

Engaging Ethics at UHN

Medical Grand Rounds with Paul Ford

"Responding to the Haunting and Ethically Complex: Medical and Behavioral Symptoms Comingling"
Toronto General Hospital Eaton Wing, Ground Floor, Rm 025/026 October 2nd, 2024, 12:00-1:00
Broadcast to: TWH 8 East Wing, Rm 481 & MSH Auditorium
Zoom: https://bit.ly/445CDe8 Meeting ID: 916 5821 3585 Passcode: 114523

Medical and surgical patients can have complex histories and behavioral backgrounds that create challenges for optimal care in the hospital. It is important to accommodate the spectrum of baseline attributes of a patient that are unrelated to current hospitalization such as chronic serious mental health disorders, personality challenges, or neurodiversity. These accommodations may require a sacrifice of one important value in order to preserve another; such as freedom of movement versus safety, or risk for falls versus avoidance of blood clot formation. This case-based grand rounds will highlight ways of navigating these choices in transparent and team-based approaches. Dr. Ford will draw on 25 years of experience in guiding health care providers, patients, and families toward fair and effective care plans.

Paul Ford, Director, NeuroEthics Program, Cleveland Clinic; Associate Professor, School of Medicine, Case Western Reserve University is a clinical and research ethicist who specializes in challenges surrounding the treatment of neurological diseases. He received undergraduate degrees in Math, Computer Science, and Humanities at Walla Walla University in Washington State, USA and received a PhD in Philosophy from Vanderbilt University where he also completed a two-year clinical ethics fellowship in solid organ transplantation ethics. Over the past 25 years, he has participated in more than 2000 ethics consultations that involve both inpatients and outpatients. Amongst the more than 100 publications he has co-authored, his edited volume of *Complex Ethics Consultations: Cases that Haunt Us* is the most relevant for this talk. He currently directs the NeuroEthics Program and is a member of the Center for Bioethics at Cleveland Clinic.

Welcome Jess du Toit!

Our department is delighted to announce that Jess du Toit, PhD (Philosophy, Western), will join the team on a permanent part-time basis beginning September 7, 2024. Jess will continue to work with Bioethicist Ruby Shanker to support our **Rehabilitation Science and Medicine** clinicians, researchers, patients, and family members and, for the next year or so, she will devote two days per week to meeting the ethics-related needs of our colleagues and patients at the **Princess Margaret Cancer Centre**. Jess's research interests are very broad and include vulnerability in research, ethical issues that arise in the context of caring for older adult populations and those with eating disorders, as well as the fair allocation of scarce resources. Jess is best reached via email at Jessica. Dutoit@uhn.ca.



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- Transplant Ethics Rounds: Trust in Transplantation
- Upcoming Annual Philippa Harris Lecture



Sr. Director's Corner: A Healthier World

UHN is committed to making A Healthier World a reality and our Ethics team is keen to collaborate with internal and external partners and colleagues to help advance that mission. For this month's newsletter I'd like to highlight a couple of the national and international collaborations involving our bioethicists that are driven by a desire to improve the quality of the work done by members of the field.

One topic close to our hearts is the professionalization of our field. Part of that work is being advanced by a Canadian organization called CAPHE-ACESS and members of our team consistently have been Board members since the association was founded. Jennifer Bell currently is representing us as director-at-large. For more information on their current priorities, including the development of a Canadian-made code of ethics for practising healthcare ethicists, you can review their website at https://www.caphe-acess.ca/

A related initiative has been launched in

the US by the Council On Program Accreditation for Clinical Ethicist Training (COPACET). It describes its goals as three-fold:

- developing and promoting professional training standards for clinical ethicists.
- encouraging excellence in training program development; and
- reviewing and evaluating clinical ethicist training programs (what we call Ethics Fellowship Programs).

I have been elected to the inaugural Board of COPACET and will be joining colleagues in Houston in January 2025 to begin work that we believe can contribute to efforts to improve trust in science, medicine, and public health by ensuring that ethics training programs can prepare Fellows to help address complex current and emerging ethical issues. Exciting days ahead!

"Justice cannot be for one side alone, but must be for both." — Eleanor Roosevelt

AI and Ethics Panel

On June 26th, The Institute for Education Research (TIER) at UHN and Elsevier hosted a follow-up event to last year's highly successful Dr. Daniel C. Andreae President's Lecture "The Future of Work: The Pulse of Ethical Machine Learning," featuring Dr. Marzyeh Ghassemi. This event entitled "Ethical Implications for AI in Care and Education: What We Know and What We Want to Know." included Jennifer Bell (Senior Bioethicist and Director of Bioethics Research, UHN) among the distinguished panelists. Dr. Bell shared her insights and expertise at the intersection of ethics and AI in the context of research, practice and education along with other panel members, Dr. Atoosa Kasirzadeh (Research Lead, Alan Turing Institute & Assistant Professor, University of Edinburgh), and Dr. Rhett Alden (Chief Technology Officer for Health Markets, Elsevier). A link to the recording can be found on TIER's website. by JB

Taking Pandemics off the Menu



On 20 June 2024, ethics fellow Jess du Toit (soon to be our newest team member) gave a presentation titled "Taking Pandemics off the Menu" as part of Unity Health's Ethics Grand Rounds series. In her presentation, she suggested that there is a connection between the food we eat and serve to the patients we care for, and the tools at our disposal for preventing future pandemics.

What is this connection? Very briefly, most humans regularly consume animals and animal products, and

when we do, we are usually supporting factory farms. The conditions in which animals on factory farms live have long been described as ideal for the emergence of future infectious disease pandemics. Moreover, this characterization of the conditions is borne out by what we know about the origin of past infectious disease pandemics, including Asian flu, Hong Kong flu, and Swine Flu.

Eliminating factory farms would thus likely constitute a powerful pandemic prevention measure. This is not to say that bringing an end to intensive farming practices would be easy. On the contrary, it would be a significant undertaking. But, in Jess's view, it would afford us a real chance of avoiding the horrors associated with infectious disease pandemics. It would also spare millions of animals a life of unmitigated suffering. by JdT

Transplantation & Trust



On June 12, capping the spring semester, our Department co-hosted transplant rounds featuring Alberto Molina Pérez, PhD, of the University of Granada, (pictured at left) with UHN's Ajmera Transplant Centre. Dr. Molina spoke about his team's research into public understandings of how organ donation systems are structured in different countries. His home country of Spain, one of several that employ an opt-out approach, is well known in the transplant community for its high per-capita deceased donation rate. Dr. Molina suggested that this is more properly attributed to other features of the Spanish system, such as staff training, reimbursement policies, and positive media coverage.

When members of the public were surveyed in seven European Union (EU) societies, a majority of respondents in three of the seven misidentified whether their country's system was based on the principle of opting into deceased donation or opting *out* if one does not wish to donate. Additionally, in three of the societies, expressed public preferences did not align with existing laws in this regard. In Southern Spain, where Granada is located and most of the country's population lives, only 28

percent of respondents said they were aware of the opt-out system in place. A plurality (about 41%) neither agreed nor disagreed with this approach. Examining a wider set of countries, Dr. Molina highlighted subtle differences in the roles of surviving family members, both in law and in practice. Reportedly, about 18 percent of potential organ recoveries in Spain in 2023 did not happen because of "family refusal," which is not an official means of opting out in that country. (In Canada, family members are expected to act as *surrogates* for their loved one at the end of life; in practice, this approach depends on their having some knowledge of the individual's values or wishes with respect to donation and honouring them.)

A challenging part of the presentation, in the North American political context where *transparency* is often regarded as a basis of *trust*, was the degree to which these concepts could be disaggregated. According to Dr. Molina, nearly 93 percent of respondents in Spain said they thought "the organ donation and transplantation system is trustworthy"—higher than their level of trust in the country's public healthcare system as a whole—even though only about 59 percent agreed that the donation system was "was transparent" and few seemed to be familiar with its opt-out aspect. The talk highlighted other possible explanations for this trust, including an emphasis on the respectful treatment of family members and the avoidance of public "scandals." During the question and answer period, when audience members were interested in possible lessons applicable in Canadian society, he also acknowledged research indicative of different levels of trust among different demographic groups in Spain.

The prerequisites for maintaining broad trust in the transplant system and support for donation may be somewhat different in Canada (and specifically Southern Ontario), given cultural and structural differences between the two settings. Nonetheless, Dr. Molina's talk served as a reminder that public trust in organ retrieval, allocation, and transplantation is not simply a function of the formal legal rules governing these activities, or even openness about the technical details of procedures. For many donors and donor families, personal interactions and experiences with the healthcare system are also likely to make a difference. *by JG*

Meet Our Team: Ruby Shanker

Ruby Shanker is a Clinical and Organizational Ethicist for Toronto Rehab and Women's College Hospital. As Adjunct faculty, she co-directs the Foundations in Teaching Bioethics course within the University of Toronto (U of T) Joint Centre for Bioethics' Master of Health Sciences in Bioethics program. She comes with clinical experience in general and community medicine practice, including surgical training, in India and the Middle East. Within healthcare ethics, and in her eight years at UHN, her areas of practice and experience span widely from acute and critical care to post-acute and rehabilitation care ethics, especially in response to ethical issues arising in care at the beginning and end of life. Ruby employs anticolonial and anti-oppression approaches for critical reflexive practice within healthcare ethics. She is passionate about uncovering ways of being, doing, and thinking within clinical and organizational contexts that perpetuate



coloniality. Her clinical and scholarly orientations are towards disrupting, transforming, and re-imagining futures for inclusive and affirming healthcare models.

Ruby also currently is pursuing doctoral studies in the Health Professions Education Research Program offered by the U of T's Institute of Health Policy, Management & Evaluation in collaboration with The Wilson Centre (Toronto General Hospital). Her doctoral research utilizes critical and interpretive social sciences methodologies to focus on exploring relations of power and hidden curricula effects on professional identity formation within learning healthcare environments that negotiate power and resistance for patient care and safety.

Betwixt her professional practice and study, Ruby enjoys family time with her two littles. She is a fountain pen aficionado, crime and mystery thriller buff, sci-fi geek, and ardent buffet connoisseur. by RS

Philippa Harris Lecture

on Ethical Issues is Cancer Care November 20th at 12:00 (via Zoom) Kenneth W. Goodman, PhD University of Miami

Cancer, Ethics, and Artificial Intelligence: (Almost) Everything is Under Control

https://www.eventbrite.ca/e/cancer-ethicsand-ai-almost-everything-is-under-controlregistration-993813040557?

Clinical & Organizational Ethics

Bioethicists help patients, families, and health-care professionals deal with difficult ethical issues in patient care. Bioethicists have special training in ethics, moral philosophy, and conflict resolution, providing confidential consultation and mediation. Bioethicists can assist with clinical, organizational, and research ethics conflicts, and provide ethics education. Our goal is to assist individuals and groups in solving complex ethical problems so they can make the right decision at the right time for the right reasons.

Annual Philippa Harris Lecture



Kenneth W. Goodman, PhD, FACMI, FACE, is founder and director of the University of Miami Miller School of Medicine's Institute for Bioethics and Health Policy and director of the university's Ethics Programs. The Institute has been designated a World Health Organization Collaborating Center in Ethics and Global Health Policy, one of 14 in the world and the only one in the United

Dr. Goodman is a Professor of Medicine at the University of Miami with appointments in the Department of Philosophy, School of Nursing and Health Studies, and Department of Public Health Sciences.

He is immediate past chair of the Ethics Committee of AMIA (American Medical Informatics Association), for which organization he co-founded the Ethical, Legal, and Social Issues Working Group. He has been elected

as a Fellow of the American College of Medical Informatics (FACMI). He is also a Fellow of the American College of Epidemiology (FACE), and past chair of its Ethics Committee, and of the Hastings Center. He directs the Florida Bioethics Network and chairs the UHealth/University of Miami Hospital Ethics Committee and the Adult Ethics Committee for Jackson Memorial Health

Dr. Goodman has expertise in ethics and health information technology, including artificial intelligence and machine learning. He is the author of Ethics, Medicine, and Information Technology: Intelligent Machines and the Transformation of Health Care (Cambridge UP, 2016). Dr. Goodman is the Founder and Director of the Institute for Bioethics and Health Policy at the Miller School of Medicine at the University of Miami, and Director of Data Ethics and Society, at the Institute for Data Science and Computing at the University of Miami. He has given many presentations on various aspects of ethics and new information technology, and has situated these discussions in relation to patient care. We eagerly anticipate his Philippa Harris lecture and hope that you will join us! All are welcome!

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