
ETHICAL BEHAVIOR WHEN COMMUNICATING WITH PATIENTS

LECTURE: 11

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OVERVIEW

- This chapter outlines how a changing world of health care has created ethical dilemmas for pharmacists and how an ethical framework is often needed to guide their behavior when dealing with patients.
- A discussion of the American Pharmaceutical Association's (APhA) Ethical Code of Conduct for Pharmacists is presented as well as an introduction to seven key ethical principles that have great application to the delivery of pharmaceutical care.
- Further, a structured guide for moral decision making and ethical case resolution is presented.
- Illustrating the key principles discussed in this chapter, a series of case studies and their corresponding analyses are included to help the readers apply their skills in ethical case resolution.
- Finally, a discussion is provided regarding several contemporary topics causing national concern and making headlines for today's pharmacists.

ETHICAL PATIENT CARE

- Some patient cases presents decisions that must be made on the basis of legal and ethical principles. Your ability to choose a proper course of action in these situations depends on your understanding of the ethical principles involved. The legal aspects of these cases are covered under state and federal law.
- However, many elements are not specifically addressed in laws and regulations but do involve underlying ethical principles of patient–health professional interaction.
- Principles related to ethical decision making in patient care include **beneficence, autonomy, and honesty**. This is by no means a complete list, but the principles seem to be most relevant to the communication responsibilities of pharmacists.
- Other issues that are derived from these principles and are particularly important in patient counseling are **informed consent, confidentiality, and fidelity**.

A PHARMACY CODE OF CONDUCT FOR A MODERN WORLD

- Pharmacists serve as repositories of sensitive and protected health information about their patients. Pharmacists are also being challenged by contemporary social issues such as being asked to dispense medications that end life, in physician-assisted suicide situations, or in situations that involve terminating pregnancies.
- Pharmacists can be proud of the fact that the World Health Organization (WHO) has praised their **importance as communicators and health care givers**. Thus, you must be prepared to carefully recognize and resolve ethical issues by understanding general and specific ethical principles and by applying these principles to pharmaceutical care and medication therapy management.

THE PHARMACISTS CODE OF ETHICS

- The APhA adopted a revised Code of Ethics for Pharmacists in 1994; the American Society of Health-System Pharmacists (ASHP) endorsed the same code in 1996.
- This code was founded using a **patient-centered approach** and its eight principles are based on moral obligations and virtues intended to **guide** pharmacists in their professional relationships with patients and other health care professionals (APhA, 1994).
- This pharmacist-specific Code of Ethics addresses **only ethical behavior** and does not address any of the state and federal statutes and regulations governing pharmacy practice although both state and federal statutes and regulations address how pharmacists are to conduct themselves in relationships designed to respect and protect the well-being of the public.

THE EIGHT PRINCIPLES DESCRIBED IN THE APHA CODE OF ETHICS FOR PHARMACISTS ARE AS FOLLOWS:

- **Principle I:** A pharmacist respects the covenantal relationship between the patient and pharmacist.
- **Principle II:** A pharmacist promotes the good of every patient in a caring, compassionate, and confidential manner.
- **Principle III:** A pharmacist respects the autonomy and dignity of each patient.
- **Principle IV:** A pharmacist acts with honesty and integrity in professional relationships.
- **Principle V:** A pharmacist maintains professional competence.
- **Principle VI:** A pharmacist respects the values and abilities of colleagues and other health professionals.
- **Principle VII:** A pharmacist serves individual community and societal needs.
- **Principle VIII:** A pharmacist seeks justice in the distribution of health resources.

SEVEN KEY PRINCIPLES GUIDING ETHICAL CONDUCT

Underlying Ethical Principles

- Nonmaleficence
- Beneficence
- Autonomy versus paternalism
- Honesty and truth telling
- Informed consent
- Confidentiality
- Fidelity

HOW PHARMACISTS CAN RESOLVE ETHICAL DILEMMAS

Steps in Ethical Decision-Making

- 1. Recognize the moral dimensions.
- 2. Identify all stakeholders and interested parties.
- 3. Think through the shared values or principles involved.
- 4. Weigh the benefits and burdens.
- 5. Look for analogous cases.
- 6. Discuss the case with relevant parties and gather opinions.
- 7. Consider the legal and organizational rules involved.
- 8. Reflect on how comfortable you are with the decision.

ANALYZING PATIENT CASES

- **Confidentiality** simply states that you should not tell a patient's family without his/her consent. You may resolve the confidentiality issue by urging the patient to grant you permission to speak with family based on your appeal that, in the long run, it will be the best for all parties concerned.
- The **beneficence** issues are more complex, since you need to identify the real underlying issues. You must ask yourself, "Am I really looking out for patient's interest or am I responding to my own parental instincts?" In addition, you may be responding out of fear of what would happen if patient's family eventually found out that you knew about the situation. **Fear of losing friends and their business should not be the primary motivators in this situation.**
- Pharmacists may certainly **break confidentiality when a patient's life is in danger**, such as when concerns about suicide exist. However, resolving a confidentiality issue when the threat to a patient's health is more psychological than physical is more difficult.

CONTEMPORARY TOPICS IN PHARMACY CARE

- Does a pharmacist have the right to refuse to dispense a drug when presented with a valid prescription for a drug that is to be used in a treatment that is in conflict with his or her personal beliefs?
- What duty does the pharmacist have to the patient in this situation?
- It is clearly understood in pharmacy laws that it is the pharmacist's duty to refuse to dispense if, in the pharmacist's professional judgment, the prescription does not seem valid or could cause harm to the patient. But what are the ethical issues surrounding pharmacists' ability to conscientiously object to dispensing a medication? What happens when a pharmacist's ethical, moral, or religious beliefs conflict with the patient's beliefs and medical needs?

FIRST: CONSCIENTIOUS OBJECTION

- Professionals should not have to forsake their morals as a condition of employment.
- For instance, “ethics and law allow physicians, nurses, and physician assistants to refuse to participate in abortions and other reproductive services” and therefore, pharmacists should be afforded the same respect.
- Opponents of conscientious objection argue that pharmacists chose to enter a profession bound by certain fiduciary duties and therefore they are supposed to place the interests of the patient before their own immediate interests.
- Further, they argue that certain principles in the pharmacist’s Code of Ethics weigh against conscientious objection. Specifically, “a pharmacist respects the autonomy and dignity of each patient” and “a pharmacist serves individual, community, and societal needs” . Finally, opponents reflect that refusal to dispense has great potential for **abuse and discrimination** because pharmacists are privy to personal and sensitive patient information and could refuse to fill a prescription if they mistakenly make judgments relating to people’s behaviors.

CONSCIENTIOUS OBJECTION (continued-I)

- “APhA recognizes the individual pharmacist’s right to exercise conscientious refusal and supports the establishment of systems to ensure patient access to legally prescribed therapy without compromising the pharmacist’s right to conscientious refusal” (APhA, 2006).
- Pharmacists who choose not to fill a valid prescription for a drug that is to be used in a treatment that is in conflict with personal beliefs must be informed of state legislation regarding conscientious objection and their employers’ stand on the topic.
- Pharmacists have a duty to provide access to drugs to people who need them, and patients are entitled to the treatment initiated by the physician.
- Thus, alternate arrangements need to be made to help the patient. For instance, the pharmacist may have another pharmacist fill the prescription, refer to another pharmacy, or, at a minimum, the prescribing physician should be contacted.

CONSCIENTIOUS OBJECTION (continued-2)

- Pharmacists need to be aware of the implications of conscientious objection not only to the patient but also to their employer and coworkers.
- “when a pharmacist takes a job, that employee is obligated to comply with the employer’s policies and procedures . . . when such personal and volatile issues occur without notice in the workplace, people are caught off guard.”
- Thus, it is preferable that pharmacists explore these sensitive topics with employers in an open discussion before hiring, thus avoiding potentially volatile situations that are not conducive to customer satisfaction or patient welfare.

SECOND: DECISION MAKING ON ASSISTED SUICIDE

- the American Society of Health-System Pharmacists (ASHP) in 1999, issued the “ASHP Statement on Pharmacists Decision-Making Assisted Suicide.” In this document, ASHP reinforces that “**the basic tenant of the profession is to provide care and affirm life.**”
- Further, the ASHP (1999) reflected that the patient–provider relationship is based on **trust, respect for patient autonomy, confidentiality, and decision making**, and it is the duty of the pharmacist to ensure that the patient and the health care team are informed of all **pharmacotherapeutic options available** in treating the patient’s condition.
- It is also stated that **the patient has the right to determine his or her own therapeutic option**, including end-of-life decisions.
- Pharmacists **must respect the patient’s decision and maintain confidentiality** “regardless of whether they agree with the values underlying the patient’s choice of treatment or decision to forgo any particular treatment” (ASHP, 1999).
- Finally, ASHP (1999) also supported conscientious objection by stating “pharmacists must retain their rights to participate or not in morally, religiously, or ethically troubling therapies.”
- Thus, pharmacists are left to consider not only the state regulations concerning assisted suicide and conscientious objection, but also the ethical and moral principles involved in the patient–provider relationship.

SUMMARY

- Pharmacists must understand the principles that serve as foundations for ethical decision making in health care.
- The obligation to respect patient autonomy, to protect confidentiality of patient information, to serve patient welfare, and to treat patients with respect and compassion are fundamental duties for any health care professional.
- Using a systematic decision-making process when ethical dilemmas arise and principles seem to compete can assist you in reaching decisions that are ethically valid.

THANK YOU

WISH YOU THE BEST OF LUCK