

Chapter 66

Medical Treatment and Difficult Ethical Decisions in Interdisciplinary Hospital Teams

Anna Rosiek

*Nicolaus Copernicus University in Toruń,
Collegium Medicum in Bydgoszcz, Poland*

Krzysztof Leksowski

*Nicolaus Copernicus University in Toruń,
Collegium Medicum in Bydgoszcz, Poland &
Military Clinical Hospital No. 10, Poland*

Aleksander Goch

*Nicolaus Copernicus University in Toruń,
Collegium Medicum in Bydgoszcz, Poland &
Military Clinical Hospital No. 10, Poland*

Aleksandra Rosiek-Kryszewska

*Nicolaus Copernicus University in Toruń,
Collegium Medicum in Bydgoszcz, Poland*

Łukasz Leksowski

Nicolaus Copernicus University in Toruń, Collegium Medicum in Bydgoszcz, Poland

ABSTRACT

The chapter focuses on organizational culture and ethics, and authors refer to some studies on organizational climate. Authors analyze the relationship between organizational culture and types of performance indicators, which include key concerns of policy makers and the public regarding of hospital behavior. The indicators include resource use per patient (communication process and treatment method, technology, ethical behavior), productivity in resource use (by improving the teamwork and staff education), short-term profitability, patient satisfaction with medical care, and employee satisfaction with improved work culture.

INTRODUCTION

Medical leadership improved hospitals' performance and treatment method by using medical knowledge and personal skills. Sometimes the medical treatment process requires making difficult ethical decisions.

Building knowledge and skills in bioethics creates a mutual understanding between professionals and health care practitioners in the classroom and in the workplace. Both sets of professionals have ethics in their education. Ethics courses in the health professions typically involve several key areas. These areas are:

DOI: 10.4018/978-1-5225-2237-9.ch066

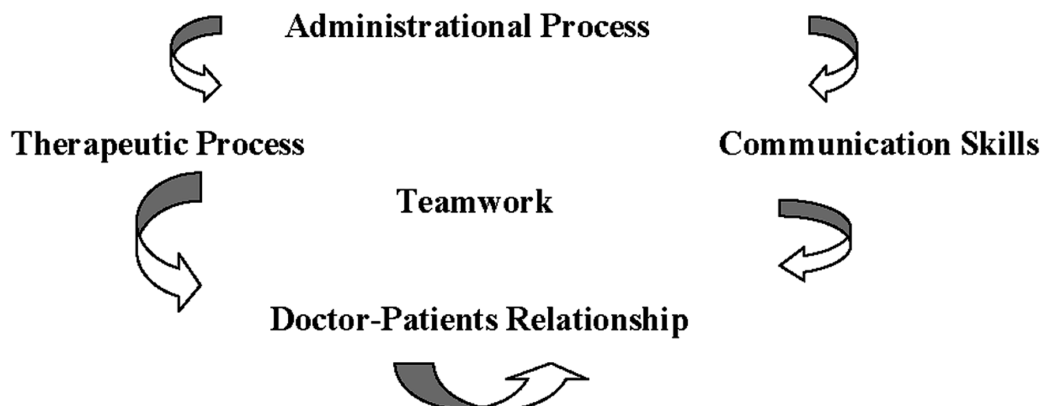
- End-of-life decisions;
- Allocation of scarce resources, such as organs;
- Reproduction, abortion, and genetics;
- Euthanasia and sterilization;
- Patient informed consent and patient's autonomy.

During the ethics cancer various ethical philosophies are explained, such as teleology, beneficence, utilitarianism, deontology, principles of justice, virtue, and caring. A working knowledge of these topics 'levels the playing field' for medical students and graduates (physician, nurses, physiotherapies) when they begin to work in healthcare teams in hospitals.

Mutual understanding of ethical decisions in medical treatment is especially important when physicians are members of interdisciplinary teams. When discussing ethics, health practitioners use a verbal shorthand - a code. Without the decoder, team members may feel somewhat intimidated by clinical healthcare professionals and, consequently, be less likely to contribute. The verbal code in ethical issues prepares medical staff for ethical discussions in healthcare organizations. The verbal code also involves major documents that set standards for ethics, ethical decisions of each team member and notorious cases of breaches of ethics. To solve the difficult ethical decisions in hospital environment by using advanced methods is necessary from patients' and doctors' points of view.

Both of those groups agree that hospital, as an organization dealing with health care, in the service of improving the quality and comfort of patient's life, takes responsibility for the medical services being offered on the hospital grounds. By the same token, the organization is responsible for all the processes taking place there. Ethical realization of a medical service is the outcome of many processes within the organization efficiency, and they are often very complicated and related to one another. The organization of processes connected to medical service on the hospital grounds is focused on: therapeutic processes, administrative processes, communication processes and logistical processes. Internal connections and influence of those processes on offered medical service can be presented on a simple scheme (see Figure 1).

Figure 1. Connections of processes influencing the offered medical service and teamwork
Source: Author's own study



31 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:
www.igi-global.com/chapter/medical-treatment-and-difficult-ethical-decisions-in-interdisciplinary-hospital-teams/180646

Related Content

Medicine Residency Training

(2016). *Optimizing Medicine Residency Training Programs* (pp. 1-27).

www.irma-international.org/chapter/medicine-residency-training/137503

Online Applied Learning in Nursing Education

Beth Oyarzun and Elizabeth A. Gazza (2017). *Advancing Medical Education Through Strategic Instructional Design* (pp. 150-163).

www.irma-international.org/chapter/online-applied-learning-in-nursing-education/174228

Strategic Approach towards Clinical Information Security

Sangseo Park and Jane Moon (2017). *Healthcare Ethics and Training: Concepts, Methodologies, Tools, and Applications* (pp. 1141-1171).

www.irma-international.org/chapter/strategic-approach-towards-clinical-information-security/180633

The Patient Centered Organizational Model in Italian Hospitals: Practical Challenges for Patient Engagement

Mara Gorli, Elisa G. Liberati, Laura Galuppo and Giuseppe Scaratti (2017). *Healthcare Ethics and Training: Concepts, Methodologies, Tools, and Applications* (pp. 290-308).

www.irma-international.org/chapter/the-patient-centered-organizational-model-in-italian-hospitals/180588

Professional Practices for Digital Healthcare

Sisira Edirippulige and Buddhika Senanayake (2020). *Opportunities and Challenges in Digital Healthcare Innovation* (pp. 97-112).

www.irma-international.org/chapter/professional-practices-for-digital-healthcare/254968