Welcome to the ethics component of our Medical Ethics & Indiana Jurisprudence course.

Our goal is to introduce you to biomedical ethics concepts that will support contemporary practice in Indiana.

Many states require some form of competency in ethics on a regular basis. Indiana established this program in 2013. The online course was edited in 2019 and updated for this presentation.

For: Physical Therapists, Physical Therapist Assistants, Students

Disclaimer

“The information provided is offered for general information purposes. It is not offered or intended, nor should it be relied upon, as legal advice.”
### Course Objectives

- Define the meaning of ethics and the concepts of nonmaleficence, beneficence, autonomy, and justice (Module 1)
- Explain the various theories that promote ethical behavior (Module 1)
- Recognize individual and cultural differences in the provision of ethical practice (Module 1)
- Understand decision-making approaches in medical ethics and reflect upon personal and professional values and their impact on ethical decision-making, including APTA Core Values (Module 1 & 3)

### Module 1: Ethical Definitions & Theories

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### Course Objectives

- Recognize the importance of interpreting the APTA Code of Ethics for the Physical Therapist, Standards of Ethical Conduct for the Physical Therapist Assistant, and APTA Guide for Professional Conduct (Module 2)
- Identify features of two models for ethical case understanding and resolution (Module 3)
- Apply concepts of ethical practice to clinical scenarios to determine appropriate ethical behavior (Module 3)
Ethics: Definitions

A Theoretical Framework-
- Morality: human conduct and values; right vs. wrong. Personal, societal and group morality
- Ethics: systematic reflection on morality
- Ethical conflict: when applicable duties, values or goals conflict
- Ethical dilemma: analysis of principles or values suggests two or more courses of action
- Compliance issue: what is right is clear; unclear whether or not professional will comply

Purtilo, 2005

Convergence: Theoretical & Clinical Ethics

Rules/principles
Outcomes/consequences
Virtue/values
Agreement about clinical practice

Duties, Rights and Obligations

- Deontological approaches
- From Greek for ‘duty,’ from a higher order
- Duties involve actions in response to claims on you (self-imposed or imposed by others)
- Four principles:
  - Autonomy
  - Beneficence
  - Non-maleficence
  - Justice
Four Principles Approach

- **Autonomy** – the capacity to think, decide and act freely and independently (self-determination); includes doctrine of informed consent
- **Beneficence** – foster the interests of other persons; bring about positive good
- **Non-maleficence** – refrain from harming others
- **Justice** – to act fairly, distribute benefits and burdens equitably, resolve disputes by fair procedures

Beauchamp and Childress, 2001

Outcomes/Consequences

- **Teleological approaches**
- From Greek word for ‘end’
- **Utilitarianism** – take the action that involves the greatest good for the greatest number

Context, Environment and Situation

- Some ethicists argue that the failure of biomedical ethics is rooted in an inability to understand the clinical context and relationships
- What factors/agencies influence the practice of physical therapy?
Contextual Aspects of Physical Therapy Practice

- State laws
- Federal laws
- Third party payers
- Regulations
- Facility policies
- Referral sources
- APTA
- Patient, family
- JCAHO

Ethic of Care

- C – Concern for another individual
- A – Active in placing the interest of another ahead of our own
- R – Relational and interdependent; looks at the effect ethical issues have on relationships and how the relationships impact the ethical situation
- E – Empathetic; requires emotional sensitivity

Individual/Cultural Differences

- ‘Individualistic’ (Euro-American):
  - Individualism/privacy
  - Personal control
  - ‘Doing’
  - Competition
  - Values youth
  - Equal sexes
  - Human equality
  - Informality

- ‘Collectivistic’ (all others):
  - Group welfare
  - Fate
  - ‘Being’
  - Cooperation
  - Values elders
  - Defined gender roles
  - Hierarchy/rank
  - Formality
Individual/Cultural Differences

- Culture will impact:
  - Autonomy
  - Health beliefs
  - Communication
  - Touch, dress
  - Current distress
  - Gestures, eye contact, personal space
  - Major language
  - Literacy
  - Symptom management
  - Family relationships

  Lipson, Dibble & Minarik, 1996

Cultural Humility

- A “life-long commitment to self-evaluation and self-critique” to “redress power imbalances in client-practitioner relationships”
- “Best defined not as a discrete end point but as a commitment and active engagement in a lifelong process that individuals enter into on an ongoing basis with patients, communities, colleagues, and with themselves” (Tervalon & Murray-Garcia, 1998, p. 118)

Cultural competence vs. cultural humility

<table>
<thead>
<tr>
<th>Cultural competence</th>
<th>Cultural humility</th>
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</thead>
<tbody>
<tr>
<td>Focus on group traits</td>
<td>Individualized, contextual</td>
</tr>
<tr>
<td>Ethnic/racial groups class, age, education, income, ability, faith</td>
<td>Broader intersectionalities:</td>
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<tr>
<td>Dominant culture norm</td>
<td>Recognize, minimize power dif</td>
</tr>
<tr>
<td>Stereotypes</td>
<td>Promotes respect</td>
</tr>
<tr>
<td>Focus group traits</td>
<td>Individual focus, including self</td>
</tr>
<tr>
<td>Defined course</td>
<td>Ongoing life process; makes bias explicit</td>
</tr>
<tr>
<td>Suggests expertise</td>
<td>Flexibility/humility</td>
</tr>
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Adapted from Yeager & Bauer Wu 2013
Virtues and Values

- Virtues analysis asks “What kind of person do I want to be?”
- Personal and professional

Traditional Virtues

- Temperance – self control
- Fortitude – strength of character, courage
- Justice – concern with equity
- Prudence – wisdom to apply theoretical principles to concrete circumstances
- Faith – lived reliance upon God
- Hope – in afterlife
- Charity – love of God/neighbor as self; infuses and integrates other virtues

Values

“Values” - “Words expressing enduring goals that... serve as guiding principles in the life of a person, group or culture. Values... serve as cognitive standards for judging and justifying actions and lead to actions that fulfill desired personal, social and societal motivational goals (emphasis added).”

Nosse, Friberg & Kovacek, 1999
Values

Important to reflect upon our values to discover our underlying biases, to recognize conflicting values, to assist patients in affirming their values, to establish consensus about professional values and to ensure that suggested policies, procedures, rules and regulations reflect sound ethical professional values.

Personal Values Reflection

- Sample Personal Values:
  - Protect environment
  - Honest
  - Honoring parents, elders
  - Respect for tradition
  - Social order
  - Successful
  - Curious

  Nosse, Friberg and Kovacek, 1999

APTA Core Values

- Accountability
- Altruism
- Compassion/Caring
- Excellence
- Integrity
- Professional Duty
- Social Responsibility
- Collaboration
- Inclusion (new)
Accountability

- Accountability – active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant, including self-regulation and other behaviors that positively influence patient and client outcomes, the profession and the health needs of society.

Altruism

- Altruism – primary regard for, or devotion to, the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist’s or physical therapist assistant’s self interest (revised definition).

Collaboration

- Collaboration is working together with patients and clients, families, communities and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner’s respective role, to achieve optimal physical therapist services and outcomes for patients and clients.
Compassion/Caring

- Compassion – the desire to identify with or sense something of another’s experience; a precursor of caring
- Caring – the concern, empathy, and consideration for the needs and values of others

Excellence

- Excellence – excellence in the provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embrace advancement, and challenge mediocrity. (revised definition)

Integrity

- Integrity – steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions. (revised definition)
Professional Duty

- The commitment to meet one’s obligations to provide effective PT services to individual patients and clients, to serve the profession, and to positively influence the health of society

Social Responsibility

- The promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness

Inclusion

- Create a welcoming and equitable environment for all
- Providing a safe space
- Elevating diverse and minority voices
- Acknowledge personal biases that may impact patient care
- Taking a position of anti-discrimination
R. E. A. C. H. Values

- Respect
- Excellence
- Autonomy and Well-being
- Communication, collaboration and advocacy
  (College of Physiotherapists of Ontario)
- Honesty and integrity

Values Self-Assessment Tool

APTA Core Values:
self-assessment for the PT

Values-based Behaviors for the Physical Therapist Assistant:
self-assessment for the PTA

/Documents available on APTA website; note these do not reflect newer values of collaboration and inclusion/

Module 2: Code of Ethics

- Interpret and apply the APTA Code of Ethics for the Physical Therapist, Standards of Ethical Conduct for the Physical Therapist Assistant, and APTA Guide for Professional Conduct
VALUES APPLICATION:  
APTA CODE OF ETHICS &  
STANDARDS OF ETHICAL CONDUCT

Purposes of Professional Codes of Ethics

- Articulate moral vision and self-understanding of the profession
- Educate and provide guidance to members of the profession in ethical decision-making and conduct
- Promote the “social contract,” public accountability and societal expectations

Swisher and Hiller, 2010

APTA Code of Ethics

- Provides guidance for expanded responsibilities of PT related to autonomous practice
- Addresses complexities of contemporary health care environment
- Captures contemporary notion of relationship of PT and PTA to other health care providers
APTA Code of Ethics

- Applies to all therapists/assistants – APTA members and non-members
- INAPTA/APTA can only investigate and/or discipline members regarding ethical complaints/violations
- In its applicability to all practitioners, the Code of Ethics can be introduced into a court of law to establish a Standard of Care

Scott, 1998, 2009

Code Structure

- Includes core values of the profession
- Takes into account the realms of ethical exchange (individual, organizational, societal)
- Articulates obligation to demonstrate evidence-based practice

Code Preamble

“Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness and enhanced quality of life”
Categories of Principles

- Principle 1 – Respect for inherent dignity and rights of all individuals
  - Core Values: Compassion, Integrity
- Principle 2 – Trustworthy and compassionate in addressing needs of patients/clients
  - Core Values: Altruism, Compassion, Professional Duty
- Principle 3 – Accountability for sound professional judgments
  - Core Values: Excellence, Integrity

Principles - continued

- Principle 4 – Demonstrating integrity in relationships
  - Core Value: Integrity
- Principle 5 – Fulfilling legal and professional obligations
  - Core Values: Professional Duty, Accountability

Principles - continued

- Principle 6 – Enhance expertise through lifelong acquisition of knowledge, skills and abilities
  - Core Value: Excellence
- Principle 7 – Promotion of organizational behaviors and business practices that benefit patients and society
  - Core Values: Integrity, Accountability
Principles - continued

- Principle 8 – Participate in efforts to meet health needs locally, nationally, globally
  - Core Value: Social Responsibility

Standards of Conduct for the Physical Therapist Assistant

- 8 standards which mirror the Code of Ethics principles:
  - Standards 1, 2, 4, 5 and 8 are identical to Code of Ethics language

- Standard 3 provides that PTAs shall collaborate with the PT in making sound clinical decisions
- Standard 6 requires PTAs to enhance their competence through lifelong acquisition of knowledge, skills and abilities
- Standard 7 requires that PTAs support organizational behaviors and business practices that benefit patients/clients and society
Module 3: Ethical Decision-making

- Identify features of two models for ethical case understanding and resolution
- Apply concepts of ethical practice to case scenarios to determine appropriate ethical behavior
- Approximate time to complete: 20 minutes

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So How Do We Reach A Decision In A Particular Case?

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Ethical Decision-making Processes

- RIPS Model: Swisher, Arsalanian and Davis, ’05
Six Steps in Ethical Decision-making

- Gather relevant information
- State the ethical question
- Apply ethical approaches: consider legal, societal and contextual influences; duties, rights and obligations of legitimate stakeholders
- Explore alternatives
- Choose and implement course of action
- Evaluate process and outcome — additional information needed, biases/assumptions, strengths/weaknesses of action selected

RIPS Model

[RIPS: Realm, Individual Process, Situation]

- 1. Recognize and define issues
- 2. Reflect
- 3. Decide
- 4. Implement, evaluate and reassess

Realm

- **Individual**: concerned with good of the patient; focus on rights/duties/relationships
- **Institutional/organizational**: concerned with good of the organization; focus on structures and systems to meet organizational goals
- **Societal**: concerned with the common good
Individual Process

- Moral sensitivity: recognizing, interpreting, framing ethical situations
- Moral judgment: deciding between right and wrong actions
- Moral motivation: prioritizing ethical values over financial gain or self interest
- Moral courage: implementing chosen action despite adversity

Ethical Situation

- Problem or issue: situation in which moral values are being stressed or challenged
- Temptation: choice involves relinquishing gain
- Distress: structural barrier to implementation
- Dilemma: two or more right courses of action
- Silence: lack of communication despite challenge to ethical values

Case Studies

In examining the following cases, you might consider using RIPS or the six step approach, as outlined below:
1. Gather relevant information
2. State the ethical question
3. Explore alternative courses of action; consider legal, societal and contextual influences; duties, rights and obligations of legitimate stakeholders
4. Evaluate process and outcome; additional info needed, biases/assumptions, strengths / weaknesses of action selected
### References


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Lipson, JO, Dilbele, St. and Minor, PA. *Culture and Nursing Care: A Pocket Guide* San Francisco: UCSF Nursing Press, 1996.


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