



An Ethics Newsletter for Catholic Healthcare Organizations in Saskatchewan

Community of Ethics at the Heart of Health Care

Dear SaskEthics Readers,



had an absolutely amazing Spring traveling across Saskatchewan to visit our Catholic health care teams. Everywhere I went, I was greeted with

warm hospitality. Whether it was a cobbled together lunch after I found out the hard way that St. Anthony's in Esterhazy has no cafeteria, or a box that I accidently left at the Radville Marion Health Centre that found its way back to me when I reached St. Joseph's in Estevan a month later, all of our teams showed me that our commitment to caring is still at the core of who we are.

This year many of you asked me to speak about moral distress, the feelings of helplessness that arise when we are prevented from doing what we believe is the right thing. When I dug into my files to prepare, I realized that I have been giving a near identical version of this talk for the past 6 years! I reflected on this during my long drive across the prairies, and I felt a surge of pride because despite everything that they have been through, our teams are still engaged enough to be bothered by moral distress.

As I listened to various stories of what is causing moral distress, I heard that the worst moments for most people are the moments when they feel isolated. The most distressing stories often started with, "it was 3 am and I was the only one on." Or they continued with, "so I reached out for help, and they told me there was nothing they could do and hung up the phone."

I have been hanging onto these stories for three months, and yesterday they finally found a place to land. I was connecting with the team at the Hospice at Glengarda, when we stumbled upon a section of the Canadian Nurses Association's Code of Ethics: "Nurses foster a moral community in which ethical values and challenges can be openly discussed and supported."

I realized that my vision statement for Ethics Services is a slight rewriting of the Nurses' Code of ethics: Every person has a responsibility to foster a moral community in which ethical values and challenges can be openly discussed and supported. How would our hospitals and long term care homes look if we lived this out? How would our world look?



Consider for a moment a nurse who is alone at 3 am with a patient who is responding to her attempts to provide care in physically aggressive ways. She feels ill-equipped to manage his needs alone, and is considering transferring him to a larger centre. What could have happened before 3 am to help her feel more supported in this moment? What could happen right now to help her articulate her needs when she reaches out for help? What could happen at 7 am when the rest of the world wakes up? I will be spending my summer thinking of ways that we can form a community of ethics to support each other through these challenges. The good news is, if my experiences traveling this Spring are any indication, we are not starting from scratch. Let me know if you have any ideas about how we can better support one another.

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ETHICS EXCHANGE Monthly Discussions of complex issues for SHA staff and clinicians

Join the conversation!

The SHA's Ethics Exchange will start again in September.

Is there a topic you would like to bring to the Ethics Exchange? Contact: <u>Gary.Goldsand@saskhealthauthority.ca</u>

Would you like to be added to the mailing list for Ethics Exchange news? Contact: <u>Deborah.Beach@saskhealthauthority.ca</u>

Would you like to partner with an ethicist to talk about an issue? Contact: <u>Mary.Heilman@saskhealthauthority.ca</u>

View past Ethics Exchanges: Ethics Exchange/Education | SaskHealthAuthority