Pandemic Response Planning: HSDA Planning Workshops

Ethical Framework for Decision Making
During an influenza pandemic, decision making ought to be guided by ethical processes and informed by ethical values.

[1] Adapted from: Ethics in a Pandemic Influenza Crisis: Framework for Decision Making, by Dr. Jennifer Gibson, Joint Centre for Bioethics, University of Toronto
Ethical Processes

Decision-making processes should be:

**Open and transparent**
- Decisions should be publicly defensible.

**Reasonable**
- Decisions should be based on relevant evidence, principles and values

**Inclusive**
- Stakeholders should be engaged in the decision-making process
Ethical Processes

Responsive
  ▪ stakeholders should be able to voice concerns

Accountable
  ▪ there should be mechanisms to ensure that ethical decision-making is sustained throughout the pandemic.
  ▪ Open & Transparent, Reasonable, Inclusive, Responsive & Accountable
Ethical Values

- 10 ethical values provide a framework to respond to a pandemic
- More than one value may be relevant in a given situation
- Some values will be in tension with others
- This tension is the cause of ethical dilemmas that may emerge during a pandemic, but
- A shared ethical language and ethical decision-making processes can help us resolve ethical dilemmas
**Individual Liberty**

- Individual liberty is enshrined in our laws & our health care practice.
- Restrictions to individual liberty may be necessary in a pandemic to protect the public good.
- Restrictions to individual liberty should:
  - Be proportional to the risk of public harm.
  - Be necessary to protecting the public good.
  - Employ the least restrictive means necessary.
  - Be applied without discrimination.
Protecting the Public from Harm

- Health authorities may take measures to protect the public from harm
- Protecting the public from harm may infringe individual liberty
- Stakeholders need to be aware of the medical and moral reasons for the measures, the benefits of complying and the consequences of not complying
- There ought to be mechanisms to review decisions as the situation changes and to address stakeholder concerns and complaints
Proportionality

- Restrictions on liberty and measures to protect the public should not exceed the minimum required to address actual risk.
- Use the least restrictive measures possible when limiting liberties or entitlements.
- Use more coercive measures only where less restrictive means have failed to achieve appropriate public health ends.
Privacy

- People have a right to privacy of their health information.
- During a pandemic it may be necessary to override this right to protect the public from harm.
- Require private information only if there are no less intrusive means to protect public health.
- Comply with legislation governing any collection, use or disclosure of personal information.
- Prevent stigmatization through public education.
Duty to Provide Care

- Health care workers have an ethical duty to provide care and respond to suffering; not absolute
- During a pandemic, demands for care may create challenges related to resources, practice, liability and workplace safety
- Health care workers may have to weigh their duty to provide care against competing obligations to their own health, family or friends
Reciprocity

- Society has an ethical responsibility to support those who face a disproportionate burden in protecting the public good.

Health authorities should:

- work collaboratively with stakeholders, regulatory colleges and unions to establish practice guidelines and fair dispute resolution processes
- strive to ensure appropriate supports (supplies, equipment, resources) are in place
- ensure the safety of workers, especially when redeploying staff in areas beyond the usual scope of practice.
- ease the burdens of health care workers, patients and their families.
Trust

Trust is an essential part of the relationship between government and citizens, between health care workers and patients, between organizations and staff and among organizations within a health care system.

In order to maintain trust during a pandemic, decision-makers should:

• take steps to build trust with stakeholders before a pandemic occurs
• ensure decision-making processes are ethical and transparent.
Solidarity

- Stemming an influenza pandemic will require solidarity among community, health care institutions, public health units and governments.
- Solidarity requires open and honest communication and collaboration between stakeholders to share information and co-ordinate health care delivery.
- Territoriality between health care institutions can be overcome with good communication and a sense of common purpose to provide equitable care across jurisdictions.
Stewardship

- Stewardship includes protecting and developing one’s resources and being accountable for public well-being
- Institutions and individuals will be entrusted with governance over scarce resources: vaccines, antivirals, ventilators, staff
- Decision makers should:
  - seek a balance between good outcomes (e.g., benefit to the public good) and equity (e.g., fair distribution of benefits and burdens) &
  - avoid or reduce collateral damage that may result from resource allocation decisions
Equity

- All patients have an equal claim on health care &
- Health care institutions are obliged to ensure sufficient supply of services and materials, but
- During a pandemic tough decisions will have to be made about allocation of resources and suspension of services
- Decision makers should:
  - strive to preserve as much equity as possible between the needs of influenza patients and patients who need urgent treatment for other diseases
  - establish fair decision-making processes and criteria