

October 20, 2021

INTEGRATED ETHICS®

To reduce program requirements, this VHA Notice 2021-20 rescinds VHA Directive 1004.06(2) IntegratedEthics®, dated October 23, 2018 and provides the interim policy for the IntegratedEthics (IE) Program within the National Center for Ethics in Health Care (NCEHC). **NOTE:** *The associated interim Cerner Supplement is now incorporated into interim policy below.*

1. The NCEHC is transforming the field-based IE Program to focus on enhanced ethics expertise in VA medical facilities and on the development and maintenance of ethics communities. During the transition period, NCEHC is rescinding VHA Directive 1004.06(2) and replacing it with this notice to enable IE staff to focus on the essential ethics activities that will move VHA toward the desired future state.

2. **POLICY:** It is VHA policy that each VA medical facility must promote ethics quality in health care by implementing or sustaining an IE program.

3. RESPONSIBILITIES

a. **Executive Director, National Center for Ethics in Health Care.** The Executive Director, National Center for Ethics in Health Care (NCEHC) is responsible for:

(1) Leading and directing IE on a national level.

(2) Establishing, interpreting and communicating standards and guidance for IE, including the information in this notice.

(3) Establishing and communicating IE program performance and quality improvement goals.

b. **Veterans Integrated Service Network Director.** The VISN Director is responsible for:

(1) Ensuring all VA medical facilities in the VISN are appropriately and adequately staffed to develop and maintain effective facility IE programs (e.g., budget, space, clerical support, reference materials, ongoing training).

(2) Ensuring that VA medical facility IE programs achieve national and local IE program performance and quality improvement goals and responding to the medical facility profiles created and disseminated by NCEHC.

(3) Facilitating inter-facility communications regarding IE program development and management, such as sharing local IE program strong practices and exploring

opportunities and approaches for improvement.

c. **VA Medical Facility Director**. The VA medical facility Director is responsible for:

(1) Championing IE and promoting support and engagement for IE from the leaders at the VA medical facility.

(2) Meeting regularly with the VA medical facility IE Program Officer (IEPO), to review program performance, ethics consults, Preventive Ethics (PE) transition projects, and to discuss significant ethical issues that impact the facility. For additional information about program metrics see:

<https://vaww.ethics.va.gov/integratedethics/ieprogrpt.asp> **NOTE:** *This is an internal VA website that is not available to the public.*

(3) Ensuring the Ethics Consultation Coordinator (ECC) has adequate resources for management of the Ethics Consultation Service and that ECCs and ethics consultants receive protected time to perform their role effectively.

d. **VA Medical Facility Integrated Ethics Program Officer**. The Integrated Ethics Program Officer (IEPO) reports on IE program functioning to the VA medical facility Director and is responsible for:

(1) Collaborating with the VA medical facility Director to maintain a VA medical facility IE program that is structured and managed according to the provisions of this notice.

(2) Identifying resources (e.g., dedicated time, educational materials, workspace) needed to succeed and communicating identified needs to the VA medical facility Director.

(3) Collaborating with the Preventive Ethics (PE) Team on PE transition projects identified by NCEHC. For additional information please see: <https://vaww.ethics.va.gov/integratedethics/ieprogrpt.asp>. **NOTE:** *This is an internal VA website that is not available to the public.*

(4) Managing IEWeb permission requests for all VA medical facility staff needing access to IEWeb/Salesforce for documenting ethics consultations, preventive ethics transition projects, and other ethics activities, according to the instructions in the document: https://vaww.ethics.va.gov/ETHICS/docs/integratedethics/IEWeb_Permission_Requests.docx. **NOTE:** *This is an internal VA document that is not available to the public.*

e. **VA Medical Facility Ethics Consultation Coordinator**. The Ethics Consultation Coordinator (ECC) reports on the functioning of the consultation service to the VA Medical Facility IEPO and is responsible for:

(1) Managing the VA medical facility's Ethics Consultation Service, including:

(a) Ensuring that patients, Community Living Center (CLC) residents, families, surrogate decision makers, caregivers, and staff have access to the Ethics Consultation Service and know how to request an ethics consultation. **NOTE:** *The electronic health record (EHR) cannot be the only method for accessing the Ethics Consultation Service because that would exclude eligible individuals who do not have access to the electronic system.*

(2) Ensuring the Ethics Consultation Service is available, at a minimum, throughout normal work hours.

(a) After-hours coverage arrangements may vary but must be adequate to meet the needs of the facility. For example, in facilities where the volume of consultation requests is high, ethics consultants may need to be available by pager over weekends, nights and holidays.

(b) In facilities where there are fewer consultations, requests may be considered by an administrator who has access to an ethics consultant as needed.

(3) Making recommendations for assignment of ethics consultants to the Ethics Consultation Service according to procedures established by the VA medical facility Director.

(4) Providing timely notification to the VA medical facility IEPO, and as directed, other appropriate VA medical facility leaders regarding ethics consultations that may be controversial, might establish precedent, or may result in media or legal involvement.

(5) Serving as an ethics consultant. For specific responsibilities of an ethics consultant, see paragraph 3.e.

(6) Serving as a liaison between the VA medical facility and NCEHC for EC-related matters, accessing the NCEHC's Ethics Consultation Service when support for the VA medical facility EC is needed, and responding to NCEHC requests for information or action.

(7) Participating, as requested, in forums and training hosted by the NCEHC.

(8) Attending and, as requested, participating in national educational conference e calls scheduled by the NCEHC.

(9) Ensuring that VA medical facility ethics consultants meet minimum requirements before working independently on a consult or entering information into IEWeb. **NOTE:** *See Appendix A, for a list of minimum requirements for ethics consultants.*

(10) Administering IEWeb Ethics Consultation and EC Evaluation records and ensuring that at least one other ethics consultant has IEWeb EC Administrator permissions and is trained in administering EC and Evaluation records.

(11) Maintaining an active Ethics Consultation Service.

(12) Developing and implementing quality improvement plans for the EC function based on the systematic evaluation of the EC function using, at a minimum, the following approved NCEHC tools:

(a) The Ethics Consultant Proficiency Assessment Tool and Ethics Consultation Service Proficiency Assessment Tool. **NOTE:** For additional information on the Ethics Consultant Proficiency Assessment Tool and the Ethics Consultation Service Proficiency Assessment Tool, please see the IE ethics consultation website: <https://vaww.ethics.va.gov/integratedethics/ECC.asp#Primer> This is an internal VA document that is not available to the public.

(b) IEWeb Evaluation Reports. The ECC reviews IWeb Evaluation Reports at least twice per year to assess participant feedback regarding ethics consultations.

(c) IEWeb Ethics Consultation Reports. The ECC reviews IWeb Ethics Consultation Reports at least quarterly to assess utilization, access, and processes of ethics consultations.

f. **VA Medical Facility Ethics Consultants**. VA medical facility ethics consultants report to the ECC, and are responsible for:

(1) Ensuring continuing professional development of ethics consultation proficiencies by:

(a) Completing the Ethics Consultant Proficiency Assessment Tool annually. **NOTE:** For additional information on the Ethics Consultant Proficiency Assessment Tool, see the IE ethics consultation website: <https://vaww.ethics.va.gov/integratedethics/ECC.asp#Primer> . This is an internal VA website that is not available to the public.

(b) Conducting all ethics consultations using the CASES approach. **NOTE:** Details of the CASES approach can be found in *Ethics Consultation: Responding to Ethics Questions in Health Care*, at: https://www.ethics.va.gov/docs/integratedethics/ec_primer_2nd_ed.pdf.

(c) Triaging concerns and directing requesters who are not seeking assistance resolving an ethical concern or who are seeking assistance with other types of matters, to other appropriate offices in the organization.

(d) Ethics consultation requests from an anonymous requester may not be accepted because ethics consultants must interact with the requester as part of conducting the case or non-case consultation. **NOTE:** For more information see *Ethics Consultation: Responding to Ethics Questions in Health Care*, available at: https://www.ethics.va.gov/docs/integratedethics/ec_primer_2nd_ed.pdf).

(2) Documenting each ethics case consultation and each ethics non-case consultation in IWeb according to the instructions accessible to the ethics consultant on IWeb user screens within the following timeframes:

(a) Ethics consultation records must be initiated in IEWeb as soon as possible and no later than 7 days after receiving an ethics consultation request.

(b) All ethics consultation progress notes that have been entered into a patient's health record must also be entered, in their entirety, into IEWeb within 7 days of the signature date of the health record note.

(c) All other activities related to an ethics consult must be documented in IEWeb as soon as possible and no later than 7 days after a final consultation response is provided to the requester.

(3) Documenting each ethics case consultation in the patient's electronic health record when the patient's involvement is relevant to the ethical concern giving rise to the consultation.

(4) Responding to a consultation request in a timely fashion by making initial contact with the consult requester within 1 business day for routine requests, and within 4 hours for urgent requests.

g. **VA Medical Facility Preventive Ethics Coordinator.** The VA medical facility Preventive Ethics Coordinator (PEC) reports on the functioning of preventive ethics to the VA medical facility IEPO and is accountable for managing the VA medical facility's PE transition projects. For additional information about program metrics see: <https://vaww.ethics.va.gov/integratedethics/ieprogrpt.asp>. **NOTE:** *This is an internal VA website that is not available to the public.*

h. **VA Medical Facility Preventive Ethics Team Members.** The VA medical facility Preventive Ethics (PE) Team members are accountable to the PEC and are responsible for completing and documenting PE transition projects. For additional information about program metrics see: <https://vaww.ethics.va.gov/integratedethics/ieprogrpt.asp>. **NOTE:** *This is an internal VA website that is not available to the public.*

4. VHA Directive 1004.06(2), IntegratedEthics®, dated October 23, 2018, is rescinded.

5. All inquiries concerning this action should be addressed to the National Center for Ethics in Health Care (10ETH) at 202-632-8457.

6. This VHA notice will expire and be archived on October 31, 2022.

**BY DIRECTION OF THE OFFICE OF THE
UNDER SECRETARY FOR HEALTH:**

/s/ Erica Scavella
Associate Deputy Under Secretary for
Health for Oversight, Risk and Ethics

October 20, 2021

VHA NOTICE 2021-20

DISTRIBUTION: Emailed to the VHA Publications Distribution List on October 21, 2021.

APPENDIX A

MINIMUM REQUIREMENTS FOR ETHICS CONSULTANTS

The following is a list of IEWeb minimum requirements for the VA Medical Facility Ethics Consultant:

- a. Read the Ethics Consultation Primer, “Ethics Consultation: Responding to Ethics Questions in Health Care”.
- b. Complete the 2-hour ethics consultation video course, including the exercises.
- c. View the IEWeb online learning module.
- d. Complete the EC Proficiency Assessment Tool; and
- e. Achieve the requisite proficiencies commensurate to the ethics consultant’s assigned responsibilities.