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Background and aim

Psychiatrists and other Mental Health Professionals (MHP) are facing ethical problems in their daily practice. MHP usually can rely on their moral competence when dealing with ethical questions. However, in challenging situations doubts may arise concerning the ethical legitimacy of one's decisions. In Clinical Ethics Consultation (CEC), an ethics consultant aims at helping MHP to make ethically sound decisions. In psychiatry, CEC is less common than in somatic medicine. What is the additional benefit of using CEC when dealing with ethical problems in psychiatry?

Methods

A conceptual framework of CEC in Psychiatry is presented highlighting its reflective components. Two CEC cases from our service will be evaluated: A) a child psychiatric case where parental conflict split the team on prioritizing values in the care of the child; B) a geronto-psychiatric case with team dissent on the appropriate outpatient follow-up care for an alcohol-addicted patient.

Results

In both cases, consensus was reached; moreover, underlying ethical components were articulated, e.g. A) the importance of a continuous informed consent process with the parents, B) the conflict of respecting the patient's autonomy versus the duty to prevent harm.

Discussion

While the MHP experienced their difficulties, they benefited from ethics support formulating their own arguments precisely. Intuitive or emotional aspects of disagreement were transformed and entered into a target-oriented discourse on values and norms. CEC provides the discoursive framework and – in the person of the ethics consultant – the methodological competence to strengthen ethical reflectivity to the clinical setting.