

## CECA MEETING MINUTES

January 17, 2013

**Members present:** Armand Antommara, Jeffrey Berger, Art Derse, Ann Hesters, Kathy Powderly, Terry Rosell, Marty Smith, Wayne Shelton, Jeffrey Spike, Lucia Wocial, Bob Baker (guest), Joe Carrese, Brian Childs, Kayhan Parsi, Anita Tarzian (chair)

**Members absent:** Ken Berkowitz, Nneka Mokwunye, Jack Gallagher, Martha Jurchak, Tia Powell, Paula Goodman-Crews, Christine Mitchell

The meeting was called to order at 11:00 AM Eastern.

### CODE OF ETHICS

We discussed the interpretive paragraphs for the Code responsibility of “Promote Integrity,” and clarified how this relates to the Code responsibilities of “Avoid or manage conflicts of obligation” and “Avoid or manage conflicts of interest.” We agreed to change the term “promote” to “preserve.” We discussed whether to add an adjective that would capture the obligation of ethics consultants to continue to cultivate integrity (“preserve” might imply that HCE consultants come into the profession with integrity and keep what they have). We agreed to clarify this in the interpretive paragraphs, along with other elements in the interpretive paragraphs, such as how to handle conflicts between one’s personal and professional integrity as this relates to HCEC. We agreed to change the Code statement and interpretive paragraphs as follows.

### REVISED VERSION:

**Preserve integrity.** HCE consultants should consistently act with integrity in the performance of their HCEC role.

HCE consultants should strive to be worthy of the trust placed in them by patients, staff and the institutions who seek their help in addressing ethical questions and problems. Integrity involves acting in a manner that is consistent with one’s core beliefs and values. Integrity in an HCE consultant involves commitment to the core values underlying HCEC. This requires an ongoing commitment to cultivating habits of excellence, such as self-awareness and open-mindedness.

HCE consultants should strive to safeguard the process of moral deliberation in the institutions where they provide ethics consultation. They should foster learning and model collegiality in the ethically complex, emotionally tense, high-stakes situations they often face. Integrity dictates that HCE consultants elicit and respect the various perspectives of involved parties. HCE consultants should preserve professional integrity by not engaging in activities that compromise their ability to fulfill the obligations of their role. For example, they should not accept employment conditions that involve giving an ethical justification or “stamp of approval” to unethical practices. In a given HCEC if there is a conflict between the HCE consultant’s personal core beliefs or values and the core beliefs or values of the profession, the HCE consultant should resolve the conflict in such a way that they maintain their personal and professional integrity. This may require recusal from the HCEC. HCE consultants operate in the context of

organizations with multiple obligations and interests that might create potential conflicts of interest or obligation. (*See Code Responsibilities #[COI, COO]*).

HCE consultants promote integrity when they provide transparent services and subject their work to peer review and quality improvement.

**FROM:**

Promote integrity. HCE consultants should demonstrate integrity in the performance of their HCEC role.

Ethics consultants should strive to be worthy of the trust placed in them by patients, staff and the institutions who seek their help in addressing ethical questions and problems. Integrity, in this context, implies trustworthiness and the presence of such virtues as honesty, justice, and self-awareness. HCE consultants should preserve professional integrity by not engaging in activities that compromise their ability to fulfill the obligations of their role. For example, they should not accept employment conditions that involve giving an ethical justification or “stamp of approval” to unethical practices. They should strive to safeguard the process of moral deliberation in the institutions where they provide ethics consultation, fostering learning and modeling collegiality in the ethically complex, emotionally tense, high-stakes situations they often face. Integrity dictates that HCE consultants elicit and respect the various perspectives of involved parties.

HCE consultants promote integrity when they provide transparent services and subject their work to peer review and quality improvement.

**CECA CHARTER & NOMINATIONS**

We discussed revisions to the original CECA charter, agreeing to describe the purpose of CECA as follows: “To develop resources that support the work of health care ethics consultants, particularly those who provide ethics consultation in clinical settings, and to advise the Board on issues related to health care ethics consultation.” Anita will revise the charter and circulate for comment before sending to the Board.

CECA members were reminded that six members will need to rotate off of the committee after the October, 2013 meeting. The ASBH Nominations committee will choose incoming members to serve for 2014-15. Anita will check with the ASBH Board regarding provisions for an in-person meeting in October, 2013, to see if incoming and outgoing members can attend.

The meeting adjourned at 12:20 pm. The next meeting is on Thursday, February 21, 2013, 10:30 a.m. to 12:00 noon, Eastern.