



August 19, 2013

To: Clinical Staff Executive Committee

FROM: Ethics Committee Annual Report - 2012-2013

Committee Charge:

- The Ethics Committee serves as a resource for Medical Center staff and administration on the ethical responsibilities of the organization and its staff, as outlined in the Code of Ethics, and on other problems in clinical care. (Policy 0263)
  - Policy review and development
  - Ethics Education– institutional and community
  - Ethics Consultation Service and case review
    - Moral Distress Consult Service
    - Patient Care Consulting Subcommittee
  - Institutional Ethics

Membership:

- Robert Boyle, MD, Pediatrics, Chair (1/20/05)  
Director, Ethics Consult Service 4/11
- Jeffrey Barth, PhD, Psychiatry
- Jamieson Bourque, MD, Cardiology
- Lisa Letzkus, RN, MSN, KCRC
- James Childress, PhD, Religious Studies
- Marcia Childress, PhD, Humanities in Med
- Elizabeth Epstein, RN, PhD, Nursing School
- Lynn Fleming, JD, Administration
- Daryl Gress, MD, Neurology, NNICU
- Beth Hodsdon, JD, General Counsel
- Christine Lau, MD, Surgery
- Jackie Loach, RN, Patient Safety
- Dea Mahanes, RN, MSN NNICU
- Mary Faith Marshall, PhD, Center for Biomedical Ethics and Humanities
- Sue McCoy, MD, PhD, Community
- Joann Pinkerton, MD, Ob-Gyn
- William Potts, MSW, Social Work
- Gordon Putnum, Pastoral Services
- Lori Strauss, Corporate Compliance
- Lois Shepherd, JD, Center for Biomedical Ethics
- Cynthia Westley, RN, Community Relations

- Prospective members  
Two faculty physicians  
Two resident physicians (34 applicants!)

### **Committee Accomplishments:**

#### **Policy Development/Review**

- 050—Patient Visitation
- 079—Do Not Resuscitate Orders
- 115—Declaration of Death
- 207—Organ Procurement in Donors after Cardiac Death
- 142—Advance Directives
- 105—Ethics and Patient Care Consultation
- 191—Refusal of Treatment
- 026—Patient’s Rights and Responsibilities
- 115—Guidelines for The Determination of Death: Including Death by Neurologic Criteria
- 024—Informed Decision Making

#### **Topic Review**

- Discussion with Transplant Program regarding age limit for good Samaritan organ donations
- Discussion with members of Organ Donation Committee about OPA programs and procedures for contact with families
- Continued discussions with hospital administration regarding staff notification of police of discharges for patients with an existing warrant
- Discussion with Transfusion Committee regarding “lookbacks “ for patients exposed to donors who report social-behavioral risks
- Approval of Advance Directive—Short Form
- Discussion and support for eventual implementation of POST (Physician’s Orders for Scope of Treatment) program in this region; policy will need to be written
- Discussion with Transfusion Committee of transfusion consent
- Discussion of Nursing Code of Ethics
- Discussion and response to physician concern regarding summons to testify re medical necessity
- Discussion/investigation re role of LIP, especially nurse practitioners and physician assistants, vs physician/attending in certain hospital policies

## **Programs**

- Clinical Ethics-- Ethics Consultation Service
  - Mary Faith Marshall, PhD, new director of the Program in Biomedical Ethics assumed Co-Director role with Dr. Robert Boyle
  - Membership has increased from low of four to current eight, with additional members being recruited
  - Activity- has increased to 2-6 consultations/week
  - Frequent issues continue to be surrogate decision making, futility, advance directives
  - Full Committee review of clinical cases at each meeting
- Moral Distress Consultations, originally organized by Ann Hamric, PhD, RN, to facilitate discussion of difficult issues on patient units, has been brought under the umbrella of the Ethics Consultation Service. Approximately one consultation/month

## **Current Priorities, Goals, and Issues:**

- Continue to recruit additional physician members and another community member to the Ethics Committee
- Continue to recruit at least one additional physician and a chaplain to the Ethics Consultation Service
- Enhance training program for new Consultation Service members
- Continue discussions with hospital administration re Consultation Service support, resources for training, on-call payment
- Policy review– as required by 3-year cycle of review

## **Recommendations to CSEC:**

- Continue to utilize committee for review of topics with ethical implications
  - Committee currently has effective working relationships with
    - Risk Management
    - Patient Representative
    - Hospital Counsel
- Continue to support ethics education of hospital staff

Submitted August 19, 2013

Robert Boyle, M.D., Chairman  
Ethics Committee