

# Moral Distress Toolkit

*A guided framework for identifying and resolving ethical concerns*

## What is Moral Distress?

*Moral distress occurs when you **feel you know the ethically correct action to take, but are unable to do it.***

*When you think you are experiencing moral distress, use this toolkit to identify and resolve the ethical issue.*

### STEP 1 Write Your Narrative

Write a **summary** of the case and what is going on. Include the medical and contextual facts, your emotions, assumptions, and anything else that feels relevant.

### STEP 2 Identify Your Emotions

Now that you've written everything down, what **emotions** come up for you in this case and what is their **source**? Break out the thesaurus, emotion wheel, or refer to Brené Brown's *87 Human Emotions and Experiences* ([brenebrown.com/resources/atlas-of-the-heart-list-of-emotions](https://www.brenebrown.com/resources/atlas-of-the-heart-list-of-emotions)).

|                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| Emotion 1 & Why<br>_____ | Emotion 2 & Why<br>_____ | Emotion 3 & Why<br>_____ |
| Emotion 4 & Why<br>_____ | Emotion 5 & Why<br>_____ | Emotion 6 & Why<br>_____ |

**STEP 3 Identify the Facts**

Pretend you are **not** involved in this case. Read your narrative from a high-level, third-party perspective.

- What do you see as the **facts of the case**? Highlight, underline, or circle the objective facts in your narrative above (e.g., diagnosis, patient statements, code status, medical treatments).
- What facts are **missing** and what questions do you have?

**STEP 4 Identify Values & Obligations in Conflict**

Based on the objective facts, are there **values, obligations, or responsibilities that are in tension or conflict**?

**Examples include:**

*Autonomy, nonmaleficence, beneficence, justice, integrity, truth-telling, confidentiality, respect and dignity, provision of high-quality evidence-based care, stewardship, equity.*

**What are the values or obligations in conflict?**

**Example:**

*If the patient is requesting a treatment that the team does not feel is appropriate, the obligations in conflict are honoring the patient's autonomy and the team's obligation to avoid harm and provide evidence-based care.*

**If there ARE obligations in conflict, you probably have an ethical issue - continue to Step 5.**

**If there are no patient harms or obligations in conflict-** but you are experiencing emotions such as grief, trauma, or sadness, that is very normal. Consider speaking with a trusted colleague, seeking support from a counselor or therapist, or engaging in self-care.

**STEP 5 Identify the Stakeholders**

Read your narrative and facts again from a third-party view. Who are the **stakeholders** or involved persons? If you were them, why would you be acting the way you are?

*Write down each stakeholder and the most generous interpretation of their actions or decisions.*

**Stakeholder 1:** \_\_\_\_\_

*Most generous interpretation of their actions:*

\_\_\_\_\_  
**Stakeholder 2:** \_\_\_\_\_

*Most generous interpretation of their actions:*

\_\_\_\_\_  
**Stakeholder 3:** \_\_\_\_\_

*Most generous interpretation of their actions:*

\_\_\_\_\_  
**Stakeholder 4:** \_\_\_\_\_

*Most generous interpretation of their actions:*

**STEP 6 Seek Understanding**

Who do you need to speak to in order to gain additional insight, perspectives, and answers to your questions from Step 3?

**I need to speak to:**

**STEP 7**    **Communication Tools: SEAT Framework**

SEAT is useful for communicating your concerns to the medical team. Use the framework below to plan your conversation.

|                  |                                                                                                           |
|------------------|-----------------------------------------------------------------------------------------------------------|
| <b>S</b> Share   | <i>Your understanding of the medical facts</i>                                                            |
| <b>E</b> Explain | <i>Your ethical concern — why you have it and what information you may be missing</i>                     |
| <b>A</b> Ask     | <i>The other person's perspective — do they share your concerns? Do they have information you do not?</i> |
| <b>T</b> Talk    | <i>Possible solutions or next steps</i>                                                                   |

**STEP 7b**    **Diagnostic Listening: The ADEPT Framework**

The ADEPT framework is especially helpful when listening to a patient or family member who is telling a story or has concerns. You will often use elements of both SEAT and ADEPT in the same conversation.

|                  |                                                                                                                                                                                      |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A</b> Absorb  | <i>Listen to the uninterrupted flow of information from the speaker. Goal: understand what the person is trying to say, the source of their concern, and their perspective.</i>      |
| <b>D</b> Distill | <i>Organize the speaker's (often disorganized) words into clear themes.</i>                                                                                                          |
| <b>E</b> Echo    | <i>Echo or paraphrase the themes, meaning, and substance you heard back to the speaker.</i>                                                                                          |
| <b>P</b> Probe   | <i>Probe directly and indirectly to confirm you captured the speaker's content and meaning. Observe body language and ask verbally if you captured their perspective accurately.</i> |

**Notes from your conversation:**

**STEP 8 Think Inside the Box**

*Instead of thinking about what **shouldn't** be happening or what would happen in a perfect world, recognize and accept the constraints of the situation — policies, legal elements, religious beliefs, etc.*

What elements of the situation **cannot be altered or impacted**? Remember: you can only control your own actions, reactions, choices, and behaviors.

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**STEP 9 Identify Possible Actions**

Given the constraints, what **actions could you take** to (1) improve outcomes for the patient and (2) address your own moral distress?

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**STEP 10 Identify Resources & Supports**

Are there any **resources or supports** you need in order to move forward with your plan?

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**STEP 11 Reflect After Taking Action**

Did your plan **work** to address the ethical issue? Is there more work to be done? How are you feeling now that you have taken these steps?

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**References & Acknowledgments**

1. Adapted from tools by Cy Wakeman: [realitybasedleadership.com](http://realitybasedleadership.com)
2. Adapted from Dudzinski, D.M. (2016). Navigating moral distress using the moral distress map. *Journal of Medical Ethics*, 42, 321–324.
3. Fiester, A. (2022). Developing skills in the HEC communication competency: Diagnostic listening and the ADEPT technique. *The Journal of Clinical Ethics*, 33(1), 42–49.