

At Community Care Northumberland (CCN), this Integrated Ethics Framework will guide all employees, volunteers, physicians at Ed's House and Board of Directors in their decision making. It also provides a standardized approach to develop core competencies for working through ethical issues and making decisions.

A corporate ethics framework helps support ethical behavior and practices throughout the organization and helps identify and address ethical issues and dilemmas as they arise.

The key resources contained in this Integrated Ethics Framework include:

- **Ethics Consultation procedure**
- **Appendix A:** Our *Mission, Vision, and Values*.
- **Appendix B-1:** The *IDEA Ethics Framework Tool* intended to support client and resident-related ethical decision-making.
- **Appendix B-2:** The *Accountability for Reasonableness (A4R) Ethics Framework Tool* intended to support organizational ethical decision-making and priority setting.

Taken together, these resources provide the foundation and guidance for ethical decision-making at CCN.

DEFINITIONS

Ethical issue: Fundamentally, ethics is concerned with what makes actions right or wrong, or permissible or impermissible. In health and supportive care, the difference between “right” and “wrong” is often less clear, and the decisions we are faced with are rather about deciding which choice is best when faced with less-than-ideal options. Ethical issues arise when values are in conflict with 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 or professional values), between individuals or groups (e.g. a disagreement between staff members or between staff and clients/residents/families), or at an institutional level (e.g. resource allocation issues).

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 with a resident's family the resident's expressed wishes when capable). 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 (Bioethicist): A professional who holds a graduate degree and specialized training in Bioethics.

PROCEDURE

Ethics consultations are facilitated communication and educational processes that support ethical client and resident care. They also promote the integrity of health-care providers and supports, and the health and supportive-care systems on the whole. Ethics consultations can be provided for clinical (client/resident) 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 clients/residents, family members, health-care providers, physicians, administrators, board members, and volunteers. While ethical issues should aim to be addressed as close to the issue as possible (e.g. with the resident-care team if a clinical issue), CCN supports that the ethicist can be accessed by anyone, at any time, and for any reason, without fear of retribution.

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.
- To facilitate an ethical decision-making process.
- To promote reflective practice.
- To help address moral discomfort or moral distress experienced by staff members and physicians.
- To enhance the capacity of stakeholders to identify ethical issues and use appropriate frameworks/approaches toward ethical decision-making. See Appendix B-1 and B-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 and support.

The Ethicist and Chief Executive Officer are accountable for this Framework at CCN. Accountability is monitored by the Senior Leadership Team, and Board of Directors.

ACCESS TO CONSULTATIONS

Requestor of Consultation	When an issue of ethical concern arises with respect to the support or care of an individual client/resident or clients/residents in general, and when those who have made initial attempts to address the ethical issue(s), for example, by using the framework set out in Appendix B, believe they could benefit from assistance in this area, a request for such assistance may be made, at any time, to the Ethicist by: ● a client/resident. ● a family member directly involved in the support or care of a client/resident. ● the client/resident's legal guardian. ● a member of the team directly involved in the client/resident's support or care. ● any CCN employee, physician, board member, or volunteer concerned about an ethical issue related to clinical care or organizational practice. Although individuals involved in the client/resident's support or 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 client/resident's record or preventing others from requesting or participating in a consultation). A request for an ethics consultation can be submitted by e-mail at ethics@commcare.ca or by calling the Ethicist directly at 905-375-2716.
	After a consultation request has been received, it will proceed in the following manner: Step 1: <u>Requesting the consultation.</u> This request will be received by the CCN Ethicist and will be followed-up within 2 business days of receipt of the request. More urgent requests will be treated on a case-by-case basis. This follow-up will clarify from the individual requesting the consultation the reason for the request (i.e., the ethical question

Ethicist	or issue) and the pertinent background information. Depending on the situation, this follow-up may be done in person, over the phone or videoconference, or through e-mail. For consultations concerning a client/resident's support or care, the gathering of background information may involve speaking with other relevant stakeholders (e.g. employee, client/resident, family members) and reviewing the resident's health record if applicable. Step 2: <u>Determining the level of response required.</u> Consultations may be completed over the phone or via e-mail 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 client/resident/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. Step 3: <u>Consultation with others as appropriate.</u> To assist with the resolution of an ethical issue, the Ethicist may seek input from other professionals. These may include other staff members at CCN, or colleagues from the University of Toronto Joint Centre for Bioethics. Client/resident privacy and confidentiality will be maintained in keeping with applicable laws and policy at CCN. Step 4: <u>Ongoing involvement (if required) and follow-up.</u> Some situations may require ongoing ethics support, such as policy-related and organizational issues or complex clinical cases that evolve over time. It will be the responsibility of the requestor to seek follow-up if concerns persist, or if they believe the situation could benefit from ongoing or additional ethics support.
NOTIFICATION	
Ethicist	When a request for an ethics consultation is received directly from a client/resident and/or family member, notify the Most Responsible Practitioner if applicable, and the Director or delegate to inform them of the consultation request, if they were not already involved in the request to consult.
DOCUMENTATION	
Ethicist	When a consultation involves direct client/resident or family contact, and the decision relates to the support or care of the client/resident, the Ethicist may document directly in the client/resident's record.

Ethicist	Enter every consultation into the Ethics Consultation Database for statistical monitoring of activities. This information is used to identify trends in the organization's ethical issues, challenges, and situations. The de-identified aggregate information will also be brought to the attention of relevant groups, including: the Senior Leadership Team (SLT), and Board of Directors annually, and may be presented to others at their request. Information entered in the database or presented to additional CCN committees is de-identified and is meant to capture general activities and specific types of consultation requests for the generation of departmental reports and does not contain identifiable Personal Information (PI), or Personal Health Information (PHI).
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: <u>Ethics Debriefing</u> 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. In particular, 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. <u>Ethics Education</u> 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. <u>Policy Review or Development</u> 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, in keeping with applicable laws and CCN policy. Additionally, through the Ethicist's association with the University of Toronto, Joint Centre for Bioethics, specific cases may be brought forward to the Clinical, Organizational and Research Ethics (CORE) 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.

Appendices

Appendix A: Our Mission, Vision, and Values

Appendix B-1: IDEA Ethical Decision-Making Framework Tool

Appendix B-2: Accountability for Reasonableness (A4R) Decision-Making Tool

References

Accreditation Canada, Qmentum. (2019). Standards – Governance.

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Byskov J, et al. (2017). The need for global application of the Accountability for Reasonableness approach to support sustainable outcomes. *International Journal of Health Policy and Management*, 6:2.

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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

Markham Stouffville Hospital Integrated Ethics Framework, 2018

Ontario Hospital Association, Guide to Good Governance, second edition

Toronto Central CCAC - Community Ethics Network. July 2008 document entitled, "Ethical Decision-Making in the Community Health and Support Sector, Community

APPENDIX A: Our Mission, Vision and Values

Mission

To connect our communities to the support, service and care they need throughout their lifelong journey.

Vision

A community where people experience connection and well-being.

Our Values

Relationships: we enter each relationship with care, ensuring equity, respect and collaboration.

Accountability: we approach our work with integrity while balancing the voices of the people, community and funders.

Community: we are engaged partners and together we celebrate our strengths and respond to the needs of the community.

Compassion: we deliver meaningful services supporting dignity and belonging through empathy, collaboration and inclusivity.

APPENDIX B-1: IDEA ethical decision-making framework

Thinking about ethics is an integral part of service delivery for all involved in health and supportive care. Ethics is about making the best available choices and providing reasons for those choices. Unfortunately, which options are best can often be unclear. It is for this reason that the IDEA framework was developed. This framework 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 and supportive care.

The IDEA ethical decision-making framework¹

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| <ol style="list-style-type: none"> 1. IDENTIFY the facts 3. EXPLORE the options | <ol style="list-style-type: none"> 2. DETERMINE ethical principles in conflict 4. ACT and evaluate |
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CROSS REFERENCE

<u>Step 1: Identify the Facts</u> Identify what is known versus what is not known: ● Situational (Medical) Indications ● Client/Resident Preferences ● Quality of Life, and ● Contextual Features 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.	<u>Step 2: Determine Ethical Principles in Conflict</u> Identifying the ethical principles in conflict will not provide solutions; however, this step will assist in further clarifying and articulating the issues. Common ethical principles to consider might include, but are not limited to: ● Autonomy ● Beneficence (or doing good) ● Non-maleficence (or doing no harm) ● Justice
<u>Step 3: Explore Options</u> 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). Do the options fit with the client/resident's preferences? Do the options comply with policy and law?	<u>Step 4: Act and Evaluate</u> Develop and document the action plan in the client/resident's chart. 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. Self-evaluate your decision. What have you learned?

Please contact the Ethicist if you would like assistance using this tool, or if you have an ethical issue or concerns: ethics@commcare.ca

¹ (Modified from TORONTO CENTRAL COMMUNITY CARE ACCESS CENTRE (COMMUNITY ETHICS NETWORK), JULY 2008 document entitled, "Ethical Decision-Making in the Community Health and Support Sector, Community Ethics Toolkit")

APPENDIX B-2: Accountability for Reasonableness (A4R) ethical decision-making framework

Community Care Northumberland has adopted an organizational ethical decision-making framework, the **Accountability for Reasonableness (A4R)**, to aid decision makers throughout the organization in setting priorities and reaching decisions that are legitimate and fair.

What is Accountability for Reasonableness (A4R)?

Accountability for Reasonableness (A4R) is an ethical framework that describes the conditions of a *fair decision-making process*. It focuses on *how* decisions should be made and *why* these decisions are ethical.

There are five conditions that optimize fairness in the process of decision-making:

<u>Value</u>	<u>Description</u>
Empowerment	In order to minimize power differences, efforts should be made to adequately involve relevant stakeholders into decision making.
Relevance	Decisions should be made explicitly with stakeholder views in mind, and should be based on the best available evidence.
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 should they arise.
Compliance	There should be either voluntary or public regulation of the process to make sure that the other four conditions are met.

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