

# MODULE 6

# WORK CULTURE AND LEADERSHIP ETHICS

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**IFCC EMD - Committee on Clinical Laboratory Management (C-CLM)**

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- ▶ Medical Error, Utilization Management and Ethical Responsibility

# LEARNING OBJECTIVES

**By completing this module, participants will be able to:**

- ▶ Describe what it means to be an Ethical Leadership
- ▶ Describe the relationship between laboratory culture and quality of service
- ▶ Understand the importance of ethical conduct to gaining respect and trust
- ▶ Describe how ethical leadership can impact laboratory culture and quality

# Introduction

Work Culture and Ethics in Laboratory Leadership

# Work Culture and Leadership Ethics



# Ethics and Laboratory Medicine

*“**Moral principles** that govern a person's or group's behavior.”*

— *Oxford Dictionary*

*“a system of **moral principles** that apply values and judgments to the practice of medicine.”*

— *International Federation of Medical Students' Associations*

# Ethics and Laboratory Medicine

*“...good technical practice accompanied by **proper attitudes and behavior**. In deciding what is proper, reference is often made to **moral** values voluntarily adhered to within the community and to standards espoused in various codes of professional practice.”*

— *“Ethical practice in laboratory medicine and forensic pathology”*  
WHO 1999

# Ethics and Laboratory Medicine

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Foundations      Values and principles of the community and organization

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Professional Codes of Conduct

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Responses      Decisions of Laboratory Professionals

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Actions of Laboratory Professionals


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# Defining Ethical Leadership

Work Culture and Ethics in Laboratory Leadership

# Defining Ethical Leadership



**Visible**

The diagram for 'Visible' leadership features a large yellow rectangle at the bottom. Above its top-left corner is a smaller, light orange rectangle. The word 'Visible' is written vertically in white text on the left side of the yellow rectangle.

- Statements
- Actions



**Invisible**

The diagram for 'Invisible' leadership features a large blue rectangle at the bottom. Above its top-left corner is a smaller, light blue rectangle. The word 'Invisible' is written vertically in white text on the left side of the blue rectangle.

- Character
- Mindset
- Values & Principles
- Decision making

# Defining Ethical Leadership



*“Ethical dilemmas can sometimes be between two rights.”*

# Defining Ethical Leadership



## Prudence

Compromise  
between  
extremes

Insight to serve  
benefit and  
minimize harm

Doing the right  
thing

Balance all facts  
in decisions  
affecting others



## Fortitude

Courageously  
standing firm  
when  
challenged

Doing the right  
thing in face of  
adversity.



## Temperance

Self-Control  
  
Moderation  
relative to  
personal needs

Diminished  
concern for  
power and  
personal gain.



## Justice

Willingness to  
give others what  
they deserve  
*(based on law and  
principles of  
fairness.)*

Give due credit  
and show  
respect

# Defining Ethical Leadership

- Act according to personal beliefs and ethical standards.
- **Altruistic motivation**
- Possesses honesty, integrity, trustworthiness, fairness, and objectivity

**Ethical  
Person**

- Communicates ethics and values
- **Makes decisions based on high ethical standards**
- Inspires others in a vision
- **Builds justice-based community**
- Role model of ethical conduct
- **Demonstrates ethical accountability**

**Moral  
Manager**

# The Foundations of Ethical Leadership in the Clinical Laboratory

Work Culture and Ethics in Laboratory Leadership

# The Foundations for Ethical Leadership in the Clinical Laboratory

- National & International Standards
  - WHO
  - ISO15189
  - National Standards (*e.g. Canadian Standards Association*)
- Legislative Acts/Laws/Regulations
- Codes of Conduct
- Organizational Values and Mission Statement

# ISO 15189:2012 addresses ethics in Section 4.1.1.3

*“...No involvement in any activities that would diminish confidence in the laboratory’s competence, impartiality, judgment or operational integrity”*

*“management and personnel are free from any undue commercial, financial, or other pressure and influences that may adversely affect the quality of work”*

*“where potential conflicts in competing interests exist, they shall be openly and appropriately declared”*

*“there are appropriate procedures to ensure that staff treat human samples, tissues or remains according to relevant legal requirements”*

*“confidentiality of information is maintained”*



# WHO 1999 *“Ethical practice in laboratory medicine and forensic pathology: four principles of medical ethics”*

## Justice

- Fairness in distributing benefit, risks, costs.

## Beneficence

- Best interest of the patient maintained in all actions.

## Non-maleficence

- Minimizing harm as not to out-weigh benefits of treatment.

## Autonomy

- Respect for patient decisions for self and enabling informed choices.

# Professional Codes of Conduct

## Key areas

1. Quality and Excellence
2. Continuous Professional Development
3. Compliance with Codes of ethics and conduct
4. Honest and integrity
5. Relationships with others
6. Independence and impartiality
7. Confidentiality
8. Conflict with moral/ethical beliefs....

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## The European Register of Specialists in Clinical Chemistry and Laboratory Medicine: Code of Conduct, Version 2 – 2008

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Clin Chem Lab Med 2009;47(3):372–375

# Professional Codes of Conduct

## Key areas

1. Professionalism/Honesty/Integrity in research and service
2. Uphold high standards in research and service.
3. Disclosure of medical error and incompetent behaviors
4. Respect for privacy and confidentiality
5. Continued Professional Development
6. Promote safety and welfare of others
7. Avoid and disclose potential conflicts of interest
8. Comply with laws and advocate for patients

### Ethics Guidelines

AACC



On three occasions dating back more than 20 years, AACC's Board of Directors has endorsed 10 principles of ethical conduct covering standards of professional conduct and development, healthcare practice, and research for the laboratory medicine profession. These guiding statements reflect the Association's commitment to improving health and healthcare.

#### Preamble:

Members of the American Association for Clinical Chemistry endorse the following principles of ethical conduct in their profession, including clinical procedures, research and development, teaching, management, administration, and other forms of professional service:

#### Principles of Ethical Conduct

#### I will:

1. Uphold standards of professionalism, be honest in all professional endeavors, and maintain a high level of personal integrity.
2. Avoid scientific and professional misconduct including, but not limited to fraud, fabrication, plagiarism, concealment, inappropriate omission of information, and making false or deceptive statements.
3. Report any health care professional who engages in fraud or deception or whose deficiency in character or competence jeopardizes patient care or other personnel.
4. Maintain a high level of quality in the product(s) of my professional endeavors, including validity and reliability of test results, interpretive opinions, publications, and scientific research.
5. Respect the privacy and confidentiality of protected health information encountered during the course of my professional activities in accordance with legal and ethical obligations.
6. Continuously strive to augment my professional qualifications, knowledge, and skills, and present them accurately.
7. Promote the safety and welfare of patients, employees, co-workers, colleagues, the public, and the environment.
8. Avoid, or promptly disclose and work to resolve, actual or potential conflicts of interest.
9. Encourage open and honest discussion among physicians, other healthcare providers and/or facility managers regarding disclosure to patients of information about medical errors, if such information is material to any patient's well-being.
10. Comply with relevant laws and seek to change them when they are contrary to the best interests of the patient.

Adopted by the AACC Board of Directors

June 15-17, 1990

Reaffirmed with editorial changes July 19, 2003

Reaffirmed with editorial changes November 9, 2007

*American Association for Clinical Chemistry (1990) Ethics Guidelines. Retrieved June 9, 2016, from <https://www.aacc.org/about-aacc/governance/ethic-guidelines>*

# Legislative Acts/Laws/Regulation

## Acts/Laws/Regulation

- Access to Information
- Privacy
- Labor
- Controlled Substances
- Criminal Code
- Transport of Dangerous Goods

## Health Acts



CONSOLIDATION

Canada Health Act

R.S.C., 1985, c. C-6

CODIFICATION

Loi canadienne sur la santé

L.R.C. (1985), ch. C-6

Government of Canada. Justice Laws Website. Retrieved from: <http://laws-lois.justice.gc.ca/eng/acts/c-6/>

# Organizational Missions/Goals/Vision

## Mission

- Reason for organizations existence
- Usually presented as a statement of purpose, philosophy and values

## Vision

- Indicates the desired future state of the organizations work or what is wanted to be achieved.

## Values

- Fundamental ideas and principles that guide thinking and actions.
- Establishes workplace culture

## Goals

- Specific desired outcomes through an organizations operation.

# Organizational Missions/Goals/Vision

## FRONTLINE GOALS

The frontline group collated their issues into the following goals:

- 1. Clinical Excellence Goal:** To develop a more efficient process of workload distribution, maximize staff utilization and create an awareness of fiscal responsibility.
- 2. Communication Goal:** To create a system of communication internally and externally that is specific, timely and responsive for all stakeholders
- 3. Morale (Workplace Environment) Goal:** To provide a positive workplace environment that promotes accountability to create a professional and congenial liaison between management and staff, resulting in an environment where staff will flourish
- 4. Education Goal:** To develop an educational program that is accessible to all lab employees and that allows sufficient time and resources to become professional leaders.
- 5. Human Resources / Staffing Goal:** To create a workplace environment that reflects an increase in morale, sustainability and maintenance of staffing levels resulting in increased productivity and efficiency.

*Used by permission from Laboratory Medicine Program. Eastern Health Authority. St. John's NL Canada.*

# Workplace Culture and the Clinical Laboratory

Work Culture and Ethics in Laboratory Leadership

# The ethical challenge for quality and patient safety



## Population

- Safe High Quality Health Care
- Safe High Quality Diagnostics services

## Health Organization

- Cultural impact on quality, safety and effectiveness of services
- Leadership accountability

## Clinical Laboratory

- Cultural impact on quality, safety and effectiveness of services
- Ethical conduct ensure quality, safety and sustainability

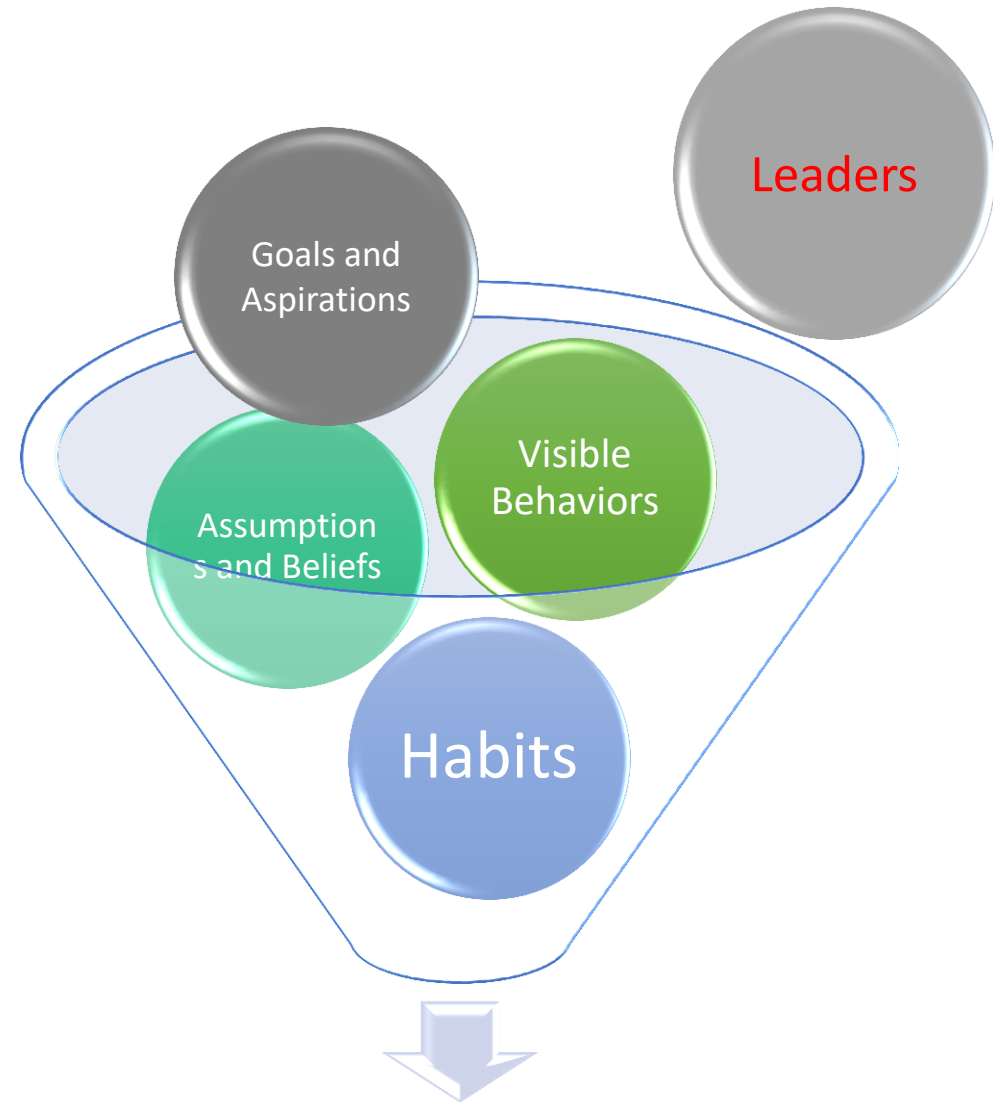


**Laboratory Culture** is established by behaviors, how actions are performed and communicated, and interpreted – the general experience associated with the workplace and its staff.

Affected by:

- Local language
- Prevailing ideas
- Goals and aspirations
- Values and accepted norms
- Assumptions and beliefs and habits
- **Laboratory Leadership**

Leaders define, empower but can also change workplace culture



**Laboratory Culture**

# Ethical and Cultural Challenges

- Systemic factors in the organization
- Organizational Culture
- Inadequate emphasis on Quality of Services leads to
  - Poorer patient outcomes
  - Inefficiency and poorer economic outcomes
- Leaders are accountable for successes and failures of the organization

# Culture of Quality

*“Quality is the result of a carefully constructed cultural environment.”*

Phil Crosby

In best seller “Quality is Free

# Culture of Quality

The Harvard Business Review describes the **culture of quality** as one where there is *“an environment in which employees not only follow quality guidelines but also consistently see others taking quality-focused actions, hear others talking about quality, and feel quality all around them.”*

Srinivasan, A., & Kurey, B. (2014). Creating a culture of quality. *Harvard business review*, 92(4), 23-25.

# Blame Culture versus Just Culture



## Just Culture

- Proactive
- Empowers staff
- Reports errors and OFIs
- Low cost for quality
- System Focused
- Best Practice and QI

## Blame Culture

- Reactive
- Fear among staff
- Buries errors and mistakes
- High cost for quality
- Activity Focused
- Compliance with Standards

# Culture Change

Begin with leadership

Reinforce and communicate desired values

Work on staff motivation to gain commitment to change

Root out obstacles

Reassign resources to new priorities

# Ethical Laboratory Leadership and maintaining a Culture of Quality



Leaders that model ethical behavior

Leaders that adopt values/mission/vision of organization

Leaders that see difficult situations through to completion in an ethical manner

Leaders that openly communicate and share ethical wisdom

Leaders that are aware and reflect on daily ethical realities

Leaders that consider all aspects of the testing process from an ethical point of view

# The Expanded Diagnostic Testing Process

The Patient Phase 1

Signs/Symptoms/Concerns/Risks

The Physician  
Brain Phase 1

History and Physical Exam

Decision to test

Complete Requisition

Consideration of need to test

Consideration of which tests

Consideration of diagnostic strategy

Patient Identification

Specimen Collection

Pre-analytical

Process/Transport/Store

Sample Analysis (Testing)

Analytical

Report

Post-analytical

The Lab

Interpretation

Understanding of test limitations

Management Decision

Consideration of lab interpretative info

Consideration of effects of variability

Action

Test result in context of other information

The Physician  
Brain Phase 2

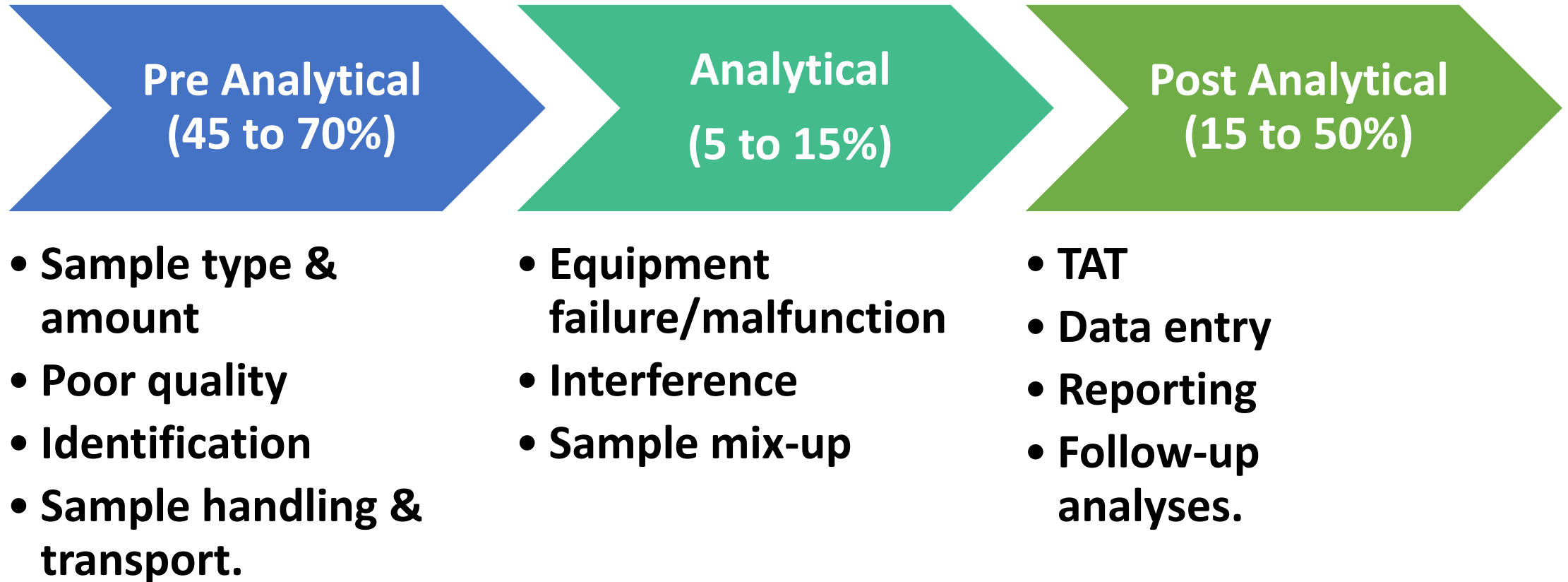
The Patient Phase 2

Signs/Symptoms/Concerns/Risks +

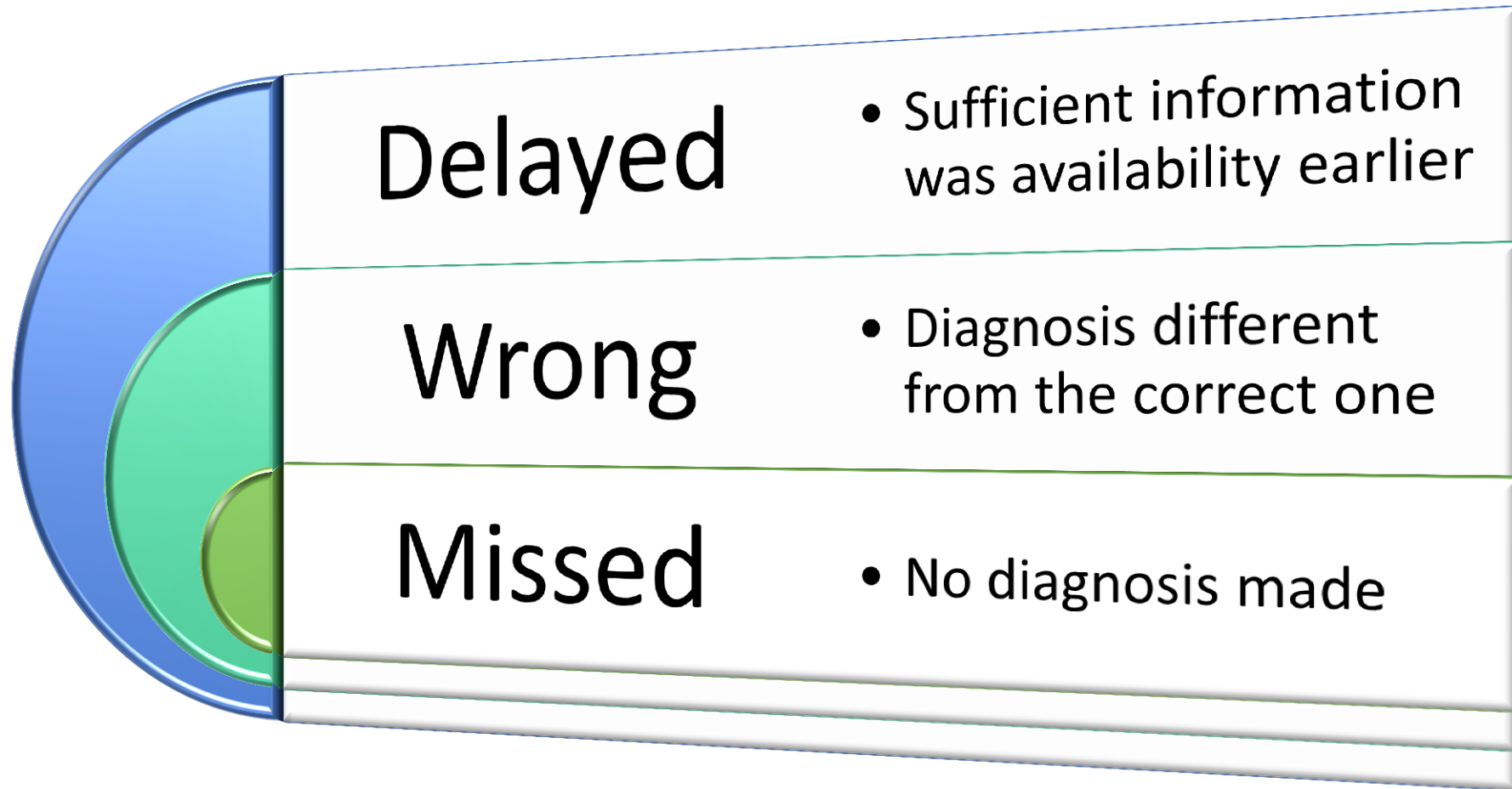
**outcomes/effects**



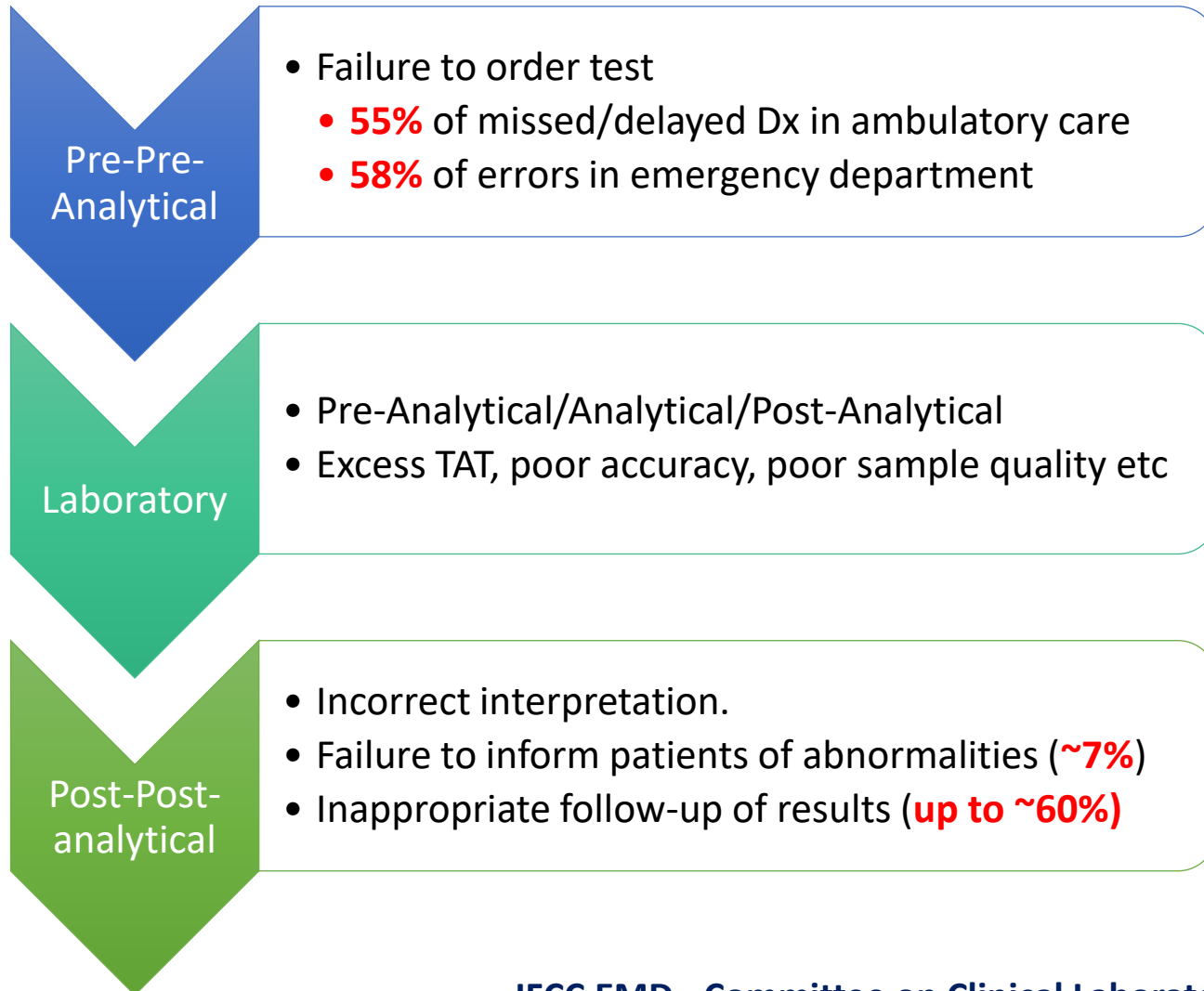
# Quality Failures



# Diagnostic Errors



# Diagnostic Errors



*Plebani, M. Diagnostic errors and laboratory medicine—causes and strategies. Journal of the International Federation of Clinical Chemistry and Laboratory Medicine, 7. <http://www.ifcc.org/media/331924/eJIFCC2015Vol26No1pp007-014.pdf>*

# Medical Error, Utilization Management and Ethical Responsibilities

## Patient Advocacy

- assure laboratory services serve the patient's best interests

## Communication and Disclosure of Medical error

- Occurrence reporting and patient disclosure where circumstances require

## Educate, Inform, and intervene where risk exists

- where there is potential for diagnostic error based on misuse of laboratory services

## Utilization Management

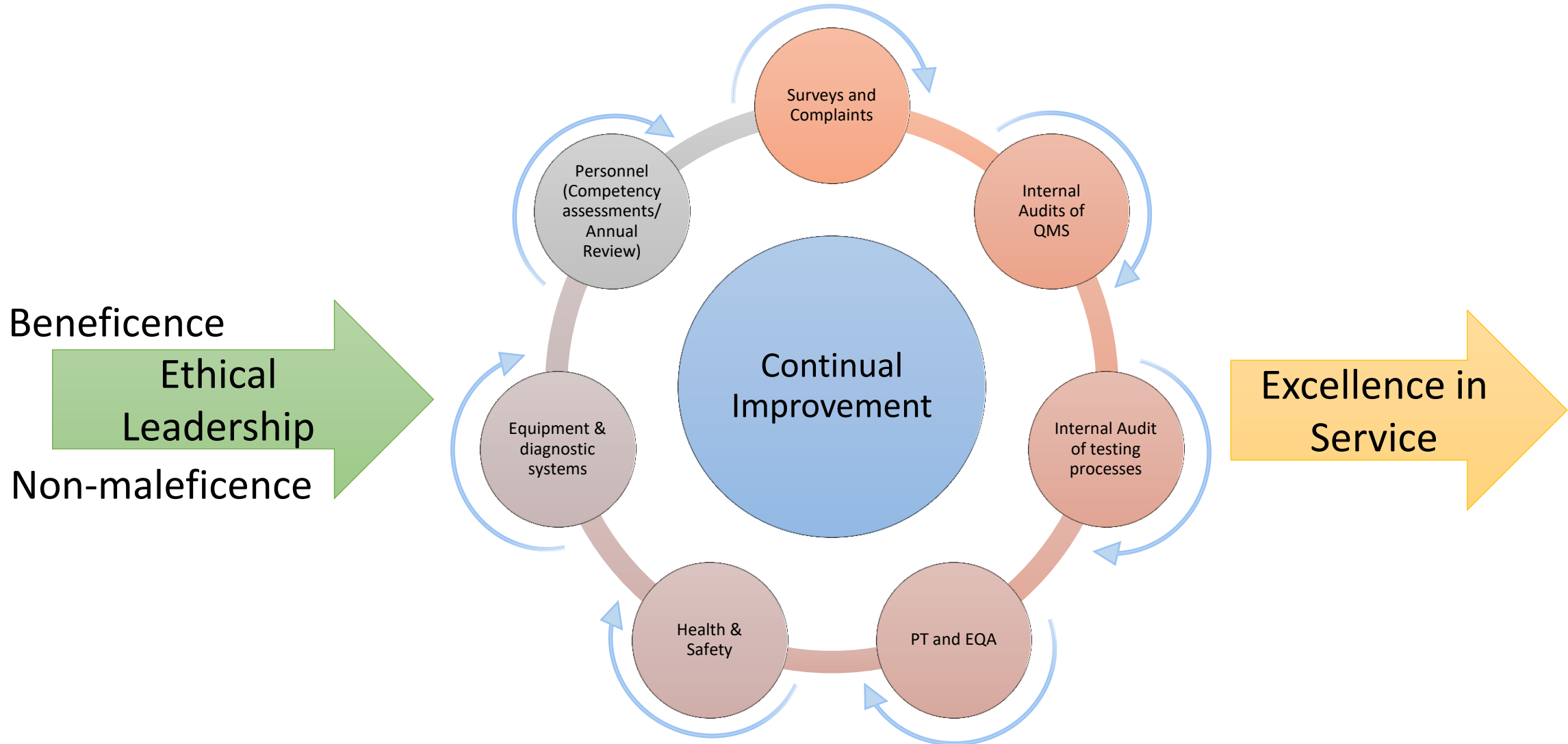
- Work with stakeholders to assure laboratory services provide greatest value and clinical benefit to patients

*“there is no such thing as excellent organizations, only those that believe in **continuous improvement**.”*

*Tom Peters*

*in best seller “In search of excellence”*

# Continual Improvement



# Snapshot of an ethical laboratory leadership in action

Keeps Organizational Goals, Practice Standards, Codes of Conduct at forefront

Develops and Communicates good policy and procedures

Supports staff and treats all fairly

Removes obstacles to quality of service

Provides training opportunities on ethical behavior

# Discussion Points on Leadership ethics and workplace culture

- Describe what Culture of Quality would be like at your workplace. Identify challenges to achieving it and how these can be overcome.
- How is Quality Management an ethical issue for lab leaders?
- How is Utilization Management an ethical Issue for lab leaders?
- Describe ethical laboratory leadership in action in the following situations:
  - A laboratory error has occurred potentially resulting in patient harm.
  - Your laboratory is faced with a 10% cut in its budget.
  - There is evidence that there is overuse of a lab test.
  - You have concerns about the quality of service in your lab: high TAT, excessive sample spoilage, poor staff morale etc.