

<b>Mamawetan Churchill River Health Region</b>  	<b>Type: Ethics</b>	Date Approved/Revised: May 2, 2013
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	<b>Title: Ethics Consultation Service Guideline</b>	Number of Pages: 4
<b>Guideline</b>		Director/Committee Chair Responsible: Ethics Committee Chair

**Guideline:** Mamawetan Churchill River Health Region will provide an Ethics Case Consultation Service, available upon voluntary request, to region physicians, care providers, patients/clients and families.

**Purpose:** To reduce “ethical distress” for healthcare workers, clients, patients and families by providing an independent review of an ethical dilemma that might arise in the normal course of health service delivery. Ethical distress may arise from problems, dilemmas or disagreements with respect to the moral or “right” thing to do.

Ethical distress can have an undesirable impact by negatively affecting relationships amongst healthcare workers, patients and families. Ethical consultation provides neutral and objective assistance by reviewing pertinent facts with all stakeholders. It provides clarity and transparency in order to achieve an informed decision.

**Procedure:**

Ethics Consultation services is provided by members of the Mamawetan Churchill River Health Region Ethics Committee with additional help if necessary, and can be accessed as follows:

- a. A patient or family member may request an ethics consultation by speaking to one of their health care providers or by directly contacting the Kaizen Promotion Office.
- b. Speak to your immediate supervisor as applicable to ensure that he or she is aware of the situation. If unable to resolve, consult with next level of supervision. If still unresolved at this level, complete the Ethics Consultation Request Form. Either the employee or the supervisor can bring an ethical dilemma forward.
- c. If a patient is involved and the request for consultation comes from someone other than the Most Responsible Physician (MRP), the MRP must be informed.
- d. Submit the Ethics Consultation Request Form to the Ethics Committee by fax, phone or email as per instructions located on the form. Hard copies of the form can be requested from Kaizen Promotion Office – [quality.ofcare@mcrhealth.ca](mailto:quality.ofcare@mcrhealth.ca) or 306 425-4823.

If the consult review involves a patient or client, ethics consultations will only be undertaken with the patient's consent, or if the patient is incapacitated, the consent of the patient's appropriately determined proxy (substitute decision maker), unless the disagreement is purely between health care providers.

The consultation team member will speak with the individual requesting the ethics consultation as soon as possible. Patient records will be reviewed if necessary. If a review meeting is required, every effort will be made to schedule this meeting as soon as possible following the receipt of the request for an ethics consultation.

A meeting is not always necessary. The consultation team member may provide sufficient assistance to enable resolution of the problem upon initial review of the case and in discussion with the individuals requesting the ethics consultation.

Consultation teams may be able to identify breakdowns in communication leading to ethical distress. Once identified, these breakdowns can often be remedied, eliminating the need for further formal case review.

If necessary, consultation team members will facilitate discussions amongst the relevant parties, to provide clarity and transparency in order to achieve an informed decision. The following steps outline the Framework for Ethical Decision Making:

1. Identify the Problem
2. Acknowledge Feelings
3. Gather the Facts
4. Consider the Alternatives
5. Examine Values
6. Evaluate alternatives
7. Articulate alternatives
8. Implement the plan

A summary of the results will be documented on the Ethics Consultation document (lower portion) and communicated to all involved parties.

A brief summary of each Ethics Consultation will be written by the consultation team and presented, at a later date, to the MCRHR Ethics Committee or its chair, and this summary of each review will be retained in MCRHR Ethics Committee files (which are securely stored in the Kaizen Promotion Office).



## Mamawetan Churchill River Health Region Information Gathering Document

Patient Name: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Lead Consultant: \_\_\_\_\_

Name Consult Team Member(s): \_\_\_\_\_

*What we need to do before we start the consultation – let's get organized.*

- Charts to consult:
  
- Legal considerations :
  
- Conversations with Care Team/others
  
- Interview with Patient:
  
- Interview with family/loved ones:
  
- Conversations with others:
  
- Conversations with Ethics Colleagues

November 11, 2010



## ETHICS COMMITTEE CONSULTATION TEAM MAMAWETAN CHURCHILL RIVER HEALTH REGION

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### Ethics Case Review Sample Questions:

#### Medical Considerations:

- What is the patient's current medical status?
- Does the patient have other illnesses?
- Is the Diagnosis quite definite?
- What is the prognosis? Is it reliable?
- Has a second opinion been obtained? Would it be helpful?
- Have all the tests been done to clarify the medical situation?
- Are there any possible treatments?
- What is the patient's probable life expectancy?
- What will the patient's general condition be if the treatment is given? If it is not?
- What are the treatment risks and side effects?

#### Patient Preferences:

- Does the patient have the capacity to make health care decisions? (Understands need, risks, benefit, alternatives.)
- Has the patient been fully informed about his/her condition?
- Who provided this information, and how was it provided?
- Are there cultural and/or spiritual issues which should be taken into account?
- Has the patient been given opportunity to think about all the options and reflect upon possible outcomes?
- Has the patient made a clear statement about his/her wishes? Are these recorded?
- Has the patient discussed his/her situation with someone other than members of the immediate health care team?
- If the patient is not competent, is capacity likely to return?
- Does the patient have an advance care directive?
- If so, does the directive make a clear statement regarding his/her wishes in this sort of situation?
- If the patient is not competent, is there a substitute decision-maker available? What this person (proxy) named in an advance directive?
- Was the patient physically and emotionally healthy before this current situation?
- If the patient made no clear statements regarding care, is there anyone who knows what the patient might have wanted?

#### Views of Family and Friends:

- Are there family members or friends? Who are they?
- Do they understand the patient's condition?
- What are their views regarding the correct course of action?
- Are there serious disagreements amongst the family members or friends? Are there any reasons to question anyone's motives?
- If the patient is incapacitated, is there any single person who has been identified as the primary decision-maker?
- If so, is this person fully aware of all information regarding the patient's case?
- Does anyone have legal custody of the patient?
- If the patient is a minor and the parents are deciding, do they appear genuinely concerned about the child's best interests?
- Are there any problems in communicating with the family and/or friends?
- If so, has anyone else been approached to assist with communication difficulties?

#### Views of Health Care Team members:

- Are the care providers aware of all the facts in this particular case?
- What are their views concerning the correct course of action?
- Have they stated why they hold these views?
- If there is disagreement amongst the care providers, is there a good explanation for their disagreement?
- Can the disagreements be resolved?

#### Legal, Administrative and External Factors:

- Are there statutes or case law that apply to this situation?
- Are there hospital guidelines or policies that should be followed in cases such as this?
- Are there other persons in the hospital or the community who should be given information or asked for an opinion?
- Would it be helpful to consult the literature?
- Is financial expense to the family a consideration?