Jewish Home Lifecare (JHL) maintains high ethical standards in all aspects of resident/patient care and business relationships. JHL’s ethical responsibility to its residents/patients/family/staff/client and business associates is guided by its Mission, Code of Ethics, Policies and Procedures, Governing Body By-laws and Federal and New York State Statutes, Rules and Regulations.

In accord with the Family Health Care Decisions Act, an Ethics Review Committee exists on each campus so as to provide additional information about conflict resolution, act as the dispute mediation body when disagreements arise regarding end of life decisions and as required by statute and regulation. Composition and function of the Ethics Review Committee is further described below.

### Health Care Decision-Making

All residents/patients have the right to make health care decisions in accordance with human, civil, and constitutional rights. Established guidelines of The Jewish Home Lifecare for such decisions are outlined in its policies on Health Care Decision Making and are in accordance with the Patient Self Determination Act (PSDA), the NYS Family Health Care Decision Act and Health Care Proxy Legislation. Each division’s The Ethics Review Committee may provide input into the decision making process to ensure that legal and ethical standards are met and to assist in conflict resolution; when necessary and as required by law the facility’s Ethics Committee is convened to assist in this process.

### Residents’ Rights and Conflict Resolution

JHL informs all residents/patients, families and staff about the “Residents’ Bill of Rights” and ensures that all residents/patients have the opportunity to exercise these rights. The Jewish Home Lifecare respects patient/resident rights and provides a framework to deliver care in
accordance with NYSDOH and JCAHO guidelines. JHL has established protocols to protect resident/patient rights and resolve grievances. The Ethics Review Committee may provide input into the decision-making process to ensure that legal and ethical standards are met and to assist in conflict resolution; when necessary and as required by law the facility’s Ethics Committee is convened to assist in this process.

**Education**

JHL provides training to its staff and to members of its Ethics Committees which may include the following:
- Principles of Palliative Care
- Health Care Decision Making (see related Policy and Procedure)
- Broadly accepted ethical principles for treatment decisions
- Obligations of membership on the Ethics Committee in carrying out its responsibilities under the requirements of the Family Health Care Decisions Act and related laws.

**Non-Participation in Care / Conscience Objection**

A practitioner and/or employee may request not to participate in resident/patient care when there is a perceived conflict with the employee’s cultural value, ethics or religious beliefs.

**Structure and Function of the Ethics Review Committees**

The membership of each facility’s Ethics Review Committee (Committee) shall be interdisciplinary and:

- Must include at least 5 members who have demonstrated an interest in or commitment to patient rights or to the medical, public health, or social needs of those who are ill.

- The members may include health care professionals, clergy, and others employed by or affiliated with the nursing home, as well as members of the community.

- At least three Committee members must be health or social service practitioners, at least one of whom must be a physician, and one must be a registered nurse.

- At least one Committee member must be a person without any governance, employment, or contractual relationship with the nursing home.

- The facility shall offer the residents' council of the facility, the opportunity to appoint up to two persons to the Committee, none of whom may be a resident of or a family member of a resident of such facility, and both of whom shall have expertise in or a demonstrated commitment to patient rights or to the care and treatment of the elderly or nursing home patients through professional or community activities, other than activities performed as a health care provider.
• A Person Connected with the Case may not participate as a Committee member in considering that case.

Ethics Review Committee Function

Each facility’s Ethics Review Committee shall carry out the following responsibilities inclusive but not limited to:

1. Resolving Disputes.
   Consider and respond to any health care matter or request for assistance in resolving a dispute presented by a Person Connected with the Case, including, but not limited to:
   o the determination of incapacity for a patient,
   o the choice of surrogate,
   o a decision by a health care agent or surrogate,
   o a recommendation or concurring opinion for treatment for a patient who lacks a surrogate,
   o or a clinical determination required for decisions to withdraw or withhold life-sustaining treatment; and

2. Surrogate Decision to Withdraw or Withhold Life-Sustaining Treatment.
   In cases where the surrogate has decided to consent to withdraw or withhold life-sustaining treatment for a patient who is not terminally ill or permanently unconscious, the Ethics Review Committee shall review the decision and determine whether the decision meets ethical standards for making such decisions.

Authority of the Ethics Review Committee

Advisory Role. Except as specified below, a facility’s Ethics Review Committee’s response to any other matter or any dispute shall be advisory and nonbinding, and may include:

• Providing advice about the ethical aspects of proposed health care;
• Making a recommendation about proposed health care; or
• Providing assistance in resolving disputes about proposed health care or other matters, such as the determination of decision-making capacity or the choice of surrogate

Binding Decisions. When the Ethics Review Committee carries out the functions of review of Surrogate Decision Maker’s decisions to withdraw or withhold life-sustaining treatment as specified above and in the related Family Health Care Decision Act policies it has the authority to determine whether a surrogate's decision meets the standards of the policy for such decisions.

Ethics Review Committee Procedure

A. The Ethics Review Committee shall respond promptly, as required by the circumstances, to:
B. The Ethics Review Committee shall promptly give the patient, if there is any indication of the patient’s ability to comprehend the information, the surrogate, other persons on the surrogate list directly involved in the decision or dispute regarding the patient’s care, the attending physician, a designated representative of the nursing home’s administration, and any other person the Committee deems appropriate, the following:

- notice of any pending case consideration concerning the patient, and for patients and persons on the surrogate list, information about the Ethics Review Committee’s procedures, composition, and function; and

- the Committee’s response to the case, including a written statement of the reasons for approving or disapproving a surrogate’s decision to withdraw or withhold life-sustaining treatment for a patient who is not terminally ill or permanently unconscious.

C. The Ethics Review Committee shall permit Persons Connected with the Case to present their views to the Committee and to have the option of being accompanied by an advisor when participating in a Committee meeting.

D. The Committee’s response to each case involving Surrogate Decision to Withdraw or Withhold Life-Sustaining Treatment above shall be included in the patient’s medical record.

E. Following the Ethics Review Committee’s consideration of a case concerning the withdrawal or withholding of life-sustaining treatment, treatment shall not be withdrawn or withheld until the persons listed above have been informed of the Committee’s decision.

F. Confidentiality Protections.

The following confidentiality protections shall apply to the meetings, deliberations and records of an Ethics Committee, except as noted below in Section G.

1. Committee members and consultants shall have access to medical information and records necessary to perform their functions in accord with this Policy. Any such information disclosed to Committee members, consultants, or others shall be kept confidential, except to the extent necessary to accomplish the purposes of this Policy, or as set forth below, or as otherwise provided by law. Notwithstanding any other provision of law, the proceedings and records of an Ethics Review Committee shall be kept confidential and shall not be released by Committee members, consultants, or other persons privy to such proceedings and records.
2. The proceedings and records of an Ethics Review Committee shall not be subject to disclosure or inspection in any manner, including under Article 6 of the Public Officers Law or Article 31 of the Civil Practice Law and Rules.

3. No person shall testify regarding the proceedings and records of an Ethics Review Committee, nor shall such proceedings and records otherwise be admissible as evidence in any action, or proceeding of any kind in any court or before any other tribunal, board, agency or person.

G. Exceptions to Confidentiality of Ethics Committee Proceedings and Records

1. In cases where the Committee makes a decision to approve or disapprove a surrogate’s decision to withdraw or withhold life-sustaining treatment for a patient who is not terminally ill or permanently unconscious, Ethics Review Committee records and proceedings may be obtained by and released to the New York State Department of Health.

2. Nothing in this Policy shall prohibit the patient, the surrogate, or other persons on the surrogate list, from voluntarily disclosing, releasing, or testifying about Ethics Committee proceedings and records.

3. Nothing in this Policy shall prohibit the State Commission on Quality of Care and Advocacy for Persons with Disabilities, or any person or agency with or under contract with the Commission which provides protections and advocacy services, from requiring any information, report or record from a nursing home in accord with the provisions of Mental Hygiene Law Section 45.09.