



6th International Conference on Clinical Ethics Consultation

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Abstract Submission Form – Major Papers

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Proposed title of paper: Reconceptualizing Clinical Ethics Curbside Consultation as an Opportunity for Clinical Ethics Conflict Coaching: Learning from the Discipline of Conflict Management

Abstract with 3 clearly stated objectives in 250 words:

“Curbside consultation” involves a clinician seeking informal advice about patient care from another. Unlike in formal consultation, the person providing curbside assistance may not personally evaluate a patient, and does not write a chart note. While this process is common in medical practice, little has been written about the utility of curbside consultation in clinical ethics conflicts. This may be due to concerns that a clinical ethicist providing curbside consultation may provide bad guidance due to incomplete or biased information.

“Clinical ethics conflict coaching” offers an innovative approach to curbside ethics consultation, which optimizes curbsides’ usefulness in clinical ethics while mitigating concerns over incomplete or biased guidance. Clinical ethics conflict coaching draws on processes developed within the conflict management field to provide assistance without involving all parties to a conflict in a consultation.

Through clinical ethics conflict coaching, curbside consultation can expand the array of processes available to the clinical ethicist, enrich moral discourse in everyday patient care, and foster a culture of ethics quality within health institutions. Rather than employing ethics consultation only as a resource of last resort, clinical ethics conflict coaching can be utilized early in a case, to aid the clinician in analyzing substantive issues and in developing strategies for engaging with other stakeholders.

This paper (1) defines clinical ethics conflict coaching, and explores its foundations in conflict management; (2) explains the applicability of conflict coaching to clinical ethics; and (3) identifies and evaluates the opportunities and drawbacks presented by clinical ethics conflict coaching.

What significant contribution to the field of clinical ethics consultation does this presentation make?
(250 words)

Little has been written about the viability of curbside consultation as a tool for use in the practice of clinical ethics. Instead, the practice of clinical ethics has focused largely on formal consultation and multi-party processes such as mediation. This paper represents a shift from that mode of thinking, for perhaps the first time, exploring how conflict coaching can be used to enhance the practice of clinical ethics when a single party has sought out assistance, but does not wish to initiate a formal consultation.

This paper is truly interdisciplinary, integrating conflict coaching, developed within field of the conflict management, into the practice of clinical ethics. Conflict coaching is a natural fit for clinical ethics, expanding on the clinical ethicist's understanding of conflict management towards a broader recognition of conflict management's potential to expand the array of tools for clinical ethics practice. Unlike mediation or multiparty facilitation, clinical ethics conflict coaching is targeted towards one individual, helping him or her better engage with the other moral stakeholders around the substantive, process, and interpersonal components of a case. This process format is a fundamentally new to the methodology of clinical ethics.

Furthermore, integrating curbside consultation into clinical ethics can provide clinicians with tools for proactive, preventative assistance before ethics conflicts become destructive. Because mediation and formal consultation generally are reactive processes, conflict coaching as discussed in this paper has the potential to be a field changing innovation, and enrich ethics quality within healthcare institutions.

If you have or will publish on this topic, please cite reference:

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Are you planning to or will you be willing to submit a poster along with your major paper?

Yes No