

NETWORK NEWS

The newsletter of the Florida Bioethics Network

a Health Service Group of the Florida Hospital Association - P.O. Box 531107 - Orlando, Florida 32853-1107 - 407-841-6230

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97-1

PRESIDENT'S MESSAGE

We Need to Hear From You

By Glenn R. Singer, MD, Chairman-Bioethics Comm./Pulmonologist, Broward General Medical Center, Ft. Lauderdale.

I want to thank all the people who attended, spoke, led sessions, participated in, and helped plan the Annual Meeting in Fort Lauderdale in October. An additional thank you goes out to our generous sponsors for their financial contributions.

As a network, our mission is to foster communication in the state and open new lines of communication. Based on your feedback, I believe we are succeeding. This conference began the process of introducing peers beyond the hospital environment (e.g., home health agencies, hospices, and extended care facilities) into our organization. As more patients are treated outside the traditional hospital setting, more ethical problems will be faced in those settings.

*"WE CAN ONLY BE
AS GOOD
AS OUR MEMBERSHIP MAKES US"*

The conference gave us an opportunity to hear from our colleagues within the state and bring in several distinguished speakers to address issues that all of us are grappling with now or worrying about for the future. We will struggle with problems of informed consent, refusal of treatment, advance directives, and other issues which now seem almost musty.

Meanwhile, new challenges confront us in the area of organ donation and assisted suicide. Is there anyone involved in bioethics or ethics committee not pondering the ethical dilemmas we will face if the courts permit assisted suicide? Are the new guidelines on organ procurement a violation of informed consent? Do we risk decreasing the available supply of organs in our zeal to help those needing transplants?

The focus for much of our work, however, is the multidisciplinary institutional ethics committee; it doesn't matter if the institution is a hospital, hospice, or extended care facility such as a nursing home. How we conduct business in these committees was the basis for our formulation of the Guidelines for Ethics Committees, presented at the Annual Meeting.

As we meet in ethics committees, what issues we discuss, what policies we formulate, what cases we review may vary from committee to committee. Some committees may have more expertise than others. Every committee, however, must try to perform at a skilled level. We have a fiduciary responsibility to our institution, our patients, and our community.

Most of us, including myself, have had little formal training in bioethics and learned on the job. Does that mean we can't work at a proficient level? I think the answer is an emphatic no. Just as we have all learned new concepts in medicine as they are introduced, so must we try to keep up with the ever growing literature of bioethics.

As part of this literature, we offer the Guidelines for Ethics Committees. The Guidelines has now been out for two months. We heard some initial comments at the Annual Meeting and want to hear more. Are they too confining or too flexible? Are they too pedantic or too simplistic? Did we focus on one discipline too much or ignore another?

We have already put the Guidelines on our Board agenda. I think that we have enough initial comments to start working on the second edition. Let us hear from you though. If you have other comments, criticisms, or compliments, fax, e-mail, or write to us at the Florida Bioethics Network.

ARNP SCOPE OF PRACTICE AND THE LIFE PROLONGING PROCEDURE ACT OF FLORIDA

Submitted by Cathy Emmett, RN, MSN, Manager/Gerontology, Sarasota Memorial Hospital, Sarasota. Taken from "The Florida Nurse" October 1996 issue.

The following position was adopted at the annual meeting of the Florida Nurses Association.

Currently Advanced Registered Nurse Practitioners (ARNPs) provide comprehensive care to elderly and terminally ill clients in long term care facilities, skilled nursing facilities, and adult congregate living facilities. ARNPs function as both independent and collaborative health care providers, managing and directing the client's care throughout the continuum of care with one exception. The exception exists with the ARNP's inability to write "Do Not Resuscitate" (DNR) orders or sign a Certificate of Terminal Illness, according to Florida Statute 765. "The Life Prolonging Procedures Act of Florida" (1).

Utilization of ARNPs has increased in long term care facilities, skilled nursing facilities, and adult congregate living facilities. In 1992, FNA addressed barriers related to utilization of ARNPs in long term care facilities (2). ARNPs met resistance from administrators and Directors of Nursing to function within the advanced scope of practice.

As a result of collaboration with organizational affiliates of long term and skilled nursing facilities, as well as adult congregate living facilities, and positive changes in direct reimbursement for care, ARNPs have been able to reduce the barriers to role utilization.

The advanced scope of practice for ARNPs is defined in Florida Statute 464, and Administrative Rules 59S-4, including diagnosing, treating, prescribing, and evaluating patient responses to health care regimes (3). The management of chronic and/or terminal diseases in the elderly requires a comprehensive approach, including the patient, family, or other direct and indirect health care providers.

ESSENTIAL READINGS #8

Submitted by **Francille M. MacFarland, MD**, Winter Park.

Research Ethics:

1. Beecher, H.K. Ethics and Clinical Research. *NEJM* (1996) 274: 1354-60.
2. Annas, G.J., Grodin M.A. The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation. New York: Oxford University Press, 1992.
3. Brandt, A.M. Racism and Research: The Case of the Tuskegee Syphilis Study. *Hastings Center Report* 8 (6): 21-9.
4. Katz, J. Reflections on Unethical Experiments and the Beginnings of Bioethics in the US. *Kennedy Institute of Ethics Journal* 1994; 4 (2): 85-92.
5. Pompidou, A. Research on the Human Genome and Patentability - The Ethical Consequences. *Journal of Medical Ethics* 1995; 21 (2): 69-71.
6. Parens, E. Taking Behavioral Genetics Seriously. *Hastings Center Report* 1996; 26 (4): 13-22.
7. ACHRE. Research Ethics and the Medical Profession: Report of the Advisory Committee on Human Radiation Experiments. *JAMA* 1996; 276: 403-9.
8. Buchanan, A. Judging the Past: The Case of the Human Radiation Experiments. *Hastings Center Report* 1996; 26 (3): 25-30.
9. Mastroianni, A.C., Kahn, J.D.P. eds. Special Issue: Advisory Committee on Human Radiation Experiments. *Kennedy Institute of Ethics Journal* 1996; 6 (3).
10. Special Section: Rejuvenating Research Ethics. *Cambridge Quarterly of Healthcare Ethics*. Summer 1996; 5 (3).

WELCOME NEW FBN MEMBERS!

The Florida Bioethics Network welcomes **Rev. David Brooks**, Spiritual Care Manager, Hospice of Hillsborough, Inc., Tampa - 813/877-2200; **Fr. Robert Bruckart**, Director of Pastoral Care, Holmes Regional Medical Center, Melbourne - 407/676-7183; **Christine Clawson**, Clinical Nurse Specialist, St. Anthony's Hospital, Inc., St. Petersburg - 813/825-1490; **Maureen Denk**, Professional Development, Shands at the University of Florida, Newberry - 352/472-6987; **Valorie Ellspermann**, Director, Education & Development, Munroe Regional Medical Center, Ocala; **Rev. Craig Ezring**, Chaplaincy Director, Heartland of Tamarac, Tamarac - 954/968-7618; **Dianne Farb**, Baptist Medical Center, Jacksonville - 904/273-0380; **Peggy Ferrand**, Manager of Critical Care, St. Anthony's Hospital, Inc., St. Petersburg; **Jane Hendricks**, Attorney, Law Office Jane Hendricks, Miami - 305/445-3367; **Fr. Thomas Honold**, Archdiocesan Director, Catholic Health Services, North Miami - 305/891-8850 x6203; **A. Howell**, Social Services Coordinator, Timber Ridge Nursing & Rehabilitation Center, Ocala - 352/854-8200; **Robert Jakoby**, Corporate Director, Baptist Health Systems of South Florida, Miami - 305/596-6577; **Victoria London**, Rabbi, Miami - 305/271-5580; **Kevin McAuliffe**, Attorney, Kevin J. McAuliffe, Esq., St. Petersburg - 813/360-5009; **Darlene McCulloch**, Director Hospice, Gold Coast Home Health Hospice, Pompano Beach - 954/785-2990; **Carli Meister**, Director, Clinical Development, Columbia Northwest Medical Center, Margate - 305/978-4275; **Rev. Wayne Robinson**, Chaplain, H. Lee Moffitt Cancer Ctr./Rsrch., Tampa - 813/972-8400 x2856; **Amy Sanders**, Ethics Facilitator, Indian River Memorial Hospital, Vero Beach - 561/567-4311 x1105; **Helen Schwartz**, Attorney, Plantation - 954/382-0470; **Glenn Vandewater**, Attorney at Law, United States Navy, Orlando - 407/646-5465; **Dr. Neal Weinreb**, Regional Medical Director, Vitas Healthcare Corporation, Ft. Lauderdale - 954/777-5286; **Dr. Michael Weitzner**, Chief, Psychiatry Service, H. Lee Moffitt Cancer Ctr./Rsrch., Tampa - 813/972-8483; and **Patricia Wilds**, Case Manager Coordinator, North Shore Medical Center, Miami - 305/835-6183.

As clients progress along the continuum of care, health status may deteriorate until the patient reaches a state where further treatment will not improve one's quality of life. The patient and family make choices to prolong or terminate treatments, and direct their provider of choice to implement and honor their choices. FNA is a historical leader in affirming patient autonomy and rights regarding treatment and care (4).

Within the current language of Florida Statute 765, the patient and family may direct only a physician to write DNR orders or sign a Certificate of Terminal Illness. The ARNP is not permitted by law to write the DNR order or sign the Certificate of Terminal Illness. The FNA asserts that ARNPs should be permitted to write DNR orders or sign Certificate of Terminal Illness for the patients for whom they have been providing care.

Statement of Position:

ARNPs are qualified and compassionate health care providers permitted to function within an advanced scope of practice. ARNPs are increasingly providing a full spectrum of care to their patients, excluding written DNR orders and signing Certificate of Terminal Illness. FNA supports the full utilization of ARNPs to provide comprehensive care throughout the patient's continuum of care, including chronic and terminal illness.

Recommendations for Action: That the Florida Nurses Association:

1. Appoint a Task Force (which may include but is not limited to the Councils on Gerontological Nursing, Advanced Practice, and Bioethics) to:
 - a. examine the issues of the Life Prolonging Procedure Act of Florida in relation to the scope of practice of ARNPs
 - b. recommend legislative changes based on findings of the Task Force
 - c. report back to the House of Delegates in 1997

References:

1. Florida Statute 765 "The Life Prolonging Procedure Act of Florida."
2. 1992 FNA Action Report: "Utilization of ARNPs in Nursing Homes," A Reference Manual of Official Policies and Positions, Florida Nurses Association, 1995, p.15.
3. Florida Statute 464 "The Nurse Practice Act" Administrative Rules 59.S. (1/96).
4. 1983 FNA Position Statement: "Clients Rights Regarding Treatment and Care," A Reference Manual of Official Policies and Positions, Florida Nurses Association, 1995, p.121.

*Adopted by FNA House of Delegates
October 1996*

CURRENT REFERENCES

Submitted by **Francille M. MacFarland, MD**,
Winter Park.

1. Gilligan, T., Rafin, T.A. Whose Death Is It Anyway? *Annals of Internal Medicine* 125 (1996): 137-41.
2. Deber, R.B. What Role Do Patients Wish To Play In Treatment Decision Making? *Archives of Internal Medicine* 156 (8 July 1996): 1414-20.
3. Iserson, K.V. Withholding and Withdrawing Medical Treatment: An Emergency Medicine Perspective. *Annals of Emergency Medicine* 28 (1996): 51-54.
4. Pellegrino, E.D. Ethics. *JAMA* 275; 23 (19 June 1996): 1807.
5. Hunter, K.M. Narrative, Literature, and the Clinical Exercise of Practical Reason. *Journal of Medicine and Philosophy* 21 (1996): 303-20.
6. Emanuel, E.J. Cost Savings At The End of Life: What Do The Data Show? *JAMA* 275; 24 (26 June 1996): 1907-14.

FHA'S A-V LIBRARY ADDITIONS

Videos are available to FHA members and can be borrowed for a week for only a \$15 handling fee per video. Please fax **Amy Barnhill** at 407/423-4648 if you would like to borrow from the A-V library. Indicate the "VT #" and title of the video you are requesting. Please be aware that FHA has only one copy of each video. Video requests will be filled in the order received.

VT - 294 ~ "CARING FOR THE DYING PATIENT: BEREAVEMENT ISSUES" ~ Viewing time . . . 22 minutes

Discusses the stages and ramifications of grief, mourning, and bereavement, and how a professional's interactions with patients and families can help or hurt. Discusses different aspects of grief and loss, including physical and mental deterioration, spiritual crisis, altered goals and relationships, reaction to suffering, and the healing process. Effective communication strategies, appropriate closure, child and teenage conceptions of death, and personal issues of mortality also are examined. A must for all nurses and other health professionals working with patients who have life limiting illnesses.

MEETINGS OF INTEREST

- ✧ **March 7, 1997 ~ Announcing the Forum for Bioethics and Philosophy's Fifth Annual Conference: "Clinical Ethics: Debates, Decisions, Solutions."** Ft. Lauderdale, FL. For information call UM Forum for Bioethics - 305/243-5723; FAX: 305/661-1989; E-Mail: ethics@newssun.med.miami.edu

- ✧ **June 12-15, 1997 ~ "Catholic Identity in Health Care: Public Responsibility and the Culture of Profit,"** Center for Clinical Bioethics, Georgetown University Medical Center, Washington, DC. For information and registration materials, contact: Mr. Stacy Schultz, Center for Clinical Bioethics - 202/687-1122; FAX: 202/687-8955; E-Mail: ccb@medlib.georgetown.edu

POST-DOCTORAL FELLOW POSITION AVAILABLE

The Center for Biomedical Ethics at the University of Minnesota will have a one year post-doctoral fellowship available July 1997. The goal of the fellowship is to foster scholarship and career advancement in the field of biomedical ethics. The award will be \$25,000.

The mission of the University of Minnesota Center for Biomedical Ethics is to advance and disseminate knowledge about ethical issues in health care and the life sciences. The Center carries out this mission by conducting original interdisciplinary research, offering educational programs and courses, fostering public discussion, providing community service, and assisting in the formulation of public policy.

The fellow will be expected to commit at least 75% time to conduct his/her defined area of research. One or more Center faculty will be available to act as advisors. Research may be conceptual/philosophical, policy analysis, empirical, or a combination of approaches. Fellow selection criteria include:

1. Completion of Ph.D. or other relevant terminal degree.
2. Evidence of academic excellence and scholarly promise.
3. Fit between the proposed area of study and the research goals of Center faculty which include the following topics in bioethics: ethics and health policy, long term care, physician-assisted suicide and euthanasia, health care insurance, health care reform and allocation of services, reproductive technologies, genetic counseling and screening, advance directives and end of life decisions, ethics of clinical trials, research ethics, values assessment, professional ethics, and relationship of law and ethics.

*Applications must be submitted
by February 15, 1997*

*For application call:
The Center for Biomedical Ethics
612/626-9756 or FAX 612/626-9786
E-Mail: Olson209@gold.tc.umn.edu*