

Education not regulation: why you can't regulate for virtuous compassion

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Paul Snelling

Principal Lecturer in Adult Nursing
University of Worcester
Institute of Health and Society
Henwick Grove
Worcester
WR2 6AJ

01905 542615

p.snelling@worc.ac.uk

www.worcester.ac.uk

Plan

1. Context – The Francis Reports and responses
2. Difference between ethics-codes and conduct codes. I suggest that compassion as a virtue can figure in former but not latter
3. Emotional response.

The events at Mid-Staffordshire NHST

- Very poor care
- Poor staffing /leadership – emphasis on financial rather than quality measures
- Statistical excess deaths
- Robert Francis – litigation lawyer – independent then a public enquiry
- A number of recommendations...

An increased focus on a culture of
compassion...

Cognition and the compassion deficit: the social psychology of helping behaviour in nursing

John Paley MA

Senior Lecturer, School of Nursing, Midwifery and Health, University of Stirling, Stirling, UK

Original article

Abstract

This paper discusses compassion failure and compassion deficits in health care, using two major reports by Robert Francis in the UK as a point of reference. Francis enquired into events at the Mid Staffordshire Hospital between 2005 and 2009, events that unequivocally warrant the

Situation or individual failure?

[source](#)

Cognition and the compassion deficit: the social psychology of helping behaviour in nursing

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This paper
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Dialogue

The compassion deficit and what to do about it: a response to Paley

Gary Rolfe[®] PhD MA BSc RMN PGCEA and Lyn D. Gardner[†] MSc BSc RMN PGCEA

[®]Professor, Departments of Nursing and [†]Senior Lecturer, Public Health and Policy Studies, Swansea University, Swansea, UK

Introduction

In a recent paper published in this journal entitled *Cognition and the compassion deficit: the social psychology of helping behaviour in nursing*, John Paley analyzes the two reports by Robert Franck on the *1994* *Healthcare Staff (HCS)* and on

which better explains the findings from these studies. We end with a challenge to Paley's conclusion that the problem 'cannot be corrected or compensated for by teaching ethics, empathy and compassion to student nurses' (Paley, 2014) by advocating a curriculum focused on the arts and humanities in order to help students to appreciate, understand, and respond to the

source

source

David Cameron: There is a real problem with nursing in our hospitals

There is a "real problem" with the standard of nursing in British hospitals, David Cameron has said, as he today calls on nurses to make hourly rounds to ensure patients are comfortable.



Nurses must be told to 'talk to patients': PM's intervention is a damning indictment of care on our hospital wards

- **Nurses should check whether patients need help at least once an hour**
- **David Cameron says quality of care has been hit by the stifling bureaucracy**

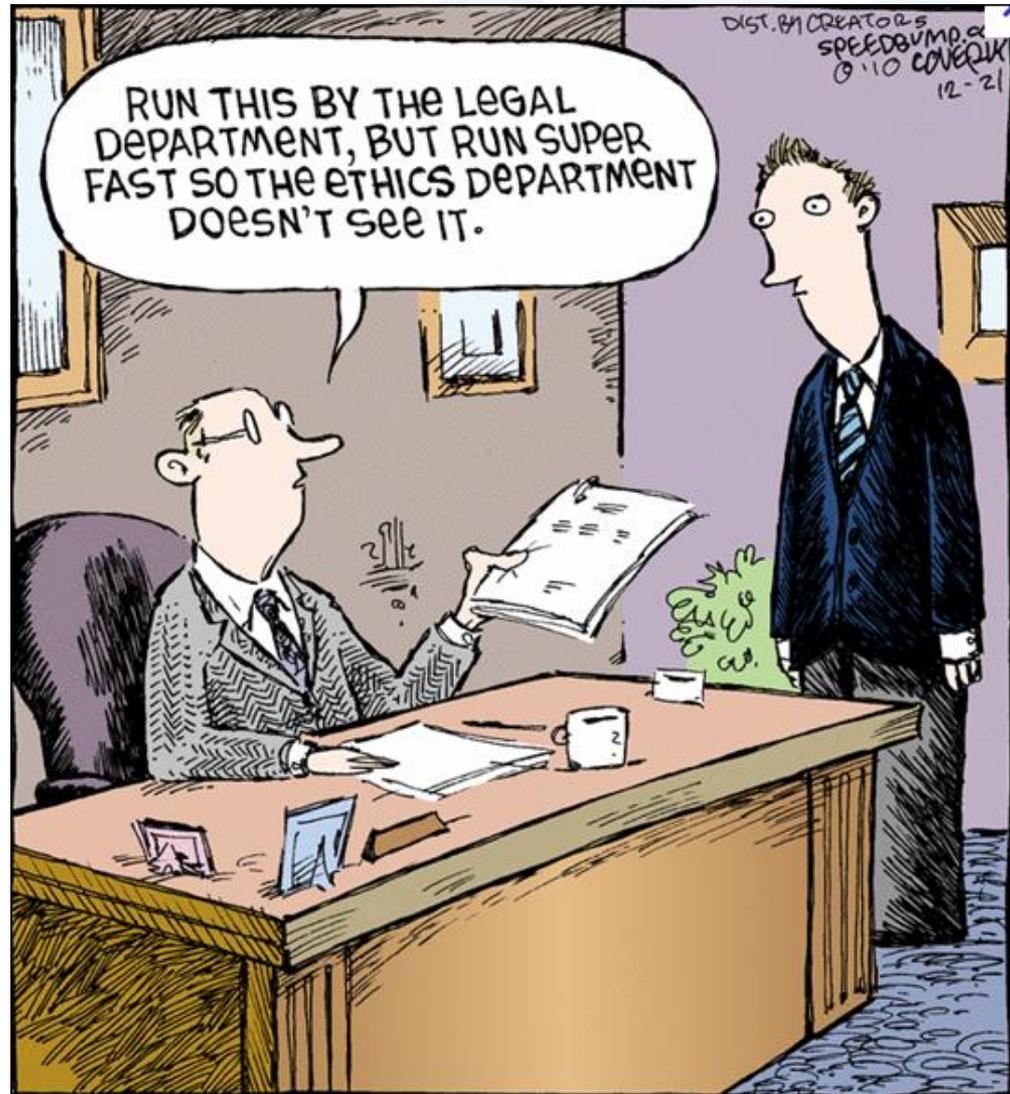
By DANIEL MARTIN FOR THE DAILY MAIL
UPDATED: 08:06, 6 January 2012

The events at Mid-Staffordshire NHST – responses

- Initiatives (for example nurse rounding)
- Minimum staffing levels (!)
- Changes to nurse education (being piloted, standards reviewed)
- Changes to Code (NMC response)

Ethical codes*
and conduct
codes are not the
same thing
(though
sometimes they
are conflated)

*Ethics and
ethical codes
also different!



Imagine a 'scale of nurse quality'



excellent

good

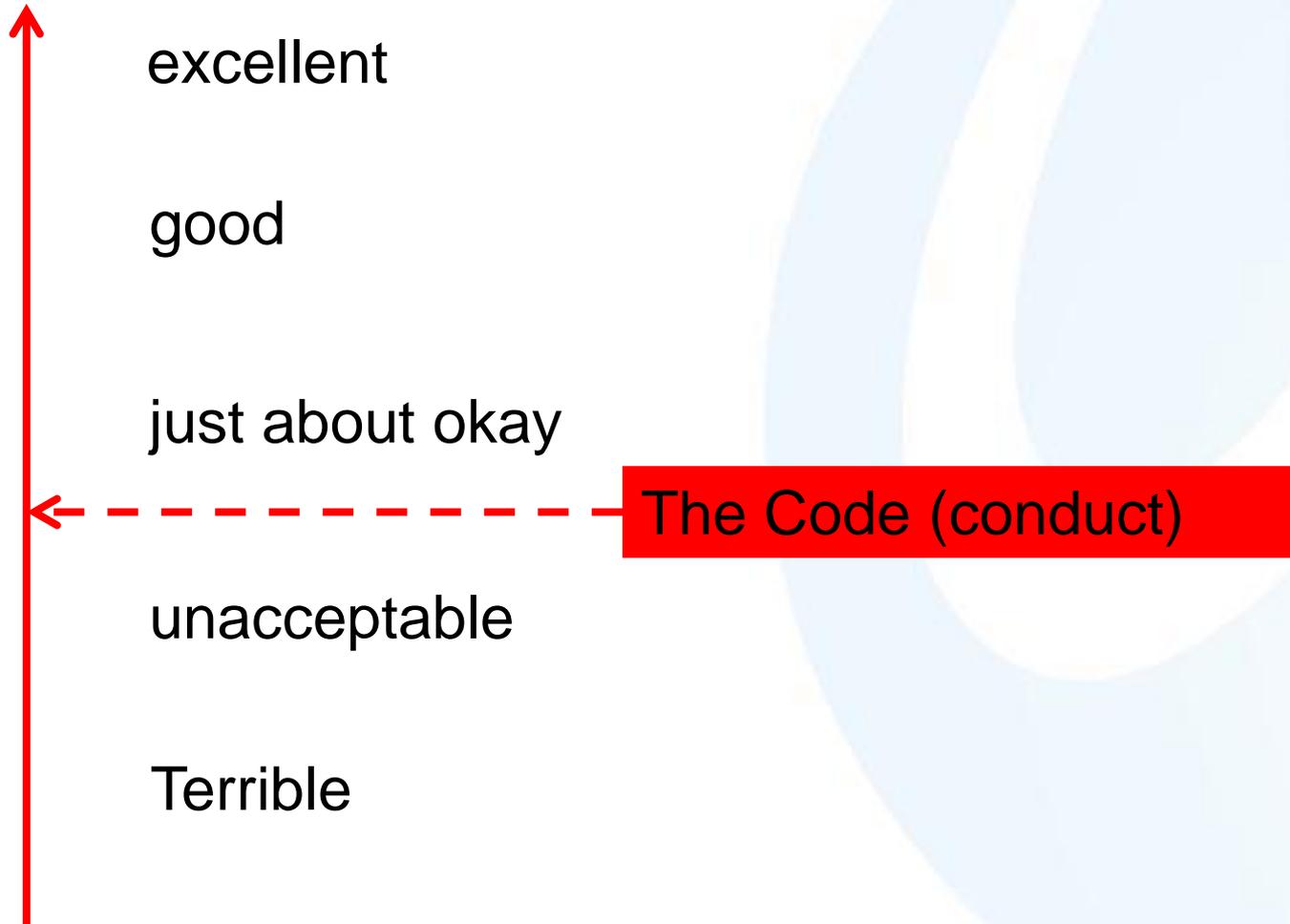
just about okay

unacceptable

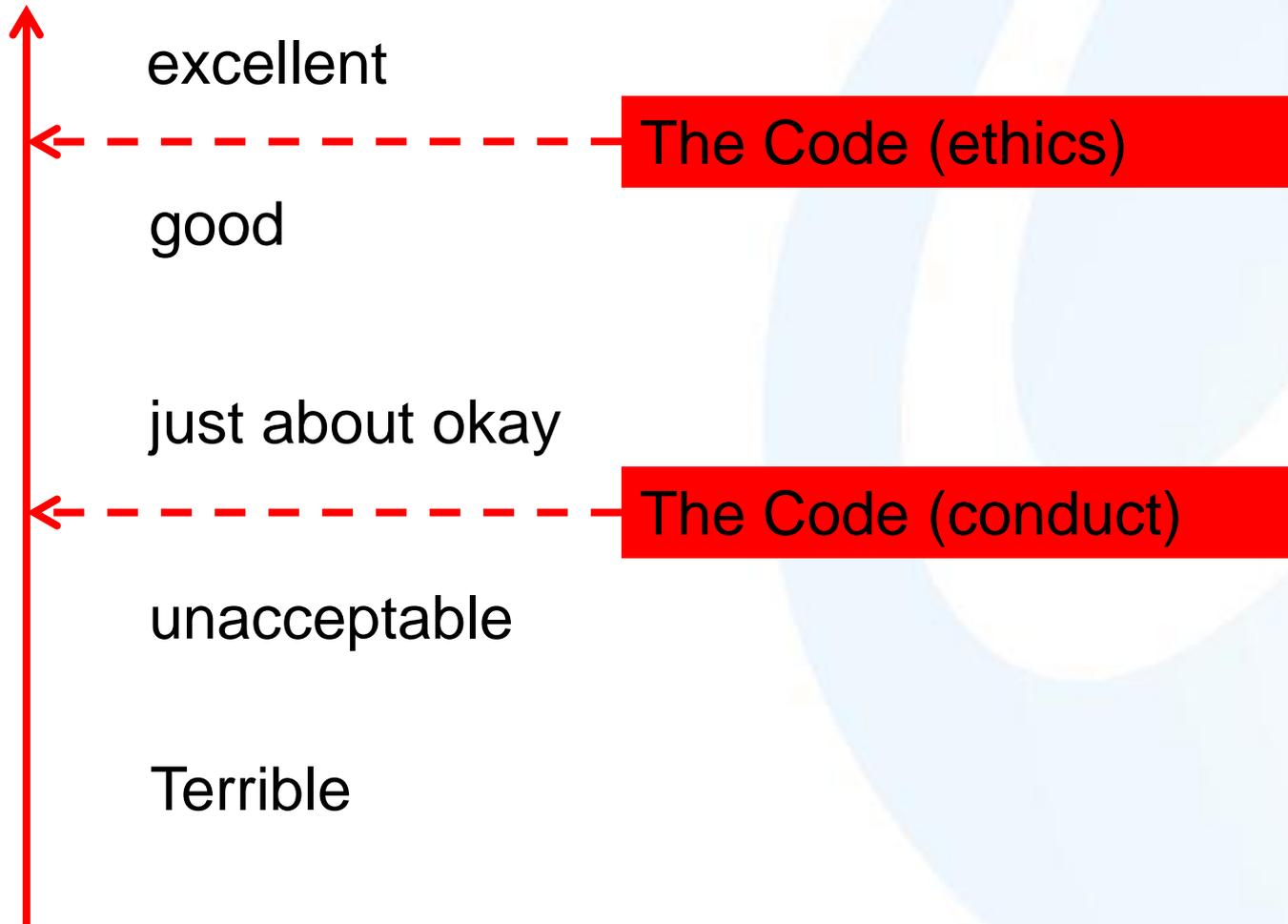
Terrible



Imagine a 'scale of nurse quality'



Imagine a 'scale of nurse quality'



Differences between ethical-rules (statements, values) and conduct-rules

	Ethics-rules tend to be	Conduct-rules tend to be
Titles	Code of Ethics	Code of conduct
Authorship	Professional bodies	Regulatory bodies
Level	Good nurse	Just-good-enough nurse
Disagreement	More subjective	More objective
Consequence of transgression	Disapproval, indignation	Official sanction
Language	Descriptive, implying normative	Directive
Agent-centred?	Includes character	Excludes character

Conceptual confusion

the Code is **not an 'aspirational' document** but a clear statement of the professional standards everyone should be able to expect from a nurse or midwife.

20.8 act as a role model of professional behaviour for students and newly qualified nurses and midwives to aspire to

The Code **15**

Compassion in NMC Code

- 1.1 treat people with kindness, respect and compassion
- 2.6 recognise when people are anxious or in distress and respond compassionately and politely.
- 3.2 recognise and respond compassionately to the needs of those who are in the last few days and hours of life
- 11.2 make sure that everyone you delegate tasks to is adequately supervised and supported so they can provide safe and compassionate care, and

Compassion in codes (1)

- It's in nearly all nursing (ethical) codes in one way or another.
- Less visible in conduct-codes (NZ, Australia, HK)
- In government policy (compassion in practice) – one of 6Cs
- Not in GMC, HCPC codes
- Treat patients politely and considerately (GMC)
- in consultation version of GPC standards for pharmacy professionals

Compassion in Codes (2) - US

An awareness of suffering, tempered with reason, coupled with the desire to relieve the suffering; a **virtue** combining sympathy, empathy, benevolence, caring and mercy. Used with the cognitive and psychomotor skills of healing to meet the patient's needs.

(ANA, 2015, p.41)

Compassion in Codes (3) - Canada

The ability to convey in speech and body language the hope and intent to relieve the suffering of others. Compassion must coexist with competence. 'Compassion is a relational process that involves noticing another person's pain, experiencing an **emotional** reaction to his or her pain and acting in some way to ease or alleviate the pain

Code of Ethics for Canadian Nurses

Definitions of compassion...

Faust, following Nussbaum, following Aristotle

- Serious suffering
- Undeserved
- Fellow feeling based on
- Eudaimonistic judgement
- Motivating to action.

The difficult questions of character and emotion

Two simple claims:

- (1) Nursing ethics puts character and emotion at the centre – via descriptive and (implied) normative claims about compassion – an *emotional* response to suffering (ethics – codes)
- (2) You cannot require people (via conduct-codes) to have certain virtues or behave in an emotionally prescribed way.

You can make people write with their left hand but it won't make them left handed

Kindness in place of compassion?

the demonstration of simple acts of gentleness, consideration and care'

(NMBA 2008 p.3)

'You must treat people kindly and considerately'

(NMC 2008, Clause 3, p.3)

'you must treat people with kindness, respect and compassion

(NMC 2015, clause 1.1, p.4)

If I must be kind, what does the absence of kindness look like?

- Kindness not required
- Not (very) kind
- Unkind
- Faux-kind
- Cruel, malicious (the opposite of kind)

Conclusion

Compassion as part of a conduct code makes no sense for patients or practitioners

Education is key...but so is sufficient resources. Attempting to enforce compassion tends to support the individual 'bad apple' narrative