VA Staff Discussion Forums on Ethics Issues in Pandemic Influenza Preparedness: <u>A GUIDE</u>

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This packet of materials was prepared by the National Center for Ethics in Health Care and the Office of Public Health and Environmental Hazards of the Veterans Health Administration. It includes resources that may be helpful to VHA facilities that choose to hold staff discussion forums on ethics issues in pandemic flu preparedness.

National Center for Ethics in Health Care Internet: www.ethics.va.gov Intranet: vaww.ethics.va.gov

VA Office of Public Health and Environmental Hazards Internet: www.vethealth.cio.med.va.gov/ Intranet: vaww.vhaco.va.gov/pubhealth/





Ethics Issues in Pandemic Influenza Preparedness: Why Staff Discussion Forums are Important

General Overview

In a flu pandemic it is anticipated that there will be more sick people, who have more complications, and who need more supportive care – all in the context of a highly transmissible disease. The surge in demand for health care services is expected to place extraordinary demands on health care facilities and communities. Because the surge capacity (resources in excess of those used on a daily basis) of VHA (and of the U.S. health care system in general) is limited, during a flu pandemic, health care standards may need to be altered to respond to the public health threat and the imbalance between care that is needed and resources that are available. This may involve difficult decisions about reporting for duty, quarantine, diminishment of patient privacy, rationing of care, triage, and mandatory vaccination for health care workers.

In order to contain a pandemic, to protect the public from harm, to maintain the continuity of essential services, and to make the best uses of limited resources, VHA leaders will likely need to make difficult and controversial decisions that impinge on individual liberty. The more that stakeholders, that is, those who will be affected by those decisions, can be informed about, and, if possible, involved in the decision making process, the more likely it is that the decision will reflect stakeholder concerns and values and be understood and accepted.

In support of decision making that is open, transparent, and inclusive, it is important that VHA staff members are involved in VHA facilities' pandemic preparedness planning. Holding staff discussion forums can help to build mutual understanding about the difficult administrative, clinical, and ethical decisions that will need to be made in a pandemic.





VA Staff Discussion Forum on Ethics Issues in Pandemic Influenza Preparedness

Sample Agenda

I. Introduction

Purpose of forum (Brief Overview handout)

5-10 min.

Tough Decisions: Preparing VA for the Ethical Challenges of Pandemic Influenza (PowerPoint slides) 30-45 min.

II. Key ethical values (Ethical Values handout)

10-20 min.

III. *Breakout sessions (5 to 25 people each)

45-90 min.

(to discuss issues and questions in Ethical Values handout)

IV. Feedback to the group

30-60 min.

Lunch #1

Depending on the size of the group and the time available for the meeting, you may want to consider various options. For example,

Option 1: Assign different questions to different breakout groups

Table I	Topics 1, 2, 3
Table II	Topics 4, 8
Table IIII	Topics 5, 6
Table IV	Topics 7, 9, 10

Option 2: (If you have limited time to devote to the meeting) Focus discussions only on a small number of the topics, such as, 5 and 6

Option 2: Structure the discussion as a series of 30 minute brown-bag lunches.

	•
Lunch #2	Introduction of key ethical concepts
	Panel discussion on topics 5 & 6
Lunch #3	Panel discussion on topics 1, 2
Lunch #4	Panel discussion on topics 7, 9

Introduction. Influenza overview

And so forth.





^{*} Breakout sessions - Instructions to organizers

VA Staff Discussion Forum on Ethics Issues in Pandemic Influenza Preparedness

Sample Brief Overview

In a flu pandemic it is anticipated that, in terms of health care, there will be more sick people, who have more complications, and who need more supportive care – all in an environment where contact can increase the spread of the virus. The surge in demand for health care services is expected to place extraordinary demands on health care facilities and communities. The surge capacity (resources in excess of those used on a daily basis) of VHA and of the U.S. health care system in general is significantly limited. As a result, during a flu pandemic, standards of care and work conditions may need to be altered to respond to the public health threat and the imbalance between care that is needed and resources that are available. This may involve difficult decisions about reporting for duty, quarantine, diminishment of patient privacy, rationing of care, triage, and mandatory vaccination for health care workers.

Because containment of a pandemic and protection of the public from harm may require steps that impinge on individual liberty, it is important that VHA staff, among others, are involved in VHA facilities' pandemic preparedness planning. To support such involvement, VHA facilities are holding staff discussion forums as an opportunity to share information and concerns about the complex ethics issues that accompany a public health emergency. Such forums are also in keeping with the VA Pandemic Influenza Plan's pre-pandemic communication guidelines (2.2.3.12) which include:

- Engaging stakeholders in a dialogue during the early stages of planning to ensure a clear and common understanding of concepts such as rationing of resources, guarantine, and obligations of clinical caretakers.
- Listening to stakeholders to assess their understanding, answer questions and concerns, and seek their input and ideas.

During the forum, you will

- Learn what experts expect will happen in an influenza pandemic.
- Learn about the ethical values of concern in an influenza pandemic.
- Have the opportunity to discuss examples and questions about decision making in an influenza pandemic.
- Have the opportunity to provide feedback to forum participants and coordinators.





VA Staff Discussion Forum on Ethics Issues in Pandemic Flu Preparedness Ethical Values in Influenza Pandemic Preparedness

(Based on STAND ON GUARD FOR THEE Ethical Considerations in Preparedness Planning for Pandemic Influenza – Report of the University of Toronto Joint Centre for Bioethics Pandemic Influenza Working Group - Ten substantive values to guide ethical decision-making for a pandemic influenza outbreak.

www.utoronto.ca/jcb/home/documents/pandemic.pdf)

- 1) Individual Liberty In a public health crisis, restrictions to individual liberty may be necessary to protect the public from serious harm. Restrictions to individual liberty should:
 - Be proportional, necessary, and relevant;
 - Employ the least restrictive means; and
 - Be applied equitably.

Examples:

- Quarantine
- Isolation or restriction of movement short of a full quarantine
- Non-essential routine hospital activities (e.g., routine clinics and elective surgery) will be curtailed

Discussion questions:

- How should decisions about such restrictions be made?
- When do you think that such measures would be warranted?
- What restrictions would you be willing to accept for yourself? Your patients?
- <u>2) Protection of the public from harm To protect the public from harm, health care organizations and public health authorities may be required to take actions that impinge on individual liberty. Decision makers should:</u>
 - Weigh the imperative for compliance;
 - Provide reasons for public health measures to encourage compliance;
 and
 - Establish mechanisms to review decisions.

Examples:

- Mandatory vaccination of staff
- Limitations on visitors/visiting hours





 Forced social distancing (e.g., mandatory hand washing, no hand shaking, mask and glove requirements, cancellation of day care services, cancellation of social activities, closing the staff lounge or cafeteria seating area.)

Discussion question:

- What restrictions do you think would be reasonable? What would you be willing to do to protect yourself and others from harm in an influenza pandemic?
- 3) <u>Proportionality</u> Proportionality requires that restrictions to individual liberty and measures taken to protect the public from harm should not exceed what is necessary to address the actual level of risk to or critical needs of the community.

Example:

 Staff contact with their family and loved ones might need to be proportionally curtailed to ensure that they are not contagious

Discussion questions:

- What restrictions to your liberty would seem reasonable or proportionate to you?
- What restrictions to your liberty do you think would be unreasonable or out of proportion?
- Can you think of circumstances that might change your opinion about what is reasonable/unreasonable
- <u>4) Privacy Individuals have a right to privacy in health care. In a public health crisis, it may be necessary to override this right to protect the public from serious harm.</u>

Examples:

- To care for larger than normal numbers of patients, care may have to be provided in hallways or other public areas
- Volunteers may need to assist patients instead of relying on hospital staff for some routine nursing care
- Possible epidemic contact information may be solicited from the patient
- Some patient information may be forwarded to local health departments or CDC

Discussion question:

 What sacrifices in privacy do you think would be reasonable? If we are forced to diminish privacy, what aspects of privacy do you think would be most important to maintain for veterans under our care?





5) Duty to provide care - Inherent to all codes of ethics for health care professionals is the duty to provide care and to respond to suffering. Health care providers will have to weigh demands of their professional roles against other competing obligations to their own health, and to family and friends. Moreover, health care workers will face significant challenges related to resource allocation, scope of practice, professional liability, and workplace conditions.

Examples:

- Staff will be required to work longer shifts
- Staff will be exposed to potentially lethal pathogens
- Staff contact with family or loved ones may be curtailed
- Staff may have to take on duties outside of their usual scope of practice

Discussion questions:

- What risks should health care professionals be required to take on during a flu pandemic?
- Are there limits to the health care professional's obligation to provide care in an influenza pandemic?
- <u>6) Reciprocity Reciprocity requires that society support those who face a disproportionate burden in protecting the public good, and take steps to minimize burdens as much as possible. Measures to protect the public good are likely to impose a disproportionate burden on health care workers, patients, and their families.</u>

Examples:

- Health care workers might be eligible for priority flu treatment, vaccines, safety training
- The facility may provide transportation for health care workers to and from work
- VHA health care workers might be eligible for family care support provided by volunteers

Discussion question:

- What kind of supports would help you to perform your duties under extraordinary circumstances?
- Are these kinds of supports necessary?

<u>7) Equity -</u> All patients have an equal claim to receive the health care they need under normal conditions. During a pandemic, difficult decisions will need to be made about which health services to maintain and which to defer. Depending on the severity of the health crisis, this could curtail not only elective surgeries, but could also limit the provision of emergency or necessary services.



Examples:

- Health care may need to be provided on the basis of severity of illness and survivability (triage), irrespective of service connection
- Health care services may need to be rationed
- Non-urgent care and routine clinics may be cancelled

Discussion questions:

- What ongoing services should be cancelled, which should be maintained, and how should these clinics be managed?
- Should allocation decisions be based on what will allow the most people to survive?
- Should patient's already on a ventilator be included in triage decisions when there aren't enough ventilators for all who need them?
- <u>8) Trust Trust is an essential component of the relationships among clinicians and patients, staff and their organizations, the public and health care providers or organizations, and among organizations within a health system. Decision makers will be confronted with the challenge of maintaining stakeholder trust while simultaneously implementing various control measures during an evolving health crisis. Trust is enhanced by upholding such process values as truthfulness, timeliness, and transparency.</u>

Example:

 Facility leadership may need to decide who will get access to limited resources such as respirators.

Discussion question:

- How can trust best be maintained with veterans under our care when hard choices need to be made?
- How can facility leadership best maintain the trust of staff when hard choices need to be made?
- <u>9) Solidarity -</u> As the world learned from SARS, a pandemic influenza outbreak will require a new vision of global solidarity and a vision of solidarity among nations. A pandemic can challenge conventional ideas of national sovereignty, security, competitiveness, or territoriality. It also requires solidarity within and among health care





institutions. It calls for collaborative approaches that set aside traditional values of self-interest or territoriality among health care professionals, services, or institutions.

Example:

 VHA facilities may be required to divert resources (e.g., ventilators or Tamiflu) to other state or Federal agencies.

Discussion question:

 How can VHA facilities meet competing obligations to its primary mission and to the National Disaster Management System?

<u>10)</u> Stewardship - Those entrusted with governance roles should be guided by the value of stewardship. Inherent in stewardship are the value of trust, ethical behavior, and high-quality decision-making. This means that decisions regarding resources are intended to achieve the best patient health and public health outcomes given the unique circumstances of the influenza crisis.

Example:

 To provide care for an influx of patients during a pandemic, VHA leaders may be required to alter the traditional standards of care, e.g. they may need to use outdated or experimental drugs and restrict services needed by individuals.

Discussion question:

 How can VHA leaders best make decisions about standards of care that get the most out of limited resources and maintain dignity and humanity in patient care?





PLANNING POINTS

For VA Staff Discussion Forums on Ethics Issues in Pandemic Influenza Preparedness

DISCUSSION FORUM PURPOSES:

- To enable VHA facility staff to have dialogue and deliberation on information and concerns about the complex ethical decisions that will need to be made under circumstances of pandemic influenza.
- To provide a forum for discussion about ethical values (such as individual liberty, protection of the public from harm, obligations of clinical caretakers, and fair allocation of scarce resources).
- To obtain staff feedback for VA's Pandemic Influenza Ethics Initiative (guidance for the field on ethical issues in pandemic influenza).

DISCUSSION FORUM AUDIENCE:

Facility staff – any and all employees, as well as residents and students, contractors, volunteers

KEY STEPS:

1 - ENLIST LEADERSHIP SUPPORT

- Describe discussion forum purposes to facility leadership and ask for support and participation
- Coordinate discussion forum planning with pandemic influenza planning group

2 - SET UP A FORUM PLANNING GROUP AND TIMELINE

- Name a coordinator
- Identify a planning committee, represent a variety of staff, if possible
- Consider holding more than one discussion forum to provide opportunities for more staff participation, especially those who work in shifts
- Develop steps and timeline, allowing adequate time for speaker arrangements, logistic details, plenty of publicity to invite staff

3 - DETERMINE FORMAT/LOGISTICS FOR AN INTERACTIVE EVENT

- Decide format to achieve purposes of staff dialogue and discussion, e.g., plenary session with breakout groups; series of brown bag lunches; discussions that are part of staff meetings. (See Sample Agenda).
- Decide the elements of the forum





- Name moderator to host forum, move it along, field and direct questions
- Identify facilitators for breakout groups; they may ask their groups for someone to take notes (ideally on flipcharts) and someone to report back to the larger group
- Consider identifying at the forum specific staff involved in pandemic planning and asking them for assistance in advance
- Select date, time, duration
- Decide general size of forum and locate a site that will allow breakout sessions;
 visit site
- Consider accessibility issues for wheelchair users, deaf or blind employees, non-English speakers, and others, and make arrangements as necessary
- Designate people in advance to take notes on plenary sessions; gather flipcharts; write forum summary; follow up on questions and answers, suggestions, offers to take action, and provide a brief feedback report to the VHA National Centers for Ethics in Health Care
- Discuss with your public affairs officer whether to have VA photographer and how the forum might be covered for internal communications purposes such as newsletter articles, Q/As
- Identify equipment and supplies needed, such as
 - Paper handouts
 - Laptop computer and screen for presentation, microphones for speakers and audience (all with audiovisual staff support)
 - Flipcharts or white board, markers
 - o Chairs, tables,
 - Pencils, paper, cards for question and comments
- Make sure lighting is adequate and electrical outlets are sufficient and well located
- Arrange for refreshments if desired

4- IDENTIFY AND WORK WITH MODERATOR/SPEAKERS/OTHER KEY STAFF

- Invite moderator and confirm; make sure other key staff and leaders are present as necessary
- Ensure moderator, facilitators, leaders understand forum is set up to allow dialogue, give and take; hold a meeting with them well in advance of the forum to clarify and discuss these points
- Prepare moderator and breakout facilitators for role as facilitators
- Work with moderator, facilitators on agenda and talking points; assign short speaking times to allow ample time for staff interaction and breakout sessions
- Work with breakout group facilitators to ensure that their role is to facilitate discussion of "ethical values in influenza pandemic preparedness" handout
- Consider background of intended audience; advise speakers to avoid jargon, technical terms from medicine or other fields, VAese, and acronyms
- Make sure any audiovisual presentations are readable: large enough font to see from back of room, contrasting colors, limit numbers of points/slide, graphics that help convey the message



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- Decide on and develop handouts (See Staff Forum on Ethics Issues in Pandemic Influenza Preparedness: Sample Agenda, Sample Overview, "ethical values in influenza pandemic preparedness" handout).
- Plan for breakout sessions (size, location, composition of groups, facilitators)

5 - PUBLICIZE THE FORUM WIDELY TO STAFF

- Use multiple means well ahead of time to invite staff to the forum; include title of event, date, time, place, contact name and information, and a clear statement of purpose. Your public affairs officer can assist you with this. Formats for forum publicity may include:
 - Letter from Director
 - Posters/flyers
 - Invitation via supervisory chain
 - Announcements by public affairs in newsletter, email
 - Invitations to employee groups to send representatives

6 - CARRY OUT THE FORUM

- Get there early (planners, those setting up, those speaking or managing)
- Set up room, make sure audiovisuals work, put out handouts, provide name tags and table tents as desired, make sure room(s) set up for breakout sessions.
- Greet attendees as they arrive, make them feel comfortable
- Manage microphones for speakers and for staff who comment or ask questions
- Open the forum by brief welcome from facility director or other leader
- Have the moderator facilitate the forum
 - Begin with a plenary session to introduce the topic and purpose
 - Explain the format
 - Introduce speaker(s)
 - Keep the speakers and discussion on time
 - Announce breakout sessions
 - Resume the plenary session
 - Facilitate breakout session feedback
 - Close the forum (summarize key points, identify next steps, thank all participants)
- Write suggestions on flipcharts
- Have preassigned people take notes on the plenary sessions; gather breakout session flipcharts; write forum summary; and provide a brief feedback report to the VHA National Centers for Ethics in Health Care
- Have public affairs staff work with VA photographer (if desired) and write internal communication pieces, such as a newsletter article

7 - FOLLOW UP

- Thank facilitators and attendees
- Take next steps including:





- Providing brief feedback report to National Center for Ethics in Health Care (can be done by email (<u>vhaethics@va.gov</u> – please put "staff forum feedback" in the subject line) or telephone (202-501-0364)
- o Publishing article or summary points for staff
- Identifying action items
- Answering remaining questions or posting Q/A document on the Web or in newsletter

OTHER RESOURCES:

The National Coalition for Dialogue and Deliberation – http://www.thataway.org/resources/understand/what.html

World Café Conversations – http://www.theworldcafe.com/articles/cafetogo.pdf

POWERPOINT SLIDES:

Tough Decisions: Preparing VA for the Ethical Challenges of Pandemic Influenza http://vaww.ethics.va.gov/ETHICS/docs/pandemicflu/ToughDecisions_032607.ppt

IF YOU HAVE QUESTIONS ABOUT HOLDING A STAFF FORUM, CONTACT:

 The National Center for Ethics in Health Care at <u>vhaethics@va.gov</u> or 202-501-0364



