POLICY:
The mission of the Ethics Committee is to provide resources to UPMC Passavant customers to support informed decision-making and resolution of ethical dilemmas while in compliance with federal, state and regulatory standards.

PURPOSE/OBJECTIVES:
- To maintain mechanisms to address ethical issues;
- To provide a forum for the discussion of ethical issues;
- To respond to formal/informal consultation upon request;
- To conduct concurrent/retrospective case review(s);
- To implement, revise and follow through on policies and procedures related to defining and protecting customer rights;
- To maximize opportunities for education on ethics.

COMMITTEE ORGANIZATION:
A. The role of the Committee shall be to act as an advisory body without authority to make decisions regarding patient care.
B. The President of the Medical Staff will appoint the Medical Director/Advisor of the Ethics Committee. Senior management will appoint the Administrative Chairperson.
C. The seats on the Ethics Committee shall be apportioned in a manner that creates adequate representation of physicians, nurses, administrators, access to legal services, appropriate allied health professionals, clergy and community representatives.
D. A person may be removed from the Ethics Committee following request by that individual or may be removed by Committee consensus for non-attendance, including educational requirements.
E. The Ethics Committee meets Bi monthly. At the discretion of the Committee, special meetings may be called. Only members of the Ethics Committee and invited guests may attend these sessions.
F. The Chair of the Ethics Committee will report recommendations and actions of the committee to the Quality Patient Care Committee bi annually.

ATTACHMENT(s):
Procedural Guidelines for Ethics Committee
Patient Rights and Organizational Ethics Functions

POLICY AVAILABILITY
The official UPMC Passavant Policy Manual is available via the intranet via the UPMC Passavant eNet Data Portal at http://psvnt-ws1/appreportcentral/ under policies.

EVIDENCE BASED REFERENCE
Steward: VP, Ancillary Services
Orig. Date: 06/95
Reviewed: 11/99, 08/00, 12/00, 8/12, 8/16
Revised: 01/98, 02/01, 03/04, 5/06, 6/07, 09/09, 5/11, 8/13, 4/14, 7/15
PROCEDURAL GUIDELINES FOR ETHICS CONSULTATIONS

Any patient, patient substitute decision maker, member of a patient’s family, physician or member of the UPMC staff involved in the care of a patient may request an ethics consult.

1. Identify ethical issue or concern.

2. Enter an Ethics Consult into the eRecord or notify an Administrative Chairperson or Administrator on Duty at extension 3180.

3. Upon receipt of request:
   a. Administrative Chairperson or member designee initiates consult/case review.
   b. A team of two or three persons will serve as an “Ethics Review Team” (ERT) before finalizing the consult.
   c. The medical chairperson will be notified via email of the initiation of consultation by the ERT

4. Ethics Review Team
   a. Gathers information from appropriate resources.
   b. Complete appropriate documentation. (If patient care related, progress notes in the medical record will be utilized) and email a summary of findings to the Administrative Coordinator of the Nursing Administration Department.
   c. Determine and communicate recommendations/advisory to those directly involved.
   d. If the ERT develops recommendations regarding patient plan of care, the ERT will notify the attending physician.
   e. All members of the Ethics Review Team are accountable to the Medical Leadership Committee

5. Nursing Department maintains confidential file for future reference and submits all information to Ethics Committee agenda.

6. Administrative Chairperson/Committee will track and trendConsults.
PATIENT RIGHTS AND ORGANIZATIONAL ETHICS FUNCTIONS

Patient Rights

Access
-- Access to Care
-- Psychosocial
-- Cultural
-- Spiritual
-- Advance Directive
-- Active Participation
-- Conflict Resolution
-- Care at end of Life

Treatment
-- Confidentiality
-- Spatial
-- Property
-- Response to legitimate complaints
-- Communication
-- HIPAA

Respect
-- Disclose ownership of referred services
-- Contracts

Conduct and Conflict
-- Marketing
-- Admission
-- Transfer
-- Discharge
-- Billing practices
-- Providers
-- Payers
-- Educational Institutions

Code of Ethics
-- Procurement
-- Donations

Organs
-- Address medication trials and existence of IRB when appropriate

Research

Managing Staff Requests
-- Establishment of policies and mechanisms to address any request by a staff member not to participate in an aspect of patient care