

Adult and Pediatric Ethics Committee Bylaws

University of Michigan Health System

Effective as of: April 18, 2017

CHARGE: The University of Michigan Health System (UMHS) Adult and Pediatric Ethics Committees are sub-committees of the Executive Committee on Clinical Affairs as determined by the *Medical Staff Rules and Regulations*. The goals of the Adult and Pediatric Ethics Committees for the UMHS community are threefold:

- (1) Formulate, review, and/or comment upon institutional policies regarding ethical aspects of clinical care;
- (2) Support and provide clinical ethics education and training; and
- (3) Provide oversight and review of Clinical Ethics Consultation.

1) DEFINITIONS

- a) **Adult Ethics Committee:** Ethics Committee serving cases related to the adult patient population of UMHS
- b) **Committee Member:** a member of the Adult or Pediatric Ethics Committees or both who has been appointed via the Committee Member appointment process (*see* §2(d))
- c) **Committee Member Approval:** approval of a majority of a quorum of members present at an Ethics Committee Meeting
- d) **Committee Member Executive Action:** approval of 2/3 of the respective Ethics Committee
- e) **Community Representative:** a representative not currently employed by or under contract with Michigan Medicine and representative of a population group served by UMHS
- f) **Ethics Committee Meeting:** monthly meeting of the Ethics Committees to which the Full Ethics Committee is invited, or an Executive Session called on an ad-hoc basis
- g) **Full Ethics Committee:** every member appearing on the official roster of the Adult or Pediatric Ethics Committee
- h) **Pediatric Ethics Committee:** Ethics Committee serving cases related to the pediatric patient population of UMHS (which may sometimes include patients 18 years or older being cared for by a pediatric provider)
- i) **Quorum:** 50% or more of the total membership of either the Pediatric or Adult Ethics Committees present at a convened meeting

2) COMPOSITION

a) Leadership

- i) There is a separate Chair and Vice-Chair position for both the Adult and Pediatric Ethics Committees (although those roles might be held by overlapping personnel)
- ii) The Chair and Vice Chair of the Adult and Pediatric Ethics Committees should be appointed in a staggered manner if possible
- iii) The Chair is appointed by the Chief of Staff
- iv) The Vice Chair is appointed by the Chair with the majority of Committee Member approval

b) General Membership

- i) Both the Adult and Pediatric Ethics Committees must include, or leadership must be actively pursuing representation from, at least one member of the following communities:
 - (1) Administration;
 - (2) Clinical Program Trainee(s);
 - (3) Community Representative;
 - (4) Major relevant medical specialties and subspecialties;
 - (5) Nursing;
 - (6) Spiritual Care;
 - (7) Social Work;
 - (8) Compliance;
 - (9) Program in Clinical Ethics Leadership;
 - (10) Patient Relations and Clinical Risk;
 - (11) Office of the General Counsel; and
 - (12) Institutional Review Board/Clinical Research
- ii) Prospective Members must agree to adhere to these *Adult and Pediatric Ethics Committee Bylaws* as a condition of Adult or Pediatric Ethics Committees membership
- iii) The Adult and Pediatric Ethics Committees both embrace the UM Diversity, Equity, and Inclusion Strategic Plan and are committed to welcoming and recruiting diverse membership in committee membership and leadership

c) Ad Hoc Participation

- i) Other UMHS faculty/staff with familiarity with or expertise in ethical, legal, medical, or social issues may be asked to consult or serve with the Adult and Pediatric Ethics Committees on an ad-hoc basis.
- ii) Medical students may also participate in Adult and Pediatric Ethics Committee Meetings and attend Clinical Ethics Consultations

d) Committee Member Appointment Process

- i) Application process
 - (1) Candidates for Adult or Pediatric Ethics Committee Membership must interview with the Chair or Vice Chair of the Adult or Pediatric Ethics Committee
 - (2) With Chair approval, Candidates for Committee Membership must provide the Ethics Committee with the following:
 - (a) Letter of Interest; and
 - (b) CV or resume
 - (3) Candidates for Committee Membership may only become Committee Members with Committee Member Approval
 - (a) Candidates for Committee Membership must not be present for the Committee Member Approval process as defined by (1)(c)

e) Member Responsibilities

- i) Attendance
 - (1) Committee Members are expected to attend for the full 90-minute time period of 75% of the monthly meetings (i.e., 9 monthly meetings per year per Committee)
 - (a) Committee Members who do not meet the attendance expectation within the previous 12 months of review may have their membership re-evaluated by the Chair or Vice-Chair
- ii) Voting (e.g., for Committee Member Approval)
 - (1) Each Committee Member, including the Chair and Vice Chair, will have one vote
 - (2) Ad hoc participants may be part of a discussion, but do not have a vote on matters before the Adult or Pediatric Ethics Committee
- iii) Competencies: Committee Members will be expected to develop those competencies basic to healthcare ethics including familiarity with:
 - (1) UMHS core values;
 - (2) Basic clinical ethics approaches, principles, and case studies;

(3) The law related to clinical ethics such as informed consent, foregoing treatment, advance directives, and surrogate decision-making for minors; and

(4) Relevant in-house policies, procedures, and protocols

iv) Education

(1) New Adult or Pediatric Ethics Committee Members will review the *New Member Orientation Packet* which will contain a copy of these *Adult and Pediatric Ethics Committee Bylaws*

(2) Committee Members must maintain their clinical ethics-related education

(a) Meeting this standard may include attending and/or presenting at:

(i) Bioethics Grand Rounds;

(ii) Semi-annual "Ethics Bootcamp;" and

(iii) Other ethics-related events or lectures as appropriate

f) Terms of Office

i) Chair and Vice Chair

(1) The appointment of the Chair and Vice Chair will be re-assessed every four years, ideally in the staggered fashion in which they were appointed

(2) It is the expectation that the Chair and Vice Chair will continue as an Adult or Pediatric Ethics Committee Member for at least one year after completion of their term

ii) Committee Members

(1) Committee Members serve a five-year term

(2) Committee Members must receive Chair or Vice-Chair approval every five years to continue their service

g) Removal

i) The Ethics Committee Chair may be removed:

(1) By action of the Chief of Staff

(2) By action of ECCA

ii) The Ethics Committee Vice Chair may be removed:

(1) By action of the Ethics Committee Chair

iii) Adult or Pediatric Ethics Committee Members may be removed by the Chair on the basis of:

(1) Negligent disregard for or violation of these Adult and Pediatric Ethics Committee Bylaws

(2) Termination of employment, appointment, or affiliation with Michigan Medicine

(3) Violation of other expectations or codes of conduct of Michigan Medicine or the Adult or Pediatric Ethics Committee

3) DUTIES

a) Policy

- i) A main focus of the Adult and Pediatric Ethics Committees will be to formulate, review, and comment upon policies on the ethical aspects of clinical care at UMHS
- ii) This policy work may include (but is not limited to):
 - (1) Proposing and drafting new policies at the institutional level to ensure the equitable application of ethical care at UMHS
 - (2) Membership on other UMHS committees where policy work overlaps with the duties of the Adult or Pediatric Ethics Committees
 - (3) Feedback and comment on policies spearheaded by other colleagues that would benefit from Adult or Pediatric Ethics Committee input

b) Education

- i) Adult or Pediatric Ethics Committee Members will provide clinical ethics education and training to the UMHS community

c) Clinical Ethics Consultation Services

- i) The Adult and Pediatric Ethics Committees shall provide oversight and review of the Clinical Ethics Consultation services as provided by the Program in Clinical Ethics under the Center for Bioethics & Social Sciences in Medicine (see Appendix)
- ii) This oversight and review service will be provided through a HIPAA-compliant online platform as well as in person during monthly meetings

d) Privacy

- i) All proceedings, comments, and documentation of the Adult and Pediatric Ethics Committees (including Clinical Ethics Consultations) are for quality improvement purposes and are confidential in accordance with relevant law and UMHS policy
- ii) Identifying information about any party involved in a Clinical Ethics Consult (including family, friends, and members of the care team) must not be divulged outside of Clinical Ethics Consultations or Adult or Pediatric Ethics Committee meetings without specific discussion with and authorization from the Chair or his/her designee and within appropriate confines of Michigan Medicine policy and federal and state law (e.g., HIPAA)

- iii) The discussion content of the Adult or Pediatric Ethics Committee Meetings is confidential and must not be divulged outside of Committee Membership without specific discussion with and authorization from the Chair or his/her designee and within appropriate confines of Michigan Medicine policy and federal and state law (e.g., HIPAA)
- iv) All ad hoc participants must sign the Ethics Committee's *Observer Confidentiality Agreement*
- v) Community Members may only be appointed after clearance through volunteer services and relevant training requirements (e.g., HIPAA training)

4) MEETINGS AND RECORDS

- a) Adult and Pediatric Ethics Committee Meetings will generally occur on a monthly basis
- b) Executive Sessions may be called (under *Medical Staff Rules & Regulations, Section 3*) when urgent matters arise
- c) The Ethics Committee Administrative Assistant will keep agendas and meeting minutes for all convened meetings in M+Box or another similarly secure platform
 - i) These documents shall be submitted to Office of Clinical Affairs (OCA) and the Executive Committee on Clinical Affairs (ECCA)
 - ii) These documents for the Pediatric Ethics Committee shall also be submitted as requested reports to the C.S. Mott Children's Hospital and Von Voigtlander Women's Hospital Executive Committee (MCHVWVWHEC)
- d) Annual Report
 - i) The Adult and Pediatric Ethics Committees will generate an *Annual Report* which shall be submitted to OCA and ECCA
 - ii) The presentation of such *Annual Report* to ECCA will be at the discretion of the Committee Chair

5) AMENDMENT PROCEDURES FOR BYLAWS

- a) These Adult and Pediatric Ethics Committee Bylaws may be amended by the Adult and Pediatric Committee Chairs in conjunction with a Bylaws Committee made up of volunteer members from the Adult and Pediatric Ethics Committees
 - i) A draft version of the bylaws, as amended, will be circulated to the full Adult and Pediatric Ethics Committees for review and input before being made effective
- b) These Adult and Pediatric Ethics Committee Bylaws should be reviewed, potentially amended, and reaffirmed at least every 5 years

APPENDIX

Clinical Ethics Consultation Operating Procedure

- 1) The Program in Clinical Ethics (the “Program”), under the Center for Bioethics & Social Sciences in Medicine, provides 24/7/365 on-call Clinical Ethics Consultation Services for UMHS under the oversight and review of the UMHS Ethics Committees
- 2) Referral
 - a) Monday – Friday from 8 am – 5 pm, Clinical Ethics Consultation may be requested by calling 734-615-1379
 - b) During non-business hours, Clinical Ethics Consultation may be requested by calling 936-6267 and asking for the Ethics individual on call to be paged
 - c) The Program shall decline a referral that does not fall within its scope
 - d) Limitations
 - i) The Program offers ethical advice only:
 - (1) Medical decisions are made by the medical teams caring for the patient in collaboration with patients, families and/or stakeholders
 - (2) On-call Clinical Ethics Consultants do not provide legal advice; legal questions should be directed to the UM Office of General Counsel
- 3) Staffing
 - a) Management
 - i) The Clinical Ethics Consultation Service is supervised and managed by the Co-directors of the Program in Clinical Ethics working in conjunction with the Chairs and Vice-Chairs of the Adult and Pediatric Ethics Committees
 - b) Clinician Ethicist
 - i) The main Clinician Ethicist will have a terminal degree in his/her field, and have completed advanced training in clinical ethics and clinical ethics consultation
 - ii) Duties
 - (1) Serve as the “first responder” and contact person for all ethics consults during business hours, ensure continuity with consults, and work in conjunction with the on-call clinical consult team
 - (2) Regularly review relevant institutional policies and attend for the full 90-minute time period of 75% of the monthly meetings (i.e., 9 monthly meetings per year per Committee)
 - (3) Organize and participate in educational efforts and preventative ethics rounds

- (4) Ensure consistent service, teaching, and care delivery in all related arenas
 - c) Faculty Ethicists
 - i) Faculty Ethicists must meet the following requirements:
 - (1) Be UMHS faculty from diverse departments
 - (2) Be members of both Ethics Committees
 - (3) Satisfy the ASBH requirements for accreditation for clinical ethics consultants
 - ii) Duties
 - (1) Faculty Ethicists will work with the Clinician Ethicist in staffing ethics consultations arising from any of the clinical venues within UMHS
 - (2) Faculty Ethicists will also supervise and participate in institutional educational endeavors and preventative ethics rounds during their time on service
 - d) Volunteer Ethicist
 - i) The Clinician or Faculty Ethicist on-call may invite Committee Members or medical student/trainees who volunteered to be on-call to participate in the Clinical Ethics Consult
- 4) Consult Data Review
- a) When a call is received the Clinical or Faculty Ethicist will do a verbal intake and review of the case and identify any ethical questions
 - i) If the case does not require a full consult, at the discretion of the Ethicist who does the intake, the consult may be triaged as an “intake call” and recorded in the committee’s records
 - b) The Clinical/Faculty Ethicist may invite Committee Members or medical student who also volunteered to be on-call for Clinical Ethics Consultation to join the consult team
 - c) The consultation process should include a review of the medical record, talking to staff, the family, and/or the person requesting the consultation
 - i) In-person discussion should be held unless time or schedules prohibit
 - d) The consult team may recommend consultation by appropriate specialists to evaluate the status of the patient and/or facts of the case
 - e) Notification
 - i) In all cases, the attending physician shall be notified of the consult
 - ii) In cases involving an ethics issue related to a research protocol, the IRB Chair on call shall be notified of the consult

5) Special Cases

- a) The Clinical/Faculty Ethicist will discuss the case with the Chair or Vice Chair if the ethical issue is particularly novel, controversial, publicity-worthy, etc.
- b) When extraordinary issues arise, an Executive Session (*see* Adult and Pediatric Ethics Committee Bylaws § 4(b)) may be called
 - i) Such a meeting will take place within 48 hours

6) Review and Comment Period

- a) The consult team will place a draft note in M+Box, or other similarly secure platform, within 24 hours of initial consult request to permit full Ethics Committee comment
 - i) Ethics Committee Members should comment on the consult within 24 hours of the posting
- b) The consult team will then upload the final note to the patient record within 72 hours of the initial request.

7) Follow-up of Case Consult

- a) A member of the consultation team will discuss the Clinical Ethics Consultation recommendations with the person who called the Clinical Ethics Consultation and patient, family, and/or treatment team as appropriate
- b) Copies of the consult note and intake forms will be kept on file in the HIPAA-compliant M+Box, or other similar secure platform
- c) As time permits, notable consults will be discussed at the monthly Ethics Committee Meeting for education and quality assurance