

# Certification for Health Care Ethics Consultants: An Update

## May 2017

In July 2016, the American Society for Bioethics and Humanities (ASBH) appointed a Healthcare Ethics Consultation (HCEC) Certification Task Force and engaged PSI Services (PSI) to conduct a role delineation study and needs assessment to evaluate ASBH's strategic position and the feasibility of a voluntary, professional certification program for individual HCECs.

The task force, with the assistance of PSI and the ASBH staff, completed its work in February 2017. At its April 2017 meeting, the ASBH Board of Directors considered the group's final reports, determined that ASBH is well positioned to invest in a program that will validate HCEC professional knowledge and professional legitimacy, and approved in concept the development of a certification program.

The next steps are to refine the competencies, structure, charges, and budget for the group of volunteer leaders that will lead this effort. The board anticipates opening a call for applications after its July meeting and making appointments in September.

### Needs Assessment Survey

A majority (74.8%) of the 787 respondents to the needs assessment survey favored the development of a certification program, for the following reasons:

#### How Will Certification Benefit You?



In addition, approximately half (50.8%) expect their employer to provide financial support and a majority of the sample (66.4%) expect to apply within the first year. Overall, the development of a new certification examination program for HCECs seems feasible.

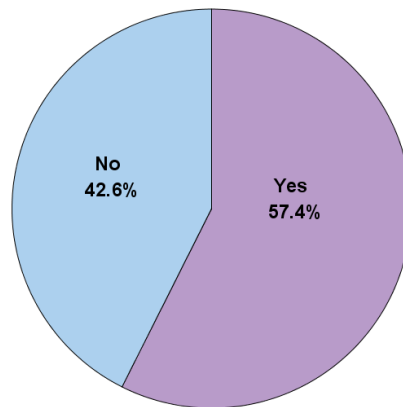
### Role Delineation Study

The identification of the knowledge requirements and tasks of healthcare ethics consultants is a first step in the development of job-related certification examination specifications. To this end, the HCEC Certification Task Force, working with PSI consultants, designed and conducted a role delineation study to support the development of specifications upon which a content-valid certification examination could be built.

In August 2016 a survey was sent to 2,643 unique individuals chosen from the ASBH database on the basis of primary discipline, primary responsibility, area of expertise, and primary work setting. In addition, an invitation to participate and a link to the survey was featured on the ASBH home page and distributed through multiple channels including listserves, blogs, bioethics groups, and contacts in various organizations and health systems such as the VA.

These efforts were successful in attracting a large number of HCECs beyond the ASBH membership to participate in the survey.

### Are you an ASBH member?



For purposes of the survey, the task force adopted the following practitioner definition of a healthcare ethics consultant:

*The health care ethics consultant provides services in response to questions from patients, families, surrogates, health care professionals, or other involved parties who seek to resolve uncertainty or conflict regarding value-laden concerns that emerge in health care. The health care ethics consultant holds a distinct role within an organization responding to clinical ethical concerns and questions that arise in the delivery of health care.*

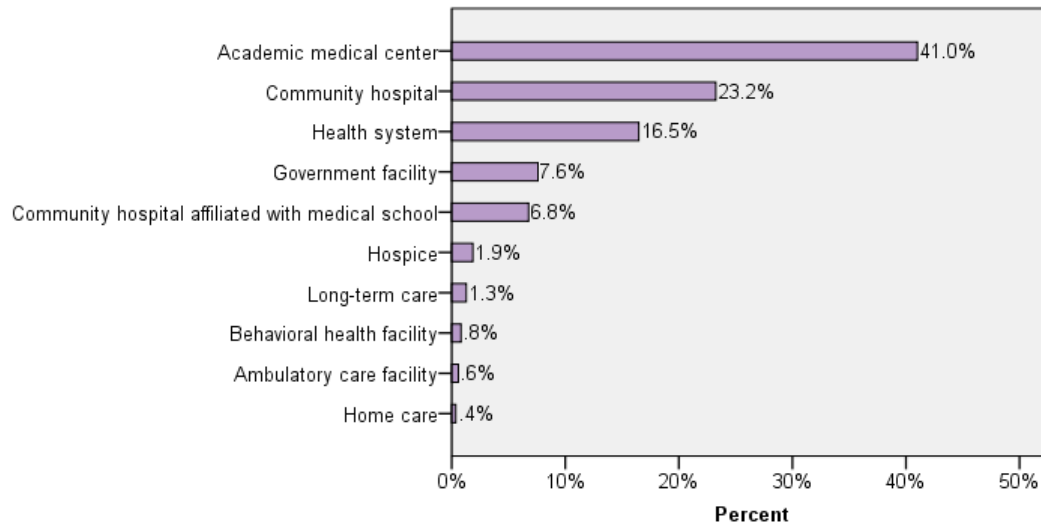
*The general goal of the health care ethics consultant is to improve the quality of health care through the identification, analysis, and resolution of ethical questions or concerns. This consultation is often performed in conjunction with other health care ethics activities, such as educating health care professionals, developing organizational policies, serving on organizational committees, and producing scholarly work.*

Out of 905 who responded to the practitioner definition question, 864 (95.5%) identified themselves as healthcare ethics consultants. Approximately 96% of the respondents felt that the role delineation study at least adequately addressed the knowledge required to perform critical tasks and the responsibilities of healthcare ethics consultants, and respondents used all rating scales with an acceptable level of reliability.

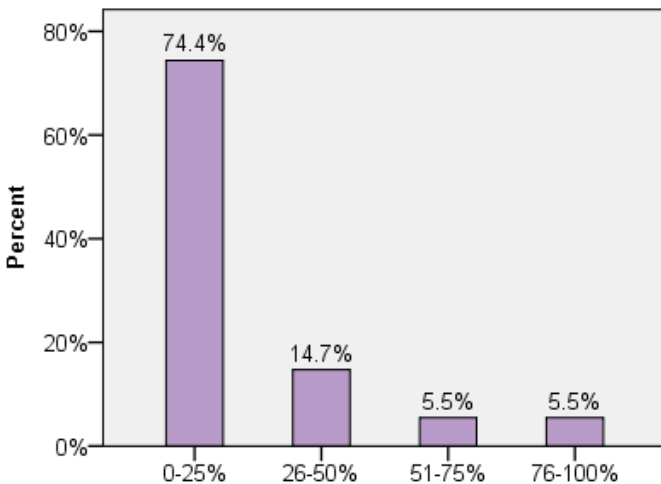
Of particular importance to a national certification examination program is that the examination specifications appropriately reflect the knowledge requirements and task responsibilities of all groups who will participate in the certification program. It is important to ensure that neither the

examination specifications nor the resulting examination include tasks or knowledge statements that are not considered to be important for those for whom the examination is intended. The responses to the demographic questions indicated that there were sufficient numbers of respondents in relevant subgroups for subsequent analysis

**In which of these work settings do you primarily provide healthcare ethics consultation?**



**What percentage of your time is devoted to healthcare ethics consultation?**



**Examination Specifications and Detailed Content Outline**

In its review of the results of the role delineation survey, the HCEC Certification Task Force identified 63 knowledge statements and 39 tasks that could be appropriately assessed by way of 100 multiple-choice examination items, and classified all content as requiring recall, application, or analysis on the part of the candidate. These are the basis of the examination specifications, a confidential document used to guide the development of comparable examination forms. The detailed content outline is a subset of the exam specifications that will eventually be made public for use by candidates in preparing for the exam.