Revisions to the
AAPM Code of Ethics

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Presented on behalf of the AAPM Ethics Committee
Conflicts of Interest

• I have no conflicts to report.
Learning Objectives

• Understand the role of the Code of Ethics and the Ethics Committee within the AAPM
• Understand the process that culminated in significant revisions to the Code in 2019
• Review the structure and content of the Code
• Be aware of the points of increased emphasis in the 2019 revision
“Every art and every inquiry, and similarly every action and pursuit, is thought to aim at some good...”

Opening sentence of *Nicomachean Ethics*;
Aristotle, 340 BCE.
Outline

- Ethics Committee’s role in AAPM Governance
- Code of Ethics’ purpose as a Professional Policy
- Process by which the Code was revised
- Structure of the revised Code
- Revision details, points of increased emphasis
Outline

• What is the Ethics Committee?
• Why have a Code of Ethics? What is it?
• Why and how was it revised?
• How is the Code structured?
• What are the revisions?
Ethics Committee in the AAPM Committee Structure

Board of Directors

- Administrative Council
- Education Council
- Professional Council
- Science Council
- Special Committees

- MP Leadership Academy
- Clinical Practice
- Professional Economics
- Ethics
- Professional Services
- Workforce Assessment

TG-109
Rule 3.7.2: The Committee on Ethics

Purpose

The Committee on Ethics shall advise the Professional Council and, through it, the Board of Directors, on matters relating to the ethical practice of medical physics.

Activities

2. Investigate complaints involving alleged unethical practices of medical physics by or relating to AAPM members.
3. Prepare and maintain procedures for resolving ethical problems.
4. Educate the medical physics community on the ethical principles of professional practice.
5. Maintain the AAPM Code of Ethics.
The Ethics Committee

The work of the Committee straddles two important functions:

• Administrative
  – Maintain governance documents, especially the Code of Ethics
  – Execute the process if a Complaint is raised

• Education and advice
  – Create a framework for conversation about professional ethics
  – Serve as a resource to Members facing ethical challenges
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The Code of Ethics

Our behavior influences how our profession is perceived and how effective we can be at improving health as a professional society and as individuals.
Scope of the Code of Ethics

- Establishes a shared expectation of professional behavior
- Distinct from civil, moral or religious law
- Behavioral – making “right” choices
- Transactional – right relationship with others
- Personal – discipline, awareness and responsibility
The Code of Ethics as PP-24

- The Code of Ethics is a governance document of the AAPM.
- Published as Professional Policy PP-24, available on the AAPM website and reiterated in *Medical Physics* (*Med Phys* 2019; 46 (4))
- Members attest to compliance when we first join and every time we renew membership.
- Noncompliant behavior may result in a Complaint filed with ET.
The Code of Ethics as PP-24
Collegial Approach
Advice vs. Complaint

• Any member or subset of the Ethics Committee is always available to advise a Member on a situation.
• There is no formal process for advising, though requests for confidentiality will be honored.
• The formal process for making a Complaint against a Member or Corporate Affiliate, described in Section 4 of the Code.
• The process for filing a Complaint alleging a violation of the standards set in the Code of Ethics may be initiated by private correspondence with the Chair.
• All correspondence made with the Chair of ET is strictly confidential (i.e. between the Chair and you!)
The step-by-step Complaint process is specified in detail and at length in Section 4 of the Code of Ethics. It is designed above all to be fair to everyone involved in a Complaint. The Complaint process is not efficient. That is also by design. Deliberation and review are important aspects of due diligence. There is intentionally broad latitude in the sanctions that may be recommended by the Ethics Committee, ranging from nothing to expulsion from AAPM.
Complaints

• Fewer than 10 Complaints are received in a typical year.
• Most Complaints are resolved by the Chair through a combination of advice, admonition and mediation.
• Some Complaints are not pursued by the Complainant for administrative reasons, such as a desire to remain anonymous.
• A few Complaints a year go to the full Committee for discussion and further action, often resulting only in letters of advice or admonition.
• It is rare for a Complaint to result in recommendation of a formal Board action.
Not Our Way
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2019 Revision of the Code

- As a Professional Policy the Code has to be renewed every 5 years, with or without revision.
- The prior major revision was approved in 2009. There was not significant revision in 2014.
- In 2016 TG-109 was reconstituted, chaired by Dr. Christina Skourou, to consider whether revision was needed for the 2019 sunset.
The TG solicited Member input
  - Talks at Chapter meetings and the annual meeting
  - A survey
  - Solicitations in the newsletter and email blasts

There were 969 completed responses to the survey.
  - 676 free text comments, all considered by the TG
  - About 50% of respondents said they had personally experienced ethical concerns in their professional practice.
  - Roughly 2/3 said they would consult the AAPM Code of Ethics as a resource in such a situation.
The response from General Membership made apparent that a revision was needed to address the changing work environment:

- Increasing awareness of fairness in a diverse workplace
- New challenges raised by social media
- Increasing importance of the student-mentor relationship with changing pathways into the profession

The TG recognized an opportunity to shift the tone and breadth of the Code to lean toward accountability and aspiration.

The open call for comment on the draft revision drew a further 180 individual comments, each of which was duly considered.
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Structure of the Code, 2009

Code of Ethics

- Principles
- Guidelines
- Complaint Process
  - Professional Conduct
  - Research
  - Education
  - Business
  - Authorship
  - Employment
Structure of the Code, 2019

- Code of Ethics
  - User Guide
    - 1. Preamble
    - 2. Principles
    - 3. Guidelines
    - 4. Complaint Process
  - Professional Conduct
    - Clinical
    - Research
    - Education
    - Business & Government
    - Employment
    - Self-employment
    - Publication
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The Revisions

Tone/Voice

• Less “compliance manual” language and more guidance
• Shift from passive to active, from tolerance to inclusion, from observer to agent
• A more consistent point of view and style of language
The Revisions

Section 2. Principles

The Principles are AAPM core values and standards intended to aid all Members and Affiliates to act in an ethically professional manner. The Principles provide a framework for conduct with respect to patients, colleagues, and the public.
The Revisions

Section 2. Principles

• 13 Principles have become 10
• Right relationship to patients, colleagues, employers and society consolidated and still present
• New emphasis on concepts of
  – Integrity
  – Impartiality
  – Justice and fairness
  – Accountability
I. Members must hold as paramount the best interests of the patient under all circumstances.

II. Members must strive to provide the best quality patient care and ensure the safety, privacy and confidentiality of patients and research participants.

III. Members must act with integrity in all aspects of their work.

IV. Members must interact in an open collegial and respectful manner amongst themselves and in relation to other professionals, including those in training, and safeguard their confidences and privacy.

V. Members must strive to be impartial in all professional interactions, and must disclose and formally manage any real, potential or plausible conflicts of interest.

VI. Members must strive to continuously maintain and improve their knowledge and skills while encouraging the professional development of their colleagues and of those under their supervision.

VII. Members must operate within the limits of their knowledge, skills and available resources in the provision of healthcare. Members must enable practices in which patients are provided the levels of medical physicist expertise and case-specific attention as appropriately supports the modalities of their care.

VIII. Members must adhere to the legal and regulatory requirements that apply to the practice of their profession.

IX. Members must support the ideals of justice and fairness in the provision of healthcare and allocation of limited resources.

X. Members are professionally responsible and accountable for their practice, attitudes and actions including inactions and omissions.
The Revisions

Section 3. Guidelines

Intended to assist Members and Corporate Affiliates in interpreting and implementing the Principles. Specific guidelines and clarifications as they might apply to various practice settings are offered.

“The Guidelines are not all-inclusive; members and affiliates should refer to the Principles for situations not specifically addressed in the Guidelines.”
The Revisions

Section 3. Guidelines

• General section on Professional Conduct was added, applies regardless of role or work/training setting

• Specific sections for each work/training setting were adjusted
  – Significantly revised Research section
  – Significantly revised Education section
  – Expansion of Business section to include Government settings
  – New language about Self-employment
  – New language about employment by and interaction with Vendors

• New Guidelines regarding 21st century ethics: social media, fairness and inclusion, resource management, justice
GUIDELINE: ONLINE ACTIVITY

Personal Behavior

Members must:
• honestly represent their activities, services, and products delivered
• Truthfully and accurately document and report their academic and professional credentials
• be mindful of how their online behavior may reflect on themselves and the profession and use social media in a professional manner
• claim credit only for continuing education courses, programs, and sessions attended and completed
• claim recognition, credit, or remuneration only for services rendered or products delivered

Responsibility to Public

Members must strive to improve the public welfare through:
• disseminating scientific knowledge in a fair and unbiased manner;
• supporting fair and just allocation of healthcare resources; and
• maintaining standards of privacy and confidentiality in all environments, including online communication.
GUIDELINE: JUSTICE & FAIRNESS

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Discrimination

• When acting in roles that carry management authority, Members must treat fairly and with respect all those with whom they have professional relationships, evaluating others based on professional merit alone. To prevent favoritism and discrimination it is essential to set appropriate criteria when assessing individuals for professional opportunities. Members must acknowledge and minimize bias to eliminate discrimination and promote fairness.
GUIDELINE: IMPARTIALITY & LACK OF BIAS

Editorship and Peer Review

Members acting as editors or reviewers:

• should be aware of potential bias or conflict of interest and strive to deliver an impartial assessment of the work based on merit alone;
• must declare and manage any conflicts of interest that could compromise their objectivity;
• should ensure that the peer review process is objective, fair and confidential;
• are responsible for maintaining the dialogue, and any communication among participants, at a professional and respectful level throughout the review process; and
• must not use the unpublished results to benefit their own work or advancement.

Sponsorship of Investigator Research

• Members must keep discussions for funding of research separate from discussions for purchase of services or equipment so that there is no real or perceived bias in obtaining research funds or making purchase decisions. Sponsorship of research must be acknowledged and disclosed in presentations and publications.
The Revisions

Section 4. Complaint process

• Essentially unchanged
A word about Conflict of Interest

- The Code of Ethics does not contain a Conflict of Interest Policy.
- AAPM has a separate Conflict of Interest Policy (PP-15) and an editorial COI Policy (AP-102) which are separate from the Code of Ethics (PP-24).
- Guideline 2.I.D.j of the Code addresses the management of COI.
  - Conflict of interest is not inherently unethical, but an individual in a conflicted situation must manage the ethical hazard.
  - Certain behaviors and outcomes arising from actual or apparent conflicts of interest may constitute actionable ethics concerns.
- The Ethics Committee is always willing to informally advise Members on their COI situations.
Why is COI management included in the Code of Ethics?

We are professionals with high moral standards and abide by a strict code of ethics, but we are also people who want to be successful, to provide for our family, to attend to a sick parent, or see our ideas implemented and embraced.

As professionals, Interests become Duties.

COIs can interfere with our duties if not managed.
Summary

• The AAPM Ethics Committee serves a dual role, both administrative and educational
• The Code of Ethics is the element of AAPM governance that describes
  – expectations of professional behavior
  – process for adjudicating Complaints
• A significant revision of the Code of Ethics was adopted starting 2019
• The revision
  – adds new emphasis to Integrity, Impartiality, Justice and Fairness, and Accountability
  – expands on Guidelines for specific work environments
Contact Information

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Ethics Committee
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Or see the AAPM on-line Committee tree to contact any of the Committee members directly.
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