Approaches to Social Work Ethical Decision-Making

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Today’s Workshop Objectives

- Describe the principles that underlie medical ethics: autonomy, beneficence, non-maleficence, justice, dignity and fidelity.
- Demonstrate the ability to blend social work values and medical ethics to make sound ethical decisions involving patients and their families.
- Apply an ethical decision making framework to a patient case in a logical manner, reflecting interdisciplinary collaboration.

NASW Code of Ethics

- Service
- Social Justice
- Dignity and Worth of the Person
- Importance of Human Relationships
- Integrity
- Competence
Core Medical Ethics

- Autonomy
  - The patient’s right to refuse or choose their treatment.
- Beneficence
  - Always acting in the best interest of the patient.
- Non-Maleficence
  - “Above all, do no harm.”
- Justice
  - Fairness and equality as to who gets what treatment.
- Dignity
  - Treating the patient, family and practitioner with respect.
- Fidelity
  - Notions of loyalty, commitment, and trust in the relationship.

Essence of Social Work

- Resolving ethically challenging cases mirrors the problem-solving method which is a hallmark of the social work profession:
  - Engagement
  - Data Collection
  - Assessment
  - Intervention
  - Evaluation
  - Termination
  - Follow-Up

Typical Forms of Ethical Dilemma Resolution
Ethics Committees

- Social work is represented on 75% of hospital ethics committees.
- Only 31% of hospice agencies studied have ethics committees.
- Social work is represented on only 53% of these hospice ethics committees.

Most Frequent Forms of Hospice Ethics Discussions

1. Discussion in IDT Meetings (100%)
2. Discussion with Medical Director (83%)
3. Informally with Team Members (76%)
4. Discussion with Attending Physicians (60%)
5. Hospital Ethics Committee (20%)
6. Hospice Ethics Committee (18%)
7. Referral to an Ethics Consultant (8%)
8. Community Ethics Committee (6%)

Skill Sets Needed

- Ethical Assessment Skills
  - Including bioethics, agency policies, professional codes, religious and cultural values.
- Process Skills
  - Effective interaction with key decision-makers. Able to facilitate fair and formal meetings.
- Interpersonal Skills
  - Ability to listen and communicate with respect, support, and empathy for all.
Ethics Training

- Where were you trained on ethical decision making?
  - MSW Program?
  - Community Seminars?
  - Continuing Education Seminars (Medical Centers)?
  - Continuing Education Seminars (School of SW)?
  - Seminars by Employer?

The Collaborative Ethical Decision-Making Framework

1. Assess situation completely from a social work perspective examining the clinical, physical, legal, cultural, and systemic issues facing the situation.
2. Determine issues that present the ethical problem.
3. Consider alternatives available for implementation, weighing positives and negatives of each.
4. Consult with professional colleagues and/or experts with knowledge about this or similar situations.
5. Review alternatives with patient and family and document accordingly.
6. Implement the best alternative given the circumstances and the environment.
7. Monitor, evaluate, and document the decision.

The Collaborative Ethical Decision-Making Model
Step #1

- Assess situation completely from a social work perspective examining the clinical, physical, legal, cultural, and systemic issues facing the situation.
  - Conduct a thorough psychosocial assessment.
  - Know the facts.

Step #2

- Determine issues that present the ethical problem.
  - Clear assessment is key.
  - Clearly and concisely communicate your presenting problem from your professional assessment.

Assessment Information

- Medical Indications
- Patient Preferences
- Quality of Life
- Contextual Issues
- Morality Issues
Step #3

- Consider alternatives available for implementation, weighing positives and negatives of each.
  - We don’t need another well-defined problem.
  - Consider solutions to present to the ethics team.

Step #4

- Consult with professional colleagues and/or experts with knowledge about this or similar situations.
  - No Lone Rangers - Collaboration is key.
  - Use ethical consultants or committees for problem-solving.
  - Avoid territoriality and professional rivalry.

Step #5

- Review alternatives with patient and family and document accordingly.
  - Congruent with hospice philosophy and social work ethics.
  - Communication is vital to maintaining healthy professional relationships with patients and families.
  - Honor the dignity of autonomy.
Step #6

- Implement the “best” (most functional) alternative given the circumstances and the environment.
  - Based on input from professionals and family, and with respect for medical and social work ethical principles, introduce the alternative that is the most viable given the circumstances.
  - Leave your own values, opinions, and judgments at the door.
  - Implementation plans are subject to change at any time, without notice.

Step #7

- Monitor, evaluate, and document the decision.
  - Monitor for new dilemmas, while moving forward on other day-to-day matters.
  - Debrief – Engage in a Retrospective Review

Case Example #1 (see handout)

- “Shiela”
- 59-year old African American female
- History of Depression
- Family wants aggressive care
- Patient wants palliative/hospice care
- Husband invalidates Shiela’s health-related wishes
Case Example #2

Case Example #3

Dilemmas in Prison Hospice and Healthcare

Case Example #4
OK…Now Let’s Hear From You…

- Let’s walk through some examples from your experience in hospice agencies.
  - Examples from your agency?
  - How can a model like this work at your hospice with social work as the lead?

References and Handouts

- Please write your email address on the sheet being circulated so we can send you our reference list and handouts.

Thank you for your participation!

Have fun in Las Vegas!
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