

HTAi Ethics IG Scientific Meeting

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Topic 2: Core competencies for ethics in HTA

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Expert of Ethics in HTA
“core competencies”: welcome to the
“Middle-earth” of complexity...





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Expert of Ethics in HTA “core competencies”: a sort of chinese boxes





The “competencies issue”

- **Lack/scarcity of competencies** is mentioned as one of reasons why it is difficult to integrate ethics in HTA (ten Have 2004)
- **Does performing ethical analyses in HTA request specific competencies?** An “age-old and recurrent question” ...
- **Who are HTA ethical domain experts?** What are their competencies? In a large sense, each of us is an ethicist
- Once, in a strict sense, ethicists (i.e. experts of ethics) were who had a **degree in philosophy** (moral philosophers)
- Nowadays, ethics has become more **professionalized** (business ethics, bioethics, organizational ethics, etc)



- Who is the **expert of ethics in HTA (EEH)**?
- Which are his/her **competencies**?





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Who is EEH?

An “abstracted” philosopher?





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Who is EEH?

A threatening inquisitor?





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Who is EEH?

An unquestionable “guru”?





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Who is the EEH?

**Maybe, a
*culturally
modified
organism*
(CMO) ...**





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Who is HTA EEH?

Maybe, a “CMO” aimed at offering specific inputs for ethical analysis «in» and «for» an HTA process





A challenging matter. Why?

- The **figure of expert of HTA** in itself is not well defined and not so professionalized
- Ethics in HTA is not «**self-sufficient**». Ethics needs knowledge of facts (data on safety, effectiveness, etc.)
- **Ethical analyses in HTA vary**
 - sometimes they consist in a list of ethical issues, which are identified, described, and addressed (descriptive perspective/assessment) → Ethical frameworks
 - sometimes they consist in moral judgements (normative perspective/appraisal) → Classic models of moral philosophy
- Different **targets of interest**: HTA process as a whole & ethical assessment





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Sources

- **Our educational background**
- **Our experience**
- **Core Competencies for Healthcare Ethics Consultation**
American Society for Bioethics and Humanities (ASBH), 2011, 2nd ed.
- **Other (?)...**





1) Defining core competencies for EEH can:

- valorize ethics in HTA
- professionalize the figure of EEH
- avoid that person with no competence/experience declare to be expert
- open the way to possible accreditation



Our starting points -2-

2) To be EEH, is it necessary to have a Degree in Philosophy? Is ethical evaluation a matter reserved for philosophers?

- In our opinion, **NO**. Anyway, some form of education in Philosophy is necessary
- It is particularly important for EEH researchers trained in disciplines different from Philosophy to ensure that they do not rely too heavily on skills honed in their primary professions (e.g., when an EEH with legal education is performing ethical analyses for HTA, it is not his/her role to provide ethical and not legal analyses)

3) We do not address the question of whether ethical evaluation should be performed by individuals or teams

4) Highlighting that ethical evaluation is not an easy task. «Deep» ethical analysis can be very complex



Core competencies for EEH

They consist of three fundamental elements:

- **Knowledge**
- **Skills**
- **Attitudes**





Knowledge

- A set of **knowledge** is required (*knowledge areas*)
- Distinction is possible between **Basic** and **Advanced knowledge**
- The areas identified can **overlap** and may need to be **revised** over time due to advances in technology or changes in healthcare practice
- There are many **different ways that one might come to have knowledge of the content listed**. These include degree courses, post degree courses, master, educational programs, intensive courses, participation in conferences, in-service presentations, seminar sessions, accessing and reviewing relevant literature, self-education, etc



Knowledge areas

BASIC KNOWLEDGE

- **Basic scientific notions** (medical, sociological, legal, organizational, economical notions)
- **Basic informatics knowledge** (main softwares)
- **Healthcare systems & health policies** (basic information on their mechanisms)
- **HTA** (what is HTA, what are its objectives, etc)
- **Classic models of moral philosophy** (Utilitarianism, Casuistic, Personalism, etc) and theories of justice (Utilitarian, Egalitarianism, etc)
- **Common bioethical issues and concepts** (self-determination, treatment refusal, privacy, autonomy, informed consent, conflicts of interest, resource allocation, etc)

ADVANCED KNOWLEDGE

- **Debate on ethics & HTA** (main issues addressed)
- **Methods in HTA ethics** (applications of classic models & frameworks)
- **Relevant codes of ethics and professional conduct and guidelines** (e.g., Oviedo Convention, Declaration of Helsinki, etc)
- **Relevant health law and health documents** (e.g., international treaties, etc)



They include three categories:

- Ethical assessment skills
- HTA process skills
- Interpersonal skills





Ethical assessment skills

- **Discern and gather relevant data** (e.g., clinical, economical, etc).
 - ability to retrieve information (search strategy, access database, etc)
- **Distinguish the ethical dimension** from other, often overlapping, dimensions (e.g., legal)
- **Clearly articulate the ethical concern(s)** (moral reasoning), and clarify relevant ethical concepts
- **Identify relevant beliefs and values** of involved parties (stakeholders)



HTA process skills

- **Communicate and collaborate** effectively with other members of HTA process
- Identify and resolve potential **conflicts of interests**
- **Identify which individuals need to be involved** in eventual consultations



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Interpersonal skills

- Ability to **facilitating communication** (e.g. within HTA processes)
- “Educate” involved parties regarding the **ethical dimensions** (e.g. very “technical” researchers)
- Elicit the **moral views of involved parties** (e.g. stakeholder consultations)





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Attitudes

- Multidimensional culture (eclectic culture)
- Open mind
- Integrity
- Courage
- Prudence





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Working in progress

- Our is just a proposal that can be modified/integrated
- We are aware that not everyone agrees to identify a core set of competencies for EEH
- If you agree, we can
 - debate the overall proposal (specifically its structure) as well as single points
 - and then agree to write a scientific article (with subsequent internal review)? and/or a position paper to submit to HTAi?





Discussion points

- Are core competencies needed for EEH?
- Do you agree with the overall structure (knowledge-skills-attitudes)?
- How to implement “knowledge-skills-attitudes”?
- Have we forgotten something?
- Something to drop out?