

# Universal Patient Acceptance Key to Access to Care

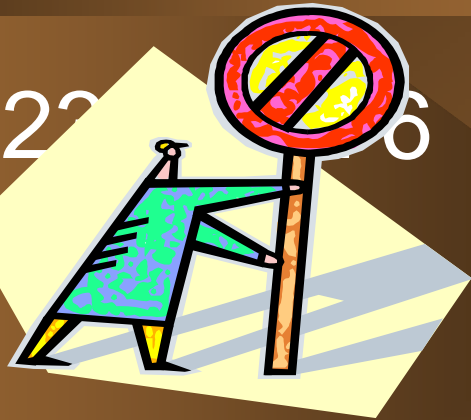
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# RIDE GUIDE

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# ANATOMY OF ACCEPTANCE

1. Acceptance

2. Diagnosis\*

3. Treatment

4. Payment

\*  
Diagnosis = complete history, exams, tests, & assessment

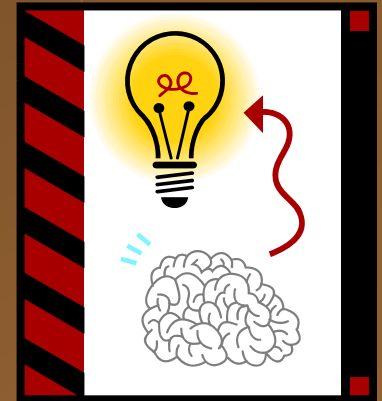
# ACCEPTANCE DEFINED

- ◆ is an **ETHIC...**

- ◆ is a **PROFESSIONAL ACT**

# IS AN ETHIC CAN YOU CARE FOR YOUR OWN CHILD MORE THAN FOR OTHER CHILDREN?

- ◆ ARISTOTLE –NICOMACHEAN ETHICS
- ◆ SPOUSAL RELATIONSHIP DIFFERENT THAN PARENTAL RELATIONSHIP
- ◆ **RECEPTIVITY** – WARREN REICH



- ◆ BARTOLOME LAS CASAS



# WHAT IS ACCEPTANCE?

- ◆ Acceptance, in health care, is how health practitioners first accept people as possible patients. It is a normative ethical principle centrally related to the applied ethical issue of access and issues beyond access.
- ◆ It is a hidden, inexplicit ethic and process. As a presupposed core value and ethic, it is often misunderstood by ethicists and health providers



# WHAT IS UNIVERSAL PATIENT ACCEPTANCE (UPA)?

- ◆ Universal Patient Acceptance (UPA) is one kind of applied ethical tool or clinical practice style that allows for the ethic of Acceptance to be more effectively pursued in daily practice..  
The concept of Universal Patient Acceptance (UPA) is crafted and presented here as a needed paradigm shift within health care, with a focus on how it underlies, precedes and promotes access to care.

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# Why **Acceptance**?

Is it the right, best ethic  
to ensure better access?



Is a Professional Act

## STYLES OF ACCEPTANCE

1. Random Acceptance  
(unintentional acts)
2. Selective Acceptance  
(intentional acts)
3. Universal Acceptance

# ACTION(S) & INTERVENTION(S)

- ◆ Political
- ◆ Legal
- ◆ Economic
- ◆ Educational/Social
- ◆ Ethical

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# ETHIC OF THE PROFESSION & ETHIC OF THE INDIVIDUAL MEMBERS

- ◆ ACCEPTANCE IS FIRST AND FOREMOST AN ETHICAL CONSTRUCT OF THE PROFESSION AS A WHOLE
- ◆ THE PROFESSION AS A WHOLE, THEN, IS RESPONSIBLE FOR MAKING THE PROMISE & GUIDING MEMBER'S TO HONORING IT
- ◆ SOCIETY AS A WHOLE MAY OR MAY NOT BE RECEPTIVE

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# Kinds of Core/Central Values

- ◆ **Central Values of the Profession** : not always the same as the core values of the professional organization
- ◆ **Core Values of Professional Organizations** must maintain, build upon, and support the profession's central values as they partner with others to serve the profession's mission & promises with society.
- ◆ WHO SPEAKS FOR THE PROFESSIONAL "WE"?

# WHO ARTICULATES THE PROFESSIONAL PROMISE?

- ◆ ONLY THE PROFESSION CAN ARTICULATE THE PROMISE
- ◆ LAW AND CULTURE CANNOT IMPOSE IT
- ◆ ONCE PROMISED, HOWEVER, LAW AND CULTURE CAN SUPPORT THE PROFESSION
- ◆ THE PROFESSION CAN HAVE IT'S SUPPORT REMOVED

How can dentists “TALK” to  
but not “EXAMINE” people?

Does “TALK TO” really mean  
to “TREAT? or just “LINK?”

Might SILENCE sometimes  
be BETTER?

# VOICING A HIDDEN ETHIC – ACCEPTANCE OUT OF THE SHADOWS

- ◆ Silence about acceptance = **random acceptance** – by default
- ◆ Mixing random, selective, and universal acceptance = **random acceptance**
- ◆ Blind Hand of the market = **random acceptance**

# Integrating Personal & Professional & Systems Ethics

- ◆ Universal Patient Acceptance is unique to professional ethics of CARE & ATTENTIVNESS
- ◆ For UNITY & AUTHENTICITY
- ◆ Selective Acceptance is basic to business ethics, marketing and advertising – gain attention, **segment**, target, influence



# Is Volunteering good enough?



- ◆ **Competition and Commercial**  
Ethics depends on volunteerism  
to fill the gaps of loss
- ◆ **Collaboration and Professional**  
Ethics require a system for both  
the ordinary and the  
extraordinary events

# MATCHING DISTRIBUTIVE JUSTICE PHILOSOPHIES ACROSS THE CARE OF A PERSON BECOMING A PATIENT IN THE U.S.

- ◆ ACCEPTANCE – egalitarian
- ◆ DIAGNOSES – communitarian
- ◆ TREATMENT – communitarian
- ◆ PAYMENT - libertarian

# SO WHAT? KEY QUESTIONS?

- ◆ WHAT DOES ACCEPTANCE LOOK LIKE AT THE OFFICE?
- ◆ CAN DOCS DELEGATE THE TALK OF ACCEPTANCE?
- ◆ CAN PROFESSIONS GIVE CONTROL OF ACCEPTANCE TO OTHERS & STILL REMAIN A PROFESSIONAL SYSTEM?

# SHORT ANSWERS

- ◆ HYPERLINK EVERY “MAY DAY “ TO THE PROFESSION’S SYSTEMS ETHIC NETWORK
- ◆ DELEGATE EFFICIENTLY
- ◆ ONLY THE PROFESSION CAN ARTICULATE THE ETHIC OF ACCEPTANCE AND STILL REMAIN A CARE PROFESSION

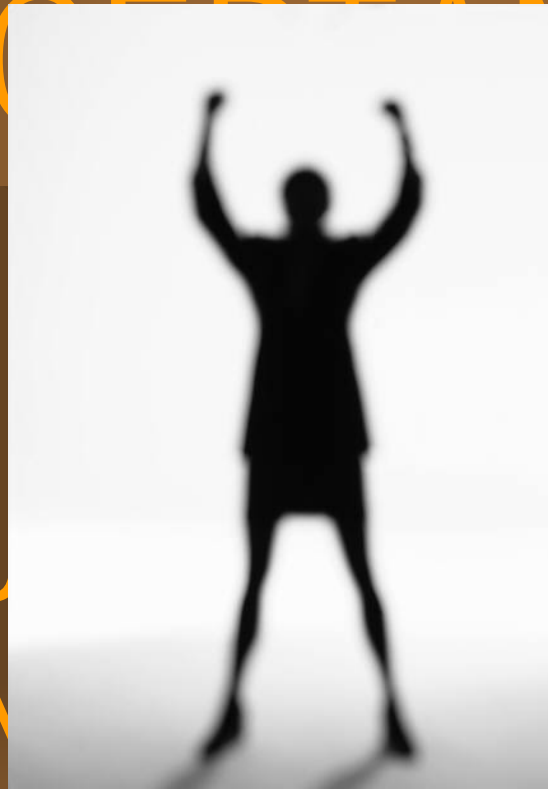
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# WHEN DOES A PERSON BECOME A PATIENT?, A GATHERING A PROFESSION?

- ◆ CASE LAW:  
WHEN A PERSON THINKS HE/SHE IS A PATIENT;  
ENDS WHEN THE DOC WRITES IT
- ◆ ACCEPTANCE ETHIC:  
WHEN A GATHERING ARTICULATES A PROMISE THAT THEY ARE A PROFESSION;  
ENDS WHEN THE CULTURE DOESN'T SUPPORT THE PROFESSIONAL MONOPOLY &, INSTEAD, SUPPORTS COMPETITION WITH IT



ACCEPTANCE



USUAL PATIENT ACCEPTANCE

# ACCESS to CARE ?

◆ ACCEPTANCE IS THE



◆ ACCEPTANCE IS A

