ON TEACHING AND EVALUATING ETHICS COMPETENCIES IN CLINICAL EDUCATION

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Clinical Ethics

- Clarifies issues, values, duties, etc. in clinical encounters.
- Assists in the recognition and naming of clinical ethical issues.
- Utilizes a variety of ethical problem-solving methods.
- Assists in facilitating discussion and compromise, as appropriate.
- Addresses larger societal questions as well as bedside encounters.

Goals for today's talk

-Review the expectations of health professionals to become "competent" in the human arts beyond science and technology.
-Explore ways to improve judgment in Health professionals.
-Describe some approaches in the classroom that might contribute to this.
-Emphasize that effective role modelling within optimized clinical cultures is the key to both teaching and assessing such skills - the "ethics competencies."

Clinical Judgment

- Does this patient need an independent translator, or will their child/sister suffice?
- Conflict of Interest?
- Truth and Reconciliation?
- Is this elder abuse?
- Does this patient really want this treatment?
- Lying for the sake of patient privacy?
- Is my great joke appropriate here?
- Should I share my opinion that staffing levels are too low?
- Etc.

Using the Code in Nursing Practice

Ethical Types of Experiences and Situations

Part I. Nursing Values and Ethical Responsibilities

A. Providing Safe, Compassionate, Competent and Ethical Care

B. Promoting Health and Well-Being

C. Promoting and Respecting Informed Decision-Making

D. Honouring Dignity

E. Maintaining Privacy and Confidentiality

F. Promoting Justice

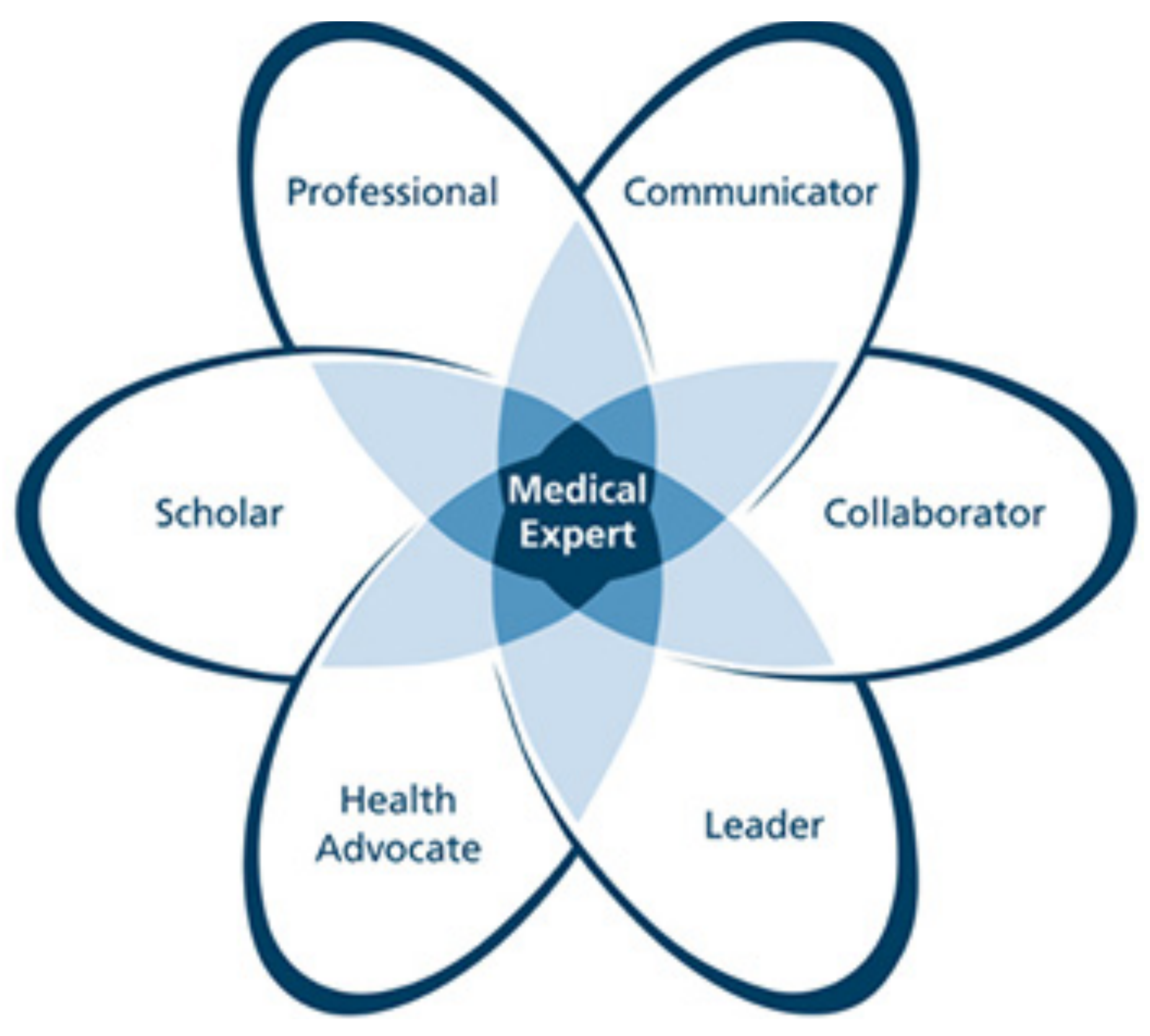
G. Being Accountable

Part II. Ethical Endeavours Related to Broad Societal Issues

Code of ethics for Canadian Nurses

Examples

- ….sensitive to power differentials
- …..advocate for the use of least-restrictive measures
- …..promote the incapable patient's participation in decisions, according to patient's abilities.
- ….listen to a person's stories to gain greater clarity about goals and wishes
- ……foster a moral community in which ethical issues can be openly discussed.



Canmeds competencies for Physicians.

Examples

- …..develop rapport and trust with patients and families
- ……convey health information effectively
- …..enter into interdependent relationships with other health professions.
- ….Allocate resources appropriately
- …..critically evaluate medical information
- ….manage conflicts of interest

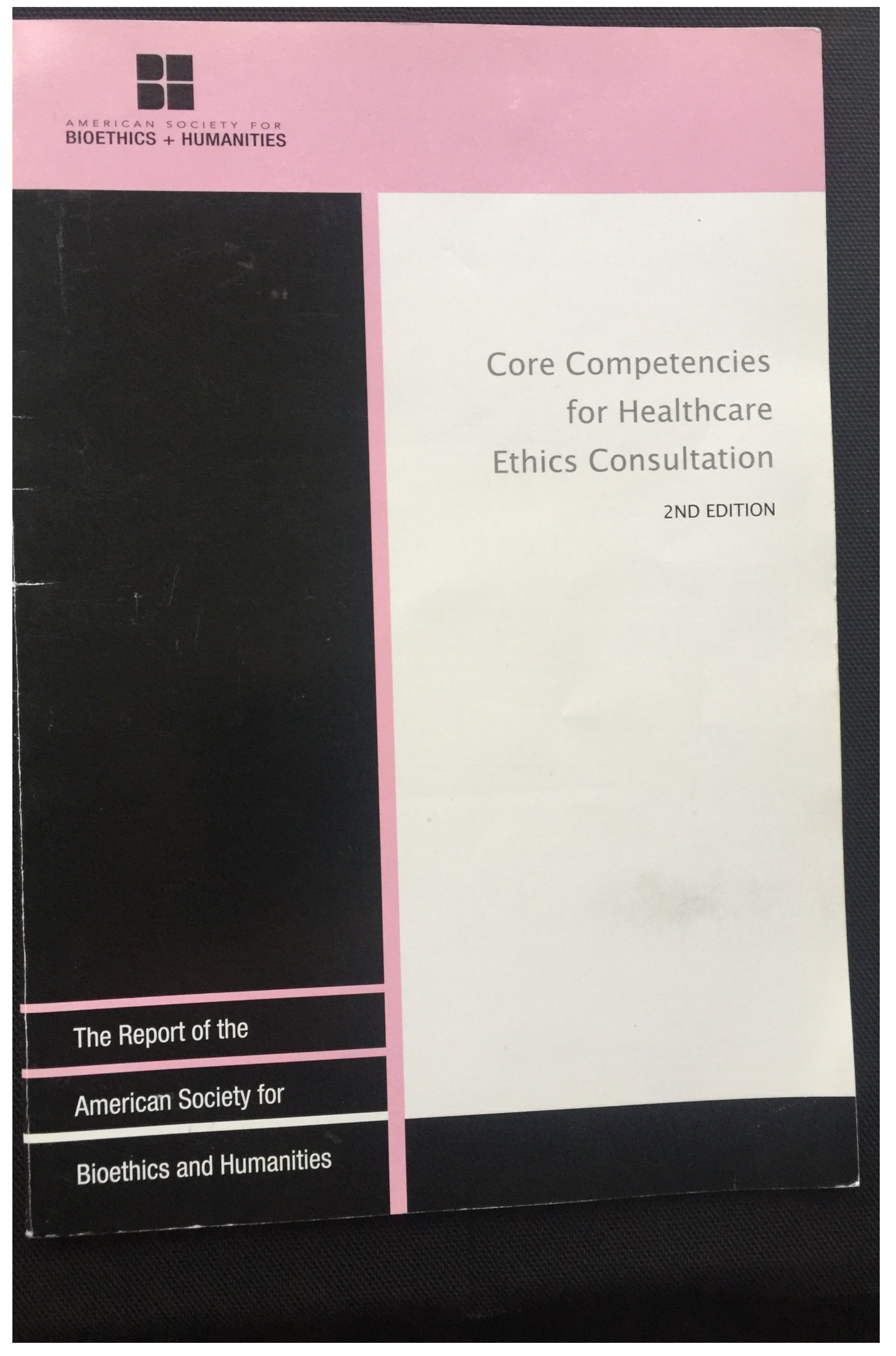
“Core competencies” for ethics consultation

Skills

- -assessment
- -process
- -interpersonal

Knowledge

Attitudes



Examples

- …..understand the nature of value uncertainty.
- ….Listen well and communicate respect and empathy
- …..understand and represent the views of various parties
- ….skilled in a range of methods of moral reasoning

Classroom options

- Reading, writing, and discussion.
- Topics that are realistic, and promote introspection.
- Small groups when possible.
- Emphasis on lifelong learning for health professionals.

Gallows Humor in Medicine

BY KATIE WATSON

Medical professionals regularly joke about their patients' problems. Some of these jokes are clearly wrong, but are all jokes wrong?

It was 3:00 AM and three tired emergency room residents were wondering why the pizza they'd ordered hadn't come yet. A nurse interrupted their pizza complaints with a shout: "GSW Trauma One—no pulse, no blood pressure."

The residents rushed to meet the gurney and immediately recognized the unconscious shooting

ORIGINAL INVESTIGATION

Lying to Each Other

When Internal Medicine Residents Use Deception With Their Colleagues

Michael J. Green, MD, MS; Neil J. Farber, MD; Peter A. Ubel, MD; David T. Mauger, PhD;
Brian M. Aboff, MD; James M. Sosman, MD; Robert M. Arnold, MD

Background: While lying is morally problematic, physicians have been known to use deception with their patients and with third parties. Little is known, however, about the use of deception between physicians.

Objectives: To determine the likelihood that resident physicians say they would deceive other physicians in various circumstances and to examine how variations in circumstances affect the likelihood of using deception.

Methods: Two versions of a confidential survey using vignettes were randomly distributed to all internal medicine residents at 4 teaching hospitals in 1998. Survey versions differed by introducing slight variations to each vignette in ways we hypothesized would influence respondents' willingness to deceive. The likelihood that residents say they would use deception in response to each vignette was compared between versions.

Results: Three hundred thirty surveys were distrib-

indicated they were likely to use deception to avoid exchanging call, 15% would misrepresent a diagnosis in a medical record to protect patient privacy, 14% would fabricate a laboratory value to an attending physician, 6% would substitute their own urine in a drug test to protect a colleague, and 5% would lie about checking a patient's stool for blood to cover up a medical mistake. For some of the scenarios, the likelihood of deceiving was influenced by variations in the vignettes.

Conclusions: A substantial percentage of internal medicine residents report they would deceive a colleague in various circumstances, and the likelihood of using deception depends on the context. While lying about clinical issues is not common, it is troubling when it occurs at any time. Medical educators should be aware of circumstances in which residents are likely to deceive, and discuss ways to eliminate incentives to lie.

Kohlberg's stages of moral development

Stage 6: I do it because it is the right thing to do

Stage 5: I do it because of a social contract we have with each othe

Stage 4: I do it because it is the law, and I respect the law

Stage 3: I do it so you like me

Stage 2: I do it so I get something out of it

Stage 1: I do it so I don't get in trouble

Cultural Competence

- An appreciation of the various elements that affect the world views of physicians, patients, and others.
- A nuanced ability to determine which cultures are relevant in patient encounters.
- Universal politeness?

Some things about culture:

- Everyone is embedded in cultures.
- Our cultures affect our sensibilities.
- There are grand, societal cultures, and tiny localized cultures.
  - (“the culture of our unit”)
- The cultures that influence us may not always be recognized.

Authenticity and Trust

- Authentic encounters = honest and open communication between people, perceived as mutually respectful.

- Trust = the state of having earned the respect and compassion of the other.

- These greatly enhance therapeutic relationships, and are fundamental to effective learning.

Shared Decision Making

- Sharing starts with patient, extending to primary clinicians, and then to patient’s loved ones, and other clinicians (including trainees).
- Requires interpersonal communications between the people involved.
- Sharing decisions well is the core to teaching students in the clinic. Enhances learning and enables assessment.

Assessing Learning

- Real-time feedback from supervisors and colleagues, in the clinical setting.
- Reasonably in-depth discussions in classrooms, about literature, cases, codes, history, psychology, etc.
- Close reading of written work that reveals something about the assessment skills and attitudes of learners.
- Requires at least someone who "knows" the learner well enough - and who might coordinate formal feedback.

Learning Modules aimed at these compencies…

- Principles of health communication.
- Collaboration and Shared Decision-Making
- Equipoise and clinical practice variations
- Clinical Practice in Multicultural Societies
- Humour in the workplace.
- A Professional’s response to Adversity
- Etc. - these topics are available through JDHEC.

Questions to consider:

- What might be the hazards of trying to put all of these skills onto a list?
- To what degree can these skills be taught? Might they already exist, or not, in young adults?
- Is it reasonable to rely on “self-evaluation” by individuals with respect to moral growth during training?
- Your questions and comments?

Thanks. Discussion?

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