

**CECA MEETING MINUTES**  
**ASBH Annual Meeting**  
**Atlanta, GA**  
**October 27, 2013**

**Members present:** Lisa Anderson-Shaw, Armand Antommara, Courtney Bruce, Joe Carrese, Felicia Cohn (Board liaison), Sally Bean, Ken Berkowitz (by phone), Art Derse, Brian Childs, Stuart Finder, Joe Fins (guest), Martha Jurchak, Aviva Katz, Hannah Lipman, Kayhan Parsi,\* Kathy Powderly, Terry Rosell, David Malcolm Shaner, Jeffrey Spike, Marty Smith,\* Anita Tarzian (immediate-past chair), Stuart Sprague, Lucia Wocial (chair), Wayne Shelton

*\*Rotating off CECA*

**Members absent:** Ann Heesters

The meeting was called to order at 1:30PM. Minutes from the September meeting were accepted (by 2013 CECA members via email).

**Topic: CODE OF ETHICS**

The ASBH Board of Directors approved the Code however requested CECA respond to two concerns:

1. ASBH as the sponsoring professional organization should somehow be identified in the title of the Code.
2. Within the code, please clarify the difference between CEC and HCEC, specifically does the code apply to the more narrow CEC or HCEC?

**Discussion:**

1. Members present acknowledged the importance of identifying ASBH (even though the Code applies to non-ASBH members, who also provided feedback).

**Outcome**

1. To avoid redundancy when citing the code and to be consistent with how other professional codes are cited, instead of adding ASBH to the actual title, it will be listed below the code title, as follows Title centered in bold, ASBH name spelled out centered below the title, in bold but slightly smaller font size:

**Code of Ethics and Professional Responsibilities for Health Care Ethics  
Consultants**

**American Society for Bioethics and Humanities**

**Discussion**

2. CECA provided the following definitions to the ASBH board in 2010:

**Clinical ethics consultation (CEC).** A set of services provided by an individual or a group in response to questions from patients, families, surrogates, health care professionals, or other involved parties who seek to resolve uncertainty or conflict

regarding value-laden concerns that emerge in patient care.

**Health care ethics consultation (HCEC).** A set of services provided by an individual or a group in response to questions from patients, families, surrogates, health care professionals, or other involved parties who seek to resolve uncertainty or conflict regarding value-laden concerns that emerge in health care (ASBH, in press). Health care ethics consultation by definition includes clinical ethics consultation, but may address other ethical questions or concerns (e.g., related to organizational ethics, business ethics, professional ethics, etc.).

The two definitions are the same save one word (highlighted in red). The Core Competencies document refers to HCEC “and encompasses the range of ethics consultation services that individuals in health care settings provide, but focuses specifically on CEC (patient focused). The Code of Ethics applies to health care ethics (HCE) consultants, but focuses on CEC activities. The Quality Attestation process recognizes that HCE consultants do more than CEC but, like the *Core Competencies*, focuses on CEC.

### **Outcome**

Members agreed to add language to the Code Preface to clarify this point. The proposed change to the preface is as follows (changes from original are in red):

**These statements set** out the core ethical responsibilities of individuals performing health care ethics consultation (HCEC). **The content largely but not exclusively addresses activities that are patient focused, often referred to as clinical ethics consultation.** The code does not explicitly address the ethical obligations for the range of additional **(non-consultative)** ethics services that health care ethics (HCE) consultants may provide for an organization.

The details of the language will be reviewed by CECA at the November 2013 meeting.

CECA members recommended that once final approval is given to the Code of Ethics, the ASBH Board also approve the creation of an aesthetically favorable document (PDF?) to be posted on the ASBH website.

### **TOPIC: ASBH, ABPD, QATPF, & CECA**

#### **Discussion**

We discussed the relationship between ASBH and the Association of Bioethics Program Directors (ABPD) as it relates to accreditation of bioethics programs through ABPD, and quality attestation of HCE consultants through the working group (Quality Attestation Task Force QATF) led by Joe Fins and Eric Kodish. This work, described in the September-October 2013 issue of the *Hastings Center Report* initially funded by the Macy Foundation is now funded by The Greenwall Foundation.

There is ongoing membership overlap between the work of CECA and QATF. Anita Tarzian and Art Derse will serve as liaisons to CECA from that QATF. Likewise there is membership overlap between CECA and ABPD. Wayne Shelton, Courtney Bruce, Jeffrey Spke, and Kathy Powderly agreed to serve as CECA liaisons from ABPD.

**Outcome:**

CECA meetings will include regular updates from these two groups so that we can support and maintain transparency between these efforts particularly as progress is made toward evaluation of individuals and programs that train individuals to be HCE consultants.

**TOPIC: CECA'S CHARGE**

**Discussion:**

1. Standing committees have a charge from the ASBH Board. The CECA Charge is posted on the ASBH website. Beyond our charge, CECA must identify activities that further efforts toward achieving the charge of the committee. Prior to the meeting a draft charter was circulated for input.
2. Prior to the meeting CECA members were asked to rank order their ideas and preferences for activities of the group going forward. We discussed priority ranking of topics for CEC's 2014 focus in the survey (see attached). Members supported a focus on activities related to promoting dissemination of the code to promote professional practice consistent with the Code,

**Outcome:**

1. The draft document updating the committee charge was not reviewed at the CECA meeting. The document will be circulated with the charter posted on the ASBH webpage. CECA members will be asked for input on the charter, to be submitted for review and approval to the ASBH Board.
2. Many ideas were discussed however no final decisions were made. Members were asked to consider the opportunities and identify where they feel they could contribute most to the successful completion of an idea.

Idea	Outcome
Develop web based modules	Need to specify content and scope, consider limited resources available to ASBH
Promote/develop pre-conference workshops at basic and advanced levels	Need to follow up with the Program Planning Committee to address inclusion of clinical ethics sessions/pre-conference workshop(s) at the annual meeting that are consistent with endorsed standards (e.g., <i>Core Competencies</i> , <i>Education Guide</i> , <i>Code of Ethics</i> ).
Dissemination of ASBH materials to individuals doing	1. Building products (e.g., press releases, online content, power point for education; specifically

ethics consultation who are not necessarily ASBH members	<p>one that uses cases to illustrate application of the code of ethics)</p> <ol style="list-style-type: none"> <li>2. Reaching out to increase awareness (e.g., networking with individuals and other organizations e.g. American Hospital Association, Joint Commission, regional hospital associations, ethics networks, ANCC Magnet, etc.). Many accrediting/certifying bodies have standards related to ethics.</li> <li>3. Perhaps submit a CECA authored target article about the Code to AJOB seeking commentary</li> <li>4. ASBH web based opportunity for comment and/or follow up on Code of Ethics from members and non-members</li> </ol>
Explore the concept of accrediting ethics consultation at the <i>service</i> level (i.e., is an ethics consultation service within a healthcare facility conforming to standards in the field?	No opportunity to discuss the idea. This idea bridges the two current activities, namely certification/attestation of individuals who do and accreditation of programs who train individuals to do ethics consultation.
Economic analysis showing the value of having an ethics consultation service program.	No opportunity to discuss this idea

CECA must submit a proposal to the Board before embarking on any of the above projects for 2014.

#### **TOPIC: CECA Membership and Leadership**

CECA needs to clean up some discrepancies between original charter and ASBH Standing Committee Policy

ASBH Standing Committee	CECA Charter (2009)	What is happening now
Membership 3 years	Membership 18 months	3 years
Chair – 2 years		2 years
Vice Chair – 2 years		None identified

#### **NEW BUSINESS**

No new business was discussed.

#### **ADJOURNMENT**

The meeting adjourned at 3:00 PM.

**The next meeting will be held via teleconference on Thursday, November 21, 2013, 11A-12N Eastern Standard Time.**