Shortly before her recent departure in June, Ellen Fox, MD, former NCEHC Executive Director, sat down with Gail Goza-Macmullan, PhD, NCEHC’s Chief of Special Projects, to discuss the growth and development of the Center, her initial vision and subsequent success of the IntegratedEthics (IE) program, and her thoughts on how leaders can foster ethical behavior within their organizations. Dr. Fox led NCEHC for over 15 years, and helped to establish VA as a national force in health care ethics. This interview was developed into two podcasts.

In Part I, “Realizing a Vision of Ethics Quality in Health Care,” Dr. Fox reflects on her tenure at NCEHC, the development of IE, and the many accomplishments of the Center. “In some ways, IE was the vision that I brought to the Center. The goal of an ethics program is to improve practices….It’s essential to health care delivery.”

In Part II, “Insights on Leading an Ethics Program,” provides further details on how Dr. Fox evolved her leadership role at NCEHC. She shares insights, anecdotes, and advice on leading an ethics program. “You need to develop techniques for talking about things that are difficult for people to hear, in ways that people can hear.”

The podcasts and transcripts are available on the Sound Ethics page of NCEHC’s web site at: http://www.ethics.va.gov/Podcasts/issue_31.asp

NCEHC Welcomes Acting Director and Acting Deputy Director

Effective immediately, Kenneth Berkowitz, MD, has been named NCEHC’s new Acting Executive Director, and Melissa Bottrell, MPH, PhD, is the new Acting Deputy Director. Dr. Berkowitz has served as NCEHC’s Chief of Ethics Consultation since 2000 and performs direct patient care and ethics-related activities at VA New York Harbor Health Care System and the NYU School of Medicine. Dr. Bottrell joined NCEHC in 2003 and, as Chief of IntegratedEthics, led the development and implementation of the IE program across VHA.

Other new appointments are:

- Sheryl Kittelson, MA: Acting Chief, IntegratedEthics
- Gail Goza-MacMullan, PhD: Chief, Special Projects
- Jill Lowery, PsyD: Ethics Policy Consultant
- Lucinda Potter, MSW: Ethics Policy Specialist
- Georgina Baumgartner, MA: Ethics Policy Specialist

NCEHC welcomes these leaders and staff to their new roles and looks forward to their contributions to advance ethics quality across VHA.

2014-15 VA/University of Chicago Fellows

Recipients of the 2014-2015 VA/University of Chicago Fellowship in Health Care Ethics Consultation are:

- David M. Chooljian, MD, JD, Staff Physician, Pulmonary and Critical Care Medicine, VA Loma Linda Health Care System
- Robert Sebesta, LCSW, ACSW, BCD, C-SWHC, Social Worker, PTSD Clinical Team, Central Texas Veterans Health Care System

This prestigious joint fellowship program, now in its fifth year, prepares VA health care professionals to serve as health care ethics consultation leaders across VHA. For further information, contact Barbara Chanko, Health Care Ethicist, at Barbara.Chanko@va.gov; 212-951-3365.

Thank you for participating in the 2014 Voice of VA Staff Survey

The national Center for Ethics in Health Care (NCEHC) thanks all members of facilities, VISNs, and VHA Central Office (CO) who took the recent Voice of VA (VOVA) survey, which closed on June 30. Facility and VISN staff had the chance to take either the IE Staff Survey (IESS) or the Patient Safety Culture Survey, while all CO staff were given the IESS. The preliminary response rate across all offices was 29.4%, and the VISNs reporting the highest response rates were VISN 8 (45.2%), VISN 23 (44.6%), and VISN 10 (39.9%).

Links to the final results, including for all facilities and VISNs, will be posted on the intranet and published in IE in Action as soon as they are available.

Getting out the vote: Romney Dodd, IE Program Officer at Captain James A. Lovell Federal Health Care Center (North Chicago, IL), distributed candy and information to boost his facility’s participation in VOVA.

New Podcasts: Dr. Ellen Fox Reflects on Her Career at VA and the Development of IntegratedEthics

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C&E Week Highlights from the Field:

VA Staff Promote Ethics with Innovative and Inspiring Programs

Between April 28 and May 2, IntegratedEthics (IE) teams across VHA teamed with colleagues in the Office of Compliance and Business Integrity (CBI) to host information displays, lunch-and-learns, games, and other fun activities to spread awareness of ethics and information about IE programs. The activities and photos featured on these two pages are just a few of those reported by enthusiastic IE and CBI teams across VHA. The NCEHC thanks everyone who shared news about their C&E Week activities; your efforts to promote and spread IE are most appreciated!

- During one of the daily lunch-and-learns held at Fargo (ND) VA Health Care System, a panel comprised of VA staff and community partners discussed difficult end-of-life issues. Members included a social worker from a local hospice, a parish priest who teaches an ethics class for new seminarians, a VA chaplain, and a patient advocate from Hospice/Palliative Care. The panel discussed case scenarios that were developed by IE team members with input from staff, and the audience asked questions and shared experiences/concerns. According to organizers, “the social worker and priest thought it was very valuable to hear from VA staff, and vice versa.”

- The Wilmington (DE) VA Medical Center hosted two contests: a Compliance & Ethics Words Scramble and a staff solicitation for ideas on how the IntegratedEthics Committee can improve their performance. For the second contest, staff submitted many excellent suggestions, including: 1) giving grand rounds on how compliance and ethics affect patient care; 2) encouraging regular visits by IE committee members to leadership bodies and staff meetings to increase awareness of IE and give employees the chance to bring up issues; and 3) publishing sample ethics issues and their resolutions in the ethics newsletter to help staff identify and discuss such concerns with their supervisors. Grand prizes were 30-day access to premier parking spots. The IE Council plans to adopt many of these suggestions.

- Each day, employees at Amarillo (TX) VA Health Care System were invited to respond to an “ethical dilemma.” The case studies were originally published by the VA’s Office of General Counsel and included dilemmas such as: “The patient does not have a health care agent, guardian, next of kin, or close friend. Does the facility have to pursue guardianship in order to obtain a surrogate for the patient?” The names of all staff who participated were entered into a drawing for lunch with the director.

- C&E Week activities at the James A. Haley Veterans’ Hospital (Tampa, FL) culminated with a keynote presentation by Linda Belton, FACHE, Director, Organizational Health, National Center for Organizational Development. Ms. Belton focused her presentation titled “Building a Culture of Service” in an ethical work culture with emphasis on understanding the impact of culture on the organization, learning about the concepts of customer service and patient-centered care, and translating principles of Servant Leadership into practice. The presentation included all-employee and leadership sessions.

At the conclusion of the program, Tampa’s Facility Director Kathleen R. Fogarty presented Linda Belton with a Certificate of Appreciation.
Leading up to C&E Week, the ethics consultation team at Beckley (WV) VA Medical Center hosted an “Ethics Egg-Stravaganza,” and provided Veterans and staff with educational material on the ethics consultation (EC) service. Over 800 eggs stuffed with candy and ethical values were handed out on each floor of the facility along with information about EC. Patients, visitors, and staff were stopped in the halls with questions such as “Are you familiar with our ethics program?” After receiving the information, many Veterans indicated they had not previously known the EC service was also available to them.

On Thursday, May 8, the North Texas VA Health Care System hosted its fourth annual Ethics Symposium for Veterans. Two panel discussions, several speaker sessions, and Q&A sessions were held. Moderated and organized by Padmashri Rastogi, MD, topics included “Why should I know about ethics?” “What happens once an ethics consult is submitted?” “Advance directives,” and “Stigma in health care.” The most frequently asked questions concerned respect, stigma, attitude, and end-of-life issues.

The Alexandria (LA) VA Health Care System hosted an “Integrated Ethics Scavenger Hunt” that provided an opportunity for staff to learn more about the facility’s IE program. Among other information, contestants needed to locate the names of the IEPO and Preventive Ethics Coordinator, and contact information for the ethics consultation service.

The C.W. Bill Young VA Medical Center (Bay Pines, FL) staged a room full of interactive activities. First, attendees filled out a self-assessment about ethics and compliance. Then came two rounds of Ethics Challenges. Participants were asked: “What would you do if . . .?” Topics included ethics consultations, relationships with providers and patients, and self-determination. Next, they were tested on their knowledge of VA’s ethics program, such as the composition of the facility’s IE team. Finally, attendees were asked to create ethics origamis (pictured above) containing ethical values and definitions.

The Nebraska-Western Iowa Health Care System (Omaha, NE) hosted the interactive game “Who Wants to Be a Compliance and Ethics Millionaire?” featuring questions developed jointly by IE and CBI teams. Prizes included a “One Millionaire” bill for the winner and a bottle of water with a tag stating, “You’re always a winner with Compliance and Ethics” for all contestants.

Linda Boyd, RN, turns the “ICARE crank” of the winning project at Ralph H. Johnson VA Medical Center (Charleston, SC). C&E Week organizers challenged services to create projects showing how they build a culture of integrity. Sterile Processing Service’s winning design had two parts: a poster depicting the ICARE values inside drawn balloons and a crank hung with actual balloons that were labeled with the service’s daily tasks. As the handle is turned, the task balloons move up and down, representing ever-shifting priorities. The balloons representing the values, however, do not move, demonstrating that “regardless of the overwhelming number of tasks we have to balance, the ICARE values remain constant within our service as an obligation to our Veterans.”
VHA Standardizes Policy on Informed Consent and Patient Education for Long-Term Opioid Treatment

VHA practitioners who prescribe opioids to treat non-cancer pain for 90 or more days now must adhere to standardized patient education and signature informed consent requirements outlined in new policy. VHA Directive 1005, “Informed Consent for Long-Term Opioid Therapy for Pain,” was developed through a collaboration between NCEHC and the National Pain Management Program and published on May 6, 2014.

VHA has consistently encouraged documentation of the discussion between the provider and the patient regarding potential risks and benefits of opioids, as well as responsibilities related to opioid use. In recent years, a number of VA providers have documented these discussions in locally created Opioid Pain Care Agreements, also known as OPCAs or pain contracts. While OPCAs are appropriately aimed at clarifying treatment goals and responsibilities, there has been growing recognition that their use of threatening language has the potential to harm the patient–provider relationship.

To address these concerns, and meet responsibilities established by the Office of National Drug Control Policy, the directive establishes requirements for patient education and signature informed consent. The new patient information guide, “Taking Opioids Responsibly for Your Safety and the Safety of Others,” and consent form (available through iMedConsent™ and as a paper form when iMedConsent cannot be used) satisfy VHA’s legal and policy requirements for informed consent while serving the educational and risk management purposes of an OPCA.

All locally developed OPCAs must be replaced with the nationally standardized consent form by May 6, 2015. Facility Directors are responsible for establishing the CPRS progress note by June 6, 2014, and publishing local policy and procedures to align with the policy by November 6, 2014. The NCEHC has drafted a model Medical Center Memorandum (MCM) template to assist with this requirement.

The directive’s requirements do not apply to patients receiving short-term opioids, patients enrolled in hospice, or patients receiving long-term opioids for cancer pain.

The directive, patient information guide, MCM, and frequently asked questions are available at: http://www.ethics.va.gov/activities/policy.asp. The consent form is available for VA staff only on the VA Forms page: http://vaww.va.gov/vaforms.