



NOTHING CONTAINED IN THIS POLICY OR IN ANY OTHER POLICY CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL TEAM MEMBERS ARE EMPLOYED "AT WILL," WHICH MEANS THAT THE TEAM MEMBER HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT PRISMA HEALTH AND/OR ITS AFFILIATED ENTITIES RETAIN THE SAME RIGHT.

Ethics Committee

Approved Date: 07/31/2020	Effective Date: 07/31/2020	Review Date: 07/31/2021
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Scope:

Prisma Health-Midlands		Prisma Health-Upstate	
X	Prisma Health Baptist Hospital		Prisma Health Greenville Memorial Hospital
X	Prisma Health Baptist Parkridge Hospital		Prisma Health Greer Memorial Hospital
X	Prisma Health Richland Hospital		Prisma Health Hillcrest Hospital
X	Prisma Health Tuomey Hospital		Prisma Health Laurens County Hospital
X	Prisma Health Children’s Hospital-Midlands		Prisma Health Oconee Memorial Hospital
X	Prisma Health Heart Hospital		Prisma Health North Greenville Hospital
X	PH USC Medical Group		Prisma Health Patewood Hospital
X	Provider based facilities associated with Prisma Health-Midlands hospitals		Prisma Health Surgery Center - Spartanburg
			Prisma Health Marshall I. Pickens Hospital
			Prisma Health Children's Hospital-Upstate
			Prisma Health Roger C. Peace Hospital
			Prisma Health Baptist Easley Hospital
			University Medical Group UMG/PIH
			Provider based facilities associated with Prisma Health-Upstate hospitals

Policy Statement:

Prisma Health will provide clinical care that aligns with generally accepted ethical principles. Clinicians are encouraged to seek guidance for concerns related to ethical dilemmas through consultation with the appropriate Prisma Health venue.

Purpose:

The purpose of the Ethics Committee (Committee) shall be to promote healthcare practice that is consistent with accepted principles of ethics and to improve patient care by providing assistance in resolving ethical issues in the clinical setting.

Associated Policies and Procedures:

N/A

Associated Lippincott Procedures: (as applicable)

N/A

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

Definition:

1. Prisma Health Ethics venues:
 - 1.1 Clinical-Prisma Health Ethics Committee
 - 1.2. Business Ethics-Corporate Compliance
 - 1.3. Standards of Behavior-Prisma Health Human Resources
 - 1.4. Legal-Prisma Health Legal Counsel or Safety and Risk Management
2. Clinician: For the purposes of the Policy, a Clinician is a physician, advance practice provider, chaplain, social worker, nurse or other healthcare provider who has completed training to provide ethics consultations.
3. Ethics Consultation: A request from a member of a patient care team, patient or surrogate decision maker to identify and clarify aspects of the case that have resulted in uncertainty or conflict, in order to facilitate ethical decision-making. The goal is to help facilitate open discussion towards a resolution. The Committee does not make clinical decisions but assists in assessing, addressing and reviewing ethical issues.

Responsible Positions:

- Chief Clinical Officer (CCO)
- Chief Nursing Officer (CNO)
- Prisma Health Ethics Committee
- Prisma Health Team Members, Patient or Surrogate Decision Maker
- Prisma Health Patient Relations
- Bio-Ethicist (ex Officio)

Equipment Needed:

- Prisma Health computer with server access

Procedural Steps:

1. Committee activities are confidential and protected by Quality Review and Peer Review statutes. Prisma Health Ethics Committee (PHEC) is a multi-disciplinary team including physicians and other clinicians. The Ethics Committee is a multidisciplinary body that allows staff, physicians, patients, and their families/representatives a venue to address care, treatment and services that foster dignity, autonomy, respect and involvement in the patient's plan of care.
 - 1.1. Membership in the Ethics Committee (hereafter, Committee) shall include physicians, nurses and members of other health care disciplines from Prisma Health who have experience and/or interest in medical ethics and have completed ethics training as well as at least one member from the Prisma Health Patient and Family Advisory Council (PFAC) or other community member. The Co-chairs will be appointed by the Chief Clinical Officer and Chief Nurse Officer. The Committee may include the following:
 - 1.1.1 Co-Chair-Medical (Physician or Dental Provider)
 - 1.1.2 Co-Chair-Nursing
 - 1.1.3 Provider (Physician, Resident Physician, Nurse Practitioner, Physician Assistant)

- 1.1.4 Nursing – Must be clinical nurse if Co-Chair is not a Clinical Nurse
 - 1.1.5 Respiratory
 - 1.1.6 Chaplaincy
 - 1.1.7 Palliative Care
 - 1.1.8 Legal/Risk
 - 1.1.9 Patient Relations
 - 1.1.10 Rehab Services
 - 1.1.11 Pharmacy
 - 1.1.12 PFAC or Community Member
 - 1.1.13 Other disciplines as identified by committee
 - 1.1.14 Bio-Ethicist (ex-Officio)
- 1.2. The Committee will serve several functions:
- 1.2.1. Provide educational resources and provide a forum for health care team members to discuss concerns about general clinical ethics issues within the Prisma Health System.
 - 1.2.2. Review and discuss ethical and moral issues regarding patient care issues and provide consultation and recommendations when appropriate. Coordinate ethics consults for hospital staff, patients and/or surrogate decision makers when dealing with ethical questions related to hospitalization and treatment.
 - 1.2.3. Provide retrospective review and active case consultation
 - 1.2.4. In order to provide for consultation, the Committee will maintain an Ethics Consult Team with trained members representing diverse disciplines within the organization.
 - 1.2.5. Serve as an advisory committee for the formulation of policies and or guidelines dealing with ethical issues.
- 1.3. In order to provide for consultation, the Committee will maintain a small group of Ethics Consult Team members from within Committee membership, who are trained in the Qualified Facilitator Model as well as documentation in the Prisma Health electronic medical record.
- 1.3.1. As available, the Bio-Ethicist will serve as a consultant and advisor to the Ethics Consult Team.
2. The Committee will meet a minimum four (4) times per year.

- 2.1. Minutes will be provided to the Chief Clinical Officer, Chief Nursing Officer and Quality and Safety Committee as well as team members.
 - 2.1.1. Meetings will include review of performance improvement data related to team functions.
- ~~3.~~ Requests for consultations are handled on a case by case basis as consult committee member resources permit. Consultations may be obtained while a case is still active (in order to contribute to ongoing deliberation about the case), or may be retrospective (in order to bring an important, but already-resolved, case or issue to the attention of the Committee).
 - 3.1. General ethical concerns may be addressed to the committee by any Prisma Health Team Member or Provider.
 - 3.1.1. A summary of the ethical issue, principles involved and recommendations will be utilized for process improvement purposes.
 - 3.2. Active Case Consultation may be requested by health care workers, by patients or their surrogate decision makers.
 - 3.2.1. If someone other than the attending physician requests a consultation, the attending physician will be notified of the request. Upon request to the ethics consultant, the identity of the requesting party will remain confidential.
 - 3.2.2. Consultations for active cases will result in a written note in the medical record by a clinician who provided the consult.
 - 3.3. The goal of consultation is to identify and clarify aspects of the case that have resulted in uncertainty or conflict, in order to facilitate ethical decision-making. The goal is not to impose a solution.
 - 3.4. Depending on practical considerations (e.g., need for timeliness, availability of Committee members, etc.), consultations should include at least two (2) members of the Committee.
4. Data Management
 - 4.1. Data will be maintained and de-identified for reporting on number of consults, location, consulting discipline, type of issue and ethical principles identified.
 - 4.2. Data will be analyzed for trends quarterly and annually and recommendations made for system improvements such as, but not limited to, education.
5. While the Ethics Committee will remain available for collaboration, the following areas of concern will be referred as indicated for primary review:
 - 5.1 Business Ethics questions are referred to Corporate Compliance
 - 5.2 Standards of Behavior questions are referred to Human Resources
 - 5.3 Medical Staff concerns will be forwarded to Medical Staff Office.

References:

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Ethics. (n.d.). Retrieved August 20, 2018, from <https://www.dictionary.com/browse/ethics>

Nelson, W. A., PhD, & Gardent, P. B., CPA. (2018). Ethics and quality improvement: Quality care and ethical principles cannot be separated when considering quality improvement activities. *Healthcare Executive, July/Aug*, 40-41. Retrieved August 20, 2018, from http://www.ache.org/abt_ache/ethicstoolkit/JA08_Ethics_Nelson_Gardent.pdf

ASBH Core Competencies for Healthcare Ethics Consultation 2nd Edition

Appendixes:

N/A