

Open heart surgery? The public disclosure of surgical performance

Abstract

Doctors have traditionally guarded their autonomy jealously, especially in managing clinical performance. Though surgery is often viewed as the most prestigious specialty, surgeons have been vulnerable to the apparent measurability of their practice.

Disclosure of clinical performance (via the internet) is being used to improve performance in England and other countries, through appeals to professional reputation and patient choice. This paper presents initial findings from an ethnographic case study of English surgeons' reactions to disclosure of their clinical performance (here mortality rates) and the impact on their autonomy. It is argued that disclosure does erode clinical autonomy in some respects but surgeons retain a significant degree of autonomy over their work performance, individually and collectively.

DEPARTMENT OF PSYCHOLOGY

SEMINAR

Date:
Friday, 19 March

Time:
1pm — 3pm

Room:
J1.10

Prof. Jonathan Gabe
Royal Holloway
University of London

Biographical note

Jonathan Gabe is Professor of Sociology in the Centre for Criminology and Sociology, Royal Holloway, University of London, UK. He has research interests in health care organisation, including the health care professions, chronic illness and pharmaceuticals and has published widely in these areas. His most recent publications are *Challenging Medicine*, Second Edition, Routledge, 2006 (co-edited with D. Kelleher and G. Williams), *The New Sociology of the Health Service*, Routledge, 2009 (co-edited with M. Calnan) and *Pharmaceuticals and Society: Critical Discourses and Debates*. Wiley Blackwell, 2009 (co-edited with S. Williams and P. Davis). He is currently co-editor of the journal *Sociology of Health and Illness*.

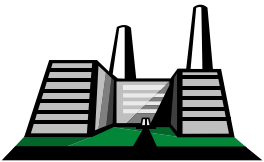


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