

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.

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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."

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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?
- Ftc



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 Accountabl

Part II. Ethical Endeavours Related to Broad Societal Issues

Code of ethics for Canadian Nurses

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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.



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"Core competencies" for ethics consultation

Skills

- -assessment
- -process
- -interpersonal

Knowledge Attitudes



Professional Communicator Scholar Medical Collaborator		
Health Advocate Leader		
Canmeds competencies for Physicians.		
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Examples		
 develop rapport and trust with patients and families convey health information effectively 		
 enter into interdependent relationships with other health professions. 		
 enter into interdependent relationships with other health professions. Allocate resources appropriately 		
 enter into interdependent relationships with other health professions. 		
 enter into interdependent relationships with other health professions. Allocate resources appropriately critically evaluate medical information 		

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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

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Classroom options

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

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about their patients' problems. Some of these okes are clearly wrong, but are all jokes wrong

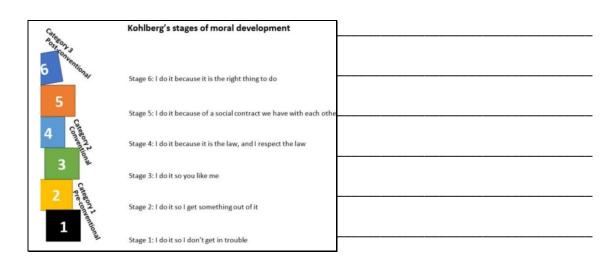
IF WAS 3:00 AM and three tired energy room residents were wondering why the pizza it ordered hadris come yet. A ware interrupted or pizza complaints with a share: "GSW Two One—no palae, no blood pressure."
The residents rushed to meet the garney immufatorly measured to meet the garney

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Lying to Each Other When Internal Medicine Residents Use Deception With Their Colleagues Michael J. Grow. MD. 85; Nol. J. Furber. M.D. Fore A. Usel. MD. Dord T. Manger, P.DC. Briam M. Adolg, M.D., James M. Soomas, MD. Robert M. Anady, MD. Brobperands Visible joing more and producents, give in the internal producents on the foreign points and who third partners that is haven, however, allows the sear of tecrpans between physicians. Michael Grow. AD. 85; When the A. Marked M.D. Bord T. Manger, P.DC. Brobperands Visible joing more and producents, give in the producent of the

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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?

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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.

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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.

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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.

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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.

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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.

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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?

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Thanks. Discussion? Gary Goldsand goldsand@ualberta.ca Health Ethics Seminar