Introduction

Regulators must make appropriate dispositions in response to licensee conduct of concern
- Educational courses
- Coaching
- Peer assessors
- Mentorship

Objectives
- What are remedial educational interventions
- Why chiropractic regulators would refer
- Who benefits from remedial education
- When to make referrals for remedial education
- How remedial education works
What is remediation

• “To remedy”
• To right a wrong or correct a fault

What is remedial education

Distinguish from usual CE / CPD

• Intensity
  • Duration: days
  • Personal disclosure required
• Topic (usually)
• Setting: small group
• Plan of action developed
• Written report provided
• Failure is possible

What is remedial education

Distinguish from EBAS

• Ethics and Boundaries Assessment Services

WHY
Why refer for remediation

Investigation of a complaint
- Poor judgment
- Interpersonal issues
- Cut corners, bend rules, rationalize actions
- Caused harm

Why refer for remediation

• Departures from the standard of care
• Violations of the state Chiropractic Practice Act
  • Record keeping
  • Billing
  • Unprofessional language, disruptive conduct
  • Informed consent
  • Conflicts of interest
  • Dual relationships, including sexual impropriety
  • Conduct of concern that fall short of frank violations

Left uncorrected, lesser misdeeds can become normalized and lead to worse conduct (and greater harms) later.

WHO
Who has remediation potential?

Who has infraction potential?

EVERYONE!

Who has infraction potential?

- Not all licensees who commit infractions are created equal
- Licensees get into trouble in unique ways for unique reasons

Who has remediation potential?

The vast majority
Who has remediation potential?

- You can tell
  - Investigations: truth, insight, accountability
- Course faculty can tell
  - Participation: drop resistance

Who might not have remediation potential?

Licensees who show resistance
- Defense mechanisms: denial, other-blaming, rationalization
  - Previously unblemished career
  - “Patient care didn’t suffer”
  - Allowed to misbehave in past
  - Personality type or even personality d/o

Who might not have remediation potential?

Licensees with a history of trauma
- Egregious conduct
  - Well-trained investigators
  - Outside assessment programs
  - Remedial course faculty

Matching a licensee with the right remedial course

- Course providers spell out the courses that are best suited to a particular infraction
- They are happy to advise on particular cases (anonymized)
WHEN

When to refer to remedial education

Immediacy matters
• Accelerates improvement in practice
• Reduces the risk of continued or additional wrongdoing prior to remedial intervention
• Increases the impact of regulatory proceedings
• Facilitates change
• Virtual platforms facilitate this

HOW

How remedial education works

• Start w/ first contact w/ course provider
• Pre-course assignments
  • Readings
  • Reading post-tests
  • Self-assessment questionnaires
  • “My Story”
How remedial education works

The course itself

• Expectations of participation
• Goals of course
• Process orientation

How remedial education works

Expectations of participation

• Pre-course assignments
• Attentiveness and engagement
• Interactive

How remedial education works

Goals of the course

• Risks and vulnerabilities
• Red flags
• Consequences
• Plan of safeguards
• Professional lapses impact clinical judgment

How remedial education works

Process orientation

• HOW they acted against their better judgment
The licensee’s perspective

The group process
- Telling their story
- Learning from others’ stories

Reflections on the process
- I am now CONSTANTLY thinking about how to improve, how to avoid mistakes and slips and how to pass this information along
- I loved the virtual aspect of it which made me pay attention 100% throughout the course by seeing all the participants and the instructor right in front of my eyes at all times

The outcome was transformation of mindset over a span of 3 days, a feat that in itself is staggering in terms of achieving measurable results.
- Educational as well as therapeutic and gave me the opportunity to learn from others.
- I will be continually modifying and making changes to how I practice.

The regulator’s perspective

Referral document(s)
The regulator’s perspective

Post-course letter
- “AIR Letter”—accomplishments, impressions, recommendations

The regulator’s perspective

“Successful completion”
- Course ≠ remediation
- Remediation is a process, like lifelong learning

The regulator’s perspective

Longitudinal follow-up
- Continued engagement with the material
- Keeps fresh in their minds
- Monitors compliance with plan
- Decreases professional isolation
- Continued learning from others’ mistakes

The regulator’s perspective

What about recidivism?
- Very hard to study well
- Licenses in multiple states
- Lag time in reporting to national databases
- Problems that do not rise to the level of regulatory involvement
- Secondary recidivism
The regulator’s perspective

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Exclude</th>
<th>Include</th>
<th>Primary Recid (%)</th>
<th>Secondary Recid (%)</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
<td>No reason for taking the course</td>
<td>322</td>
<td>87</td>
<td>25</td>
<td>210 (6.7%)</td>
<td>14 (4.7%)</td>
<td>28 (13.3%)</td>
</tr>
</tbody>
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The faculty’s perspective

Participants express
• Guilt, shame
• Remorse
• Fear
• Suicide
• Transformation
How to choose a reputable course provider

How to find a course

• Federation of State Medical Boards directory of remedial and assessment programs: https://www.fsmb.org/siteassets/spex/pdfs/remedprog.pdf
• Ask your peers in other states
• Ask your colleagues in medicine, osteopathy, PT

How to choose a reputable course provider

• Most participants already know right vs wrong
• Most participants already know what was wrong about what they did and why
• Very few understand why that knowledge flew out the window
• Course will target the conduct of concern

How to choose a reputable course provider

• Staff training: communicate with disgruntled, embarrassed people; implicit bias
• Faculty training in non-judgmental, DEIB- and trauma-aware communication techniques; implicit bias
• Faculty trained to handle
  • Resistance
  • Reticence
  • Cultural constraints on communication

How to choose a reputable course provider

• Restorative, transformative, not punitive
• Small group (< 15)
• Designated faculty
• Strict confidentiality policy
• Clear criteria for passing
• Course proctor
How to choose a reputable course provider

• Telling story required
• Interactive discussion
• Plan w/ action steps to apply in practice
• Post-course report to regulator

How to choose a reputable course provider

Process-oriented curriculum
• Triggers and red flags (in selves and others)
• Appreciating others’ perspectives
• Paying attention, reflecting
• Risk factors inherent in chiropractic
• Personal vulnerabilities
• Burnout, trauma, isolation
• Development of accountability

How to make a referral

• Call or check course provider website
• Discuss course type if unsure
• Referral document
  • Letter (email)
  • Agreed order, settlement agreement, letter of concern
  • Outline your concerns, results of any investigation, previous history with this licensee

How to make a referral

• Post-course letter desired?
• Longitudinal follow-up course desired?
Summary

- What are remedial educational interventions
  - Differ from CE, assessment
- Why chiropractic regulators would refer
  - Interrupting patterns
- Who has remediation potential, how to tell
- When to make referrals for remedial education
  - Immediacy matters
- How remedial education works

Questions

Thank you!

Catherine@pbieducation.com
904-612-3773