

**2nd Annual
ETHICS IN HEALTHCARE
CONFERENCE
Facing Challenges Together**



**Sponsored by:
THE PAUL M. SCHYVE, MD
CENTER FOR BIOETHICS,

UNIVERSITY OF ROCHESTER
SCHOOL OF NURSING

THE DEPARTMENT OF
HEALTH HUMANITIES & BIOETHICS**

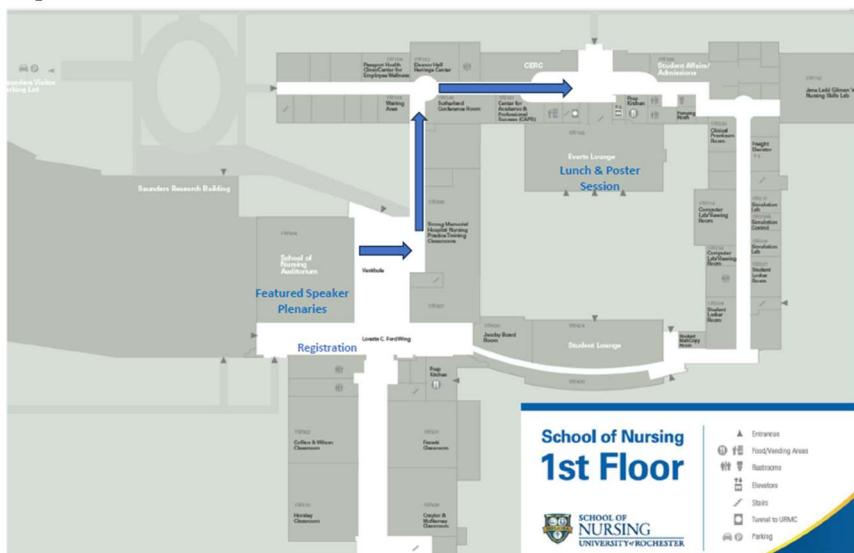
Friday, April 26th, 2024

**School of Nursing
University of Rochester**

About the Conference:

One of the objectives of this conference is to provide education opportunities on a range of ethical topics that are pertinent to healthcare and clinical practice. We want to engage professionals from all disciplines in focused workshops that encourage group discussion and active learning on a healthcare topic. We consider this a regional conference that will help improve community outreach and communication about health care ethics within the Rochester community. Most importantly, we want to celebrate ethics related educational, clinical, and research activities in the region.

Map of Events:



2nd Annual Ethics in Healthcare Conference
 Friday, April 26th, 2024. 7:30 a.m. – 3:30 p.m.

7:30 - 8:00 a.m. REGISTRATION, Poster set-up, Continental Breakfast

8:00 - 8:15 a.m.,
LAINIE ROSS - WELCOME AND INTRODUCTION
 Helen Wood Hall Auditorium

8:15 - 9:15 a.m.
SCOTT KIM, National Institutes of Health
How to Think About Decision-Making Capacity
 Helen Wood Hall Auditorium

9:15 – 9:30 a.m. Coffee Break

9:30 - 11:00 a.m.
Workshop Sessions

<p align="center"><u>Why Spirituality Matter: Religion, Belief, Paradox, & Denial</u> Presenter: Kevin Boyd 1W-509</p>	<p align="center"><u>We don't see things as they are. We see things as WE are: Using the Visual Arts as a Tool to Understand Personal Values</u> Presenters: Susan Dodge-Peters Daiss, MA, MDiv Patricia Luck, MBChB, MPhil, MSc 4W-507</p>	<p align="center"><u>The STADA Method – Ethical Mediation for Building Rapport</u> Presenter: Nicholas Mercado, DrPH, MCHES, HEC-C 1W-510</p>
<p align="center"><u>Do Parents Know Best? Refusals Pediatrics</u> Presenter: Lainie Ross, MD, PhD 4W-508</p>	<p align="center"><u>Challenges of Surrogate Decision Making</u> Presenters: Margie Hodges Shaw, JD, PhD, HEC-C Michael Nabozny, MD 4W-506</p>	

11:00 am – 12:30 pm
LUNCH & POSTER VIEWING

Networking 11:00-11:30 am
Odd numbered posters 11:30 pm-12:00 pm
Even numbered posters 12:00-12:30 pm

12:30 – 2:00 p.m.
Workshop Sessions

<p align="center"><u>Advanced Communication Training (ACT) – Navigating Challenging Conversations</u></p> <p>Presenter: Thomas Carroll, MD, PhD 1W-509</p>	<p align="center"><u>Who Ya Gonna Call? Chaplains, Ethicists, & Palliative Care Providers’ Perspectives on Patient/Family Decision-making</u></p> <p>Presenters: Carl D’Angio, MD Patti Blaine, MA, BCC Rachel Diamond, MD, MS 4W-508</p>	<p align="center"><u>Artificial Intelligence in Healthcare – Ethical Considerations</u></p> <p>Presenter: Jonathan Herington, PhD 4W-506</p>
<p align="center"><u>The Right Stuff: Morals & Ethics in the ICU</u></p> <p>Presenter: David Kaufman, MD 4W-507</p>	<p align="center"><u>Gorillas, Monkeys & Little Lemurs: How Ethics Committees Within a Community Health System Can Work Together</u></p> <p>Presenter: Chris Reynolds, MD Deborah Maier, MS, RN, AAANS-AG, CCRN 1W-510</p>	

2:00 – 2:15 p.m. Coffee Break

2:15 – 3:15 p.m.

SCOTT KIM, National Institutes of Health
Assessing Decision-Making Capacity: Perennial Challenges
Helen Wood Hall Auditorium

3:15 – 3:30 p.m.

LAINIE ROSS - *CLOSING REMARKS & POSTER AWARDS*
Helen Wood Hall Auditorium

9:30 - 11:00 a.m.

Why Spirituality Matters: Religion, Belief, Paradox, and Denial

Presenter:

Kevin Boyd

Location: 1W-509

Broadly construed this workshop is intended to address the fundamental question of the role of understanding the essential value systems of patients and their families in the process of their clinical decision-making. The discussion begins with a conversation about the difference between fact and opinion/belief and moves into an examination of the role of belief in decision-making. Along the way I will introduce the idea of paradox as a more helpful lens through which to view patients and families who are often described as “in denial” or not sufficiently medically literate. I will demonstrate the potential for greater empathic connection with patients and families from this posture and how, especially in the context of severe illness/injury (when families are more likely to introduce the idea of the religious miracle), this understanding can avoid the common conflicts between providers and families.

The session will make use of additional role-play and creative writing experiences to further demonstrate ways that health care team members can productively interact with those who hold to belief systems that are different, sometimes even at odds with their own personal views. This session will rely upon active engagement and participation from its members.

Objectives: 1) Introduce and explore an alternative framework for health care teams to engage patients and families in discussions at the intersection of religion and clinical decision-making, especially in cases of severe illness/injury. I propose a model of thinking about paradox instead of denial as a means of establishing decision-making partnerships.

2) To introduce the AMEN model of communication when dealing specifically with instances where patients and families are using the language of miracle.

3) To re-affirm the role of understanding religious beliefs, or more broadly, the values held by patients and families, as essential to the clinician and the clinical decision-making process.

9:30 - 11:00 a.m.

*We don't see things as they are. We see things as WE are:
Using Visual Arts as a Tool to Understand Personal Values*

Presenters:

Susan Dodge-Peters Daiss

Patricia Luck

Location: 4W-507

Understanding and articulating personal values is an essential first step in addressing ethical issues in healthcare. In this workshop we will introduce participants to the University of Rochester's *Five Question Protocol (5QP)*. This protocol uses the visual arts to build observational skills in healthcare professionals and in particular to raise awareness of the experiences and potential biases we bring to all healthcare encounters.

The *5QP* is a close-looking protocol designed as a group practice, with the expressed intention of eliciting multiple perspectives and points of view. Using reflective listing techniques, all hypotheses and comments are acknowledged without judgment. Over the course of the workshop as participants engage with a series of artworks, they will be encouraged to observe and acknowledge how their personal values may influence their interpretations of a series of artworks. The workshop will conclude with a discussion of the applicability of the *5QP* to ethical challenges faced in clinical and related settings.

Learning Objectives: Participants will:

1. Learn and practice the *Five Question Protocol*.
2. Consider its applicability to ethical concerns in healthcare.

9:30 - 11:00 a.m.
*The STADA Method –
Ethical Mediation for Building Rapport*

Presenter:
Nicholas Mercado
Location: 1W-510

Clinical ethics consultation frequently occurs when there are differences in values and beliefs. Often these value conflicts are exacerbated by poor or a breakdown of communication between the various stakeholders (patients, families, healthcare team members). Poor communication can impact patient trust and family trust in the healthcare system, which can further intensify the ethical dilemma.

Ethical mediation is one strategy an ethics consultant can use to set the stage for a successful conversation with a patient or family member. The STADA method described by Art Caplan and Nancy Dubler (2015) is a simple and memorable technique to facilitate and ethical mediation. STADA stands for:

- Sit
- “Tell me about Mama”
- Admire
- Discuss
- Ask

This workshop will include introductions, a short didactic presentation, and simulated cases so participants will have the opportunity to practice the STADA method.

9:30 - 11:00 a.m.
Challenges of Surrogate Decision Making

Presenters:
Margie Hodges Shaw
Michael Nabozny
Location: 4W-506

This workshop explores the ethical complexities inherent in surrogate decision-making in medical care. We will review the history and evolution of surrogate decision-making, the difference between a surrogate and a health care proxy, and the standards used when deciding for others. We will discuss common ethical dilemmas when patients need a surrogate decision maker and identify communication strategies for working with surrogates and health care proxies. Participants will engage in activities to practice communication skills around morally complicated case scenarios. Participants will have the opportunity to submit specific cases and questions in advance for inclusion in the workshop.

9:30 - 11:00 a.m.
Do Parents Know Best?
Refusals in Pediatrics

Presenter:
Lainie Ross
Location: 4W-508

The session will begin with an overview of how decision-making for young children who cannot consent for their own treatment is different than decision-making for adults who lack decision-making capacity. A framework for pediatric decision-making based on the work of Allen Buchanan and Dan Brock will be presented. Then using a case-based approach, the participants will explore 3-4 cases of parental refusals and the limits of parental authority.

Learning objectives:

- To explore how to balance the rights and interests of parents, physicians and the state regarding infants in the “well baby” newborn nursery (and a bit beyond)
- To explore parental refusals of population screening (newborn metabolic screening) and treatment (from vitamin K to immunizations)
- To examine the limits of parental authority regarding medical treatment for the young child

12:30 – 2:00 p.m.
*Advanced Communication Training (ACT) –
Navigating Challenging Conversations*

Presenter:
Thomas Carroll
Location: 1W-509

This workshop will begin with a didactic presentation (~20 min) of the MVP communication model and how it can be utilized to help navigate ethically challenging conversations. We will spend the remainder of the workshop, with the help of a patient-actor, demonstrating and practicing communication skills using a variety of ethically challenging clinical scenarios.

Objectives:

1. List the components of the MVP communication model.
2. Practice applying the MVP communication model to ethically challenging patient scenarios in a simulated communication environment.

12:30 – 2:00 p.m.
Who Ya Gonna Call?
Chaplains, Ethicists and Palliative Care Providers' Perspectives on
Patient/Family Decision-making

Presenters:
Carl D'Angio
Patti Blaine
Rachel Diamond
Location: 4W-508

Ethics, Palliative Care and Chaplaincy all deal with trying to ascertain patients' and families' wishes for their care and to guide and support their decision-making. Each discipline has a different role and focus, but the methods they use overlap. This workshop will introduce participants to the thought processes and approaches of each discipline and give participants the opportunity to practice these approaches.

30 minutes: Representatives of each discipline will briefly describe their thought processes when approaching difficult medical decisions with patients and families.

45 minutes: Workshop participants will engage in one of two simulated encounters (one adult, one pediatric, 5 minutes each) in which they practice the approaches discussed in the first session. Participants will be observed by a workshop leader and debrief to the large group (5 minutes each) after each encounter. The workshop leader will provide context on his/her thought process on each simulation. The simulations will run sequentially.

Tentative adult simulation: A 55-year-old patient with multiple medical problems needs an urgent exploratory laparotomy to evaluate the reason for abdominal pain. The patient has waxing and waning mental status and is objecting to the physician's recommendations. A family member is identified as a surrogate. A provider is called to discuss and/or support decision-making.

Tentative pediatric simulation: An infant is born with multiple congenital anomalies that are likely to shorten the child's life. The infant currently has few symptoms. Physicians recommend medication for heart failure. The patient's parents are English speakers, but have low health literacy. They express confusion and concern about the medical recommendation. A provider is called to discuss and/or support decision-making.

12:30 – 2:00 p.m.
Artificial Intelligence in Healthcare –
Ethical Considerations

Presenter:
Jonathan Herington
Location: 4W-506

This workshop focuses on the ethical dimensions of deploying machine learning algorithms in the context of medicine. Topics include: (1) an introduction to the capabilities and limits of algorithmic systems in medicine. (2) privacy and informed consent in the context of algorithmic medicine, (3) bias in algorithms (i.e., how can bias occur? how should we measure unfairness in algorithms that determine the distribution of healthcare/health?), and (4) the “responsibility gap” in algorithmic medicine (i.e. who is responsible for the harms of algorithmic errors in medicine – developers or clinicians?). The workshop will begin with a brief presentation on the different kinds of ML that is embedded in hospital operations, and an interactive demonstration of the capabilities of large language models (e.g. GPT-4, Claude) for answering medical questions. Workshop participants will then be asked, in small groups, to identify the key ethical risks that accompany three different kinds of ML applications (LLMs as health chatbots, radiology diagnostics, and “booking and no-show” predictors). Finally, participants will be asked to work in groups to identify 2-3 principles for working with each kind of system that might mitigate these risks.

Students will be able to apply knowledge learned in this workshop to critically engage with the ethical dimensions of artificial intelligence in healthcare. Specifically, students will be able to:

- Articulate the ethical risks involved in the use of machine learning in medical practice.
- Articulate strategies for mitigating the ethical risks of algorithmic medicine.

12:30 – 2:00 p.m.
The Right Stuff:
Morals and Ethics in the ICU

Presenter:
David Kaufman
Location: 4W-507

The following are the case scenarios will be discussed during this workshop:

1. Weighing in With Morals Versus Ethics
2. Shared Decision Making: Whose Decision Is It Anyway?
3. Futility: When is Enough, Enough?
4. Brain Death: When “She’s Not Just Merely Dead, She’s Really Most Sincerely Dead”
5. Withholding and Withdrawing: The Yin and the Yang of the ICU
6. The Truth of Ethics Consultations: Philosophy or Dispute Mediation
7. Pandemics: Ends and Means
8. Rationing Care at the Bedside: What Would King Solomon Do?
9. Double Effect: Two Sides of the Same Coin
10. Patients Versus Subjects: Therapeutic Misconceptions

Objectives:

1. Participants will have the opportunity to discuss their definitions of morals and ethics and apply them to specific cases.
2. At the end, famous ethics cases are presented that relate to ICU care and participants will have the opportunity to see how these cases are similar and different from more every day cases that every hospital practitioner is faced with.

12:30 – 2:00 p.m..

Gorillas, Monkeys, and Little Lemurs:

How Ethics Committees Within a Community Health System Can Work Together

Presenters:

Chris Reynolds

Deborah Maier

Location: 1W-510

Even before the COVID-19 pandemic, ethics committees across Rochester Regional Health System (RRHS) had multiple reasons to share expertise, processes and resources, but our bylaws and organizational structures did not provide a mechanism to do so. Considerations about prospective ventilator allocation at the height of COVID drove ethics committees across Rochester Regional Health system to collaborate more deeply than before. Coming out of the pandemic, RRHS is making progress towards a more integrated, system-wide approach to clinical ethics consultation, policy development and clinician education.

In this session we will review (1) the published literature on the organization of health care ethics committees, (2) describe the history of our various ethics committees at RRHS, (3) describe ongoing efforts to “systematize” RRHS’s approach to clinical ethics, (4) give participants an opportunity to consider how their institutional structure could better facilitate cross-campus integration of ethics-related efforts and (5) share ideas for organizational structure(s) that will meet the needs of various stakeholders.

POSTERS

Presenter(s) listed **BOLD**

1.	<p><i>What do we talk about? Exploring the pediatric pre-tracheostomy conversation with caregivers and staff: a qualitative study</i> Laine DiNoto CPNP-PC¹, Kathryn Palumbo MD¹, Divya Chhabra MD¹, Adwiteeya Misra², Denishea Ortiz MBA CASP³, Jan Schriefer RN MBA MSN DrPH¹, Margo McKenna MD FACS¹. ¹ Golisano Children’s Hospital ² School of Medicine and Dentistry ³ Rochester Institute of Technology</p>
2.	<p><i>What Does Virtue Ethics Have to Say About Data Sharing and Informed Consent for Cancer Clinical Trials?</i> Alexander Montes, PhD</p>
3.	<p><i>Slow Code and the Anthropology of Embodiment</i> Anthony Nicolosi, Maria Robinson, Thomas Carroll, MD/PhD¹ and Fernando Ontiveros, PhD. ¹University of Rochester St. John Fisher University</p>
4.	<p><i>A novel anti-racist curriculum: Integrating history and visual arts to teach reproductive health</i> Tiffany L Mei, MD, Susan DP Daiss, MA, MDiv, Keisha Bell, PhD, Tracy Webber, DNP, CNM, MPA, Margie H Shaw JD, PhD, HEC-C</p>
5.	<p><i>When Intent & Impact Part Ways</i> Teresa A. P. Schoell, MA, CCLS</p>
6.	<p><i>HERStory From Anarcha, Lucy & Betsey: Mutilation of the Black Female Body from the 400-year Enslavement Retrospective Evoked Contemporary Black Women’s Health Disparities</i> Tyra Granesande</p>
7.	<p><i>Addressing Medical Student Mental Health Perspectives May Improve Depression Screening and Suicide Prevention in Patient Care</i> Wamia Siddiqui Icahn School of Medicine at Mount Sinai, New York, NY</p>
8.	<p><i>Human Values in Research: A Novel Approach in Research Education</i> Patricia Luck, MBChB, MPhil, MSc, John Cullen, PhD, Department of Health Humanities and Bioethics, Clinical & Translational Science Institute, Center for Community Health & Prevention, University of Rochester, Rochester NY.</p>

9.	<p><i>Needs Assessment: Hospital Ethical Climate Survey to Inform Ethics Educational Offerings & Interventions</i></p> <p>Laine E DiNoto CPNP-PC, Michele Baker DNP, MS, RN, CNL, CCRN, NEA-BC, Mary G Carey RN, PhD, Margie Hodges Shaw JD PhD HEC-C</p>
10.	<p><i>Nurses' experiences influence their opinions on the ethical use of pediatric dialysis</i></p> <p>Carly Eiduson and Ronnie Guillet</p>

PARTICIPATING INSTITUTIONS & DEPARTMENTS

Participating Institutions

ACTG

CompassionNet

Highland Hospital

Monroe Community College – Economic and Workforce

National Institutes of Health – Bioethics Department

Rochester Regional Health – DeMay Living Center

St. John Fisher University

University of Rochester Departments/Centers

Golisano Children’s Hospital

Health Humanities & Bioethics

Hospice

Nephrology Research

Neuro-Palliative Care

School of Medicine & Dentistry

School of Nursing

Strong Memorial Hospital

Wilmot Cancer Institute

Thank you for your participation!