



Facilitator Notes: Medical ethics

Understanding the role medical ethics play in healthcare provision is important. Below are four 'pillars' of medical ethics which are a common framework used to describe how doctors consider the best action to take in many situations.

BEFORE handing out the activity sheet determine existing knowledge.

Medical Ethics

- 1 **Beneficence** refers to treating patients and improving their welfare. Doctors need to actively take positive steps for their patients' wellbeing.
- 2 **Non-maleficence** refers to doing no harm to the patient; this includes not inflicting harm and not imposing risks for harm.
- 3 Respect for the **Autonomy** of the patient refers to doctors and healthcare professionals respecting that individuals have the right to choose how to live their own lives. They should enquire about the patient's wishes to make decisions about their healthcare.
- 4 **Justice** refers to the idea that people should be treated fairly (not necessarily equally).

During your work experience consider the relevance of these 'pillars' and record examples of when you witness them being demonstrated.

Model the example below and ask for more examples to confirm understanding.

Example from a work experience participant at a GP practice:

An elderly patient visited the GP because he was experiencing headaches. The patient was taking a number of medications for various ailments. The GP explained to me that she has to consider all the reasons why the patient may be experiencing headaches but also consider that they may be a side effect of a medication. The GP explained that if she thinks one of the medications is causing headaches then she must weigh this up against changing the medications, i.e. (or) such as offering additional medication or stopping a particular prescription but only if it is safe to do so. The GP must always consider 'first do no harm'. The GP must also discuss with the patient the options available so that they can make a shared and informed decision – which is respecting the patient's autonomy.

Examples:

There is more information on the General Medical Council web page about good medical practice.

Fundamentally – doctors should always make patient care their first and foremost concern.

Post-Experience

In pairs, discuss examples from your work experience when you observed a medical ethic demonstrated and how.

***Remind the group not to name patients or divulge their personal information*.**

If new vocabulary has been entered into the back of their reflective diary, encourage that this is used within their examples.

You may wish to model the STAR technique below to gain detailed examples.

Situation: *During work experience at a GP practice I was shadowing a GP during her consultations.*

Task: *The GP consistently asked patients what their expectations were from their appointment, her aim was to understand their viewpoint. She described to me that this is an element of person-centred care. I believe she demonstrated the medical ethic autonomy through ensuring decision making was shared with the patient.*

Action: *One particular patient with chest pains came in and I was impressed that after a thorough discussion and investigation the doctor was honest about what she thought the diagnosis was - anxiety and stress - but that there is always an element of uncertainty and that because she was unsure she wanted to send the patient for further tests. She was honest about what she could and could not do and presented the patient with choices.*

Result: *I can imagine sometimes it is difficult for patients to hear about uncertainty, because they want answers straight away, and they want peace of mind. But it is much more respectful to the patient to find out whether their expectations can be met, where uncertainty lies and to give them options.*