

Ethical Decision-Making  
in the Community Health and Support Sector

# Community Ethics Toolkit



Community Ethics Network



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## Introduction

Ethical dilemmas are frequently encountered by community health and support workers, including case managers, nurses, personal support workers, physicians, allied health professionals, and others. Acknowledging the lack of adequate resources within the community sector to support staff in dealing with such complex issues, a common approach for ethical decision-making was developed and trialed across 12 community organizations. The goal of the common approach was to enhance practice around ethical decision-making in the community health sector. This would mean that all members of the community health care team, regardless of their discipline or the organization in which they are employed, would have access to the same resources and would approach ethical dilemmas in a similar manner. This, in turn, would facilitate collaboration in delivering client-centered care, improve worker satisfaction, and achieve greater consistency in practice across the sector.

Based on the results of the pilot and the feedback received, the Community Ethics Toolkit was developed. This toolkit was created to facilitate the broader implementation of the common approach for ethical decision-making across the Community Health and Support Sector.

The toolkit consists of the following components:

1. Code of Ethics for Community Health and Support Sector
2. Decision-making worksheet
3. Guidelines for using the decision-making worksheet
4. Guidelines for conducting case reviews
5. Additional resources

Although organizations interested in applying the toolkit to their setting may choose to modify its contents to better reflect their own needs, it is requested that any modifications be forwarded to the Toronto Central Community Care Access Centre at [frank.wagner@toronto.ccac-ont.ca](mailto:frank.wagner@toronto.ccac-ont.ca).

To facilitate sharing, the Community Ethics Toolkit is available electronically at <http://www.jointcentreforbioethics.ca/partners/cen.shtml>

## Background

The development of a common approach to ethical decision-making in the community health sector is the result of an ongoing collaborative initiative among the Community Care Access Centres of Toronto, local community organizations, and the Joint Centre for Bioethics at the University of Toronto. The collaborative initiative commenced in the fall of 2000, through funding from Human Resources Development Canada (HRDC), to examine the human resource issues affecting the recruitment and retention of community workers. One of the final recommendations of this project addressed the need for developing cross-sectoral supports to assist staff with practice-based ethical issues. Since then, key milestones have been reached, working towards establishing a common approach for ethical decision-making. In the spring/summer of 2003, a decision was made to further define and pilot the components of the common approach. The pilot was completed in 2004, and in 2005 the Community Ethics Network was launched.

## Network Goals, Objectives and Priorities

The Community Ethics Network (CEN) is a network of community health partners committed to working together to:

- Support ethical decision-making within and across its member organizations
- Build ethics capacity in the community health sector including clients, families, and the public
- Become a leader in developing best practices in community health ethics

Goals:

- Develop a common approach that will enhance practices around clinical ethical decision-making in the Community Health and Support Sector
- Support the network membership in meeting accreditation standards

This continues to lead to better client outcomes, improved staff satisfaction, and greater consistency in practice across the community sector.

Objectives:

- Increase staff awareness and understanding of work-based ethics
- Enable staff to identify when they are encountering ethical issues
- Help staff resolve ethical dilemmas they are experiencing
- Provide resources so agencies can seek additional support when needed

## **Priorities**

Develop:

- Mechanisms to proactively identify emerging issues/trends
- Mechanisms to capture quality improvement
- An education strategy
- A quarterly speaker series specific to community ethics
- A database of community cases for teaching materials
- An ethics curriculum in conjunction with universities and community colleges in inter-professional education for front-line workers

Continue to:

- Conduct case review sessions
- Participate in weekly ethics rounds at the Joint Centre for Bioethics (JCB)
- Participate in the Summer Institute at the JCB
- Provide resources via the JCB website link
- Participate in ongoing research

## **Network Membership**

It is our intention to have membership which reflects multiple organizations that provide health care in the community. Both professional and non-professional staff will be represented as members, including those who provide direct care, equipment and supplies, and formal education. In addition, the organization is linked with the Joint Centre for Bioethics (JCB) and organizations which monitor quality of health care delivery.

## Tools Developed

### **Community Code of Ethics**

A way of articulating the common values identified for the community sector. Its development was a consensual process involving numerous key stakeholders.

### **Decision-making Worksheet**

A step-by-step tool that guides staff through a comprehensive process. Takes into account the facts, emotions, ethical principles, various alternatives and their consequences, and an evaluation of the outcomes.

### **Case Review Collection**

A collection of case review narratives developed with front-line workers for the purpose of providing real-life examples in community health settings for teaching and discussion.

### **Ethical Collaboration**

Network members have the opportunity to bring forward and share ethical issues related to the Community Health and Support Sector in a collaborative and supportive peer environment.

Network Members have the opportunity to consult on systemic ethical issues with members of the Joint Centre for Bioethics.

It is anticipated that the Network will be increasingly involved in the identification and promotion of future research in the area.

The Network aims to make the common approach available to a greater number of organizations by widely distributing the Community Ethics Toolkit.

# Code of Ethics for the Community Health and Support Sector

The Code of Ethics was created to express the common values of the community sector, and to serve as a common foundation. When confronted with an ethical dilemma, the Code of Ethics can be used to assist employees in identifying the issues at hand and the areas of tension. Expanding on the more commonly known ethical principles (i.e., autonomy, beneficence, non-maleficence and justice), additional principles have been incorporated to reflect the unique considerations of the community sector. Furthermore, the Code is written in layman’s terms to facilitate its interpretation.

A total of ten principles are addressed in the Code:

- Advocacy
- Client and Employee safety
- Commitment to quality services
- Confidentiality
- Conflict of interest
- Dignity
- Fair and equitable access
- Health and well-being
- Informed choice and empowerment
- Relationships among community agencies

See page 16 for a complete version of the Code of Ethics.

## Overview: Ethical Decision-Making Worksheet

The decision-making worksheet was created to provide a step-by-step tool to guide staff through the process of resolving an ethical dilemma. Comprised of four key sections (which can be identified by the acronym “IDEA”), the worksheet takes into account the facts, ethical principles, various alternatives and their potential consequences, and an evaluation of the outcomes.

The decision-making worksheet can be utilized in several ways, including:

- When a staff member is out in the field and is faced with an ethical dilemma
- During a formal or informal case review (i.e., as a framework to facilitate the discussion)
- For information-sharing purposes (i.e., to communicate the lessons learned)

Through its application, the decision-making worksheet will assist staff to address complex and challenging issues in a comprehensive and logical manner. As required (e.g., during a case review or audit), the decision-making worksheet can also be used to justify challenging decisions that were made.

Remember:

- Document the actual plan in the chart
- Seek help if necessary and consult with the person you report to

## Guidelines for Using the Ethical Decision-Making Worksheet

1. **Identify** the facts
2. **Determine** the ethical principles in conflict
3. **Explore** the options
4. **Act** on the decision and evaluate

### Step 1: Identify the facts

Gather information/facts on the case: the purpose of this section is to identify what is known versus what is not known. Using the categories of Medical Indications, Client Preferences, Quality of Life, and Contextual Features, users are prompted to take into account all of the relevant considerations and stakeholders; this often includes facts that may not be known initially.

An important step included in Quality of Life is reflection on one's emotions, feelings, and values as they may influence how one responds or reacts to a particular situation. It is important for the employee to be aware of such emotions/values/biases and to act accordingly (e.g., if they cannot remain objective, they should remove themselves from the situation and ask a peer/manager to become involved).

Furthermore, it is also important to consider the thoughts, emotions and cultural traditions of the client and other relevant stakeholders (e.g., family, caregiver, etc.) as this can assist the employee to further understand the issues.

### **Step 2: Determine the ethical principles in conflict**

Identifying the ethical principles in conflict will not provide solutions; however, this step will assist in further clarifying and articulating the issues. You may find that there is no ethical dilemma (e.g., that it is purely a legal issue). In this case, the decision-making framework can still be applied to assist with the resolution of the issue.

### **Step 3: Explore options**

Explore options and consider their strengths and weaknesses. 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). The selected option is not necessarily the one with the highest number of positive considerations and/or the lowest number of negative considerations. Each option must be rated based on the magnitude of its advantages and disadvantages.

### **Step 4: Act on your decision and evaluate**

Develop an action plan. Once the decision has been made, document the action plan in the client's chart. Also, decide how to communicate the plan to the client and relevant stakeholders in order to maximize acceptance and understanding. Ongoing communication with the client and other stakeholders is critical.

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. These types of situations are often difficult for employees and can be emotionally exhausting. Not only is it important to reflect on the decision-making process and outcomes achieved, it is also important to reflect on one's feelings with respect to the situation.

## Guidelines for Conducting Case Reviews

Case reviews consist of a forum whereby staff can have the opportunity to engage in a group discussion about a particular case in an open and non-threatening environment. One of the most prominent findings of the pilot project was staff's request to continue providing case reviews on a regular basis. As expressed by one participant, "It is extremely useful to have the opportunity to openly discuss a case with your peers and supervisor. You see things in a different way by doing so—when else do we have the opportunity to learn from each other?"

1. Case reviews can be used to help resolve current issues, or can be used with cases on a retrospective basis to reflect on previous decisions made. The lessons learned from case reviews may be shared with others throughout the organization through staff memos, lunch and learns, etc.
2. Participants should include both front-line employees (e.g., nurses, case managers, personal support workers) and managers/supervisors. Consideration may also be given to inviting other key players such as other individuals involved with the client.
3. It is important that time be taken at the beginning of the process to gather all of the facts, as this allows for a more effective use of the process and the tool.
4. The Code of Ethics for the Community Health and Support Sector can be reviewed prior to using the worksheet. This will assist in providing context for the discussion.
5. The worksheet should be worked through one section at a time. Prompting questions in italic (located at the top of each section) can help to guide the process.
6. It should be noted where additional information is needed (e.g., do you need to consult with a lawyer to clarify an issue?).
7. As required, a follow-up meeting should be scheduled to review outcomes.

# Ethical Decision-Making Worksheet

- I** Identify the facts
- D** Determine the ethical principles in conflict
- E** Explore the options
- A** Act on your decision and evaluate

## Step 1: Identify the Facts — 4 Box method

### Medical Indications

State the client's medical problem, history, and diagnosis; is it acute, chronic, critical, emergent, and reversible? Goals of treatment? Probabilities of success? Plans in case of therapeutic failure? Potential benefits of care? How can harm be avoided?

### Client Preferences

State the client's preferences. Do they have the capacity to decide? If yes, are the client's wishes informed, understood, voluntary? If not, who is the substitute decision-maker? Does the client have prior, capable, expressed wishes? Is the client's right to choose being respected?

### Quality of Life

Describe quality of life in the client's terms, the client's subjective acceptance of likely quality of life, and views and concerns of the care providers. Examine the emotional factors influencing each individual, such as existing feelings, values, biases and prior experiences.

### Contextual Features

Any other family involved or significant relationships? Any care plans put in place so far? Relevant social, legal, economic, and institutional circumstances? Other relevant features, e.g., religious and cultural factors, limits on confidentiality, resource allocation issues, legal implications, research or teaching involved, provider conflict of interest?

Adapted from Jonsen, Albert, Siegler, Mark and William J. Winslade. *Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine* Publisher: McGraw-Hill Medical; 5 edition (May 22, 2002).

# Step 2: Determine the Ethical Principles in Conflict

## Identify ethical issues

What ethical principles are in conflict? Refer to the Code of Ethics for the Community Health and Support Sector on page 16 for further details.

Principle	Explain the Issue

# Step 3: Explore Options

## Explore options and consider their strengths and weaknesses

Brainstorm and discuss options either alone or with peers. Be creative and use your imagination. Consider a compromise. Predict the outcomes for each alternative. Does the alternative fit with the client/family values? Question whether the alternative meets the company policies, directives and regulations.

Option	Strengths	Weaknesses

## **Step 4: Act on Your Decision and Evaluate**

**Develop an action plan** (The actual plan should be documented in the chart.)

Given all the information that you have, choose the best option available. Develop an action plan. Present your suggested alternative and action plan to the client and those involved in such a way that it allows them to accept the plan. Re-examine the alternatives if other factors come to light, if the situation changes, or if an agreement cannot be reached. Determine when to evaluate the plan. Document and communicate the plan.

### **Evaluate the plan**

What was the outcome of the plan? Are changes necessary? Document the evaluation.

### **Self-evaluate your decision**

How do you feel about the decision and the outcome? What would you do differently next time? What would you do the same? What have you learned about yourself? What have you learned about this decision-making process?

# CODE OF ETHICS FOR THE COMMUNITY HEALTH AND SUPPORT SECTOR

**W**e, as employees of Community Health and Support Sector organizations, are committed to being an integral part of the communities we serve. We are responsible for: acting professionally and in a client-centred manner; upholding the dignity and honour of our clients; and practising in accordance with ethical principles. This Code of Ethics is intended to provide us with specific ethical principles to address situations that we may encounter, and to guide us in our relationships with clients, family members and others in the support team, other health care practitioners, and the public. This code is intended to complement laws, codes and standards of professional practice.

**Advocacy:** We have the responsibility to help improve the awareness, the accessibility and the quality of our services by advocating on behalf of our clients. We will seek guidance both internally and externally from our organization for those situations that could place the organization and/or its clients at risk.

**Client and Employee Safety:** We recognize that the community setting represents a unique environment for community and health sector employees. We will take available steps to assess and minimize risk to clients, while being sensitive to their wishes. We will also take necessary measures to ensure the personal safety of employees, and safety concerns of both clients and employees will be reported and addressed in a supportive and non-threatening way. After all options have been considered, we may withdraw services if employee safety is compromised.

**Commitment to Quality Services:** We are committed to providing the highest quality services that will benefit our clients within available resources.

**Confidentiality:** Client information is confidential; we will ensure that clients and their legal substitute are informed of their right to consent to the sharing of necessary information with individuals and organizations directly involved in the client's care.

**Conflict of Interest:** We will not compromise services to our clients for our own personal benefit.

**Dignity:** In all our interactions we will demonstrate profound respect for human dignity. We will be responsive and sensitive to the diversity among our clients and staff groups.

**Fair and Equitable Access:** We believe that each individual is entitled to an assessment. We will ensure that services are based on clients' needs, regardless of their income, age, gender, ethnicity or race, physical or mental ability, and any other factors such as diverse behaviors or lifestyle.

**Health and Well Being:** We will use a holistic approach to clients' health care needs by acknowledging all things important to them in their community.

**Informed Choice and Empowerment:** We believe that most individuals have the ability and the right to make decisions about their health. We will assist clients to make care plans and life choices in keeping with the client's values, beliefs and health care goals. We will ensure that clients are fully informed of their options and have all the information they need to make informed decisions about their health. Following due process, if the client is determined to be incapable of making these decisions, we will take directions from the client's legal substitute.

**Relationships Among Community Agencies:** We recognize there may be a competitive element in our working relationships, however we agree to respect one another's roles and to work together in the spirit of collaboration to maximize the effectiveness of client services.

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## Additional Resources

### Websites

Community Ethics Network (CEN)

<http://www.jointcentreforbioethics.ca/partners/cen.shtml>

University of Toronto Joint Centre for Bioethics

<http://www.jointcentreforbioethics.ca>

Canadian Bioethics Society

<http://www.bioethics.ca>

The Canadian Resource for Hospital Ethic Committees

[www.ethicscommittee.ca](http://www.ethicscommittee.ca)

Bioethics.com

<http://www.bioethics.com>

Provincial Health Ethics Network (Alberta)

<http://www.phen.ab.ca/>

### Books

Provincial Health Ethics Network (Alberta) Library Listings

<http://www.phen.ab.ca/library%5Fbooks/>







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