

Medical Ethics in the Hospital: Towards Quality Ethics Consultation

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Abstract : During the past few decades, the healthcare system has undergone profound changes in their healthcare decision-making competencies and moral aptitudes due to the vast advancement in technology, clinical skills, and scientific knowledge. Healthcare decision-making deals with morally contentious dilemmas ranging from illness, life and death judgments that require sensitivity and awareness towards the patient's preferences while taking into consideration medicine's abilities and boundaries. As the ever-evolving field of medicine continues to become more scientifically and morally multifarious; physicians and the hospital administrators increasingly rely on ethics committees to resolve problems that arise in everyday patient care. The role and latitude of responsibilities of ethics committees which includes being dispute intermediaries, moral analysts, policy educators, counselors, advocates, and reviewers; suggest the importance and effectiveness of a fully integrated committee. Despite achievements on Integrated Ethics and progress in standards and competencies, there is an imminent necessity for further improvement in quality within ethics consultation services in areas of credentialing, professionalism and standards of quality, as well as the quality of healthcare throughout the system. These concerns can be resolved first by collecting data about particular quality gaps and comprehend the level to which ethics committees are consistent with newly published ASBH quality standards. Policymakers should pursue improvement strategies that target both academic bioethics community and major stakeholders at hospitals, who directly influence ethics committees. This broader approach oriented towards education and intervention outcome in conjunction with preventive ethics to address disparities in quality on a systematic level. Adopting tools for improving competencies and processes within ethics consultation by implementing a credentialing process, upholding normative significance for the ASBH core competencies, advocating for professional Code of Ethics, and further clarifying the internal structures will improve productivity, patient satisfaction, and institutional integrity. This cannot be systemically achieved without a written certification exam for HCEC practitioners, credentialing and privileging HCEC practitioners at the hospital level, and accrediting HCEC services at the institutional level.

Keywords : ethics consultation, hospital, medical ethics, quality

Conference Title : ICCMEH 2018 : International Conference on Cases in Medical Ethics and Health

Conference Location : Paris, France

Conference Dates : March 15-16, 2018