



**A SMARTPHONE APP TO TEACH MILITARY MEDICAL
ETHICS AND REDUCE MORAL INJURY – and - DO WE
NEED A COMMON, PRACTITIONER FOCUSSED
FRAMEWORK TO GUIDE DECISION MAKING IN
MILITARY MEDICAL ETHICS?**

Lt Gen (Retd) Professor Martin Bricknell CB OStJ PhD DM and Brig (Rtd) Dr Charlie Beardmore MA MSc LLM MBA MRCP MFOM
Centre for Conflict and Health
Department of War Studies
King's College London

Please download the MME App

How You Can Access the Military (and Medical) Ethics apps

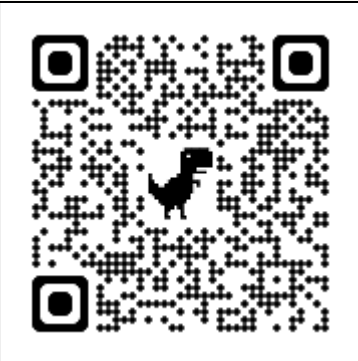
Available from:

- Apple App Store
- Google Play

Search:

- Military Medical Ethics
- **Military Ethics**

Download



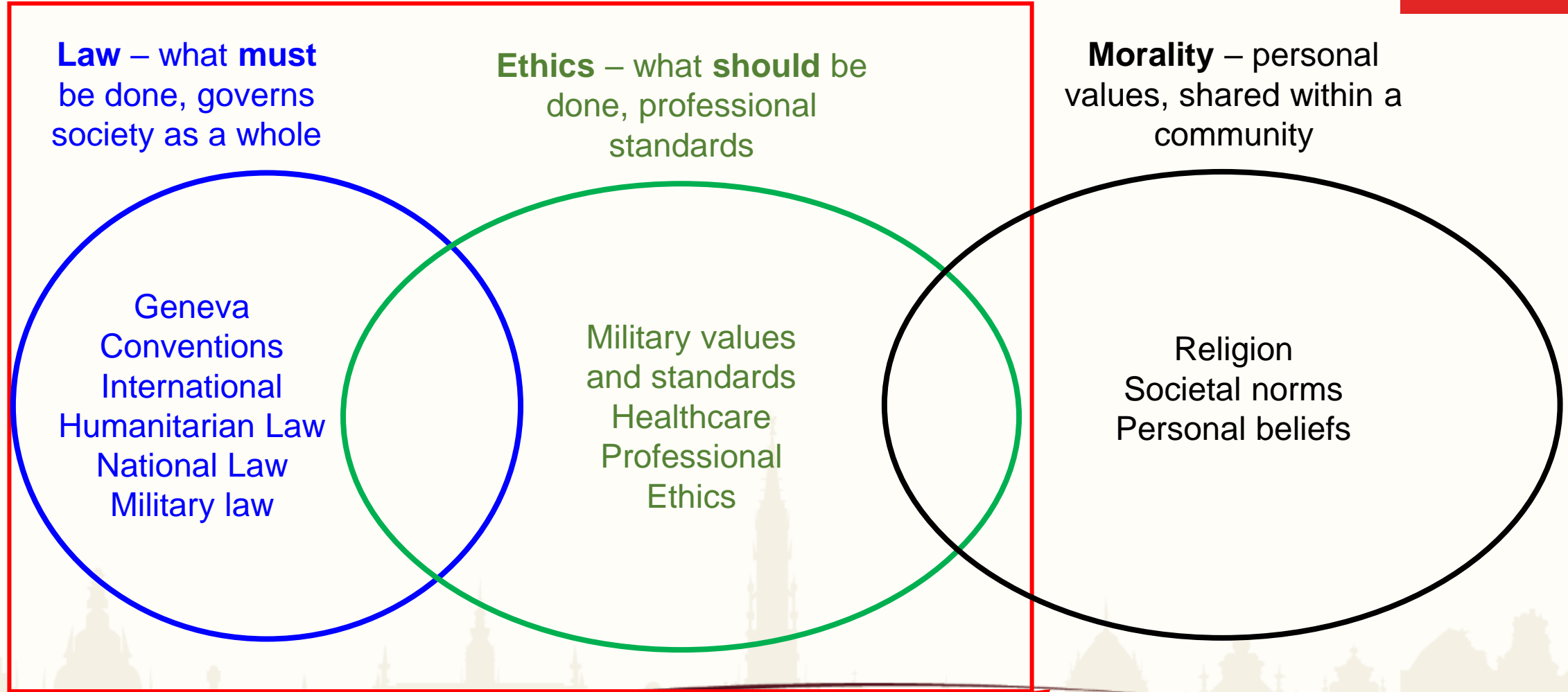
IOS



Android

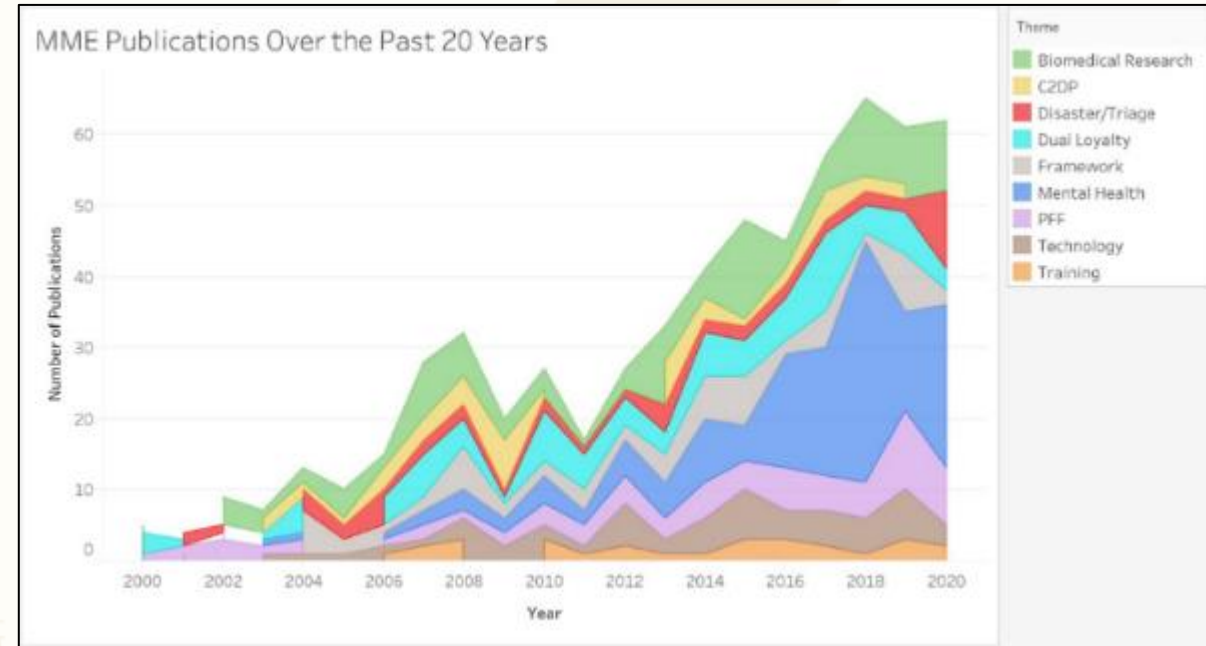


What are Military Medical Ethics (MME)?



Importance of MME

- ▷ International Humanitarian Law (IHL) and Military Medical Ethics (MME) – recurrent topic at ICMM World Congress
- ▷ Increase in number of publications in 21st Century
- ▷ Important topic for military health practitioners
- ▷ Knowledge and decision-making may reduce moral injury



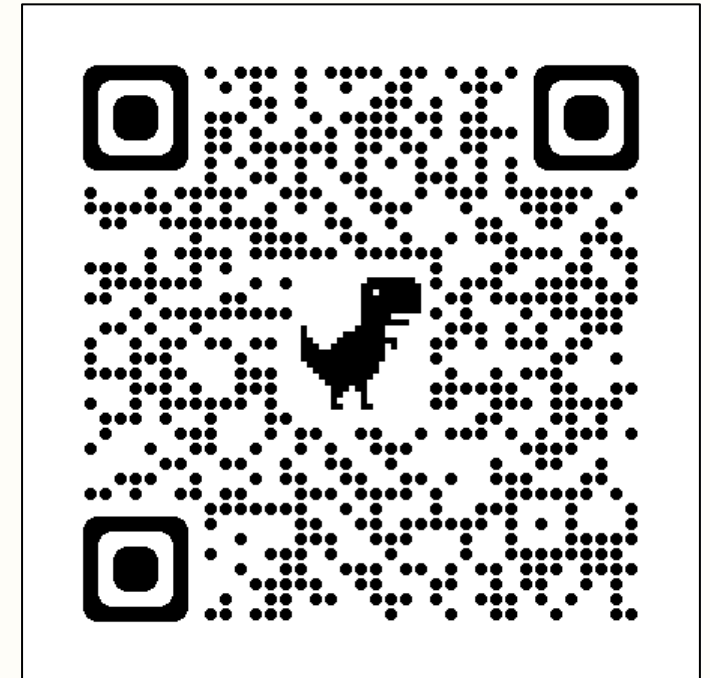
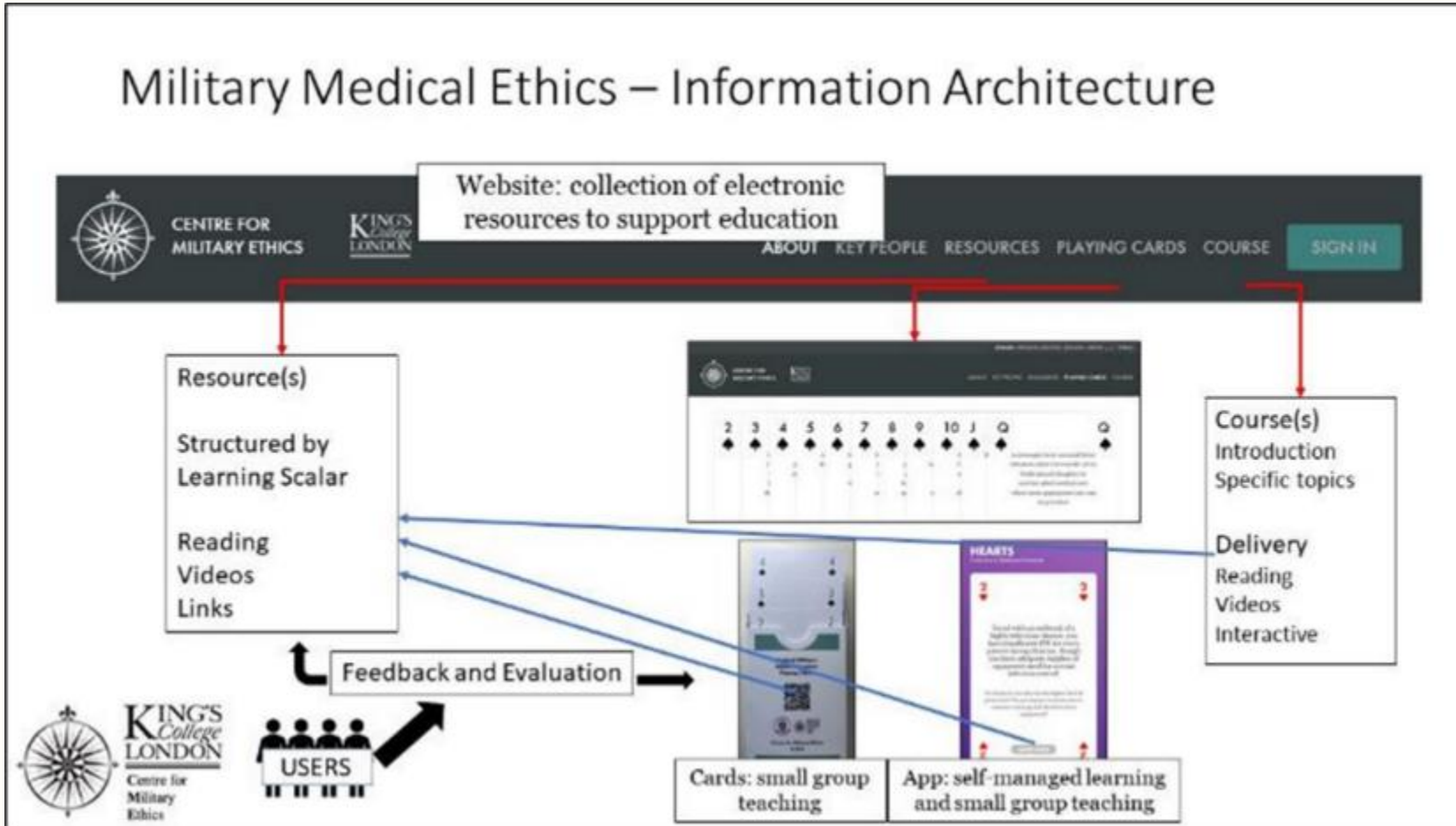
Bailey Z, Mahoney P, Miron M, Bricknell M. Thematic Analysis of Military Medical Ethics Publications From 2000 to 2020-A Bibliometric Approach. *Mil Med.* 2022 Jul 1;187(7-8):e837-e845. doi: 10.1093/milmed/usab317. PMID: 34331064; PMCID: PMC9248292.

Outline - workshop

- ▷ Orientation to the MME App: MB – 5 mins
- ▷ Key documents and references: MB – 5 mins
- ▷ Ethical decision-making in MME: CB – 30 mins
- ▷ Small group discussions on ethical scenarios: CB and MB - 20 mins
- ▷ Feedback and discussion: CB and MB - 30 mins

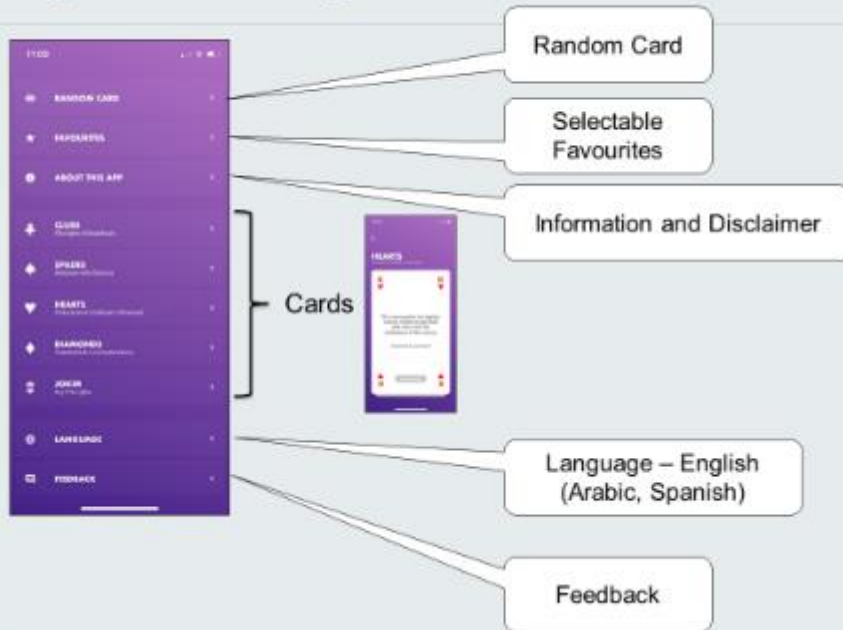
Centre for Military Ethics

Military Medical Ethics – Information Architecture

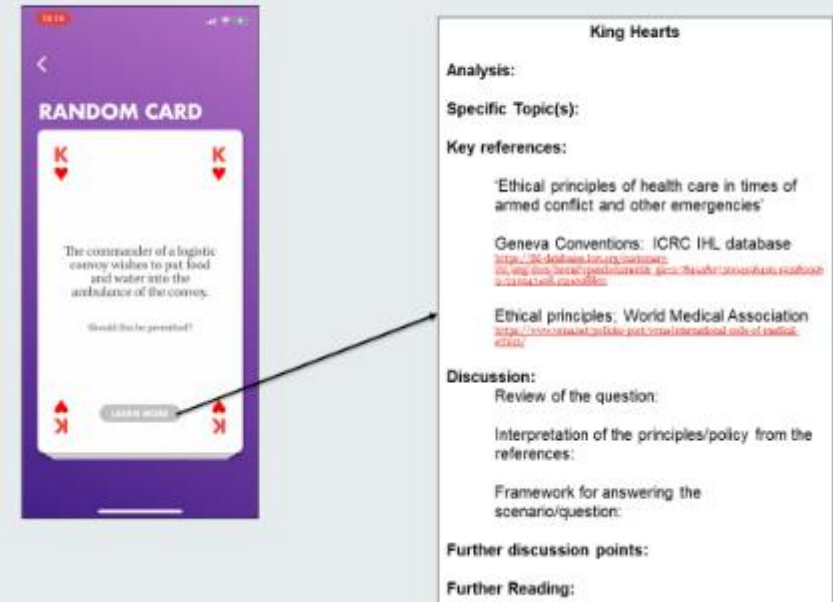


SMARTPHONE APP

MME App Design (1) – Home Page



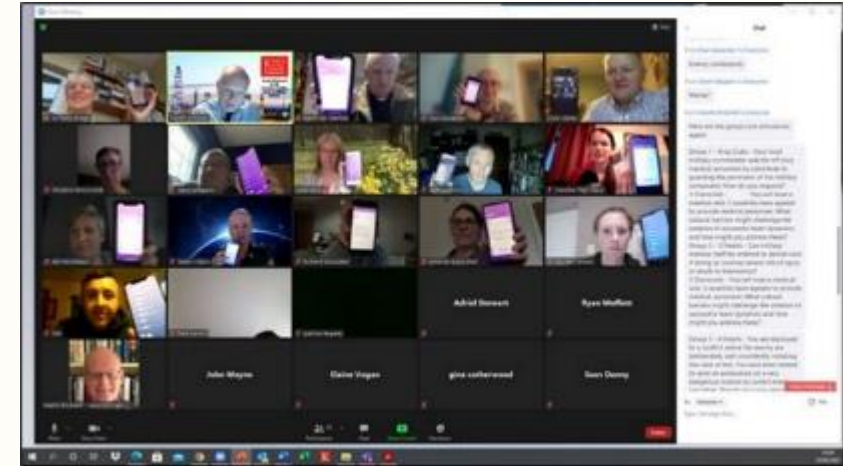
MME App Design (2) – Cards & 'learn more'



Miron M, Bricknell M. Innovation in education: the military medical ethics 'playing cards' and smartphone application. *BMJ Mil Health*. 2021 Oct 28;bmjmilitary-2021-001959. doi: 10.1136/bmj-military-2021-001959. Epub ahead of print. PMID: 34711675.

Small Group Teaching in MME

- ▷ Since 2021
 - ▷ 25 teaching sessions
 - ▷ > 900 participants
 - ▷ International and multi-professional audiences
- ▷ Mixed formats – face-to-face, online, hybrid
- ▷ Very positive feedback
- ▷ Other uses to the App
- ▷ Additional content: Nurses and Allied Health Professionals (AHPs), Garrison healthcare, Role 4 healthcare, Policy and biomedical research



Key documents and references (1)

Military Medical Ethics – on military operations

ETHICAL PRINCIPLES OF HEALTH CARE IN TIMES OF ARMED CONFLICT AND OTHER EMERGENCIES

(Text from the document)

GENERAL PRINCIPLES

1. Ethical principles of health care do not change in times of armed conflict and other emergencies and are the same as the ethical principles of health care in times of peace.
2. Health-care personnel shall at all times act in accordance with relevant international and national law, ethical principles of health care and their conscience. In providing the best available care, they shall take into consideration the equitable use of resources.
3. The primary task of health-care personnel is to preserve human physical and mental health and to alleviate suffering. They shall provide the necessary care with humanity, while respecting the dignity of the person concerned, with no discrimination of any kind, whether in times of peace or of armed conflict or other emergencies.
4. Privileges and facilities afforded to health-care personnel in times of armed conflict and other emergencies are never to be used for purposes other than for health-care needs.
5. No matter what arguments may be put forward, health-care personnel never accept acts of torture or any other form of cruel, inhuman or degrading treatment under any circumstances, including armed conflict or other emergencies. They must never be present at and may never take part in such acts.

ALL OTHERS WITH POWERS

(Text from the document)

https://www.icrc.org/eng/resources/documents/other-ethical_principles.pdf

HEALTH CARE IN DANGER
THE RESPONSIBILITIES OF HEALTH-CARE PERSONNEL WORKING IN ARMED CONFLICTS AND OTHER EMERGENCIES

VIOLENCE AGAINST HEALTH CARE MUST END
IT'S A MATTER OF LIFE & DEATH

REFERENCE

PROTECTING HEALTH CARE
GUIDANCE FOR THE ARMED FORCES

HEALTH CARE IN DANGER
IT'S A MATTER OF LIFE & DEATH

REFERENCE

Key documents and references (2)

- ▷ National Law of Armed Conflict
- ▷ National professional guidance
- ▷ National military medical doctrine
- ▷ National military medical policy

Military Medical Doctrine and Ethics

- Open UK version of AJP-4.10(C) in Acrobat
- Click on the 'magnifying glass' – (Find)
- Write – 'ethic'
- Click on 'next'

- Note the topics that are 'detected'
 - Principles - 1-14
 - Medical Rules of Eligibility -1-16
 - Population at Risk -1-16
 - Medical care for persons deprived of their liberty - 1-17
 - Principles for civil military medical support cooperation - 1-21
 - Interface between medical and other staff and support functions, Religious Support – 2-7
 - End of life consultation and ethics committee input – 2-7
 - Medical Intelligence (3) – 3-2

KING'S
LONDON
Centre for
Military
Ethics



Ethical decision making in MME

- ▷ How does the Military Healthcare Worker (MHW) make an appropriate decision, if necessary alone, when confronted by an MME ethical dilemma?
- ▷ Through a **COMMON, PRACTITIONER FOCUSSED FRAMEWORK - Does one exist?**

Likely issues in Military Medical Ethics

- ▷ Medical Rules of Eligibility
- ▷ Special populations
- ▷ Conduct of military medical units and medical personnel
- ▷ Arming of medical units/personnel
- ▷ Use of the Red Cross symbol
- ▷ Absolute prohibitions
- ▷ Military medical ethics beyond operations

Framework example (1)

▷ Beauchamp and Childress:

▷ **Autonomy**

▷ **Beneficence**

▷ **Non-Maleficence**

▷ **Justice**

▷ Is it widely applicable to MME?

▷ Is it MHW practitioner focussed?

▷ What does it lack (in relation to MME)?

Framework example (2)

▷ 4 Quadrant Model (taken from UK JSP 950)

STEP 1 – Moral perception (Identification of Moral Issue)

STEP 2	Quadrant 1 Medical Indications	Quadrant 2 Patient Preferences
	Quadrant 3 Quality of Life	Quadrant 4 Contextual Factors

STEP 3 – Recommended Moral Action: Act

- Is it widely applicable to MME?
- Is it MHW practitioner focussed?
- What does it lack (in relation to MME)?

Framework example (3) (Messelken et al)

1. Assessment of the situation
2. Call the Moral Question(s)
3. Ethical Arguments
4. Evaluation and Decision – take the moral point of view
5. Reality check and implementation

- ▷ Is it widely applicable to MME?
- ▷ Is it MHW practitioner focussed?
- ▷ What does it lack (in relation to MME)?

Framework example (4)

HHEAT (Humanitarian Healthcare Ethics Analysis Tool) Handbook

<https://humanitarianhealthethics.net/humethnet/commentaries/resources/hheat/>

Step 1: Identify/Clarify the Ethical Issue

Step 2: Gather Information

Step 3: Review the Ethical Issue

Step 4: Explore Ethics Resources

Step 5: Evaluate and Select the Best Option

Step 6: Follow Up

- Is it widely applicable to MME?
- Is it MHW practitioner focussed?
- What does it lack (in relation to MME)?

Framework example (5) – under development at KCL

Step 1 – Identify: Define the Issue

Step 2 – Analyse: Patient/Legal/Clinical/Societal perspectives

Step 3 – Fuse: Summarise Findings

Step 4 – Decide: Make a decision and be prepared to justify it

- Is it widely applicable to MME?
- Is it MHW practitioner focussed?
- What does it lack (in relation to MME)?

Framework handout:

Please use this framework For your workshop scenario:

Step 1 – IDENTIFY THE PROBLEM(S)

- Briefly state the **Scenario**
- List the **Issues** that arise
- List **Critical Information** required, and **Assumptions** to be made

Click or tap here to enter text.

Step 2 – ANALYSE:

<p>Patient: What are the views of the Patient? (and 'patient group')? How do: Autonomy, Beneficence, Non-maleficence and Justice apply? Other important factors?</p> <p>Click or tap here to enter text.</p>	<p>Legal: Is scenario covered by IHL including GCs, military law, other law? Other important factors?</p> <p>Click or tap here to enter text.</p>
<p>Clinical: Diagnosis, Prognosis, Treatment options? Is scenario covered by professional regulation/guidance? What are the views of the clinical team? Other important factors?</p> <p>Click or tap here to enter text.</p>	<p>Societal: In there a military necessity <u>involved</u>? Is scenario covered by military regulation? Is scenario covered by public health or societal ethics? Other important factors?</p> <p>Click or tap here to enter text.</p>

Step 3 – FUSE

- Summarise conclusions
- Determine the exact Decision(s) to be made

Click or tap here to enter text.

Step 4 – DECIDE

- **What is your Decision?**
- **Why** (can you justify it)?

Click or tap here to enter text.

Small group discussions using Framework 5

Group 1 - King Clubs - Your local military commander asks for off duty medical personnel to contribute to guarding the perimeter of the military compound. How do you respond?

Group 2 – 3 Hearts - Can military medical staff be ordered to deliver care if doing so involves severe risk of injury or death to themselves?

Group 3 - 4 Hearts - You are deployed to a conflict where the enemy are deliberately and consistently violating the rules of war. You have been tasked to send an ambulance on a very dangerous mission to collect enemy casualties. Should your own personnel be put in harms' way to save the life of someone who would not reciprocate?

Group 4 – Queen Hearts - A local patrol commander tells the attached medical personnel to remove their Red Cross arm bands because this disrupts camouflage. Is this acceptable?

Group 5 – Ace Hearts - When faced with an infectious disease outbreak, should military medical personnel be willing to accept greater personal risks than civilian medical workers?

Feedback on Framework

▷ BACKBRIEF:

- Card Number and Question
- Briefly Summarise discussion – Steps 1-4
- **Decision and Why?**
- What's missing?

Feedback on framework - baseline

- ▷ Acceptability – Is it a legally and morally acceptable tool?
- ▷ Suitability – Is it appropriate, timely and realistic?
- ▷ Feasibility – Will it produce a pragmatic, defensible result?
- ▷ Sustainability – Will MHW be willing to use it on an enduring basis?
- ▷ Adaptability – Is it likely to be adaptable to widely differing scenarios?

- ▷ Please score out of 5 for each criterion on the Likert scale handout

Feedback on discussions – 20 mins

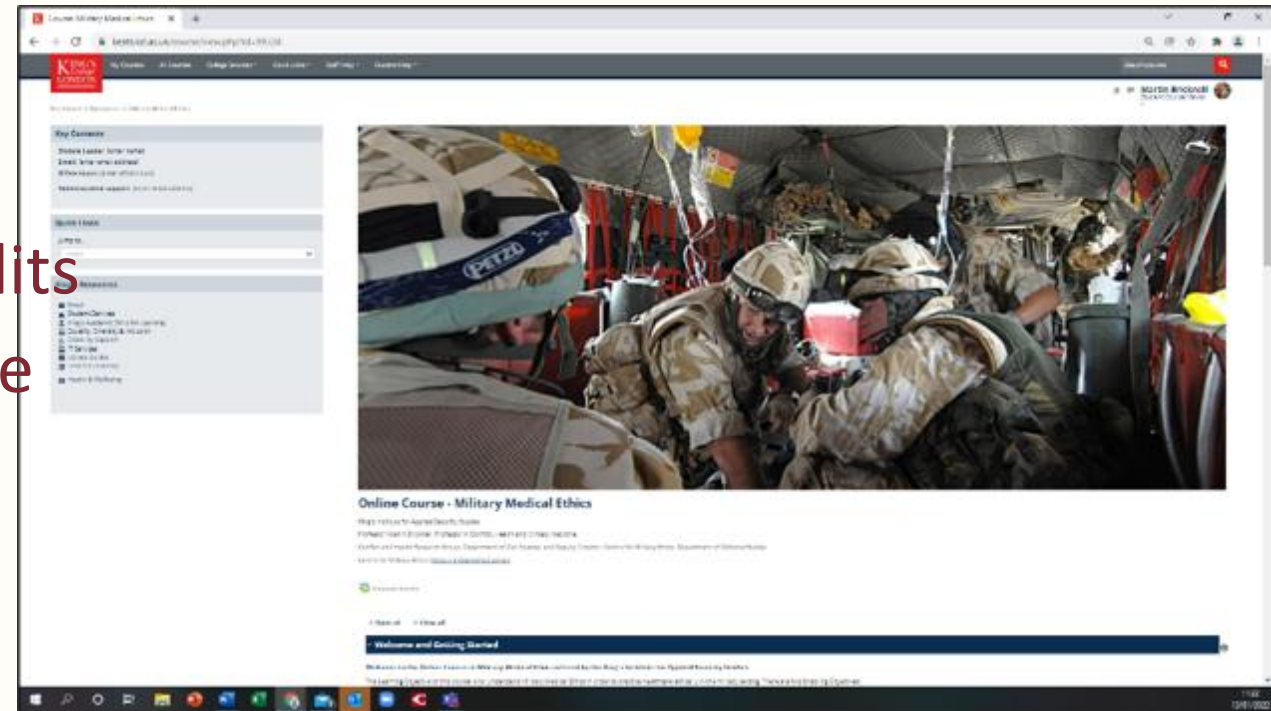
Conclusions

- ▷ IHL and MME are important topics of military healthcare professionals
- ▷ Knowledge and decision-making may reduce moral injury
- ▷ An App may improve access to teaching in small groups discussions
- ▷ A common framework for ethical decision-making in MME may improve education and interoperability in MME



Online course – call for volunteers – 5 Hours of CPD

- ▷ Developing an online module in Military Medical Ethics
- ▷ Will award 5 hours of CPD and potential for 5 Masters level credits
- ▷ Call for volunteers to evaluate the beta version of the course
- ▷ No cost to participants for pilot course



- ▷ Contact: martin.bricknell@kcl.ac.uk

References:

Bailey Z, Mahoney P, Miron M, Bricknell M. **Thematic Analysis of Military Medical Ethics Publications From 2000 to 2020-A Bibliometric Approach.** *Mil Med.* 2022 Jul 1;187(7-8):e837-e845. doi: 10.1093/milmed/usab317. PMID: 34331064; PMCID: PMC9248292.

Miron M, Bricknell M. **Innovation in education: the military medical ethics 'playing cards' and smartphone application.** *BMJ Mil Health.* 2021 Oct 28:bmjmilitary-2021-001959. doi: 10.1136/bmjmilitary-2021-001959. Epub ahead of print. PMID: 34711675.

Bricknell M, Whetham D, Sullivan R, Mahoney P. **How Should Access to Military Health Care Facilities Be Controlled in Conflict?** *AMA J Ethics.* 2022 Jun 1;24(6):E472-477. Arabic, English. doi: 10.1001/amajethics.2022.472. PMID: 35713914.

Bricknell MC, Miron M. **Medical Ethics for the Military Profession.** *Revista Científica General José María Córdova.* 2021 Dec;19(36):851-66.

Bricknell M, Story R. **An Overview to Military Medical Ethics.** *Journal of Military and Veterans Health.* 2021 Apr 30;30(2):7-16.



Thank you

Contact details/for more information

Professor Martin Bricknell CB OStJ PhD DM

martin.bricknell@kcl.ac.uk

Dr Charlie Beardmore MA MSc LL.M MBA MRCP MFOM

charlie.beardmore@kcl.ac.uk

Department of War Studies

K7.23, Strand Building

London

WC2R 2LS

<https://www.kcl.ac.uk/people/professor-martin-bricknell>