The Case for Health Ethics to Improve Health Outcomes
Proposal for Support

Studies consistently show that engaging seriously in Health Ethics is not for the faint of heart. Multiple research findings have reported substantial expressed need for bioethics training, but also documented severe limitations in the availability of resources in the work setting.

Only about 5% of health professionals performing consultations across the country report having received formal clinical ethics training. Most rely on peers or others who have learned by doing, but many report feeling moral distress due to their being ill-equipped and unprepared for many of the situations they face. A few training models have emerged over time focused on strengthening skills, but most ethics committees lack sufficient time or resources to invest in those efforts on their own as they commonly serve as volunteers with no background to conduct the training for their peers.

Virtually all health professionals – doctors, nurses, chaplains, social workers, and allied health professionals, whether in or out of the hospital – face ethical issues in their interactions with patients and families. For an idea of how diverse and traumatic these issues can be, review a few of the more than 55 case studies on our website.

Ignoring the need to respond to ethical dilemmas, family crises, moral failure in the duty of care, and inadequate policy heightens risks for institutions and increases likelihood of burnout among professionals. Patient autonomy, informed consent, and shared decision making are fundamental to ensuring patients’ rights. These tenets rely on sound ethical frameworks and professional conduct in delivering safe, responsible and accountable healthcare.

This educational gap hinders regional clinicians’ ability to provide better patient-centered care, especially in critical situations.

We would never send an untrained healthcare professional to the bedside of a patient in need of critical care, but in the area of bioethics consultations, it happens all too frequently. Health professionals use ethics skills to ensure and protect patients’ rights in choosing treatments, helping assess benefit and burden, and embracing patient centeredness.

A recent study found that ethics committee education and consultation skill can

- increase patient satisfaction,
- improve employee morale,
- enhance productivity,
- conserve resources, avoiding costs,
- improve accreditation reviews,
- reduce ethics violations and risk of lawsuits,
- sustain corporate integrity, and
- safeguard the organization’s future.

The report also noted wide variability in proficiencies within institutional care settings. The Center can help change that reality.
Except for two academic medical centers, there are virtually no trained bioethics professionals in our region. Current and former Center staff are involved in both of those institutions of exception. The Center stands ready to help the legion of volunteers across the region to improve their skills and performance.

Your investment in the Center’s work to assist young scholars, mid-career professional volunteers, health professionals and students in training through fellowships, internships, practicum, intensives, and clerkships is needed now to ensure that current and future clinicians (including community volunteers serving on hospital ethics committees) are prepared to address complex issues that arise in the treatment of patients and deliver on the outcomes cited above.

Your support can pay dividends as the Center’s resources are leveraged and applied to build on three decades of relationships in the region and new ones budding on the web.

In 1986, responding to committees’ need for ethics education, the Center convened the Kansas City Regional Hospital Ethics Committee Consortium, the oldest continuously operating consortium of its kind in the nation. In 1992, the Joint Commission began requiring hospitals to have a “clinical ethics mechanism” to receive accreditation. Since then, ethics committees have become increasingly common in acute care and other provider institutions. But they struggle with resources and training.

The support the Center receives from hospitals, health systems and small community-based providers in the region covers the costs of operating the Consortium, but the additional individual training opportunities that the Center offers to young scholars, mid-career professionals and community volunteers needs underwriting. Approximately 70% of the costs associated with the Center’s work in training and educating volunteers is covered by fees and payments, but the shortfall still exceeds $50,000 annually.

Most of that cost is professional staff time involved with community education, public policy work and training for individual students and volunteers who are trying to improve their understanding and proficiency.
YOUR SUPPORT WILL STRENGTHEN THESE AREAS

PROFESSIONAL

• **Clerkships, Fellowships, Clinical Ethics Studies** – For decades, the Center has provided uncompensated support and guidance to young and mid-career health professionals working to enhance and improve their clinical ethics skills, primarily through unfunded practicum and internship opportunities. Over time, this guidance and supervision has expanded to provide formal fellowship and clerkship studies for those enrolled in formal courses of study (e.g., 800+ Kansas City area medical students), but again, with little or no financial support for the learner and no underwriting for Center personnel. New funding will help offset staff costs to offer in-depth, project-based ethics skill training to a growing group of health professionals in real world settings who seek specific learning opportunities related to their work and provide learner stipends to offset the cost of the learner designed health ethics project.

• **Kansas City Regional Ethics Committee Consortium** – The Center offers eight webinars and two full-day workshops each year for ethics committee members representing nearly 40 area hospitals and health systems, as well as other community-based organizations such as home health, hospice and transplant networks. Topics on the 2019 educational agenda included introduction to bioethics, autonomy and informed consent, conducting a family meeting, brain death, artificial intelligence, and several sessions on landmark cases. All ethics committee members also receive a monthly e-newsletter, designed to supply these volunteer-led committees with ready-made training curricula.

PERSONAL

• **Guidance for Patients and Families** – The Center responds to hundreds of calls annually from patients and families seeking guidance in a healthcare crisis. We help these callers with provider and system navigation, guidance on how to advocate for themselves, assistance in sorting through options and potential resolutions, how to obtain and execute advance care planning documents, ask for consultations, challenge providers and articulate ethics concerns. Many of these situations are complex, requiring multiple steps and hours to resolve.

*When Mom was in the ICU, we didn’t know where to turn, until someone told us to call the Center. What a godsend! They helped with how to ask the right questions and what to focus on so we could get all us kids on the same page. The crisis dissolved with their help and guidance… and Mom got the care she wanted and needed.*

Joann (Daughter)
**Community Education** — Clinicians, allied health professionals and consumers in general are hungry for knowledge, insights and tips to help them navigate real-life challenges posed by advances in medicine and technology. Year after year, our lectures, symposia and workshops attract hundreds of learners from diverse walks of life. With more than 3,000 articles, videos and guidelines and growing, we offer one of the largest free online bioethics libraries in the world at PracticalBioethics.org.

**POLICY**

**Resources for Policymakers** — Senior staff at the Center also spend hours developing responses to requests by policymakers needing background and resources to help them better understand the practical implications of healthcare legislation and regulations and thus make decisions with fewer unintended consequences. Topics range from the impact of big data on healthcare and organ transplant ethics to making difficult treatment decisions.

Ethics education in healthcare happens behind the scenes: in classrooms, boardrooms and lecture halls.

Its impact, however, is felt in the most intimate moments of people’s lives: in the emergency room and ICU, at the bedside, and in the hearts and minds of patients, families and those who care for them.

Thank you for caring. Thank you for your support. Thank you for understanding the need.

Through your generosity, the Center assists countless patients and families every year. Whether it be directly through our touch and resources or indirectly through our training and skills development, better care happens and better outcomes result.

Thank you for your commitment to this worthy work.