

# **Ethical Safety in Care for Older People**

**Helena Leino-Kilpi, PhD, RN, FEANS  
Professor and chair, University of Turku  
Nurse Director (part-time), Turku University Hospital**

**<http://www.utu.fi/fi/yksikot/med/yksikot/hoitotiede/henkilokunta/Sivut/leino-kilpi.aspx>**



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# Ethical world view – factors modifying

- **Variation in cultures** (understanding, mixing)
- **Individualisation** (emphasis in individualisation, total individual freedom, safetyness of individuals, fulfilling of individual needs)
- **Technologisation** (increasing role, advantages-disadvantages)
- **Medicalisation** (emphasis in medical reasoning, medical solutions)
- **Juridicalisation** (emphasis of laws in social relationships)
- **Economisation** (emphasis and solutions based in economics)
- **Media** (power of media, emphasis in leisure-life, free-time, hobbies)



# Importance of ethics in the care of older people

★ **Strategies and programmes** (e.g. UN <http://social.un.org/ageing-working-group/> ; WHO; EU; Global Alliance for the Rights of Older People 2011),  
text books, reports, statements

★ **Research in the field** (Rees et al 2009/17, Milton-Wildey & O'Brien 2010/27, Suhonen et al 2010/71, Howe 2011)

★ **Experiences/feed-back of patients/population** (e.g. Francis-Report)

★ **Limited interest for a career in older people nursing and intention to leave the field** (Suominen et al 2006, Koskinen et al 2014, see also the results of RN4CAST)



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# Some general observations

★**Sources of ethical issues for nurses** (Rees et al 2009, Suhonen et al 2010):

Doctors, Lack of financial and personnel resources, Patients' families, Societal and organizational attitudes, Routine-centred care, Relationships with peers

★**Reasons for consultations of ethical committees**

((Schenkenberg et al 1997, Forde & Vanvik 2005, Swetz et al 2007)

Competency/decisional capacity of older people, Quality of life/end of life issues, Withdrawing/withholding treatment (see eg. Wainwright & Gallagher 2007), Appropriateness of treatment, Family conflict and Professional conflicts

★**Sources of ethical issues for patients** (Johnstone, M-J. 2013, Stevens et al 2013)

Ageism and moral exclusion, Mistreatment (missed care)



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VAPALLE TIESELE

# Safety - Ethical safety

## ★Different definitions (e.g. EU, WHO, UN)

The simplest definition of patient safety is the “prevention of errors and adverse effects to patients associated with health care” (WHO 2016) and the more challenging one emphasizing discipline of safety science (Emanuel et al 2106).

## ★Ethical safety is the prevention of errors and adverse effects of the respect of human beings as patients/clients in health care.

-Difficult to estimate the economic value (About 20%–40% of all health spending is wasted due to poor-quality care)

### - A poor safety record for health care

Industries with a perceived higher risk such as the aviation and nuclear industries have a much better safety record than health care. There is a 1 in 1 000 000 chance of a traveller being harmed while in an aircraft. In comparison, there is a 1 in 300 chance of a patient being harmed during health care.

### - Patient and community engagement, hospital partnerships and empowerment are key factors



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# Ethical safety in care for older people (Leino-Kilpi 2016)

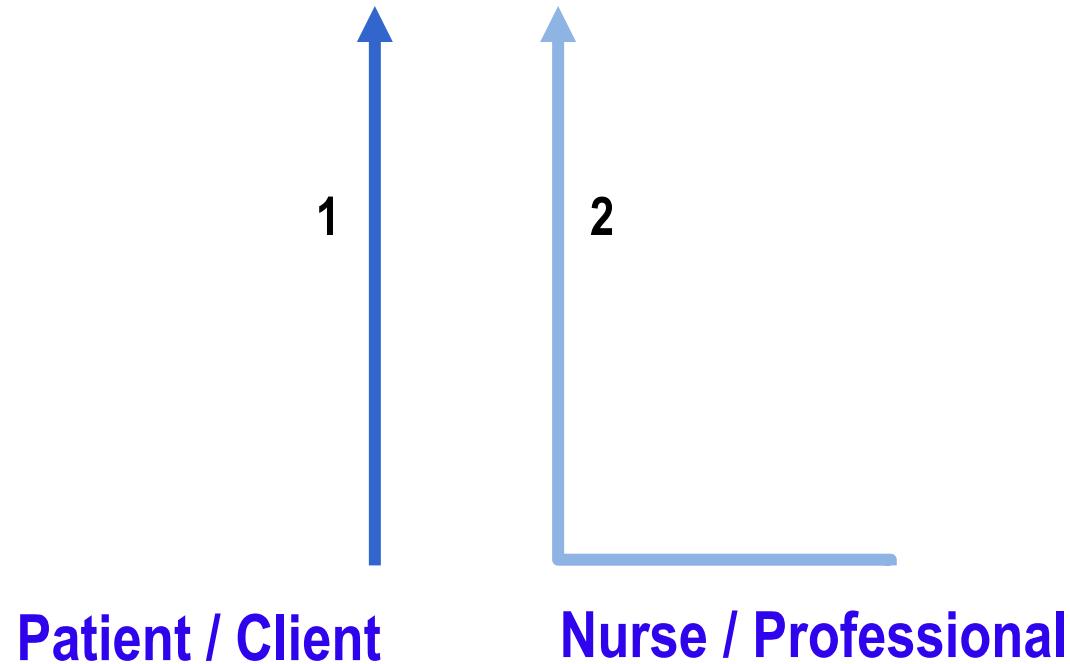


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# Patient/client as human being



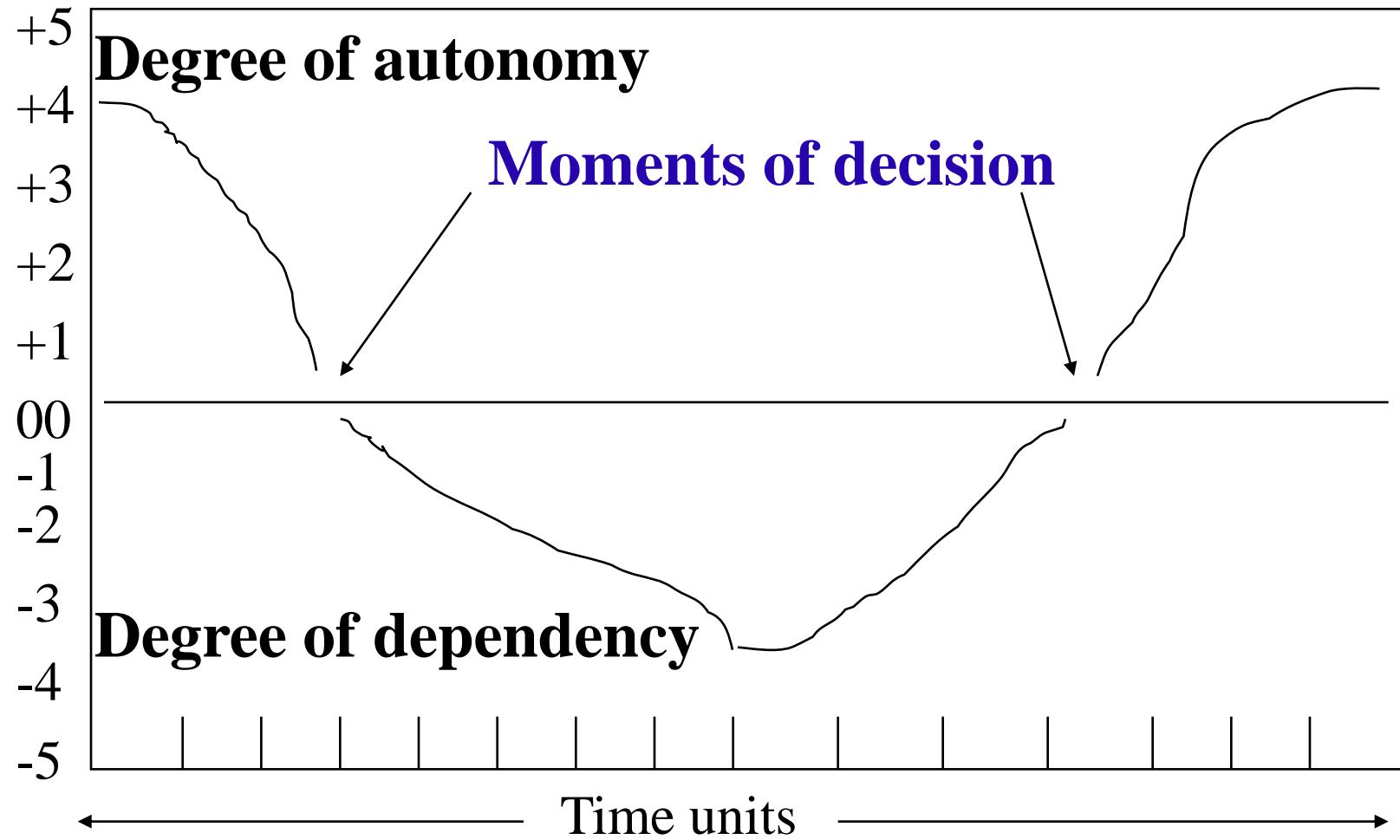
# HEALTH



Primary (1) and secondary (2) process of health  
(Leino-Kilpi 1996)



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A crisis in a person's health career (Thompson et al 2007)

# Older person (like any other person)

- Human existence → Valued as such
- Individual health life → Respected as such
- Limitations in the life resources (specific attribute)



to be cared      to be empowered



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# Rights of older patients/clients

**Principle** (e.g. autonomy, beneficence, non-maleficence, justice, Beauchamp & Childress 1979-2012)

## Autonomy Main ethical dilemmas (e.g. Smebye et al 2012, 2016)

- Realization in every-day nursing actions (hygiene, nutrition, examinations, medication, Leino-Kilpi et al 2003, Schopp et al 2003a,b- results of comparisons between five European countries)
- Relational autonomy (e.g. cultural, Sherwin & Winsby 2011)
- Participation in decision-making and actions - limited autonomy( Lyttle & Ryan 2010/review, Fjorside & Morville 2016/review)
- Free will (Tuominen et al 2016, Nord C 2016) and restraints (Möhler et al 2011, Lejman et al 2013)
- Organisational, eg moving from home (Castle 2003, Portegijs E et al 2014)

## Privacy/intimacy

- Realization in every-day nursing actions (hygiene, nutrition, examinations, medication, Leino-Kilpi et al 2003, Schopp et al 2003a,b- results of comparisons between five European countries)
- Ethical issues from the perspective of intimacy (Wiskerke & Manthorpe 2016 )

## Dignity/integrity

- The four notions of dignity (Nordenfelt, Dignity and older Europeans –project: of merit, as moral stature, of identity, of Menschenwürde, Kane & Vries 2016)
- Realization in different contexts (Alaszewski & Holdsworth 2009, Franklin L et al 2006, Oosterveld-Vlug M et al 2013)
- Concept analysis (Coventry M 2006)

## Access to care and services

- Rights to services and human rights (Baer R et al 2016) and Rationing missed care (Papastavrou et al 2014, Jones et al 2015)



# **What is the responsibility of the patient**

e.g Cronenwett & Brickman 1982, Meyer 1992

## **1. Moral Model**

**responsible for the health problem**

**responsible for the solution**

## **2. Compensatory Model**

**not responsible for the health problem**

**responsible for the solution**

## **3. Medical Model**

**not responsible for the health problem**

**not responsible for the solution**

## **4. Enlightenment Model**

**responsible for the health problem**

**not responsible for the solution**

# Ethical competence of Professionals



# Ethical competence of professionals

**One area in the competence criteria for nursing students/nurses**  
[\(http://www.efn.be/\)](http://www.efn.be/); Directive 2013/55/EC)

**In Connection of general competence in older people care** (e.g. Bing-Jonsson et al 2015a,b, 2016, Meretoja et al 2015)

**Concept analysis** (Kulju et al 2016, see also Paganini & Egry 2011), attributes are:

- \* character strength/moral courage (Numminen et al 2016)
- \* ethical awareness \* moral judgment skills
- \* willingness to do good.

**Competence of respect** (Koskenniemi et al 2013)

**Use of ethical professional codes** (Heikkinen et al 2006, Tadd et al 2006, Numminen et al 2009)

**Nurses report lack of ethical competence/unbalance** (Rees et al 2009)

**Nurses responses to ethical dilemmas** /conventions (Dierckx de Casterlé et al 2008/9studies), conformist way of acting, less individual care (Goethals et al 2010)

**Competence of educators** (Salminen et al 2010, 2013)



**Knowledge, action structure,  
value base of professional**

**Knowledge, action,  
structure and value base  
of client/patient**

2

1

3

### **Evidence-based knowledge and value base of nursing**

- of health/of disease
- of care/treatment
- of values and ethics

**1 = evaluation of the knowledge, action structure and value base of professional**

**2 = nursing interventions/methods**

**3 = evaluation of the knowledge, action structure and value base of client/patient**

**(Leino-Kilpi 1996)**

A nighttime photograph of a modern university building, likely Turku University, as indicated by the sign on the building. The building is illuminated from within, and its reflection is visible in the dark water of a large, rectangular water feature in the foreground. The water is cascading over a low wall, creating a waterfall effect. The sky is dark, suggesting it is night.

**Ethical  
environment**

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# Ethical environment (see eg Suhonen et al 2011)

## Environmental factors

- ★ **Ethical climate/Connections with other organisational factors**

(Suhonen et al 2014, 2015)

- ★ **Transitional care as ethical priority** (Nayloer & Berlinger 2016)

- ★ **Ethics of technology** (Chung et al 2016)

- ★ **Value-conflict** (Gaudine & Beaton 2002)

- ★ **Culture of ethical practice** (Ruston 2016)

- ★ **Ethical activity profile of managers** (Laukkanen et al 2015)

## Ethical leadership (management)

- ★ **Support ethical competence**

(Poikkeus et al 2014a,b,2016)

- ★ **Ethical competence of leaders:** empathetic interactions, ethical behavior, and exalted manners (Barkhordari-Sharifabad et al 2016)

- ★ **Ethical activity profile** (Laukkanen et al 2015)

- ★ **Role of ethical codes** (Aitamaa et al 2010), proto-code (Stievano et al 2012)

- ★ **Negative behaviours** (Lindy & Schaefer 2010)

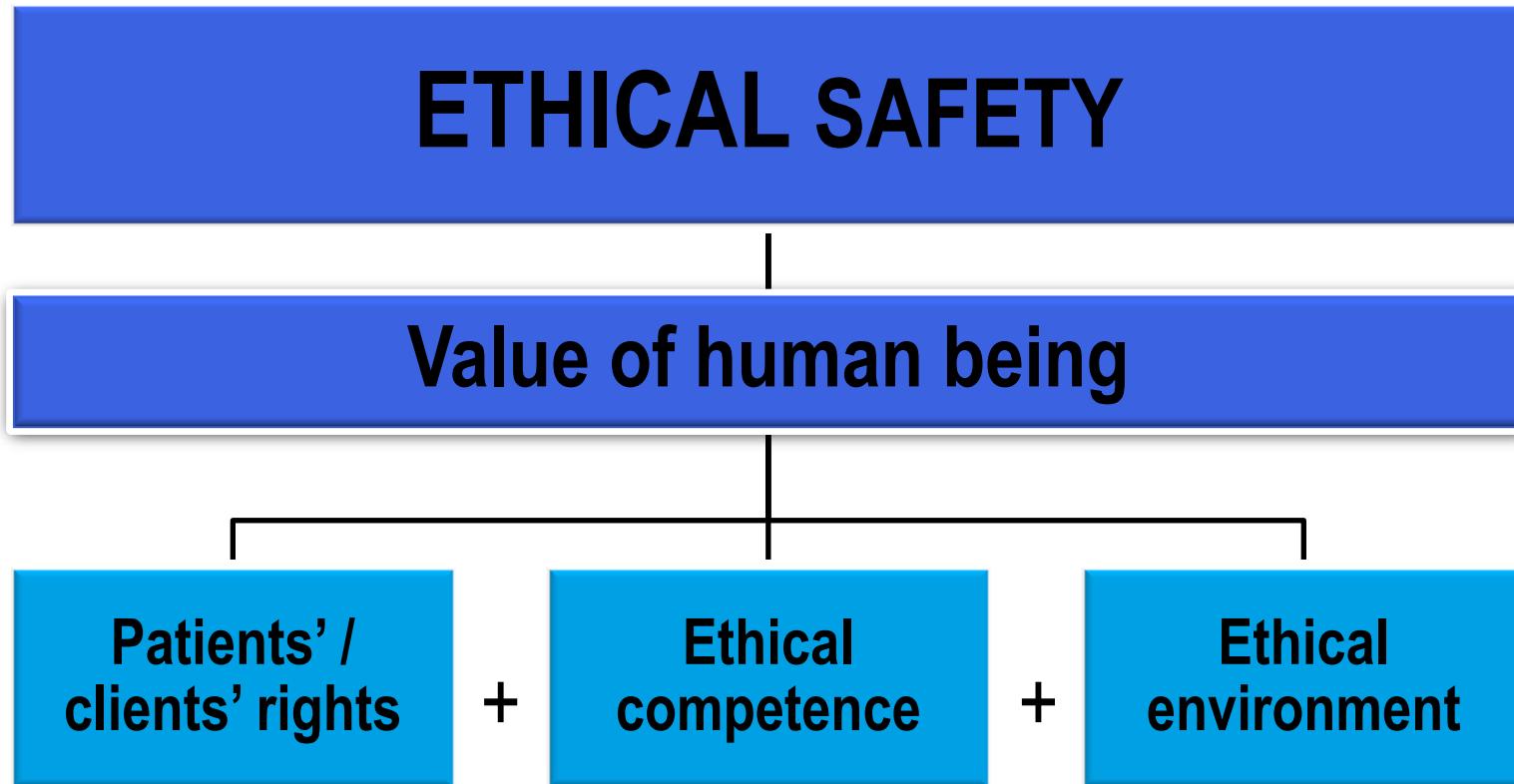


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# Future thoughts



# Ethical safety in care for older people (Leino-Kilpi 2016)



# Tayloring empirical research in ethics in older people care

- ★ To be moral agent
- ★ To establish and continue career in older people nursing care
- ★ To create/test/evaluate outcomes of actions aiming improvement of ethics:
  - Ethical reasoning and behaviour, ethical rounds, ethical consultations, ethics support by bioethicists, mentors, nurse-led shared care, ethical labs, patient education, ethical clubs, journals, applications/other digital solutions.....
- ★ Concept clarifications, instrument constructions and testing
- ★ Connection between ideal ethical decision and real ethical behaviours



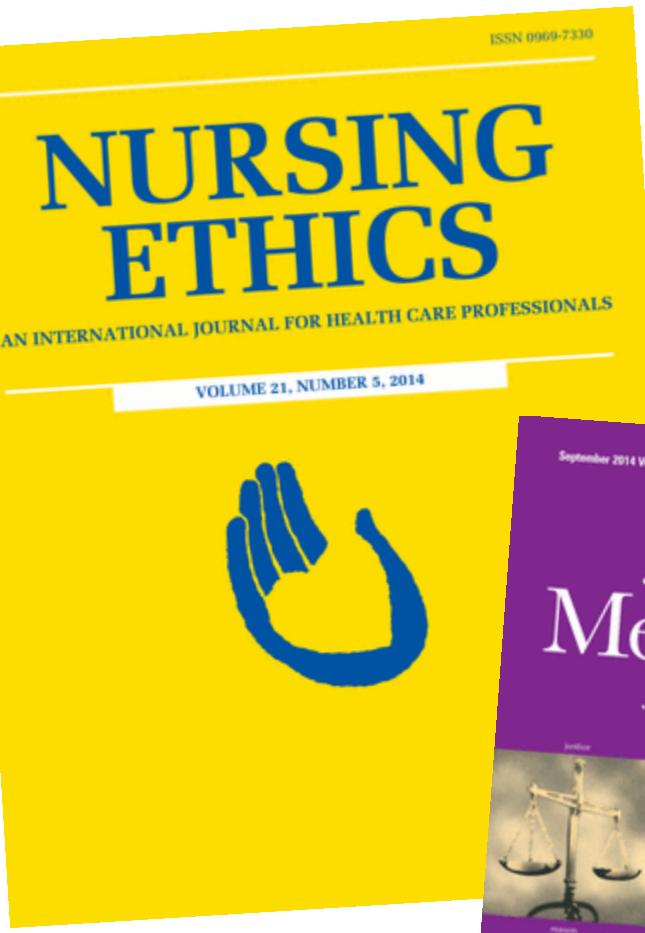


# **Future areas of research in ethics** (e.g. Kaaron & O'Ferrall

2000, Morrison 2009, Chadwick et al 2011, Dwyer 2011, van der Dam et al 2014)

- **Philosophical foundations of nursing/health care ethics**
- **Ethics of aging population** (e.g. van der Dam et al 2014, Suhonen et al 2010)
- **Ethics of patients with memory disorders/dementia** (e.g Buller 2014)
- **Ethics in educational activities** (e.g. Redman 2005,2008, Numminen et al 2007, Salminen et al 2013) and health promotion (**school health, health habits**)
- **Ethics of eHealth (ambulatory/outpatient care**, Pagno 2002, Barina 2014)
- **Ethics of genetics (genomic, biobanks**, e.g. Clarke 2014, Master et al 2014) and **screening** (e.g. Juth & Munthe 2012)
- **Ethics and cultural issues** (e.g. Betancourt et al 2002, Scott et al 2003, Leino-Kilpi et al 2003, Silen et al 2007, Wadenstein et al 2008)
- **Ethics of pandemics/travelling of people/tourism** (e.g. Bustamante 2014)
- **Empirical clinical ethics** (e.g. Berger 2014) and **organisational solutions**





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