No doubt the Program in Medicine and Human Values has been stretched during the past 20 months. Despite the pressures, I am pleased to report that we’re finding new and rewarding ways to cope with the changes. Our consultation service has remained robust. After 742 ethics consultations last year, we are on pace to follow a similar trend by the end of this year. Most of our clinical work continues to occur in the critical care areas of the hospital, and our bioethicists are forging strong ties with the doctors and nurses who work there. To some degree, our focus is shifting, however. We are not just working for the welfare of our patients, we are ministering to the caregivers themselves, who are suffering from the burden of overwork and emotionally trying cases.

Another way in which we’ve changed our ways is in the arena of virtual learning. PMHV has maintained a vigorous educational presence since we started in 2003. We haven’t been able to host a single in-person event since March of 2020. Undeterred, our bioethicists adapted to use new technology formats. We’re regularly producing virtual presentations (webinars), focusing on approaches to issues that frequently generate ethics consultations. This format has grown in popularity, and now, instead of speaking to thirty or so audience members, we’re interacting with a statewide audience representing Sutter as well as other health systems, including Kaiser and Dignity Health. Even our popular annual Bioethics Workshop, held each June for the past 15 years, has gone virtual with a national audience.

Early adoption of web-based learning has kept our program at the forefront of ethics education, particularly for individuals who are faced with ethical dilemmas that arise in their clinical practice. Our prime focus continues to be helping the responsible clinician, when confronted with an ethical quandary regarding their patient, make real-life decisions that reflect the highest level of ethical standards and recognition of the patient’s values. Our educational programs promote a pragmatic approach, and the survey feedback we have received demonstrates appreciation from our clinically focused audience.

A third arena of growth is scholarship. PMHV bioethicists are taking their extensive clinical experience to the larger bioethics community. Each team member presented their work at the annual American Society of Bioethics and Humanities virtual conference this year. They also contribute frequently to the literature, including as the editor of the prestigious Cambridge Quarterly of Healthcare Ethics. To promote the intellectual clarity of our professionally trained bioethicists, as well as recruit and maintain the best, their souls must be refreshed in academia. Thanks to donations from our donors, we can provide our bioethicists with an academic mentor, tasked with helping them flesh out their thoughts and experiences to produce outstanding contributions to the literature.

None of this would have happened without the help of an increasing number of individuals who share our vision. We’re thankful to have the backing of Sutter Health in funding our clinical consultation service, but the activities beyond that, including Ethical Times, is what makes us special, and for that, we depend entirely on people like the readers of this newsletter.

I thank all of you for your past and ongoing support.

Happy holidays,

William S. Andereck, M.D., FACP
On October 21, the first anniversary of his death, a memorial service was held at St. Ignatius Church in San Francisco for Albert Jonsen, Ph.D., co-founder of the Program in Medicine and Human Values and pioneer in the field of bioethics. William Andereck, M.D., delivered an earnest address on the man and his method, noting Dr. Jonsen’s leadership in the development of clinical ethics and the work our team continues to provide. The service was livestreamed, allowing bioethicists around the country to join family and friends in paying tribute to a beloved man.
In the past year, our program has seen an unprecedented increase in clinical ethics consultation requests regarding treatment decision making for unrepresented patients. These are patients who due to medical illness or chronic ailments are unable to make their own medical decisions. At the same time, they lack family or friends who can advocate on their behalf and provide guidance to the healthcare team about the patient’s wishes or preferences. Research suggests that unrepresented patients are at risk of being both undertreated and overtreated.

Bioethicists at PMHV provided expertise and support to each patient’s physicians, social workers, and hospital ethics committees to conduct a thorough evaluation of the situation, discuss ethical considerations at play, and implement an interdisciplinary process to develop a plan of care to promote the patient’s best interests, utilizing any legal recourse as needed. Through a deliberate process of reflection and ethical analysis, our professional bioethics team was able to provide a voice to these vulnerable and marginalized members of our society.

Here are comments from some of the care providers across Sutter Health hospitals in the Bay Area. They highlight the bioethics team’s role in assisting them with dilemmas and ethical concerns when the patient had no one to provide their story or perspective on how they would want to be cared for.

**Elizabeth Erringer**
*Chaplain*
*Novato Community Hospital*

In a few distressing situations, we’ve had patients with severe developmental delay who were frightened from being in an unfamiliar environment and unable to participate in their own treatment discussions. When we have an unrepresented patient, we involve the bioethics team much earlier in their care. They help initiate conversations with patients’ long-term caregivers and their care facilities to learn more about our patients as individuals, specifically to understand their preferences and what brings them joy. This allows us to develop a plan of care that is in each patient’s best interest. In one case, we were able to pursue a decades-old lead and find a family member! We helped reunite our patient and their sibling and enabled them to attain closure in their relationship. The bioethics team has been instrumental in helping our unrepresented patients still have a voice, assist everyone in making difficult decisions, and support the medical team in morally distressing situations.

**Shannon Aiello, R.N., SCNL, CSN**
*Director, Medical Surgery and Intensive Care Unit*
*Sutter Lakeside Hospital*

It cannot be overstated: the bioethics team and committee plays a vital role in the care and advocacy of our patients. Given the large population of medically complex underserved patients in our community, the care team is often reliant on our bioethics team to help guide and support the care we provide. These patients present the care team with difficult and challenging dilemmas from an ethical, legal, physical, and emotional standpoint. The bioethics team provides the clinical staff with the guidance and knowledge to ensure the best outcomes for our patients. These decisions are complex and distressing. The bioethics team has been invaluable in advocating for our patients by respecting their rights as well as supporting the clinical team in very challenging situations where there are no family members or friends to speak on the patient’s behalf. I am grateful to have bioethics at our hospital and to be a part of this team, to advocate for this vulnerable patient population, and to help develop an ethically appropriate plan of care.
I feel extremely grateful to have the opportunity to work with the ethics team in my role as a social worker in the ICU where often the most critical decisions are made with urgency. The ethics team provides an invaluable resource to our patients, families, and our team of providers. They are always available to talk through complex cases to help ensure that patients and their loved ones are treated with dignity, compassion, and optimal medical care. Their guidance has been crucial in helping guide care for patients who are unrepresented, helping give a voice to those who are unable to advocate for themselves, and they act as a compass to the team in upholding our shared values.

Sonya Allen, R.N.
Staff Nurse II
California Pacific Medical Center, Mission Bernal Campus

When is enough, enough? What is reasonable? When do or should medical teams intervene and provide rescue care or compassionate end-of-life care? With advances in medical technology, ethics consults have become essential. Sometimes family members’ expectations are above and beyond medical capabilities. Even though doctors, nurses, palliative care, and other services have discussions, ethics consults have been helpful to ensure we are doing the right thing for our patients. Our bioethicist assesses, evaluates, and provides advice and recommendations to the care team.

I have sought ethics assistance for various complex patient situations, including the appropriateness of aggressive interventions for a patient who appears to be suffering, when the decision maker is trying to override a patient’s wishes, or when a patient refuses treatments. Nurses are challenged daily with ethical issues in this age of the COVID pandemic. And personally, I have sought reasonable assurance that I am acting ethically in caring for all patients whether vaccinated or unvaccinated.

Dan Peterson, CEO
Sutter Santa Rosa Regional Hospital

Healthcare is about caring. We have a responsibility to care, and there are very few for whom this matters more than those unrepresented patients who have no one else by their side during their times of health crisis. I so greatly appreciate our ethics team in how they help guide us through this weighty responsibility. Having a team to check in with and think through these ethical issues together reassures me that we are making the best possible decisions at these most important times.

Trevor Hinshaw, M.D.
Internal Medicine Resident
California Pacific Medical Center, Van Ness Campus

The ethics service has been extremely helpful to me as an internal medicine resident here at CPMC. By coordinating with palliative care and social work teams, leading difficult conversations, and providing decision support for ethical dilemmas, the ethics team enables us as a medical team to follow the best ethical course in treating vulnerable and unrepresented patients. Thanks

Isabel Curtin, MSW
ICU Social Worker
California Pacific Medical Center, Van Ness Campus

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Expanding our virtual education opportunities, PMHV hosted a second annual Virtual Bioethics Workshop. This education event took place via Zoom over two, two-hour sessions on successive Fridays, September 10 and 17. Participants represented 38 institutions, from California to Delaware, and included several health systems, such as Sutter Health, Dignity Health, and Kaiser Permanente. Attendees were ethics committee members and other healthcare professionals from various disciplines, including bioethicists, physicians, nurses, risk managers, chaplains, social workers, administrators, and patient advocates.

The interactive virtual workshop focused on how best to resolve the challenges that healthcare providers encounter in clinical cases. The program chair for this year’s event was our clinical bioethicist Robert Fulbright, J.D. He opened Day One by introducing PMHV medical director William Andereck, M.D., who gave a heartfelt presentation on the life and contributions of PMHV co-founder and one of the founders of the bioethics field, Albert Jonsen, Ph.D. Robert followed by discussing updates to healthcare law that are relevant to clinical ethics consultations. Next, our senior clinical bioethicist Shilpa Shashidhara, Ph.D., discussed strategies on navigating conflict in the ICU. Day One concluded with our clinical bioethicist John Frye, Ph.D., analyzing a patient care situation involving artificial nutrition and a feeding tube.

Day Two of the workshop opened with our program director, Ruchika Mishra, Ph.D., exploring a clinical case involving restraints for dialysis. This was followed by our clinical ethics fellow, Kelsey Gipe, Ph.D., examining a scenario where the patient was ambivalent about life-prolonging treatments. The session ended with an open forum for the audience to discuss dilemmas and conflict situations from their experience.
Happy Holidays and All the Best for 2022!

Our team at the Program in Medicine and Human Values wishes all the best in life and good health to all of you during the upcoming holiday season and the New Year thereafter. Although the pandemic has dominated clinical care and everyday life for the past twenty months, we are grateful to expect continued normalcy ahead while already experiencing better days in the present. When we gather again in 2022, be it virtually or in person, we’ll be armed with gratitude for your support and optimism for the days ahead.

If you would like to learn about opportunities to invest in our current initiatives, please contact Emilia Deluz at 415-600-4112 or DeluzEA@sutterhealth.org.