

Healthcare Ethics Committee (HCEC) of NBC
Tuesday, August 20, 2013, 9.00 am to 12.30 pm (Meeting #4)

Venue: CBEC-SIUT, Karachi

Present: Aasim Ahmed (AA), Haroon Ahmed (HA), Aamir Jafarey (AJ), Shaukat Jawaid (SJ), Farid Khan (FK), Abdul Ghani (AG), Farhat Moazam (FM), and via Skype Asma Humayun (AH) and Saima Parvez Iqbal (SPI)

Minutes: by FM

1. Welcome:

FM welcomed the three new committee members – AG, AH, and SPI – to the meeting and expressed appreciation for their willingness to assist HCEC in areas of their expertise. This was followed by a quick round of introductions.

2. Review of minutes of previous meeting and matters arising:

The minutes were reviewed and approved without amendment. The following points were noted in matters related to the last minutes –

A) Item # 2: The process by NBC Secretariat to replace its chronically absent/retired members with new ones selected from names submitted to it by university/institution heads, has not been completed (as expected in June). The replacements were to include a PMDC representative, an important person for HCEC and its activities. There have been no NBC meetings this year and members remain unclear as to where this matter stands.

***Task: HCEC members request that NBC Secretariat provide at least an email update about the progress in appointment of new NBC members including the PMDC representative.**

B) Item # 4: At HCEC request, Shahid Shameem (SS) has kindly agreed to help HCEC in formatting the proposed document “Undergraduate Ethics Curriculum Guidelines.” Following the last meeting, members had turned in modified drafts of sections entrusted to them and these were forwarded to SS. He, with input from AJ and FM, has prepared the first rough draft of the document (circulated earlier to members) and discussion of this is the next agenda item today.

3. Discussions on Undergraduate Ethics Curriculum Guidelines draft:

In the time available, members were able to discuss most (but not all) sections of the document in considerable detail reaching consensus on changes/modifications in language, objectives, content, etc. It was decided that these will be incorporated in the sections (by assigned HCEC members) and emailed to FM as soon as possible. Discussions on the resultant draft, and sections not covered today, will be a major item for the next meeting.

***Task: HCEC members must modify their sections (as assigned below) and email these to FM no later than Sept. 10, 2013. Her office will email reminders a week before the deadline.**

1) *Preamble, Introduction, Need for bioethics education in Pakistan* (pages 1-3): A minor modification (mention of daily encounters with unethical practices) was suggested and will be incorporated in the text.

***Task: FM**

2) *Competencies, Broad objectives, Modes of teaching, Assessment tools, Faculty support* (pages 4-6): These were discussed in considerable detail and several changes were suggested in formatting and language use. Case scenarios are also required as attachments to help teaching faculty initiate student discussions.

***Task: AJ and FM**

3) *Course overview, Introduction to bioethics, Clinical ethics* (all sections, pages 7-12, organ transplantation page 14): These sections, constituting the bulk of the guidelines draft, were also

reviewed and several suggestions offered, including that brief cases and PDF of Pakistan Organ Transplantation Law should be added as attachments.

***Task: AJ and FM**

4) *Medical errors* (page 13): The following were agreed upon for this section – a) Combine objectives bullets into a total of 3 or 4, b) Provide references/attachments for classification of errors, c) Provide illustrative cases, as attachments, to facilitate faculty teaching.

***Task: AA**

5) *Teaching and training vs. patient care* (page 13): This section was not discussed. However the content outline is missing and should be added.

***Task: SPI**

6) *Physician pharmaceutical interactions* (page 14): It was suggested that – a) In “objectives,” the third bullet should be changed to “Ways of handling COI,” and the last bullet be deleted, b) A content outline should be provided using the format employed in other draft sections.

***Task: SJ and FK**

7) *Human subject research* (pages 15-16): An agreement was reached that - a) Objectives and content outline should be organized in 3 sections pertaining to specific aspects of such research to facilitate teaching faculty, b) Review and changes needed for the verbs beginning each objective, c) Appropriate case scenarios are required as attachments.

***Task: AA**

8) *Public health ethics* (page 16): The drafts sent by AA and SPI were reviewed and found to have enough overlap for easy merging. AG thought it important that content outline includes basic definition of public health ethics and how this differs from medical ethics. WHO has relevant material about this, and AA said he too has appropriate references which they will email to SPI. She agreed to redo this section with input of AG and AA.

***Tasks: i) AG and AA will email appropriate documents/references to SPI. ii) SPI will remind them of this as needed, and is responsible to modify and submit the PH section.**

9) *Plagiarism and scientific misconduct* (page 17): The following need to be done – a) The last bullet in “objectives” should begin with the word “understand” (not analyze), b) Two to three bullets required for content outline (detailed course content submitted previously will appear as an appendix), c) A couple of brief, illustrative cases of misconduct as attachments.

***Task: SJ and FK**

10) *Ethics of mental health care* (pages 17-20): HA and AH played the major role in the detailed discussion of this section, organized under 3 sections, with occasional input from other members. Among others, suggestions included attaching the WHO list of the 10 leading causes of disease burden (Section 18, objectives), merging items b. i and b. ii in content outline (Section 18). HA suggested listing only 6 important ethical issues apparent in the Sindh Mental Health Ordinance, 2013 rather than attaching the text of the entire Ordinance (Section 20, objectives).

***Task: HA and AH will collaborate on modifying and resubmitting this section**

11) *The issue of time allocation for ethics education*: There was a consensus that the current document lacks recommendations about how much curricular time should be allocated for covering different ethics subjects/themes. The difficulty is that medical and dental curricula tend to be very full, and there is no uniformity in time spent or methodology used in ethics education in institutions that undertake this currently in Pakistan. Nevertheless, some members felt it important to include recommendations for what would constitute appropriate time. AA suggested that this could be worked out by assigning “units” to each topic based on importance/content.

***Task: Will be discussed by members in the next HCEC meeting**

4. Ethics workshops in Balochistan (Quetta):

AG informed members that based on a communiqué from NBC (in 2012), Balochistan provincial government had constituted a Provincial Bioethics Committee (PBC) as instructed. This consists of 6 members (including AG), and this information was conveyed to the NBC. However there has been no further direction to PBC since and the committee has never met. In AG’s opinion,

there is a great deal of support for ethics related activities in Balochistan. He illustrated this by narrating responses to the ethics educational sessions he takes with nurses and other staff.

The consensus HCEC members arrived at was that NBC should undertake ethics workshops in Quetta, beginning in 2014, with the help of the PBC. It was noted that it has been almost 2 years since NBC has organized any ethics workshop in the country. In the first Quetta workshop, HCEC members suggest that in addition to sessions on clinical and research ethics, sessions be included for PBC members to help them develop the TOR and provide guidance about their responsibilities. With AG as its member now, HCEC will be happy to develop the content, as well as organize and help to conduct these workshops in a province that has not been given the attention it deserves.

***Task: The NBC Secretariat is requested to respond to this suggestion as soon as possible so that this matter can be discussed in the next HCEC meeting (in November).**

5. HCEC website discussion:

This matter was deferred due to lack of time.

***The next HCEC meeting will be held on Tuesday, November 26, 2013.**