Review of the IME Core Curriculum for Undergraduate Medical Ethics and Law

The core curriculum is intended to include only topics that are essential/necessary to prepare students for practice as a Foundation Doctor, rather than items that it would be desirable for students to know/be able to do.

AIMS

To equip students to identify ethical and legal issues in medical practice, have a critically reflective approach to those issues, and be able to give a reasoned justification of the actions they would take in line with the knowledge, attitudes and skills in the rest of this document.

BACKGROUND

The IME published the first core curriculum for medical ethics and law in 1998. This was revised in 2009 because the original was considered to be “dated with regard to topics and emphasis” and included “some subjects...more appropriate for postgraduate than undergraduate study”.¹

In order to ensure that the 2009 core curriculum remained relevant, we undertook a further review in 2017-18. A great deal of the updated curriculum remains the same in terms of topics, although there have been changes in emphasis, presentation, and the inclusion of some new topics, to reflect the fact that medical law, ethical issues in medical practice, and medical science, have evolved. Furthermore, mindful of the pressures on the medical curriculum as a whole, we decided to review which topics it was necessary to include, with a focus on preparing students for the reality and demands of life as a Foundation Doctor. The revised curriculum, therefore, does not represent an ideal or aspiration, but the basic elements of an ethics and law education that will prepare students for their first years as a doctor. The reflective skills and ethical awareness that they develop will, however, equip them for their longer career, in whatever area of medicine they choose to specialise. The aim is still to equip our students “for a lifetime of good practice and learning” while recognising that the undergraduate curriculum cannot include all that they will need to know in the future.²

We asked for the views of all lead teachers of medical ethics and law in all UK medical schools, the UK’s Chief Medical Officers, the GMC, and delegates at our annual Education Conference in 2017 who provided feedback on an early draft. We are grateful to all who

² Ibid.
have contributed, and hope they recognise that while we could not accommodate all of their suggestions we welcome their engagement and input. This document also has the support of the GMC who have helped map the revised curriculum to their new *Outcomes for Graduates*. Specific links to *Outcomes for Graduates* are indicated within each section.

**FUTURE PLANS**

We are in the process of creating a dynamic, web-based version of this updated curriculum. There will be further information for each section, including advice on teaching, assessment, and resources (including professional guidance, relevant statutes and case law, books, articles, programmes, journalism, and other web sites), as well as elaboration on the more complex or demanding topics and concepts. In this way, the online version will function as a toolkit for *how* to teach and assess the curriculum rather than simply an online repository of *what* to teach.

We recognise that recommending what to teach is just a starting point. Effectively implementing that recommendation is crucial to preparing our students to be competent and successful doctors; hence the plan to provide guidance on how to translate the core curriculum into a practical reality in medical education. The online supplementary guidance will be developed in stages during 2019-20.

While the core content of the curriculum will not change until the next review (some years hence), we will update and revise the online supplementary guidance to keep the advice up to date to reflect, for example, new case law or changes in professional guidance, and to incorporate new teaching resources and references.

This work was conducted by the IME’s Education Committee, overseen by the Board of Trustees, with the help of the GMC, the medical school leads for ethics and law who responded to the request for input to the review process, and delegates of the 2017 conference.

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Students should be able to:

- Recognise that ethics is part of everyday clinical encounters (2c)
- Recognise the implications of practising medicine in a diverse and multicultural society (2j, 14)
- Assess the influence of different values, assumptions and attitudes of those involved in decisions relating to medical practice. This includes patients, carers, other healthcare and social care professionals, policy makers, and students themselves (2j, 6a, 6c)
- Recognise the implications of working as part of a multi-disciplinary team, especially in relation to different perspectives on care (2m, 8a, 8b, 8c, 9)
- Recognise the duty of doctors to respect patients’ rights, interests and dignity (2d, 2l, 2n, 6a, 6b, 11b, 11e, 11f, 14j, 14k)
- Evaluate the rights of patients and defensible justifications for limiting the scope of those rights (2d, 2l, 4, 7g, 11e)
- Recognise that doctors practise in conditions of complexity and uncertainty (1, 6)
FOUNDATIONS OF MEDICAL ETHICS AND LAW

Students should be able to:

- Recognise different approaches to ethical theory, values, and reasoning that inform decisions in medical practice, policy and law (2c)

- Analyse and apply the legal framework (statutes and case law) relevant to the jurisdiction that applies to their clinical practice (as this differs among the nations of the UK) (4)

- Distinguish between the moral, legal and human rights relevant to medical practice (2c, 4)

- Demonstrate that the patient’s dignity and perspective is critical to all clinical encounters (2d, 10a, 11b-c, 14b)

- Demonstrate an understanding that the concept of medical benefit extends beyond the biomedical model (6e)

- Evaluate the concept of respect for patient autonomy, and identify situations in which it may not apply or may justifiably be outweighed by other considerations (2l, 2m, 12, 14j)
Students should be able to:

- Critically examine and apply General Medical Council guidance (2), principally relating to:
  - the need to promote best practice and respect for patients, colleagues, and other healthcare professionals [HCPs] (8b)
  - professional standards expected of students
  - respecting the different beliefs of patients, students and other HCPs (6a, 6b)
  - duty of candour (2n)
  - maintaining professional boundaries with patients (5a)
  - conscientious objection and its limits
  - potential conflicts of interest use of social media

- Discuss the importance of trust, integrity, honesty and accountability in all professional relationships (2e)

- Recognise the limitations of their practical skills and knowledge, and to know how and where to seek appropriate sources of support [including when working abroad or in resource-poor environments] (2h, 2u, 3, 13)

- Identify and appropriately respond when there is cause for concern, when things could be improved, and when they go wrong (2n, 2o, 5c, 5f, 5g)

- Apply professional guidance across all clinical contexts, including while working abroad and in resource poor environments (2s)

- Consider the extent to which expected professional conduct extends into private life (2, 3)
Students should be able to:

- Demonstrate the application of the key principles of the consent process (2k, 2l, 10, 14k, 26b)

- Demonstrate an understanding of how the concept of capacity relates to everyday decision-making (2l, 11d, 11e)

- Analyse the legal and ethical implications of the rights of a patient with capacity (2k, 2l, 4, 14i, 14j, 14k)

- Discuss the scope of the patient’s right to request specific treatments and the issues surrounding respect for patient autonomy (6b, 7b, 11b, 11f, 14, 14j, 18d)

- Discuss the scope of the patient’s right to information about their diagnosis and treatment options, and when withholding information can be justified (2k, 2l)

- Discuss how to approach situations where patients have capacity but are otherwise vulnerable (7, 7b)

- Evaluate the best interests of patients who lack capacity, including the appropriate weight to be given to the views of their relatives/carers (2l, 11f, 14)

- Analyse the ethical and legal aspects of restrictions on liberty, the rights of patients who lack capacity, and the use of restraint in patients who lack capacity (2l, 4, 14b)
Students should be able to:

- Discuss the concept of confidentiality and its ethical, legal and professional underpinnings (2d)

- Demonstrate awareness of when it is ethically, legally and professionally justifiable or mandatory to disclose confidential information, and how to do this appropriately (10, 19b)

- Discuss the ethical and legal aspects of the use, transmission and storage of all types of personal data (4, 19b)

- Outline good practice in sharing information with relatives, carers, and other HCPs, recognising potential ethical and legal tensions (6c, 10)
Students should be able to:

- Analyse principles and criteria for just and sustainable access to, and provision of, finite healthcare resources including referral, investigations and treatment (14e, 14l, 18, 24d)

- Discuss the ethical and legal issues involved in balancing different stakeholder interests in the distribution of healthcare resources (25f)

- Discuss local, national and global priorities in relation to clinical decisions and policy (25)

- Evaluate the potentially conflicting roles of the doctor in promoting health, acting as an advocate for individual patients, and tackling health inequalities (24d, 25, 25d)

- Explore the ethical issues surrounding the notion that individual patients are responsible for their own health, and consider the impact of social determinants of health (7h, 24d, 25c)
Students should be able to:

- Demonstrate the ability to respect the rights and interests of children and young people (2k, 4, 10b, 11b, 11d, 11e, 11f)
- Describe the law relating to the capacity of children and young people to consent to and refuse treatment, and analyse the ethical implications of this (2k, 2l, 4)
- Outline the duty of confidentiality in relation to children and young people, and analyse the ethical implications (2d)
- Explain the respective roles of parents/guardians, HCPs and the courts in best interest decisions about the treatment of children and young people (2c, 2k, 2l)
- Assess the ethical and legal issues arising from safeguarding, including the impact of cultural practices on a child’s health (4, 5a, 7a, 7c, 7f)
Students should be able to:

- Describe the ethical, legal and professional implications of the care of patients with mental illness (2, 2l, 4, 5a, 6a, 6d, 6f, 7, 7e, 14b, 14c, 14g, 16, 17b, 18, 22e, 23, 24)

- Assess the ethical implications of a diagnosis of mental illness for the patient and those close to them, and the social and cultural influences on mental health diagnosis (24)

- Identify the key components of mental health law and discuss the justifications used for compulsory detention, restraint and treatment (4, 7g)

- Distinguish between the appropriate use of mental capacity law and mental health law in medical practice (4, 7e, 7g, 7i)
BEGINNING OF LIFE

Students should be able to:

- Evaluate the ethical and legal issues surrounding the status of the embryo and foetus, including concepts of personhood (2c, 4)
- Analyse the different interests of the pregnant woman and foetus (2c, 4)
- Outline the ethical, legal and professional issues regarding reproductive choice, including contraception, artificial reproductive technologies (ARTs), and termination of pregnancy (2c, 2j, 4)
- Outline the ethical and legal issues relating to neonatal care, including arguments about the appropriate goals of, and limits to, treatment (2c, 4)
Students should be able to:

- Analyse the concepts used in ethical discussions about end of life care, including autonomy, dignity, futility, sanctity and quality of life, best interests, and unfair discrimination on the grounds of age (6b, 6g, 6e, 6f, 7i, 14j, 15, 18l)

- Consider any limits that should be placed on health care provision, including inappropriate admission to hospital, provision of invasive treatment and intensive care technologies, and the role that advance care planning plays (14n, 16e, 15)

- Discuss and evaluate when to withhold or withdraw life-sustaining treatment (LST) such as ongoing ventilator support and clinically assisted nutrition and hydration (6e, 6g, 15)

- Analyse the ethical implications of the law relating to decisions not to offer resuscitation, and apply the law to individual cases (4, 6e, 6f, 6g, 15)

- Describe the legal requirements for valid advance decisions, and analyse their ethical implications (4, 11, 11f, 15)

- Describe the role of Lasting Power of Attorney with respect to healthcare decisions (4)

- Analyse the ethical and legal arguments around assisted dying (2c, 4)

- Analyse the relevance of definitions of death and personhood (2c)

- Analyse ethical and legal issues regarding organ donation (2c, 4)

- Demonstrate respect for diverse cultural practices at the end of life (2b, 6b, 14)

- Identify the legal requirements for death certification and the ethical obligations to the deceased and their family (4)
Students should be able to:

- Analyse the ethical and legal issues associated with developments in reproductive genetic technology, such as prenatal and preconception screening, and gene editing (2c, 2l, 6f, 19a, 22)

- Discuss the ethical and legal issues associated with genetic testing (such as commercial availability of DNA testing, and the genetic testing of children), and the implications for medical practice (2c, 6f, 11c, 22)

- Discuss the tension between the duty of patient confidentiality and the interests of at-risk family members (2c, 2d, 22)
Students should be able to:

- Demonstrate an understanding of the importance of trust and integrity in research (2e, 26g)

- Evaluate the ethical, legal and professional considerations involved in biomedical research, including additional limitations on research with children and other vulnerable individuals (2, 2l, 2s, 4, 26, 26g)

- Explain the difference between research, quality improvement, and educational activities, and when to seek ethics committee approval (5e, 5g, 26g)

- Reflect on ethical issues arising from research in resource-poor settings (26g)