

CECA MEETING MINUTES

February 21, 2013

Members present: Armand Antommaria, Ken Berkowitz, Art Derse, Ann Hesters, Martha Jurchak, Nneka Mokuwunye, Terry Rosell, Marty Smith, Lucia Wocial, Brian Childs, Kayhan Parsi, Anita Tarzian (chair)

Members absent: Jeffrey Berger, Joe Carrese, Jack Gallagher, Kathy Powderly, Wayne Shelton, Jeffrey Spike, Tia Powell, Paula Goodman-Crews, Christine Mitchell

The meeting was called to order at 10:30 AM Eastern.

CODE OF ETHICS

We discussed the interpretive paragraphs for the Code responsibility of “Promote just health care within HCEC.” Martha and Kayhan discussed Code survey comments pointing to this code element being more narrowly focused on justice within HCEC (i.e., rather than obligating consultants to address broader health care justice issues, such as ensuring that undocumented immigrants or uninsured have access to health care). Martha pointed out relevant language in the *Core Competencies* to support this Code element, under “Evaluative and quality improvement skills” (e.g., the ability to “recognize and analyze possible structural or systemic barriers to effective consultation process in specific cases” and “recognize and analyze possible structural or systemic obstacles to excellent care that may have contributed to the need for the consultation”). We agreed that the Code should not obligate consultants to actively follow up on broader injustices in health care. For example, while some consultants, as involved citizens, might advocate for keeping local homeless shelters open after recognizing the ethical issue of lack of discharge options for hospitalized homeless persons, the Code should not obligate this level of involvement of all consultants; rather, consultants should identify systemic issues that contribute to HCEC requests and refer these issues to appropriate individuals or groups who can address them. We agreed to change the Code statement and interpretive paragraphs as follows:

PRIOR VERSION:

Promote just health care within HCEC. HCE consultants should work with other health care professionals to reduce disparities, discrimination and inequities when providing HCE consultation.

The well-documented phenomenon of disparities in health care arises from unequal access and distribution of health care services. When doing HCE consultation, the ethics consultant needs to be attuned to the role these issues play in access to ethics consultation, missing critical stakeholder voices, and insufficiently examined conclusions or recommendations of the consultation that may reinforce inequities. Issues of power, majority, and dominant culture (e.g. institutional culture that may subtly preference some voices or perspectives over others) may make both the process and outcome in ethics consultations more challenging to promote just and equitable recommendations and outcomes.

NEW VERSION:

Promote just health care within HCEC. HCE consultants should work with other health care professionals to reduce disparities, discrimination and inequities when providing HCE consultation.

Disparities, discrimination and inequities in health care are well-documented . When doing HCE consultation, the ethics consultant needs to be attentive to the role these issues may play in the course of HCEC. Consultants should ensure that all stakeholders have access to the HCEC process, and that the process is fair. Issues of power, majority, and dominant culture (e.g. institutional culture that may subtly preference some voices or perspectives over others) may make both the process and outcome in ethics consultations more challenging to promote just and equitable recommendations and outcomes. Consultants should strive to include marginalized voices in the discourse. Conclusions or recommendations of the consultation should not reinforce injustice. Consultants should identify systemic issues constraining fair outcomes in HCEC and bring these issues to the attention of individuals or groups in a position to address them.

The meeting adjourned at 11:30 PM. The next meeting is on **Thursday, March 28**, 2013, 11:00 a.m. to 12:30 PM, Eastern.