

Policy: ETHICS POLICY ON CONSULTATION

ORGANIZATIONAL: Affects two or more departments.							
Folder	Organizational Choices: Ethics, Patient Rights, and Civil Rights			Sub-Folder (If Applicable)	n/a		
Original Effective Date	10/1/1995	Scope	<i>What departments does this policy apply to? State "All" as is may apply to the entire organization.</i> All				
Approved (Approver/Date)	Director of Case Management: 09/2017, Ethics Committee: 09/2017, MDRC: 09/2017, MEC: 9/2017						
Last Reviewed/ Revised Date	9/21/2017	OSHA Category (If Applicable)	III	Standard (If Applicable)	n/a	Number of pages	2

PURPOSE:

Define the procedure for accessing Southeast Hospital’s Ethics Committee.

SKILL LEVEL:

All staff

GUIDELINES:

In accordance with Southeast Hospital's commitment to quality health care, access to the Ethics Committee for a consult is available to anyone involved in the patient's care when an existing or potential ethical problem is identified. The committee offers ethical consultation and assists health care providers, staff, patients, families in dealing with ethical questions related to hospitalization and treatment.

A request for an ethical consultation may come to the Ethics Committee, or a portion of the Committee, at any time during the patient’s encounter by a patient or family, and/or the physician or staff. The Ethics Committee comprised of physicians, nurses, chaplain, administration, nursing administration, social worker, quality management representative, and community members. Committee members will be sensitive to the concerns of all involved in the patient's care and will be advisory in its capacity.

PROCEDURE:

ACCESS:

Accessing the Ethics Committee:

1. Physician: Request on patient's chart for consultation
2. Staff: Request to Ethics Committee chairperson (physician) or convener or any member of the Ethics Committee.
3. Patient/family: Request to staff member who should notify a member of the Ethics Committee.

INTAKE:

The Ethics Committee chairperson or any member of the Ethics Committee will be notified of the initial request from physician, staff, patient, or family. The chairperson will determine:

1. The need for consultation (with family and physician consent).
2. The parties and committee members to be involved in the consultation.
3. The extent of information needed prior to the consultation.

REVIEW:

The Ethics Committee chairperson or member will determine the meeting place and time, reminding all participants of patient confidentiality as well as the review process may include the following:

1. Facts: All medical and psychosocial information gathered regarding diagnosis and prognosis of patient's condition.
2. Stakeholders: A listing and prioritizing of all parties who have a stake in the patient's outcome.
3. Principles: A listing and prioritizing of the major ethical principles applicable to the patient's situation.
4. Options: A committee consensus of the best options to be proposed to the patient, family, physicians and staff.

DOCUMENTATION

Documentation will be placed on patient's chart, when requested or as appropriate.

EVALUATION:

Each consultation will be evaluated by the committee in regard to the hospital's stated policy, process and procedure.

REFERENCES:

Pederson, R., et. al. (2009). What is happening during case deliberations in clinical ethics? committees? *Journal of Medical Ethics*, 35(3), 147-152.

Annas, JD and Grodin, Michael, Hospital Ethics Committees, Consultants, and Courts
AMA Journal of Ethics. [May 2016](#), Volume 18, Number 5: 554-559.