

# Keeping Clinicians Responsible for Addressing Ethical Challenges

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## Best Practices:

1. Conceptually and practically differentiate “ordinary” and “extra-ordinary” ethical challenges that arise in the course of clinical care
2. For those challenges seen as “ordinary,” develop supportive practices to enhance and affirm clinicians’ responsibility for their moral commitments
3. For those challenges seen as “extra-ordinary,” determine how to best engage clinicians in a consultative model that works to help them resolve ethical challenges
4. Where appropriate, advocate for senior clinicians to educate trainees on their responsibility to address “ordinary” ethical challenges

| Best Practice  | Rationale   | Barriers  | Possible Action Steps   |
|--|---|---|---|
| 1. Conceptually and practically differentiate “ordinary” and “extra-ordinary” ethical challenges that arise in the course of clinical care | <ul style="list-style-type: none"> <li>• Addressing “ordinary” ethical challenges (e.g., exploring and incorporating patient values as part of a medical plan) ought to be the responsibility of clinicians</li> <li>• Ethical challenges that are “extra-ordinary” (e.g., conflicting values) may require the expertise of a clinical ethics consultant</li> </ul> | <ul style="list-style-type: none"> <li>• Conceptually, it may be difficult to accurately delineate where “ordinary” ends and “extra-ordinary” begins</li> <li>• Practically, clinical cases may be complex enough that the ethical issues don’t easily present as “ordinary” or “extra-ordinary”</li> </ul> | <ul style="list-style-type: none"> <li>• Further discussion on which types of ethical challenges can be identified as “ordinary” or “extra-ordinary” in order to clarify criteria to label any given issue as one or the other</li> <li>• Qualitative study surveying experienced clinicians and clinical ethics consultants on demarcations between ordinary and extraordinary ethical challenges</li> </ul> |
| 2. For those challenges seen as “ordinary,” develop supportive practices to enhance and affirm   | <ul style="list-style-type: none"> <li>• Ethical challenges that necessarily inform clinician practice should be a routine part of clinician practice</li> </ul>  | <ul style="list-style-type: none"> <li>• Pushback from clinicians who requested assistance not receiving the response they expected or hoped for</li> </ul>   | <ul style="list-style-type: none"> <li>• Educate clinicians on distinctions between “ordinary” and “extra-ordinary” ethical challenges and clarify the clinical ethics</li> </ul>   |

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|---|---|---|--|
| <p>clinicians' responsibility for their moral commitments</p>   | <ul style="list-style-type: none"> <li>In these cases the clinical ethics consultant should support clinician practice rather than encroach clinical boundaries</li> </ul>  | <ul style="list-style-type: none"> <li>Clinical ethics consultants feeling that they are better equipped to handle any ethical challenges than their clinician colleagues</li> </ul>  | <p>consultant's role in either scenario</p> <ul style="list-style-type: none"> <li>Continue to support, enhance, and affirm clinicians' responsibilities by offering guidance on how to work through the "ordinary" ethical challenge</li> </ul>   |
| <p>3. For those challenges seen as "extra-ordinary," determine how to best engage clinicians and patients/families in a consultative model that works to help them address ethical challenges</p> | <ul style="list-style-type: none"> <li>There are ethical challenges that are best served by appeal to the experience and skill sets of clinical ethics consultants</li> <li>In these cases clinical ethics consultants should engage clinicians and patients/families in a consultative model that works to help them address ethical challenges</li> </ul> | <ul style="list-style-type: none"> <li>Pushback from clinicians who hoped clinical ethics consultants would "solve" the ethical challenge</li> <li>Misunderstanding from patients/families of the clinical ethics consultant's role and scope of engagement</li> </ul>  | <ul style="list-style-type: none"> <li>Explain role and limits of clinical ethics consultation while still performing ethics consultation in normal fashion</li> <li>Continue to support, enhance, and affirm clinicians' moral commitments to caring for patients in the face of "extra-ordinary" ethical challenges</li> </ul> |
| <p>4. Where appropriate, advocate for senior clinicians to educate trainees regarding their responsibility to address "ordinary" ethical challenges</p>   | <ul style="list-style-type: none"> <li>If addressing "ordinary" ethical challenges are considered part of routine clinical care, it should be taught by clinicians to emphasize this routinization</li> <li>Allows clinicians to retain responsibility for caring for their patients in everyday circumstances</li> </ul>                                   | <ul style="list-style-type: none"> <li>Even if able to practice this responsibility, senior clinicians may not have the tools or bandwidth to teach it</li> <li>Clinical ethics consultants wishing to retain ownership of the responsibility to address ethical challenges, and thus the teaching of it</li> </ul> | <ul style="list-style-type: none"> <li>Discuss with clinical leadership the difference between "ordinary" and "extra-ordinary" ethical challenges, and opportunities and methods to empower senior clinicians to educate trainees on their responsibility to address "ordinary" ethical challenges</li> </ul>                    |