I. Purpose

To define the purpose of the Ethics Committee and Ethics Consultations and to document the composition and meeting requirements of the Ethics Committee. This policy will also be considered as a joint Administrative/Medical Staff Policy and is referenced as Medical Staff Policy (#5-25-1).

A. Facilitate discussion among all parties involved with a medical-ethical problem or issue. To assist direct care givers to make the best decisions consistent with theories and practice of medical ethics.

B. Educate hospital personnel (eg. nursing, ancillary, administration), members of the Medical Staff, patients/families, and the community through Ethics Committee meetings, Ethics Conferences, Ethics Consultations, and Ethics Symposiums.

C. Serve in an advisory capacity to make policy or procedure recommendations relative to ethical issues to the hospital and the Medical Executive Committee.

II. Policy

I. STRATEGIC OBJECTIVES
The strategic objectives of the Ethics Committee, in pursuit of its goals, are as follows:
A. To recognize and address ethical issues, when possible, at all levels of the organization;
B. To engage in informed reflection and dialogue about ethical issues confronting patients, families, providers, and administrators;
C. To serve as a collective knowledge-base about ethics-related services and programs;
D. To advocate for and promote ethics education and consultation when appropriate and feasible;
E. To foster a culture of ethical sensitivity and awareness throughout the organization;
F. To review institutional and relevant state policies, to suggest recommended changes for existing policies or practices where appropriate, and to offer guidelines and ethical principles that should inform clinical or organizational procedures and protocols; and
G. To maintain an appropriate level of competency in ethics, and to support efforts to maintain a collective level of competency in ethics throughout the organization.

II. FUNCTIONS
The primary functions of the Committee are broadly categorized under education, consultation, and policy review and development.

A. Education
   1. To develop educational programs in medical ethics for Inova personnel (eg. nursing, ancillary, administration), members of the Medical Staff, patients/families, and the community through Ethics Committee meetings, Ethics Conferences, Ethics Consultations, and Ethics Symposiums.
   2. To monitor developments in state and federal law for ethical implications for patient care and to make appropriate responses and/or recommendations.

B. Policy and Guideline Development
   To serve as an advisory body for administrative, medical, and professional staffs on the formulation of policies and/or guidelines concerned with ethical issues in patient care.

C. Case Review and Clinical Ethics Consultation
   1. The Committee may review the care of a patient upon the request of any member of the hospital staff, patient, or member of the patient’s immediate family regarding ethical issues in patient care.
   2. The Committee may review all cases in which there is serious ethical disagreement among staff responsible for the care of a patient or the attending physician and the patient or the patient’s surrogate.
   3. The Committee shall support a clinical ethics consultation service.

D. Other Responsibilities
   1. Keep records of its agenda, meetings, deliberations and decisions, and maintain such records in confidential fashion.
   2. Accept other responsibilities related to medical ethics that are delegated by Administration or the Medical Executive Committee.
   3. Engage in Community Outreach relating to issues of importance in the area of medical ethics.

III. CONFIDENTIALITY
Information considered by the Ethics Committee shall, to the fullest extent permitted by law, be confidential, including the Committee’s deliberations and minutes; and further, this information shall not be used in any way except as provided in these guidelines or except as otherwise required by law.
A. Any information, deliberation, or other material developed during case review or clinical ethics consultation may become a part of that patient’s medical record.

B. The Committee, its members, and ethics consultants shall respect the confidentiality of the physician-patient relationship.

C. Guests and/or observers may request attendance at Ethics Committee Meetings for a variety of reasons. These requests may be granted at the discretion of the Chairpersons. Every effort will be made to limit non-committee members’ access to private and sensitive information as appropriate. In all cases, Ethics Committee attendees will be reminded of the confidential nature of the proceedings.

D. The Committee is neither to enforce ethical decisions nor stand in judgment of those whom it seeks to help.

E. The Committee is not to serve as a professional ethics review board, or as a substitute for legal or judicial review.

F. Meeting minutes are maintained in a confidential file in the Medical Staff Services Department.

IV. MEMBERSHIP
A. The Ethics Committee is a standing committee of the Medical Staff and is organized in accordance with Article 12.4 of the Medical Staff Bylaws. Voting privileges shall be extended to all members of the committee, to allow all healthcare professionals on the committee to participate in the resolution of issues.

B. Members shall be appointed for two year terms. A member may be appointed for succeeding terms upon the recommendation of the Committee Chairs.

C. Membership is a privilege which shall be extended to those individuals who have an expressed interest in medical ethics and who continuously meet qualifications, standards and requirements set forth by their professions and by this policy.

D. The Committee shall be co-chaired by an Active Member of the Medical Staff, appointed by the Medical Executive Committee, and the Director of Clinical and Organizational Ethics.

E. Physician members of the Ethics Committee shall be appointed by the President of the Medical Staff with recommendations from the Ethics Committee Chairs. Hospital personnel shall be appointed by the Administrator through the existing process. Interested physicians or hospital personnel may request appointment through the above mechanisms.

F. The Committee’s members are recommended to come from the following categories:
   - Active Members of Medical Staff
   - Pastoral Care
   - Nursing
   - Medical Ethicists
   - Ancillary Staff
   - Social Services
   - Administration
   - Community-At-Large

G. Requirements of Members: A minimum attendance at meetings will be required. A member who has three consecutive absences or four total absences within a twelve month period will automatically be subject to review by the Committee. Members are expected to inform the Ethics Committee Chairs in a timely manner of any conflict of interest, changes in professional status, or intentions to resign.

V. MEETINGS
A. Frequency
The Committee will meet monthly unless the meeting is canceled by the Chairs.

B. Quorum
A quorum will consist of a minimum of nine members, including one Chairperson for the purpose of conducting business. In recognition of the special obligations and commitments of residents and medical students, their absence will not count against quorum, but their presence will count toward quorum.

C. Special Meetings
Special meetings of the Committee may be called by agreement of the Co-Chairs. Special meetings shall be called by the Chairs upon the requests of three (3) members of the Committee.

VI. ETHICS CONSULTATION
An ethics consultation is a process by which trained consultants or an Ethics Consultation SubCommittee of the Inova Ethics Committee respond to requests for help from individuals directly involved in a patient’s case or in the process of decision-making. You can reach the consult service by paging #38442 (ETHIC) Monday - Friday 9am - 5pm or by calling the hospital operator and asking for the ethics committee member on call. Typically, the ethics consultation service is able to respond within 24 hours to requests for assistance.

The ethics consultation service is primarily intended as a resource when patients, family members or health professionals feel that they have reached the limits of their own personal or professional ability to address ethical questions.

Inova offers this advisory service free to patients, family members and health care providers. The patient and anyone involved in caring for that patient can request an ethics consultation without fear of intimidation or reprisal. All discussions are confidential. An ethics consultation is designed to:

- Identify ethical problems in the care of a particular patient;
- Clarify these problems through a careful analysis of the values involved;
- Promote discussion and dialogue of the values, issues and ethical problems involved with those directly involved in the case;
- Resolve ethical problems through a process of shared decision-making.

An ethics consultation is advisory. Patients, family members, and health care providers remain responsible for their own decisions. Clarification of the ethically accepted course of action can help the health care providers and patients navigate difficult clinical circumstances.

VII. ETHICS CONSULTATION SUB-COMMITTEE
Some questions or issues necessitate the use of the Ethics Consultation Sub-Committee, an ad hoc subcommittee of the Ethics Committee. This sub-committee may be convened for any of the following reasons:

- Review of a patient's substitute decision-maker by the Patient Care Consulting Committee is needed.
- The ethics consultant or the person requesting the ethics consultation believes that the issues are sufficiently complex that an interdisciplinary team approach would be beneficial.
- External agencies, such as the Guardianship Commission, request a formal analysis of or recommendation about a case.
III. Applies to

Inova Fairfax Medical Campus

IV. Expected Outcomes

An ethics consultation may be requested by anyone when an ethical problem or question involving patient care is not being satisfactorily addressed or resolved for all concerned. Knowledge of the consult by the attending physician is suggested but not required.

An ethics consultation is designed to support, not to replace normal lines of communication about ethically troubling situations. Requests for help from the ethics consultation service are especially encouraged when:

- A patient, a family member or health care provider wants to “talk through” important ethical dimensions of the patient’s care;
- Efforts by the patient, family and professional staff to resolve a problem have reached an impasse;
- There is serious ethical disagreement among health care providers or within the patient/family relationship;
- The case is ethically unusual, unprecedented or very complex;
- A patient, family member or health care provider needs help when an ethically significant decision has to be made.

Ethical questions and concerns may develop to the point where conflict and serious disagreement results. Health care providers should rely on their education, experience and good judgment to prevent such escalation of disagreement. Discussing such situations with the ethics consultation service might prove helpful before a true impasse is reached.