VANCOUVER COASTAL HEALTH
ETHICAL DECISION MAKING FRAMEWORK

Introduction

Every society, community, organization, and person operates routinely with various codes of right or good conduct (moral codes) that they take for granted. In health care, over the last fifty or more years, new medical technologies and procedures, together with increased cultural and religious pluralism and diverse moralities, has led to the rise of various moral questions and conflicts not covered by standard moral codes. Given these challenges, how is the right, the good and the fitting action or course of care to be discerned?

This framework for ethical decision-making has been developed to facilitate ethical decision-making in the context of inter-professional practice. Within this framework, decision-makers are understood to include the client/patient/resident (hereafter referred to as 'client'), family/significant others, and the concerned members of the health care team. In using the framework, all these decision-makers will be involved in every element of the process including obtaining information, determining possible options and choosing the most appropriate option. There are several key principles underlying the framework, including the following:

- Complex issues should not be addressed in isolation.
- All involved parties should have the information needed to come to a decision.
- Communication should be honest, open and transparent.
- Relationships should be respectful.
- Promises should be kept.
- There should be an awareness and accommodation for differences in position and power.

What Is The Purpose Of An Ethics Framework?

The purpose of an ethics framework is to guide clinicians who are faced with situations involving complex ethical dimensions. The framework includes considerations that should be taken into account, ethical principles that should be upheld as much as possible and a process to be followed.

The VCH Ethics Service should be contacted whenever clinicians require additional support with ethical issues.

What Is The Focus Of An Ethics Consultation /Discussion?

An ethical consultation/discussion is different than a clinical or legal consultation since the focus of the discussion is on ethical concerns which are then examined using the following principles, considerations and values:

1. **Principles Of Health Care Ethics**
   a. **Autonomy** – One should have respect for persons, honour choices and avoid constraining the autonomous actions and choices of others. This includes attention to:
      i. Informed consent: One should provide the information required to make an informed choice.
      ii. Veracity: One should tell the truth and not lie or deceive others.
      iii. Confidentiality/privacy: One should, with very limited exceptions, respect the client's right to determine to what extent information about the client should be communicated to others.

      iv. Cross-cultural awareness and sensitivity: One should seek to learn about cultural considerations important to clients or colleagues and respect these.

      v. Fidelity: One should keep promises and nurture relationships that others can trust.

  b. **Nonmaleficence** – One should do no harm to clients and/or others.

  c. **Beneficence** - One should do good, prevent harm, remove harm and promote good/well-being.

  d. **Justice** – One should be fair, treat similar cases equally, use fair procedures and aim to produce just outcomes.

> ➤ Have all the above principles been taken into consideration in assessing which treatment or course of care is most ethically appropriate?

2. **Care & Relationships**
One should build and maintain positive relationships, with open respectful communication with all involved. One should seek to make the decision-making process as caring as possible by supporting clients, their families and health care providers to deal with loss, grief, and/or uncertainty.

> ➤ Are we actively seeking to build positive, honest and safe relationships with all concerned?

> ➤ Are we treating the client as inherently worthy of our skill, attention and expertise?

3. **Worldview & Culture**
One should have understanding of one's own basic convictions (i.e. usually taken for granted or "of course" beliefs about what is true about the world and what we should value) and consider how these may influence one's understanding of a client who has different beliefs. Examples of belief systems or basic convictions include:

- What is the worth or value of human life even when impaired?
- What constitutes full human personhood?
- When does human life begin and end?
- What is the meaning of death?
- What constitutes human well-being and health?

> ➤ Are we aware of how our own values and beliefs (including the culture of healthcare) are influencing our understanding of a client who has different beliefs?

4. **Moral Character & Disposition**
One should exhibit traits of kindness, caring, patience and courage. One should seek to have good character (i.e. the inner and distinctive core of a person from which moral decisions and actions spring) and virtue (i.e. a good disposition/trait of character that is a persistent tendency to act in a certain manner or way) even when no one else is watching. Examples of virtues in health care include:

- Kindness and caring
- Hope and patience
- Fortitude and courage
- Humour

> ➢ Out of all the available options, is the proposed treatment or course of care in accordance with the kind of person I seek to be and the kind of community I seek to foster?

What Is Included In The Process For Making Ethical Decisions?

It is important to note that the process is not necessarily linear. The aim is for the best possible choice.

Steps:

1. Identify the current issue of concern.

    - What is the ethical issue?
    - Why is there difficulty in coming to a decision?

2. Gather the relevant information.

    - Gather and interpret information relevant to the concern/case from all relevant sources (e.g. client, chart, client's supports, health care professionals (HCPs) involved).
    - Identify the health care team members involved and other health professionals from whom input should be sought.
    - Identify any assumptions made and missing information.
    - Include a family assessment; their roles, relationships, and relevant 'stories'.
    - See quadrants on next page **for possible issues** to consider. **These will vary from case to case.**

Medical/other information (Examples)	Client Preferences (Examples)
- Diagnosis - Prognosis - Mental health - Emotional well-being - Goals of treatment - Probability of success - Benefits & harms of options - Facts in question or dispute - Unknowns that can or cannot be determined	- Capability of client - Capable client choice - Incapable client current preference - Incapable client prior preferences - Substitute decision-maker (SDM) – designation and preferences - Client/SDM informed of benefits, risks, alternatives
Client Well-being (Examples)	**Contextual Features (Examples)**
- Prospects with/without treatment (short & long term) - Client and HCPs values re: evaluating client well-being - Factors other than medical procedures that will improve client well-being - Client's past experience with likely/prospective scenarios - Restrictiveness of setting – home vs. facility	- Family perspectives/issues - HCPs perspectives/issues - Stage of life - Cultural/ethnic/religious/spiritual issues - Language - Financial situation - Living conditions - Access to care - Resource issues - Legal issues – risk management and the law **Risk issues (Examples)** - Risk to client and/or others - Nature of risk - Probability of risk of harm - Severity/permanency of risk outcome - Possibility of reducing risk of harm

3. Identify and be aware of your personal values, biases, self-interest and stressors that may impact a decision.

4. Identify all options that may help resolve the situation.
   - Be creative.
   - Tailor the options to the client's particular circumstances.

5. Identify how various alternatives might be implemented (e.g. time trials).

6. Use the points from "What is the focus of an ethics consultation/discussion?" section to evaluate alternative courses of action.

7. Select the best alternative. **Explain the rationale for your recommendation** and how it should be implemented.

8. Consider how the plan will be evaluated.

9. Document as per VCH best practice/policy.

References

Jonsen, A.R., Siegler, M., & Winslade, W.J. (2006). *Clinical ethics: A practical approach to ethical decisions in clinical medicine (6th ed).* New York: McGraw Hill, Medical Pub. Division.

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