

## **BEST PRACTICES**

### **Integrated Ethics Programs**

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One of the primary functions of the National Center for Ethics is to help facilities and Veterans Integrated Service Networks (VISNs) develop effective methods for managing ethical issues. Throughout the Veterans Health Administration (VHA), ethics programs serve an essential function by helping to clarify and promote ethical health care practices. However, health care organizations are extremely complex, encompassing an intricate network of individuals and systems. Promoting ethical practices at every level of an organization can present a major challenge.

To help meet this challenge, the National Center for Ethics is advocating the development of Integrated Ethics Programs (IEPs). The IEP concept is simple: to be effective, ethics programs must work with other entities that influence health care practices. An ethics program that is disconnected from the systems and processes that shape care will be unlikely to produce real or lasting change.

As a rule, health care professionals have good intentions - they are ethical people who try to "do the right thing." Yet behavior is influenced by a multitude of forces - some of these forces create incentives to act in accordance with the highest ethical standards, while some forces do just the opposite.

The IEP should not be in the business of judging whether people are ethical or unethical. Instead, the IEP should consider the following questions: Have ethical standards been clearly communicated? How and why do actual practices deviate from these standards? And, perhaps most importantly, what can the organization do to make it easier for employees to "do the right thing?" Busy clinicians and researchers are often influenced by "the path of least resistance." For this reason, shaping this path to encourage desired practices is often the most effective way to bring about change.

Ethics advisory committees are ubiquitous throughout VHA. They typically engage in three activities: consultation, education, and policy development. But these activities are only a part of what occurs in an IEP. By focusing on the system as a whole, the IEP spends its time and energy on activities that promise to make the biggest difference institution-wide.

The IEP progresses beyond the traditional ethics committee model in several important respects. First, while most ethics committees emphasize clinical ethics, IEPs are broader in scope: they address ethical issues in health care management and biomedical research as well as in patient care. Also, whereas

ethics committees often focus on ethical issues that arise in acute care hospitals, IEPs address issues across the continuum of care, including those that arise in outpatient clinics, rehabilitation programs, and long term care.

Second, unlike the traditional ethics committee, the IEP does not limit itself to certain individuals serving as members for a predefined term. Instead, the IEP process is fluid - groups may be assembled as needed to address a particular issue or concern, including those who are not normally associated with an ethics committee. These groups should include individuals who represent various sides of an issue, as well as those who are in a position to bring about systemic change. For example, it may be especially useful to include quality managers, compliance offices, legal counsel, and others who confront ethical issues almost every day.

Third, while ethics committees often emphasize individual cases, IEPs focus their energies on developing solutions to larger issues that are likely to arise again and again. Thinking about changing the system rather than how to deal with a particular case is the most effective way to produce meaningful improvements in ethical practices.

Fourth, IEPs approach ethical issues proactively. The successful IEP rarely functions in a "crisis management" mode; instead, it continuously identifies and addresses problems before they result in deficiencies in practice. IEPs are designed to identify recurring problems and develop and implement a systematic quality improvement process.

What might such a quality improvement process look like? Some IEPs may want to try out a model I developed several years ago called "**BEST IDEAS**":

- **B**egin with an issue
- **E**xplore the issue
- **S**uggest solutions
- **T**ake stock
- **I**nvent an action plan
- **D**o the action plan
- **E**valuate the action plan
- **A**adjust the action plan
- **S**tart over

The first step, **Begin with an issue**, encourages the IEP to focus on recurrent ethical issues rather than on isolated cases, and addresses how an IEP can prioritize among various ethical concerns.

Once the IEP has decided to take up a particular ethical issue, it should then **Explore the issue**, systematically examining both how the issue plays itself out at the organization and its wider ethical implications.

After the IEP is thoroughly acquainted with the details of an issue and understands its ethical ramifications, it is time to **Suggest solutions** - or brainstorm creative new ideas.

The next step is to consider all the solutions proposed, or **Take stock**.

Following this, the IEP can **Invent an action plan** by translating its optimal solutions into concrete steps.

The next step is obvious: **Do the action plan**.

After the action plan is implemented, it is important to **Evaluate the action plan**.

Then, depending on the results of the previous step, it may be necessary to **Adjust the action plan**.

After completing these steps, the IEP should congratulate itself for achieving resolution to a complex ethical issue, then prepare to **Start over!**

The **BEST IDEAS** model is described in more detail in a handout distributed at the 2000 Intensive Ethics Training conference in Park City, Utah. This handout can be accessed at <http://vaww.va.gov/vhaethics/download/chpt5>. (Sorry - availability is limited to VA intranet users).

The goal of any ethics program should be to provide individuals and organizations with a sound basis for ethical decision-making and action. By integrating ethics-related systems and processes across the organization, IEPs can help facilities and VISNs to create and sustain real improvements in ethical health care practices. In our advocacy for IEPs, the National Center for Ethics aims to assist in the creation of effective ethics programs that will succeed in promoting ethics quality in health care throughout VHA.