2   On being a good doctor: professionalism and the art and science of medicine

In this chapter, we explore what it means to be a good doctor. As stated in Chapter 1, we believe that a good doctor is one who strives to practise competently, upholds the ethical standards of medicine, is committed to all the roles expected of doctors, is professional in their approach to clinical practice, can balance the 'art' and the 'science' of medicine and who at the same time maintains an appropriate balance between the professional and social spheres of daily life. The qualities that the community expects of its doctors are described, as are the features of poor or unprofessional conduct on the part of doctors. In addition, we explore the topic of the 'art of medicine', how this is defined and how it can be learned and practised.

Through our experience in different fields of medical practice, medical law, medical ethics and medical regulation, we have developed some understanding of the obstacles that doctors and patients face in making every encounter mutually satisfying. We also appreciate that most doctors are dedicated to their patients and their profession. Few mistakes are made wittingly and even fewer are made intentionally. Despite this, individual patients and health consumer groups continue to be dissatisfied at times with Australia's doctors (see Chapter 11). These dissatisfactions are rarely based on the doctor's lack of scientific and technical knowledge of medicine. Instead, most arise from a lack of knowledge or skills in those aspects of medicine that have variously been termed 'bedside manner', 'professionalism' or the 'art of medicine'. Sometimes, the necessary knowledge and skills are present but are undermined by disrespectful attitudes or behaviours, perhaps aggravated by pressing personal, health, or other issues.

Over the past 15 years, there has been an intense focus on the importance of medical professionalism, particularly in North America and Europe. This chapter first explores the background to this renewed interest, examines definitions of professionalism, and comments upon how professionalism is learnt by doctors and how it is demonstrated in daily practice.

2.1   What is professionalism?

In the preface to the previous edition of this book, we defined professionalism pragmatically as:

a convenient shorthand term to describe the professional attributes required (over and beyond simply having adequate knowledge of medicine and adequate procedural ability) for effective medical practice that the community can trust. Professionalism covers a wide range of elements, including good communication skills, an empathetic attitude, the virtues of self-reflection, truthfulness and dependability, cultural awareness in our multicultural society, and awareness of relevant laws pertaining to medical practice. Above all it covers an assumption that a person wishing to practise medicine effectively will bring positive attitudes to all the roles involved in being a doctor [1].

There is no single agreed definition of professionalism in the international literature. The definitions adopted in various publications can be linked to the purpose that the writer has in mind, as is discussed later when the reasons for the current interest in professionalism are examined. Definitions are also influenced by the background of the writer; for example, sociology or medicine [2]. Broadly, there appear to be two approaches taken to defining professionalism. In one approach, professionalism is linked to the traditional features by which any profession is identified. Thus, for example, a profession can be defined as 'a vocation with a body of knowledge and skills (expertise) put into service for the good of others; the welfare of society' [3]. This approach also typically identifies a profession by its capacity for self-regulation, a feature that implies great trust placed in that profession by the community. Using this approach, a Canadian group published an extended version of the definition of a profession:

> An occupation whose core element is work based upon the mastery of a complex body of knowledge and skills. It is a vocation in which knowledge of some department of science or learning or the practice of an art founded upon it is used in the service of others. Its members are governed by codes of ethics and profess a commitment to competence, integrity and morality, altruism, and the promotion of the public good within their domain. These commitments form the basis of a social contract between a profession and society, which in return grants the profession a monopoly over the use of its knowledge base, the right to considerable autonomy in practice and the privilege of self-regulation. Professions and their members are accountable to those served and to society [4].

In the second approach, professionalism is identified primarily via the qualities and behaviours that the medical profession understands are expected of it by the community it serves. This latter approach has been taken by a wide range of medical organisations across the world and is aligned with the pragmatic definition we have used previously. For example, the UK's Royal College of Physicians in 2005 defined professionalism as 'a set of values,