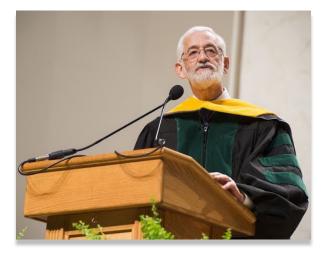
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Georgetown University School of Medicine Commencement Address

Applying the Professional Principles of Ethics, Caring, and Teaching

Dr. Skeff is the George DeForest Barnett Professor of Medicine at Stanford University and Co-Director of the Stanford Faculty Development Center for Medical Teachers. He received his M.D. degree from University of Colorado, completed his residency and his fellowship in general internal medicine at Stanford University, and completed a Ph.D. at the Stanford School of Education. He has served as Vice Chair for Education and was the residency program director for two decades in the Department of Medicine at Stanford. He and his colleagues founded the Stanford Faculty Development Center for medical teachers, a train-the-trainer program developed to assist medical faculty nationally and internationally, in order to improve their teaching effectiveness. The Center has trained over 350 faculty members from over 150 institutions as trainers for their own faculty and house-staff. Dr. Skeff has received local and national awards, including the Stanford University Gores Award, the Stanford Medical School Alumni RISE Award, the national Joy McCann Mentorship Award, the AAMC Robert Glaser and Abraham Flexner awards, as well as awards from the Society of General Internal Medicine and the Association of Program Directors in Internal Medicine. He has been a regent and is a Master of the American College of Physicians.

irst, thank you for the wonderful honor of speaking with you today. When Dr. Mitchell wrote and asked if I could come, I set a record speed for hitting the reply button. Why? Because it is truly an honor to talk with you, a very special group who will become physicians in about thirty minutes. And, more than that, those of you in this Georgetown graduating class will become a very special group of physicians.

It is such an honor to be at your institution as an honorary Georgetown HOYA. What is that? What is a Hoya? It's not a bird; it's not a plane; it's...SUPERMAN. Well, maybe not, but it is pretty special. No other institution can give you an honorary name that is so exalted that it defies definition. Only you have a name about which one can ask: "What is a Hoya?" and you can answer true.

Not only is it an honor to become an honorary Hoya, but it is also an honor to be in the Hoyas' house, Georgetown University, a university steeped in the history of this country, embedded with principles for humanity, and dedicated to developing students who exemplify the highest values in our profession. As I contemplated this presentation, I realized that I am expected at some point to talk 'to you'. I am to give you some advice, having already walked a path similar to that you are taking. So, I will give you some advice. However, I felt that at Georgetown, that would be insufficient. For to be with Georgetown graduates, I must not just talk to you; I must first talk about you and only then can I talk to you.

Yes, I want to talk about you – so that you feel the extraordinary pride you should feel when you come from a place such as this.

And I will talk to you with hope...with hope and optimism that as you enter the next stage of your life's work, you enter with the purposeful recognition of who you are, what kind of field you are joining, and why it is the right time for you.

So first, let me talk about you: Who are you? Why am I so proud to join you today?

Who is a student from Georgetown? He or she is a person who has been at an exceptional place.

It began with the arrival of Jesuits in the United States in the 1600s. What does that mean? Over four centuries ago, thoughtful and learned people came to the U.S. as missionaries on a mission to better mankind, especially to help the needy...missionaries with broad-based thought, with broad-based meaning and purpose.

Then, in the late 1700s, when religious freedom became a part of our country, members committed to this mission founded a school based on liberal education and religious pluralism: liberal education – an education that would be based on deep reflection and study, an education to have students see issues from a broad perspective, and religious pluralism pluralism accepting that groups with different beliefs could co-exist in a society.

In the mid-1800s, a group of physicians established a medical school at this institution, Georgetown University School of Medicine, still building on the Georgetown model of comprehensiveness and thoroughness, with thoroughness represented in a



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medical school with a marvelous mission: the care of the "whole person".

The care of the whole person – sounds simplistic. Yet this magnificent goal is one that has eluded many of us in medicine and medical education, so we are rediscovering it today. We are discovering that we may have developed a profession dedicated to and designed for a laudable goal, the understanding and treatment of disease, but not necessarily the care of the whole person.

Admittedly, this is a difficult goal, the care of the whole person, which requires a medical education system that teaches about the multiple aspects of life that impact a person and the multiple potentials for each person. Therefore, this goal requires an educational system that addresses the many aspects of a health care system, an education that is designed to address the needs of the whole person.

In summary, you have attended a school built on a mission to help humanity, and a recognition that this mission requires broad-based knowledge with respect for all, as well as that the field of medicine should focus on the whole person.

What kind of culture does this august institution with these goals represent?

" ...Learning in an environment that embodies values increases the likelihood that you will manifest those values yourself." First, this school fosters a **Culture of Eth**ics – ethics, a word that is almost synonymous with Georgetown. The ethics of doing the right thing for the right reason, and doing it with a commitment to reflection and re-examination of what one is doing. This culture of ethical behavior is one that inculcates a belief that one should watch what one does, and should ask, *"Is this right? Is what we are doing in the best interest of our work? Our profession? Our colleagues? Our society? Our patients? Would my behavior pass the ethical test of a professional physician?"* And if what you are doing does not pass the ethical test, if you are from Georgetown you are to reflect and ask, *"How can I help?"*

How can I help? This highlights the second fostered culture of Georgetown, the **Culture of Caring** – caring about others; a culture of compassion, respect, of caring. And from Georgetown, this is a commitment to caring for the whole person, in a compassionate and unconditionally respectful way.

And finally, your institution, in the Jesuit tradition, has embraced a **Culture of Teaching** –a culture of responsibility and joy. The joy of learning and sharing, the joy of imparting knowledge, skills, and values to others, not only to your patients, but also to your colleagues, not only to your physician colleagues, but also to all members of the health care team, so that we can all become effective contributors to the health of the public.

So, where have you been? You have been in a place committed to the highest values, the values of Ethics, of Caring, and of Teaching. So, what does that mean to you?

First, good news: Learning in an environment that embodies values increases the likelihood that you will manifest those values yourself. You see things as you have been taught to see. This institution's approaches have been designed to bring out and to refine the best in you, to expand qualities and potential that each of you already had, qualities that every parent in this audience hoped for and strived for: the qualities of being ethical, of caring, and of enjoying helping others.

And now more good news, which is both challenging, yet opportunistic: the field of medicine has never had a greater need for people like you.

Our field needs an infusion of Ethics: there are aspects of our profession that may seem antithetical to our stated ethics. As medicine has become more oriented to business principles, more concerned about public measures of excellence, our conduct may appear more designed to get a good rating - to get 5 stars - than to remain true to the values of our profession. Yes, our conduct may be more designed to get a better rating than our sister healthcare institution than remain true to the values of our profession, the value to make all of our institutions better.

Our field requires a recommitment to Caring: it is possible for us to not appear caring for our patients, as we work hard to enter data into the computer, data admittedly useful to the care of patients, but involved in a process that may be taking us away from patients. It is possible for us as a field to not attend to the whole patient and to the patient's access to total care in addition to attending to the disease that they have.

It is possible for physicians to work in and acquiesce to a system that may not adequately enable the health care team to deliver the best care. And I don't just mean the identification of what the patient needs, but also what the healthcare team needs. Caring for humanity does not stop with caring for the patient in front of you and his/her family: it also includes caring for your colleagues and the profession you are a part of. So this caring culture must be a circumspect caring. We must as physicians be more involved with molding and contributing to the system in which we reside, because we care. And when the system does not enable us to assist the patient, we must bring out a Georgetown application of our ethics and of our caring. There are a few things we cannot do. We cannot accept the current levels of burnout in physicians as evidence of adequate caring. We cannot accept the number of physicians who would tell their children not to become physicians, not to respond to this higher calling. We cannot accept the levels of depression in trainees as evidence of adequate caring.

And the infusion of caring for these providers cannot simply be satisfied by a reduced workload; it must be satisfied by restoring full meaning to the work that we do. So, in the Georgetown manner of caring, we must begin to care for each other in a deeper way.

"It is time for us to be as worried about the person sitting next to us as we are about ourselves."

Our field of medical education can benefit from a Georgetown approach to teaching and learning. What would that be? It would be teaching and learning with ethics and caring. Our educational programs, although well-meaning, may still reward appearing better than your colleague who sits by you than rewarding the action of you making the colleague who sits by you better. The latter is a principle of Georgetown. That is a principle that I have seen in the last two days I have been here. It is time for us to be as worried about the person sitting next to us as we are about ourselves.

In medical teaching, you are merging two noble professions, the profession of medicine and the profession of teaching. The profession of medicine is dedicated to help one lead a healthy life, and the profession of teaching is to help one acquire the knowledge, the skills, and the values to lead a gratified life. And in merging those professions, you get to do what I call "exponential teaching." Your impact as a medical teacher has the potential to be exponential, as each time you teach a student or a colleague, you play some role in their future patient encounters. You set off a domino effect, extending your influence far beyond yourself. A domino effect like the one set off in this institution in the 1600s, in 1789, and in 1851. And remember that in medical teaching, you are teaching far more than the scientific content of medicine: you are teaching the principles of the profession, the principles of Georgetown, the principles of ethics and of caring.

So now, Georgetown graduates, know that you are special. You have a special set of timeless values that now must be applied at a time when the meaning and joy in those values are in question. It is your time. It is your challenge. It is your opportunity.

So what are my hopes and dreams for you?

They are:

1) That you remember who you are.

2) That you gain the pleasure of not only helping your patient, but also of helping your colleague and his or her patients, as well as helping your system and its care of you, your colleagues, and your patients.

3) That you don't see yourself as your own major adviser. There is a problem with being trained at a wonderful place like Georgetown. It can imbue confidence, even potential overconfidence – all of us have demonstrated that. You may thus believe that you are your own best advisor. Don't believe it. Do everything possible to expose yourself to people who think differently than you, to expose yourself to opportunities that might not appear in the direction you think you are going. Were I to have been left to my own designs, I would not be in front of you today. I had to be guided by people who knew what I did not know, who knew of places that I could not possibly imagine, and who had the vision that one could do something different.

Remember that great things happen when you are lucky. So be really lucky. Now you are fortunate. You have the world as your oyster and you will be lucky. But you are most lucky when you can be at the right place, at the right time, and with the right people. You have come from a right place, Georgetown; it is the right time, a time when you are needed; and you can be one of the right people to bring luck to others. Bring the best of yourself and of Georgetown to your patients, your colleagues, and your place of work. Make them lucky.

Of you, they will say: he cares, he helps, and he improves where he goes. She cares, she helps, and she improves where she goes. How will that happen? By being yourself. You got here because you have those qualities. You got here because you care, because you like to help, and because you are bright. Take full advantage of yourself, take advantage of the lessons from the wonderful teachers to whom you have been exposed, and take advantage of the challenges, the opportunities in medicine today to make the care of patients and the quality of our system better than when you arrived.

Now many of these things, such as improving the world of medical care, may not be on your mind on your first day of internship, when you are most concerned with feelings of absolute ignorance, having no idea who erased your mind when you slept the night before. You may be chagrined when the other medical student on the team will answer questions with answers that you once knew, but seemed to have forgotten in the process of doing all the tasks you had been given. Know that your feelings of concern and inadequacy have been felt by all of us as we entered into this field.

But do not forget that those times will pass, and opportunities will arise for each of you to con-

tribute your own unique character to those around you. Georgetown knows you can, your parents and other loved ones know you can, and you know you can. But make your contributions with pride and humility, reminding yourself from whence you have come. Know that you may have to reach deeply inside yourself to remember who you are, to stay centered, as many of us may design tasks for you that seem at the moment to be illogical.

I will end with a sad, yet simultaneously happy story. As a residency program director, I commonly would have a meeting with the interns around December and ask them an important question. I would say: "You have been an intern for 6 months. It is possible that there was a time in those six months when you truly became a doctor. When did you become a doctor?"

Invariably, each intern would have a story, a story when he or she recognized the responsibility, the opportunity, the challenge, or the unmatched honor of being a doctor. And commonly this transformation happened at night, at night with a patient and their family, at night when the bustle of the day had faded and human connections became clear. (And please remember, graduates, that this moment of discovery often happened at night, so do not avoid night call!)

One intern described his moment in this way. He had been on the oncology service where he was caring for a young woman, a young woman with an incurable cancer. And for reasons that he could not describe, he found himself going to her room at the end of his workday and talking to her – not talking about her disease, but talking to her, talking to her about herself and her life and himself and his life. He did not go to cure, because he knew there was not a cure. But he still went and he talked with her. He went to be with her. His rotation on oncology ended, and he moved on to another rotation. And he heard from his colleagues that she had passed away.

He later came into the house-staff office, the residents' office where they have their mailboxes. And there was a note - a note of thanks – from that patient, a note thanking him for being with her at a time when a disease makes it hard for us to be with a person. She thanked him for, as she said, not only being her doctor, but also for being her friend. He acted as a doctor when he visited her, but he became a true doctor as he read her note, for she showed him the value of the profession, a profession that pays attention not only to the disease, but to the care of the person, the care of the whole person.

So I have talked to you about who you are, about what we face as a profession, and about what it means to a patient when we manifest the true values of our profession. Essentially, I have talked about what a Georgetown graduate has to offer the current world.

So why am I so proud on this day to wear the hood of a Hoya?

I think you know.

"Were I to have been left to my own designs, I would not be in front of you today. I had to be guided by people who knew what I did not know, who knew of places that I could not possibly imagine, and who had the vision that one could do something different."