



Integrated Ethics In Action

Promising Practices — Emerging Champions

Issue 20

Advancing Ethical Leadership Across VHA:

South Texas Veterans Health Care System Shares Resource Allocation Decisions Employees Remembered at Harry S. Truman Memorial Veterans' Hospital

This past year, in response to the National Center for Ethics in Health Care's (NCEHC) program metric for ethical leadership (EL), facilities and VISNs shared progress on improvement projects whose aim was to "promote EL and demonstrably enhance the ethical environment and culture" in their settings. NCEHC reviewers recently evaluated nearly 100 of these project summaries to determine the quality of their development process, content, implementation, effectiveness, and plans for sustainability.

The projects covered many ethical domains, most commonly including Resource Allocation, Everyday Workplace, Business and Management, and Professionalism in Health Care. The summaries indicated that facilities and VISNs are working diligently to engage leaders and staff in improving their ethical environment and culture by examining IE Staff Survey (IESS) scores and other sources, and by developing programs and practices to address observed gaps.

In this review, NCEHC identified a few trends that facilities should consider as they close out Fiscal Year 2012 improvement projects and begin thinking about those for 2013. While many summaries included robust descriptions of how a project was selected, implemented, and assessed, others lacked information in one or more categories. For example, in some cases, the selected strategies did not appear to address the stated improvement opportunity (i.e., problem) or goal. Also, while over half of the summaries reported positive quantitative or qualitative results, some did not include much detail about the measures they used, or they relied solely on results of the IESS to guide their improvement activities. Finally, only some included plans for how the IE team planned to sustain and spread their projects during the next year.

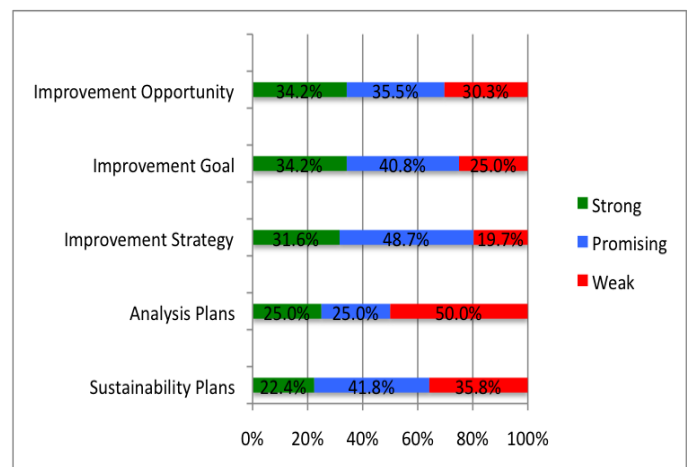
Note: Readers can search for the full text summary of the South Texas and Columbia EL improvement projects as well as other EL summaries under "EL improvement documents" at the IE VISN and Facility SharePoint site: <http://vaww.infoshare.va.gov/sites/IntegratedEthics/default.aspx>

IE programs needing additional guidance on reporting their progress on the EL1 metric should refer to the minutes from the April 9, 2012, Improvement Forum call that addressed Fiscal Year 12 Ethical Leadership Improvement Projects or contact Basil Rowland at Basil.Rowland@va.gov

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Reviewers' Ratings of Key Areas of EL Improvement Projects

To determine the EL projects' impetus, focus, and activities (and how well they related to each other), the reporting template asked facilities and VISNs to separately address the Improvement Opportunity, Improvement Goal, and Improvement Strategy, and to report their Analysis and Sustainability Plans (see definitions below). Using established criteria, the reviewers evaluated each category as being Strong, Promising, or Weak. The bar graph illustrates the overall distribution of the reviewers' ratings for facility summaries in each of five categories.



Section Key:

Improvement Opportunity = problem or EL quality gap that the project aims to address

Improvement Goal = overarching objective for the project

Improvement Strategy = method(s) for obtaining the goal

Analysis Plans = assessment of impact of the project on the EL quality gap

Sustainability Plans = activities to sustain improvements

EL Improvement Projects: South Texas and Columbia, MO

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(See the sidebar on page 1 for distribution of scores for the following sections: Improvement Opportunity, Improvement Goal, Improvement Strategy, Analysis Plans, and Sustainability Plans.)

The summaries from the South Texas Veterans Health Care System in Temple, TX, and the Harry S. Truman Veterans' Memorial Hospital in Columbia, MO, represent two examples of strong projects that have made a difference at these facilities. The South Texas project addressed a familiar ethical concern – increasing leadership's transparency surrounding resource allocation processes and decisions – while Truman VA undertook a unique project that was especially meaningful for their facility, the remembrance of deceased employees.

Sharing Resource Allocation Decisions in South Texas

The South Texas IE team initially identified this improvement opportunity through low IESS scores on questions relating to employee understanding of the decision-making process for allocating resources. To better understand the poor IESS results, the team then developed and distributed a focus survey to management-level personnel, including service Chiefs and Nursing Managers. When the results confirmed those from the IESS, they developed a cause-and-effect diagram that identified some root causes of the lack of communication surrounding resource-allocation decisions, including assumptions that staff were already aware of the facility's resource priorities and perceptions that the budgeting process was too complicated to share with

frontline staff. These concerns led to the stated goal, to “educate and promote understanding of resource allocation processes within the facility.”

To address this perceived gap, the IE program's Ethical Leadership Taskforce first worked intensively with facility senior management to develop a presentation on the facility budget process for service Chiefs and Administrative Officers. The taskforce then uploaded resources related to business planning, the Fiscal Year 2013 budget, and Veterans Equitable Resource Allocation (VERA) to the VISN 17 IE SharePoint site. Next, in May 2012, a leadership challenge was issued to Chiefs and Administrative Officers to use at least some of these resources in presentations to their staffs by July 30.

In monitoring compliance with the challenge, the taskforce discovered that over 85% of service Chiefs and Administrative Officers had held at least one staff meeting that was focused on resource allocation processes during the designated timeframe. Ultimately, the taskforce hopes the action plan will motivate staff to ask questions related to resource allocation rather than relying on the “rumor mill.” “In these tough times, employees want to know that we are using our money right,” said facility Director Marie Weldon. “These presentations help staff at all levels to engage with the tough decisions, and be aware that our facility was working to make most effective use of resources to benefit Veterans.”

“Even though leaders recognize that staff may not agree with the outcome of the deci-

sions, the taskforce reported a smooth process because they had leadership support right from the beginning,” said Chaplain Karen Reed, facility IE Program Officer. “The Director's encouragement assisted with the motivation to participate.”

According to Chaplain Reed, the impact of the Resource Allocation project will be measured by re-administering the management focus survey. “The follow-up survey will show if the project met management's needs for sharing resource allocation decisions.”

In addition, Chaplain Reed explained that the resource allocation presentation demonstrated to managers that the purpose of the IE program is to address ethics gaps in many health care domains. “Realizing this, our team plans to increase understanding of the entire IE program across the facility. Ms. Weldon has invited IE to present during the All Employee Meetings this year. We will use the same presentation on facility Web banners and in the employee newsletter to reach all employees.”

In order to sustain and spread an interest in ethics, managers will also be encouraged to explore the ethical implications of their requests by adding the NCEHC Quality Check questions to the Executive Decision Memorandum Template and adding an “ethics moment” during staff meetings. Content for these meetings will consist of ethics materials and de-identified cases from the facility, the VISN IE Advisory Board, and NCEHC.

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Connecting 5 Key Components of an EL Project: Two Strong Examples

South Texas VHCS (Temple, TX)	Harry S. Truman Memorial Veterans' Hospital (Columbia, MO)
<p>Improvement Opportunity: Clinicians and front line management lack sufficient knowledge on how RA decisions are made. IESS results confirmed in targeted focus survey.</p> <p>Improvement Goal: Educate and promote understanding of resource allocation processes. Improve communication between senior managers, line managers, service Chiefs, supervisors, and staff.</p> <p>Strategy: Service Chiefs to educate staff on resource-allocation processes on at least one occasion before July 30. Staff encouraged to attend these meetings.</p> <p>Analysis Plan: Compliance calculated via e-mail notifications. Managers' focus survey to be re-administered.</p> <p>Sustainability Plan: Add NCEHC Quality Check questions to EDM templates; include “ethics moment” during staff meetings.</p>	<p>Improvement Opportunity: After several facility employees died in Fiscal Year 10, the workplace culture was being negatively affected by these losses. Further, it was felt that leadership was “doing nothing” to ameliorate the pain.</p> <p>Improvement Goal: Acknowledge the grief and loss of the workforce, and celebrate the lives and accomplishments of current and former employees and volunteers.</p> <p>Strategy: Design and implement a memorial service for expressing grief and sharing remembrances for staff/volunteers who had died the previous year.</p> <p>Analysis Plan: Informal post-memorial service evaluation conducted; leadership and staff feedback elicited.</p> <p>Sustainability Plan: Hold memorial service annually.</p>

NCEHC Studies Functionality of ECWeb, Plans Enhanced Version for 2013

Over the past two years, ethics consultation coordinators and consultants have participated in a systematic evaluation of ECWeb. Conducted by NCEHC, this activity drew on both the participants' experience with the program and feedback from external ethics experts. The overarching purpose was to identify valuable features and desired enhancements to ECWeb which may inform the development of a significant update. (See the sidebar for examples.) The updated ECWeb will be combined with a new PEWeb section that supports ethics quality improvement. Together, the two sections will form a comprehensive IEWeb.

The internal evaluation of ECWeb involved three activities: an online survey, text field analysis, and a comprehensive usability assessment. The survey was sent to all ethics consultation coordinators and ethics consultants that had joined the IE listserv. It elicited respondents' perspectives on high-value and limited-value features of the existing system, obstacles to use, and missing features. It also asked respondents to identify which ECWeb functionalities were actually being used.

The text field analysis sampled facility records in ECWeb and analyzed the extent to which the content documented in the text boxes approximated ethical standards as articulated in the ethics consultation primer and Ethics Consultation: Beyond the Basics training.

The usability assessment was conducted by an external contractor with expertise in

ECWeb Team Uncovers Concerns, Develops Enhancements

In response to user feedback, the ECWeb upgrade team is planning many improvements, including:

Concern:	Planned Enhancement:
<i>System too slow</i>	Software adjustments will increase processing speed
<i>Redundant fields</i>	Content and screens will be consolidated
<i>No spell check function</i>	Spell check function to be added
<i>Unclear instructions on the screen</i>	NCEHC drafting clear and actionable instructions to be added to the system
<i>Limited "help" text available</i>	Robust help text will include examples to help guide consultants
<i>No advanced search function</i>	Advanced search function will enable multi-word searches
<i>Lack of personalization to user preferences</i>	Users will be able to customize their system settings

software design and usability testing, in cooperation with NCEHC. Consultants completed a case in ECWeb while a usability engineer observed and asked in-depth questions about the workflow process and workarounds. Participants also completed surveys on usefulness, satisfaction, and ease of use.

As a next step, the NCEHC invited leaders from numerous government and private institutions to a July 2012 meeting to offer their individual expertise regarding the development process. Participants included ethicists from the Joint Commission, the National Institutes of Health, San Diego's

Naval Medical Center, the Mayo Clinic, Kaiser Permanente, and Harvard Children's Hospital. The meeting included a discussion of ECWeb's history and the vision for IEWeb, and findings related to end-user experiences and suggestions for improvement. Participants then received a guided tour of the ECWeb prototype. A robust discussion of possible enhancements followed.

IEWeb is expected to be released late in Fiscal Year 2013. The launch will include educational support for field staff. More details will follow in *IntegratedEthics in Action* and other forums.

EL Improvement Projects

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Acknowledging Staff Grief over the Loss of Colleagues in Columbia, MO

After an unexpected spike in employee deaths, facility leadership and the IE team realized that issues of grief among the workforce were negatively affecting the culture and climate of various work units — and many believed that leadership was not doing anything to recognize the problem. When this issue came to the attention of the IE and the Executive Leadership Teams, an improvement goal was formulated to “demonstrate care, concern, and compassion for the staff,” as well as to “celebrate the life and contributions of deceased staff.”

After discussions with the facility Director, IE Program Officer Randall Kilgore engaged the IE Council, the Catholic and Protestant Chaplains, and representatives from Human Resources (HR), Palliative Care, Voluntary Services (VS), and Patient Services to develop an annual Employee Memorial

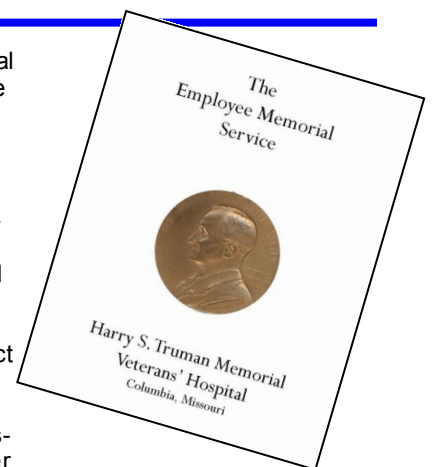
Service that would be based on the model used for the Quarterly Veterans Memorial Service. “By offering such a service that would involve leadership, management, and staff,” said Mr. Kilgore, “we hoped to provide a venue for sharing, expressing sorrow, and celebrating life and the essential contributions that these former employees made.”

The people remembered included not only current employees, but also retired employees and volunteers. Program developers compiled the list of deceased employees from HR and VS records, and from local obituaries. While the planners experienced no barriers in developing the service, they were prepared to accommodate last-minute changes or needs for additional grief counseling.

After the service, the IE team sought feedback from participants. “The service was well-received,” said Mr. Kilgore. “This memorial service provided a means by which co-workers could be actively engaged in remembering their colleagues. Comments from staff who attended provided enough

anecdotal evidence that it was a worthwhile expenditure of time and resources. Its impact will continue to be measured over time.”

One service has already been held, and plans for the next are underway. Further, senior executive leadership will remain involved in the annual service. “They will be asked to participate, especially when their specific divisions have experienced a loss of a staff member,” said Mr. Kilgore..



ANNOUNCEMENTS

Preventive Ethics: Beyond the Basics Workshop 2.0 Takes Over Phoenix September 18–19

The NCEHC is presenting its second Preventive Ethics: Beyond the Basics workshop in Phoenix on September 18–19, 2012. The purpose of this two-day workshop, hosted in partnership with VA's Employee Education System, is to provide advanced training to Preventive Ethics Coordinators in select aspects of the ISSUES approach to ethics quality improvement. To ensure equitable representation, each VISN is sending two participants.

Based on participant feedback from the first workshop held in August 2011, the Preventive Ethics (PE) work group has significantly enhanced the content for this training. The workshop will feature six training sessions and large group discussions as well as two Jeopardy! games on PE topics to facilitate learning and sharing. The learning objectives are:

1. Identify issues that are within the scope of Preventive Ethics
2. Apply prioritization criteria to select ethics issues
3. Describe best ethics practice using authoritative sources of ethical standards
4. Develop a data collection plan to assess current ethics practice
5. Develop a refined improvement goal
6. Identify top causes for a specific ethics quality gap
7. Determine strategies that will effectively address the specific causes of the ethics quality gap

In addition to NCEHC faculty, two IE field champions will also be leading sessions: Sheryl Kittelson, VISN 23 IE VISN Point of Contact, and Peter Mills, White River Junction VAMC Ethics Consultation Coordinator and Preventive Ethics Coordinator.

6th Annual National Healthcare Decisions Day April 16, 2013

It's never too early to start planning for National Healthcare Decisions Day (NHDD) 2013 on Tuesday, April 16, 2013! We've posted a list of activities that some of you did last year:

http://vaww.ethics.va.gov/docs/policy/2012_NHDD_Facility_Report.pdf.

You might also want to check out the new project launched by the Institute for Health Care Improvement:

<http://theconversationproject.org/starter-kit/intro/>.

We encourage you to register on the NHDD website (<http://www.nhdd.org/>). This website contains some excellent ideas and resources to jump start your planning. Ready – Set – GO!

What We're Reading. . . Ethics in the Literature

This article was of recent interest to our NCEHC IE Staff. It describes narrative ethics, and how the creation of the "story" can support the goals and program objectives of public administrators as they manage government programs.

This article can be used to spark engagement in your local IE program or to discuss in local journal clubs. To receive copies, consult your facility's librarian.

Zinner, S. E. (2011). The Stories Public Administrators Tell: Finding Meaning in the Ordinary Work of Life. *Public Integrity* 13(4), 385-395.

2012 IntegratedEthics Staff Survey Completed

The NCEHC thanks all IE staff who assisted with the IE Staff Survey, which was administered to all VHA staff from July 23rd to August 20th, 2012. In the next few months, each facility will receive information about how to obtain local data results. Also, NCEHC will host an IE Improvement Forum call on November 19 to share VHA national results and information about how to use the data going forward to improve ethics quality in your facilities. Stay Tuned.