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IMPORTANT NOTICE: Unless a policy refers to the Markham Stouffville Hospital, operating at 381 Church Street, Markham, ON in particular, reference to "Markham Stouffville Hospital" on a policy with an approval date of on or before August 18, 2021, shall be interpreted to mean the corporate entity Oak Valley Health. Any reference to "Markham Stouffville Hospital" on a policy with an approval date on or following August 18, 2021, shall be interpreted to mean only the hospital located at 381 Church Street, Markham, ON.

**PURPOSE AND SCOPE:**

Having an ethics framework helps promote ethical behaviour and practices throughout an organization, and clarifies ethical issues when they arise.

The Code of Behaviour – Respect in the Workplace policy and the Ethics Consultation Guide (Appendix A) which deals with the resolution of ethical issues form the written foundation for ethical conduct and decision-making at Oak Valley Health, and support the organization’s core values of Respect, Trust, Commitment, Compassion and Courage.

- *Appendix A - The **IDEA Ethical Decision-Making Tool** intended to support clinical ethical decision-making. See Appendix A-1*
- *Appendix B- The **Accountability for Reasonableness (A4R) Ethical Decision-Making Process Framework** intended to support organizational ethical decision-making and priority setting. See Appendix A-2*

This policy does not apply to research ethics issues. For review of the ethical implications of research, to determine whether a research project requires ethics approval, or when new innovations are considered research and a process to assess the implications of and approve patient participation in research projects is required, please see policy “090.914.914.015 Research Ethics Board Terms of Reference & Review Process”. Alternatively, the Oak Valley Health Manager of Research Ethics may be contacted.

**POLICY STATEMENT(S):**

At Oak Valley Health, this Integrated Ethics Framework shall guide all staff, professional staff, volunteers, and members of the Board of Directors in their conduct and will serve as a resource by providing a standardized approach to working through ethical issues and making decisions.

Depending on the situation, an ethics consultation may have one or more of the following objectives:

- To clarify the ethical issue(s) or question(s) and educate stakeholders about the ethical dimensions of the case;
- To facilitate communication between people involved in the case/situation and, where necessary, to help resolve conflict or disagreement;
- To assist in identifying alternative courses of action and, if appropriate, to provide recommendations for or against certain options;

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- To facilitate an ethical decision-making process;
- To promote reflective practice;
- To help address moral discomfort, moral distress, moral harm, and moral injury experienced by patients, family members, health care providers, professional staff, residents, students, administrators, members of the Board of Directors and volunteers;
- To enhance the capacity of staff members and professional staff to identify ethical issues and use appropriate frameworks/approaches toward ethical decision-making. See Appendix A-1 and A-2 for the organization’s ethical decision-making framework tools.
- To propose, assist with, or lead, when appropriate, follow-up measures to ensure a more durable and proactive resolution to the ethical challenge identified; these measures can include debriefing sessions, educational rounds, or policy/guideline development.

The Ethicist shall be accountable to the Director of Interprofessional Practice and Education, Oak Valley Health, and the Director of the Health Ethics Alliance, or, in the case of the Director of the Health Ethics Alliance, accountable to the Vice President, Human Resources, and Sunnybrook Health Sciences Centre. As a member of the Health Ethics Alliance, Oak Valley Health acknowledges the Ethics Departments and the Ethicists from Sunnybrook Health Sciences Centre, North York General Hospital, the Hospital for Sick Children, and the Hamilton Health Sciences Centre in allowing us to adapt a modified version of their consultation policies.

**GUIDELINE:**

Ethics consultations are a facilitated communication and educational processes that support ethical patient care, the integrity of health care providers, and the fair and efficient operation of the health care system. Ethics consultations can be provided for clinical or organizational issues, or a hybrid of these issues. Ethics consultations are available to all stakeholders who require assistance in resolving an ethical issue or making an ethical decision, including patients, family members, health care providers, professional staff, residents, students, administrators, members of the Board of Directors and volunteers.

**PROCEDURE:**

<b>ACCESS TO CONSULTATIONS</b>	
<b>Requestor of consultation</b>	<p>When an issue of ethical concern arises with respect to the care of an individual patient or patients in general and when those who have made initial attempts to address the ethical issue(s) believe they could benefit from assistance in this area, a request for such assistance may be made to the Ethicist by:</p> <ul style="list-style-type: none"> <li>• a patient;</li> <li>• a family member directly involved in the patient’s care;</li> <li>• the patient’s legal guardian;</li> <li>• a member of the health care team directly involved in the patient’s care</li> <li>• any professional staff, hospital staff member, residents, students, administrators, members of the Board of Directors or volunteer concerned about an ethical issue related to clinical care or organizational practice</li> </ul> <p>Although individuals involved in the patient's care can refuse to participate in an ethics consultation, no one has the right to obstruct or interfere with the consultation process (i.e. by blocking access to the patient record or preventing others from requesting or participating in a consultation).</p> <p>The Oak Valley Health Ethicist operates under normal business hours for the hospital (Monday to Friday, 0900-1700h). A request for an ethics consultation can</p>

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	be submitted by e-mail at <a href="mailto:ethics@msh.on.ca">ethics@msh.on.ca</a> , or by calling the Ethics Office at x6937. Emergencies afterhours should be referred to the Administrator on call.
<b>Ethicist</b>	<p>After a consultation has been received, it will proceed in the following manner:</p> <p><b>Step 1: <u>Requesting the consultation.</u></b> This request will be received by an available Ethicist and will be follow-up within 2 business day of receipt of the request, usually by phone. This follow-up will clarify from the individual requesting the consultation the reason for the request (i.e., the ethical question or issue) and the pertinent background information. Depending on the situation, this follow up may be done in person, over the phone, or through email. For consultations concerning a patient's care, the gathering of background information may involve speaking with others involved in the patient's care (e.g. staff, patient, family members) and reviewing the patient's health record.</p> <p><b>Step 2: <u>Determining the level of response required.</u></b> Consultations may be completed over the phone or via email for less complex or more factual questions, or they may require more active involvement (e.g. attending a committee meeting, family conference, or team meeting, speaking directly with the patient/family). In collaboration with the parties involved in the consultation, the Ethicist determines the appropriate response based on the complexity of the situation, the amount of additional information required, and the needs of the individual(s) requesting the consultation.</p> <p><b>Step 3: <u>Consultation with others as appropriate.</u></b> To assist with the resolution of an ethical issue, the Ethicist may seek input from other professionals. These may include other Oak Valley Health staff members, Patient Experience Participants, Health Ethics Alliance team members, or colleagues from the University of Toronto Joint Centre for Bioethics. Patient privacy and confidentiality will be maintained, unless required by law or Oak Valley Health policy.</p> <p><b>Step 4: <u>Ongoing involvement (if required) and follow-up.</u></b> Some situations may require ongoing ethics support, such as policy-related and organizational issues or complex clinical cases that evolve over time. For all consultations, effort will be made to follow up with those involved in the consult to record the outcomes and offer continued support.</p>
<b>NOTIFICATION</b>	
<b>Ethicist</b>	When a request for an ethics consultation is received directly from a patient and/or family member, notify the Most Responsible Physician, the Patient Care Manager or delegate to inform them of the consultation request.
<b>DOCUMENTATION</b>	
	<p>When a consultation involves direct patient/family contact, document in the patient's electronic health record.</p> <p>Enter every consult into the Health Ethics Alliance Consultation Database for statistical monitoring of activities. This information is used to identify trends in the organization's ethical issues, challenges, and situations. The information will also be brought to the attention of the Director, Interprofessional Practice and Education to be used to improve the quality of services. Information entered in the online database is de-identified and is meant to capture general activities and</p>

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specific types of consult requests for the generation of departmental reports and does not contain personal health information.

## CONSULTATION FOLLOW-UP

### Ethicist

Depending on the nature of the ethics consultation, follow-up from the ethics consultation service may include one or more of the following services which the Ethicist can provide or support:

#### Ethics Debriefing

When ethically challenging situations occur, members of the interdisciplinary team can be left with a sense of moral discomfort or distress. An ethics debriefing session provides both emotional and didactic support for those members of the care team involved in such situations. Debriefings are intended to provide a morally open space for reflective dialogue, sharing of experience, and prospective problem solving. The goal is to increase participants' abilities and confidence in dealing with morally troubling situations, to provide an environment for frank discussion of those situations, and to provide the opportunity to plan effective management of similar situations in future. Ethics debriefing sessions are not the same as Critical Incident Stress Debriefing (CISD), which address all forms of distress following a critical/traumatic event, with primary focus on the psychological trauma.

#### Ethics Education

A particular consultation may identify a need for an ethics education event, which can be designed to enhance ethics knowledge, decision-making skills, as well as, to help staff address similar ethical considerations that can arise in the future.

#### Policy Review or Development

An ethics consultation can identify an organizational need for revision or development of a policy or guideline to support decision-making in similar situations.

## CONFIDENTIALITY

### All Participants

Confidentiality will be respected within the terms of the process outlined above, except as required by law or Oak Valley Health policy. Additionally, through the Health Ethics Alliance's association with the University of Toronto, Joint Centre for Bioethics, specific cases may be brought forward to the Clinical, Organizational and Research Ethics group for discussion. These discussions are conducted with a confidentiality agreement signed by all participants and only de-identified information is shared during this process.

## DEFINITION(S):

Ethical issue: Fundamentally, ethics is concerned with what makes actions right or wrong. Ethical issues arise when values are in conflict with respect to a particular decision or situation and there is uncertainty or disagreement about which values should be given priority and guide action. These “value conflicts” can occur within individuals (e.g. you're pulled in two different directions by your personal and/or professional values), between individuals or groups (e.g. a differing perspectives among staff members or between staff and patients/families), or at an institutional level (e.g. competing claims for resource allocation).

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**Ethics consultation:** “Consultation” in this context refers to the act of an individual or group of individuals conferring with an Ethicist, seeking clarification about a specific issue or information, or asking for guidance or a recommendation about a particular event or course of action (e.g. to discuss a patient's prior expressed capable wishes with their family). Ethics consultation can take many different forms depending on the circumstances, ranging from informal (e.g. Ethicist answering a question via e-mail), to more formal involvement (e.g. to attending a team-family meeting).

**Ethicist (Practicing Healthcare Ethicist/Bioethicist):** A member of the Health Ethics Alliance who holds a graduate degree or specialized training in bioethics, and typically has completed a post-graduate Fellowship in Clinical and Organizational Ethics. Ethicists on staff are members of the University of Toronto Joint Centre for Bioethics.

**Health Ethics Alliance (HEA):** The HEA is a multi-partner ethics service providing clinical, organizational and research ethics support to the members of the alliance. Alliance member organizations are supported by Ethicists embedded in or consulting to our partners- thereby creating a community of practice that promotes inter-organizational collaboration and common ethics support. Oak Valley Health is a member of the HEA, and is supported by an Ethicist on-site.

**REFERENCE(S):**

Accreditation Canada, Qmentum. (2018). Standards – Leadership. (Updated accreditation standards will apply as they become available.)

Gibson, J.L., D.K. Martin and P.A. Singer. “Priority Setting in Hospitals: Fairness, Inclusiveness, and the Problem of Institutional Power Differences.” Soc. Med. 2005 Dec;61 (11):2355-62. Epub 2005 Jun 9; and Daniels N, Sabin JE. Setting limits fairly: Can we learn to share medical resources? Oxford: Oxford University Press, 2002

Ontario Hospital Association, Guide to Good Governance, second edition

Toronto Central Community Care Access Centre (and the Community Ethics Network), July 2008 document entitled, “Ethical Decision-Making in the Community Health and Support Sector, Community Ethics Toolkit”

**RELATED DOCUMENTS:**

080.901.130 Workplace Violence Prevention

070.901.050 Whistle Blower Policy for Accounting Internal Accounting Controls or Auditing Matters

090.914.914.015 Research Ethics Board Terms of Reference & Review Process

**RESPONSIBILITY:**

Required Endorsements	Sponsor	Approval Authority
Senior Leadership Team	Director, Interprofessional Practice and Education	Board of Directors

**DOCUMENT HISTORY:**

Type	Individual/Committee	Date	Outcome
Draft		21/06/2018	Approved; new document

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Review/Approval	Ethicist, Interprofessional Practice and Education	01/25/2022	Approved
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**APPENDICES:**

**APPENDIX A: IDEA ETHICAL DECISION-MAKING TOOL**

Thinking about ethics is an integral part of service delivery for all involved in health care. Ethics is about making ‘right’ or ‘good’ choices and providing reasons for those choices. Unfortunately, which options are ‘right’ or ‘good,’ can often be unclear. It is for this reason that the IDEA Decision-Making Tool was developed. This tool provides a fair, step-by-step process to assist in the navigation and resolution of complex clinical ethical issues that arise in the delivery of health care.

**The IDEA Decision-Making Tool**

1. IDENTIFY the facts
2. DETERMINE ethical principles in conflict
3. EXPLORE the options
4. ACT and evaluate

<p><b><u>Step 1: Identify the Facts</u></b></p> <p>Identify what is known versus what is not known.</p> <ul style="list-style-type: none"> <li>• Medical Indications</li> <li>• Patient Preferences</li> <li>• Quality of Life, and</li> <li>• Contextual Features,</li> </ul> <p>Users of the framework should take into account all of the relevant considerations and stakeholders; this often includes facts that may not be known initially. Also consider the specific domains of the CLEOS rubric: clinical, legal, ethical, organizational, and systemic<sup>1</sup>.</p>	<p><b><u>Step 2: Determine Ethical Principles in Conflict</u></b></p> <p>Identifying the ethical principles in conflict will not provide solutions; however, this step will assist in further clarifying and articulating the issues.</p> <p>Common ethical principles to consider might include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Autonomy</li> <li>• Beneficence (or doing good)</li> <li>• Non-maleficence (or doing no harm) or</li> <li>• Justice</li> </ul>
<p><b><u>Step 3: Explore Options</u></b></p> <p>The intent of this section is to brainstorm different alternatives and to consider the potential outcomes and impacts of each one (e.g., evaluate the potential positive and negative considerations of each option).</p> <p>Do the options fit with the patient’s preferences?</p> <p>Do the options comply with corporate policy, regulations, and the law?</p>	<p><b><u>Step 4: Act and Evaluate</u></b></p> <p>Develop and document the action plan in the patient’s chart.</p> <p>Evaluate the plan. Were the intended results obtained, or is additional follow-up and/ or action required? Ongoing documentation and communication of the evaluation is necessary.</p> <p>Self-evaluate your decision. What have you learned?</p>

<sup>1</sup> Russell, B. (2008). An integrative and practical approach to ethics in everyday health care. *Risk Management in Canadian Health Care*, 10(2):9-13.

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## **APPENDIX B: ACCOUNTABILITY FOR REASONABLENESS (A4R) ETHICAL DECISION-MAKING PROCESS FRAMEWORK**

In recognizing that not all ethical issues that arise in health care are clinical in nature, an ethical decision-making framework has also been accepted for organizational decision-making. The Accountability for Reasonableness (A4R) process framework is based on the notion of public accountability which requires that reasons and rationales for limit-setting decisions be publicly available. In organizational limit-setting decisions, it is very difficult to agree on fair outcomes or fair principles. This makes using a clinical decision-making tool for these issues challenging. The goal of this framework is to ensure that a fair process is available for stakeholders to follow, and expectations are set to consider relevant process conditions in the justification of organizational decisions. The five process conditions are outlined below:

<u>Value</u>	<u>Description</u>
Empowerment	Efforts should be made to minimize power differences in the decision-making context and to optimize participation.
Relevance	Decisions should be made explicitly with stakeholder views in mind, and there should be opportunities for stakeholders to be engaged in the decision-making process.
Transparency	Decisions should be publicly defensible. The process by which decisions were made must be open to scrutiny and the basis upon which decisions are made should be publicly accessible to affected stakeholders.
Revisions and Appeals	There should be opportunities to revisit and revise decisions as new information emerges, as well as mechanisms to address disputes and complaints.
Compliance	There should be either voluntary or public regulation of the process to make sure that the other four conditions are met.