

*Healthcare and Project Management*¹

Ethical Decision-Making in Healthcare²

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Abstract

The Healthcare industry workforce that deals with “life” faces ethical dilemmas frequently on medical and moral dimensions. These dilemmas range from care equity, access to healthcare, patient privacy and confidentiality, course of treatment, and so on. But the most important of these is dealing with the issues that concern the care delivery of patients with multimorbid disabilities and chronic diseases, especially around end-of-life care. As the healthcare workforce struggled to deal with the patient deluge in the face of limited resources, the Covid-19 pandemic brought huge ethical dilemmas to the fore. In this unprecedented situation, International and national bodies sprang into action, creating guidelines for crisis management to support the healthcare workforce.

Decision-making while dealing with ethical challenges is a step-by-step process. Project Management Institute’s (PMI) Code of Ethics and Professional Conduct is a well-referenced and adopted framework for dealing with ethical issues related to global projects and programs.

In this article, the author tries to increase awareness of and importance of ethical decision-making in healthcare situations. Patient care delivery needs to be envisioned as a project. Using scenarios from the healthcare world, the author would like to impress the relevance and value of using PMI’s Code of Ethics and Ethical Decision Making Framework (EDMF) as one of the multiple available reference frameworks for dealing with ethical issues in the healthcare domain.

Key terms: Healthcare ethical dilemmas; quality of life; ethical decision making; Ethical Decision Making Framework (EDMF)

Introduction

Mary*: Good morning, doctor. How are you doing today?

¹ Editor’s note: This is the fourth in a series of articles about project management in healthcare by Dr. Deepa Bhide, a practicing pediatrician with additional experience in information technology and project management. She has recently experienced healthcare from a patient’s perspective while recovering from a broken ankle. In this series, Dr. Bhide will reflect on programs, projects, and project management in all aspects of healthcare from industry, provider, and human patient perspectives. Learn more about Dr. Bhide in her author profile at the end of this article.

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Author: Good morning, Mary. I am doing well. How have you been?

Mary: Thank you. I have been held up with taking care of my friend. Her father, about 86 years old, is admitted to the local hospital for feeling dizzy and unable to sit down. He has been suffering from high blood pressure and diabetes mellitus for over three decades now and has developed complications of diabetes, such as kidney failure and foot ulcers. My friend knows the prognosis but is concerned about her father's health. The team of physicians is attending to the frail older man. She just got home after discussing a do-not-resuscitate order for her father. I would like to know more about ethics or ethical considerations in patient care projects.

Author: Oh! I am sorry to hear that. I can understand your friend's condition. It's a challenging situation to handle. Let's get going with our discussion on this topic.

Maintaining high ethical standards in care delivery¹ is a must for anyone in healthcare, whether physicians, nurses, administrators, or those supporting the healthcare industry. That increases their credibility with patients and their families. The healthcare workforce faces ethical dilemmas in various forms in their day-to-day work lives. Even though "dilemma" literally means "two choices" (comes to us from Greek *dilēmma*, from *di-* 'twice' + *lēmma* 'premise'), there are usually more than two paths to a solution, and most of the time, both approaches seem correct. That's the dilemma! A dilemma increases the complexity of the decision from an ethical angle.

I present three scenarios to explain the ethical dilemmas faced by the healthcare workforce.

Meena*, a 5-year-old girl, was brought to the Emergency Room (ER) as a day-old infant. At birth, Meena was diagnosed with a case of severe cerebral palsy with mental disability (damage to the developing brain causing impairment of movement and below-average intellectual abilities). At the time of discharge from the hospital, the healthcare team had informed Meena's parents about her disability, and accepting it was hard on them. Meena's physician also gave them an idea of the Quality of Life (QoL), flags to watch out for, and cost implications. Over multiple follow-up encounters, Meena's parents were more accepting of her diagnosis and even discussed an end-of-life care plan with the physician team. A few days later, barely able to breathe, Meena had to be admitted to the emergency room after she had aspirated a meal. An x-ray revealed a patch of pneumonia that was consequent to aspiration. Meena's life could be prolonged with medications and the overall treatment, but it would compromise her already compromised quality of life. It would pressure parents and family from time, effort, and financial perspectives. Yet, as care providers, the ER team treated Meena by following the protocols and trying to save her life. A couple of days after initiating treatment, Meena breathed her last.

An 89-year-old elderly patient diagnosed with heart disease, diabetes, and chronic kidney disease on multiple medications for the same for over two decades. He had been subjected to various invasive and non-invasive tests that revealed his failing heart status.

His condition meant he had to be bedridden with no movement. The frail man, who had been very active his entire life, had now developed breathing problems and could not take care of his activities of daily living. After exacerbating the breathing problem, he was admitted to the ER. The patient and his family had consented to Do Not Resuscitate (DNR) and did not favor invasive life-saving interventions. The end-of-life protocol/Living Will was discussed and agreed upon by the patient's family and the physician's team (medical board). On admission to the ER, the intensivist team initiated only supportive care. After six hours of life support, the patient breathed his last.

The Covid-19 pandemic saw the stretching of healthcare capacity in the face of shortages² of life-saving equipment (infrastructure such as ventilators, medications, oxygen cylinders, and trained workforce). In such situations of resource shortages, ethical considerations influence the distribution of resources. Therefore, it's essential to ensure that ethically appropriate treatments are delivered. So, in such overwhelming cases, the healthcare workforce faced huge ethical dilemmas around allocating health resources, prioritizing care, etc.

Healthcare workers often face these challenging situations such as those mentioned above. Meena's case and the case of the frail elderly patient are examples of medical conditions around end-of-life care faced by millions of people across the world. By and large, those that fall in this category are elderly with disabilities and multiple comorbidities such as heart disease, stroke, cancer, infections such as HIV, kidney diseases, and so on. The dilemma around resource shortage in Covid-19 times added to the already existing challenging situations. The healthcare team must decide between competing values, which may sometimes conflict with their professional and personal values). Regardless of choice, the team should be aware of the impact/consequences that follow. Emergency rooms and hospital settings are areas of intense pressure on healthcare workers to save patients' lives in the face of poor prognosis and eventual low quality of life.

Mary: I noted the challenging dilemmas in these scenarios. How does this interact with the chronic disease profile? These scenarios bring out the ethical dilemmas so well.

Author: Yes, that was the intent of my talking about these of the many out there. Let's talk about the burden of chronic diseases and disability.

The burden of disease and disability

Chronic diseases with long-term disabilities affect patients' and caregivers' QoL. Due to both mortality and morbidity, these conditions pose a high burden on patients, caregivers, and patients' families. According to World Health Organization (WHO)³, as of 2023, an estimated 1.3 billion people – or 16% of the global population – experience a significant disability today. Furthermore, according to the same report, those with disabilities are at a higher risk of developing other medical conditions, such as poor oral health, depression, and so on, along with frequent hospital admissions, further decreasing their QoL. RAND

Cooperation report in 2014 mentions that Americans with five or more chronic conditions spend 14 times more on health services than those without chronic diseases.

The total burden of disability increased by 52% between 1990 and 2017, according to the Global Burden of Disease Study 2017, a study by the Institute for Health Metrics and Evaluation (IHME). The burden of disability is driven mainly by non-communicable diseases, which caused 80% of disabilities in 2017. People with chronic conditions have higher healthcare spending. As per this report⁴ from the Centers for Medicare and Medicaid Services for the United States, U.S. healthcare spending will increase 2.7 percent in 2021, reaching \$4.3 trillion. Health spending accounted for 18.3 percent of the nation's Gross Domestic Product.

Mary: Oh! That's a substantial pressure of treating chronic diseases on healthcare professionals. I wasn't aware of the magnitude of this liability. I am sure these numbers around the burden of disability must drive ethical dilemmas that healthcare professionals face. Does this group have any handy resources to tackle such situations? How can PMI's Code of Ethics and Professional Conduct benefit this group?

Author: Oh yes. Global, national, and regional bodies have created various frameworks to support decision-making in ethical dilemmas. They are available in the public domain. Let's also review the role of PMI's Code of Ethics and Professional Conduct.

Mary: Do you think the healthcare workforce has these competencies to deal with complex ethical decision-making? How does one decide somehow which value is more important or correct?

Author: As a part of the professional curriculum for graduate and post-graduate studies, healthcare professionals have the necessary knowledge about dealing with legal, ethical, and regulatory issues in healthcare situations. Ethical behavior is binding on the entire team, and there is a shared responsibility for moral decisions. However, they may find some specific situations more challenging to handle. At such times they find support in the team who handles the case and representatives from the hospital or the organizational setup. These resources could be dedicated to ethics-related activities at an organization or project level. I don't think there is a designated name for such resources, but they could be called "Ethics Officers" for the organization. In addition to the technical and medical know-how, the healthcare professional must possess communication and collaboration skills, critical thinking, and problem-solving skills to work with ethical dilemmas.

Ethical decision-making guidelines

The increasing global burden of chronic diseases and unprecedented healthcare events require robust processes to deal with contemporary ethical dilemmas. Ethical dilemmas add to the complexity of treatment while managing chronic conditions and disabilities, even as healthcare industry experts deal with problems to prevent chronic diseases and their liability to patients, caregivers, payers, and providers.

- How does one ethically approach such ethical dilemmas?
- What resources and help do healthcare workers have for dealing with these situations?

In these challenging global, national, and regional situations, guidelines exist around ethics to support the healthcare workforce. A few examples of these guidelines are as follows.

- WHO⁵, as a global body, has extensive information on global health ethics. The Covid-19 pandemic created unprecedented challenges around the equitable distribution of scarce and costly resource allocations, access to vaccines and medications, public health surveillance, etc. WHO Guidelines on Ethical Issues in Public Health Surveillance (2017) elaborates on ethical challenges and their management in the public health domain is available at <https://www.who.int/publications/i/item/who-guidelines-on-ethical-issues-in-public-health-surveillance>.
- In India, the National Medical Council⁶, an apex body instituted by the Government of India for overseeing medical services, including enforcing high ethical challenges, has elaborated on varied aspects of professional conduct, etiquette, and ethics for registered medical practitioners. These guiding principles are binding on healthcare workers. Also, as per this report in the Times of India on Supreme Court guidance on making and executing an Advance Directive or "Living Will."
- As noted by The Atlantic, the Italian College of Anesthesia, Analgesia, Resuscitation, and Intensive Care (SIAARTI) had formulated guidelines for tackling such ethical challenges in Italy. These were helpful for the healthcare workers in caring for the deluge of patients during the Covid-19 crisis.
- The American Medical Association's (AMA)⁷ Code of Medical Ethics offers ethical guidance to physicians and other healthcare workers. More importantly, AMA's guidance on ethics in crisis care⁶ management guides allocating limited healthcare resources.

Though ethical dilemmas can arise unexpectedly, they need a step-by-step approach to make the right decision. A framework is a step-by-step approach that helps with the structure and appropriate organization of thoughts while deciding. In the healthcare world, where treatment decisions are often "perceived" to be shrouded in secrecy, through shared decision-making, the use of frameworks helps ensure transparency and means of guidance to healthcare workers, caregivers, and patients' families.

Thomas Beauchamp and James Childress⁸, American philosophers known for their work on medical ethics, propose autonomy, beneficence, non-maleficence, and justice as

principles of ethical medical decision-making. These guidelines have driven the creation of numerous ethical frameworks by healthcare industry experts to support various states, stages, and care delivery stakeholders.

PMI Code of Ethics and Professional Conduct

The Project Management Institute's Code of Ethics and Professional Conduct is a well-established and reputed reference for Project Management (PM) professionals. The codes guide how a project manager can conduct himself in adversity. The values as per PMI'S Code of Ethics and Professional Conduct are as follows.

- **Responsibility:** Responsibility is our duty to take ownership of the decisions we make or fail to make, the actions we take or fail to take, and the consequences that result.
- **Respect:** Respect is our duty to show high regard for ourselves, others, and the resources entrusted to us, which may include people, money, reputation, the safety of others, and natural or environmental resources.
- **Fairness:** Fairness is our duty to make decisions and act impartially and objectively. Our conduct must be free from competing for self-interest, prejudice, and favoritism.
- **Honesty:** We must understand the truth and act truthfully in our communications and conduct.

PMI Ethical Decision-Making Framework (EDMF) is a companion to PMI's Code of Ethics and Professional Conduct. It describes a step-by-step approach to deciding with confronted with an ethical dilemma. EDMF is widely used worldwide by project professionals to solve ethical dilemmas.



Fig 1: PMI's Ethical Decision Making Framework (available at <https://www.pmi.org/-/media/pmi/documents/public/pdf/ethics/ethical-decision-making-framework.pdf>)

Mary: How can we apply this to patient care, and what are the benefits of using this? Also, can you elaborate if PMI's Code of Ethics and Professional Conduct can be applied as is to such patient care scenarios? Do these guidelines apply only to end-of-life care scenarios?

Author: Oh no! As we noted, ethical dilemmas can arise at any point in the patient care landscape. It depends on the circumstances and context of how to decide dilemmas. And

on our awareness of values and the situations, day by day. We often make decisions without knowing there is a dilemma and hurt others. Envisioning patient care delivery as a project⁹, EDMF can be viewed as *one of the* many reference frameworks for dealing with ethical dilemmas faced by the healthcare workforce. I think a few essential benefits of using EDMF as a technique during ethical dilemmas are as follows.

1. An evidence-based, widely used technique by global project management professionals.
2. Removing the opportunity for personal and contextual bias that can influence decisions, EDMF provides a simplified step-by-step approach to arrive at a candidate decision.
3. Reinforce the application of ethical principles in complex decision-making.
4. Opportunity to consider all possibilities and data points for decision-making.
5. Initiating a dialogue between stakeholders to arrive at the appropriate decision reduces stress on healthcare professionals.

And above all, EDMF provides an opportunity to be creative and out of the box thinking to arrive at an appropriate decision at the point of need.

Mary: That's good to know. Is there any other ethical/moral values research that can be applied in healthcare scenarios?

Author: I don't think there are values specifically for healthcare scenarios. Rushworth-Kidder¹⁰ found eight human values across the globe. These eight values include those of PMI. The other four values are community, autonomy, compassion, and humility. If two values contradict each other, there is an ethical dilemma.

Mary: From your experience, can you propose an algorithm for ethical decision-making?

Author: There are many algorithms for this concept. Organizations and healthcare professionals choose frameworks that are beneficial to them. On the lines of PMI's EDMF, here is an example of an algorithm for ethical decision-making in healthcare dilemmas. Please find the illustration of the same in Fig 2 below.

- Determine the dilemma
 - Identify the uniqueness of every patient and the need for a tailor-made approach for the same.
- Identify stakeholders
 - Those who influence the decision-making, including members of the hospital medical board looking into such cases
 - The key to financial planning in case of long-term care of patients
- Analyze the medical scenario
 - Updated and most current medical condition details of the patient to make an appropriate decision.
- Identify the Decision-making process

- Understand patient preference/Living Will in case of end-of-life care
- Examine the quality of life/disability issues
- Environmental factors influencing decision-making, including legal issues, if any
- Alternative identification
- Make a decision applying ethical principles
- Plan Post-decision processes
 - Communicate the decision and rationale behind it
 - Document process details

The above algorithm can be a starting point for further research around creating a robust EDMF for healthcare for practical and universal usage.

Mary: I can now see how the Code of Ethics and Professional Conduct can be used as one of the reference standards by healthcare professionals when faced with ethical dilemmas. Thank you for helping me comprehend this. Are there any training programs to help healthcare professionals effectively use PMI's Code of Ethics and Professional Conduct?

Author: Thanks, Mary. I am happy I could be of some help to your understanding. PMI provides support to those who wish to know more about the Code. The documents related to the Code, EDMF, and other tools are freely available on PMI's website¹¹ (<https://www.pmi.org/about/ethics>). I would suggest you look them up. In addition, PMI has a global body called the Ethics Insight Team (EIT) dedicated to advocating ethics. You can send your queries to ethicsinsight@pmi.org. I am sure they would be happy to help with your question.

Thank you for your time today to discuss this topic. I am sure it will help me make the correct interpretations as I try to comprehend the healthcare industry and its challenges. By the way, you seem to be having discomfort while walking. Is everything ok?

Author: Ah! I have some discomfort in my left ankle that had been fractured a few months ago. Thanks for checking.

I look forward to our next session.

Conclusion

Ethical dilemmas arise when a choice must be made between two courses of action that are both correct but represent different principles. For example, a dilemma occurs when one has to execute both right and wrong actions simultaneously, and both can impact the other activity negatively. In such times, in the face of many existing codes, project professionals need a step-by-step framework to decide to solve the dilemma.

The healthcare domain faces many ethical dilemmas, often complex and conflicting, where the right decision may feel like something other than the most ethical approach. Dealing with ethical dilemmas places a significant burden on healthcare professionals. While there are a variety of codes of ethical conduct outlined by international and national reputed bodies to guide healthcare professionals through these situations, a simple, easy-to-use, and widely accepted step-by-step framework to aid is lacking. The author would like to propose PMI's Ethical Decision Making Framework as one of the reference frameworks to assist in such situations. However, in the author's opinion, more research is needed to create a healthcare version of the EDMF.

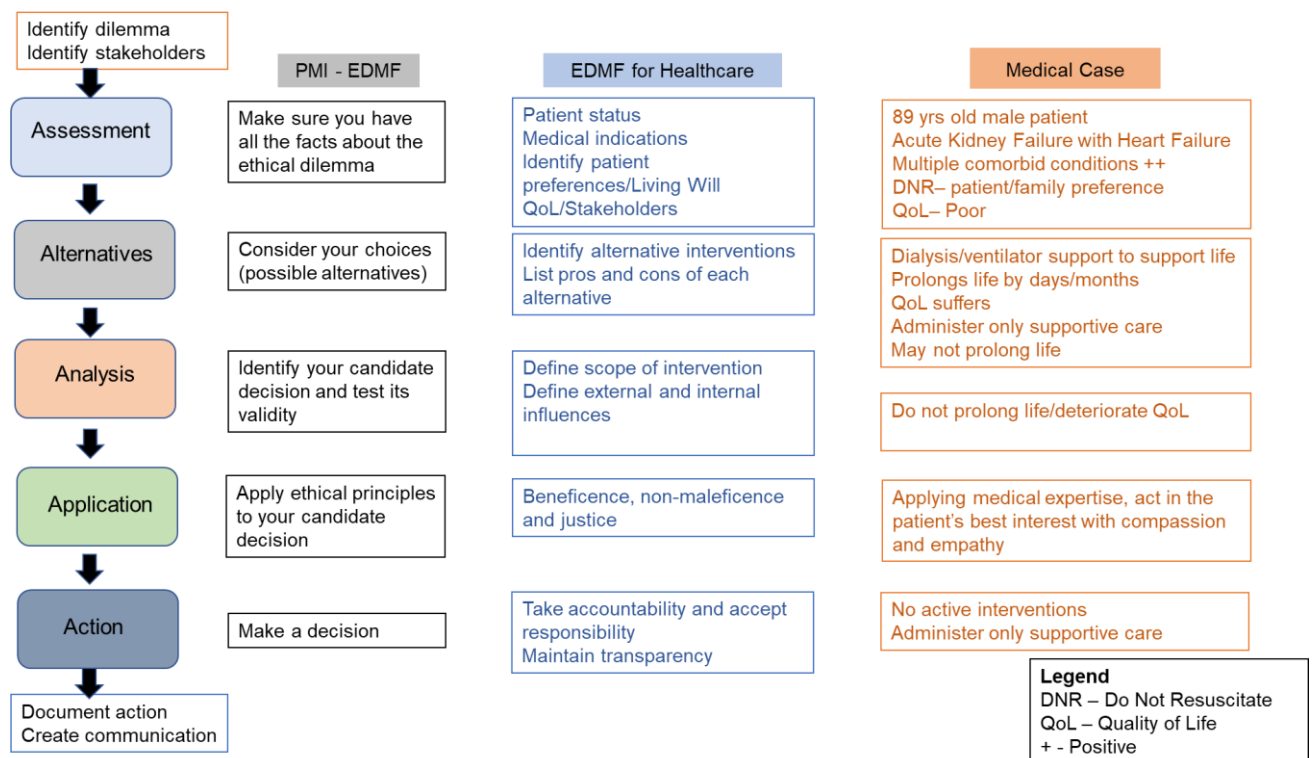


Fig 2: Illustrative mapping of PMI's EDMF to a healthcare scenario example in the text of the article

Stakeholders in healthcare

According to PMBOK® Guide - Seventh Edition, a stakeholder is “an individual, group, or organization that may affect, be affected by, or perceive itself to be affected by a decision, activity, or outcome of a project, program, or portfolio” Stakeholders in the healthcare system are a diverse group encompassing healthcare professionals (physicians, nurses, physician assistants, and so on), pharmacists/pharmaceutical firms, hospital administrators, insurance companies, consumers or patients, patients' caregivers and families, paramedical and ancillary staff such as laboratory professionals, ambulance drivers, medical suppliers. The group can also include governments, employers, and communities at large.

Glossary

DNR: Do Not Resuscitate

EDMF: Ethical Decision Making Framework

ER: Emergency Room

Healthcare workforce – Stakeholders

PM: Project Management

PMBOK®: Project Management Body of Knowledge

QoL: Quality of Life

WHO: World Health Organization

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About the Author



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Dr. Deepa Bhide, MBBS, DCH, PMP, has over 20 years of professional experience where she has blended medical practice and research with IT and Project Management. She juggles consulting, training, and operations and is proficient in clinical medicine, project management, and healthcare information technology. Starting her career as a medical practitioner, she has worked with varied organizations before her current stint as director and clinical expert for Inventurus Knowledge Solutions.

Deepa's growing interest and work in these areas, born from her day-to-day patient interactions, helped her view Project Management as a backbone of progressive healthcare. Her paper on "Patient Care - A Project Management Perspective" has received global recognition and acclaim. With a physician background as a solid foundation to leverage IT/PM skills and knowledge, Deepa has blended her broad-based experience and learnings to present a unified, holistic, and wholesome view of Project Management and Healthcare, a cross-domain confluence. Through various webinars, events, talks, and writings across platforms, Deepa has been an evangelist in championing global project management during the Covid-19 pandemic.

A Gold medalist from Osmania University for standing First in the MBBS course, she pursued her DCH in Pediatrics and Child health. Deepa has served a variety of roles in local and global Project Management Institute (PMI) regions. She remains actively

engaged with PMI and has been a participant and speaker for various national and global meetings and online events.

Deepa lives in Hyderabad, India, and loves traveling, singing, and experimenting with global cuisine. She can be contacted at deepa.bhide@gmail.com.