



# Children's Objective Given daily challenges faced by the evolving role of the nurse ... ✓ Share innovative strategies to engage clinical nurses in everyday dialogue about ethical situations

that arise at the bedside.



- Annual Pediatric Nursing Conference - pre-conference workshop
- PICU RNs identify need for continued learning/dialogue



- · Pediatric Ethics Education Program designed
- Informal interest group continues Journal Club → literature search → unit based ethics conversations

Children's

# From idea ....



# The problem:

- clinical nurses experience ethical questions on daily basis
- formal processes, such as ethics consult, overwhelming
- concern that build-up over time  $\rightarrow$  moral distress



# **Moral Distress**

The painful psychological disequilibrium that results from recognizing ethically appropriate action, yet not taking it, because of such obstacles as lack of time, supervisory reluctance, an inhibiting medical structure, institution problems, or legal considerations



(Jameton, 1984)



# Unit Based Ethics Conversations (UBECs)

# Purpose

"Provide a forum for meaningful conversation among staff nurses about ethical issues they face in routine clinical practice and which are felt to contribute to moral distress"

## Goals

- Increase participants abilities and confidence in dealing with ethically challenging situations
- Provide an environment free of judgment for disclosure and frank discussion of morally troubling situations



(Wocial, 2009)



# Access to external consultants

- Collaboration between clinical nurse & nurse ethicist
- Medical College of WI Center for Biohumanities sponsors Ethics Grand Rounds featuring

# Lucia Wocial, PhD, RN

- Facilitated UBEC as part of discussion
- 15 Children's participants, clinical RNs (PICU)
- + nursing leadership



# To planning ...

- UBECs/theory of overall impact
  - Over time, an improved ethical climate will be experienced on the critical care units where UBECs are offered. The improvement will be demonstrated in the aggregate. Not everyone will have to participate in a UBEC to see a collective difference in the way in which ethical situations or conflicts are managed on participating units.
- · Partnership with nursing leadership
  - Magnet/special projects manger
  - executive director, pt care
  - chief nursing officer
- Access to external expert to serve as facilitator

expert to serve as racilitate



# **Proposal**

- · 12 month pilot
- UBECs held monthly on West 4 Pediatric Intensive Care Unit
- Facilitator funding secured
- Evaluation:
  - Pre, 6 months, after each UBEC



Children's

# Pre-UBEC Needs Assessment-All PICU staff

- I <u>participate</u> in discussions related to the ethics of a patient care situation with my interdisciplinary colleagues.
   72% - sometimes/rarely/never
- Adequate resources are available to me if I have a question or concern related to the ethics of a patient care situation.
   45% - Agree/Strongly Agree
- I feel comfortable requesting an ethics consult.
   88% Neutral / Disagree/Strongly Disagree
- I feel it is important to have an opportunity to freely discuss ethical issues encountered in my work.
   96% - Agree/Strongly Agree

Children's To implementation ....

Clinical Nurse takes the lead

Logistics

Coordination with unit leadership

Advertising / promotion

Biothiday's tripolated Woronia all extitutionaned

• Development of evaluation form

· Central location on unit



# 6 Month UBEC Evaluation 12 Respondents

- Should UBECs be continued on West 4?
  - Yes: 92% (11/12)
  - No: 1 person; did not attend a UBEC
  - Reasons given:
    - Safe place to bring up issues
    - · Staff needs support
    - Only chance for staff to have an open forum for sensitive topics
    - Great way to explore things that have happened
    - Having a facilitator that can probe and knows the right questions to continue thoughtful process
    - Great to have other disciplines there

Children's

# **UBEC Challenges**

- Expectations
  - Open forum
  - Confidentiality
  - Specific vs general discussion
- Maintain constructive processing
  - Interpersonal dynamics
- Participation
  - Staffing
  - Access for all shifts to attend
  - Interprofessional







- Format changed to topic-based, identified by staff
  - Recent case study
  - Donation after Cardiac Death
  - Professional boundaries
- Rotate among 3 pediatric intensive care units

Artista mails dutant disease and design



# Practical Challenges: real-life on the unit

- Acuity
- Staffing
- Morale
- Leadership changes
- Departure of clinical RN champion
- Measuring outcomes
  - Objective vs subjective



# **Key Learnings**



- Need for nimbleness
- Help staff navigate resources
- Evolving role of external consultant
  - weekly trauma rounds



# Expansion to Acute Care



Recognition that acute care units have different challenges than critical care units

# End-of-life vs ...

- Management of behavioral patients
- Discharge family w/ hx of non-adherence
- Teenagers & suicide
- Access to interpreter resources
- Childhood obesity



# To planning ...

- Nurse ethicist becomes internal expert - affiliated agreement
- · Partnership with nursing leadership
  - Magnet/special projects manger
  - executive director, pt care
  - chief nursing officer
- Development of pilot proposal
- MD buy-in



# **Engaging Clinical Nurses**



- Road-show - unit partnership councils
- Survey acute care nurses by unit



- I would be interested in learning more about the following (check all that apply):

  Basic overview of pediatric ethics

  - What do we mean by "best interests" of the child?
     When can/should children start having input on their medical care?
  - Conflicts related to life-sustaining medical treatment

  - Commics render to me-sostaming medical mediment Managing "difficult" families Influence of religion/culture/socioeconomics on health care decision-making Personal and professional values assessment

  - Moral distress (and moral courage)
     Recognizing potential for health care provider bias

  - Professional boundaries in Facebook age
  - Institutional resources to help resolve ethical issues



- The best way(s) for me to learn are through (check all that apply):
  - Small group discussion
  - Role play
  - Reading articles (self-study)
  - Lecture & discussion
  - Large group presentations
  - Small groups
  - Having someone available for questions during rounding or as needed
  - Other



- I think my unit would benefit by learning in this type of environment:
  - Rounding- clinical ethics rounds or ethics part of kardex rounds
  - Unit based ethics conversations
  - Class
  - Journal club
  - Hospital wide orientation
  - Annual ethics workshop
  - Nursing grand rounds
  - Case-study review
  - Other



# Survey says ...

- Nurse ethicist participation in interprofessional patient rounds
- · Clinical nurses as ethics liaison
- Priority topics of interest:
  - Managing "difficult" families
  - Pediatric ethics overview

  - Assent





# **Nurse ethicist** presence during rounds

- Deeper understanding of day-to-day challenges
- Familiarity RN, case workers, social workers
- Immediate access
- · Appreciation for complexity
- Identification of / follow-up on organizational ethics issues



Children's



# **Nurse Ethicist Reflections**

Incorporate Code of Ethics



Power of nursing Affirmation Validation





# **Next Steps**

- Ongoing collaboration based on identified needs
- · Accessibility of nurse ethicist
- Infusing the voice of ethics within organizational structures and processes



# Bedside ethics @ your hospital

**Ethics** 

- Understand current state
- · Identify clinical nurse champions
- Leverage shared governance councils to determine priorities
- Environmental scan of available resources
- Plan Do Study Act
- Nimbleness within the complexity of health care environment





# References

- Jameton, A. (1984). Nursing practice: The ethical issues. Englewood Cliffs, NJ: Prentice-Hall.
- Wocial, L et al. Facilitated Ethics Conversations: A novel program for managing moral distress in bedside nursing staff. JONA's Healthcare Law, Ethics, Regulation. Volume 11, Number 1 (January – March 2009).

- Crista Tropico Hicosocie de grando