# Module 3:

# Ethics, Confidentiality and Trust Building

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**GREECE**

| Module Title | Module 3: Ethics, Confidentiality and Trust Building |
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| **Learning Objectives** | **Module 3 aims to:**<br><br>1. Educate learners on ethical and confidentiality principles<br><br>2. Provide information on the ethical aspects of mentoring<br><br>3. Provide mentoring guidelines for managers of LTC Units<br><br>4. Introduce personal values and competences for learners<br><br>5. Train learners in communication skills |
| **Learning Outcomes** | **Through Module 3, learners will:**<br><br>1. Be aware of the ethical framework of caregiving<br><br>2. Have better teaching and communication skills<br><br>3. Be able to support caregivers and provide guidance<br><br>4. Be able to apply confidentiality principles |

# 1. Introduction

**The Ethical Framework sets out the expected ethical principles, values and competences for LTC Managers.**

The caregiving and medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the mentee. As a member of this profession, a physician must recognize responsibility to mentees first and foremost, as well as to society, to other health professionals, and to self.

In order to understand and address ethical problems, it is necessary to have clarity on what is at stake. Many theorists have emphasized a variety of values, principles, and techniques for recognizing and resolving ethical problems. The conceptual framework of Beauchamp and Childress (2001) have been extremely influential in the field of medical ethics, and is fundamental for understanding the current approach to ethical assessment in health care. The well-known model of "principles" identifies:

a) autonomy: the right for an individual to make his or her own choice

b) beneficence: the moral duty to promote the course of action that is in the best interests of the mentee

c) nonmaleficence: avoiding the causation of harm; the healthcare professional should not harm the mentee. All treatment involves some harm, even if minimal, but the harm should not be disproportionate to the benefits of treatment.

d) justice: distributing benefits, risks and costs fairly; the notion that mentees in similar positions should be treated in a similar manner.

In terms of care, activities, and preferences, autonomy is concerned with finding and promoting the potential for self-determination and authenticity among residents. Beneficence is focused on acting in the resident's best interest while preventing harm, particularly when that resident's competence is impaired by a condition like dementia.

The importance of nonmaleficence can be seen in the necessity for caregivers, administrators, and care communities to refrain from policies and practices that could endanger residents.

Last but not least, justice is the principle of giving each their due through equitable access, fair distribution of rewards and costs, and enforcement of procedural fairness across the board for all parties involved (Post & Blustein, 2015). The idea of justice can be used on both a micro level (i.e., in

terms of a resident's rights) and a macro level (i.e., how access to LTC communities are often the result of socio-economic status and not resident need).

# 2. Ethical Framework of Caregiving

This framework is designed to help you provide your people with a secure base for your work together. It is good practice to integrate the Ethical Framework into your work and to use it as a resource to help you face any challenges and issues as they arise. This works much better than just turning to it in an emergency or after something has gone wrong. As a framework, it creates a shared structure within which we all work but with the flexibility to respond to the needs of different contexts and groups.

## 2.a. Values and  Ethics

The core principles include a dedication to:

• upholding human rights and dignity

• relieving signs of individual sorrow and anguish

• increasing people's talents and well-being

• enhancing the quality of interpersonal relationships

• enhancing self-sufficiency and efficiency

• assisting the individual(s) in developing a meaningful sense of self based on their own cultural and personal background

• being tolerant of the diversity of human experience and culture

• ensuring security

## 2.b Best Practices of Ethical Mentoring

- **Put people first by:**

a.  making people our primary concern while we are working with them

b. providing an appropriate standard of service to people.

c. sharing the responsibility with all other members of our professions for the safety and wellbeing of all people and their protection from exploitation or unsafe practice. We will take action to prevent harm caused by practitioners to any person.

d. giving careful consideration to how we manage situations when protecting people or others from serious harm or when compliance with the law may require overriding a person's explicit wishes or breaching their confidentiality

- **Work to professional standards by:**

a. working within our competence

b. keeping our skills and knowledge up to date

c. collaborating with colleagues to improve the quality of what is being offered to others

d. ensuring that our wellbeing is sufficient to sustain the quality of the work

e. keeping accurate and appropriate records.

**We will keep skills and knowledge up to date by:**

a. reading professional journals, books and/or reliable electronic resources

b. keeping ourselves informed of any relevant research and evidence-based guidance

c. discussions with colleagues working with similar issues

d. reviewing our knowledge and skills in supervision or discussion with experienced practitioners

e. regular continuing professional development to update knowledge and skills

f. keeping up to date with the law, regulations and any other requirements, including guidance from this Association, relevant to our work.

- **Show respect by:**

a. valuing each person as a unique person

b. protecting each person's confidentiality and privacy

c. agreeing with each person on how we will work together

d. working in partnership with each person

- **Building an appropriate relationship**

We will give careful consideration to how we reach agreement with people and will contract with them about the terms on which our services will be provided. Attention will be given to:

a. reaching an agreement or contract that takes account of each person's expressed needs and choices so far as possible

b. communicating terms and conditions of the agreement or contract in ways easily understood by the person and appropriate to their context

c. stating clearly how a person's confidentiality and privacy will be protected and any circumstances in which confidential or private information will be communicated to others

d. providing the person with a record or easy access to a record of what has been agreed

e. keeping a record of what has been agreed and of any changes or clarifications when they occur

f. being watchful for any potential contractual incompatibilities between agreements with others and any other contractual agreements applicable to the work being undertaken and proactively strive to avoid these wherever possible or promptly alert the people with the power or responsibility to resolve these contradictions.

We will establish and maintain appropriate professional and personal boundaries in our relationships with people by ensuring that:

a. these boundaries are consistent with the aims of working together and beneficial to the person

b. any dual or multiple relationships will be avoided where the risks of harm to the person outweigh any benefits

c. reasonable care is taken to separate and maintain a distinction between our personal and professional presence on social media where this could result in harmful dual relationships with people

d. the impact of any dual or multiple relationships will be periodically reviewed in supervision and discussed with people when appropriate. They may also be discussed with any colleagues or managers in order to enhance the integrity of the work being undertaken

- **Care of self as a practitioner**

We will take responsibility for our own wellbeing as essential to sustaining good practice with people by:

a. taking precautions to protect our own physical safety

b. monitoring and maintaining our own psychological and physical health, particularly that we are sufficiently resilient and resourceful to undertake our work in ways that satisfy professional standards

c. seeking professional support and services as the need arises

d. keeping a healthy balance between our work and other aspects of life.

- **Supervision**

Supervision is essential to how practitioners sustain good practice throughout their working life. It provides practitioners with regular and ongoing opportunities to reflect in depth about all aspects of their practice in order to work as effectively, safely and ethically as possible. Supervision also sustains the personal resourcefulness required to undertake the work.

Supervision requires additional skills and knowledge to those used for providing services directly to people. Therefore supervisors require adequate levels of expertise acquired through training and/or experience. Supervisors will also ensure that they work with appropriate professional support and their own supervision.

Careful consideration will be given to the undertaking of key responsibilities for people and how these responsibilities are allocated between the supervisor, supervisee and any line manager or others with responsibilities for the service provided. Consideration needs to be given to how any of these arrangements and responsibilities will be communicated to people in ways that are supportive of and appropriate to the work being undertaken. These arrangements will usually be reviewed at least once a year, or more frequently if required.

## 2.c. Commitment and Confidentiality

Caregivers are obligated not to disclose confidential information given by a mentee to another party without the mentee's authorization.

Many residents are frail, vulnerable and dependent on staff for part or all of their care. They are frequently reluctant to voice their concerns or complaints in any way out of fear of mistreatment or reprisals. Often the only way residents feel comfortable bringing their concerns to the Manager or talking about conditions in the facility is with a guarantee that their confidences will be preserved. A relationship of trust must form between the Manager and the resident before a Manager can advocate on a resident's behalf. This trust only develops when residents can absolutely rely upon the discretion of the Manager. They must be confident that their identity and the information they divulge to the Manager will only be shared with their permission, and only to those to whom they wish the knowledge to be disclosed.

Confidentiality Agreement: Before having access to mentees' confidential medical records, all staff must read and sign a confidentiality agreement. This agreement states that employees will not disclose medical information without written consent from the mentee, and that employees will only have access to mentee medical information when it is pertinent to their job. All medical records and information are opened on a need-to-know basis only.

The ten principles for protecting privacy in Long-Term Care Units are:

➢ Be Accountable - We are responsible for personal information we collect.

➢ Identify Purpose - We need to ensure that there is a purpose to every piece of information we collect.

➢ Obtain Consent - Personal information should not be collected, used, or disclosed without the prior knowledge and consent of the mentee, subject to limited exceptions. Consent may be implied or expressly given, and may be given in writing or verbally.

➢ Limit Collection - We should collect only the minimum personal information necessary to fulfill stated purposes.

➢ Limit Use, Disclosure, and Retention - We must use and disclose personal information in accordance with the purposes given to the mentee.

➢ Maintain Accuracy -Mentee information must be kept accurate, up-to-date, and as complete as necessary to fulfill stated purposes.

- ➢ Employ Safeguards - We have safeguards in place to protect personal information against risks such as loss, theft, unauthorized access and disclosure, copying, use, or alteration.

- ➢ Be Open and Transparent - We inform mentees about the personal information we collect and store, the purposes for which it is used, the persons to whom it is disclosed, and how an individual may access it.

- ➢ Provide Access - Mentees are entitled to access their personal information to ensure its accuracy and completeness, and to identify to whom it was disclosed, subject to certain exceptions. We charge an administrative fee for printing out or transferring mentee records.

- ➢ Permit Recourse - Mentees can challenge our compliance with these principles through our complaints process.

## 2.c. Case Studies

**Case Study 1:**

**A woman enters the emergency room with stomach pain. She undergoes a CT scan and is diagnosed with an abdominal aortic aneurysm, a weakening in the wall of the aorta which causes it to stretch and bulge. The doctors inform her that the only way to fix the problem is surgically, and that the chances of survival are about 50/50. They also inform her that time is of the essence, and that should the aneurysm burst, she would be dead in a few short minutes. The woman is an erotic dancer; she worries that the surgery will leave a scar that will negatively affect her work; therefore, she refuses any surgical treatment. Even after much pressuring from the doctors, she adamantly refuses surgery. Feeling that the woman is not in her correct state of mind and knowing that time is of the essence, the surgeons decide to perform the procedure without consent. They anesthetize her and surgically repair the aneurysm. She survives, and sues the hospital for millions of dollars.**

**Questions for Case 1:**

Do you believe that the doctor's actions can be justified in any way?

Is there anything else that they could have done?

Is it ever right to take away someone's autonomy? (Would a court order make the doctors' decisions ethical?)

What would you do if you were one of the health caregiver?

**Case Study 2:**

**A woman was diagnosed with motor neuron disease (the same disease that Stephen Hawking has) 5 years ago. This is a condition that destroys motor nerves, making control of movement impossible, while the mind is virtually unaffected. People with motor neuron disease normally die within 4 years of diagnosis from suffocation due to the inability of the inspiratory muscles to contract. The woman's condition has steadily declined. She is not expected to live through the month, and is worried about the pain that she will face in her final hours.**

**Questions for Case 2:**

Would you explain to the mentee  the situation and the procedure? In your opinion, does she need to know about her health's condition?

Would you tell her the truth? Which criteria would affect your decision?

What skills would a caregiver need, in order to support the woman?

# 3. Personal Values

## 3.a. Building Trust

Trust not only necessitates active listening but invites collaboration and is pursued with intention. Building a trusting relationship must also include the acknowledgment of each person's value and is further created on a foundation of dignity and respect. Building trust is personal.

Four alternative views on trust-building can be used: interpersonal, institutional, organizational, and public trust. A smart leader can inspire individuals to work together toward a common objective because they understand that human contact is what drives a company.

To ensure an organization's success, leaders must be kind and compassionate. To operate at the highest level possible, the organization must be led by love and kindness rather than fear. In the health care sector, it is crucial to optimize an organization's beneficial effects on both society and the person.

5 trust-generating leader behaviors: inclusion, transparency, solicitation of input and ideas, support for professional development, and expression of appreciation and gratitude.

Interpersonal trust not only has extrinsic value in the facilitation of quality of care, but it also has intrinsic value. There are several other factors that are needed to promote interpersonal trust, both between residents and staff and between staff and leadership:

(1) a sense of situational awareness,

(2) the ability to notice and respond,

(3) understanding expectations,

(4) predictable follow through and being intentional with communication, and

(5) addressing inequality in power.

**Constant coaching and feedback:**

The routine should remain simple and the informal conversation should center on how both the employee and supervisor view the employee's performance and development. The meetings should focus on the future and on what "could be" as well as on the past. Asking specific questions to help the employee along can be important. Such questions might include:

*What have you accomplished?*

*How did you measure accomplishments?*

*What do you want to accomplish in the next few months?*

*What measurements might you use for those accomplishments?*

*What has to be done?*

*How can I help?*

These types of open-ended questions are key to engaging employees in assessing their performance and giving them appropriate feedback. Feedback should include the manager's observations, as well as a variety of performance data. Managers need to be clear on the purpose of this feedback-to inform, enlighten, and suggest improvements where needed

**Integrity**

Integrity is the irreducible minimum of leadership and followership. It breeds trust, respect, and credibility. The leader's actions set an example for the team members. Integrity is indeed the ultimate best practice in balancing leadership and teamwork.

**Recognition**

Praising and recognizing employees involves another important communication skill. For some managers, giving praise and recognition is difficult. Yet various studies indicate that employees value personalized, spur of the moment recognition for their contributions. To be effective in recognizing employees, managers need to:

- deliver recognition in an open, public way;
- tailor recognition to the unique needs of individuals;
- recognize close to the time of the achievement; and
- establish a clear connection between accomplishments and recognition.

**Employees Participate in the Process**

As part of these ongoing planning and development meetings, managers should involve employees in the performance assessment and planning dialog. Not only is it important for employees to keep track of their own performance, it also is important for them to take responsibility for learning and developing.

## 3.b. Communication

Communication is any exchange of information between a sender and a receiver. It is critical for teams to encourage open communication flow between team members to operate most effectively. The goal of open communication is efficient, accurate, and precise communication without fear of reprisal. Furthermore, team members should also engage in closed-loop communication to ensure that the information sent was received and interpreted correctly. If not, clarifications should be made

Excellent communication skills are essential for good performance management. They are important competencies used in the entire performance management process, from planning and

communicating work expectations to recognizing employees for their successful achievements. To communicate effectively with employees, performance managers must:

- establish strong working relationships with employees,

- promote easy access to information and feedback,

- promote employee involvement in planning and development activities, and

- recognize and praise top performers.

The following are five essential communication skills that will help healthcare managers succeed in leadership roles:

**1. EMPATHY**

Applying empathy to the healthcare setting involves seeking to understand a mentee's values, experience, emotions, concerns, needs and questions in an authentic way. This can benefit health outcomes through more informed diagnostic accuracy and improved mentee-provider relationships. Empathy can also foster mentee satisfaction, participation and investment in their healthcare experience.

Similarly, healthcare managers who demonstrate and interact with empathy can help staff feel valued and understood. Modelling empathetic communication creates a work culture of compassion and belonging. This sort of culture engenders the team cohesion and collaboration that drive high-performing healthcare organizations.

**2. ACTIVE LISTENING**

Active listening could be thought of as empathy in action. Actively listening to mentees conveys respect for their self-knowledge and builds trust. It is only through shared knowledge that caregivers and mentees can co-create an authentic care plan, based on the individual needs of each mentee.

This communication skill involves soliciting and listening to concerns, ideas, feedback and feelings of others. Beyond simply listening, the active listener considers what others have to say carefully and asks questions to ensure what is communicated is fully understood.

Beyond mentee-provider outcomes, active listening is central to leading and managing effectively. Active listening ensures staff know their concerns are heard and understood. It also provides leaders with the accurate understanding of staff concerns needed to address issues successfully.

Active listening is also important when communicating with parties like other healthcare entities, business partners and insurance companies. It fosters trusting relationships where shared knowledge and information is understood.

## 3. INTERPERSONAL SKILLS

Constantly improving on one's interpersonal skills can be very beneficial in healthcare management. According to Kognito, effective interpersonal communication in healthcare can improve mentee satisfaction and outcomes while combatting staff stress and burnout.

Interpersonal skills can be either verbal or nonverbal (body language, facial expressions). In addition to empathy and active listening, interpersonal skills also include mentee, responsibility, dependability, flexibility, teamwork and authentic leadership.

Demonstrating these traits and skills shows staff that a leader's intentions, attentiveness and decision-making are trustworthy and genuine, helping build followership and motivation. Additionally, good leaders endeavor to help their reports develop interpersonal skills, which promotes staff cohesion, teamwork and better communication with mentees.

## 4. CLARITY

Clarity is vital for effective managerial communication, regardless of the field. This is especially true for healthcare management, where consequences for misunderstood communications could be dire.

Healthcare managers must use clear language to communicate expectations, policies and procedures. Staff must also have all the information they need to engage clearly with  mentees regarding care plans, treatment options, financial matters and any mentee concerns.

Clarity is also essential for communicating with business partners, insurance companies and regulatory bodies. There should be no doubt regarding what each party expects of the other, how collaboration will benefit each, and how compliance with regulations will be measured and met.

**5. READING AND WRITING**

Healthcare systems rely on extensive written documentation, policies, guides, agreements with partners and insurance companies, electronic medical records and other written communications. Thus, healthcare managers must be adept in reading and writing, with awareness of medical terminology and shorthand.

However, healthcare managers also need to be able to convey messages via written word without the added verbal and nonverbal cues of interpersonal communication. Managers can hone their written communication skills through study and practice.

Communication skills such as these are a must for modern healthcare managers. By communicating effectively, healthcare managers can improve staff performance and satisfaction, mentee outcomes and organizational relationships, all core drivers of a healthcare organization's success.

## 3.c. Team Building

In health care, others' lives depend on the team operating at a level beyond the sum of its individual parts. A framework represents a three-pronged approach to teamwork in health care that entails **communication, coordination, and cooperation**. These fundamental requirements of teamwork represent the constant interaction that team members undertake to become an effective team. Guidelines, tips, and examples show how the framework can be applied to establishing and enabling teams to provide safe, reliable care.

The guidelines are as follows:

(1) Support precise and accurate communication through a closed-loop communication protocol;

(2) diagnose communication errors as you would any illness—Examine the team and look for symptoms, then treat the symptoms through team learning and self-correction;

(3) recognize functional expertise by identifying and publicizing topical experts to evenly distribute work load and increase accuracy;

(4) institute frequent practice opportunities to keep team skills in good shape because poorly honed skills will limit performance;

(5) refine the team's shared mental models (SMMs) by pre-planning to build its implicit coordination skills, adaptability, and flexibility;

(6) shape adaptive expertise by fostering a deep understanding of the task to increase team effectiveness;

(7) build team orientation by taking steps to increase trust and cohesion to lower stress levels and increase satisfaction, commitment, and collective efficacy; and

(8) prepare the team by providing learning opportunities for new competencies that will expose members to feedback and increase the team's overall efficacy.

## 4. Summary

The COVID-19 pandemic has exposed some of the biggest challenges in long-term care and has had a huge impact on long-term care residents and administrators.

Medical professionals frequently find themselves facing moral questions and ethical dilemmas in their line of work. Medical ethics provide a framework to help them make judgement calls which are morally sound and right for the mentee in question. Ethics is an inherent and inseparable part of clinical medicine as the physician has an ethical obligation (i) to benefit the mentee , (ii) to avoid or minimize harm, and to (iii) respect the values and preferences of the mentee.

It is important that mentors be careful about the requests they make of their mentees, since mentees are inclined to please their mentors and may perceive a request as a demand. In some cases, mentors inadvertently take advantage of their power and have a mentee take on the work of the mentor. In addition to leading to fear and resentment on the part of the mentee, this could increase the mentee's workload and stall progress in his or her career development.

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