

IntegratedEthics Facility Workbook Tool – FY11

About the Facility Workbook

The Facility Workbook is an assessment tool to help you and other facility leaders assess your current ethics program. This tool is designed to help you compare the mechanisms, processes, and systems of your ethics program to the “best practices” of an IntegratedEthics program. *Please note that this version of the workbook replaces all previous versions.*

The workbook can help facilities answer such questions as:

1. Where are we in developing the key components of an IntegratedEthics program?
2. To what extent is our approach to ethics comprehensive, systematic, broadly deployed, and well integrated?
3. What actions can we take to narrow the gap between our current ethics program and a fully developed IntegratedEthics program?

Completing the Workbook

The workbook can help you plot a course for your IntegratedEthics program. The workbook is intended to be completed annually so that you can assess your facility’s progress over time.

As the IntegratedEthics Program Officer, you are responsible for ensuring that the workbook is completed. Your first step will be to determine who should be involved in completing each of the four sections of the workbook: Overall Ethics Program, Ethics Consultation, Preventive Ethics, and Ethical Leadership.

Each section should be completed with input from individuals who have firsthand knowledge of the relevant function and how it operates in your facility. Once you’ve assembled your workbook teams, you’ll want to establish clear expectations and timelines. Each team should plan to devote approximately 1–2 hours per week over the course of a month to discussing and completing the workbook and to preliminary consideration of the results.

In the 2011 version, we have removed two questions (Q2.13 and 3.10) from the 2010 workbook. One minor change was made to question 1.9 by adding clarifying information.

Each section has 2 subsections:

Subsection A. Questions. Record your facility’s responses in this part of the workbook.

Subsection B. Notes. Record interpretations and/or comments on your facility’s responses, as well as potential opportunities to improve your ethics program. These notes will help your facility develop specific follow-up actions. We suggest keeping these notes on file for your facility’s future reference.

Be Candid in Responding to the Questions

When completing this workbook, choose the responses that most accurately describe current practices of your facility’s ethics program. Thorough consideration of each item will provide the information you need to help you understand and improve your program.

Understanding the Results and Next Steps

When all the sections of the workbook have been completed, the teams should meet to discuss the results and identify gaps between your current ethics program and a fully developed IntegratedEthics program. To help identify these gaps, teams should review the *IntegratedEthics Facility Workbook: Understanding Your Results* (vaww.ethics.va.gov/IntegratedEthics). You should then report the results to the senior leaders of your facility and/or your IntegratedEthics (IE) Council. When interpreting your results, local factors and circumstances should be taken into account by local leaders and/or the IE Council to determine which findings represent a quality gap and which of these should receive priority follow up action at your facility.

Because this is a tool for continuous quality improvement, you should use the workbook to re-assess your ethics program on an annual basis. By comparing results across time, you can track your progress and determine where further work is needed.

If your facility completed a paper version of the IE Facility Workbook, you must ensure this data is entered into the web-based workbook before 10/01/2011.

Section 1. Overall Ethics Program

This section of the workbook pertains to the overall structure and practices of your facility's ethics program. For additional information about items in this section, refer to the IntegratedEthics Roles and Responsibilities documents.

Section 1.A. Questions

Instructions: Choose the response or responses that best describe your facility's current practices.

- 1.1 Which of the following are included in your facility's approach to accountability for your ethics program? (Mark all that apply.)
- A designated individual (e.g., Ethics Consultation Coordinator) is responsible for managing the program's ethics consultation activities.
 - A designated individual (e.g., Preventive Ethics Coordinator) is responsible for managing the program's preventive ethics activities.
 - A designated individual (e.g., Ethical Leadership Coordinator) is responsible for managing the program's ethical leadership activities.
 - A senior manager (e.g., Ethical Leadership Coordinator) is responsible for the success of the ethics program.
 - A designated individual (e.g., IntegratedEthics Program Officer) is responsible for the day-to-day management of the ethics program.
 - A group (e.g., IntegratedEthics Council) is responsible for overseeing the implementation and operations of the ethics program.
 - Other (specify):

1.2 Which of the following best describes your facility's policy on your ethics program? (Mark only one.)

- Our facility does not have a policy.
- Our facility has a policy with the following elements:



In the table below, mark "yes" or "no" as to whether the element is included in the policy.

We suggest keeping documents related to this question on file for your facility's future reference.

YES ↓	NO ↓	POLICY ELEMENTS
<input type="checkbox"/>	<input type="checkbox"/>	The role and function of the Ethics Consultation service
<input type="checkbox"/>	<input type="checkbox"/>	The role and function of Preventive Ethics
<input type="checkbox"/>	<input type="checkbox"/>	The role and function of Ethical Leadership
<input type="checkbox"/>	<input type="checkbox"/>	The role and responsibilities of the individual responsible for overall management of the ethics program
<input type="checkbox"/>	<input type="checkbox"/>	The role and responsibilities of the senior manager who is accountable for the success of the ethics program.
<input type="checkbox"/>	<input type="checkbox"/>	The goals of the IntegratedEthics Council
<input type="checkbox"/>	<input type="checkbox"/>	The membership of the IntegratedEthics Council
<input type="checkbox"/>	<input type="checkbox"/>	How the quality of the ethics program is to be assessed and assured
<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):

1.3 At your facility, how do senior leaders learn about the activities of your ethics program? (Mark all that apply.)

- Senior leaders request information about the activities of the ethics program on an *ad hoc* basis.
- Senior leaders require routine reporting about the activities of the ethics program (e.g., through presentations to a top corporate decision-making body or through written reports).
- Senior leaders directly observe or participate in the ethics program (e.g., attend ethics program meetings, chair the IntegratedEthics Council).
- Other (specify):

1.4 At your facility, which of the following approaches are used to educate staff members about how to recognize and respond to ethical concerns? (Mark all that apply.)

- Our facility has no formal approach to educating staff members about how to recognize and respond to ethical concerns.
- Our facility offers education for new staff members about how to recognize and respond to ethical concerns.
- Our facility requires education for new staff members about how to recognize and respond to ethical concerns.
- Our facility offers education for all staff members about how to recognize and respond to ethical concerns.
- Our facility requires education for all staff members about how to recognize and respond to ethical concerns.
- Other (specify):

1.5 Which of the following best describes how your facility educates staff members about the existence and functions of IntegratedEthics? (Mark only one.)

- Our facility does not educate staff members about the existence and functions of IntegratedEthics.
- Our facility educates some staff members about the existence and functions of IntegratedEthics.
- Our facility educates all staff members about the existence and functions of IntegratedEthics.

1.6 For each of the content areas listed below, characterize your facility's educational activities relating to ethics in the last year by providing the requested information. Include educational activities that focus on rules as well as those that focus on values.

Content	Mode (e.g., lecture, video, web-based)	Topic (e.g., advance directives, integrity in financial management)	Target Audience (group for whom the education was designed)	Approximate % of Target Audience Trained
<i>Time period within which educational activities occurred: _____ (start date) _____ (end date)</i>				
Shared Decision Making with Patients				
Ethical Practices in End-of-Life Care				
Patient Privacy and Confidentiality				
Professionalism in Patient Care				
Ethical Practices in Resource Allocation				

Question 1.6 (Continued)

1.6 For each of the content areas listed below, characterize your facility's educational activities relating to ethics in the last year by providing the requested information. Include educational activities that focus on rules as well as those that focus on values.

Content	Mode (e.g., lecture, video, web-based)	Topic (e.g., advance directives, integrity in financial management)	Target Audience (groups for whom the education was designed)	Approximate % of Target Audience Trained
<i>Time period within which educational activities occurred: _____ (start date) _____ (end date)</i>				
Ethical Practices in Business and Management				
Ethical Practices in Government Service				
Ethical Practices in Research				
Ethical Practices in the Everyday Workplace				
Integrated Ethics Program				
Other				

1.7 Characterize your facility's approach to assuring that ethics-related activities are well integrated throughout the facility. Such activities include, for example, protecting human research subjects, conducting ethics consultations, promoting business integrity, ensuring adherence to government ethics rules, preventing discrimination in hiring practices, and preparing for JCAHO accreditation.

1.8 Which of the following best describes your facility's approach to assuring that individuals performing ethics activities have access to needed resources, such as library materials, clerical services, and training? (Mark only one.)

- Our facility does not have an approach for assuring that individuals performing ethics activities have needed resources.
- Our facility considers requests to provide resources for the ethics program on a case-by-case basis.
- Our facility provides resources for the ethics program through a specific budget.
- Other (specify):

1.9 Which of the following describes your facility's approach to designating percentage of time as designated in your performance plan or position description (FTEE) for IntegratedEthics positions at the time of completing this workbook? (Mark all that apply.)

- Our facility does not designate a percentage of time (FTEE) for any IntegratedEthics positions at the time that this workbook is being completed.
- Our facility designates a percentage of time (FTEE) for the IntegratedEthics Program Officer position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%
- Our facility designates a percentage of time (FTEE) for the Ethics Consultant Coordinator position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%
- Our facility designates a percentage of time (FTEE) for the Preventive Ethics Coordinator position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%
- Our facility designates a percentage of time (FTEE) for another IntegratedEthics position (describe : _____) at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%
- Our facility designates a percentage of time (FTEE) for another IntegratedEthics position (describe : _____) at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

Section 1.B. Notes on Overall Ethics Program

Instructions: Record your interpretations, comments, concerns and qualifications to the responses given above. Then suggest any opportunities you perceive for improving your ethics program. These notes will help your facility develop follow-up action plans. We suggest keeping these notes on file for your facility's future reference.

Section 2. Ethics Consultation

This section of the workbook pertains to ethics consultation. For additional information about items in this section, refer to the IntegratedEthics primer, *Ethics Consultation: Responding to Ethics Questions in Health Care*, and to the IntegratedEthics toolkit and video training materials for ethics consultation.

Definition of Terms:

Ethical concern: Uncertainty or conflict about values.

Ethics consultation in health care: The activities performed by an individual or group on behalf of a health care organization to help patients, providers, and/or other parties resolve *ethical concerns* in a health care setting. These activities typically involve consulting about active clinical cases (ethics case consultation), but also include analyzing prior clinical cases or hypothetical scenarios, reviewing documents from an ethics perspective, clarifying ethics-related policy, and/or responding to ethical concerns in other contexts not immediately related to patient care. Ethics consultation may be performed by an individual ethics consultant, or a team of ethics consultants.¹

Ethics consultation service: A mechanism in a health care organization that performs *ethics consultation*.

Ethics question: A question about which decisions are right or which actions should be taken when there is uncertainty or conflict about values.

Section 2.A. Questions

Instructions: Choose the response or responses that best describe your facility's current practices.

- 2.1 Which of the following best describes your facility's approach to ethics consultation; i.e., responding to ethics questions that arise in health care? (Mark only one.)
- Our facility does not perform ethics consultation.
 If marked, read the primer, *Ethics Consultation: Responding to Ethics Questions in Health Care* and develop plans for an ethics consultation service. The remaining questions in this section will not be applicable until your facility has developed an approach to ethics consultation. Therefore, skip the remaining questions in this section.
 - Our facility performs ethics consultation, but the approach is variable (e.g., it varies depending on who is involved).
 - Our facility has a well-defined approach to ethics consultation that is consistently followed.

¹ Note that "ethics consultation" as used in this Workbook is distinct and separate from questions referred to Regional or General Counsel pertaining to standards of ethical conduct for employees of the executive branch.

2.2 Which of the following steps are consistently included in your facility’s approach to ethics consultations that pertain to an active clinical case?

In the table below, mark “yes” or “no” as to whether the step is consistently followed.

YES ↓	NO ↓	STEPS
		Clarify the consultation request
<input type="checkbox"/>	<input type="checkbox"/>	Characterize the type of consultation request
<input type="checkbox"/>	<input type="checkbox"/>	Obtain preliminary information from the requester
<input type="checkbox"/>	<input type="checkbox"/>	Establish realistic expectations about the consultation process
<input type="checkbox"/>	<input type="checkbox"/>	Formulate the ethics question
		Assemble the relevant information
<input type="checkbox"/>	<input type="checkbox"/>	Consider the types of information needed
<input type="checkbox"/>	<input type="checkbox"/>	Identify the appropriate sources of information
<input type="checkbox"/>	<input type="checkbox"/>	Gather information systematically from each source
<input type="checkbox"/>	<input type="checkbox"/>	Summarize the consultation and the ethics question
		Synthesize the information
<input type="checkbox"/>	<input type="checkbox"/>	Determine whether a formal meeting is needed
<input type="checkbox"/>	<input type="checkbox"/>	Engage in ethical analysis
<input type="checkbox"/>	<input type="checkbox"/>	Identify the ethically appropriate decision maker
<input type="checkbox"/>	<input type="checkbox"/>	Facilitate moral deliberation among ethically justifiable options
		Explain the synthesis
<input type="checkbox"/>	<input type="checkbox"/>	Communicate the synthesis to key participants
<input type="checkbox"/>	<input type="checkbox"/>	Provide additional resources
<input type="checkbox"/>	<input type="checkbox"/>	Document the consultation in the health record
<input type="checkbox"/>	<input type="checkbox"/>	Document the consultation in consultation service records
		Support the consultation process
<input type="checkbox"/>	<input type="checkbox"/>	Follow up with participants
<input type="checkbox"/>	<input type="checkbox"/>	Evaluate the consultation
<input type="checkbox"/>	<input type="checkbox"/>	Adjust the consultation process
<input type="checkbox"/>	<input type="checkbox"/>	Identify underlying systems issues
<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):

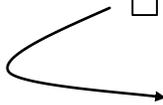
- 2.3** Which of the following responses best describes who has responsibility for the ethics consultation service at your facility? (Mark only one.)
- No individual or group has specific responsibility for the ethics consultation service.
 - Two or more individuals are jointly responsible for the ethics consultation service.
 - One individual is solely responsible for the ethics consultation service.
 - One individual is responsible for the ethics consultation service, and for overseeing other individuals who have specific ethics consultation responsibilities.
 - Other (specify):

- 2.4** Which of the following are included in your facility's approach to ensuring your ethics consultation service is held accountable for the quality of its work? (Mark all that apply.)
- Our facility does not have an approach to ensuring the ethics consultation service is held accountable for the quality of ethics consultations.
 - Ethics consultants are held accountable informally through supervisory oversight for the quality of the consultations they perform.
 - Ethics consultants are held accountable through performance reviews that explicitly address the quality of the consultations they perform.
 - A designated individual is held accountable informally through supervisory oversight for the quality of the ethics consultation service.
 - A designated individual is held accountable through a performance review that explicitly addresses the quality of the facility's ethics consultation service.
 - Our ethics consultation service is held accountable for the quality of ethics consultations through reports to a committee or council.
 - Other (specify):

- 2.5** Which of the following are included in your facility's approach to providing staff members time for ethics consultation activities? (Mark all that apply.)
- Managers approve time for ethics consultants, but do not arrange for release or coverage of consultants' other work responsibilities.
 - Managers approve time for ethics consultants and arrange for release or coverage of consultants' other work responsibilities, as needed.
 - Managers ensure that one or more ethics consultants have dedicated time to perform ethics consultation.
 - Other (specify):

2.6 Which of the following best describes your facility's approach to assessing whether ethics consultants have the requisite knowledge and skills? (Mark only one.)

- We do not assess ethics consultants' knowledge and skills.
- We only assess ethics consultants' knowledge and skills only if someone questions their proficiency or suggests there is a problem.
- We assess ethics consultants' knowledge and skills, but we do not have explicit standards.
- We assess ethics consultants' knowledge and skills through a systematic process and against explicit standards (e.g., using the Ethics Consultation Proficiency Assessment Tool).



📁 We suggest keeping documents related to this question on file for your facility's future reference.

2.7 Which of the following describes how ethics consultants in your facility learn to perform ethics consultation? (Mark all that apply.)

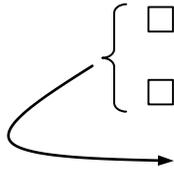
- Ethics consultants learn through self-study.
- Ethics consultants learn by observing more experienced members.
- Ethics consultants learn by receiving specific performance feedback from more experienced members.
- Ethics consultants learn by receiving feedback from requesters and/or patients, families or surrogates.
- Ethics consultants learn by completing a specific curriculum.
- Ethics consultants learn by following a specific plan for continuous professional development.
- Other (specify):

2.8 Which of the following are included in your facility's approach to educating ethics consultants (e.g., Primer – *Ethics Consultation: Responding to Ethics Questions in Health Care*)? (Mark all that apply.)

- Our facility does not offer education for ethics consultants.
- Our facility provides education for ethics consultants about a broad range of topics in ethics (e.g., informed consent, workplace boundaries).
- Our facility provides education for ethics consultants that include thorough instruction about how to perform ethics consultation.
- Our facility requires education for ethics consultants about a broad range of topics in ethics (e.g., informed consent, workplace boundaries).
- Our facility requires education for ethics consultants that includes thorough instruction about how to perform ethics consultation.
- Other (specify):

2.9 Which of the following best describes how your facility informs patients and families about the availability of the ethics consultation service at your facility? (Mark only one.)

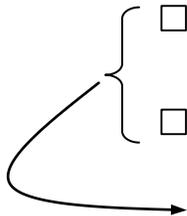
- Patients and families are generally not informed.
- Patients and families are informed by staff members only when it seems relevant.
- Patients and families in some units and settings are provided written information about the service (e.g., brochures, newsletters, posters).
- Patients and families in all units and settings are provided written information about the service (e.g., brochures, newsletters, posters).



📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

2.10 Which of the following best describes how your facility informs staff members about the availability of the ethics consultation service at your facility? (Mark only one.)

- Staff members are generally not informed.
- Staff members are informed through word of mouth on an *ad hoc* basis.
- Staff members in some departments, units and settings are provided information about the service through some regular mechanism(s) (e.g., brochures, newsletters, posters).
- Staff members in all departments, units and settings are provided information about the service through some regular mechanism(s) (e.g., brochures, newsletters, posters).



📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

2.11 Which of the following best describes the availability of your facility's ethics consultation service? (Mark only one.)

- Our service has no regular hours, but is available by special request.
- Our service is available during normal work hours.
- Our service is available during normal work hours with variable availability on nights, weekends, and holidays.
- Our service is available 24 hours a day, 7 days a week.

2.12 Which of the following best describes how responsive your facility's ethics consultation service is to urgent requests? (Mark only one.)

- One or more members of the ethics consultation service will almost always communicate with the requester within 3 business days.
- One or more members of the ethics consultation service will almost always communicate with the requester within one day (i.e., 24 hours).
- One or more members of the ethics consultation service will almost always communicate with the requester within hours (i.e., on the same business day).

2.13 Which of the following best describes your facility's policy that addresses ethics consultation? (Mark only one.)

- Our facility does not have a policy that addresses ethics consultation.
- Our facility has a policy that addresses ethics consultation with the following elements:
- In the table below, mark "yes" or "no" as to whether the element is addressed in the policy.**
-  We suggest keeping documents related to this question on file for your facility's future reference.**

YES ↓	NO ↓	POLICY ELEMENTS
<input type="checkbox"/>	<input type="checkbox"/>	The goals of ethics consultation
<input type="checkbox"/>	<input type="checkbox"/>	Who may perform ethics consultation
<input type="checkbox"/>	<input type="checkbox"/>	The education and/or training required of an ethics consultant
<input type="checkbox"/>	<input type="checkbox"/>	Who may request an ethics consultation
<input type="checkbox"/>	<input type="checkbox"/>	What requests are appropriate for the ethics consultation service
<input type="checkbox"/>	<input type="checkbox"/>	What requests are appropriate for ethics case consultation
<input type="checkbox"/>	<input type="checkbox"/>	Which consultation model(s) may be used and when
<input type="checkbox"/>	<input type="checkbox"/>	Who must be notified when an ethics consultation has been requested
<input type="checkbox"/>	<input type="checkbox"/>	How participants' confidentiality is to be protected
<input type="checkbox"/>	<input type="checkbox"/>	How ethics consultations are to be performed
<input type="checkbox"/>	<input type="checkbox"/>	How ethics consultations are to be documented
<input type="checkbox"/>	<input type="checkbox"/>	Who is accountable for the ethics consultation service
<input type="checkbox"/>	<input type="checkbox"/>	How the quality of ethics consultation is to be assessed and ensured

2.14 Which of the following approaches best describes how your facility evaluates the ethics consultation service? (Mark only one.)

- Our service is not evaluated.
- Our service is occasionally evaluated on the following factors:
- Our service is regularly evaluated on the following factors:
- For each factor in the table below, mark “yes” or “no” as to whether the factor is evaluated.**
-  **We suggest keeping documents related to this question on file for your facility’s future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.**

YES ↓	NO ↓	FACTORS EVALUATED
<input type="checkbox"/>	<input type="checkbox"/>	Integration: the ethics consultation service is well integrated with other components of the organization (e.g., utilized by multiple services and programs at your facility)
<input type="checkbox"/>	<input type="checkbox"/>	Leadership support: the ethics consultation service is adequately supported by leadership
<input type="checkbox"/>	<input type="checkbox"/>	Expertise: ethics consultants have the knowledge and skills required to perform ethics consultation competently
<input type="checkbox"/>	<input type="checkbox"/>	Staff member time: ethics consultants have adequate time to perform ethics consultation effectively
<input type="checkbox"/>	<input type="checkbox"/>	Resources: ethics consultants have ready access to the resources they need
<input type="checkbox"/>	<input type="checkbox"/>	Access: the ethics consultation service can be reached in a timely way by those it serves
<input type="checkbox"/>	<input type="checkbox"/>	Accountability: there is clear accountability for ethics consultation within the facility’s reporting hierarchy
<input type="checkbox"/>	<input type="checkbox"/>	Organizational learning: the ethics consultation service disseminates its experience and findings effectively
<input type="checkbox"/>	<input type="checkbox"/>	Evaluation: the ethics consultation service continuously improves the quality of its work through systematic assessment
<input type="checkbox"/>	<input type="checkbox"/>	Policy: the structure, function, and processes of ethics consultation are formalized in institutional policy
<input type="checkbox"/>	<input type="checkbox"/>	CASES approach: ethics case consultations are performed in accordance with the “CASES” approach (as outlined in the IntegratedEthics primer, <i>Ethics Consultation: Responding to Ethics Questions in Health Care</i>)
<input type="checkbox"/>	<input type="checkbox"/>	Goals: the ethics consultation service meets its stated goals
<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):

- 2.15** Which of the following best describes your facility's approach to documenting in ECWeb ethics consultations pertaining to cases? (Mark only one)
- Ethics Consultation Service does not use ECWeb to document ethics consultations pertaining to cases
 - Ethics Consultation Service uses ECWeb to document ethics consultations pertaining to cases, but its use is variable (e.g., it varies depending on who is involved)
 - Ethics Consultation Service uses ECWeb consistently to document ethics consultations pertaining to cases

- 2.16** Which of the following best describes your facility's approach to documenting in ECWeb ethics consultations pertaining to non-cases? (Mark only one)
- Ethics Consultation Service does not use ECWeb to document ethics consultations pertaining to non-cases
 - Ethics Consultation Service uses ECWeb to document ethics consultations pertaining to non-cases, but its use is variable (e.g., it varies depending on who is involved)
 - Ethics Consultation Service uses ECWeb consistently to document ethics consultations pertaining to non-cases

2.17 Describe specific examples of how formal evaluation(s) of the ethics consultation service have been used to improve the quality of ethics consultations at your facility. These examples could include feedback on a specific consult, assessment of an individual consultant, or systematic assessment of the entire program (e.g., Ethics Consultation Proficiency Assessment Tool, Ethics Consultation Feedback Tools).

2.18 Describe an example of how ethics consultation helped to improve ethical practices in your facility, and an example of when it failed to do so. How do you explain the different outcomes? What do you think were the critical differences in these situations?

Section 2.B. Notes on Ethics Consultation

Instructions: Record your interpretations, comments, concerns and qualifications to the responses given above. Then suggest any opportunities you perceive for improving your ethics program. These notes will help your facility develop follow-up action plans. We suggest keeping these notes on file for your facility's future reference.

Section 3. Preventive Ethics

This section of the workbook pertains to preventive ethics. For additional information about items in this section, refer to the IntegratedEthics primer, *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level* and to the IntegratedEthics toolkit and video training materials for preventive ethics.

Definition of Terms:

Best practice: A technique or methodology shown by experience and/or research to lead reliably to a desired result. In ethics, best practice refers to the ideal established by ethical and professional norms and standards. Communicating with patients in language they can understand is an example of such an ethical standard.

Ethical concern: Uncertainty or conflict about values.

Ethical issue: An ongoing situation involving organizational systems and processes that gives rise to an ethical concern.

Ethics quality gap: With respect to ethics issues, the disparity between current practices and best practices.

Preventive ethics: Activities performed by an individual or group on behalf of a health care organization to identify, prioritize, and address ethics quality gaps.

Section 3.A. Questions

Instructions: Choose the response or responses that best describe your facility's current practices.

- 3.1 Which of the following best describes your facility's approach to preventive ethics, i.e., activities performed by an individual or group on behalf of a health care organization to identify, prioritize and address ethics quality gaps? (Mark only one.)

- Our facility does not have a specific approach to preventive ethics.
 If marked, read the primer, *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level* and develop plans for an approach to preventive ethics. The remaining questions in this section will not be applicable until your facility has developed an approach to preventive ethics. Therefore, skip the remaining questions in this section.
- Our facility has an approach to preventive ethics, but the approach is variable (e.g., it varies depending on who is involved).
- Our facility has a well-defined approach that is consistently followed.

3.2 Which of the following steps are consistently included in your facility's approach to preventive ethics?

In the table below, mark "yes" or "no" as to whether the step is consistently included.

YES ↓	NO ↓	STEPS
Identify an issue		
<input type="checkbox"/>	<input type="checkbox"/>	Be proactive in identifying ethical issues
<input type="checkbox"/>	<input type="checkbox"/>	Characterize each issue
<input type="checkbox"/>	<input type="checkbox"/>	Clarify each issue by listing the improvement goal
<input type="checkbox"/>	<input type="checkbox"/>	Prioritize the issues and select one
Study the issue		
<input type="checkbox"/>	<input type="checkbox"/>	Diagram the process behind the relevant practice
<input type="checkbox"/>	<input type="checkbox"/>	Gather specific data about best practices
<input type="checkbox"/>	<input type="checkbox"/>	Gather specific data about current practices
<input type="checkbox"/>	<input type="checkbox"/>	Refine the improvement goal to reflect the ethics quality gap
Select a strategy		
<input type="checkbox"/>	<input type="checkbox"/>	Identify the major cause(s) of the ethics quality gap
<input type="checkbox"/>	<input type="checkbox"/>	Brainstorm possible strategies to narrow the gap
<input type="checkbox"/>	<input type="checkbox"/>	Choose one or more strategies to try
Undertake a Plan		
<input type="checkbox"/>	<input type="checkbox"/>	Plan how to carry out the strategy
<input type="checkbox"/>	<input type="checkbox"/>	Plan how to evaluate the strategy
<input type="checkbox"/>	<input type="checkbox"/>	Execute the plan
Evaluate and adjust		
<input type="checkbox"/>	<input type="checkbox"/>	Check the execution and the results
<input type="checkbox"/>	<input type="checkbox"/>	Adjust as necessary
<input type="checkbox"/>	<input type="checkbox"/>	Evaluate your ISSUES process
Sustain and spread		
<input type="checkbox"/>	<input type="checkbox"/>	Sustain the improvement
<input type="checkbox"/>	<input type="checkbox"/>	Disseminate the improvement
<input type="checkbox"/>	<input type="checkbox"/>	Continue monitoring
<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):

3.3 Which of the following responses best describes who has responsibility for preventive ethics activities at your facility? (Mark only one.)

- No individual or group has specific responsibility for preventive ethics activities.
- Two or more individuals are jointly responsible for preventive ethics activities.
- One individual is solely responsible for preventive ethics activities.
- One individual is responsible for preventive ethics activities, and for overseeing other individuals who have specific preventive ethics responsibilities.
- Other (specify):

3.4 Which of the following are included in your facility's approach to ensuring your preventive ethics program is held accountable for the quality of its work? (Mark all that apply.)

- Our facility does not have an approach to ensuring the preventive ethics program is held accountable for the quality of preventive ethics activities.
- Two or more individuals are held accountable informally through supervisory oversight for the quality of the preventive ethics activities they perform.
- Two or more individuals are held accountable through performance reviews that explicitly address the quality of the preventive ethics activities they perform.
- A designated individual is held accountable informally through supervisory oversight for the quality of the facility's preventive ethics program.
- A designated individual is held accountable through a performance review that explicitly addresses the quality of the facility's preventive ethics program.
- Our preventive ethics program is held accountable for the quality of preventive ethics activities through reports of its activities to a committee or council.
- Other (specify):

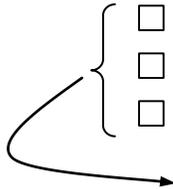
3.5 Which of the following are included in your facility's approach to providing staff member time for preventive ethics activities? (Mark all that apply.)

- Managers approve time for those responsible for preventive ethics to perform this activity, but do not arrange for release or coverage of their other work responsibilities.
- Managers approve time for those responsible for preventive ethics to perform this activity and arrange for release or coverage of their other work responsibilities, as needed.
- Managers ensure one or more individuals responsible for preventive ethics have dedicated time to perform this activity.
- Other (specify):

- 3.6** Which of the following are included in your facility's approach to educating individuals that perform preventive ethics activities (e.g., Primer – *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level*)? (Mark all that apply.)
- Our facility does not provide education on preventive ethics to individuals that perform preventive ethics activities.
 - Some staff members that perform preventive ethics activities are offered education on preventive ethics.
 - All staff members that perform preventive ethics activities are offered education on preventive ethics.
 - Some staff members that perform preventive ethics activities are required to receive education on preventive ethics.
 - All staff members that perform preventive ethics activities are required to receive education on preventive ethics.
 - Other (specify):
- 3.7** In which of the following areas does at least one individual who engages in preventive ethics have a high level of proficiency? (Mark all that apply.)
- Knowledge of quality improvement principles, methods, and practices
 - Knowledge of relevant organizational environment(s)
 - Knowledge of organizational change strategies
 - Knowledge of ethics topics and concepts
 - Skill in moral reasoning
 - Skill in systems thinking
 - Other (specify):
- 3.8** Which sources does the individual responsible for preventive ethics (e.g., Preventive Ethics Coordinator) routinely contact to identify ethical issues that may benefit from a preventive ethics approach? (Mark all that apply.)
- No sources are routinely contacted.
 - Our facility's ethics consultation service
 - Senior management/executive leadership body
 - IntegratedEthics Council (facility-level)
 - Service leaders/program heads
 - Quality management
 - Human resources
 - Fiscal services
 - Compliance and business integrity
 - Patient safety
 - Research service
 - VISN- IntegratedEthics Point of Contact
 - Other (specify):

3.9 Which approaches are used at your facility to disseminate information about preventive ethics activities, including “lessons learned?” (Mark all that apply.)

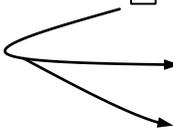
- No information is disseminated to staff members.
- Information is disseminated at senior executive meetings.
- Information is disseminated at managers’ meetings.
- Information is disseminated at staff meetings.
- Information is presented on posters or bulletin boards.
- Information is presented through newsletters, all-staff emails, or reports.
- Other (specify):



 **We suggest keeping documents related to this question on file for your facility’s future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.**

3.10 Which of the following best describes your facility’s policy that addresses preventive ethics? (Mark only one.)

- Our facility does not have a policy that addresses preventive ethics.
- Our facility has a policy that addresses preventive ethics with the following elements:



Mark “yes” or “no” as to whether the element is addressed in the policy.

 **We suggest keeping documents related to this question on file for your facility’s future reference.**

YES ↓	NO ↓	POLICY ELEMENTS
<input type="checkbox"/>	<input type="checkbox"/>	The goals of preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	Who is to perform preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	The education and/or training required of those who perform preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	What activities fall within the mandate of preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	What issues are appropriate for the preventive ethics team to consider
<input type="checkbox"/>	<input type="checkbox"/>	How issues will be identified, prioritized, and addressed
<input type="checkbox"/>	<input type="checkbox"/>	Which issues require a quality improvement approach
<input type="checkbox"/>	<input type="checkbox"/>	How the confidentiality of participants is to be protected
<input type="checkbox"/>	<input type="checkbox"/>	How preventive ethics activities are to be performed
<input type="checkbox"/>	<input type="checkbox"/>	How preventive ethics activities are to be documented
<input type="checkbox"/>	<input type="checkbox"/>	Who is accountable for preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	How the quality of preventive ethics will be assessed and assured

3.11 Which of the following best describes how your facility evaluates preventive ethics? (Mark only one.)

- Our facility does not evaluate the preventive ethics program.
 - Our facility occasionally evaluates the preventive ethics program on the following factors
 - Our facility regularly evaluates the preventive ethics program on the following factors:
- In the table below, mark “yes” or “no” as to whether the factor is evaluated.**
-  **We suggest keeping documents related to this question on file for your facility’s future reference.**

YES ↓	NO ↓	FACTORS EVALUATED
<input type="checkbox"/>	<input type="checkbox"/>	Integration: preventive ethics is well integrated with other ethics-related activities in the facility
<input type="checkbox"/>	<input type="checkbox"/>	Leadership support: preventive ethics is adequately supported by leadership
<input type="checkbox"/>	<input type="checkbox"/>	Expertise: individuals performing preventive ethics have the required knowledge and skills to perform preventive ethics competently
<input type="checkbox"/>	<input type="checkbox"/>	Staff member time: individuals performing preventive ethics have adequate time to perform preventive ethics effectively
<input type="checkbox"/>	<input type="checkbox"/>	Resources: individuals performing preventive ethics have ready access to the resources they need
<input type="checkbox"/>	<input type="checkbox"/>	Access: staff members know when and how to refer issues to those responsible for performing preventive ethics
<input type="checkbox"/>	<input type="checkbox"/>	Accountability: there is clear accountability for preventive ethics within the facility’s reporting hierarchy
<input type="checkbox"/>	<input type="checkbox"/>	Organizational learning: those responsible for preventive ethics disseminate their experience and findings effectively
<input type="checkbox"/>	<input type="checkbox"/>	Evaluation: those responsible for preventive ethics continuously improve the quality of their work through systematic assessment
<input type="checkbox"/>	<input type="checkbox"/>	Policy: the structure, function and processes of preventive ethics are formalized in institutional policy
<input type="checkbox"/>	<input type="checkbox"/>	ISSUES approach: ethics issues are addressed in accordance with the “ISSUES” approach (as outlined in the IntegratedEthics Primer, <i>Preventive Ethics: Addressing Health Care Ethics Issues on a Systems Level</i>)
<input type="checkbox"/>	<input type="checkbox"/>	Goals: preventive ethics meets its stated goals
<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):

3.12 Describe specific examples of how evaluation(s) have been used to improve the quality of preventive ethics at your facility.

3.13 Describe an example of how preventive ethics helped to improve ethical practices in your facility and an example of when it failed to do so. How do you explain the different outcomes? What do you think were the critical differences in these situations?

Section 3.B. Notes on Preventive Ethics

Instructions: Record your interpretations, comments, concerns and qualifications to the responses given above. Then suggest any opportunities you perceive for improving your ethics program. These notes will help your facility develop follow-up action plans. We suggest keeping these notes on file for your facility's future reference.

Section 4. Ethical Leadership

This section of the workbook pertains to ethical leadership. For additional information about items in this section, refer to the IntegratedEthics primer, *Ethical Leadership: Fostering an Ethical Environment and Culture*, the IntegratedEthics toolkit for the ethical leadership coordinator, and the ethical leadership video.

Definition of Terms:

Corporate decision-making body: An executive and/or senior leadership body that makes major organizational decisions, such as opening or closing a unit. Some examples include executive committees, clinical executive boards, and executive leadership boards. These bodies often include top leaders, such as the medical center director, chief financial officer, chief nurse executive, chief of staff and service line chiefs, but may vary from facility to facility.

Ethical practices in health care: Decisions or actions in the delivery and/or management of health care that are consistent with widely accepted ethical standards, norms, or expectations for a health care organization and its staff.

Ethical leadership: Activities on the part of leaders to foster an environment and culture that support ethical practices throughout the organization. These include demonstrating that ethics is a priority, communicating clear expectations for ethical practice, practicing ethical decision making, and supporting the facility's local ethics program.

Leaders: Staff members at the senior executive and mid-manager (division/department/service line manager) levels as defined in the High Performance Development Model (HPDM).

Senior leaders: For the purpose of this workbook senior leaders are individuals who are the top level managers of a facility (e.g., the tetrad).

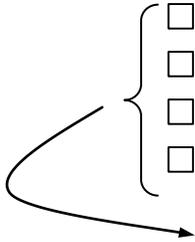
Section 4.A. Questions

Instructions: Choose the response or responses that best describe your facility's current practices.

- 4.1 Which of the following responses best describes who has responsibility for overseeing ethical leadership at your facility? (Mark only one.)
- No individual or group has specific responsibility for overseeing ethical leadership.
 - Two or more individuals are jointly responsible for overseeing ethical leadership.
 - One individual is solely responsible for overseeing ethical leadership
 - One individual is responsible for overseeing ethical leadership, and for promoting ethical leadership among other facility leaders.
 - Other (specify):

4.2 At your facility, which approaches do senior leaders commonly use to communicate specific expectations for ethical practices? (Mark all that apply.)

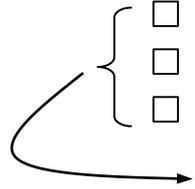
- Oral communication by leaders (e.g., staff meetings, town hall meetings)
- Written communication by leaders (e.g., executive memoranda)
- Policies
- New employee orientation
- Other (specify):



📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

4.3 At your facility, in what ways are ethical practices acknowledged and reinforced by leaders? (Mark all that apply.)

- Ethical practices are acknowledged on an *ad hoc* basis (e.g., feedback to an individual employee).
- Ethical practices are formally acknowledged (e.g., recognition at staff meetings).
- There is zero tolerance for unethical practices.
- Ethical practices are acknowledged through a specific awards program.
- Ethical practices are identified in employees' performance plans.
- Other (specify):

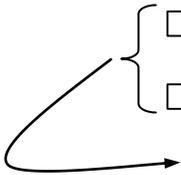


📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

4.4 How does your top corporate decision-making body ensure that it adequately considers the ethical aspects of major decisions? (Mark all that apply.)

Identify the corporate decision-making body here: _____

- This corporate decision-making body has no formal mechanism to ensure that it considers ethical aspects of major decisions.
- This corporate decision-making body includes a member with recognized expertise in ethics.
- This corporate decision-making body refers ethical concerns or issues to the facility's ethics committee or IntegratedEthics program.
- This corporate decision-making body uses a decision-making model or template that prompts it to consider the ethical aspects of major decisions.
- Other (specify):



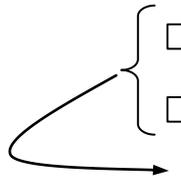
📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

If your facility has only one corporate decision-making body, skip to Question 4.6.

4.5 How does your second corporate decision-making body ensure that it adequately considers the ethical aspects of major decisions? (Mark all that apply.)

Identify the corporate decision-making body here: _____

- This corporate decision-making body has no formal mechanism to ensure that it considers ethical aspects of major decisions.
- This corporate decision-making body includes a member with recognized expertise in ethics.
- This corporate decision-making body refers ethical concerns or issues to the facility's ethics committee or IntegratedEthics program.
- This corporate decision-making body uses a decision-making model or template that prompts it to consider the ethical aspects of major decisions.
- Other (specify):



📁 We suggest keeping documents related to this question on file for your facility's future reference. We also encourage you to use the IE SharePoint site to share these documents with your peers in other VISNs or facilities.

- 4.6** At your facility, how do leaders involve patients and/or Veteran representatives in major organizational decisions that affect Veterans and have ethical implications (e.g., closing a patient care unit)? (Mark only the most common approach.)
- Patients and/or Veteran representatives are not involved.
 - Patients and/or Veteran representatives may express their views in an unplanned or *ad hoc* manner.
 - Patients and/or Veteran representatives are invited or asked to express their views.
 - Patients and/or Veteran representatives participate routinely in the decision-making process.
 - Other (specify):
- 4.7** At your facility, how do leaders involve clinical staff members in major organizational decisions that affect clinical care and have ethical implications (e.g., closing a patient care unit)? (Mark only the most common method of involvement.)
- Clinical staff members are not involved.
 - Clinical staff members express their views in an unplanned or *ad hoc* manner.
 - Clinical staff members are invited or asked to express their views.
 - Clinical staff members participate routinely in the decision-making process.
 - Other (specify):
- 4.8** At your facility, how do leaders involve staff members in major organizational decisions that have ethical implications (e.g., reducing the workforce)? (Mark only the most common approach.)
- Staff members are not involved.
 - Staff members may express their views in an unplanned or *ad hoc* manner.
 - Staff members are invited or asked to express their views.
 - Staff members participate routinely in the decision-making process.
 - Other (specify):

- 4.9** Consider the last major **clinical** decision made by leaders at your facility that had ethical implications for staff members and/or patients (e.g., closing a patient care unit, implementing a significant change in procedures). Which approaches were used to **explain** the decision? (Mark all that apply.)

Identify the decision here: _____

4.9a Staff

- No explanation for the decision was provided to the affected staff members.
- Leaders provided the affected staff members with a justification for the final decision.
- Leaders explained the pros and cons of the options considered to the affected staff members.
- Leaders informed the affected staff members about the process used in making the decision, including who had input into the decision.
- Other (specify):

4.9b Patients and/or Veteran Representatives

- No explanation for the decision was provided to patients and/or Veteran representatives.
- Leaders provided patients and/or Veteran representatives with a justification for the final decision.
- Leaders explained the pros and cons of the options considered to patients and/or Veteran representatives.
- Leaders informed patients and/or Veteran representatives about the process used in making the decision, including who had input into the decision.
- Other (specify):

- 4.10** Consider the last major **non-clinical** decision made by leaders at your facility that had ethical implications for staff members and/or patients (e.g., reducing the workforce). Which approaches were used to explain the decision? (Mark all that apply.)

Identify the decision here: _____

4.10a Staff

- No explanation for the decision was provided to the affected staff members.
- Leaders provided the affected staff members with a justification for the final decision.
- Leaders explained the pros and cons of the options considered to the affected staff members.
- Leaders informed the affected staff members about the process used in making the decision, including who had input into the decision.
- Other (specify):

4.10b Patients and/or Veteran Representatives

- No explanation for the decision was provided to patients and/or Veteran representatives.
- Leaders provided patients and/or Veteran representatives with a justification for the final decision.
- Leaders explained the pros and cons of the options considered to patients and/or Veteran representatives.
- Leaders informed patients and/or Veteran representatives about the process used in making the decision, including who had input into the decision.
- Other (specify):
- Not applicable.

4.11 Which of the following are included in your facility's approach to educating leaders about ethical leadership (e.g., Primer – *Ethical Leadership: Fostering an Ethical Environment & Culture*)? (Mark all that apply.)

- This facility does not have a specific approach to educating leaders about ethical leadership.
- Some leaders are offered education about ethical leadership.
- All leaders are offered education about ethical leadership.
- Some leaders are required to receive education about ethical leadership.
- All leaders are required to receive education about ethical leadership.
- Some leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.
- All leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.
- Other (specify):

4.12 Describe specific examples of how ethical leadership has affected the ethical environment and culture at your facility.

Section 4.B. Notes on Ethical Leadership

Instructions: Record your interpretations, comments, concerns and qualifications to the responses given above. Then suggest any opportunities you perceive for improving your ethics program. These notes will help your facility develop follow-up action plans. We suggest keeping these notes on file for your facility's future reference.

Understanding the Results and Next Steps

Now that all the sections of the workbook have been completed, the teams should meet to discuss the results and identify gaps between your current ethics program and a fully developed IntegratedEthics program. To help identify gaps, teams should review the *IntegratedEthics Facility Workbook: Understanding Your Results* (<http://vaww.ethics.va.gov/IntegratedEthics>). You should then report the results to the senior leaders of your facility and/or the IntegratedEthics Council. When interpreting your results, local considerations should be taken into account to determine which findings represent a quality gap and which of these should receive priority at your facility.

Since this is a tool for continuous quality improvement, you should use the workbook to re-assess your IntegratedEthics program on an annual basis. By comparing results across time, you can track your progress and determine where further work is needed.