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### Everyday Ethics and Equity at the Bedside

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## Everyday Ethics and Equity at the Bedside

**Submitting/Presenting Author (must be a trainee):**

**Primary Email Address:**

Medical Student

Resident/Psychology Intern ( $\leq 1$  month of dedicated research time)

Resident/Ph.D/post graduate ( $> 1$  month of dedicated research time)

Fellow

**Primary Mentor (one name only):** Angie Knackstedt BSN, RN, NPD-B

**Other authors/contributors involved in project:**

**IRB Number:** STUDY00002077 (Exempt)

**Describe role of Submitting/Presenting Trainee in this project (limit 150 words):**

Shika Kalevor, MBE BSN RN (Fellow in the Bioethics Center / Primary Investigator)

**Background, Objectives/Goal, Methods/Design, Results, Conclusions limited to 500 words**

**Background:** Traditional bioethics training, although important, may not be completely suited to the nursing role. In contrast to traditional clinical ethics, which focuses on healthcare dilemmas, everyday ethics focuses on routine clinical encounters between clinicians, patients, and families and may be better suited to help nurses address issues such as bias and racism at the bedside.

**Objectives/Goal:** This study aims to provide a data-backed approach to ethics education for nurses as it pertains to improvements in the understanding of Diversity, Equity, & Inclusion (DEI) efforts in healthcare. This study also provides an opportunity for the field of bioethics to provide tangible change in DEI efforts as well as address a knowledge gap regarding the intersection of DEI and bioethics in practice.

**Methods/Design:** Utilizing the Transcultural Self-Efficacy Tool (TSET), a confidence assessment, nurses will complete this assessment prior-to and following an education session (CNE approved) based on everyday ethics, DEI, and the nurse role.

**Results: TBD**

**Conclusions:** With these results, we hope to provide an evidence-backed method to introduce a novel approach to nursing ethics education with a focus on applicability to practice and bias reduction. This is particularly applicable to nurses in the pediatric setting as they work closely with a particularly vulnerable population that oftentimes lacks power. As clinicians, we ought to be

everyday ethicists who work toward addressing issues such as racism and bias because these issues continue to contribute to disparities in treatment recommendations, expectations of therapeutic bonds, and even pain management.