



6th International Conference on Clinical Ethics Consultation

May 11-14, 2010 ♦ Portland Art Museum ♦ Portland, Oregon, USA
www.ethics2010.org



Abstract Submission Form – Panels

Please contact John Tuohey at ethics@providence.org with any questions.

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Primary contact: Mark Repenshek

Additional panelists, if any (up to three):

Name: Douglas Opel, MD, MPH

Title/Degree: Acting Assistant Professor, Division of Bioethics, Department of Pediatrics

Institution: University of Washington School of Medicine

Country: USA

Name: Kenneth A. Berkowitz, MD FCCP

Title/Degree: Chief, Ethics Consultation

Institution: VHA National Center for Ethics in Health Care

Country: USA

Name: _____

Title/Degree: _____

Institution: _____

Country: _____

Proposed Session Title: Understanding the Method Behind the Madness: An Exploration of Methodologies Designed to Improve the Quality of Clinical Ethics Consultation

Describe topic or case to be discussed up to 300 words:

In 2009, George J. Agich writes in a special section of the Cambridge Quarterly for Healthcare Ethics, "In a practice like ethics consultation, quality and accountability are intertwined. Concern for quality in ethics consultation...represents a central challenge for the field, namely how to structure a responsible

practice of ethics consultation." To address this challenge, three panelists from three different health care delivery models (faith-based community hospital, academic children's hospital and the Veterans Health Administration) will present three different methodologies that attempt to improve the quality of clinical ethics consultation. The panelists' content will provide the basis for a discussion on the benefits and opportunities to each.

Describe briefly each proposed panelist's position to be offered (up to 300 words):

Standardization as a quality tool for clinical ethics consultation:

Panel No.1 (Dr. Mark Repenshek) A review of two cohorts Cohort A: clinical consultation pre-establishment of ethics consultation guidelines, methodology, and education for three acute care hospitals (700 beds); Cohort B: clinical consultation post-establishment. A statistical comparison of these two cohorts was done to test the following hypotheses: (1) an increase in the integration of the clinical ethics program will bring consultation closer to admission; (2) as ethics consultation occurs closer to admission, consultation will be more advisory than conflict resolution; and (3) an integrated clinical ethics program creates opportunities for demonstrable organizational/clinical change in practice. Dr. Repenshek will discuss how the established standards for clinical ethics consultation improved the quality of an integrated ethics consultation service.

Use of Patient Safety Tools in Clinical Ethics Consultation to Improve Quality of Care:

Panel No. 2 (Dr. Douglas Opel) The framework used in patient safety and quality improvement in the clinical setting is a valid construct in which to consider ethics concerns. This framework not only utilizes quality tools already in place but it affords ethics concerns a level of evaluation that can promote awareness of the suboptimal system processes in the organizational setting that give rise to ethics concerns. Utilizing these techniques as part of a systems-based approach to ethics concerns may decrease the recurrence of future similar ethics concerns and subsequently improve the quality of patient care. To support use of this framework, data from a retrospective chart review of ethics consults performed over a 10 year period at an academic children's hospital will be presented to better understand which organizational issues contribute to ethics concerns. Dr. Opel will also discuss the development and trial of an assessment tool for use by ethics consultants that is meant to help identify and address contributory organizational issues to ethics concerns.

The implications of the normatization of standards of practice in clinical consultation:

Panel No. 3 (Dr. Berkowitz) The Integrated Ethics initiative in VHA establishes wide-ranging standards for ethics consultation and provides a comprehensive set of programmatic tools (e.g., communication tools, managerial tools, Web courses, intensive workshops, interactive videos, sophisticated data tracking system, assessment tools for consultant proficiency, participant satisfaction, and ethics consultation processes) and organizational supports (e.g., mandated staff roles, policy, oversight, performance measures, teleconference calls, listservs, tertiary referral services). Dr. Berkowitz will discuss the organizational implications of requiring uniform national standards for ethics consultation quality. He will summarize VHA's quality standards for ethics consultation, demonstrating several programmatic tools.

Are you planning to or will you be willing to submit a poster along with your panel?

Yes No