Thank you for presenting your case to the ECHO Idaho – Healthcare Vitality session.

**Summary:** Dr. DoRight, a primary care physician in an outpatient hospital-owned practice, regularly treats youth with issues like abuse, addiction, mental health, and contraception. On July 1st, 2024, Idaho's new law, SB1329, changed parental rights, giving parents complete access to their minor child's healthcare information and enabling civil suits against healthcare providers who deprive them of this right. In response, Dr. DoRight's hospital system implemented a "blanket consent" process, causing confusion about how to handle sensitive matters with her teen patients, and leaving her feeling demoralized and fearful for her patients and herself.

One particular case involves a 17-year-old estranged from her abusive parents who now seeks care for her newborn. Dr. DoRight can treat the newborn with the teen mother’s consent but cannot legally address the mother's medical and mental health needs without parental consent, including her desire for mental health counseling and contraception. Unable to discuss these matters due to the new policy, Dr. DoRight sought guidance from hospital administration. The Chief Medical Officer advised using a "blanket consent" form requiring parental signatures, which Dr. DoRight believes won't protect her from liability, exacerbating her anxiety and concerns about practicing under these conditions.

Questions:

1. How would you address Dr. DoRight's moral injury as a colleague or administrator in her healthcare system?
2. How are your healthcare systems dealing with this in real time less than 2 weeks into the new law going into effect?

After review of the case presentation and discussion of this case among the ECHO Community of Practice, the following suggestions have been made:

**Recommendations:**

- **Advocate for legislative amendments (to include exceptions for minors in abuse or estrangement situations).**
  - Legislative background
    - The Idaho Legislature prioritizes parental rights over patient rights and healthcare perspectives.
    - Legislators view the issue through the lens of parental decision-making, not healthcare.
  - Coordination on this issue is essential among all involved (medical associations, child advocacy groups, and legal experts).
  - One advocacy route is to provide IMA/IHA with specific examples of where care is hindered or not given due to this law. Examples should resonate with both healthcare professionals and legislators to effectively illustrate the problem.
    - Contact:
      - Idaho Hospital Association - Toni Lawson (tlawson@teamiha.org)
      - Idaho Medical Association - Susie Pouliot Keller (Susie@idmed.org)
**ECHO Idaho: Healthcare Vitality**

**CASE RECOMMENDATION FORM**

- **Internal Health System Support/Coordination:**
  With no definitive solutions and potential for moral injury, some healthcare professionals may leave the profession or state due to pressures. Physicians face a double bind between personal morals, professional standards, and external pressures.
  - Need for internal policies to manage conflicting pressures.
  - Develop training and protocols to help healthcare professionals navigate SB1329.
  - Establish support systems, including consultations with legal advisors.
    - Seek legal counsel for judicial bypass procedures for minor’s healthcare consent.
    - Create guidelines for documenting consent efforts and alternative steps.

- **Ensure internal process for handling sensitive cases:**
  - Transparent conversations throughout administration are essential to help build trust.
  - Frontline input is crucial.
  - Recognize that some doctors may face legal consequences for choosing not to abandon patients.

- **If the healthcare professional wishes to consider conscientious objection if facing moral distress/injury:**
  - Chose to treat the patient and face legal consequences.
  - Consider recommending the patient explore emancipation
    - This is an arduous and time-consuming process.
    - It is functionally difficult and lengthy in Idaho; minors must prove abuse and demonstrate significant independence.

**Resources:**
- [Idaho Bill SB1329](#)
- [Mandatory Parental Consent for Medical Decisions: Senate Bill 1329 Fact Sheet](#)
- [Blanket Consents Under Idaho’s New Minor Consent Law](#)
- [Idaho Coalition for Safe Healthcare](#)