

Ethical Decision- Making



Ethics Resource Kit

*(To be used with the
VCBIS Ethical Decision-Making Worksheet)*

CONTENTS:

Introduction and VCBIS Code of Ethics Principles ... 3

Overview: Ethical Decision-Making Worksheet ... 4

Guidelines for Using the Ethical Decision-Making Worksheet ...5

- Step 1: Identify the Relevant Facts ...5
- Step 2: Determine the Ethical Principles in Conflict ...5
- Step 3: Explore Options ...6
- Step 4: Act on Your Decision and Evaluate ...6

Sample of Completed Ethical Decision-Making Worksheet ... 7

VCBIS Code of Ethics with Guidelines ... 12

- Principle 1: Respect and dignity of people ... 12
- Principle 2: Responsible Service Provision ... 13
- Principle 3: Integrity in Relationship ... 15
- Principle 4: Responsibility to the Community ... 16

INTRODUCTION:

VCBIS serves individuals with brain injury. These individuals commonly live with a complex combination of physical, emotional, social, and cognitive challenges. As community-based service providers, VCBIS and its employees are responsible for acting in a manner that is competent, professional, and respectful and that honours the dignity and individuality of our clients.

VCBIS, as an organization, recognizes its responsibility for the dignity, health, safety, and integrity of all who participate in its programs, including clients, families, and other community members. VCBIS also recognizes its obligation for the health, safety, and dignity of staff members. To meet these ideals, it is necessary to be mindful of the ethical challenges that may arise in the course of doing this work. The VCBIS Code of Ethics was developed by surveying ethical codes of similar agencies and human service providers. It is intended to educate VCBIS staff members regarding common ethical issues that they may encounter during the course of their work with clients and to provide guidance for ethical decision-making.

No code of ethics can be truly comprehensive, anticipating all circumstances that may arise. This VCBIS Code of Ethics and corresponding Ethical Framework are intended to provide sufficient guidance to determine when an ethical issue exists and how to use the professional resources available at VCBIS to work towards a satisfactory resolution.

THE VCBIS CODE OF ETHICS includes 4 principles:

Principle 1: Respect for the Dignity of People

Principle 2: Responsible Service Provision

Principle 3: Integrity in Relationships

Principle 4: Responsibility to the Community

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 used in several ways, including:

- When a staff member is out in the community 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, even after the situation is resolved).

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

Remember:

- Document the action plan for managing the ethical issue in regular documentation, which may include support procedures, service plans, update reports, and other relevant reports.
- All ethical worksheet will be kept for future education and tracking purposes.
- Seek help as needed and consult with your program manager.

GUIDELINES FOR USING THE ETHICAL DECISION-MAKING WORKSHEET

- Start by considering **What is your Question/Challenge/Uncertainty**. This preliminary step can assist to focus your thinking or discussion. It can sometimes be challenging to identify a specific question at this stage, or you may find that your question changes as you progress through the worksheet. It is okay for this box to be completed later, as issues become clearer. In complex cases, you may find that multiple questions/challenges are identified; completion of more than one worksheet can be helpful.

Step 1: Identify the Relevant Facts

Gather information/facts related to the case/situation. The purpose of this section is to identify what is known versus what is not known. Using the categories of Relevant Medical/Health/Brain Injury Information, Client Perspective, Staff/Support Provider Perspective, and Contextual Features, take into account all of the relevant considerations and stakeholders. Indicate what information still needs to be determined.

It is important to consider the thoughts, emotions, and cultural traditions of the client and other relevant stakeholders (e.g. family, service providers, etc.) as this can assist you 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 a purely 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(s) is (are) not necessarily the one(s) with the highest number of positive considerations and/or the lowest number of negative considerations. Attempt to choose an option(s) that will do the most good and the least harm.

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 record, as indicated above. Also, decide how to communicate the plan to the client and relevant stakeholders (e.g. family members, other staff, or others involved) in order to maximize acceptance and understanding. Ongoing communication with the client and other stakeholders is critical.

Evaluate the plan after it is put into action. Were the intended results obtained, or are additional follow-up and/or action required? If so, schedule the follow-up discussion to ensure that it occurs. Ongoing documentation and communication of the evaluation/follow-up is necessary.

Self –evaluate the decision as well. These types of situations are often difficult for staff and can be personally and professionally challenging.

Sample:

ETHICAL DECISION-MAKING WORKSHEET

Date: Jun. 5, 2016

Client Name: John D.

Person(s) completing form and/or participating in discussion: Sally M (RF), Frank P (RF), Jan D (program manager), Susie Q (counsellor)

WHAT IS YOUR QUESTION/CHALLENGE/UNCERTAINTY?

Give a brief statement: John has been intentionally running into people with his motorized wheelchair when he gets angry. We want to address this serious safety concern but without his power chair, John's independence is really limited.

STEP 1: IDENTIFY THE RELEVANT FACTS – 4 BOX METHOD

Relevant Medical/Health/Brain Injury Information

Provide information about the client's medical/health status, brain injury effects. What current supports/treatments are being provided?

John D. sustained a brain injury as a result of a motor vehicle crash at the age of 8. He is now in his 30's. He experiences challenges with frustration, and managing his anger. He requires a motorized wheelchair due to the physical challenges he experiences. His mobility is very limited without it and he can't really access the community without it. He reports his shoulder hurts if he self-propels for more than a few minutes. He recently ran into a client intentionally with his wheelchair when he got angry with the person. He did the same thing to a staff member as well. He travels independently on Para Transpo. John takes medication for seizures. He receives support from MOD related to work goals as well as behavioural support to assist him to better manage his behaviour when he gets angry.

Client Perspective

State the client's preferences. Describe quality of life in the client's terms. 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?

John really values his independence and it is an important aspect of his quality of life. It will be difficult for him to attend programs and he may drop out of service. He has the capacity to understand the concerns and possible consequences but his impulse control challenges limit his ability to make good decisions in the moment. He says he doesn't want to hurt people.

<p>Staff/Support Provider Perspective <i>Include views and concerns of the staff/care provider. May include emotional factors influencing each individual, such as existing feelings, values, biases and prior experiences.</i></p>	<p>Contextual Features <i>Any family involved or significant relationships? State their perspectives. Relevant social, legal, and economic circumstances? Other relevant features, e.g. religious and cultural factors, limits on confidentiality, resource allocation issues, legal implications?</i></p>
<p>Staff are concerned for their own safety and the safety of the other clients, as a few people have already been hurt. Some staff are starting to avoid John. Sometimes they don't offer help to him in the way they might to others. They see that other clients are afraid of him. They don't understand why he is allowed to get away with this behaviour.</p>	<p>John's family is very involved and concerned about this behaviour but have found that talking to him doesn't seem to help. They understand there is a safety concern and don't want anyone to get hurt. They would like to help but are not sure how.</p> <p>It has been noted that John does better in some programs than others- for example, in some programs he has never gotten angry but there are a couple where he is regularly triggered. If he is in a crowded room, it is more likely that he will charge others.</p>

<h2 style="text-align: center;">STEP 2: DETERMINE THE ETHICAL PRINCIPLES IN CONFLICT</h2>	
<p>Identify ethical issues What ethical principles are relevant and/or are in conflict? (E.g. <i>Respect for the Dignity of People, Responsible Service Provision, Integrity in Relationships, and Responsibility to the Community; refer to the VCBIS Code of Ethics for further details.</i>)</p>	
<p>Principle</p>	<p>Explain the Issue</p>
<p>Respect for the Dignity of People</p>	<p>John values the independence that his power chair provides. It would be his preference to use his power wheelchair at all times to get around.</p>
<p>Responsible Service Provision</p>	<p>Having John in a crowded room increases the likelihood that he will charge others with his power chair. The other clients are afraid of him and a few people have already been hurt. Staff are concerned that they can't keep him and other clients safe.</p> <p>There is also a concern with respect to staff and their safety.</p>
<p>Integrity in Relationships</p>	<p>Some staff members are starting to shy away from John. Sometimes they don't offer to help him the way that they might to others.</p>
<p>Responsibility to the Community</p>	<p>As far as we know, John has not assaulted anyone in the larger community.</p>

Is this an Ethical Dilemma? Yes No

If no, may still be a challenging situation (e.g. a legal issue).

Comments: Respect for the Dignity of the client potentially conflicts with 2 other principles

Continue to Step 3 to assist with the resolution of 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; use your imagination. Consider a compromise. Predict the outcomes for each alternative. Does the alternative fit with the client's/family's values? Question whether the alternative meets the agency's policies and directives.

Option	Strengths (practical and ethical)	Weaknesses (practical and ethical)
Do nothing	<ul style="list-style-type: none"> Respects client's dignity and autonomy. 	<ul style="list-style-type: none"> Others remain at risk of being hurt by John's power chair. Not responsible service provision.
Restrict John from coming to VCBIS and/or attending programs/groups.	<ul style="list-style-type: none"> Addresses concerns about the safety of others and responsible service provision. He cannot hurt clients and staff if he is not at VCBIS. 	<ul style="list-style-type: none"> Is not responsive to John's need for community brain injury services. Does not respect his dignity. May jeopardize the integrity of the working relationship with John.
Prohibit use of power chair at VCBIS. (Have John switch over to a manual chair when he arrives at VCBIS.)	<ul style="list-style-type: none"> Addresses the safety concerns related to him hurting others with his power chair. 	<ul style="list-style-type: none"> As mobility is very limited without the power chair, John would not be able to attend programs without support. It would cause significant hardship for him and he may become more angry or depressed. Would require a high level of staff resources when he attends (1:1 staffing) which would limit how much he can be at VCBIS. His dignity/choice may be compromised.

<p>Limit attendance to programs in which he has been successful and where there have not been any issues.</p>	<ul style="list-style-type: none"> • Is responsive to his needs in that he is able to attend and benefit from some services. Shows respect for his dignity. • Attempts to address safety concerns. 	<ul style="list-style-type: none"> • Some risk remains that he will impulsively react and hurt someone with his power chair.
<p>Attempt to work with John to make his use of the power chair safer; for example, with the use of a power override/kill switch on the chair. John would require 1:1 staffing to monitor his behaviour and to use the power override switch to stop the chair if required.</p>	<p>Respects his dignity/choice in that he is still able to attend programs and benefit from being at VCBIS. Demonstrates responsible service provision.</p>	<ul style="list-style-type: none"> • Some risk remains in that staff may not be close enough to use the over ride switch. • Requires a high level of staffing, so he may not be able to attend as often as he used to. • May compromise his dignity as his autonomy could be limited • Could hurt the therapeutic relationship.
<p>Provide continued training in anger management</p>	<ul style="list-style-type: none"> • Respects his dignity. • Is responsive to his needs. 	<ul style="list-style-type: none"> • May not completely remove safety risks for others, as he can be quite impulsive.
<p>Educate the client about the seriousness of his behaviour and the fact that VCBIS needs to maintain a safe environment for everyone.</p>	<ul style="list-style-type: none"> • Respects his dignity – is collaborative. • Attempt to be responsible for safety of other clients and staff. 	<ul style="list-style-type: none"> • May not be effective in the moment he becomes angry.

STEP 4: ACT ON YOUR DECISION AND EVALUATE

Develop an Action Plan (*Document the complete Plan in the file.*) Using all the information that you have, choose the best option(s). Develop an Action Plan. Present your suggested alternative(s) and Action Plan to the Client, and others 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 agreement cannot be reached. Determine when to evaluate the Plan. Document and communicate the Plan.

- Staff will provide education to John about the seriousness of the situation so that he is aware of the concerns and a need for change.
- Staff will also continue to provide training in anger management to support John to develop his skills in this area.
- Staff identified that John was most successful in the music and self defense programs.
- In discussion with John, his parents, and the team, it was decided to try having John attend the programs using his power chair, with a power override/kill switch on the back of the chair. 1:1 staffing would be provided for behavioural support and to use the override button if there was a risk of him injuring someone else.
- The team felt they would be able to provide 1:1 staffing at these two programs with a review after 6 weeks.

Evaluate the Plan after Implementation (*regarding both practical and ethical principles*) What was the outcome of the Plan? Are changes necessary? Do you need to make a new Action Plan? Document the evaluation.

Date: - Within two weeks, John had another incident during which he injured another client in a crowded room. It was discussed with him and his parents and was determined at that point that he would attend all programs in his manual chair, with 1:1 support to assist with mobility.

With this option, the risk of injury to others with the chair has been eliminated. John's frustration is minimized because he has 1:1 support. With clear guidelines, staff are able to respond to John's behaviour in a professional manner that is respectful of John's dignity. It was determined that data would be collected regarding anger episodes (verbal outbursts or leaving the area impulsively while angry) and when John is incident free for at least 8 weeks, the power chair may be gradually reintroduced. The team will also review the possibility of fading support at some point in the future.

Date for Further Follow-up, if Indicated:

The team will review the status in two months

Specific Goal of Follow-up Session:

Determine whether the power chair can be reintroduced and under what conditions. Discuss the possibility of fading support and make a plan

VCBIS Code of Ethics and Guidelines

Principle 1: Respect for the Dignity of People.

Value Statement:

VCBIS values the dignity of the individual and their right to privacy, confidentiality, and choice.

To that end, VCBIS will provide a milieu that recognizes and respects diversity. We are aware of our special responsibilities with regard to the care of individuals who may have difficulty expressing themselves, fully comprehending and recalling information, and/or have others making decisions on their behalf. While we are a family-centered service, we recognize the need to advocate for the client's right to autonomous decision-making as much as is feasible. Where a client is unable to understand the risks, benefits, and alternatives to a specific course of treatment or care, and/or where an alternative decision-maker has been legally defined, VCBIS will make every reasonable effort to keep the client informed, solicit their wishes, and gain their assent to any plan that is created. Wherever possible, clients will be offered choices and the means to express their individual preferences or comments. We will provide the support needed to allow a client to participate as fully as possible in any decision-making process.

Guidelines:

VCBIS staff will ensure that their behaviour supports an open, accepting, and tolerant milieu for clients and co-workers. In doing so, they will strive to use language that shows respect for the dignity of clients, co-workers, and members of the community.

VCBIS staff will ensure that services are offered on an equitable basis. VCBIS recognizes and honours individual differences and preferences.

VCBIS will respect a client's right to privacy. We acknowledge the limits of confidentiality in those cases where there is real, specific, and significant risk of harm to members of the public or to the client.

VCBIS will respect a clients' right to express their sexuality, religious beliefs, cultural practices, and other preferences in a manner that is respectful of others' rights and is in keeping with their own values.

VCBIS will ensure that consent to services is given freely and with full knowledge of the risks, benefits, and alternatives that are available. This process may require adapted communication, repeated presentations of information, and other compensatory devices.

VCBIS will refer to and make known to clients the alternatives to the services that we provide in order to support informed consent.

VCBIS staff will know the decision-making status of clients (whether or not a Power of Attorney [POA] or legal guardian has been assigned). VCBIS staff will encourage the client's participation in making decisions of which they are capable. VCBIS will work with families to educate them about the rights of their family member in decision making and the responsibilities associated with being a POA or formal guardian.

VCBIS will ensure that appropriate efforts are made to ensure client confidentiality. We will not provide information about clients to members of the community (during visits to the community) except where required by law or requested by the client and/or decision makers. We will work with other care providers to ensure that information is transmitted in a secure manner and that the client's desire for privacy is respected.

VCBIS staff will not promote participation in research unless the procedures to be used and the method of obtaining informed consent have been reviewed by a formal ethics review committee. Most often these committees are based in a university or hospital.

VCBIS staff members must be aware that they often control the client's environment and may be in a position to restrict a client's free access to certain resources. VCBIS will not deny clients access to their belongings, nutritious food, activities, family members, or visitors, unless there is a reasonable risk of immediate harm and this will not be done without the supervision of the program manager and appropriate ethical review. Restrictions of this type may occur only in the context of a formalized program of care that has been reviewed regarding ethical concerns and with appropriate consent obtained.

These are some examples of ethical issues that could arise out of Principle 1: Respect for the Dignity of the Client:

- a. A family member (who is not a client's legal guardian) would like VCBIS to prohibit some common behaviour, such as smoking, wearing a particular kind of clothing or eating certain foods. The client is aware of the risks and benefits and disagrees with his family member.
- b. A client uses language that is upsetting to other clients.
- c. A staff member believes that a client (whose family is a practicing member of a religion) should be taken to church regularly—though the client does not show an interest in religious services.
- d. A client has been incontinent in the community and the staff member discusses this

- openly with a Para Transpo driver.
- e. A staff member avoids providing support to a client with poor hygiene.

Principle 2: Responsible Service Provision

Value Statement:

VCBIS seeks to provide services that are responsive to a client's needs and wishes and which, above all, do no harm.

Planning for services occurs with special attention to the potential risks, benefits, and alternatives, considering the safety and needs of service recipients, family members, staff members, and members of the community. In addition, VCBIS respects the right of individuals and family members to make decisions regarding their care.

Guidelines:

VCBIS will assist clients and family members in understanding and managing the risks associated with community-based services.

VCBIS will not engage in a service which can reasonably be expected to have a high risk of physical or emotional harm to clients, staff, or members of the community. VCBIS may choose to withdraw services on the basis that a particular client's needs are presenting a significant risk or potential for harm to other clients and/or staff members.

VCBIS recognizes a client's right to take risks in the community. VCBIS also recognizes that the use of harm-reduction strategies may be required in some cases where a client is choosing to continue to engage in a risky behaviour. However, the right to the safety of others will be considered when determining a course of action.

These are some examples of ethical issues that could arise out of Principle 2: Responsible Service Provision:

- a. A family member asks VCBIS staff to do something (such as a client lift) for which they have not been trained, or which may be dangerous.
- b. A client refuses to shower, despite social and health consequences.
- c. A client's behaviour occasionally causes risks to himself/others in the community; for example, refusing to use a walker, causing him to trip or run into others.

Principle 3: Integrity in Relationships

Value Statement:

VCBIS staff will maintain integrity in their relationship with clients by avoiding any activity that creates a dual role (professional and personal).

Services are provided in the context of caring and respect and always with careful consideration that a client who is dependent upon care is necessarily vulnerable to influence and exploitation.

Guidelines:

Establishing and maintaining professional boundaries helps to create a relationship in which the staff member is able to provide support and facilitate positive change within the safety of the helping relationship.

The helping relationship is founded on the basis of trust, respect, and appropriate use of power. Understanding the power differential within the staff-client relationship is critical for establishing and maintaining professional boundaries.

Staff will not develop personal relationships, exchange gifts, or enter into business arrangements with clients or their families.

VCBIS staff will not (except under the supervision of a formal vocational program run by VCBIS) hire clients, engage in financial transactions (loaning or borrowing money), provide treatment or care outside of VCBIS, contact or spend time with clients in the community except in their role as staff member.

VCBIS staff's are frequently invited to attend family events and community celebrations and may be placed in other situations in which they are invited into the social lives of clients. VCBIS staff will approach these interactions with care and respect, maintaining conduct that is appropriate within the workplace. Where there is concern about the nature of a developing relationship, the staff member will seek consultation.

VCBIS staff will perform only those duties that they have been trained to perform and are competent to perform. They will accurately represent their training, skills, and abilities both to clients and to members of the community.

Facebook, other social networking sites and other means of electronic communication should be regarded as social interaction. As such, decisions about privacy, confidentiality, and integrity in the relationship should be considered when engaging with others in this manner. Clients may choose to make information public; however, staff's are encouraged to maintain professional

boundaries and avoid giving VCBIS clients access to their personal information. In general, allowing clients access to personal blogs, websites, or other web-posting vehicles is discouraged. Where this might serve a therapeutic or educational purpose, a separate, professional identity should be created. VCBIS staff members should recognize that their web presence may have an unintended and possibly negative impact upon clients.

In general, it is appropriate for staff members to discontinue contact with VCBIS clients once formal employment has ended. However, there may be situations in which a staff member continues to have contact with members of his or her own community. Any ongoing contact should be conducted in a manner consistent with a client-staff member relationship, and disclosed to the Program Manager/Executive Director for review.

These are some examples of ethical issues that could arise out of Principle 3: Integrity in Relationships:

- a. A staff member knows that a client favours him/her and uses this influence to get the client to skip an activity the staff member does not like.
- b. A staff member sells Avon products to a client.
- c. A staff member favours a client and develops a 'special' relationship with him or her that is beyond that expected of a primary worker, such as regularly going out for coffee.
- d. A staff member sells guitar lessons to a client.
- e. A staff member gets a 'deal' from a client's father, who sells cars.
- f. A staff member who is in school to be a nurse (but is not a nurse at VCBIS) presents him/herself as a nurse.

Principle 4: Responsibility to the Community

Value statement:

While VCBIS' primary responsibility is to the individuals it serves and its staff, we remain aware of our responsibility to the community.

VCBIS seeks to provide services in a manner that is respectful of members of the community who are in close contact with our clients. We are also mindful of the impact of our service provision and the behaviour of our staff members and our clients on the community.

Guidelines:

VCBIS seeks to be a good neighbour, acknowledging the impact of our facilities, staff members, and clients. To that end, we seek to resolve any risks or difficulties that may arise for others as the result of our service provision. Service planning includes consideration of the potential impact on members of the community.

VCBIS staff members will behave in a lawful manner and do what they are able to do to encourage clients to do the same. We will acknowledge the limits of confidentiality in those cases where there is real, specific, and significant risk of harm to members of the community or other staff. We will notify and cooperate with authorities as required by law.

Service planning considers the safety of the community as a priority. We will consider the impact of the behaviour of clients on our own VCBIS community and seek to mitigate any risks that might occur to anyone who is in contact with the client being served.

These are some examples of ethical issues that could arise out of Principle 4: Responsibility to the Community

- a. A client who uses a motorized wheelchair has been known to ram others when angry. Without the motorized chair, he cannot access the community independently.
- b. A client has psychotic behaviours that disturb but do not harm neighbours.
- c. A client has made a credible threat of physical harm toward someone in the apartment building.
- d. A client is known to be selling drugs.