

spotlight events

- National Center for Ethics and Employee Education System Co-Sponsor Annual Intensive Training Program

Throughout the Veterans Health Administration (VHA), ethics programs serve an essential function by helping to clarify and promote ethical health care practices. This five-day intensive course is designed to provide a select group of ethics program participants – including members of Ethics Advisory Committees – with the specialized knowledge and skills needed to assure their program's effectiveness.

- VISN 11 Sponsors Ethics Workshop for Executives and Members of Ethics Advisory Committees
- VHA National Ethics Committee Holds Biannual Meeting
- VISN 3 to Host Ethics Conference

To read about these events, visit:

www.va.gov/vhaethics/spotlight.cfm



best practices

VISNs Establish Network-wide Ethics Committees

by Janice Lynch Schuster
news@vhaethics contributor

As the systems for delivering and financing health care grow increasingly complex, so too do the ethical issues facing health care institutions. To address these issues, some Veterans Integrated Service Networks (VISNs) have established special committees dedicated to addressing ethical issues that arise on a network level. Their stories can inform others who may wish to develop their own programs to tackle organizational ethics issues.

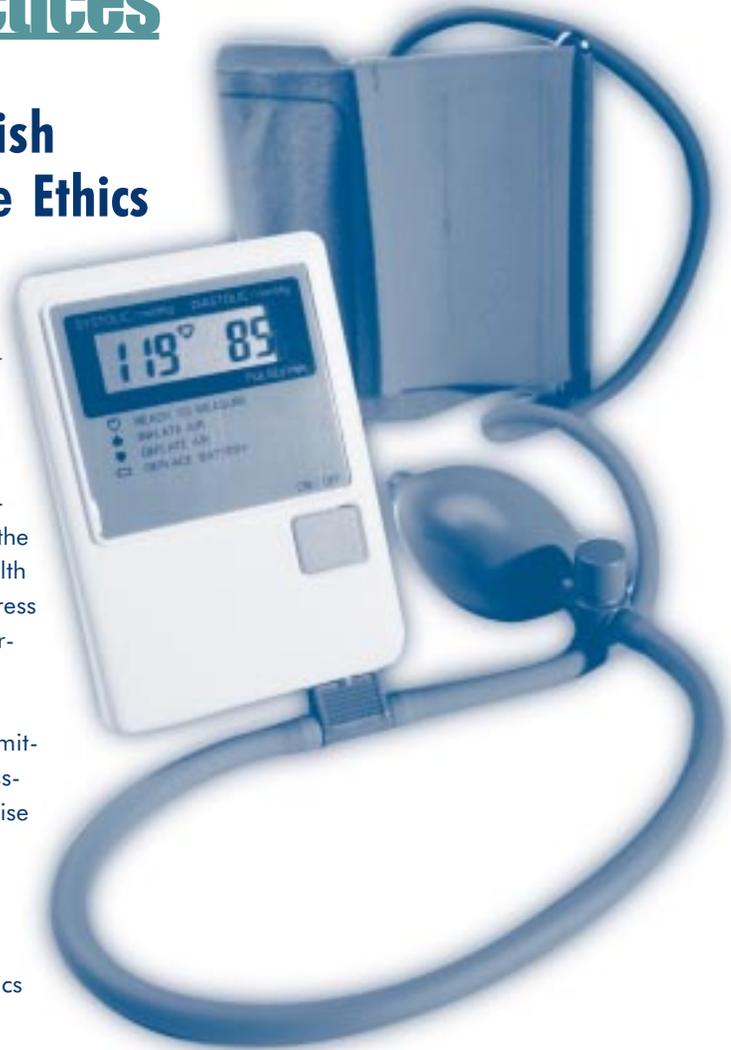
According to Thomas L. Garthwaite, M.D., Under Secretary for Health, "Ethical issues are an integral part of organizational decision-making. As health care executives and policy makers, we have a responsibility to consider the ethical aspects of everything we do."

"Organizational ethics is still in its infancy," notes Ellen Fox, M.D., Director of VHA's National Center for Ethics. "Organizational ethics has been defined in several

different ways. We think of clinical ethics as focusing on what is right for a particular patient. But when organizations become ethical actors, the issues range from patient care policies to the uniform benefits package to billing practices. Organizational ethics can also include how the institution defines and communicates its mission and values."

Learn how VISN 2 and VISN 14 addressed these issues at:

www.va.gov/vhaethics/best.cfm



for a complete list

www.va.gov/vhaethics

of upcoming events

national ethicsnews

Challenges and Change book now available at no charge

The VHA National Center for Ethics is pleased to announce that **Challenges and Change**, a collection of fourteen reports of the VHA National Ethics Committee, is currently available at no charge. The reports address topics relating to clinical, organizational, and research ethics. The book is a valuable addition to any ethics library. For information on how to receive a free copy of **Challenges and Change** visit the VHA National Center for Ethics web site at: www.va.gov/vhaethics/national.cfm

Videotape on protection of human research subjects at a VA library near you!

A videotape entitled Protection from Research Risks: Challenges for Today's Investigators and Research Administrators has been produced by the Office of Research and Development and distributed to all VAMC libraries. The video documents an October 1999 satellite panel discussion of how to protect human subjects of research. For more information about the protection of human research subjects and VHA's research assurance process visit: www.va.gov/resdev/fr/broadcast.htm

Compliance web site offers easy access to information

Ever wondered about the new VHA compliance program and how it works? A web site brings together information about the development and implementation of the VHA compliance program. Links provide access to policy documents and Veterans Integrated Service Network (VISN) compliance resources. To learn more, go to: www.va.gov/vhaethics/national.cfm



Ellen Fox, MD
Director, National Center for Ethics

This is an exciting time for VHA Ethics! Featured in this issue of **news@vhaethics**, for example, are network-wide ethics committees, VHA's National Ethics Committee, and other hot topics and events. The National Center for Ethics, too, is undergoing exciting changes. We invite you to come and browse our evolving web site and meet the newest members of our staff.

We recently completed our reader survey – many thanks to all of you who participated. Based on our findings we have made several important changes in our newsletter including its new name, **news@vhaethics**. You told us that you would like to receive Ethics Center information in both print and electronic form, so we modified our format. The new newsletter consists almost exclusively of brief news items and abstracts of

full-length feature stories, all linked to our web site. You said you wanted to receive the newsletter more frequently, so we have modified our production schedule. Also in response to your preferences, we filled **news@vhaethics** with practical information you can use.

The newsletter redesign is just one part of a larger communications plan for the National Center. Look for new interactive features on our web site, such as topical bulletin boards that will allow you to share and discuss ethical issues with colleagues throughout the system. We invite you to send us your feedback, as well as your ideas for **news@vhaethics** stories and events. Tell us about your new ethics-related policy, program, project, or other accomplishment. We will spread the word!



legalbriefs

Must Food and Fluid Always Be Provided?

by Angela M. Prudhomme, JD
Office of General Counsel

In U.S. law, the right of a competent patient to refuse a feeding tube or other artificially supplied nutrition and hydration is well settled. The right of a surrogate to refuse artificial fluid or nutrition on behalf of a patient who lacks decision-making capacity is also widely accepted. The courts have consistently held that "artificial feedings, such as nasogastric tubes, gastrostomies, and intravenous infusions, are significantly different from bottle-feeding or spoon-feeding - they are medical procedures" that a surrogate can refuse on a patient's behalf.

VA policy holds that patients have the right

This regular feature of **news@vhaethics** provides concise, up-to-date information on legal and regulatory issues in health care ethics. The current article clarifies U.S. law and VHA policy on withholding or withdrawing fluid and nutrition. The article is intended to correct a statement about VHA policy that appeared in an Editor's note of the Summer 1999 issue of VHA Ethics Bulletin. We regret any misunderstanding this error may have caused.

to refuse any procedure, even at the risk of death (VHA Handbook 1004.1). If a patient lacks capacity, consent to forego artificial feeding must be obtained from an authorized surrogate (VHA Handbook 1004.2). Neither U.S. law nor VA policy allows the withholding of food and fluids from a patient who is willing and able to eat or drink.

For a more detailed discussion of the relevant case law, visit our web site at: www.va.gov/vhaethics/briefs.cfm



VHA National Ethics Committee Update



From left to right: Arthur Derse, MD, JD, Chair, VHA National Ethics Committee; Thomas Garthwaite, MD, Under Secretary for Health; Ellen Fox, MD, National Center for Ethics

Founded in 1986, the National Ethics Committee (NEC) is an interdisciplinary group charged by the Under Secretary for Health to issue reports on ethics-related topics. Each report describes an ethical issue, summarizes its historical context, discusses its relevance to VHA, reviews current controversies, and outlines practical recommendations. Scholarly yet practical, these reports are intended to heighten awareness of ethical issues and to improve the quality of health care, both within and beyond VHA. Over the years reports have served as resources for educational programs, guides for patient care practices, and catalysts for health policy reform. Topics range from futility to

question of the month

Within the VHA, VISNs are responsible for making many important decisions that affect patient care. These decisions often have significant ethical implications. The lead article in this issue describes the development and activities of two VISN-wide ethics committees. While ethics committees in VA Medical Centers have become the standard of care, the need for network level committees is less clear. Do such committees duplicate services provided at the local or national level? Or are they the wave of the future? Tell us what you think at: www.va.gov/vhaethics/question.cfm



Each issue of news@vhaethics will include a question about a clinical, organizational or research ethics issue. Your participation is important to us – please go to our web site at www.va.gov/vhaethics to register your opinion! You can also see how others responded and join a discussion on the topic.

resource allocation to research on subjects with impaired consent capacity.

The NEC now has a new charter that defines the Committee's structure, functions, and processes. The NEC is authorized by the Office of the Under Secretary for Health through the National Center for Ethics. One of the goals of the Center is to provide guidance on topics of national significance by articulating accepted ethical standards and guidelines. The National Ethics Committee provides a formal mechanism for accomplishing that goal.

The NEC is advisory to the Under Secretary for Health. Reports are approved and issued

periodically through the Under Secretary's Office.

The NEC has recently completed two reports that are due for release this month: Do-Not-Resuscitate Orders and Medical Futility; and Advance Proxy Planning for Residents of Long Term Care Facilities Who Lack Decision-Making Capacity.

Read more about the National Ethics Committee and its new charter at:

www.va.gov/vhaethics/nec.cfm



ethicsrounds



Wristbands for DNR?

by Michael Cantor, MD, JD
National Center for Ethics

Wristbands or other special identifiers that distinguish patients with do-not-resuscitate (DNR) orders are intended to prevent unwanted resuscitation attempts by assuring that patient "code status" is readily apparent in case of emergency. However, DNR identifiers also raise important privacy and confidentiality concerns. While national VHA policy is silent on this topic, local VA medical

centers have addressed the issue in a variety of different ways. This brief overview describes national and local VHA policies, current practices beyond the VA system, and practical suggestions from the National Center for Ethics.

National VHA policy does not directly address the question of how to identify patients with DNR orders. **Do Not Resuscitate (DNR) Protocols Within the Department of Veterans Affairs**, found at M-2, Part I Chapter 30, states that "VA medical centers, assisted by District Counsel, shall develop protocols for dealing with issues involved when terminally ill patients request ... DNR orders" (Section

30.02). The policy then states that medical centers may include various items within the DNR protocols, such as "[r]equirements for flagging or otherwise highlighting the medical record in such a way as to indicate the entry of a DNR order therein" (Section 30.03.a.7). The policy does not specify how patients with DNR orders should be identified.

Do you think that offering patients wristbands that identify them to staff as having received DNR orders is a good idea? To read how local VAMCs have addressed this issue, as well as practical suggestions from the Center, go to: www.va.gov/vhaethics/ethicsrounds.cfm



updates@vhaethics

FROM THE FIELD...

- The Kansas City VAMC's Ethics Advisory Committee is currently offering two opportunities for staff education in health care ethics.
- The Lexington VAMC's trust-based patient safety initiative is an important model of how to disclose medical errors to patients.

To find out more go to:

www.va.gov/vhaethics/field.cfm



IN THE LITERATURE...

Goold SD, Williams B, Arnold RM. Conflicts regarding decisions to limit treatment. JAMA. 2000;283:909-914

Emanuel EJ, Wendler D, Grady C. What makes clinical research ethical? JAMA. 2000;283:2701-2711.

Blake DC. Organizational ethics: creating structural and cultural change in healthcare organizations. J Clin Ethics. 1999;10:187-193.

To read abstracts of each of these articles go to: www.va.gov/vhaethics/literature.cfm



ON OUR WEB SITE...

The National Center for Ethics web site is undergoing major renovations! We are scheduled for a "partial launch" of our new site by the time you receive this newsletter. Please bear with us while we rebuild and expand our site to serve you better.

Coming Attractions:

- Join an interactive discussion forum
- Link to ethics-related policies
- Earn continuing education credits

To sign up, go to:

www.va.gov/vhaethics



inthisissue

- Best Practices: VISNs establish network-wide ethics committees
- Legal Briefs: Must food and fluid always be provided?
- Ethics Rounds: Wristbands for DNR?

about the center

The National Center for Ethics is VHA's primary office for addressing the complex ethical issues that arise in patient care, health care management, and research. Founded in 1991, the Center is a field-based national program that is administratively located in the Office of the Under Secretary for Health. To learn more go to: www.va.gov/vhaethics



our mission

The mission of the National Center for Ethics is to clarify and promote ethical health care practices within VHA and beyond.



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Send us your

feedback

Please send your questions or comments to the address above or e-mail us at vhaethics@med.va.gov. Please check your address label and if any changes should be made or you wish your name removed from the list, please contact us at the address above.