Breaking New Ground:

Mitigating Sexual Misconduct Through Legislation, Regulation, and Education

Matthew W. Norman, MD – Member, Georgia Composite Medical Board Catherine V. Caldicott, MD, FACP – Medical Director, PBI Education

Georgia HB 458/AP

Summary of requirements for different constituencies

Constituent	Required Content	
Board members	 Sexual misconduct Sexual boundaries Impacts of trauma and implicit bias 	
Physicians	 Sexual misconduct Professional boundaries How to proceed with basic and sensitive/intimate exams, including how to communicate with patients during such exams 	

In addition, the board shall develop and identify educational resources and materials for physicians, board members, and board staff to support greater understanding of sexual misconduct, sexual boundaries, and impacts of trauma and implicit bias.

Course Participant Evaluation Summary

Course: Navigating Professional Boundaries in Health Care Course (DR-2)

Analysis Period: January 1, 2022 – March 7, 2025

Participant Criteria: n = 2055 physicians with a course registration from the state of Georgia

In the post-course evaluation, 1083 (52.7%) participants answered the optional question, "How will you change your practice as a result of this course?" Responses appear below:

Indicated plans for change post-course	Indicated no plans for change post-course	Indicated no plan for change post-course due to their current practice already aligning with course content
968 (88.4%)	75 (6.9%)	40 (3.7%)

Evaluation question: "How will you change your practice as a result of this course?" Sample responses, direct quotations used with permission, edited for clarity:

- 1. I am a PCP. I have always practiced medicine with an emphasis on providing a listening ear. After reviewing this course I realize how often I end up becoming too much of a confidant to my patients, setting myself up for longer, social visits it is only after going through this course that I understand my vulnerability potential and how this all puts me at risk! Wow! I will be returning to the office tomorrow and making changes to protect myself and my patients!
- 2. I already have implemented most of these practices, unfortunately related to an incident long in the past that required me to look at my professional license and self in the light of the information presented. This happened over 2 decades ago but this information is well worth the review and I learned a few other things along the way. Wonderful program. Should be a required part of every medical training program.

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Evaluation question: "How will you change your practice as a result of this course?" Sample responses, direct quotations used with permission, edited for clarity, continued:

- 3. Remind myself that drawing boundaries about access to me (i.e., staying late, messaging patients excessively) is beneficial for everyone in the long run. It helps prevent burnout for me and it keeps patients from developing unrealistic expectations.
- 4. There are a number of topics I'd like to cover with my office personnel, including implicit biases, trauma history, our office culture of informality and fun-loving (pediatrics).
- 5. Stop prescribing meds for myself and family members.
- 6. Be much more careful in general. Watch the jokes, they may not always be well received.
- 7. We will be more consistent with chaperone use. I will be more careful about discussing personal matters. I will review social media issues with staff in regard to patients. I will be careful about taking on friends as patients.
- 8. I will take more personal days, clearly divide work and home life and pay attention to red flags that border on boundary violations.

98.5% of DR-2 course graduates answered "yes" to the following questions:

- 1. Can you demonstrate appropriate clinical decision-making by minimizing negative influences?
- 2. Will you adhere to professional boundaries with resultant improvements in clinician-patient interaction, which can improve clinical outcomes?
- 3. Have you become aware of the early warning signs and personal risk factors indicative of ethical dilemmas and boundary problems?
- 4. Did you acquire a working understanding of the Formula[©] in order to reduce your own violation potential for ethics and policy transgressions?
- 5. Do you understand how to create your own Personalized Protection Plan[©] to maintain appropriate boundaries?

Evaluation question: "Please share any additional thoughts, suggestions, or comments." Sample responses, direct quotations used with permission, edited for clarity:

- 1. I wish I had this course in my first year after training. This has been one of the most interesting and eyeopening courses I have taken in over 40 years of family practice, and I wish it would have been offered at the
 start of my career. However, it has really caused me to reflect on my past experiences and how true it is that
 there is a violation potential on a daily basis and that your own personal life and stresses can contribute. I
 think the empathy I have felt and the intimate sharing of my patients and their needs along with my own
 reasons for going into medicine and the sacrifices I had to make along with personal problems and life's
 changes and personal needs created an environment for boundary violation. Even with the best intentions I
 realize now there was often a self-serving, hidden motive. Thank you so much for giving me the insight and
 tools to help my younger colleagues and myself. This course should be required especially in family medicine.
- 2. Needs to be done prior to licensure as it is. Oldtimers like myself needed it long ago.
- 3. This lesson should be taught to all medical students, residents, and attending physicians
- 4. Great course. Thought provoking and challenging. Every state board should require it as well as training programs and medical schools.
- 5. Love that this included trauma-informed care.