**Date:** 1/7/20

**Location:** RAOM – Founders Room

**Time:**  6 PM

**Attendees:** Rich, Margie, Heidi, Beth, Erin, Jack, Marc, Sid, Laura

**Agenda**

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| Time | Topic | Facilitator |
| 6:00 PM:  | Welcome/Introductions | Margie |
| 6:05 PM:  | **Review the recent changes in the Health care decisions for adult patients without surrogates law** | Beth |
| 6:25 PM: | Case Discussions Relevant to New Law | All |
| 7:15 PM: | Time permitting: 2020 Goals (Hold) | All |
| 7:30 PM: | Close | Margie |

**Item: Welcome/Introductions**

**Discussion/Decision/Action Items? None.**

**Item: Hot Topic – ad hoc agenda item – confidential.**

**Discussion:**

Given the timeliness of a recent issue, the group spent the beginning of the meeting discussing aspects of a current case (generalities only) that involved organ donation prior to the start of an incarceration. Discussion on the Federal Law regarding “valuable consideration’ was had and the group spent time discussing, at a high level, the ethical aspects of a case such as this and whether this is fair or not or how one would best to handle a situation like this.

**Decision:** None.

**Action item:** None other than to reflect on the fact that this consortium can serve as a place for information and discussion when complex issues arise in the course of everyone’s work 😊.

**Item: Review the recent changes in the Health care decisions for adult patients without surrogates law.**

**Discussion:**

Beth led off discussing the law and the recent changes that have been made (see the materials posted on the web-site): Synopsis of law: “Provides that decisions about routine care for patients without a surrogate decision maker do not require prior review by an Ethics Review Committee and are governed by the provisions in the Family Health Care Decisions Act. This new law (Chapter 622) takes effect immediately.”

In an email prior to the meeting, Heidi shared: “...the amendment addresses a gap in the law that was created a few years ago - after the FHCDA was amended to include hospices and hospice patients.  It was not the intent of the “hospice amendment” to require ERC review of routine care decisions for hospice patients.  So, this amendment clarifies that routine decisions can be made by providers for patients without designated surrogates.”

The group did not seem to think this was a significant change or ‘huge’ issue as it related to the handling of these cases but that the amendment did help clarify the law.

What came up next was a great question Heidi raised in her email: “…bigger question is the proper use of ERCs and the statutory triggers for ERCs. Might still be much confusion under the FHCDA.”   That led to a series of larger questions about what is the ‘correct’ composition of the ethics review committee? How do we constitute an ethics committee? What does it really mean to have ethics make a decision? What are the ethics processes and the rules around the functioning of the committee? Is the input of the ethics committee a recommendation or justification for a particular path or is it the group that lays out all potential options that can be considered? That led Margie to remind the group that the work she is doing with Chris R. can help bring some clarity to these questions and really underscore the power of what this consortium can do for the community.

**Action items:** Margie to work with Chris and prepare for a report at the next meeting. See the next item for a refresher on the work they are in the process of completing.

**From 5/1/19:**

**Item: Ethics Team Practices**

**Discussion:**

Margie shared with the group some background and context on the project she is working on with Chris R. regarding trying to describe (in detail) what the region’s ethics practices and procedures look like. (Chris recently made the rounds with the Ethics group and gathered up information specific to each location.) What is attempting to be described are; size of the programs, charter’s, membership, funding, meeting frequency, funding, number of consults a year etc. Goal is to describe this from a regional standpoint.

**Decision:**None other than the group continue to provide info to Margie and Chris as this moves along.

**Action items:** Margie to complete her portion of the assessment and share with Chris. To eventually be shared with the Consortium.

**Item: Next meeting?**

**Discussion:** Have the meeting in May 2020. Topics to discuss. Legal updates, “Hot Topics”. How to handle personal bias in making ethical decisions. Ethics Practices – Regional Level. Setting 2020 goals for Consortium.

**Action Items:** Marc to send out Doodle Poll in February.

End

Ambrosi