

COVID 19: Ethics and Well Being

Moral distress, moral injury and moral regret

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Today

1. COVID-19 and ethics 3 ethical challenges

2. A focus on health staff

- Moral regret
- Moral distress
- Moral injury

ETHICAL CHALLENGE #1 RESOURCE ALLOCATON

INITIALLY: Ethical Principle = Distributive justice

- 1. NEED
- 2. CAPACITY TO BENEFIT
 - Survive
 - Live a long time
 - With a good quality of life
- 3. MERIT
 - Past contribution
 - Usefulness to society

#2 SELF-PROTECTION

VS

DUTY TO PROVIDE CARE

Duty to provide care (beneficence) includes duty to accept risk to self

- but HOW MUCH risk?

Right to choose own acceptable level of risk

- Complicated by limited PPE

ETHICAL
CHALLENGE #3 PUTTING PUBLIC
HEALTH ABOVE
INDIVIDUALISED
CARE

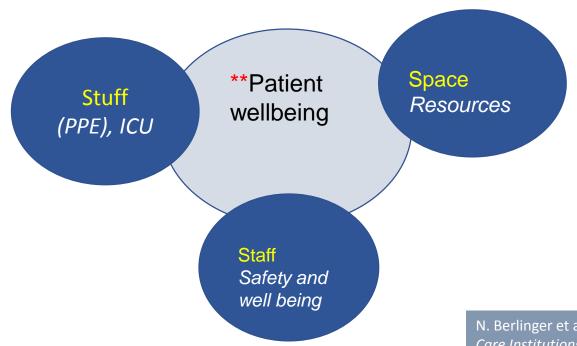
Collective beneficence

Ahead of

Individual beneficence, autonomy/choice patient and family-centred care

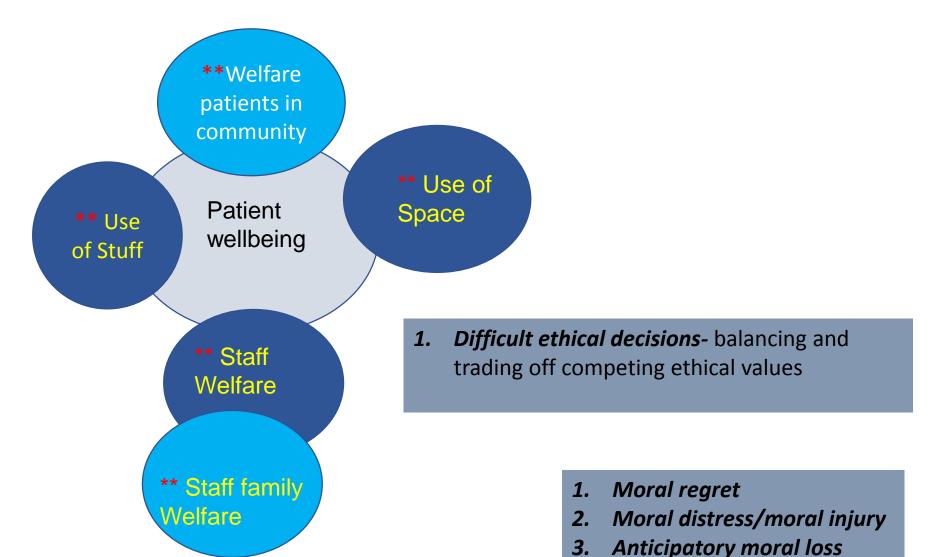
Accepting sub-optimal care to some patients in order to best protect and promote health of the whole community

Usual clinical practice means not having to think about...



N. Berlinger et al. Ethical Framework for Health Care Institutions Responding to Novel Coronavirus SARS-CoV-2 (COVID-19). March 16, 2020. https://www.thehastingscenter.org/ethicalframeworkcovid19/

COVID 19 means having to think a lot about...



THIS SHIFT IS DIFFICULT AND COMPLEX



Clinicians are trained to care for individuals.



The shift from purely patient-centered practice to patient care guided by public health duties and self protection may create moral distress and moral regret for clinicians

Moral distress

Moral distress (nursing) is the name given to the feeling that arises when someone does something which they believe to be wrong. It typically occurs when a clinician has to implement a decision made by somebody else and feels that the decision is wrong.

Moral Injury (military) refers to a more permanent form of moral distress

Addressing Moral distress

- Moral distress matters:
- Affects sense of professional and personal integrity
- Chips away at sense of duty/role
- Burn out/anxiety/fatigue/well being
- Makes it harder to continue to do the right thing

- Well being initiatives?
- Properly consider the moral part of it



Moral regret

- The feeling that an important value was not fulfilled
- Feeling bad because something important had to be sacrificed

• Eg limited family visiting

Feeling like an important part of a patient's care has been lost, even though...

 The decision is ethically justified because of the need to minimise the spread of infection in the community/protect staff/conserve resources

Addressing moral distress

Step 1

- Examine your feelings that what you have to do is ethically wrong
- 1. What are your reasons for thinking it is wrong? What ethical values are not being respected?
- 2. Do you have full and accurate information about the facts of the situation? Are you making assumptions, guesses or predictions about things that would really make a difference?
- 3. Can you see any other options that are feasible and ethically better? It may be that this course of action the least-worst of a bunch of bad options.

Addressing moral distress

Step 2

- Discuss with others
- 1. Share your concerns with others, seeking their views as a sounding board
- 2. Seek out more information, with an open mind aiming to get the full picture (rather than protest or object)
- 3. Try to get an understanding of the decision-making process that led to this course of action in particular, what considerations were taken into account when making a decision

Addressing moral distress

Step 3

- Formulate a considered view
- moral regret, rather than moral distress
- I still don't agree with the course of action, but I can see there are reasons for it,
- "I now think the decision was ethically ok, but it was very poorly communicated and explained.
- action is ethically wrong ... I will respectfully request not to be involved in carrying it out".

For Example...

- Alex work as a nurse in a paediatric hospital, which has made a decision to restrict the number of visitors for in-patients.
- No siblings are allowed, and only one parent at a time can visit a patient, for only maximum of one hour per day. This decision was made several weeks ago, and on the ward Alex and his colleagues have seen a number of patients become very distressed and withdrawn as a result of such restricted contact with their family.

For example...cont'd

- As the supplies of PPE have increased, and the number of cases of COVID 19 has dropped lower and lower, Alex comes to feel that these restrictions on visitors are wrong, and should be lifted.
- But nothing happens.
- A case of moral distress?

Addressing moral distress

- One day, Alex comes to work and just decides that he is not going to enforce this restriction any longer
- Is this the best way to address this?

- Examine your feelings about --what you have to do and if it is ethically wrong and why?
- Discuss with others ** Alex
- Formulate a considered view

For Example...

- Sonia is a registrar, caring for a patient who has been hospitalised with suspected COVID-19.
- The patient is in a single room, awaiting the COVID-19 test result. This patient has a chronic condition and has had many admissions over the years.
- In order to conserve the limited PPE at his hospital, the nurse caring for him has been minimising entering the patient's room.
- The patient is unhappy and is complaining that the level of care is so different to past admissions.
- Sonia feels distressed that the patient is experiencing this extra burden. She thinks the nurse is overreacting

Responding to moral distress

Should Sonia?

- 1. Report the nurse to the NUM because it is 'wrong' to restrict nursing care in this way
- 2. Discuss her concerns with the the nurse

Sonia consults the clinical ethicist

- What are your reasons for thinking it is wrong? What is ethically at stake?
- 2. What do you know about the situation? Can you say what you know about this patient? What is the nurses's perspective/concerns?
- 3. Can you see any other options that are feasible and ethically better? (It may be that this course of action the least-worst of a bunch of bad options)

Through this discussion, Sonia finds out...

- the nurse lives with his mother and elderly grandmother and is terrified of bringing the infection home
- the nurse requested a different patient and this was denied

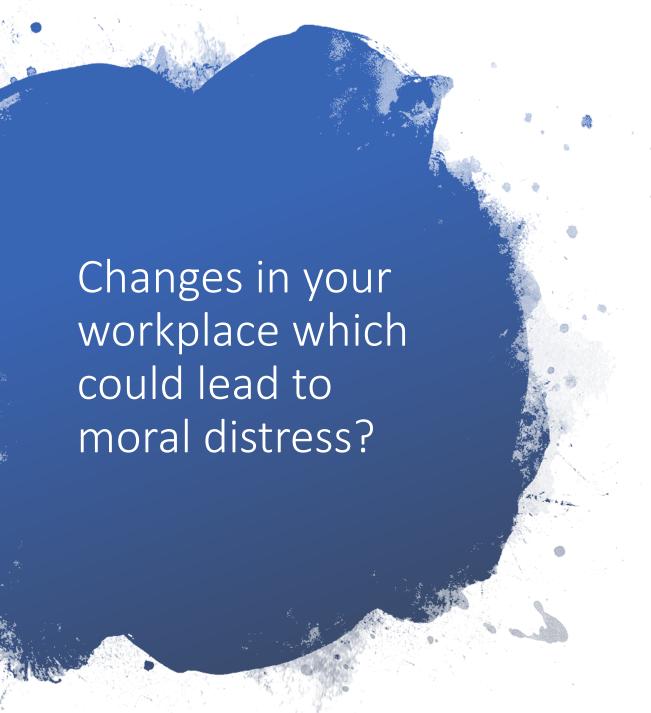
Addressing moral distress

- moral regret, rather than moral distress
- I still don't agree with the course of action, but I can see there are reasons for it **(Sonia)
- "I now think the decision was ethically ok, but it was very poorly communicated and explained.
- action is ethically wrong ... I will respectfully request not to be involved in carrying it out".

Moral distress and well being

"Philosophy and the reasoning accompanying philosophical explanations may act as a form of healing for those who call for an ethics consultation..." Nussbaum 2009

Or supervision/peer support/reflective practice



- Some examples?
- Discussion



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