**DEFINITIONS**

**Client**: An individual and/or their family/care provider who accesses and/or receives health care related services from a Prairie Mountain Health (PMH) facility or program. Clients may be patients in an acute care setting, residents in a personal care home or clients in a community program or facility.

**Ethics**: The study of morality or moral life: a system for deciding what is right and what is wrong. A systematic way of evaluating values and actions.

“Ethics is basically about the way human beings treat each other and the natural environment; it is the systematic examination of the attitudes and behaviours of people. For our purposes, ethics can be broken down into two parts: it is about carefully studying the values that actually do guide our attitudes and behaviours in given contexts; and it is about exploring what values ought to guide our attitudes and behaviours.” (Jiwani, 2001).

**Ethical Issue**: A problem that involves a moral principle: choosing between what is right or wrong. Common ethical issues may include situations when:

- Client goals conflict with the health care team goals.
- Family goals conflict with the health care team goals.
- Staff member goals conflict with the physician’s goals or vice versa.
- Co-workers’ actions conflict with your values.
- Units, programs, and services disagree in the provision of care responsibilities.
- When there are competing demands for human, financial, and/or physical resources.
- When staff experience moral distress.
- When there is moral residue.

**Ethical Decision Making Framework**: a guide to assist applicable stakeholders to have a systematic process to follow when faced with an ethical dilemma requiring a decision.

The goals of using an ethical decision making framework are to:

- Identify situations that would benefit from consideration of ethical implications
- Promote discussion of ethically relevant considerations with all relevant stakeholders, including the client and family.
- Work toward an acceptable solution or decision that best represents the person’s wishes, balanced against ethical considerations such as policy, professional standards, and best interests.
Ethical Dilemma: A conflict between at least two sets of human values, both of which are judged to be of equal merit, but of which cannot both fully be served.

Ethical Issue Review: An in-depth issue review of the conflicts involved in an ethically difficult situation.

Integrated Ethics: Practices throughout the organization that are consistent with widely accepted ethical standards, norms or expectations for the organization and its staff and incorporated into daily work.

Moral Distress: This occurs when an individual, as a moral agent, is constrained from doing what s/he believes is the right course of action, morally and ethically. Moral constraints may be due to a variety of factors, including legal, social, or institutional barriers. Moral distress creates a situation in which the individual healthcare provider feels as though s/he is compromising her/his moral integrity.

Moral Residue: This is what is left when there is unresolved moral distress. It remains and builds up over time, particularly when morally distressing episodes repeat.

Stakeholder: The people and groups that may be affected by a decision; those who have a legitimate voice in the discussion.

PURPOSE

To provide PMH staff with a standardized process to use when dealing with ethical situations requiring a decision or resolution. PMH recognizes that ethical issues and dilemmas will arise in the provision of care and service.

POLICY STATEMENTS

PMH is committed to deliver quality health services to meet the needs of the population we serve, with integrity, accountability, equity, respect, responsiveness and engagement. Ethical principles and values are to be incorporated into how decisions are made and care is delivered every day. To assist with integrated ethics and ethical decision-making, PMH has adopted an Ethical Decision-Making Framework (Appendix A) for staff to use when dealing with ethical issues.

Upon request, the Ethics Education and Issues Review Committee provide the services of a Level II trained staff to facilitate working through an ethical dilemma using the Ethical Decision Making Framework.

PROCEDURE

Ethical Decision Making Using the Framework

1. When a perceived ethical issue or dilemma is identified by a staff member, physician, or board member, the Manager/Supervisor of the program or site is notified.
2. The Manager/Supervisor (or designate) determines whether the issue brought to their attention is a workplace conflict, labour issue, client concern or other scenario that should be addressed through policy or clinical practice guidelines.
3. If the issue or dilemma is determined to be ethical in nature, the Manager/Supervisor (or designate) oversees the process of gathering information and scheduling a meeting of the stakeholders.
4. The Manager/Supervisor (or designate) guides the stakeholder group through the Appendix A: Ethical Decision-Making Framework and utilizes the Ethical Decision Making Worksheet (PMH958)
to document the discussion. Values, principles, and legal/professional standards are to be considered.

5. The Manager/Supervisor (or designate) has the option to submit a request to the Regional Ethics Committee to identify an Ethics Level II Resource trained representative to facilitate and/or guide the stakeholder group’s discussion. The client and/or family member(s) can be involved at this point or after the stakeholder’s discussion, depending on the circumstances.

6. The viable options addressing the ethical issue are discussed and reviewed with staff, client and/or family member(s) as appropriate.

7. If the stakeholder group reaches a consensus, the plan of action(s) is appropriately documented, implemented, and evaluated. If the stakeholder group is unable to reach consensus regarding the plan of action, the ethical issue can be referred to the Ethics Education and Issue Review Committee.

8. Once information on the decision has been transcribed into the health record/client chart (if applicable) by the appropriate healthcare provider, the documents used during the discussion are to be treated as confidential and need to be disposed of as per PMH policy regarding disposal of confidential information.

9. The Record of Ethical Decision Making form (PMH959) is to be completed at the end of the discussion and forwarded to the Regional Ethics Committee Chairperson. Staff are to ensure there are no client identifiers on the form.

Ethics Education and Issue Review Committee (EEIR Committee)

1. A representative from the stakeholder group with the unresolved ethical issue provides a formal request on the Ethics Issue Review Committee Request form (PMH957) including documentation of the framework discussion and the type of support requested. The request is submitted to the Regional Ethics Committee Chairperson or designate.

2. The Chairperson of the Ethics Committee reviews all requests to determine if the committee is capable of responding to the request. In the event the Committee is unable to respond, alternate resources are identified.

3. The Committee follows the processes defined in Appendix C: Ethics Education and Issue Review Committee Processes.

4. The EEIR Committee member(s) and/or a committee designated representative work through the Ethical Framework with the stakeholder group and discuss options. The client and/or their representatives may also be involved.

5. If viable options for resolution to the issue can be identified, management and/or health care team designate(s) will meet with the client and/or family to discuss options.

6. If consensus can be reached, and the client and/or family is agreeable, the team proceeds with the plan and evaluates, communicating outcomes to the EEIR Committee. If the stakeholders cannot reach consensus or the client and/or family are not agreeable with the plan, other options are reviewed.

7. In the event that the consultation sub-committee or stakeholder group deem it necessary to access the services of a Health Care Ethicist, legal counsel, regulatory bodies, etc., the Regional Ethics Committee will forward the request to the Executive Management Team.

8. The Record of Ethical Decision Making Form (PMH959) is to be completed at the end of the discussion and forwarded to the Regional Ethics Committee Chairperson (ensuring no patient identifiers are on the form).
RELATED MATERIAL

Appendix A: Ethical Decision-Making Framework  
Appendix B: Resolving Ethical Issues Flowchart  
Appendix C: Ethics Issue Review Committee Processes  
PMH957, Ethics Issue Review Committee Request  
PMH958, Ethical Decision Making Worksheet  
PMH959, Record of Ethical Decision Making  
Orientation to the Ethical Decision Making Framework, Video

The Ottawa Personal Decision Guide and the Ottawa Personal Decision Guide for Two have been designed by The Ottawa Hospital Research Institute for the purposes of providing clients and families a tool to assist them in making difficult decisions. The tools are available in multiple languages. While not an Ethical Decision-making Framework, it is an option for staff to share with those struggling with making difficult decisions. The tools are accessible through the web site: https://decisionaid.ohri.ca/decguide.html.

REFERENCES

Bioethics Centre, University of Alberta. (1997).


Appendix A
Ethical Decision-Making Framework

1. Collect Information & Identify Problem
   - Medical Considerations
     - Patient/Client/Resident Preferences
     - Quality of Life Features
     - Contextual Features
   - Values
     - Personal
     - Organizational
     - Social/cultural
   - Principles
   - Legal/Professional Standards

2. Consider Ethical Issues

3. Explore Options
   - Consider all choices
   - Consider the consequences

4. Select Best Choice
   - Make the best possible choice through consensus

5. Implement Plan
   - Ensure that all participants understand the plan
   - Ensure that all participants are clear about the assignment of responsibilities

6. Evaluate
   - Review outcome of the action(s)
   - Make changes as needed

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Steps for Applying the Ethical Decision-Making Framework

To facilitate a comprehensive examination of an ethically charged situation and exploration of possible choices, follow these steps:

1. Collect the information and identify the problem (for the particular situation at that particular time):
   - Gather information and facts from all involved
   - Discuss relevant questions to help sort the information, perspectives and facts of the problem (see page 3):
     - Medical indications
     - Client preferences
     - Quality of life
     - Contextual features

2. Consider ethical issues:
   - While reviewing the problem situation and exploring choices, consider these:
     - Values:
       - Personal
       - Organizational (Integrity, Accountability, Equity, Respect, Responsiveness, Engagement)
       - Social/cultural
     - Principles:
       - Encourage and respect personal choices/decisions [Autonomy]
       - Be truthful – do not deceive [Veracity]
       - Maximize good [Beneficence]
       - Minimize harm [Non-Maleficence]
       - Be fair [Justice]
       - Use best means and skills [Fidelity]
   - Legal/Professional Standards:
     - Legal requirements
     - Professional codes of ethics
     - Employment standards

3. Explore the options:
   - Consider all choices
   - Consider the consequences

4. Select the best choice:
   - Make the best possible choice through consensus

5. Implement the plan:
   - Ensure all participants
     - Understand the plan
     - Are clear about the assignment of responsibilities

6. Evaluate:
   - Review outcomes of the action(s)
   - Make changes as needed
Questions to Help Collect Information and Identify the Problem for Clinical Ethical Issues

Medical Indications
- What is the person’s medical problem? History? Diagnosis? Prognosis?
- Is the problem acute? Chronic? Critical?
- Emergent? Reversible?
- What are the goals of treatment?
- What are the probabilities of success?
- What are the risks involved?
- What are plans in case of therapeutic failure?
- In sum, how can this person benefit by medical, nursing or other care?
- How can harm be avoided?

Patient/Client/Resident Preferences
- Is the patient mentally capable and legally competent?
- Has the patient been informed of benefits and risks, understood this information and given consent?
- What is the patient stating about preferences for treatment?
- Is there evidence of incapacity?
- If incapacitated, who is the appropriate surrogate? Is the surrogate using appropriate standards for decision-making?
- Has the patient expressed prior preferences, e.g. Health Care Directives?
- Is the patient unwilling to cooperate with medical treatment? If so, why?
- In sum, is the patient’s right to choose being respected both ethically and legally?

Quality of Life
- What are the prospects, with or without treatment, for a return to normal life?
- What physical, mental and social limitations is the patient likely to experience if treatment succeeds?
- Are there biases that might prejudice the providers’ evaluation of the patient’s quality of life?
- Has the person expressed any thoughts about his/her condition that indicates they feel that continued life might be judged undesirable?
- Is the patient’s present or future condition such that his or her continued life might be judged undesirable?
- Is there any plan or rationale to forgo treatment?
- Are these plans (maintenance, rehabilitative, preventive or palliative) looking at quality of life?

Contextual Features
- Are there family issues that might influence treatment decisions?
- Are there provider issues that might influence treatment decisions? i.e. conflict of interest
- Are there financial and economic factors?
- Are there religious or cultural factors?
- Is there any justification to breach confidentiality?
- Are there problems of allocation of resources?
- What are the legal implications for the decision?
- Is clinical research or teaching involved?

REFERENCES:
- Norman Regional Health Authority—Framework for Ethical Decision Making—April 2005
- Regional Health Authority Central Manitoba Inc.—Framework for Ethical Decision Making—February 2005

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Ethical Decision Making Flowchart - Resolving Ethical Issues

Perceived ethical issue or dilemma is identified (by client and/or family member, staff member, volunteer, leadership team member, or board member)

Is it a workplace conflict, labor issue, client concern, or other scenario that should be addressed through policy or clinical practice guideline?

Yes

Person identifying the issue to work with health providers and/or appropriate manager to resolve issue as per organizational policy and procedures or clinical practice guideline.

No

Ethical Issue

Involve manager to establish team of staff and physician stakeholders to work through the Ethical Framework. Include Ethics Level II Resource rep if needed. Document framework discussion using PMH958. If appropriate, consider involving the family now or in the next step.

Can consensus be reached?

Yes

Discuss options with staff/client/family as appropriate

Resolved?

Yes

Proceed with plan and evaluate

No

Prepare a formal request to the EEIR Committee using PMH957. Submit completed form to the Regional Ethics Committee Chairperson.

No

Complete PMH959 and submit it to the Regional Ethics Committee Chairperson.

* Where ethical issues involve only staff and internal team members/processes, a similar process should be used.
Appendix C

Ethics Education and Issues Review (EEIR) Committee Processes

Ethics issue review request received by Regional Ethics Committee Chairperson

EEIR Committee member(s) and/or a committee designated representative works through Ethical Framework and discusses options with representatives of care team. Client representatives may also be involved.

Can viable options/resolutions be identified?

Yes

Options for resolution of ethical issue communicated to management and staff stakeholders

Management and health care team designates meet client and family to discuss options to resolve issue.

Is the client/family agreeable with the plan?

Yes

Proceed with plan and evaluate, involving both the health team and the Ethics Education and Issues Review Committee.

No

Review other options; involve other resources such as MB PHEN, clinical ethicists, health provider regulatory bodies, client concerns program, Ombudsman, legal system, etc.

If still no resolution evaluate and consider exploring further options.