

MSAI Policy Document
HUMAN RESOURCES IN HEALTH
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Policy Statement

Introduction: The changing context of health care provision in India has created new challenges for healthcare providers, researchers and the wellbeing of the community as a whole. Healthcare professionals often find themselves confronted with moral questions and ethical dilemmas; moreover there still remains a lacuna with inadequate education of bioethics to understand complexities of the changing work dynamic. New scopes of understanding and application of medical ethics is required to promote the medical profession in future. Amidst facing challenges during practice, it's essential to prioritise the vulnerable patients in the best way possible in a complex system under ever-changing conditions.

MSAI position: MSAI recognises the importance of ethical issues relevant to healthcare and acknowledges that these issues falling under the umbrella of a dynamic complex system are ever evolving. Social context is very crucial/decisive in determining priorities in healthcare. We affirm that it is essential to have ethical principles in healthcare implemented at a national level that is sensitive to the context. It is also crucial to provide quality training to healthcare workers on ethical practices, and comprehensive and diverse training on ethical research. Imparting an ethical dimension to healthcare; medical education and medical students need to be well equipped with the highest ethical standards of healthcare delivery and various dilemmas encountered during practice. We call on all relevant stakeholders to adopt an active role in the integration of ethics into clinical governance reflecting our belief that ethical healthcare is fundamental to improving the health outcomes of diverse patient populations. The objective of this document is to provide an overview of medical ethics and to illustrate the importance of adhering to ethical standards in Indian health and medical care.

Calls to Action:

MSAI Calls upon

1. Government of India (GOI):

- Promote the integration of ethical considerations into healthcare policies and decision-making processes.
- To develop strong surveillance systems that account for the implementation of ethical principles & conduct across healthcare and research.
- To allocate funds and resources to the national health professions education continuum having the capacity to empower healthcare workers on medical ethics.

2. Healthcare Institutions:

- To communicate the institution's commitment to ethical decision making through mission statements and institutional codes of ethics
- Promote continuous professional development learning opportunities that will facilitate open discussions on ethical issues
- Ensure that institutional ethical codes of practice are aligned with the Institutional Ethics Committee (IEC), culturally appropriate, and address a broad range of ethical matters and concerns, with a focus on prioritising patient safety and protecting the rights, safety, and well-being of human subjects who participate in research projects.

- Evaluate and continually refine the institutional processes for addressing ethical issues alongside ensuring that the psychological, social, spiritual, and physical needs and cultural beliefs and practices of patients and their families are met, through promoting employee and medical staff sensitivity.
3. Universities and Research Institutes:
- To ensure the integration of medical ethics and bioethics education throughout the continuum of healthcare professionals' education. Continuing Medical Education (CME) initiatives can be used to facilitate discussions on healthcare ethics and explore ways to address them in undergraduate medical education.
 - Establish comprehensive standards for including medical ethics, research ethics, and bioethics education in their curricula for healthcare professionals to gain a better understanding of the ethical dimensions of patient care and make more informed decisions that prioritise patient welfare. This should include proper execution of AETCOM modules necessary to provide compassionate, patient-centred care that respects patients' autonomy and dignity.
 - Improve the delivery of ethics education through educational strategies such as clinical scenarios and encourage critical thinking; targeted to deliver competence in core ethical behavioural skills.
 - Promote and encourage global health exposure and intercultural experiences in ethics education targeted to inculcate respect for cultural diversity and its impact on ethics.
 - Ensure IECs (Institutional Ethical Committees)/equivalent institutional boards have clear ethical frameworks to regulate the ethics in research; develop up to date guidelines and train the medical staff accordingly.
 - Engage in global networks that advance ethics training and education, keeping up to date with advancements in medical technologies.
4. Non-Governmental Organisations (NGOs):
- Engage on local and national levels to advocate for ethical practices in healthcare; consistently and actively contribute to the advocacy process for the establishment and/or implementation of ethical frameworks nationally and locally.
 - Carry out public awareness and educational programs to educate the public on their rights and duties in healthcare settings.
5. Members of MSAI and Medical Students:
- Plan and implement advocacy initiatives and campaigns that contribute to the establishment and implementation of ethical frameworks nationally and locally.
 - To evaluate the effectiveness of ethics curricula in medical schools, and to advocate for its improvement to prevent unethical practices in clinical settings.
 - Access opportunities, educational activities and workshops on Ethics in Healthcare and encourage members to attend them.
 - Strengthen the collaboration with other students' organisations ethics units in universities in the implementation of initiatives that promote ethics in healthcare and ensure that ethical codes of practice are in harmony with the IEC, thereby fostering a culture of ethical awareness and accountability within the healthcare community.

POSITION PAPER

Background information:

Ethics in healthcare is the multidisciplinary field of study and practice that seeks to understand the values underlying decisions and actions in health care, health research, and health policy, and to provide guidance for action when these values conflict. Healthcare professionals face a myriad of ethical challenges everyday while working in healthcare for a multicultural society. Ethics is grounded in philosophy, religion and political ideology, all of which differ across contexts throughout generations.

The Hippocratic Oath assigns responsibility for healthcare services to the physician, thereby ensuring accountability. Given the precedence of patient-centred care, the conversation around medical ethics is steadily gaining momentum, with increasing emphasis on training and delivery of healthcare based on the fundamental principles of medical ethics. (9)

Autonomy: Patients have the right to make decisions regarding their own healthcare needs.

Justice: Distributing the benefits and burdens of care across society.

Beneficence: Doing good for the patient.

Non-maleficence: To do no harm, or allow no harm done to the patient through neglect.

These principles guide the healthcare professionals to consider what would do good, avoid harm, or at least do more good than harm for the patient concerned; whether the patient's wishes are being considered; and what may be the most equitable option, not always for one patient or group of patients, but sometimes also in the context of others in society.

These four principles are non-hierarchical, which means that none of them always "trump" or take precedence over the others. One could contend that we must evaluate all of the aforementioned guidelines as they apply to the clinical scenario being discussed. But, we might find that they are at odds when more than one principle is in play. (1)

Discussion:

ETHICAL DUTIES OF PHYSICIANS IN HEALTHCARE-

The World Medical Association (WMA) has provided the International Code of Medical Ethics as a canon of ethical principles for the members of the medical profession worldwide, it defines and elucidates the professional duties of physicians towards their patients, other physicians and health professionals, themselves, and society as a whole. (10)

The outcome of patient care can be improved by efforts made to secure informed consent of the patient. This also helps avoid ethical conflicts, confusion, and misunderstanding between patients and physicians. Clinical ethics should be an integral part of medical education at all levels in medical school, in residency, and in continuing education. (11)

The physician must respect the patient's right to be informed in every phase of the care process. The physician must obtain the patient's voluntary informed consent prior to any medical care provided, ensuring that the patient receives and understands the information needed to make an independent, informed decision about the proposed care. The physician must respect the patient's decision to withhold or withdraw consent at any time and for any reason. (12)

Following are the reasons to include ethics in patient care-

- Development of healthcare professionals who improve and promote the health and well-being of people, respecting their dignity, autonomy and human rights.
- Help to recognize the human and ethical aspects of their daily practice.
- Generate a sense of responsibility and advocacy for patients, for their own professional development and for colleagues, recognizing not only as a professional but as a social entity.

ETHICS IN MEDICAL EDUCATION

Ethical education is an academic discipline that reflects critically upon values and meaning of human experience, considers ways to mediate differences in values through moral argument, and examines the right and wrong of human acts in order to clarify the meaning of ethical terms.

Medical ethics education includes instructions that endeavours to teach the examination of the role of values in the doctor's relationship with patients, colleagues and other providers, and society. As we use these terms, medical ethics education is more clinically centred than humanity values education.

Successful medical ethics education requires coherent integrated objectives, teaching methods, content, and program evaluation. At the same time, each program reflects the unique combination of intellectual, institutional, financial, clinical, and leadership resources that created it. Despite the variety of curricula and teaching methods, a consensus has emerged on general objectives and a set of premises for designing successful ethics programs. It is recommended to include ethics education and training in the formal curriculum for people-centred care and community health outcomes. The following are some reasons why:

- To recognize the human and ethical aspects of daily medical practice and impart the values in the global recommended curriculum; honesty, accountability, compassion, service, interprofessional respect, public health and self-policing
- To provide healthcare professionals with knowledge and practice related to philosophy, sociology and law, as well as other areas to establish a broader and interdisciplinary treatment (3,1)
- To create virtuous physicians and prevent the decline in moral reasoning over the course of their undergraduate education (3)
- To teach physicians to recognize the humanistic and ethical aspects of medical careers.(1)
- To equip physicians with the interactional skills needed to apply this insight, knowledge, and reasoning to human clinical care (1)

Only by exercising the virtues of justice, courage, and truthfulness can we sustain the standards of excellence that have historically developed within a practice and gain access to the internal goods of a practice.

The primary interest is the understanding of healthcare ethics as a set of skills to develop and acquire habits that allow people to respond proactively to improve situations of interpersonal difficulty.

Important challenge for medical ethics education, namely to develop a curriculum that will enable medical students at least to maintain their stage of moral development if not increase it through the medical school experience.

Defining such a competency could provide guidance to those involved in curriculum development and therefore assist in the delivery of the set ethical competencies.

-A multidisciplinary team of ethicists—philosophers and physicians should teach medical ethics.

-Instructors for ethics courses need a background in medicine, philosophy, and teaching methods to successfully instruct medical students on ethics.

-Skills to be conceptually coherent, vertically and horizontally integrated through preclinical and clinical training, multidisciplinary, and demonstrate humane and value-conscious medical practice.

DISTRIBUTIVE ETHICS

Distributive justice refers to the fair and appropriate distribution of benefits, risks and costs within a society. In a medical context, this requires patients with similar cases to be treated in a similar manner, and for there to be overarching equality of access to finite health resources.

Health care providers will seldom be given enough resources to satisfy all the demands placed upon them by a community that is becoming increasingly informed and demanding, as evidenced in social scenarios of LMICs like India. The healthcare environment is subject to a range of influences with none as prominent as the political directions that are promulgated at various times.

Distributive justice is an appropriate starting point for a consideration of what features would characterise a just health healthcare system.

Four theories of distribution are cited as they relate to healthcare care include Utilitarianism, Libertarianism, Communitarianism, Egalitarianism. The theories of distribution assist in developing a framework for considering the various options and the notion of providing an equal and fair opportunity for the community is based on sound social principles.

Given the pressures on the health system brought about by a more demanding, better educated community and a minority of people with private health insurance, the ability of the public system to deliver an equal and fair opportunity for treatment is threatened. Certainly those who can afford private care are advantaged in their opportunity to access services more quickly. A just health system ought to be involved far more in achieving allocative efficiency which is aimed at maximising the effectiveness of resource allocations to achieve optimal societal outcomes. This is consistent with those who favour maximising utility but, if provided in a way where all people have equal access and opportunity, it may also satisfy the egalitarian advocates.

PATIENT SAFETY - HIGH VALUE CARE

The “To err is human: building a safer health system” report from the United States Institute of Medicine in 1999 concluded that skilled care activity was not infallible and was likely to cause adverse events.

The World Health Organization (WHO) defines patient safety as the absence of preventable harm to a patient and reduction of risk of unnecessary harm associated with health care to an acceptable minimum. In this definition, it is important to indicate the concept principles of bioethics.

In addition, these obligations are not personal obligations of the professionals only, but also obligations of health institutions as a whole.

A physicians' primary obligation is to engage in shared decision making regarding the risks, benefits, costs (patient and societal level) and the patient's values. In these circumstances, the ethics of High Value Care (HVC) is determined not by the outcome (i.e. whether the drug was prescribed) but by the decision-making process.

The traditional punitive approach to errors in health services does not lead to their prevention and has negative consequences, such as concealment and defensive medicine. It is necessary to change the paradigm, focusing its approach within a systemic model that enables a care culture characterised by greater transparency of the medical act that allows knowing the causes that lead to error, acting on them and achieving greater patient safety.

Ethics can help achieve high value care while preserving the fundamentals of the medical profession, thus safeguarding patient safety as well as the physician's obligation to care.

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