



IntegratedEthics In Action

Issue 28

Promising Practices — Emerging Champions

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“Equality Leaders”: VA Facilities Build a Welcoming and Inclusive Environment for LGBT Veterans

When it comes to addressing the special health needs of lesbian, gay, bisexual, and transgender (LGBT) Veterans, facilities across VHA are demonstrating widespread leadership.

In response to a joint memo from the Principal Deputy Under Secretary for Health and the Deputy Under Secretary for Health for Operations and Management in December 2012, 145 facilities have reported 570 initiatives to promote a welcoming and inclusive environment for LGBT Veterans to the Office of Health Equity (OHE).

The initiatives are wide-ranging and include training, policy development, awareness promotion, outreach, and the establishment of support groups. As part of this effort, the majority of facilities (120) chose to participate in the Human Rights Campaign’s Healthcare Equality Index 2013 (HEI 2013). The HEI survey addresses health systems’ policies and trainings related to LGBT patients and families. Participants receive a benchmarked assessment of their performance against foundational criteria for LGBT care and can access the Human Rights Campaign’s free expert training in LGBT care for staff at all levels.

VHA’s participation was highlighted in the recently released HEI 2013 report [<http://www.hrc.org/hei/about-the-healthcare-equality-index>], which noted that “an impressive 91 VA facilities were awarded HEI 2013 Equality Leader status — a higher percentage of leaders than for HEI 2013 respondents as a whole.” To achieve this status, facilities had to document that they publicize VHA’s policies giving equal visitation to LGBT people and prohibiting discrimination against LGBT patients and employees, and provide training in LGBT-centered care to key staff members. The report indicated

that in 11 states and Puerto Rico, VA facilities represented the only HEI participants.

“Ensuring that we provide equitable health care to LGBT Veterans is fundamental to our commitment to fairness and respect. It aligns with a major goal in the VHA Strategic Plan to provide proactive, patient-driven health care to all Veterans,” says Sherrie Hans, PhD, Deputy Chief Ethics in Health Care Officer. “As such, the National Center for Ethics in Health Care (NCEHC) thanks and congratulates all facilities for this impressive effort.”

The OHE is responsible for championing the advancement of health equity and reduction of health disparities for Veterans. VA employees can access all of the initiatives submitted to OHE at: <http://vaww.vha.vaco.portal.va.gov/sites/OHE/Pages/LGBT.aspx>.

For more information about OHE: <http://vaww.pdush.med.va.gov/programs/ohe/oheDefault.aspx>

LGBT coordinators at OHE develop and deliver training to VA clinical staff on LGBT health care, and maintain the following LGBT employee resources:

The Transgender Education Resources SharePoint: <http://vaww.infoshare.va.gov/sites/pcscliopro/trer/default.aspx>

LGB Education SharePoint:

<http://vaww.infoshare.va.gov/sites/LGBEducation/default.aspx>

VHA clinical staff can also contact LGBT experts directly:

Jillian C. Shipherd, PhD, LGBT Program Coordinator, Patient Care Services (Jillian.Shipherd@va.gov)



Michael R. Kauth, PhD, LGBT Program Coordinator, Patient Care Services (Michael.Kauth@va.gov)

George R. Brown, MD, DFAPA, Program Manager, Health Care Outcomes, Office of Health Equity (George.Brown@va.gov)

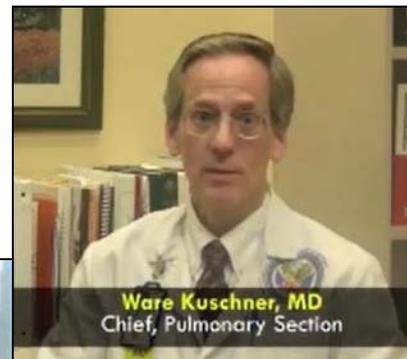
For additional resources relating to LGBT health care within VHA, see IntegratedEthics in Action Issue 23: http://vaww.ethics.va.gov/docs/integratedethics/IEIA_23_V5_20130308.pdf.

VA Palo Alto Engages Entire Facility in “Got Ethics?” Video

When the Preventive Ethics subcommittee at VA Palo Alto Health Care System set out to raise awareness of the IntegratedEthics (IE) program, members decided to get creative. “Rather than developing a training module for the VA’s Talent Management System, we felt drawn to do something more engaging,” said Imee Maragay, IE Program Officer.

The result was “Got Ethics?” a video featuring Palo Alto’s executive leadership and frontline staff. Produced through a collaboration

Once the project was approved by the IE Council, executive leadership, service chiefs, program managers, and frontline staff from across the facility were recruited to participate. “Leadership was involved throughout the entire process,” said Rachael



Ware Kuschner, MD
Chief, Pulmonary Section



Joanne Krumberger, RN
Deputy Director

Gloria Martinez, RN
Nurse Executive

Lisa Freeman
Director

Scenes from “Got Ethics?” developed and produced by VA Palo Alto Health Care System



Michael Hill-Jackson
as Travel Card Holder 1

Alfredo Capps
as Travel Card Holder 2



between the IE team, executive leadership, and other staff, the 22-minute video is now available for viewing by all VA staff at: http://vaww.ethics.va.gov/integratedethics/Got_Ethics_video.asp.

To develop the content, a workgroup analyzed results from the 2010 IE Staff Survey and held discussions with staff in key services about common ethical issues encountered in their programs. Members chose three areas to highlight: services provided by the facility’s IE program, common ethical dilemmas that occur in the workplace, and information on how staff can address or report ethical concerns.

Guerra, project manager for “Got Ethics?” “They were briefed on content and provided their full support, which included even appearing as actors!”

“We have received a lot of positive responses to the video,” said Nora Lynn Dwinell, Preventive Ethics subcommittee chair. “It presents a new and engaging way to learn about the IE program and how to address commonly encountered ethical dilemmas. ‘Got Ethics?’ is not only educational, but very entertaining since frontline employees are featured.”

“Leadership was briefed on content and provided their full support, which included even appearing as actors!”

National Center for Patient Safety Releases Patient Wristband Guidance



When determining what information to include on a patient wristband, facilities used to have to call the National Center for Patient Safety (NCPS). And many didn't realize that the information displayed on a wristband might raise ethical concerns.

"Our office was receiving a lot of questions about using colors and photos," said Beth J. King, RN, BSN, MA, CCM, NCPS program manager. "So we decided to be proactive and look at the content of wristbands from a patient safety perspective, and collaborate with other offices in VA that could supply valuable input, such as in the area of ethics."

On October 25, NCPS published guidance on information that is required on VA wristbands. It includes current thinking on the use of colors, photos, and Do Not Attempt Resuscitation/Do Not Resuscitate (DNAR/DNR) orders. The content was informed by a workgroup of representatives from

NCPS, NCEHC, the Bar Code Resource Office, and VISN/facility offices.

"One key ethical concern the workgroup discussed is how to balance the values of patient safety and patient privacy," said Virginia Ashby Sharpe, PhD, Chief, Ethics Policy, who represented NCEHC on the workgroup. "Specifically, the challenge in VA is how to include enough information on the wristband to ensure that the patient is accurately identified for treatment purposes, without potentially exposing the patient to identity theft, which can also have safety implications."

Although VA policy still mandates the use of "humanly readable" Social Security Numbers (SSN) on wristbands, VA plans to replace the SSN with an alternate Unique Patient Identifier. The NCPS guidance provides links for more information on this initiative.

The group also discussed the ethical implications of printing DNAR/DNR orders on

wristbands. How can facilities ensure that patient wishes are respected while mitigating the harms that could result if the information on the wristband is inaccurate or unclear? The guidance advises that facilities consult their ethics consultation service before including this information.

"Facilities have some latitude about what goes on their wristbands because they know what works best for their organization," said Ms. King. "But we did want to provide some standard recommendations for facilities considering making changes — recommendations that will change, annually at a minimum. People have been highly appreciative of the clarity we've provided."

"Guidance: Patient Safety Factors Related to Patient Wristbands Currently Used in VHA Inpatient Care" is available at: <http://vaww.ncps.med.va.gov/tools.html#wrist>

New Opportunity to Promote IE Program: Ethical Leadership Materials Can Support Fulfillment of Senior Executive Performance Requirements

Practicing principles of ethical leadership (EL) is now a performance requirement for VHA Senior Executives (network and facility directors), and resources provided by the IntegratedEthics (IE) program can support leaders in meeting these expectations.

On a December 2 Improvement Forum (IF) call, Melissa Bottrell, MPH, PhD, IE Chief, and Basil Rowland, MSW, IE Manager, Field Operations, discussed how IE Program Officers and VISN Points of Contact can use IE materials and initiatives to directly involve leaders in IE and help them satisfy measures relating to EL.

Applying to all Senior Executive Service (SES) and Title-38 Senior Executive equivalent positions, the fiscal year 2014 Senior Executive Performance Template includes three specific requirements that address EL:

- ★ CE 2a: Demonstrates VA Core Values of Integrity, Commitment, Advocacy, Respect, and Excellence ("I CARE")
- ★ CE 2e: Promoting Organizational Health
- ★ CE 5e: Promoting Effective Governance, Integrity, and High Reliability Organizations

A transcript of the IF call is available at: <http://vaww.ethics.va.gov/integratedethics/ieif.asp>

Related tools and materials are available at: <http://vaww.ethics.va.gov/integratedethics/ieprogprpt.asp>

What We're Reading . . . Ethics in the Literature

Here are some articles that were of recent interest to our NCEHC IE Staff. They can be used to spark engagement in your local IE program or to discuss in local journal clubs. To access, click on the links below, or consult your facility's librarian.

Pugliese, G. (ed.) (2013). "A Decade Later, Unresolved Disrespectful Behavior Continues to Impact Patient Safety." *SafetyShare*. October 29, 2013.

<https://www.premierinc.com/safety/safety-share/bulletin-disrespect.jsp>

Leape, LL, et al. (2012). "Perspective: A Culture of Respect, Part 1: The Nature and Causes of Disrespectful Behavior by Physicians." *Academic Medicine*. 87:7, 845-852.

The Joint Commission. (2008). "Behaviors That Undermine a Culture of Safety." 40: July 9, 2008.

http://www.jointcommission.org/assets/1/18/SEA_40.pdf

Lukas, CV, et al. (2013). "The Critical Role of Leadership in Creating a Culture of Improvement." *Forum: Translating research into quality health care for veterans*. October 2013.

http://www.hsrd.research.va.gov/publications/forum/oct13/oct13-3.cfm#_UrilJ6XiMds

ANNOUNCEMENTS

Improving Informed Consent Procedures for HIV Testing

As the largest single provider of HIV care in the U.S., VHA treated more than 26,000 Veterans with HIV in 2012, which represented over 95 percent of those who have tested positive for the virus. Some Veterans, however, remain unaware of their HIV status. Because early diagnosis is associated with greatly improved medical outcomes, VHA policy requires providers to routinely offer HIV testing to all Veterans. But testing is voluntary and requires the specific oral consent of the patient or surrogate decision maker, which the practitioner must document in the patient's health record. Patients or their surrogate decision makers have a right to accept or decline testing.

To test facility adherence to the documentation policy, an External Peer Review Program study reviewed a random sample of patient records across VHA where an HIV test was documented between August 2012 and August 2013. The study, which was jointly designed by NCEHC and the Office of Informatics and Analytics, found that nearly half of the records lacked documentation, and a small portion indicated that an HIV test was performed after a documented refusal.

As a result of these findings, fiscal year (FY) 14 IE program metrics will include a requirement that facilities that fall below acceptable thresholds for documenting consent complete a Preventive Ethics (PE) improvement cycle to address documentation of oral consent for HIV. To assist

teams with this effort, the IntegratedEthics (IE) program has developed information and resources for guiding improvement projects.

VHA's National HIV Program offers a variety of resources to facilitate HIV test ordering, as well as documentation to support policy requirements outlined in VHA Handbook 1004.01. These include an electronic clinical reminder that provides a link to required educational material on HIV testing and allows insertion of progress notes documenting verbal consent. The link to these resources is on the VA HIV intranet: <http://vaww.hiv.va.gov/products/PACT-index.asp>.

Additionally, NCEHC will offer ongoing technical assistance throughout the year to help sites achieve improvements. Six national teleconference calls are scheduled in FY14 for sharing and supporting improvement efforts. Additional regional calls may be requested to address specific improvement efforts. Robin Cook, RN, MBA, NCEHC's PE Advisor (robin.cook@va.gov), will be moderating the calls and is available to support facilities.

Supporting documents developed by NCEHC are available here: <http://vaww.infoshare.va.gov/sites/IntegratedEthics/Lists/PEHIV%20Informed%20Consent%20Materials/AllItems.aspx?InitialTabId=Ribbon%2EList&VisibilityContext=WSSTabPersistence>

Newsflash!

Ethics Consultation: Beyond the Basics in-person training is planned for March 12-13, 2014

NCEHC has been approved for (and has travel funds to support) another in-person training of this advanced ethics consultation curriculum. **More information will be provided soon!**

PROMISE Newsletter Publishes Q&A on Surveying Patients and Families

Under what circumstances can you survey patients and families about the care they are receiving? What federal regulations govern this activity? How are appropriate approvals attained?

This information and more is provided in the article "FAQ Regarding Surveying Patients and Families" that appeared in the fall 2013 edition of the PROMISE Center Newsletter. This publication is published by the VA Comprehensive End-of-Life Care PROMISE Center at Philadelphia VAMC. It is available at: <http://www.cherp.research.va.gov/promise/PROMISEFall2013Newsletter.pdf>

Further information on this topic is available at: <http://vaww.car.rtp.med.va.gov/programs/shep/shep.aspx>

Important Note about Web addresses:

All Web addresses with the prefix "vaww" can only be accessed from within the VA firewall or by users with VA VPN access.



Developed by the IntegratedEthics team at the National Center for Ethics in Health Care (NCEHC), IntegratedEthics *in Action* is published on the IE Website vaww.ethics.va.gov/integratedethics/IEaction.asp, listserv, and via other IE venues. Its purpose is to rapidly disseminate promising practices and feature emerging IE champions to help facilities and VISNs in their implementation of the IE initiative. We welcome your comments and suggestions for topics to: vhaethics@va.gov.

