

BEN



From the PRESIDENT

Donna F. Homenko, PhD



One of the primary themes for this year’s annual session is that of ‘Culture’. A basic definition of this word highlights the following key phrases; beliefs or norms, the skills or traits of people, and customs in a racial, religious or social group.

Ethical dilemmas can arise at any time in our dealings with patients or at the workplace in general. In some cases, the situation is compounded by differences between cultures. Both practitioners and patients can even experience culture shock when their surroundings, a provider or a procedure is unfamiliar and uncertain.

Through education patients can be informed of choices that increase the chances that their beliefs will be respected. And, practitioners need to be updated on the differences they may encounter with a variety of patients. Communication, written and verbal, is an essential component of overcoming problems that can arise given the diversity of



**....a ‘smile’ is a form of communication
that everyone can understand...**

beliefs. Whether it stems from speaking different languages or a lack of understanding the technical terms involved in one’s care, such differences may become a major factor in the relationship due to the absence of a common bond.

I once learned that a ‘smile’ is a form of communication that everyone can understand, because it speaks the language of our hearts. When I participated in a medical mission

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in Honduras, and my rusty Spanish began to fail me when dealing with 4-year-old Hefferson and his parents—somehow the offering of a smile opened the path to patience and understanding as both sides struggled to explain why this little boy was in pain.

In this small village setting we were afforded the gift of time to develop our relationship. In large urban medical centers, time may be limited and thus we must be prepared. Advanced planning on how to handle these situations—knowing the availability of translators at a moment's notice and understanding the demographics of the surrounding community—can alleviate some of the problem.

Health care organizations can develop participatory and collaborative partnerships to address the facets of cultural diversity. BENO can serve in this capacity through its community of membership across many health disciplines and the educational activities at the Annual Conference.

...resolve to conduct better clinical consultations with those from many different cultural backgrounds

As we begin a new year, filled with the traditional resolutions to exercise more, eat healthier and maintain a balance in our personal and professional lives, consider an ethical resolve to gather the tools necessary to conduct better clinical consultations with those from many different cultural backgrounds.

● ***Should Non-immunized Children Be Excluded from a Pediatric Practice?***

Pedro Weisleder, MD, PhD
Co-Chair of Nationwide Children's Hospital
Integrated Ethics Committee
Nationwide Children's Hospital



As indicated by Omer et al. (2009) “Vaccines are among the most effective prevention tools available to clinicians.” High immunization coverage has resulted in drastic declines in vaccine-preventable diseases (1). And for those who cannot be immunized, “herd effect” - the phenomenon by which a disease is squeezed out of a community due to a lack of hosts capable of transmitting it - offers a potentially life saving option (2). Unfortunately, the low incidence of vaccine-preventable diseases has led some to wrongly believe the conditions have been eradicated - we have become victims of our own success (3).

The authors of several recent publications have indicated that the number of parents who refuse to vaccinate their children by seeking a personal-belief exemption (PBE) has been steadily increasing (1,4). Specifically, between 1991 and 2004 the number of PBE to immunizations rose from 0.99% to 2.54%. Using 2010 data from The Federal Interagency Forum on Child and Family Statistics (6), it is reasonable to conclude that, based on parental PBE, almost 2 million American children are unvaccinated today. And the number is much higher in certain metropolitan areas such as Seattle and San Diego.

Pediatricians have the privilege and responsibility to care for a vulnerable population. We are entrusted, and as a matter of fact expected, to work in concert with parents and act in the best interest of our patients. Our responsibility, however, is not only to the child in the examining room, it is also to those in the waiting room. Many of the vaccine-preventable illnesses cause significant morbidity in children with no underlying medical problems. They have the potential to be devastating or fatal for children who do. It is not uncommon for pediatricians to provide routine care to patients on long-term daily corticosteroids or other immunomodulators for juvenile idiopathic arthritis, Crohn's disease, cancer, and reactive airway disease. An infection with varicella, Haemophilus influenzae type B, measles, or certain strains of Streptococcus pneumoniae - all vaccine-preventable illnesses - could be fatal if acquired by such patients.



As a consequence of the above, some clinicians have discontinued or have considered severing their provider relationship with families that refuse vaccines (7,8). To those pediatricians it is a matter of societal responsibility and unwillingness to practice sub-standard medicine. The American Academy

In an effort to assist practitioners, the AAP has developed recommendations and practical tools to foster communication with the parents of unvaccinated children.

of Pediatrics (AAP) does not challenge the nobility behind those principles. It does, however, question the wisdom of discharging patients from a practice solely because of parental refusal to immunizations (9). In an effort to assist practitioners, the AAP has developed recommendations and practical tools to foster communication with the parents of unvaccinated children. Specifically, the AAP recommends that pediatricians: 1- share honestly what is and is not known about the risks and benefits of the vaccine in question; 2- address vaccine refusal by respectfully listening to parental concerns, explaining the risk of nonimmunization, and discussing the specific vaccines that are of most concern to parents; 3- document details of the conversations and have the parent sign a vaccine refusal form (please reference 10), and keep the form in the patient's medical record; 4- revisit the immunization discussion at each subsequent appointment and flag the chart to be reminded to revisit the immunization discussion.

References

- 1) Omer SB, Salmom DA, Orenstein WA, et al. Vaccine refusal, mandatory immunizations, and the risks of vaccine-preventable diseases. *N Engl J Med.* 2009;360:1981-1988.
- 2) Rakowsky AT. The argument for excluding nonimmunized children from a pediatric practice. *J Child Neurol.* 2010;25:1586-1587.
- 3) Metz SJ. The argument for including non-immunized children in a pediatric practice. *J Child Neurol.* 2010;25:1584-1585.
- 4) Sugerman DE, Barsky AE, Delea MG, et al. Measles outbreak in a highly vaccinated population, San Diego, 2008: Role of the intentionally undervaccinated. *Pediatrics.* 2010;125:747-755.
- 5) Dempsey AF, Schaffer S, Singer D, et al. Alternative vaccination schedule preferences among parents of young children. *Pediatrics.* 2011;128:848-856.
- 6) Number of children (in millions) ages 0–17 in the United States by age, 1950–2010 and projected 2030–2050. Available at: <http://www.childstats.gov/americaschildren/tables/pop1.asp>
- 7) Some pediatricians taking stand for vaccine program. Available at: <http://articles.chicagotribune.com>
- 8) Strong beliefs about vaccines work both ways. Available at: <http://abcnews.go.com>
- 9) Diekema DS. Responding to parental refusals of immunization of children. *Pediatrics.* 2005;115:1428-1431.
- 10) American Academy of Pediatrics. Documenting Parental Refusal to Have Their Children Vaccinated. Available at: <http://practice.aap.org/popup.aspx?aID=2685&language=>

MEMBER Recognition

WELCOME to the following new members and thank you for joining the Network and contributing to the work of the organization.

INDIVIDUALS

Michael Polnik, MA

Canton, OH

Hafzah Mueenuddin

Butt, JD, MA

Cincinnati, OH

L. William Mortensen, MA.

Mentor, OH

Nancy Flickinger, MD,

Barberton, OH



BENO is Unique!

We are the only statewide organization serving Ohio as an educational resource in health care ethics. If you share this interest, we invite you to become a member and...

- **Network** with experienced ethicists statewide.
- **Earn** continuing education credit.
- **Participate** in our projects.
- **Better serve** your organization and community.
- **Polish** skills and learn new ones.

Download Individual and Institutional Membership Forms at:
www.beno-ethics.org/membership.html

The Bioethics Network of Ohio is pleased to recognize our **Platinum Members:**

- Catholic Health Hospital Medical Center • Lake Health • Mary Rutan Hospital
- Mercy Health Partners • Miami Valley Hospital • Nationwide Children's Hospital • OhioHealth

BENO 23rd Annual Conference April 26, 2013

"Culture, Religion and Clinical Ethics"

Friday April 26, 2013
OCLC
Dublin, Ohio
Be sure to take advantage of the early discount postmarked by April 1, 2013

COLUMBUS



Brian Volck, MD
Asst. Professor
University of Cincinnati
Dept. of Pediatrics

Our Keynote Speaker, is a teaching hospitalist, author and pediatrician, with particular interest in Native American child health. Dr. Volck will address the latter in his presentation, *"Love, K'e and Religion"*.

Serving Ohio as an Educational Resource in Health Care Ethics

Dear BENO Members and Friends,

Join fellow BENO members and other colleagues for the 23rd Annual Bioethics Network of Ohio Conference. As you review the key topics for this year's program, "Culture, Religion and Clinical Ethics", pay particular attention to the **Jim Barlow Memorial Lecture** and the options for morning and afternoon breakout sessions. **REGISTER EARLY** – to save money and ensure your seat in selected sessions.

As part of BENO's ongoing educational mission, we are excited to acknowledge the inaugural graduates from the Ethics Consultation Course. Plans are already underway for the next offering in fall, 2013. Whether you are a new member of an ethics committee or an experienced practitioner, this year-long course, providing 16 CE-accredited units, will enhance your skills in ethics consultation.

On behalf of the Program Committee, we anticipate enlightening dialogue in each conference session. As noted, we will be meeting once again at the OCLC, in Columbus. Encourage your co-workers, friends and students to attend this worthwhile program.

Donna F. Homenko, PhD
President, BENO

2013 Conference Planning Committee

Jack A. Gallagher, PhD, Co-Chair, Catholic Health Partners

Mark A. Skaja, MDiv, BCC, Co-Chair, St. Rita's Health Partners

Anne Lovell, RN, MSN, CPNP, Cincinnati Children's Health Medical Center

Beth Griebel, RN, MSN, Midwest Care Alliance

Tobi Mattes, BA, M A Marketing Communication

Dawn Seery, RN, MA, D.BE, Mt. Carmel Health System

Conference Learning Goal: "Culture, Religion and Clinical Ethics"

Identify the diverse manner in which Native American, African American, Amish and Hispanic culture, as well as religion, can influence clinical and ethical decision-making.

2013 Conference Faculty

Carrie Durbin, BS, Migrant Health Promotion

Ashley K. Fernandes, MD, PhD, FAAP, WSU Boonshoft School of Medicine

Yolanda Hamilton, B.B.A., Lifebanc

Larry James, MBA, Catholic Health Partners

Gayle A. Lawn-Day, PhD, Migrant Health Promotion

Louise Lears, SC, PhD, Sisters of Charity of Cincinnati

Anne Lovell, MSN, CNP, Cincinnati Children's Hospital Medical Center

Paul Numrich, PhD, Methodist Theological School in Ohio

Roschelle Ogbuji, MA, JCIS Innovative Solutions

Michael E. Polnik, MA, Aultman College of Nursing and Health Sciences

Dawn Seery, RN, MA, D.BE, Mt. Carmel Health System

Brian Volck, MD, Cincinnati Children's Hospital Medical Center

Locations, Directions & Room Reservation: The conference is being held at OCLC (On Line Computer Library Center), 6565 Kilgour Place, in Dublin, just off I-270 & 1/4 mile from the hotel. When you approach the intersection of Route 161/33 & Franz Rd., from I-270, the street sign is misleading. Be sure to turn north (left) toward Post Rd., and then make an immediate right. You'll be on Kilgour Place. For additional information visit: www.oclc.org/conferenecenter.

Rooms are available at Courtyard Columbus Dublin, 5175 Post Rd., Dublin, OH. For a detailed map & directions, go to: www.marriott.com For reservations, call the hotel reservation line 1-800-321-2211 or 614-764-9393 and ask for the rooms reserved under the Bioethics Network Room Block. The special rate of \$99 for king rooms is available through April 15, 2013.

23rd Annual Bioethics Network of Ohio Conference

Friday, April 26, 2013

8:00 – 8:30 am Registration and Continental Breakfast

8:30 – 8:45 am Welcome

8:45 – 9:45 am **Keynote Address: “Love, K’e and Religion”, Brian Volck, MD**

Virtues, such as the Christian virtue of love and Navajo virtue of k’e embodied in the living traditions and practices of hospitality, are considered alternatives to the disembodied principles that dominate contemporary bioethics discourse. The modern West’s sequestering of “religion” separable from the rest of community’s life is an unaddressed blind spot in attempts to enhance communication across cultures.

9:45 – 10:45 am **Jim Barlow Memorial Lecture: “Worldview Competence in Health Care”, Paul Numrich, PhD**

Cultural competence in health care often privileges language access services and sometimes overlooks specifically religious aspects of culture. This presentation will make a case for “religious competence” in health care and then make a further case for a comprehensive “worldview competence” that takes into consideration the increasing number of “nons” in American society, e.g., the non-religious and non-affiliated.

10:45 – 11:00 am Break and Refreshments

11:00 – Noon **Concurrent Breakout Sessions**  Please choose one and enter it on the registration form.

1. **“The Fragile Child: Cultural & Religious Influences in Parental Decision-Making”, Anne Lovell, MSN, CNP**

Decisions regarding medical care and treatment of a child are most often the responsibility of the parent(s) and family and have critical implications for the life and health of the child. Parents often have little or no experience with decision-making of this magnitude and, as a result, rely upon family, cultural, or religious influences which may lead to conflict with medical care providers and family.

2. **“The Amish”, Michael Polnik, MA**

This presentation will cover Amish cultural norms, values and practices that impact their everyday life. In addition, there will be a discussion of religion versus culture and whether a community is seen as a culture or religion and if this difference impacts the autonomy of the individual or group. Topics such as narrative ethics, communication ethics and value imposition will be discussed.

3. **“Organ Donation & Multicultural Community”, Yolanda Hamilton, BBA and Roschelle Ogbuni, MA**

The presentation will provide insight on the dynamics of organ donation within multicultural communities emphasizing ethnic groups with the greatest disparity on the Ohio organ donor registry. It will address the importance of and need for organ, eye and tissue donors within multicultural communities and barriers which prevent members of those communities from becoming registered donors.

Noon – 1:30 pm **Lunch & BENO Business Meeting – Presentation: “Accounting for Culture – With Sensitivity and Humility”,**

Louise Lears, SC, PhD

What should we do when cultural values arise and/or conflict in the health care setting? Being aware of larger cultural values can help health care providers understand patients’ behaviors and actions. This session will explore the need for sensitivity and humility when faced with cultural differences in the clinical setting.

1:30 – 3:00 pm **Concurrent Breakout Sessions**  Please choose one and enter it on the registration form.

4. **“Waging CLAS Warfare on Disparities in Care”, Larry James, MBA**

Although disparities in healthcare are not a new subject, there are few proven weapons to successfully combat their debilitating impact. This presentation explores the prevalence of health disparities, and then delves into development of CLAS standards which are designed to significantly reduce disparities within healthcare organizations. Finally, an exploration of one organization’s attempts to eliminate disparities will be discussed.

5. **“Needs of the Invisible”, Dawn Seery, RN, MA, D.BE**

How should society act to sustain a social world in which people age and die in humanly fitting ways, without fear of abandonment by family members whose own needs are invisible? This presentation will explore the ethic of justice and care to consider needs of the caregiver who can break under the weight of a noble task, with all its physical, psychological and economic demands.

6. **“Lessons from the Field: Serving Migrants, Farm Workers & Border Populations with Culturally – Competent Health Outreach & Service”, Gayle A. Lawn-Day, PhD, Carrie Durbin, BS**

Migrant Health Promotion has over 30 years experience serving Latinos in migrant camps, border populations and other isolated communities with culturally-competent health outreach. It’s clear that cultural competency plays a large role in the availability of and access to appropriate services and this session will share experiences regarding successful outreach and likely barriers.

3:00 – 3:15 pm **Break & Refreshments**

3:15 – 4:15 pm **Plenary: “Conscience in Medicine: Can Borders Become Meeting Places?”, Ashley K. Fernandes, MD, PhD, FAAP**

The debate over conscientious objection in medicine has recently been pitted as a battle of “religion versus reason”, with attempts to limit the protection of conscience of health care providers. This presentation argues that severely limiting conscientious objection fails to address the definition and meaning of conscience itself. Borders drawn to separate can also be “meeting places”, where two sides can come together, oriented toward respect for persons.

4:15 – 4:30 pm **Closing, Evaluations & Certificates**

Please Have a Safe Trip Home

23rd Annual Bioethics Network of Ohio
 "Culture, Religion & Clinical Ethics"
 Conference Registration Form
 Friday, April 26, 2013

The Conference Center at OCLC (On Line Computer Library Center) Dublin, OH

Please make a copy of this form for your records. Make your check payable to **BENO**, and mail it with completed registration form to: **MA Marketing Communication, 2653 Ramsay Rd., Beachwood, OH 44122; Questions? Phone: 216-765-8031; or e-mail ljmarket@ma-marketing.net.**

PLEASE PRINT:

Name: _____ Degrees: _____ E-mail: _____

Position/Occupation: _____ I need CE credit for _____

Institution: _____ Phone: _____ Fax: _____

Home Address: _____ City: _____ State _____ Zip _____

- I am a **Conference Speaker**.
 I am from a **Platinum Member Institution**. (Eligible for 3 complimentary conference registrations.)

Morning Breakout: 11 am – noon

SELECT & CHECK ONE:

1. The Fragile Child
 2. The Amish
 3. Organ Donation & Multicultural Community

Afternoon Breakout: 1pm – 3

SELECT & CHECK ONE:

4. Waging CLAS Warfare
 5. The Needs of the Invisible
 6. Lessons from the Field

LUNCH: Regular lunch menu or Vegetarian lunch menu

Fee Schedule: Check your classification below

	<u>Individual Member</u>	<u>Institutional Member</u>	<u>Non-Member</u>	<u>Student</u> Supply copy of ID with this form
By 4/01	___ \$135	___ \$135	___ \$155	___ \$73
After 4/01	___ \$175	___ \$175	___ \$195	___ \$93
TOTAL:	\$ _____	\$ _____	\$ _____	\$ _____

Add \$50 for same day Conference registration and lunch is on your own. **NO REFUNDS after April 15, 2013.**

BENO 23rd Annual Conference:
 Culture, Religion and Clinical Ethics
 Education co-provided by Midwest Care Alliance and BENO
There are 6.5 contact/clock hours for this conference

Midwest Center for Home, Hospice and Palliative Care Education (OH-248/4-1-15) is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.



Midwest Center for Home, Hospice & Palliative Care Education is a Counselor (#RCX011101) & Social Work (#RSX020502) approved provider of continuing education by the Ohio Counselor, Social Work, & Marriage & Family Therapist Board. Provider status valid through 11/13

Note that the conference in its entirety has been approved for clock hours; however, some sessions may not be appropriate for Social Worker or Counselor continuing education. Please contact Beth Griebel, beth.griebel@midwestcarealliance.org, with any questions.

No commercial support was received for this educational event.

Criteria for successful completion & receipt of Contact/Clock hours:

Attending the entire session(s). Participant will receive contact hours only for session(s) attended.
 Prorated contact hours will be offered.

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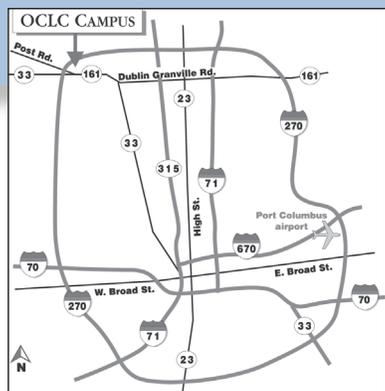
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Serving Ohio as an educational resource in healthcare ethics.

Take advantage of early registration!

Bioethics Network of Ohio
Annual Conference
Friday, April 26, 2013

*“Culture, Religion
and Clinical Ethics”*



**The Conference
Center at OCLC**
6565 Kilgour Place
Dublin, OH 43017-3395

*Conference brochure and
registration form inside*

