## **OUR APPROACH**

As part of a partnership with the inter-university ethics committee of the chair of general medicine (UCL), the Haute École Robert Schuman in Libramont brought together an interdisciplinary group of care providers interested in ethical reflection. This group met four times, with the primary objective of creating a tool for tackling complex ethical situations.

This takes the form of a grid to assist with reflection, intended primarily (though not only) for domestic care providers.

Before being circulated in its current version, the grid was tested in Belgium by two groups of twelve people (continuing education groups coordinated by the Société Scientifique de Médecine Générale) and in Quebec as part of an ethical supervision training course within the department of family medicine at the University of Montreal.

#### **PROJECT LEADER:**

Marc Fourny, Director and President of the HERS.

### **GROUP LEADERS:**

Madeleine Moulin (sociology professor at the ULB) and Cécile Bolly (doctor and teacher (HERS/UCL)).

### **AMENDMENTS TO THE GRID:**

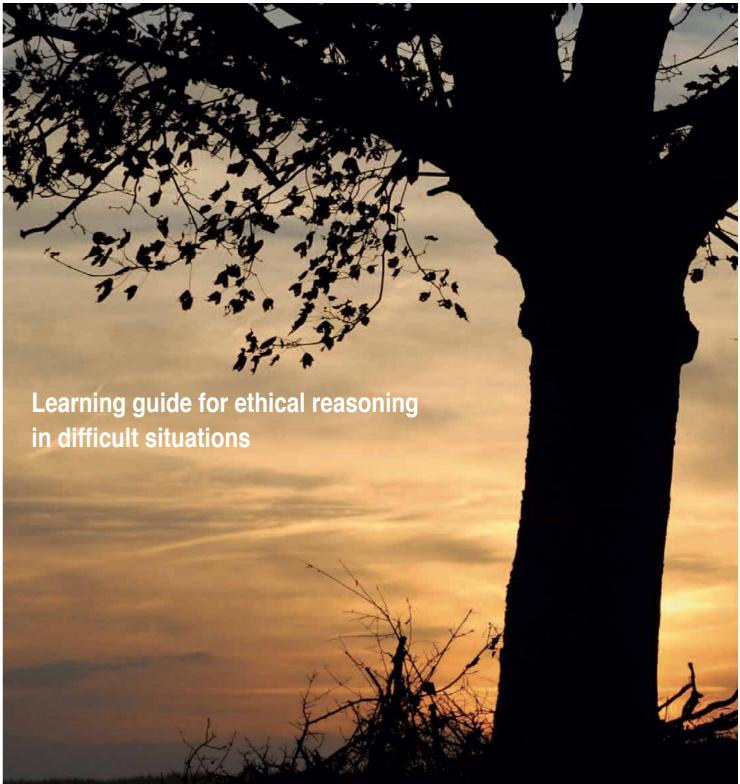
Pierre Firket (general practitioner, professor at the ULg) Michel Vanhalewyn (general practitioner, SSMG) and Sylvia **Delperdange** (graphic designer).

The following care providers were involved in the development of the project:

Benoît Caspar (home care nurse), Laurence Dantoing (home care nurse), Alexia De Lie (social assistant), Olivier Deome (physiotherapist), Paule Desbuleux (palliative care nurse), Laurence Dubuisson (public health nurse), Jean-Pierre Haquin (director of the MRS), Jean-Marc Herbiet (social assistant), Stephanie Jacques (social assistant), Vanessa Kinet (home care nurse), Nelly Laloy (palliative care nurse), Marie Clotilde Lebas (teaching nurse), Nathalie Lecuivre (public health nurse), Brigitte Lepers (teaching nurse), Isabelle Pêcheux (MR and CAJ discussion leader), Christian Pire (general practitioner), Gaby Pirson (general practitioner), Lucie Sainte Croix (psychologist at Sherbrooke), Christophe Sepulchre (general practitioner), Maryse Schul (home care nurse), Myriam Thiry (general practitioner), Jean-François Thomas (MR and CAJ director), Brigitte Van Bunnen (head nurse in palliative care unit).

We would really appreciate any suggestions about the use of this grid.

### Contact: cecile.bolly@hers.be



# LEARNING ETHICAL REASONING

INTERDISCIPLINARY WORKING GROUP 'Ethical dimensions in treating the elderly at home' Haute École Robert Schuman, Libramont • www.hers.be





Université Ug de Liège







# SOCIETY

- 1. What reference points (contributions) can I find in various disciplines (medicine, law, philosophy, sociology, psychology, etc.)?
- 2. How are they influencing me in this precise situation?
- 3. Which societal constraints (laws, standards, regulations, recommendations, costs, etc.) must I abide by?
- 4. How do they influence me in this precise situation?
- 5. Does examining these reference points and constraints reveal opposing or even conflicting values? Where?

# **INTERDISCIPLINARY COLLABORATION**

- 1. What is my professional plan concerning this individual?
- 2. What do I know about the plans of other parties, including the individual and their close relatives?
- 3. What is helping us achieve this/these plan(s)?
- What is preventing us from achieving this/these plan(s)? 4.
- What can we do to create links and cohesion between these various 5. plans?

# THE INDIVIDUAL IN IN THE SITUATION DESCRIBED

1. What do I know about their current difficulties?

V	Vhat they want	What they do not want	Other preferences	
	2. What are their descriptions of what is happening to them? What meaning do they ascribe to what is happening?			
1	3. What factors from their past are influencing the current situation?			MYS
	4. What relationships do they have with others?			

5. Can I describe their values in a few words?

## **CLOSE RELATIVES**

- 1. Who are their close relatives?
- 2. What sort of relationship do they have with the patient?
- 3. What do they expect, hope for and desire?
- 4. In what ways are they influencing the patient and care providers?
- 5. What are their descriptions of the issue?
- 6. What do I know about their values and limits?
- 7. Are there factors from their past that are influencing the current situation?

- 1. What do I do in terms of: - Actions put forward? - Attitudes developed?
- 2. What do I feel in terms of: - Emotions and feelings? - Wants and desires?
- 3. What do I expect? From who?
- 4. What are my descriptions of the issue?
- 5. Which of my values are in play in this situation?
- 6. What are my limits?
- influencing me here?

- Who are things going wrong for, who is suffering?
- Who wants what?
- For who?
- Who is bothering me, making me feel uneasy?

## SELF, THE CARE PROVIDER

7. What factors from my background and experience are

Validated example - version 3 - May 2013