Winter 2005

FEATURED — **National Ethics Teleconferences**

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FEATURED — NATIONAL

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The National Center for Ethics in Health Care is VHA's primary office for addressing the complex ethical issues that arise in patient care, health care management, and research.

Our mission is to clarify and promote ethical health care practices throughout VHA and nationwide. The Center supports clinical, organizational, and research ethics by:

- providing ethics consultation to VHA leaders and field-based ethics programs on request
- developing and interpreting VHA national policies concerning health care ethics
- developing and delivering educational programs
- creating and administering tools to evaluate the quality of ethics programs and practices across VHA
- publishing ethics-related news, events, best practices, cases, and feature articles

s participants throughout VHA know, the Ethics A Center regularly sponsors "National Ethics Teleconferences" (NET calls), hour-long conference calls that explore timely concerns in health care ethics. NET calls address ethics questions raised by leaders and staff, highlight polices related to health care ethics, disseminate the work of the National Ethics Committee, and keep VHA up to date on developments in bioethics.

Each call features an educational presentation on the topic of the day, followed by moderated discussion that enables callers to share their perspectives and experience and participate in peer-to-peer dialogue. Ken Berkowitz, MD, Chief of the Ethics Consultation Service and other Center staff serve as core faculty for NET calls, with expert guest faculty from other program offices and, occasionally, outside VA.

Addressing Ethics Challenges across VHA

NET calls may address pressing questions that have been raised through the Center's Ethics Consultation Service—for example, ethical concerns in the clinical use of placebo (<u>July 2004</u>), or the ethics of "cutting and pasting" in the electronic medical record (*February* 2004). NET calls may also be in response to ethical questions received by the Center, although identifying information is never revealed. In this way the calls provide an opportunity to leverage the Center's expertise through sharing concerns and guidance that are relevant beyond the individual facility or facilities that have contacted the Center.

Ethics Policy Guidance

Ethics teleconferences also offer opportunities to inform staff system wide about changes in VHA policies related to health care ethics. For example, the <u>January 2003</u> call highlighted important new provisions of the Center's recently updated policy on informed consent for treatments and procedures (*VHA Handbook 1004.1*). The discussion portion of the call enabled faculty to further clarify the implications of the policy and address specific questions from participants.



STAFF News

Ethics Center staff regularly participate in conferences and programs within VHA and with outside audiences. Below are highlights of recent activities.

Ellen Fox, MD, addressed the January meeting of the NIH Inter-Institute Bioethics Interest Group, a group of bioethics professionals and trainees from various federal agencies and private sector organizations who meet monthly at the NIH. Dr. Fox focused her presentation on two major national initiatives of the Ethics

Center: Electronic Support for Patient Decisions (ESPD), featured in the *Fall 2004 UPDATE*, and *IntegratedEthics*, an educational and organizational change project that will provide VHA facilities with the tools they need to transform their traditional ethics committees into integrated ethics programs that better match their needs.

In October, Ken Berkowitz, MD, Chief of the Ethics Consultation



Service, presented a paper on the Center's Electronic Tracking of Consultation (ETC) system at the annual meeting of the American Society for Bioethics and Humanities. Dr. Berkowitz

introduced participants to the system's functionality as a tool for improving quality and offered examples of the ways in which it enables Center staff to "track and trend" requests for consultation.

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From the Director

A core function of the National Center for Ethics in Health Care is to provide the resources VHA leaders and staff need to address the complex ethical concerns that arise in today's clinical care, health care management, and research. Our National Ethics Teleconference or "NET call" program (featured in this issue) is one of the ways we meet that responsibility.

NET calls are also an example of the Center's strong commitment toward continuous quality improvement. We use a variety of methods to learn from VHA staff about their interests and needs, then design our educational offerings in direct response. We seek out suggestions and feedback from our target audience, then act upon them. NET calls also enable the Center to leverage the work of our consultation and policy services—and the National Ethics Committee—by sharing their insights with a diverse audience system-wide.

And by providing a forum for open questions as well as focused discussion, the calls offer opportunities for dialogue and networking, airing concerns, and exchanging best practices, which help to foster a positive health care ethics environment in VHA.

CONSULTATION NOTES

The Ethics Consultation Service of the National Center for Ethics in Health Care responds to inquiries from VHA staff. To request a consultation send an email to whaethics@va.gov,

Patients who engage in behaviors that undermine treatment or threaten harm pose many challenges for health care professionals, including ethical challenges. In such cases, local ethics committees often call on the Center's Ethics Consultation Service for guidance as they work with practitioners to resolve ethical concerns in caring for these patients.

The details that prompt facilities to request a consultation differ considerably from case to case, of course. Consults have involved patients who continue to abuse IV drugs despite repeated endocarditis, nursing home residents who violate dietary restrictions with severe health consequences, and patients on home oxygen who continue to smoke. But a common ethical theme runs through them all: how to 1) balance the competing goods of making reasonable accommodation for the patient's preferences about quality of life, 2) respect his or her right to refuse any treatment or procedure, 3) minimize the risks the behavior poses for the individual, 4) optimize the safety of others whom the behavior might endanger, and 5) allocate

STAFF NEWS - cont'd

In November 2004, Joel Roselin, MTS, Program Specialist for the Cen-



ter's IntegratedEthics initiative, presented a public lecture in Westwood, MA sponsored by the Division of Medical Ethics at Harvard Medi-

cal School, where he is a Fellow in Medical Ethics. In his talk, entitled "Learning on Patients: Ethical Tensions in the Training of Physicians," Mr. Roselin highlighted the challenge of providing excellent patient care while also giving medical trainees opportunities to exercise and improve their medical skills. While the training system is designed to balance these needs through a process of graduated responsiility and appropriate supervision, he said, patients can and should take an active role in their care. Mr. Roselin told his audience that they are integral partners in the medical education process and should expect to be treated as partners.

In September 2004, Mary Beth Foglia, RN, MN, MA, of the Ethics Evaluation



Service, led students of the University of Washington's Executive Masters of Health Administration program in a one-day module designed to help them appreciate and promote organizational

ethics practices. Ms. Foglia explored the aims of organizational ethics. She stressed that managers should promote the flourishing of the organization and its stakeholders by being aware of and stating explicitly the values at stake in every organizational decision, and inviting stakeholders to "come to the table" and participate in organizational decision making.

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CONSULTATION NOTES - cont'd

fairly when some patients make disproportionate claims on available resources.

Striking the right balance can take on special importance in some contexts—e.g., for residents in long-term care, the facility is not only a place where they receive health care; it is also "home" and that fact carries significant ethical weight. Center consultants help requesters clarify the values at stake in problematic situations, find practical ways to respect patients' choices while minimizing negative effects on care, and devise fair procedures for determining when a patient's preferences should yield to other values. Consultants also take a "preventive" perspective, encouraging requesters to draw on what they learn through the consultation—e.g., better understanding of why patients may fail to adhere to treatment or engage in harmful behaviors—when they face similar cases in the future.

"National Ethics Teleconferences" - cont'd

Disseminating National Ethics Committee Reports

NET calls further provide a venue for presenting the work of VHA's National Ethics Committee (NEC) to a wide audience. Members of the committee participate as guest faculty to discuss the NEC's analysis and recommendations on timely topics of importance to patients, practitioners, and health care managers throughout the system. NEC reports presented recently have included Online Patient-Clinician Messaging: Fundamentals of Ethical Practice (<u>September 2004</u>) and Gifts to Health Care Professionals from the Pharmaceutical Industry (<u>January 2004</u>).

Developments in Bioethics

The teleconferences also enable the Ethics Center to keep the organization's clinicians and managers abreast of developments in bioethics beyond VHA. For example, the <u>October 2004</u> call examined Pope John Paul's teaching regarding artificially administered nutrition and hydration for patients in permanent vegetative state. Center and guest faculty discussed the content of the Pope's remarks and their meaning within Catholic teaching on the use of life-sustaining treatment, and explored the implications for patients and practitioners in VHA.

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Continuing education credit is available for each National Ethics Teleconference, and call summaries that include presentation, discussion, and additional questions from the field are posted on the Ethics Center website.

Upcoming NET calls

Tue, Feb 22, I2:00 pm ET Wed, Mar 30, I:00 pm ET Tue, Apr 26, I2:00 pm ET

LOOKING AHEAD



William A. Nelson Award for Excellence in Health Care Ethics

The Ethics Center is pleased to announce the first competition for the William A. Nelson Award for Excellence in Health Care Ethics. This award recognizes excellence, dedication, and accomplishment in the field of health care ethics (including clinical ethics, organizational ethics, and research ethics). It honors the career-long legacy of William A. Nelson, former Chief of the Ethics Education Service of the National Center for Ethics in Health Care, by recognizing other VHA employees who have demonstrated a long-term commitment to promoting ethical health care practice in VHA. The nominee's contribution may be principally in the area of education, consultation, policy development, scholarship, or leadership.

Nomination form and information are available on the Ethics Center website at http://vaww.va.gov/vhaethics/nelson.cfm.

Complete nomination packages must be received no later than March 1, 2005.

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News from ... THE ETHICS EVALUATION SERVICE

The Ethics Evaluation Service designs methods and tools to assess the quality and effectiveness of ethics activities and programs within VHA.

Quality improvement managers often remark that "you can't manage what you can't measure." For facilities that want to better manage and improve their health care ethics practices, the challenge has been finding ways to meaningfully measure and track health care ethics outcomes and quality.

In response to this need, the Center's Ethics Evaluation Service has been developing tools that will allow facilities to obtain meaningful data about their own health care ethics practices. One such tool is the Staff Survey on Clinical and Organizational Ethics, which assesses staff knowledge, perceptions and experiences in order to measure the quality of a facility's ethical health care practices.

The survey is premised on the idea that ethical health care practices are a function not only of individual staff members' actions or knowledge of "ethical practice," but also those aspects of an organization's environment that promote ethical health care practices or create the conditions in which staff are likely to adhere to ethical practices. To adequately measure these different variables, the Staff Survey asks questions about:

perceived practices (perceptions of others'
practices as well as self-reported practices);

knowledge (of principles of "ethical practice"
and VHA policies related to ethical health care
practice);

and

institutional supports (perceptions of the quality, practicality, and helpfulness of an organization's structural and procedural supports for ethical health care practices).

The Staff Survey takes approximately 15-20 minutes to complete, and has been validated through extensive pilot and field testing.

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For more information about the Staff Survey or other evaluation tools, contact the Center's Ethics Evaluation Service at vhaethics@va.gov.

The National Center for Ethics in Health Care welcomes your feedback on *UPDATE*. Let us hear from you—
send your comments to vhaethics@va.gov.