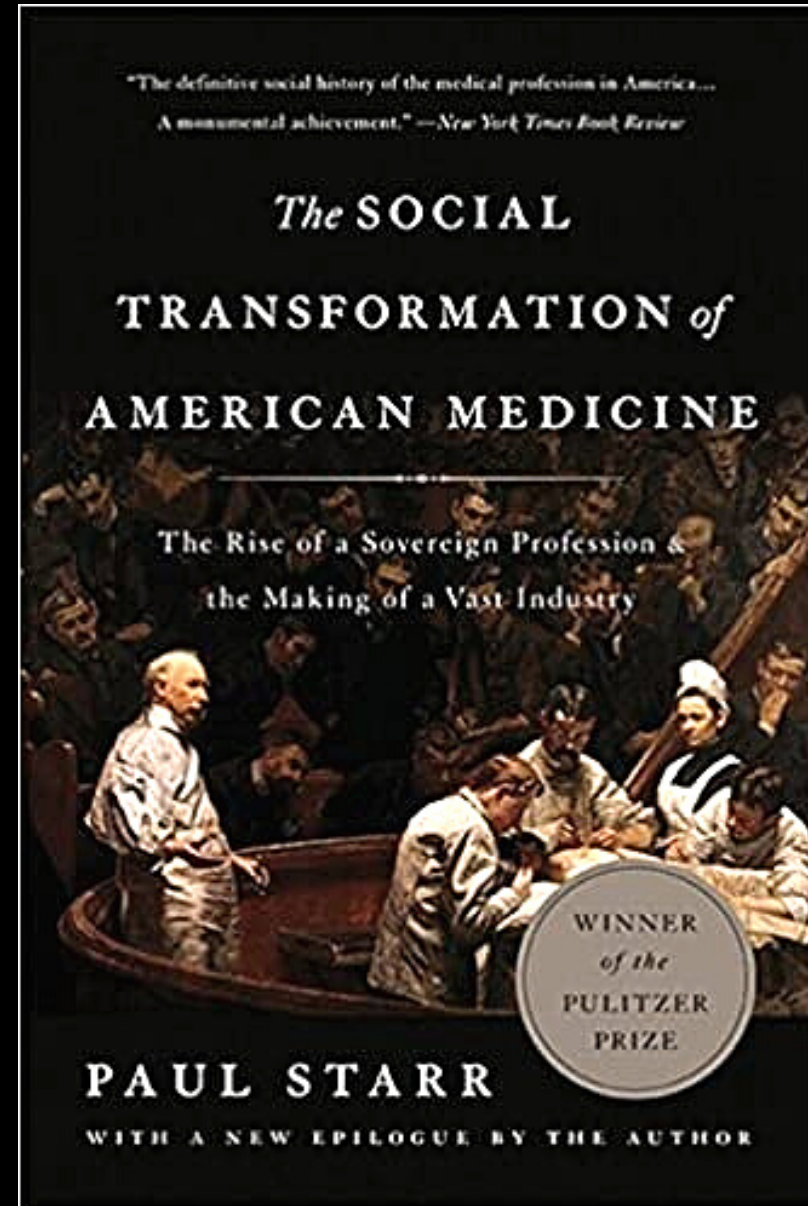
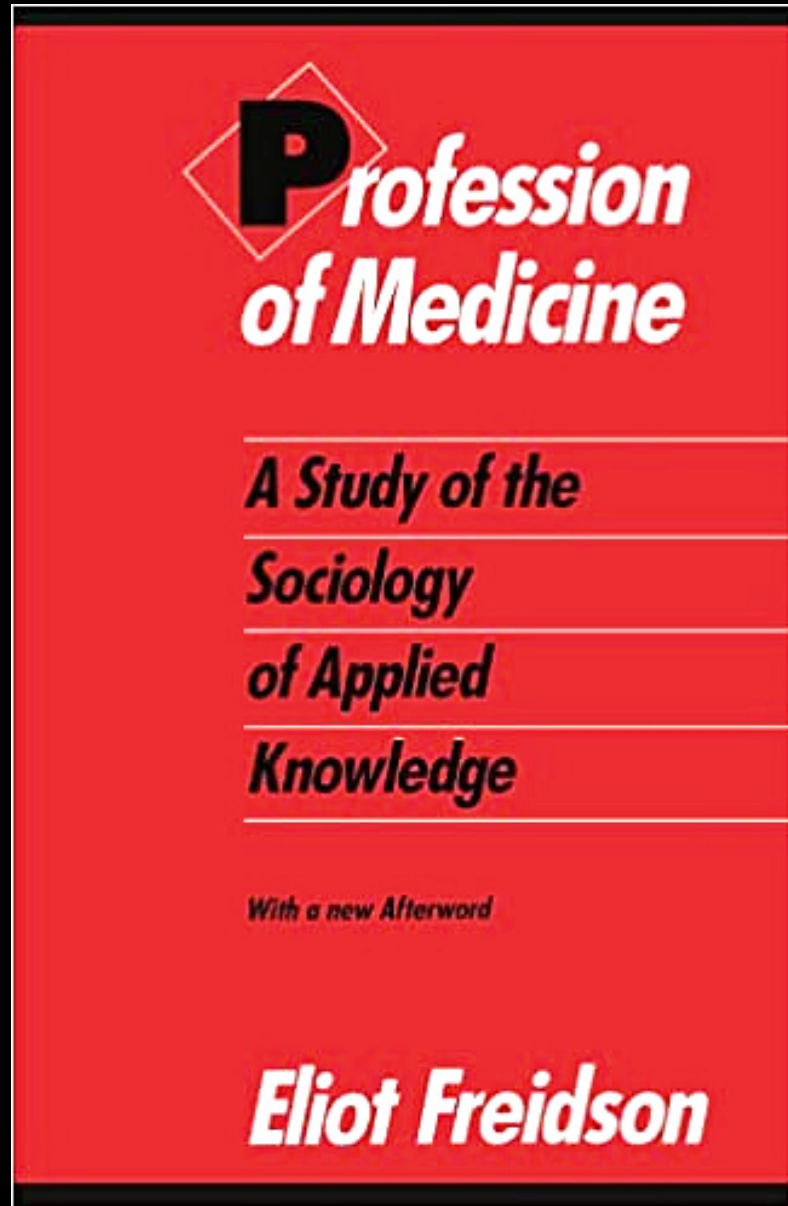


CIRCULATING

Sending perpetrators
to other organizations
instead of
punishing them



PROCESSING BARRIERS





PROCESSING BARRIERS

CONFLICT BETWEEN
PROFESSIONAL IDENTITY,
BOARD MISSION, AND PUBLIC
PROTECTION



PROCESSING BARRIERS

CONFLICT BETWEEN
PROFESSIONAL IDENTITY,
BOARD MISSION, AND PUBLIC
PROTECTION

PROFESSIONAL IDENTITY:
white coat wall of silence



PROCESSING BARRIERS

CONFLICT BETWEEN
PROFESSIONAL IDENTITY,
BOARD MISSION, AND PUBLIC
PROTECTION

PROFESSIONAL IDENTITY:
white coat wall of silence

EXPERT PHYSICIAN
INVOLVEMENT IN
DISCIPLINARY PROCESSES



OUTPUT BARRIERS



OUTPUT BARRIERS

BOARDS CIRCULATE
PERPETRATORS BY WITHHOLDING
INFORMATION FROM OTHER
BOARDS AND FROM LAW
ENFORCEMENT



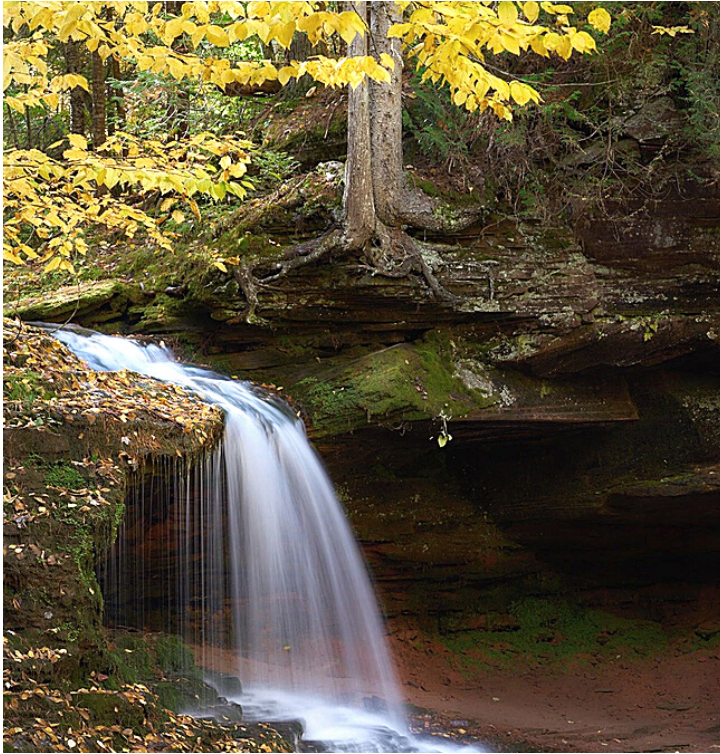
OUTPUT BARRIERS

BOARDS CIRCULATE
PERPETRATORS BY WITHHOLDING
INFORMATION FROM OTHER
BOARDS AND FROM LAW
ENFORCEMENT

TENSION/LACK OF CONTACT
BETWEEN BOARDS AND LAW
ENFORCEMENT

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CULTURAL NORMS AND VALUES



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**PROCESSING
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THANK YOU

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