

VALLEYCARE
OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
POLICY & PROCEDURE

NUMBER: 214
VERSION: 3

SUBJECT/TITLE: **BIOETHICS COMMITTEE**

POLICY: ValleyCare shall have a Bioethics Committee. This Committee shall provide ethics consultation and education for staff.

PURPOSE: To support patients, families and staff in the presentation of individual and group rights, responsibilities and overall ethical dimensions of care. To serve as a resource to patients, families, and staff for ethical decision-making in cases of uncertainty or conflict of opinion regarding ethically proper treatment decisions.

DEPARTMENTS: All

PROCEDURE: A. **COMMITTEE MEMBERSHIP**

The ValleyCare Bioethics Committee shall be comprised of the following members:

1. A Chairperson, to be appointed by the President of the Professional Staff Association and subject to approval by the Executive Committee.
2. A Vice Chair or Co-Chair, to be appointed by the Chairperson.
3. The size of the Committee may vary but members should be drawn from the following categories:
 - a. Physicians
 - b. Nursing representatives
 - c. Clergy
 - d. Social Work
 - e. Risk Management (non-voting member) who will act as secretary to the Committee.
 - 1) Recording and Maintaining Committee minutes
 - 2) Responsible for the Agenda in collaboration with the Chair.
 - 3) Maintaining and updating the Committee members contact information.
 - f. Other members as deemed appropriate by the Chair.

The term of service of Committee members shall be according to the PSA Bylaws. A member can withdraw from the Committee at any point. The Chair may adjust the composition of the Committee at any time by releasing existing members or appointing new members.

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B. MEETINGS

1. Shall be held quarterly at a minimum but may be monthly, as deemed necessary by the Chair.
2. Emergency meetings can be called by any member of the Committee, if necessitated by organizational or patient care issues.
3. A quorum is 50 percent of the voting members of the Committee.

C. DUTIES

1. To provide ethical consultation for the hospital and associated health centers.
2. To help resolve problems, conflicts, or dilemmas related to the ethical values and goals associated with each situation, including each person's own basic moral framework.
3. To provide education to hospital staff about ethical issues.
4. To develop, review, and revise policies/procedures for the hospital/health centers regarding ethical issues.

D. CONSULTATIONS

1. Consultative services shall be available within a timely manner to discuss patient care issues.
2. Any individual (patient, family, physician, nurse, ancillary staff, etc.) may ask for a Bioethics consultation. The name of the individual requesting the consultation shall not be revealed if that is the request of the individual.
3. To obtain a Bioethics consult the requester calls the hospital page operator and requests the Bioethics Committee member on call (the "point person"). The Bioethics Committee's contact list and monthly rotation schedule will be kept by the telephone page operator. The point person will serve as a representative of, and liaison with, the rest of the Committee by discussing with all relevant parties, gathering all relevant information from the patient's medical record, providing a synopsis of the key issues to the other Committee members, and writing a note in the medical record in the name of the Committee summarizing the Committee's recommendations. Depending on the

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nature of the case, the point person and the Chair may use discretion whether to bring a case to the entire Committee immediately for discussion via secure email or wait until the next scheduled meeting for retrospective discussion.

4. Any consultations shall be discussed at the next regularly scheduled Bioethics meeting. Any system problems shall be reported to the appropriate individuals/committee for actions. Deficiencies in staff knowledge shall be addressed by providing education.
5. When providing Bioethics consultations, members of the Committee shall keep in mind the medical, social, cultural, and religious issues that may be active in that particular situation. The impact to society, as well as the cost to the patient and family, may be considered, although the patient is the primary concern.
6. When necessary, legal counsel shall be obtained and used in the discussion of the ethical issues.
7. All interested parties related to the case should be encouraged to participate in the bioethical discussion. The Bioethics Committee members involved in the consultation shall try to act as facilitator between groups with divergent viewpoints.
8. Bioethics consultations are intended to clarify issues, protect patient rights, and assist all parties to come to an ethically appropriate decision. The decision of the Bioethics Committee is advisory only and the staff may use this information as needed. If the Committee feels a physician's decision or plan is not ethically acceptable and the physician is unwilling to change it, the Chair should discuss the situation with the physician's Service Chief and/or Chief Medical Officer.

E. WRITING OF POLICIES

1. In the course of its discussions, the Committee may identify issues that involve medico-legal risk, have a high volume of consultation, or otherwise need clarification. The Committee may draft a policy that will cover the typical situations encountered.
2. Once approved by Committee membership, the policies of the Bioethics Committee shall go to the Medical Executive Committee for approval.
3. Policies shall be reviewed at least every three years to make sure they

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remain up to date and pertinent to the mission of the medical center.

F. EDUCATION

1. The Committee shall identify its own educational needs, as well as those of the hospital staff, and shall sponsor educational sessions as needed. At a minimum, the committee should attempt to have at least one hospital-wide educational conference per year.

G. DISAGREEMENT IN THE COMMITTEE

1. When there is a difference of opinion among the members of the Committee, the opinions will be presented to the Primary Team with the reasoning of the different opinions.
2. The Consult note for the Medical Record will reflect the difference of opinions between the Committee members.

References: Olive View UCLA Medical Center-PSA BYLAWS (PSA-PROFESSIONAL STAFF ASSOCIATION)	
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