

LESSON PLAN: A Discussion about Honesty, Integrity and Professionalism

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Facilitator Preparation

About the tutorial: The lesson plan aims are to introduce students to a discussion on honesty and integrity in interactions with peers, colleagues and patients. The tutorial is designed for a group of 20 students, however, the lesson plan provides options for accommodating a larger audience. The tutorial is designed for students in clinical years, however, the vignettes of the second task can be adapted to suit students in pre-clinical years.

Using the guide: Below is a *lesson plan outline* with suggested timings, learning objectives, a brief outline of the activity and relevant quotes from the *GMC: Achieving Good Medical Practice - a guide for students*. These quotes can be used by the facilitator to refer to sections of the guidance if students have any questions. Comprehensive instructions on how to carry out each task are located below the lesson plan outline. Each task has a **support section** with suggested questions to help engage students who are struggling, as well as **challenge questions** if the initial task is easily achieved. However, these are only suggestions and we would encourage the facilitator to form questions directly relevant to the current discussion. There are 3 appendices containing learning material for each task; Appendix 1 and 2 contain learning materials for tasks 1 and 2 respectively and appendix 3 contains the script for the text message video which can be used to review any messages that students missed on the video.

Before the lesson, the facilitator should have:

- Read through all the learning material
- Have printed off the resources located in appendix 1 and 2 and distributed them into the group “learning packs” for each table.
 - These resources can be laminated and reused
 - **NB** appendix 1 need only be printed once but 2 copies of appendix 2 must be printed
- Loaded the video onto a projector/monitor large enough for everyone to see
- Have prepared the room using the instructions below

Room Preparation:

- The room should contain two desks large enough to fit 10 students around each of them or enough space for two circles each consisting of 10 chairs.
- The room should also contain a projector/monitor large enough for the entire class to see
- The learning packs containing the printed materials (see appendix 1 and 2) should be placed in the centre of each table

Student Briefing: Before the lesson is carried out, the facilitator should explain to the students that anything which is said during the lesson should remain confidential. This will help to create a safe space and encourage students to actively engage with the discussion.

Lesson Plan Outline

Time (Mins)	Section and Learning Objectives	Activity	GMC Guidance
0 - 1	<u>Introduction</u> <ul style="list-style-type: none"> Overview of session and introduce learning objectives. 	Facilitator introduction. Project the learning objectives onto the screen or have them pre-written on the flip chart. Read through the objectives.	
1 - 9	<u>What is honesty and integrity to you?</u> <ul style="list-style-type: none"> Create an accurate definition of both honesty and integrity which bears significance for the students. Compare and contrast the student's definitions of honesty and integrity with standard definitions. 	Facilitate the task ' A Story Through Texting ' to engage students into thinking about honesty and integrity and which are the most important aspects of these values using a story that they can relate to. Having created their own definitions of honesty and integrity and compared these with standard dictionary definitions, a greater understanding of the meaning of these two values should be achieved.	<p>[40] <i>'You must treat your colleagues with respect. This includes your fellow students...'</i></p> <p>[44] <i>'When communicating with patients you must be honest when you don't know something ...'</i></p> <p>[48] <i>'You must ... treat all peers and colleagues fairly and with respect [and] understand that your own behaviour can influence how well a team works ...'</i></p> <p>[50] <i>'As a medical student, you may ... be asked to give feedback about your peers. If you are asked to do this you must do so in an honest, constructive, open and fair way'</i></p> <p>[70] <i>'Medical students must treat their colleagues with respect ...'</i></p> <p>[73] <i>'As a student aiming to join a trusted profession, you have to meet a higher standard of behaviour than other students, who are on courses that don't directly lead to joining a profession'</i></p> <p>[Page 46 Box] <i>'Behaviour outside of medical school'</i> gives examples elaborating on paragraph 73.</p>

<p>9-19</p>	<p><u>Honesty and integrity as values in clinical practice</u></p> <ul style="list-style-type: none"> • Recognise that uncertainty is common in clinical practice. • Highlight that acting with honesty and integrity can help one approach difficult and uncertain situations. 	<p>Begin the 'The Thin Red Line' task to highlight that as medical students and doctors we will come across uncertainty frequently in clinical practice and the best way to approach these situations is with honesty and integrity.</p> <p>Make sure you link the discussion back to the 'Story through Texting' task and the definitions of honesty and integrity which the students developed.</p>	<p>[Page 23 Box] <i>'... Professionalism is not about doing the minimum - it is about doing what is necessary to protect patients'</i> This characterises the meaning behind most of the guidance and runs throughout this task.</p> <p>Specific areas:</p> <ul style="list-style-type: none"> • Scenario A [44] <i>'When communicating with patients you must be honest when you don't know something ...'</i> • Scenario B [6] <i>'Registered doctors must recognise and work within the limits of their competence'</i> [7] <i>'As a medical student, this applies to you...you should only treat patients or give medical advice when you are under the supervision of a registered healthcare practitioner... You must: recognise the limits of your competence and ask for help when necessary [and] make sure you clearly explain your level of competence to anyone who supervises you on a placement, so you are not asked to do anything you are not trained to do'</i> • Scenario C [55] <i>'As a medical student ... you must ... treat patients fairly and with respect, no matter what your own thoughts are about their life choices or beliefs...'</i> [62] <i>'As a medical student, you also have the right to</i>
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			<p><i>hold a conscientious objection to some types of treatment...'</i></p> <p>[66] <i>'Treating patients with respect includes not expressing your personal beliefs to patients in ways that exploit their vulnerability or would cause them distress.'</i></p> <p>[69] <i>'As a medical student, you won't be expected to make decisions about treatment options. But you mustn't let your own opinions or views affect the way you treat patients and others or the information you give them.'</i></p> <p style="text-align: center;">• Scenario D</p> <p>[Page 15 Box] <i>'Consent - things to remember ... if you have any concerns about whether a patient has given consent to you being involved in their care or undertaking any type of procedure, talk to your supervisor ... you should not carry out any procedure on a patient without their consent for that specific procedure.'</i></p>
19 - 20	<p><u>Plenary</u></p> <ul style="list-style-type: none"> • Reflection 	<p>At the end of discussion, wrap up with our three take home messages:</p> <ul style="list-style-type: none"> • Acting with honesty and integrity is just as important with peers and colleagues as it is with patients • Honesty and integrity are values essential for safe clinical practice as medical students and doctors • Acting with honesty and integrity can help when approaching difficult and uncertain situations. 	

A Story Through Texting - Video and Discussion

Learning objectives

- Create accurate definitions of both honesty and integrity which bear significance for the students.
- Compare and contrast the student's definitions of honesty and integrity with standard definitions.

Task/Discussion

With the students already in their 2 groups and before watching the video, explain that **group one** will be analysing the video for qualities of **honesty** and **group two** will be looking for values of **integrity**. They should jot down any ideas they have about their assigned quality whilst watching the video.

Watch the 2 minute video available at <https://youtu.be/3gldzrU2a0U>

Starting with **honesty**, ask group one which actions were most honest/dishonest. How did they come to their decision?

With the **integrity** group, ask them who they believed acted with integrity? What actions did Vignesh and Anita (video characters) act with integrity.

With these views in mind, give the students 3-5 minutes to develop their own definitions for honesty and integrity. Ask them not to look at the standard definitions available in their packs. Allow the students to relate their definitions to clinical practice.

Ask a student from each group to read their definitions of honesty and integrity as well as the standard definitions of honesty and integrity available in their pack and read them out to the class. Do they agree with these definitions? Why?

Support Questions

If the discussion needs some stimulating here are some examples of questions you can ask to the whole class or to individual groups:

- Who in the video acted with/without integrity?
- Are there any other values important in integrity? Moral values? Ethical values? Personally held beliefs?
- If the students have difficulty creating a definition for integrity, ask them to think about the characters in the video who didn't have integrity. How would someone act if they did have integrity?

Challenge Questions

- If time is allowing, ask the integrity group how personal values (as part of the values of integrity) can affect delivery of care to a patient.
- Ask the honesty group whether they've experienced positive experiences where doctors have been honest and open with their patients and this has improved their rapport with them.

The Thin Red Line

Learning Objectives

- Recognise that uncertainty is common in clinical practice
- Highlight that acting with honesty and integrity can help one approach difficult and uncertain situations

Resources required

- 'Thin Red Line' chart
- Table of scenarios lettered A – D
- Cut out letters A – D
- Flip chart with the 'Thin Red Line' chart drawn on by the facilitator

Ask the students to take the "Thin Red Line" chart out of their packs. The chart shows a scale along the bottom ranging from "acting with honesty and integrity" to "not acting with honesty and integrity". A "thin red line" along the centre demarcates the division point between the two. Ask the students to place the scenario letters (A-D) on the scale in their packs depending on whether they think **the student** in each scenario is acting with honesty and integrity or not.

Each group should assign one person to write down any questions with **group one** focussing on **honesty** and **group 2** focussing on **integrity**.

Allow students 4 minutes to complete this task in their groups before bringing the class together. Ask group 1 to read out which lettered scenarios they put before and after the red line and how far away from the line they put it. Write the letters on the chart on the flipchart with the students directing the positioning of the letters. Ask group 2 to do the same.

Discussion

Begin the discussion by identifying if there are any differences between the two groups

- If **there are differences** then start with these scenarios for discussion and explore why the groups think differently. Ask if any group had written down questions about these scenarios and if they think there are issues around honesty or integrity or both.
- If **there are no differences**, start by asking group 1 or 2 which they thought was the most important question they wrote down about the scenarios.

During the discussion **be sure to mention** that there are rarely clear cut answers in uncertain situations and the most important thing is to know where to go to for help and advice. **Highlight** that *GMC: Achieving Good Medical Practice - advice for medical students* is a good place to start and provides information about where to find out more detailed information on specific issues such as consent in paragraph 10 or confidentiality in paragraph 58 of the guidance.

Support Questions

- Would your opinion on scenario B change if the patient was an elderly frail gentleman?
- What do you think the consultant's response should have been in scenario D?

Challenge Questions

- If the condition in scenario A was a less serious one than muscular dystrophy would this change your opinion? If so, can we be so absolute about values such as honesty and integrity?
- Is it always a good thing not to express your own ideas and beliefs to patients?

honesty

NOUN

mass noun

- **1**The quality of being honest.
'they spoke with convincing honesty about their fears'
-

honest

ADJECTIVE

- **1** Free of deceit; truthful and sincere.
'I haven't been totally honest with you'
 - 1.1** Morally correct or virtuous.
'I did the only right and honest thing'
-

integrity

NOUN

mass noun

- **1**The quality of being honest and having strong moral principles.
'a gentleman of complete integrity'

APPENDIX 2: THE THIN RED LINE LEARNING MATERIALS (PRINT x 2; 1 for each group)

Letter Scenario

A During your paediatrics placement you are talking to the parents of a child who has recently been diagnosed with muscular dystrophy. Your consultant gave you a tutorial on this yesterday but you were on your phone and not listening. You don't want the parents telling the consultant you did not know what the condition was, so you make up some information based on some vague memories from your lectures in first year.

B You are on your acute medicine placement. The department is extremely busy and your registrar asks you to cannulate Mr Page a 26 year old gentleman. You have only practised cannulation in the skills lab but think this should be an easy patient so you decide to attempt cannulation alone and are successful on your third attempt.

C You and a fellow medical student Henry are on your O&G placement. The next case in theatre is of a termination of pregnancy but this procedure does not fit with Henry's religious views. Before the patient arrives he politely asks the consultant if he can step out for this case due to his beliefs. The consultant accepts and asks you to contact Henry when the procedure is over.

D You are in theatre and your consultant instructs you to perform a breast examination on the anaesthetised patient in front of you about to undergo a left mastectomy. You are apprehensive as you have not gained consent from the patient and explain this to the consultant. He tells you "don't worry; I know this patient well she would be happy for you to do the examination". You therefore perform the examination under the consultant's supervision

A

B

C

D

The Thin Red Line

Acting with honesty and/or integrity

Not acting with honesty and/or integrity



APPENDIX 3: SCRIPT FOR 'A STORY THROUGH TEXTING'

JAKE: Haha did you hear about my tutorial today?

ABDUL: No why what happened?

JAKE: So funny, Anita totally bombed in front of our consultant and the patient

ABDUL: What did she say?

JAKE: Literally just kept saying I don't know and I'll go find out, the consultant was like why don't you know anything and then she started crying (insert laughing emoji)

ABDUL: Hahaha what were you doing?

JAKE: Just standing there cringing

ABDUL: haha omg Jake just told me Anita was actually crying in front of her consultant

JULIET: What happened?

ABDUL: Apparently she didn't know anything consultant was going crazy and the patient too

JULIET: No wayyyyy need to tell Alex he is going to love this (another emoji)

JULIET: Guess who had a mental breakdown in front of everyone and made a patient cry....

ALEX: Ehhh... go on tell me

JULIET: Anita!

JULIET: Guess who had a mental breakdown in front of everyone and made a patient cry....

VIGNESH: Omg was it you?

JULIET: Haha shut up no it was Anita

VIGNESH: Was she okay after it?

JULIET: Dunno just heard from someone who was there

VIGNESH: What actually happened?

JULIET: (Juliet types a false story, deletes the story and re-types it multiple times before replying) Dunno, I'll ask

VIGNESH: Hey how was today?

ANITA: Yeah it was okay, had to spend an hour in the library after tutorial today at least I'm now basically a walking textbook for AF

VIGNESH: Heard you had a bit of a nightmare with the consultant?

ANITA: It wasn't too bad, didn't really know anything so just said so

VIGNESH: So you weren't crying then?

ANITA: No....who said that? Was only me and Jake there...

ANITA: have you been telling people I was crying today in that tutorial?

JAKE: NO haha was just saying that you didn't know any of things the consultant was asking...

ANITA: Yeah well I didn't actually know, did you?

JAKE: I would have at least tried to just make something up, better than just looking like an idiot in front of the patient with 'I don't Know'