Striving for Excellence in Ethics: A Robust Ethics Program for Long-Term Care
November 29, 2011 | Avila Institute of Gerontology Webinar

TOM NAIRN, OFM, Ph.D.
Senior Director, Ethics

Questions to ask yourselves as we begin . . .

• What kinds of ethical issues arise at your institutions?

• What do you do about them?

• If the same sorts of ethical issues keep arising, what does that mean?
Objectives for the Webinar

• Identify the elements of a robust ethics program.

• Evaluate the effectiveness of ethics committees in long-term care.

• Evaluate the effectiveness of ethics consultation in long-term care.

Mission of Carmelite Sisters for the Aged and Infirm

“Our apostolate is not only to staff and operate up-to-date homes for the aged, but as religious it is to bring Christ to every person under our care. Bringing Christ means giving them His compassion, His interest, His loving care, His warmth morning, noon and night. It means inspiring the lay people who work with us, to give the same type of loving care.”

--Mother M. Angeline Teresa, O. Carm.

• How does a robust ethics program enhance the apostolate/mission of your organization?
Values of the Carmelite Sisters

- Sanctity of life
- Quality of life
- Hospitality
- Holistic care
- Shared commitment
- Roman Catholic doctrine
- Social justice
- Christian witness
- Redemptive suffering
- Pastoral care
- How might a robust ethics program help enhance these values?
Range of Ethics Services

Ethics Expertise

- The Ethics Leader:
  - Designated individual with expertise in ethics
    - What sort of expertise is needed in long-term care?
    - What training is appropriate?
  - Access to a professional ethicist
  - Appropriate mentoring
- Critical role in creating, sustaining, and (if necessary) changing the organizational culture
- Support staff in adhering to ethical standards
  - Importance of example
Ethics Committees

• ERD Directive #37
  – An ethics committee or some alternate form of ethical consultation should be available to assist by advising on particular ethical situations, by offering educational opportunities, and by reviewing and recommending policies. To these ends, there should be appropriate standards for medical ethical consultation within a particular diocese that will respect the diocesan bishop’s pastoral responsibility as well as assist members of ethics committees to be familiar with Catholic medical ethics and, in particular, these Directives.
  – Not simply for acute care facilities
    ▪ Directive is also for long-term care facilities
• Quality of ethics committees can be improved

Why have an ethics committee in a long-term care institution?

• Advise on particular ethical situations
• Offer educational opportunities
  ▪ Staff
  ▪ Families/residents
  ▪ Community
• Review policies
  – In addition . . .
    ▪ Help with appropriate stewardship
    ▪ Support residents, families, and staff
    ▪ Contribute to the ethical integrity of institution
    ▪ Help in quality improvement
Ethics Committees

• Structure of the Ethics Committee
  – Mission of the Ethics Committee
    ▪ How does this support the mission of the facility? organization?
    ▪ How specific is it?
      ➢ Clinical areas
      ➢ Organizational ethics: What do clinical questions say about the identity and integrity of your institution?
  – Policy and by-laws
    ▪ Spell out purpose, function, and authority of committee
  – Membership
    ▪ Interdisciplinary
    ▪ Ex officio and appointed members
      ➢ Need the time and institutional support to function properly
    ▪ Selection process
    ▪ Term of membership

Striving for Excellence in Ethics: A Robust Ethics Program for Long-Term Care
Competencies of Committee Members

- How much ethics must a committee member know?
  - Care for the aged
  - End of life care
  - Appropriate professional relationships
  - Communication
- How is this done in a long-term care facility?

Functions/Procedures of Ethics Committees

- Setting and monitoring annual goals
  - Needs assessment
- Ensuring access to committee
- Education
  - For committee
  - For individual committee members
- Ethics updates
- Particular issues pertaining to facility or residents
  - Education for staff, families, community
  - Policy review
  - Organizational ethics
- Review ethical consults
- Establish feedback loops to improve organization
Consultation and Advisement

- Open access
- Sound consultation process: explicit stages
  - Initial contact
  - Information gathering
  - Processing and analysis
  - Recommendations
  - Retrospective review
- Standards for formal meetings with consistent protocols
- Notification
- Documentation
- Evaluation, quality review, and improvement
- Importance for long-term care

Elements of Consultation

- Access and plan for responding to requests
  - Well publicized
  - Ease at assigning ethics consultants
  - Ability to discriminate what is appropriately within the domain of the ethical consult
- Clear process for gathering information
  - Ensure that all relevant stakeholders are heard
  - See resident whenever possible (even if non-decisional)
  - Formal meeting?
Elements of Consultation

- Need standard format for records
- Recognize that clinical ethics consultation is one of many collaborating services that must be integrated and transparent in functioning.
- Importance of institutional and peer oversight
  - Consultants should reflect diversity of the institution
  - At minimum, should report to ethics committee
  - Necessity of regular peer review of ethics consultants
  - Accountability and professional development
- Qualifications and competency of ethics consultants

- Qualifications and competency of ethics consultants
  - Knowledge
  - Skills
  - Clinical capacity
  - Basic competencies v. advanced competencies
  - Knowledge of Catholic Ethics and Ethical and Religious Directives
- Measures for training consultants
  - Formal training program?
  - Apprenticeship?
- Quality improvement process
Catholic Ethics

- Use and scope of the Ethical and Religious Directives
- Understanding of specifically Catholic ethical methodologies.

Importance of Documentation

- Who requested consult, date, time, description of circumstances
- Patient information, including attending physician
- Names of ethics consultants
- Clear statement of ethics issue
- Summary of relevant information
Importance of Documentation

- Description of any formal meetings
- Summary of ethical analysis
- Identification of ethically appropriate decision-maker(s)
- Options considered and ethical justification
- Explanation of whether an agreement was reached
- Recommendations and action plan

Institution Integration

- Link to other key institutional committees
- Importance of shared ethical decision-making tools
  - Gather information
  - Carefully identify issue
  - Review core values, commitments
  - Identify alternatives
  - Make the decision
    - Decision models v. discernment models
  - Evaluate the decision
- Relationship building
- Process for evaluating integration of ethics services
Leadership support

- Leadership is important in . . .
  - demonstrating that ethics is a priority in the organization
  - fostering a culture of ethics
  - supporting range of ethical services
    - Participation in activities
    - Encouraging participation by staff
    - Publicly valuing such participation
    - Providing resources
  - ensuring that mentoring is provided

Striving for Excellence in Ethics

- Can look like an impossible task for Catholic long-term care
- Emphasis on \textit{striving}
  - Not all will be accomplished at the same time
  - Importance of goal setting
  - Importance of evaluation
- It remains simply living out our mission
Mission and Vision

• Who are we as a Catholic and virtuous organization? 
  *(Ethical identity)*

• What do we do in light of this? 
  *(Ethical integrity)*

• Properly functioning ethics committees and consultation helps us “walk the talk.”

• But remember . . . no one size fits all.

In light of what we have said, what elements are most important for your own institutions?

Thank You