

From the Spring 2001 Newsletter

NATIONAL ETHICS NEWS

New Accreditation Standards for VA Human Research Protection Programs

The National Committee for Quality Assurance (NCQA) will soon release accreditation standards for VAMC Human Research Protection Programs. The six standards include: institutional responsibilities, IRB structure and operation, consideration of risks and benefits, subject recruitment and selection, privacy and confidentiality, and informed consent. NCQA intends to begin routine surveys this Fall. For more information visit:

<http://www.ncqa.org/Programs/QSG/VAHRPAP/vahrpap.htm>.

Two New Reports Available from the National Ethics Committee

The VHA National Center for Ethics is pleased to announce the availability of two new National Ethics Committee reports: **Do-Not-Resuscitate Orders and Medical Futility** and **Advance Proxy Planning for Residents of Long Term Care Facilities Who Lack Decision-Making Capacity**. Staff with VA intranet access may view these reports on our intranet site under the **Resources** section, or they may request a printed copy from the Center at vhaethics@med.va.gov.

New VA Interprofessional Fellowship Program in Palliative Care

On March 1, 2001 the Office of Academic Affiliations announced the creation of a new fellowship in palliative care. This program is designed to develop leaders in VA with vision, knowledge, and commitment to palliative care. OAA believes that a comprehensive interprofessional approach to providing palliative care and educating health professionals can result in broadened treatment perspectives and opportunities for implementing change.

How the idea came about for the fellowship program

VA historically has taken a leadership role in the promotion and development of fields of clinical practice that will enable better care of veterans. In the late 1990s the Office of Academic Affiliations (OAA) addressed the need for clinicians trained in end-of-life care by initiating the VA Faculty Leaders Project for Improved Care at the End of Life. OAA was awarded a \$985,000 grant by the Robert Wood Johnson Foundation to support the project. The purpose of the two-year project was to develop benchmark curricula for end-of-life and palliative care--and strategies for their implementation--for training resident physicians in general internal medicine and the subspecialties of internal medicine at 30 competitively selected VA facilities.

As the Faculty Leaders Project was ending, it was apparent that training of additional health care professionals, including non-physicians, was needed to meet the growing demand for palliative care services required by an increasingly higher percentage of chronically ill and dying veterans.

How the Fellowship Program received approval and funding

On March 1, 2001, OAA announced the VA Interprofessional Fellowship Program in Palliative Care. The purpose of this VA fellowship program is to develop leaders with vision, knowledge, and commitment to lead palliative care into the 21st century. OAA believes that a comprehensive interprofessional approach to providing palliative care and educating health professionals can result in broadened treatment perspectives and opportunities for implementing change.

How the program will work

VA health care facilities interested in providing the fellowship training are required to submit a proposal to OAA. Up to six training sites will be competitively selected. Selected sites will be provided fellowship funding and administrative and support personnel effective Academic Year 2002-2003 [Fiscal Year (FY) 2003] for up to four 1-year fellows/trainees or the equivalent. At least one and no more than two of these fellows will be a physician. Each selected site is required to have one to three associated health (non-physician) fellow/trainee positions in disciplines involved in the practice of palliative care, e.g. nursing, social work, pharmacy, psychology and chaplaincy. The training for persons from associated health disciplines may be for a period of 1-year or less depending on the discipline and the curriculum plan. A facility requesting trainees for less than a one-year training period may request additional trainees in the discipline to equate to one year; e.g., four positions at 500 hours each. One of the approved training sites will be competitively selected as a hub site to coordinate core curriculum development and implementation, program evaluation, recruitment strategies and advertisements for fellows, fellowship program publicity, and other fellowship activities.

A unique component of this fellowship program is that, in addition to providing fellowship training, each training site will be required to develop and implement an *Education Dissemination Project* related to enhancing palliative care beyond the training site. The purpose of this component is to enhance the education of health professionals and the quality of care provided to patients at additional sites. The educational activities may occur within an identified geographic region, which may or may not conform to that site's Veterans Integrated Service Network (VISN) catchment area. Activities not based on geography are also encouraged.

Proposals to be a training and hub site are due to OAA by May 4. Expert panels will review the proposals for training sites and the hub site and make recommendations for approval or disapproval to the Chief Academic Affiliations Officer. Facilities will be notified of their approval/non-approval by July 18, 2001. Phase 1, the planning phase, will begin immediately. Fellows will begin the program on or after July 1, 2002.

Additional Information

For questions, contact Linda Johnson, Ph.D., R.N., at 202-273-8372 or e-mail Linda.Johnson@hq.med.va.gov. The complete program announcement may be found at VA's web page at <http://www.va.gov/oa/fellowships/>.