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Applies to: All Hamilton Health Sciences (HHS) staff, Hospital Affiliates, members of the Medical, Dental and Midwifery staff.

1.0 Purpose

1.1 Ethics is part of life in healthcare. Patients, families, staff, physicians, leaders, learners and volunteers—everyone makes ethical decisions on a daily basis. Our ethical decisions and behaviours are rooted in our individual, professional and collective values.

Ethics is not just about following rules. It is about stopping to reflect on options and making choices, considering the relevant duties, principles, harms and benefits.

Typical ethical questions include:
- **What** should we do? (Determining which actions are good or right.)
- **Why** should we do it? (Exploring the reasons for our decisions.)

- **How** do we engage in decision-making? (Ensuring a fair process.)
- **Who** should be involved? (Engaging appropriate stakeholders.)

Health care organizations and personnel have particular ethical obligations stemming from their responsibilities to:
   a) treat illness and enhance well-being for patients, families and the community
   b) protect vulnerable persons
   c) use public funds wisely
   d) ensure the safety and engagement of workers
   e) encourage ethical research and innovation to improve health and health services
   f) engage in evidence-informed practice and quality improvement and
   g) develop the next generation of health care providers.

Any member of the healthcare team and organization may experience ethical issues or dilemmas, including patients and families, staff, leaders, trainees, physicians, volunteers, contractors and Board members.

All members of the HHS community have a responsibility to identify ethical issues in their practice and to address them appropriately in a timely manner, in accordance with their role/scope.

In addition to this Ethical Framework, and the resources outlined in 3.2, individuals may speak to their manager, practice chief or leader when navigating ethical issues.

The Hamilton Health Sciences Ethical Framework has two purposes:
   1. To provide a common approach to guide ethical decision-making for both clinical and organizational ethical issues across the hospital;
   2. To outline the structures and resources available to support ethical decision-making and to grow an ethical culture across the hospital, from bedside to boardroom.

2.0   Equipment/Supplies
N/A

3.0   Policy
3.1   General Statements
3.1.1   HHS Values
The values of HHS are:
- Respect: We will treat every person with dignity and courtesy.
- Caring: We will act with concern for the wellbeing of every person.
- Innovation: We will be creative and open to new idea and opportunities.
- Accountability: We will create value and accept responsibility for our activities.

HHS also has a **Values-Based Code of Conduct** designed to create a safe/respectful workplace for all. The Code of Conduct applies equally to everyone, at all levels in the organization, to promote a collegial and positive work environment.

The Ethical Framework provides guidance to promote ethical decision-making and resources to support all members of the HHS community to practice in accordance with the Values of HHS.

3.2 Resources
3.2.1 Ethical issues may challenge our core values, beliefs and identities; these issues may cause moral and/or emotional distress as well as interpersonal conflict and impact decision-making and service delivery. Thus, it is an expectation of all staff/physicians/leaders to identify and address ethical issues as soon as possible. There are many resources available at HHS to support ethical decision-making.

More information about Ethics Resources is available at the [HHS Program for Ethics and Care Ecologies (PEaCE)](#) HUB site.

3.2.2 Ethical Decision-Making Process
HHS has adopted the **ISSUES Ethical Decision-Making Process** to help individuals and teams work through ethical issues. This process is outlined in the Procedure (4.1) and summarized in a worksheet in [Appendix 1](#).

[Appendix 2](#) outlines Guidelines for Making Ethical Decisions With Teams/Groups using the ISSUES process.

3.2.3 Refer to Hospital Policy
Many hospital policies or guidelines may help you to address ethical issues. See [other HHS references](#) (8.0) below for a list of ethics policies.

3.2.4 Supports for Morally Distressing Situations
Ethical issues may create moral distress and may lead to individual and/or collective trauma responses. HHS has internal resources that support individual patients/families, staff, teams, leaders, physicians and learners while navigating through stressful ethical issues.

- **Resilience Integration Specialists (RIS)**: RIS facilitate team/group debriefs for high-stress, high-trauma situations, provide referrals, education and coaching on how to approach and address moral distress and educate about occupational stress and the techniques needed to restore balance. **The RIS team can be contacted by email at resilience@hhsc.ca**; more information is available on the [Resilience HUB page](#).

- **Psycho-Spiritual Practitioners (PSP):** PSPs support patients, families and healthcare teams to identify and reflect on their feelings, thoughts, values and beliefs. PSPs recognize the personal impact of working in healthcare and that challenging decisions can be experienced as traumatic. PSPs provide a confidential space for patients, families, staff and clinicians to process how they are impacted by ethical issues and to connect to resources. PSPs may also offer ritual and other resources from humanist traditions or world religions to honour significant events. **The PSPs can be contacted by email at psychospiritualcare@hhsc.ca**; more information is available on the [PSP HUB page](#).

3.2.5   Specialized Ethics Resources and Services
If you or your colleagues/patients/families need support to address an ethics issue there are a wide range of specialized ethics resources available to help.

All HHS patients, families, staff, physicians, leaders and learners are welcome to contact the appropriate resource, depending on the nature of the ethical issue:

- Clinical Ethics Consultation: For questions that evoke moral distress, or involve disagreements, concerns or uncertainties about a patient's care, treatment or discharge.

- Patient Experience: For questions involving the quality of patient care, patient safety, complaints/concerns or communication with patients.

- Quality Care Consultation: For questions involving patient safety occurrences, issues involving clinical risks and/or legal considerations.

- Privacy: For questions about access to, disclosure or use of personal health information.

- Organizational Ethics: For questions about workplace issues including: conduct; workplace violence; harassment and discrimination; equity, diversity and human rights; conflicts of interest or financial wrong-doing.

- Research Ethics: For questions involving concerns about research participation, risks and compliance.

See Appendices for details of these resources and their ethical decision-making support services.

3.2.6   Help with Uncertainty
If you are not sure which resource is appropriate for your concern/question, or you don't know where to start to address an ethics issue, please contact the **Ethics Consultation Service through Paging 905 521-2100, extension 76443** or email officeofethics@hhsc.ca and your question will be directed to the most appropriate place.

Ethics Consultation is available Monday to Friday from 8:30am to 4:30pm. After hours leave a message at officeofethics@hhsc.ca and you will receive a response the next business day.

4.0   Procedure
4.1   Ethical Decision-Making Process
4.1.1   Identifying an ethical issue
Here are some signs that you or your team may be experiencing an ethical issue or dilemma:
- Are you wondering: "What is the right thing to do?"
- Are you or other people involved experiencing worry, confusion, distress or guilt about an issue?
- Are you feeling caught between two or more obligations, such as respecting choice and using resources wisely?
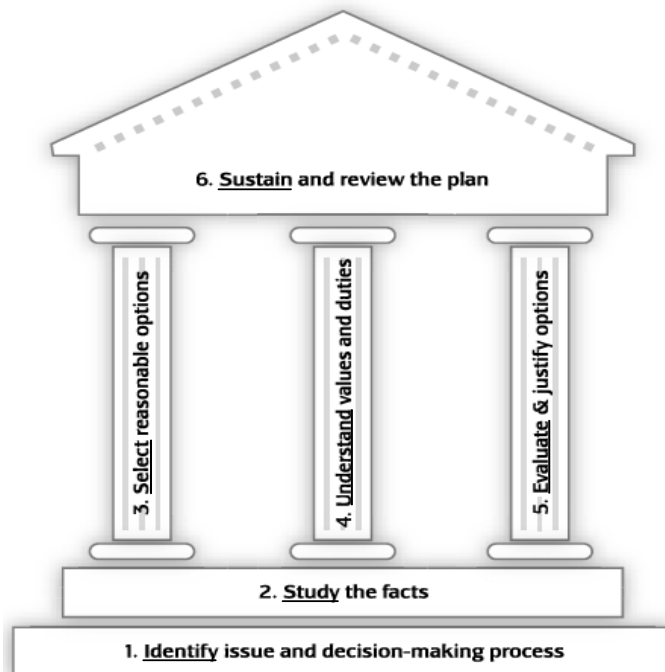
- Do multiple options seem right, or seem wrong?
- Is there disagreement about a patient's care plan?
- Is there conflict on the team about what is fair or right?
- Are there power dynamics that make it hard to speak up about concerns?
- Are you concerned about possible harms to some persons?
- Is the law or hospital policy unclear about what to do in this situation?

4.1.2 Applying the ISSUES Ethical Decision-Making Process
The HHS **Ethical Decision-Making Process** uses the acronym **ISSUES** to describe a step-by-step process that can be used to address and resolve ethical dilemmas in a consistent, transparent, and justifiable way. Although there may not be an answer that pleases everyone, a fair decision-making process can help people feel more comfortable with the outcome.

4.1.3

Ethical Decision-Making: ISSUES

6. Sustain and review the plan

3. Select reasonable options

4. Understand values and duties

5. Evaluate & justify options

2. Study the facts

1. Identify issue and decision-making process

Steps in Ethical Decision-Making: ISSUES

1. **Identify** the issue and best decision-making process, including all stakeholders
2. **Study** all the relevant facts, including the evidence, context, resource implications and diverse perspectives.
3. **Select** reasonable options; try to identify more than two options.
4. **Understand** values & duties; identify professional and legal standards and principles.
5. **Evaluate** & justify options; choose the option with best balance of harms/benefits; align to duties, principles, standards and values.
6. **Sustain** and review the plan; identify how to communicate and document the decision; consider "lessons learned" for future cases; engage in continuous quality improvement.

See for a worksheet that can be used to help your or your team work through the process.

See for guidance on how to apply this decision-making process in a group or team discussion.

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5.0   Documentation

Ethical decision-making processes shall be documented in such a way to make the process and outcomes understood by affected stakeholders. The documentation and retention of documents will vary depending on the departmental standards or relevant policy. *For patient care issues, follow your appropriate professional college standards.*

In general, appropriate documentation of ethical issues supports the following: stakeholder engagement; transparency and trust; evidence-informed and values-based decision-making; organizational learning; promoting a culture of safety.

Appropriate documentation will touch on the various components of the ISSUES framework, including: who was involved in the decision; the facts of the matter; the options considered; relevant values/duties/principles; weighing of different options; outcomes and learning.

6.0   Definitions

Clinical Ethics (or patient-specific ethics): Ethical issues and dilemmas that arise in the care or treatment of *individual, identified patients*. In addressing clinical ethics issues, health care professionals should consider the specific duties they have to identified patients, such as those related to confidentiality, disclosure, consent, etc. Some examples of clinical ethics issues include: whether to withdraw or withhold treatments for a patient at end of life; conflict between a team and family regarding the perceived safety of a discharge plan for a patient; conflict between members of a healthcare team regarding whether to offer a patient an innovative therapy; uncertainty whether a patient is competent to refuse treatment. Health care workers should be alert to any organizational contributors to a clinical ethics issue or dilemma.

Ethical Issue: Ethical issues arise when we strive to do good and act with fairness in situations of uncertainty or when there are competing visions of what is right in a given situation. Ethical issues are linked to our aspirations and to our beliefs about the goals of life; they often involve personal, professional, organizational and cultural values and norms.

Moral Distress: The experience of knowing what the "right" thing to do is, but encountering barriers or challenges to acting in an ethical manner. These challenges might be internal to the individual experiencing the distress (e.g. anxiety, exhaustion, etc.) or external (e.g. difficult working conditions, conflict within a team, etc.).

Organizational Ethics: "The organization's efforts to define its own core values and mission, identify areas in which important values come into conflict, seek the best possible resolution of these conflicts and manage its own performance to ensure that it acts in accord with espoused values."[1] Organizational ethics addresses the ethical dimensions of decisions affecting groups of patients, as well as non-patient related issues such as human resource issues, resource allocation, policies and procedures, and organizational culture. Examples of organizational ethics issues include: the disclosure of a health risk to a cohort of affected patients; the review of a perceived conflict of interest; the identification of reasonable criteria to inform allocation of scarce resources; the investigation of inappropriate behavior. ([1]Pearson, S.D., Sabin, J.E., and Emanuel, E. (2003) *No Margin, No Mission: Health Care Organizations and the Quest for Ethical Excellence*. Oxford: Oxford University Press.)

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Research Ethics: is the ethics of the planning, conducting, and reporting of research. These include protection of research participants; managing relationships between researchers and participants; conflicts of interest; management of data; research compliance; and reporting of findings among others.

7.0   Cross References
Ethics Consultation Protocol

8.0   Other HHS References
HHS has many policies to address a range of ethical issues. The following is a list of policies related to issues frequently encountered in healthcare. For an exhaustive list of HHS policies, please click here to visit the Policy Library.

Clinical Ethics Policies:
CORP - Managing Conflicts Regarding Treatment and /or Discharge Plans Including Involvement of the Consent and Capacity Board and/or Public Guardian and Trustee - Adult Patients (16 years of age and older)

CORP - Managing Conflicts Regarding Treatment for Patients Under 16 Years of Age

CORP - Managing Reports of Abuse Towards Patients or Visitors Protocol

CORP - Patient rights and responsibilities

CORP - The Management of Inpatient Accommodations (Mixed Gender Rooms)

MAC - Consent, Withdrawal or Refusal of Consent for Treatment Policy

MAC - Critical Incident Management Protocol

MAC - Disclosure of Harm Policy

MAC - Occurrence Reporting & Management Protocol

MAC - Quality End of Life Care Protocol

MAC - Treatment of Non-Resident Patients - Non-residents of Canada

MAC - Uninsured Patient Access to Non-Urgent/Elective Treatment

MCH Pediatrics - Jehovah's Witness Patients Under 16 Years of Age & Blood Products/Transfusion

PE and S - Managing Patient/Family Concerns and Compliments Protocol

PRI - Privacy Policy

Q and P - Discharge Planning Protocol

Organizational, Research and Governance Ethics Policies:
CORP - Managing Reports of Inappropriate Behaviour Toolkit for Managers and Leaders

CORP - Prevention and Management of Workplace Violence Protocol

CORP - Values Based Code of Conduct Handbook

CORP - Values Based Code Of Conduct Protocol

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CORP - Whistleblowing Protocol

EDM - AODA Integration Policy

FINANCE - Insider and Personal Trading Policy

HR - Confidentiality

HR - Conflict of Interest Policy

RES - Financial Conflict of Interest in Public Health Service (PHS)-sponsored Research

9.0   External References
Brant Community Healthcare System Ethics Framework (2023)

Guelph General Hospital Ethics Framework (2022)

West Haldimand General Hospital Ethics Framework (2022)

Norfolk General Hospital Ethics Framework (2020)

Alberta Health Services "Ethics Framework: a guide for AHS staff, physicians and volunteers" (2014)

The Toronto Central Community Care Access Centre IDEA Framework (2008)

Veterans Health Administration(USA), National Center for Ethics in Health Care, *Integrated Ethics* resources (2007)

10.0   Developed By
Program for Ethics and Care Ecologies (PEaCE)

11.0   In Consultation With
Integrated Ethics Committee

12.0   Approved By
Integrated Ethics Committee

13.0   Appendices
Appendix 1: ISSUES Worksheet for Ethical Decision-Making

Appendix 2: Guidelines for Making Ethical Decisions with Teams/Groups

Appendix 3: Clinical Ethics Consultations Service
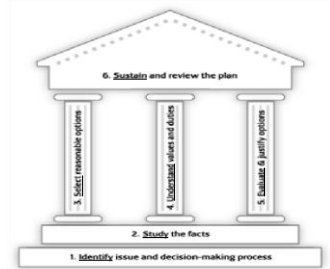
Appendix 4: Patient Experience

Appendix 5: Quality of Care Consultation (Risk Management)

Appendix 6: Privacy Ethics

Appendix 7: Organizational Ethics, EDI and Human Rights

Appendix 8: Research Ethics

ISSUES Ethics Decision-Making Worksheet

This tool is designed to guide individuals and teams to engage in rigorous and reflective decision-making when facing ethical issues. Ethical decision-making is not linear; you may revisit earlier steps as the process unfolds.

ISSUES: Identify, Study, Select, Understand, Evaluate, Sustain

1. Identify issue and decision-making process:
- What is the ethical issue/dilemma/conflict as you see it?
- Reflect on: What is your gut reaction to the situation? What are your feelings? Where do these responses come from?
- Who is impacted by the situation? How can all stakeholders be engaged?

2. Study the Facts:
- Gather information about the situation from a variety of stakeholders.
- Be inclusive of multiple perspectives, including patients and families, if possible
- Ensure everyone has a voice. Be aware of differences in power.

Evidence-Informed Practice:	**Stakeholder Perspectives:**
(Consider: history of the issue; risks, benefits; best practices; past cases; literature)	*(Consider the interests/concerns of: patient/family; staff/physicians; community/partners; etc.)*
Resource Implications:	**Contextual Factors:**
(Consider: Impact on human/financial resources, quality or access to care/services.)	*(Consider: legal requirements; hospital policy; cultural issues; external directives; systems issues)*

3. <u>Select</u> Reasonable Options:

- Based on the facts gathered, what are the realistic options? (look for more than two)

Option 1:

Option 2:

Option 3:

4. <u>Understand</u> Values and Duties:

- What principles, duties and values are relevant to the situation (see list below)?
- What are the legal requirements, professional standards and policies?
- Are key values, duties, principles or standards in conflict?

Relevant Values and Duties:
HHS Mission, Vision & Values; Legislation; Policies; Utility & Justice; Veracity & Transparency; Physical & Psychological Safety; Confidentiality & Privacy; Relationships & Teamwork; Respect for Diversity, Equity & Inclusion; Capacity; Autonomy; Best Interests; Do Good and Reduce Harm; Promote Individual and Population Health; Evidence Base Practice; Professional Ethics.

5. <u>Evaluate</u> & Justify Options:

- What are the possible harms/benefits of various options to different stakeholders?
- Choose the option with best alignment with duties, principles and values.
- State clear reasons for your choice; anticipate questions and criticisms.

Pros/Cons of Option 1:

Pros/Cons of Option 2:

Pros/Cons of Option 3:

6. <u>Sustain</u> & Review the Plan:

- Identify how best to implement, communicate and document the decision.
- Reflect on the decision and the process. What worked well? What lessons can be learned? How can these lessons be shared? Is there a quality improvement opportunity?
- Does this situation point to a systemic issue, such as a policy gap? How might it be addressed?

Appendix 2: Guidelines for Making Ethical Decisions with Teams/Groups

Creating a forum where stakeholders have the opportunity to engage in a collaborative discussion about a particular dilemma or situation in an open and non-threatening environment is often the most efficient way to address an ethical issue.

The **ISSUES Ethics Decision-making Guide** may be distributed to all participants to help keep the process on track.

It is important to define at the outset of a meeting certain aspects of the process, to increase transparency, fairness and engagement, including:
- ground rules (i.e. everyone gets to speak uninterrupted; confidentiality of discussion, respectful interactions, etc.)
- roles for the meeting (i.e. chair, time-keeper, recorder)
- objectives and outcomes to be achieved (i.e. the generation and analysis of reasonable options; documentation and communication plan for the decision)
- the decision-making process (i.e. how stakeholder feedback will be used; who is ultimately responsible for making the decision

Step 1: IDENTIFY the Ethical Issue and Decision-making Process

- **State the conflict or dilemma as you currently see it:** Try to articulate the issue in one sentence. If you can't, it may be better to break the problem down into two questions or issues and tackle them one at a time. Example of ethics question: "Given [state the issue, uncertainty or conflict], what decisions or actions are ethically justifiable?"
- **Engage in reflective practice:** What is your "gut reaction" to the situation? What are your feelings? What preconceptions and judgments might you bring to the situation? Where do these come from?
- **Identify stakeholders:** Who is impacted by the issue? Who ultimately has decision-making authority?
- **Determine best process for decision-making:** How urgent is the situation? What is the best way to deliberate and engage those impacted? Stakeholders deserve to know and understand how and why a decision was made. It is important to remember that transparency is not just about the transmission of information; it is also about keeping people engaged in the process. In cases where confidentiality is necessary, the process shall be made as transparent as possible while identifying the confidentiality constraints explicitly.

Step 2: STUDY the facts:

In any complex situation, various parties will have different information and hold different views of the situation. Ideally, all stakeholders shall have a chance to gather all of the relevant facts and present their views to one another in a respectful, open environment, considering both the context of the situation and the evidence.

Four different kinds of facts shall be gathered. The facts will vary depending on whether the ethical issue is about a specific patient/family or about an organizational issue/situation.

i. Evidence-Informed Practice:

- *For an ethical issue involving a specific patient:* What is the patient's medical history/ diagnosis/ prognosis? What are the goals of treatment? What are the probabilities of success? What are the risks and side effects of treatment? What is the standard of practice? What does the evidence say? (See the [Clinical Reference Library](#) on the HUB if you need help identifying best practices.

- *For an organizational ethics issue:* What is the history of the issue? What are the risks and benefits? Best practices? Past cases or precedents? Current literature?

ii. Stakeholder Perspectives:

- *For an ethical issue involving a specific patient:* Is the patient capable? What has the patient expressed about preferences for treatment? Long and short term goals? Quality of life? Suffering? If the patient is not capable, who is the SDM? What are the family preferences/values? Is there conflict amongst the healthcare team?

- *For an organizational ethics issue:* What are the interests/concerns of health professionals/physicians? Concerns/interests of support staff, learners and leaders? Concerns/interests of community/partners? Perspectives of equity deserving groups?

iii. Resource Implications:

- Describe costs incurred/resources utilized.
- How does the issue impact human resources? Financial resources? Clinical resources?
- How does the issue impact quality of care or access to services for the communities served?
- Are the resources proportionate to the purpose they are serving? For patients, do the clinical resources provided align with their goals of treatment or definition of quality of life?

iv. Contextual Factors:

- *For an ethical issue involving a specific patient:* Are there cultural, religious or social factors that might influence treatment decisions? What is the relationship between the patient/family and team? How are community partners/services involved in care?

- *For an organizational ethics issue*: What is the relevant law? Are there external directives or systemic issues at play? What is the perspective of the community? Is there reputational or legal risk?

Step 3: SELECT reasonable options

- Brainstorm initial options with the group based on the facts gathered. Challenge yourself to identify more than two options, to avoid either/or thinking.

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Step 4: UNDERSTAND Values & Duties

What are the relevant values and principles? Which values are in conflict/tension?

- *HHS Mission, Vision & Values:* To provide excellent health care for the people and communities we serve and to advance health care through education and research.

- *Fairness & Justice:* People are to be treated fairly and without prejudice. Like cases are treated alike unless relevant differences exist and special attention is paid to avoid further disadvantaging those already disadvantaged or vulnerable.

- *Utility and Resource Stewardship:* Making the best use of available resources and trying to provide the greatest good for the greatest number.

- *Veracity and Transparency: We tell the truth, even if it is difficult.* Reasons for decisions are communicated to stakeholders; including patients, families, staff/physicians, and the public (as appropriate) to build trust. Informed consent upholds are obligation to support transparent and inclusive decision-making with patients about their care.

- *Confidentiality & Privacy:* The legal and ethical responsibility to protect the private information of patients/families and to hold in confidence sensitive information about staff/physicians/learners and/or the hospital.

- *Professionalism, Relationships & Teamwork:* Partnering with relevant stakeholders in a respectful and accountable manner such that each individual and entity understands their associated role and accountabilities.

- *Respect for Diversity, Equity & Inclusion/Cultural safety:* Each person will be treated with dignity, respect and courtesy; diversity will be celebrated and the unique values/experiences/views of all persons acknowledged and supported.

- *Patient Autonomy*, *Quality of Life* and *Best Interests:* Individuals have the right to make personal choices according to their values and beliefs (within legal and professional practice parameters).

- *Beneficence and Nonmaleficence:* Health care providers have a fiduciary duty to offer treatments that accord with clinical and ethical standards and that are expected to benefit the patient; harms or negative consequences of treatments/decisions will be communicated to patients and mitigated appropriately.

What are the relevant hospital policies? (see section 8.0 for list of some relevant policies)

Is the policy clear? Are there policy gaps?

What are the relevant health professional standards/guidelines?

Do we need to consult with other resources/experts to help us understand our duties and values?

Step 5: EVALUATE & Justify Options

For each option consider:
- What are the possible harms to the various stakeholders? How can harms be mitigated?
- What are the probable benefits to various stakeholders?
- Which duties, principles and values support this option?
- Does this option set a good precedent?

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- What are the possible criticisms of this option?

Choose the option with the best consequences overall and closest alignment with key duties, principles and values.
- Welcome diverse opinions. Anticipate the criticisms of various choices.
- Clearly state reasons for the decision. Remember that you are not aiming at "the perfect" choice, but a good and defensible choice under the circumstances.
- Anticipate how you will explain the decision to various stakeholders.

Step 6: SUSTAIN & Review the Plan:

Accepting responsibility for an ethical decision means ensuring that the decision is enacted by articulating a clear plan of action, with assigned responsibilities and timelines, and communicating it to stakeholders. It also means accepting the possibility that you may need to revise your decision in light of new information or changing circumstances. Reviewing how the process worked and the outcomes can lead to quality improvement opportunities. In addition, this situation may point to a wider organizational ethics issue that may need to be addressed systemically.

In reviewing the plan consider:
- How will the plan be implemented? Who will complete the next steps? What is the timeline?
- Who is responsible for documentation and communication?
- When will the plan be reviewed to ensure it is working?
- Quality improvement: What worked well about the decision-making process? What lessons can be learned for future cases? How can these lessons be shared within your team and with the wider organization?
- Does this situation point to a systemic issue, such as a policy gap? How might it be addressed?
- Have new questions emerged? (If so, do they require similar deliberation?)

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Appendix 3: <u>Clinical Ethics Consultation Service</u>

When should I contact the Clinical Ethics Consultation Service?

Any member of the health care team, including patients and families, may contact the Clinical Ethics Consultation Service for support.

Common situations where Clinical Ethics Consultants may be helpful, include:
- When there is conflict within a family regarding the best interests/wishes of a patient
- When the team has disagreements regarding the goals of care for a patient.
- When there is uncertainty about how to make decisions for a patient who lacks capacity to make his/her own decisions.
- When there is doubt regarding which particular treatments or options are best for a patient.
- When the team/family is facing moral distress or angst around patient care situation.
- When the patient/family/team is navigating a complex discharge (NOTE: Ethical questions or concerns about complex or challenging discharge plans for patients, may also be addressed by staff from the Office of Community & Population Health Services Program. They can be reached at JH – Ex. 43560; HGH – Ex. 46501; St Peters/WLMH – Ex. 12381)

What is involved in a Clinical Ethics Consultation?

Clinical Ethics Consultants do not make decisions for others, but they do assist the process of making ethical decisions by:
- Making clear the patient's goals, values, wishes and best interests.
- Exploring the moral perspectives of diverse stakeholders.
- Discussing the facts of the situation with everyone involved to make sure that the issues, choices and likely outcomes are clearly understood.
- Exploring ethical values, principles, norms, policies, standards and resources.
- Mediating and resolving conflicts between parties.
- Providing retrospective or moral distress debriefing of difficult cases.

See the [Ethics Consultation Protocol](#) for more information.

What happens in a Clinical Ethics Consultation?

All ethics consultations start with an intake phone call with the ethics consultant to understand the facts of the situation and the issues/stakeholders involved. Consultations may consist of a simple coaching conversation or a series of meetings, depending on the complexity of the situation. Ethics consultations are documented in the patient health record. *Ethics Consultants respect the privacy of everyone involved, within legal limits.*

How do I access the Clinical Ethics Consultation Service?

- By placing a referral through Epic or
- Calling **905-521-2100, ext. 76443**, and asking to page the Ethics Consultant on call. Leave your name and phone number. An Ethics Consultant will call you back within an hour.
- Ethics Consultation is available Monday to Friday from 8:30 am to 4:30 pm. After hours email the office of ethics at: officeofethics@hhsc.ca

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Appendix 4: <u>Patient Experience</u>

What is the role of the Patient Experience Specialist team?

The Patient Experience Specialists (PES) provide leadership and support throughout Hamilton Health Sciences to promote an excellent patient/family experience. The Patient Experience Specialists are accountable for the ongoing development, implementation and evaluation of the patient experience strategy at HHS. PESs support the Patient Relations process in a timely, efficient and consultative manner with leadership of programs and services. They work with patients and families who may have compliments, questions or concerns about the care or service received in hospital.

When should I contact a Patient Experience Specialist?

- When the team has concerns about patient care.
- When the team would like advice on ways to improve the patient experience.
- When the team requires support dealing with a patient/family concern.
- When the team wants to express a patient safety concern.
- When the team has identified a patient or family who would like to provide feedback regarding their Patient Experience.

How will the Patient Experience Specialist help?

- The PES will support communication between patients/families and your team in order to ensure the best care and experience possible.
- The PES will listen to and understand the concerns, and support the team to achieve resolution.
- The PES will partner with your team to ensure the patient experience needs are understood and explored within program initiatives.
- Bring forward your team's ideas for improvement related to health services and patient safety.

How do I access the Patient Experience Team?

The Patient Experience Team can be reached by calling the main intake line at **905-521-2100, extension 75240** from Monday to Friday, 8:30am to 4:00 pm. The Patient Experience Coordinators will take your information and forward this to the appropriate leadership and PES.

You can also email your concern to patientexperience@hhsc.ca and the appropriate person will get back to you. This email is monitored from Monday to Friday, 8:30 to 4:00 pm

See the Patient Experience page on the HUB for more information.

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Appendix 5: Quality of Care Consultation (Risk Management)

What is the role of Quality of Care Consultants (QCC)?

The Quality of Care Consultants are committed to minimizing risk across Hamilton Health Sciences, promoting organizational improvements and contributing to the culture of patient safety. With a background in working with HHS insurer and legal counsel, Quality of Care Consultants provide organization-wide leadership and consultation in the areas of clinical risk, occurrence and critical incident management, and disclosure of harm. In addition, the QCCs manage liability/legal claims filed against the hospital, and provide support for health care-related legislative matters.

When should I contact a Quality of Care Consultant?

- For questions regarding informed consent and patient capacity for decision making.
- When seeking clarity regarding the patient's appropriate substitute decision maker (SDM)
- For concerns about patient risk related to care or discharge.
- When a serious patient or visitor safety occurrence has happened.
- When the team has questions about government legislation/legal issues related to patient care.
- For concerns or allegations of abuse/assault against a patient or visitor.
- When you have received a subpoena or other legal document.
- When the police are requesting information related to an investigation.

How will the Quality of Care Consultant team help?

- The Quality of Care Consultants will provide guidance related to legislation relevant to patient care and clinical risk, including the Health Care Consent Act.
- Provide advice on minimizing clinical and organizational risk through increased communication, improved documentation and balancing patient's rights to autonomy versus the desire to protect them from risk.
- Provide information about internal and external resources available to support the health care team, patient and family, including relevant policies.
- Liaise with HHS' insurer and legal counsel as required.
- Provide consultation to health care teams in relation to:
  - Potential serious occurrences, including Critical Incidents.
  - Disclosure of harm.
  - Questions or issues related to consent/capacity and Substitute Decision Makers/ Power of Attorney.
  - Quality of care and patient safety concerns.
  - Requests from Lawyers/Police.

How do I access the Quality of Care Consultant Team?

Each program has a Quality of Care Consultant assigned to provide support. If you are unaware of who your Quality of Care Consultant is, email your concern to dl-QualityofCareConsultants@hhsc.ca, and the appropriate person will get back to you. This email is monitored from Monday to Friday, 8:30am to 4:30 pm.

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The Quality of Care Consultant Team can also be reached by calling the main Patient Experience intake line at **905-521-2100, extension 75240** from Monday to Friday, 8:30am to 4:00 pm.

The Patient Experience co-ordinators will take your information and forward this to the appropriate team member.

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Appendix 6: <u>Privacy Ethics</u>

What is the Privacy and Freedom of Information Office?

There is a fundamental legal and ethical obligation to carefully protect the personal health information that is collected by Hamilton Health Sciences and its agents in the course of providing or assisting in the provision of care to our patients. The Privacy and Freedom of Information Office supports and assists the staff, physicians, patients and families at HHS, to ensure the protection of the personal health information of our patients, and the employment data and personal information of our staff.

When should I contact the Privacy and Freedom of Information Office?

Some typical privacy inquiries include:
- A patient/SDM makes a request to access, correct or restrict access to personal health information.
- You have a question around the disclosure of personal health information to someone not providing care or for a purpose that is not related to providing patient care.
- What to do if you have lost a patient's personal health information (i.e. you am aware of a privacy breach).
- You have a question regarding who can gain access to HHS business records and/or a patient's personal health information.
- You are wondering about the use of patient information for research purposes

How will the Privacy and Freedom of Information Office help?

The Privacy and Freedom of Information Office was established to be a resource for privacy issues and to:
- Facilitate compliance of HHS and the governing board with legal requirements as identified in the *Freedom of Information and Protection of Privacy Act.*
- Respond to inquiries or complaints from the public about HHS information practices.
- Respond to inquiries from staff about HHS information practices with respect to employment information.
- Respond to client's/patient requests for access to or correction of health information that is in HHS custody.
- Ensure that all agents of HHS are informed of their duties under the Personal Health Information Protection Act, 2004, through education and capacity-building.

Details regarding Privacy and Freedom of Information, HHS policy and procedures, answers to Frequently Asked Questions and education resources, are available via the HHS Intranet site:
http://corpweb/body.cfm?id=110 or the Internet site:
http://www.hamiltonhealthsciences.ca/body.cfm?id=1759

How do I contact the Privacy and Freedom of Information Office?

The Privacy and Freedom of Information Office can be reached by calling our main line at **905-521-2100 extension 75122** from Monday-Friday 8:00 am to 5:00 pm or via email at privacy@hhsc.ca
Note: Please do not email personal health information to or from external email addresses.

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Appendix 7: <u>Organizational Ethics and EDI and Human Rights</u>

At Hamilton Health Sciences, Organizational Ethics addresses the ethical dimensions of decisions affecting issues such as work place conflicts, environment, culture & relationships, and corporate / financial practices.

HHS is committed to providing a values and ethics based culture, consistent with the following HHS Resources:

<u>Issues related to workplace behaviors or conflicts:</u>

Is your question / concern around relationship conflicts or behaviors in the workplace?

The Values Based Code of Conduct at HHS outlines the values, principles and standards of conduct that guide our actions and interactions. The guiding principles are built on the foundation of respect and treating all people with dignity and courtesy. At HHS the VBCC provides guidance to individuals.

Is your question/concern about workplace violence, harassment, racism or discrimination?

Prevention and Management of Workplace Violence Protocol - The Prevention and Management of Workplace Violence & Harassment Protocol provides guidance to individuals:

- If you have been the subject of workplace violence, including physical or psychological violence from any source.
- If you are seeking education or information about matters related to workplace violence or harassment.
- inclusion

Prevention and Management of Workplace Harassment and Discrimination Protocol - The Prevention and Management of Workplace Harassment and Discrimination Protocol provides a conflict resolution and complaints process which applies to any conduct described as Harassment, Sexual Harassment, Discrimination, and/or a Poisoned Work Environment. It provides guidance to individuals:

- If you believe you have experienced or witnessed harassment or discrimination under the Ontario Human Rights Code (specifically discrimination on the basis of: age, disability, family status, marital status, race, language, colour, ancestry and ethnic origin, place of origin, citizenship, creed, record of offences, sex, gender identity, gender expression, sexual orientation).
- If you are seeking education or information about matters related to workplace harassment or discrimination.

How can the Office of Equity Diversity and Inclusion and Human Rights (EDI & Human Rights) Help?

EDI & Human Rights supports staff, physicians, and learners with ethical issues regarding equity, diversity, inclusion, and human rights. It provides training, policy support, and team development. The following are the ways EDI & Human Rights can help:

- Education and capacity-building for teams related to human rights, diversity/inclusion and conflict resolution;
- Project consultations and review with an EDI lens;

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- Confidential support and information about your options (re: discrimination, racism, harassment, workplace conflict or Code of Conduct)

How do I access EDI & Human Rights?

EDI & Human Rights can be reached from Monday to Friday, 8:30 am to 4:30 pm via email: inclusion@hhsc.ca.

How can the Office of Human Resources Help?

Human Resources is a confidential and neutral environment for staff, physicians, and learners to utilize regarding human rights concerns, conflict situations, and difficult conversations. It provides alternative dispute resolution processes, including facilitated discussions, mediation, and other restorative practices. The following are ways in which the Human Resources Department can help:

- Confidential support and information about your options (re: discrimination, harassment, workplace conflict or Code of Conduct)
- Consults with other HHS resources, as needed

How do I access Human Resources?
Human Resources can be reached by calling the Service Centre at **905-521-2100, ext. 46947** from Monday to Friday, 8:30am to 4:30 pm or email: myHR@hhsc.ca.

Issues related to corporate or financial practices:

Is your question/concern about conflicts of interest and/or corporate or financial practices?

Conflict of Interest Policy – HHS is committed to promoting a standard of conduct that preserves and enhances public confidence in the integrity, objectivity, and impartiality of its clinical and business activities.

The Conflict of Interest Policy provides guidance for individuals in identifying possible conflicts and processes for resolving such conflicts when they occur.

Whistleblowing Protocol – HHS has a responsibility to encourage processes that enable individuals to report legal, regulatory, financial, ethical, health/safety, and policy violations. The Whistleblowing Protocol provides guidance on how to report issues of wrongdoing and protects individuals from any form of reprisal who in good faith disclose improper activity. It provides an additional option for individuals to utilize if (i) they would like to ask questions about other processes while maintaining their anonymity in order to determine whether they would like to proceed with a complaint, (ii) if they have previously reported their concerns through one of the other options and those processes have failed to deal with the concerns expressed, or (iii) if they believe the other processes are not appropriate.

When do I utilize the Whistleblowing Protocol?

HHS staff with an ethical dilemma or inquiry are encouraged to first speak to their Leader, Human Resources Business Partner, Union Representative, or Professional Regulatory Body.

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If the matter is still not clear, you are unsure where else to report a concern, or it would be inappropriate to go to a Leader first, utilize the anonymous and confidential reporting system to report your concerns in one of the following four ways:

- **Online –** go to www.clearviewconnects.com and follow the step by step instructions.
- **Telephone hotline –** Call 1-855-277-8103. The operator will help you submit your report.
- **Telephone hotline voice message –** Call 1-855-277-8103. You will be able to leave a voicemail message containing your report.
- **Mail –** Send a confidential hard copy report to:
  Clear View Connects
  P.O. Box 11017
  Toronto, Ontario
  Canada, M1E 1N0

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Appendix 8: <u>Research Ethics</u>

What is Research Ethics?

Research on humans (or their data) cannot take place without it being reviewed and considered ethical by a group of people who are trained and experienced in research methods and ethical standards. Health research may involve not just hospitalized patients, but also people seen in outpatient clinics and programs, their families and caregivers, as well as university students, children, hospital volunteers, and people in the general community.

Research ethics may also refer to the ethical conduct of a researcher in the planning, conducting, and reporting of research. Examples include conflicts of interest, management of data, and reporting of findings among others; this is sometimes also referred to as "research integrity" or "responsible conduct of research".

How does HHS Support Research Ethics?

All research involving human participants conducted at or under the auspices of HHS must be reviewed and approved by a Research Ethics Board (REB) before the research can begin. The mandate of the REB is to safeguard the rights, safety and well-being of all research participants. The REB is considered at arms-length of the institution and includes affiliated and non-affiliated members, community members, members knowledgeable in ethics and the relevant laws, and those with scientific and medical expertise. Members with conflicts of interest related to the research do not participate in the discussion or vote.

The REB may be the local Hamilton Integrated Research Ethics Board (HiREB) or another designated external REB (i.e., another *CTO Qualified* REB). HiREB and any other REBs conducting ethical reviews on behalf of HHS have undergone review by an external body (CTO) against a rigorous compliance standard and deemed compliant on all points, achieving the *CTO Qualified* REB designation.

The REB determines whether the project is ethically acceptable and includes a review of the risks and benefits, inclusion/exclusion criteria, informed consent process, conflicts of interest, and other ethical considerations as outlined in the current version of the Tri-Council Policy Statement or applicable regulations/guidelines. The review also ensures the research is compliant with the ethical requirements outlined in applicable regulations and guidelines (Canadian and internationally depending on the jurisdiction, e.g., Tri-Council Policy Statement, Good Clinical Practice Guidelines, US Common Rule, as applicable) along with relevant privacy legislation (e.g., PHIPA).

HHS Research also has a number of policies that support the ethical conduct of research, including the Research Integrity Policy, and the Financial Conflict of Interest in Public Health Service Sponsored Research.

When do I contact the HiREB?

Researchers/Staff: The HiREB mandate is to provide direction and education to researchers and to provide both one-on-one assistance or arrange education sessions to larger groups on specific topics if requested.

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Common situations where the research ethics board can help include:
- If you are not sure whether your project involves Research (for example, if you think your project might instead be Quality Improvement)
- Prior to submission of a new study, researchers/staff are welcome to contact the office for support and assistance in completing the application form or understanding ethical implications of their project
- Questions from participants about their rights or other ethical considerations

How do I contact the HIREB?

Further information on Research Ethics and the HiREB is available at: www.HIREB.ca Chair of HiREB and can be reached by calling the main intake line at **905-521-2100, extension 42013** from Monday to Friday, 8:30am to 4:00 pm. or by mail to:

> David Braley Research Institute
> 237 Barton St E, Rm C1-205
> Hamilton, Ontario
> L8L 2X2

<u>**Responsible Conduct of Research**</u>

There are many internal and external guidelines on what it means to conduct research responsibly, including managing any perceived or actual conflicts of interest, data integrity, and management of research funding.

HHS' Research Integrity Policy applies to all individuals involved in the Hamilton Health Sciences research enterprise, and to any and all research conducted under the authority of Hamilton Health Sciences. It details responsible use of funding for research, and what constitutes research misconduct, as well as the processes for disclosing conflicts of interest or allegations of research misconduct.

To discuss a potential duality/conflict of interest when conducting research, you can reach out to the Director, Research Administration at porterk@hhsc.ca.

Any perceived or potential allegations of research misconduct can also be send to the attention of the Director, Research Administration at porterk@hhsc.ca.

Keyword Assignment	Ethics, values, conflicts, decision-making, framework, resources, ISSUES, ethical