

Ethics Committee/Service
Policy: AC.ETH.01.01

Date: March 1997

Title: Ethics Committee/Service

Responsible to: President/CEO, Chairman

PURPOSE

To describe Shepherd Center's Ethics Committee and the mechanism(s) for addressing ethical problems arising in the normal course of hospital activity. All business related ethical issues will be addressed by the Chief Compliance Officer and/or the Compliance Committee.

POLICY

Shepherd Center is committed to ethical practice with all customers that it serves. The Ethics Committee has been established to address any non-business ethical issues that arise and to assure that the Center maintains standards that promote the highest ethical conduct. This is accomplished initially through the application of relevant policies and procedures in the Shepherd Center All Center policy/procedure manual.

A. Responsibility, Accountability, and Membership

1. Ethics Committee Co-chairpersons are responsible for the development and management of a process whereby the organization can review, evaluate, and make recommendations regarding ethical conflicts at Shepherd Center. These two persons are responsible for the organization and ongoing function of the Shepherd Center's Ethics Committee/Service.
2. The Ethics Committee shall be a resource service for the Center and reports to the Center's President & CEO who in turn reports to the Board of Directors. The board is ultimately responsible for overseeing all aspects of patient care and for holding management accountable for setting policies that determine the philosophy and practice of the Center.
3. Nominations for membership of the Ethics Committee will be submitted by the co-chairs and voted on by the existing members. Membership will be comprised of individuals from various professional disciplines working in many areas of service throughout the Center. Membership may include at least one consumer of services provided by the Center.

B. Goals

The three primary goals of the Ethics Service are as follows:

1. To assist in formulating healthcare policies involving ethical issues.
2. To provide a forum for exploration of ethical issues and dilemmas.
3. To serve as a resource for education regarding contemporary ethical issues in healthcare.

C. Purpose or Function

1. Education

The Committee will develop, recommend, and/or sponsor educational programs for its membership, staff, patients, medical staff, and the community on ethical decision making.

2. Policy and Issue Review

The Committee will review and provide recommendations about policies and procedures related to patient care.

3. Consultation

Upon request, the Committee will serve as a resource for staff and consumers. These ethics consultations will be available upon request.

D. Procedures

1. Organization

- a. Co-chairs: Will be appointed by the Board of Directors.
- b. Members: New candidates for membership shall be nominated by the co-chairs and voted on by the present committee members.
- c. Meetings: The committee shall meet on a quarterly basis and when needed in response to ethics cases.
- d. Minutes: Minutes of all meetings shall be maintained.
- e. Attendance: Members will be encouraged to attend all scheduled meetings.
- f. Quorum: A minimum of three people will need to be present for review of any consult done by an on-call team.

- g. Recommendations: All recommendations of the Committee will be forwarded, in writing, to the President & CEO.

2. Education

- a. Members: The committee will provide a reasonable and defined regular program of education for its membership and orientation for new members.
- b. Center: The committee will define and provide support for institutional and community ethics education.
- c. Clients/Patients: Written materials describing access to the committee, its purpose, process, and resources will be provided to patients and their families.

3. Policy Review

- a. Policy : Review of ethically relevant policy will be done at regular or routine intervals.
- b. Review: Recommendations will be forwarded, in writing, to the President & CEO or appropriate staff members.

4. Consultation Services

- a. Initiation of Request: Request for consultation on ethical matters can be made by any member of the Center's staff, a patient, patient's family, or legally recognized health care power of attorney.
- b. Access: Request for consultation can be made through the co-chairs, any member of the committee or any member of the Shepherd management team.
- c. Informed: Appropriate parties engaged in the ethics consult will be notified by one of the co-chairs of the Ethics Committee when it is determined a consult is in order.
- d. Results: The opinion or recommendation shall be communicated to the person requesting the review and other pertinent person(s). When appropriate the consultation will be documented in the medical record.

- e. Review: Consults done outside of the regularly scheduled meetings will be reviewed as needed or at the next meeting of the Ethics Committee.

- f. Printed Material: Informational material is available to patients, staff, volunteers and anyone associated with Shepherd Center. This information includes an overview of the committee and direction on how to obtain or activate an ethics consultation.