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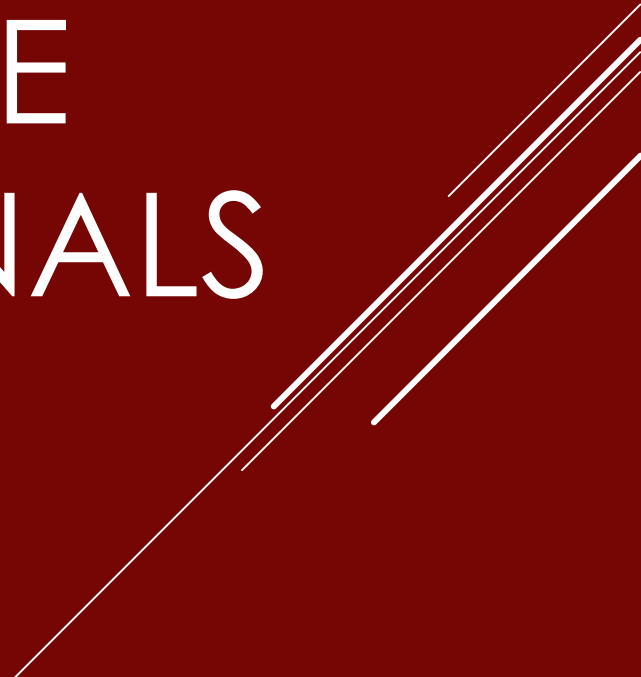
Accommodating Conscience Research Network website:

<http://wp.lancs.ac.uk/acorn/>

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CONSCIENCE AND THE DECISIONS OF HEALTHCARE PROFESSIONALS



There are no financial or other relationships which could be considered a conflict of interest

INTRODUCTION

- ▶ Talk will be about difference between conscience and other decision-making reasons
- ▶ How I come to this question:
 - ▶ Not overly interested in abortion or IVF
 - ▶ My main concern is 'bridge too far' cases
- ▶ I therefore discuss 'claims of conscience' rather than conscientious objection
 - ▶ This broadens the range of claims called conscience
 - ▶ I believe we ought to allow people to claim conscience without those claims necessarily controlling situation

- ▶ For me, conscience requires the following:
 - ▶ Conduct-related choice
 - ▶ Based upon a moral value
 - ▶ That is 'inward-facing'
- ▶ Conscience does not need to be:
 - ▶ Rule-based
 - ▶ Predictable
 - ▶ Correct

CHARACTERIZING CONSCIENCE

- ▶ 'technical medical skill'
- ▶ Professional requirements
- ▶ 'best interests'
- ▶ conscience


ASPECTS OF DECISION-MAKING



‘TECHNICAL MEDICAL SKILL’

- ▶ UK courts sometimes refer to this as ‘clinical judgment’
- ▶ Something that requires expertise within the healthcare field
 - ▶ E.g. whether a drug will have a particular effect
- ▶ Can often be used to set boundaries of what doctors feel obliged to offer/inform a patient about

PROFESSIONAL REGULATION

- ▶ Professional codes of conduct
 - ▶ Legal rules
 - ▶ These apply whether or not the healthcare professional agrees with them
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- ▶ What is best for the patient under the circumstances
- ▶ In legal terms (in the UK at least), this is generally only applicable to those without capacity
- ▶ I mean it to be inclusive and include patients whether they have capacity or not
- ▶ Should be about the specific patient
- ▶ Focus of decision should be about the patient

‘BEST INTERESTS’



- ▶ Healthcare decisions are a combination of (at least) these four reasons
- ▶ They should be considered overlapping circles rather than independent silos
- ▶ Balance reasons when making decisions
- ▶ Benefits to model:
 - ▶ Transparency and truthfulness
 - ▶ Understanding by HCP and patient
 - ▶ Evaluation of reasons can be easier


HEALTHCARE DECISIONS



RESPONSIBILITIES OF CONSCIENCE

- ▶ We can't/shouldn't protect all claims of conscience
- ▶ One idea is to protect only those claims where people exercise responsibilities as well
- ▶ Three responsibilities:
 - ▶ Humility
 - ▶ Universality
 - ▶ Reciprocal Respect

CONCLUSION

- ▶ Conscience is broader than simply conscientious objection
 - ▶ Conscience often hides behind other aspects of healthcare decision-making
 - ▶ Seeing conscience as broader than previously does require us to make choices about which ones we ought to protect.
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