

What is the Moral Good of ACP??



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Is ACP'ing' dead in the water??



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Since last we met.. And thanks for having me back!



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## The Cunning Plan

- News since last time
- Talk about Medical Examiners
- Are Acps a 'construct'? Why do we think that ACPs are a good thing- why should we think that they are a good thing?

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**Willis D George R Conscientious  
Objection and Physician Assisted  
Suicide: a Viable Option in the  
UK? *BMJ Supportive and Palliative  
Care* 2018 Nov**

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Have people come across changes since Gosport?

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- 'PRN' syringe drivers
- Prn drugs- reason – number of doses in 24hrs- space between doses- when to ring for advice
- document clear instructions for when and how to take or use the drug in the person's care record
- include dosage instructions on the prescription (with the maximum daily amount or frequency of doses)

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Does anyone have experience of Medical Examiners ?



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- Its not statute at the minute
- Hospitals only
- Community in 3 years
- Get in early ?? Help out hospitals

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April 3rd



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## Role of Philosophy

- What is the good...?
- What do we mean by??
- Why do we do??

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Doesn't go down well



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### What is the difference between DNACPR, advanced decision to refuse, PPD??



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- DNACPR- futile –informing Tracey, Winspear
- Refusal- assault battery
- PPC D- where do they fit??
  
- Distinct differences between types of diseases

Therefore 3 quite distinct discussions

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### So what is the benefit and who benefits??



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## Autonomy



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- Autonomy on its own??
- Beneficence- non maleficence- justice

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So if I don't know why bother



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ACP as a good process rather than end



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PPC as a journey



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- So ACPs are good for me as a discussion not necessarily as an end point
- They are also good for relatives- what do I need to do in the future
- There is also gain for staff as - this is what they would tell me if they were here

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### Does it matter if there is no evidence?



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- Lets get the question right
- Things that are just right- without an outcome

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What is right choice preference???



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### Oxford Dictionary

- **Choice** -
  - An act of choosing between two or more possibilities.
- **Right** –
  1. that which is morally correct, just, or honourable
  2. a moral or legal entitlement to have or do something.
- **Preference** –
  - A greater liking for one alternative over another or others.

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### Right

- *Choices backed by legislation, enshrined by Law*
- *“What patients are entitled to”*
- *“Patients rights are backed up by law i.e. they have the right to withdraw from treatment.”*

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## Choice

- *Choosing from options available”*
  - *“The ability to choose how and where they are cared for within reason and within the boundaries of law once they have all the information needed to make that choice. Not always possible to fulfil e.g. PPC, PPD”*

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## Preference

- *What a patient would ideally like to happen to them/their care. Not always achievable due to circumstance but taken into account and acknowledged.”*
- *“it is what they would want in an ideal situation”*

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So what do we offer patients and what is their expectation of what they are saying ‘ yes’ to?

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Do we cause harm by this?



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Any experience of 'failed' ACP for relatives??



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More than one Autonomy



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## Medical Paternalism



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## Do we harm ourselves as health care professionals

- Realistic outcomes- cant make a horrible situation perfect

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- So we create problems if we create unrealistic or undeliverable expectations
- Leave problems for relatives- I failed them
- List of options

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- I do think this is a good idea- honest!
  - BUT
- What do we mean by the different parts
- It's a good process not a good outcome
  - It's a preference
  - We have to allow people a journey
- We have to allow ourselves not to be perfect
  - Relative's autonomy

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Thank you



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