Choosing Issues for PE: Tracking Tool

(See reverse side for brief column descriptions.)

			Appropriateness for PE					Ethics Quality Gap						Priority for PE ISSUES Approach						
								Best Ethics Practice			Current Ethics Practice										
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Date Issue Came to Attention of PE (mm/dd/yy)	Source of Issue (1–2 words)	Possible Ethics Issue (who, what, where, when, how much or how often)	Immediate Action Req'd (Y/N/U)	Simple Problem/Obvious Solution (Y/N)	Other Program Responsible for This Issue (Y/N/U)	Ethics Domain	Ethics Topic	Practice Inconsistent with Ethical Standards, Norms, or Expectations (Y/N/U)	Data Available (Y/N/U)	If Data Unavailable, Easily Collected (Y/N/U)	Preliminary Improvement Goal	Appropriate for PE (Y/N/U)	Alignment with Strategic Goals (L/M/H)	Level of Risk (L/M/H)	Impact on Patient and/or Employee (L/M/H)	Volume or Scope of Effect (L/M/H)	Resources Req'd to improve (L/M/H)	Likelihood of Success (L/M/H)	Refer for Ethics Leadership Approval (Y/N)
		.																	

Y= Yes; N=No; U=Unsure   L=Low, M=Medium, H=High

Column Descriptions

1. **Date Issue Came to Attention of PE:** Enter the appropriate month, day, and year that you learned about the issue. **(mm/dd/yy)**

2. **Source of Issue:** Answers could include a member of the ethics team, as well as a service line or department leader. **(1–2 words)**

3. **Possible Ethics Issue:** Provide a description of details relating to the issue, including who, what, where, when, how much, or how often. **(3–5 sentences)**

4. **Immediate Action Required?:** Does the issue require immediate attention or urgent action by leadership? If Yes, STOP this assessment process and refer the issue to line management or the ethics leadership body. If Unsure, assess whether immediate action is required before proceeding to the next question. **(Yes/No/Unsure)**

5. **Simple Problem/Obvious Solution:** Does this issue represent a simple problem whose solution is apparent? If Yes, STOP the assessment. The issue does not require an ISSUES approach to improve. **(Yes/No)**

6. **Other Program or Service Responsible:** Does another program or service have oversight responsibilities for the issue? If Yes, STOP the assessment and contact the appropriate program or service. If Unsure, determine whether another program has oversight responsibilities or "owns" the process. **(Yes/No/Unsure)**

7. **Ethics Domain:** Refer to IntegratedEthics Website for listing of domains and topics at http://www.ethics.va.gov or http://vaww.ethics.va.gov

8. **Ethics Topic:** Refer to IntegratedEthics Website for listing of domains and topics at http://www.ethics.va.gov or http://vaww.ethics.va.gov

9. **Practice Is Inconsistent with Widely Accepted Ethical Standards, Norms, or Expectations:**

   Is the PE team certain that the practice described in the ethics issue is inconsistent with prevailing ethical standards, norms, or expectations? Can you identify specific and widely accepted ethical standards (e.g., policy, professional codes of ethics, accreditation standards), norms, or expectations for the practice? Without a clear practice standard, an ISSUES approach may not be appropriate. If Unsure, consult with the ethics leadership team. **(Yes/No/Unsure)**

10. **Data Available:** Do you have measurable data about current or baseline practice i.e., qualitative or quantitative information you can count or express as a number or percentage, about your current practice? If Unsure, determine whether measurable data on current practice is available before proceeding to the next question. **(Yes/No/Unsure)**

11. **If Data Unavailable, Easily Collected:** Could you easily gather measurable data about current or baseline practice? If No, the issue may be outside the scope of what the PE team can address. If Unsure, determine whether data can be easily collected before proceeding to the next question. **(Yes/No/Unsure)**

12. **Preliminary Improvement Goal:** Describe the desired outcome of the improvement process (e.g., increase disclosure of adverse events that cause harm to patients or surrogate decision makers).

13. **Appropriateness for PE ISSUES Approach:** If the answers to all of the preceding questions are in the indicated direction, and you can describe a preliminary improvement goal, you can answer Yes to this question, and proceed with the prioritization. If Unsure, bring the issue to the ethics leadership body. **(Yes/No/Unsure)**

14. **Alignment with Strategic Goals:** To what extent does addressing the ethics issue align with the organization's and ethics program's strategic priorities? **(Low/Medium/High)**

15. **Level of Risk:** What level of risk does the ethics issue pose to the organization if left unaddressed? **(Low/Medium/High)**

16. **Impact on Patient and/or Employee:** What level of impact will addressing the ethics issue have on patient and/or employee satisfaction? **(Low/Medium/High)**

17. **Volume or Scope of Effect:** If this ethics issue is addressed, how many people, units, etc., will be impacted by the resulting improvement in ethics quality? **(Low/Medium/High)**

18. **Resources Required to Improve:** How substantial are the resources required to improve ethics quality for this specific ethics issue? Is the anticipated outcome sufficient to justify the expenditure of resources? **(Low/Medium/High)**

19. **Likelihood of Success:** How likely is it that the PE team can succeed in tackling the ethics issue and achieving the desired outcome? **(Low/Medium/High)**.

20. **Refer to Ethics Leadership Body:** Should the issue be referred to the ethics leadership team for final approval? If Unsure, bring to the ethics leadership body. **(Yes/No/Unsure)**