Provincial Health Services Authority

PHSA Ethical Practice Guide

PHSA Ethics Service

2nd Edition

August 2025

Contents

Welcome

The PHSA Ethical Practice Guide offers an overview of the values and approaches that support ethical practice on a daily basis across the organization. The Ethical Resolution Process included in this guide provides a structured approach to working through ethical challengesacross the organization. The PHSA Ethics Service is accountable for developing, sharing and revising this guide, with input from patients, clients, families and teams across PHSA. In our annual report, we document trends in ethics issues and how we apply this information in supporting quality improvement, for example, through education and policy.

Land Acknowledgment

PHSA provides services on the traditional, ancestral and unceded territories of First Nations across what is colonially known as British Columbia. Our main office is located within the traditional, ancestral and unceded territories of the xʷməθkwəy̓əm (Musqueam), Sḵwx̱wú7mesh Úxwumixw (Squamish Nation) and səlil̓ilw̓ətaʔɬ (Tsleil-Waututh Nation). We give thanks for the opportunity to live, work and support care here.[1]

Indigenous Rights and Worldviews

PHSA recognizes the distinct cultures, self-determination, Rights and Title of First Nations Peoples on the lands on which PHSA is situated and which we serve, as well as the individual and collective Rights of First Nations, Inuit and Métis (Indigenous Peoples). PHSA is committed to the eradication of Indigenous-specific racism and discrimination and the hardwiring of Indigenous Cultural Safety and Humility in all services, policies and processes to address and decrease health inequities for Indigenous Peoples. Addressing all forms of Indigenous-specific racism at PHSA involves taking a zero-tolerance stance on all instances and manifestations of Indigenous-specific racism.

We invite you to read PHSA's statement on Our Commitment to Truth & Reconciliation.

The Ethics Service works alongside PHSA Indigenous Health to support Indigenous Cultural Safety, Indigenous Cultural Humility, elimination of Indigenous-specific racism, Indigenous-specific rights, and Indigenous worldviews. Ethical practice requires meaningful, culturally safe engagement and communication with Indigenous patients and families at the point of care as well as working in partnership with Indigenous Peoples and communities on the development, enhancement and provision of PHSA programs and services. We must create culturally safe environments for truth telling and reconciliation through transparency, respect and reciprocal accountability.

We recognize Indigenous worldviews when working to resolve ethical issues involving Indigenous patients, clients, families and communities. This requires active engagement with Elders, Knowledge Keepers and Indigenous thought leaders who can support our understanding of Indigenous worldviews. We continually reflect on conscious and unconscious biases that can give undue weight to western worldviews.

Wise Practices, which exemplify the inclusion of diverse Indigenous Knowledge and health practices that contribute to sustainable and equitable conditions, are given equal space and weight alongside Best Practices, a western, evidence-based approach to care reflecting current medical and therapeutic perspectives.

Indigenous Knowledges, worldviews, ways of healing and Wise Practices must become integral parts of supporting wholistic health and wellbeing within our systems of care. This includes focusing on living well (not just alleviating illness), recognizing the value of Indigenous healing practices and promoting organizational practices that support taking care of the land and people for future generations.

The Coast Salish Teachings

PHSA has been gifted six Coast Salish Teachings (The Teachings) by Knowledge Keeper Sulksun, Shane Pointe. The Teachings provide a foundation for ethical practice and should be understood and interpreted as a whole.

The Teachings should guide us in how we ground ourselves in every interaction and in how we resolve complex ethical issues. The Teachings can support ethical practice by helping us to be in better relationship with the land and all creatures. By incorporating The Teachings into our work, we can open ourselves up to a rich and eternal worldview, and to wisdom to help us address ethical issues in a good way.

The Teachings are not intended to provide answers to ethical questions, but they can support us in creating culturally safer spaces to address challenging issues. As part of every ethical resolution process, reflecting on how we have honoured The Teachings is important in upholding our intention to live them through our work.

The Teachings

Thee eat *[Truth]* You need to say the truth all the time. How you act and show up must be truthful. We need to be truthful in our work and we need our truth to be heard and not denied. We all must not deny the truth of the history and we must remain committed to addressing it.

Eyhh slaxin *[Good medicine].* Medicine is all things. The geography, ecosystem, water and all other living beings. As human beings we can choose, with intent, to be "good medicine" every day.

Nuts a maht *[We are one].* Everyone and everything is of value and has purpose. All living things are connected and are inherently entitled to dignity and respect. We all need to be thankful for and take care of all things including the water, the plants and the land that we occupy. When we know ourselves to be one, we are grateful for mother earth, ecosystems, the water and all human beings.

Whax hooks in shqwalowin *[Open your heart and your mind].* Open your hearts and minds to what is being taught to you. When you are open, you are able to do your best.

Kwum kwum stun shqwalowin *[Make up your mind to be strong].* This is a personal intention that answers: What are you going to do? All of this is about self and informs what you will do to help yourself and others. When the weight of work is so heavy and we feel weak, we need to make up our minds to be strong. When we make up our minds, the weight dissipates. We have said, "I am strong in my mind."

Tee ma thit *[Do your best].* You are in the canoe to pull your own weight. When you pull your own weight, you inspire other human beings to do their best. Work hard with the intention of using your education and experience to the best of your ability.

Language

The Ethics Service understands the power of language in advancing decolonization and dismantling systems of oppression and discrimination. The terms and definitions used across healthcare are influenced by personal, social and historical contexts. We recognize that language continually evolves and that different terms may resonate amongst individuals and communities.

The terms used in this guide related to healthcare and equity have been selected based on consultations with our PHSA teams and our current understandings. We acknowledge the language we use may not fully capture the needs, beliefs and experiences of everyone. We are committed to ongoing discussion and learning about language and remaining accountable for the words we use.

Ethics at PHSA

PHSA is committed to ethical practice throughout our organization. Ethics involves determining the right or just way to proceed in a situation, and why something is right or makes our actions right. Ethical practice requires that organizational values, patient and family values and healthcare values be made explicit in the design and delivery of healthcare services. We recognize the diversity of individuals, families and communities we serve at PHSA and strive to centre their distinct values, perspectives, experiences and knowledge in the care we provide.

Everyone at PHSA has a role to play in ensuring care is provided ethically. Everyday ethics refers to upholding our healthcare values and ethical responsibilities through our decisions, actions and interactions in all aspects of our work. Ethical dilemmas can occur when values come into conflict or tension. In these situations, we (as individuals or teams) may be uncertain about the right course of action. Healthcare ethics involves analyzing ethical dilemmas in a structured way to determine how to provide services in ways that are consistent with healthcare, patient/family and organizational values.

Using sound approaches to ethical practice across PHSA is essential for reaching ethically appropriate and publicly accountable resolutions to complex issues. Ethical thinking is found across cultures and our approaches to ethics at PHSA includes diverse approaches and ways of knowing. The PHSA Ethics Service supports robust ethical analysis through careful application of various approaches, including: relational ethics, narrative ethics, intersectional bioethics, rights-based ethics and principles of biomedical ethics.

All members of the PHSA community are encouraged to access this guide and other PHSA Ethics Service resources. Staff are also encouraged to refer to codes of ethics from their professional organizations to guide their work.

Ethics Service

The PHSA Ethics Service is available to support you in working through ethical issues. We receive requests for support from people seeking and accessing care (patients and clients), families, healthcare providers and professionals, administrators and leaders. The guidance we provide and the tools we use are informed by each request and its context. Through this work we strive to promote ethical practice throughout PHSA and to make values explicit in healthcare service design, delivery and decision-making processes.

The PHSA Ethics Service:

- Provides confidential support to patients, clients, families, healthcare providers and professionals, administrators and leaders;

- Supports open, transparent, inclusive, fair, anti-racist, anti-discriminatory, accountable decision-making processes;

- Gives recommendations to support ethical processes surrounding clinical, organizational, public health and policy issues;

- Provides formal educational opportunities and resources to enhance ethics-related skills; and

- Partners with other PHSA teams, including but not limited to Indigenous Health, DEI, Spiritual Health, Risk and Legal.

The Ethics Service provides support in a number of key areas, including:

- **Clinical Ethics:** We provide confidential support to individuals and families seeking and accessing care as they face difficult healthcare decisions, and to the healthcare providers and professionals caring for them.

- **Public Health Ethics:** These consultations support public health decisions in order to promote equity among populations and communities.

- **Organizational Ethics:** We provide support to ensure healthcare systems operate ethically. For example, we guide ethical practices at the organizational level by supporting administrators and leaders in making resource allocation decisions and addressing bias and systemic discrimination in healthcare.

- **Policy**: We partner with healthcare teams to develop and review policies and guidelines that shape clinical practice, public health services and organizational operations.

- **Ethics Education**: We promote strong ethical practices throughout PHSA by providing education and resources. We build ethics capacity within PHSA through collaborative practices, ethical practice tools and both in-person and online learning.

- **Moral Distress**: We support individuals, teams and leaders in preventing and addressing moral distress.

Research Ethics

Information presented in this guide is consistent with the Tri-Council Policy Statement.[2] Please direct questions about research ethics to the appropriate research ethics board.

Values

Personal values are an individual's deeply held beliefs about what is important and what is right. Patients, family members, caregivers and staff members all hold personal values that can influence healthcare experiences. Personal values can be shaped by social and cultural factors.

Collective values are core beliefs shared by members of a group, organization, culture or society. Our personal and collective values shape our attitudes, behaviours, actions and relationships. Our values may evolve over time.

Organizational Values

The term *organizational values* refers to what an organization stands for and strives for. These values guide the work of the people who are part of the organization and inform the expectations of all who represent it.

PHSA's organizational values are foundational to clinical, organizational and research practices:

Compassion. We show empathy, care and compassion to those we serve and to one another. We believe that simple acts of kindness matter.

Respect. We honour the value and dignity of all individuals. We treat others the way they wish to be treated.

Equity. We recognize the advantages and disadvantages experienced by patients, families, caregivers, staff and communities. We strive to create just, equitable health systems and structures that continuously provide fair outcomes.

Courage. We are fearless in doing the right thing. We support each other in respectfully saying and doing hard things, including truth telling. We call out colonialist practices that must be replaced to build an effective health system.

Innovation. We strive for province-wide solutions by embracing partnerships and teamwork. We listen, share knowledge and welcome opportunities to learn and grow.

Healthcare Values

Healthcare values refers to collective values within and across health professions related to how we treat one another and provide healthcare services. Some of the common healthcare values we draw upon to guide us in resolving ethical dilemmas include:

Care. Care involves demonstrating kindness, concern, attention and empathy in providing what is necessary for health and wellbeing. Wellbeing is a state of wholistic health, comfort and life satisfaction. It is our duty as health professionals to engage in caring relationships with individuals, families and communities and to find out what care and wellbeing mean to them.

Equity. Equity in healthcare involves ensuring every person has opportunities to attain the highest possible standard of health and addressing health disparities rooted in bias related to Indigeneity, race, place of origin, sex, gender, sexual orientation, ability, age, religion and other factors. We promote health equity by working to ensure all people have timely access to quality care, and ultimately, to fair and just opportunities to reach their fullest health potential.

Humility. Humility refers to acknowledging our own limitations and having a willingness to learn from others. We work in partnership and seek consensus wherever possible. We remain modest about our role in the healthcare journeys of those we serve. We recognize the dignity, wisdom and worldviews of patients, clients, families and communities.

Justice. Justice means treating people fairly, without favouritism or discrimination. It involves acknowledging the role of society and systems of care in creating injustice and understanding the narratives of, and acting in solidarity with, those being oppressed and marginalized. Procedural justice ensures fair and transparent processes. In upholding justice, we respect human rights and worldviews. We meaningfully engage with interested parties, are transparent in our processes and demonstrate public accountability.

Respect. Respect refers to our regard for the feelings, wishes, rights and traditions of others. We demonstrate respect by honouring privacy, autonomy, worldviews and self-determination, including rights to make decisions about health and healthcare. We work to build trust in healthcare systems and to promote respect through inclusion and engagement in best practices, Wise Practices, relational practices, narrative practices, harm reduction, and trauma- and violence-informed approaches.

Stewardship. Stewardship involves the careful and responsible management and allocation of healthcare resources to ensure sustainability. This includes environmental stewardship, accounting for the impacts of healthcare systems on the wellbeing of the environment and those most affected by climate change and other environmental issues. Indigenous worldviews place value on caring for the land and people, which also extends to ensuring the wellbeing of future generations.

Healthcare Ethics

Ethics is a structured way of thinking critically about "What is the right thing to do?" and "Why is this the right thing to do?" It can be understood as analytic (i.e., following an established approach to determining what is right and wrong), rather than subjective (i.e., personal ideas of right and wrong). Ethics is shaped by shared societal agreements about the ways we should act.

Ethics should be a part of everyday practice, in every healthcare interaction and decision. The Teachings ground us in how we engage in everyday ethical practice and how we address ethically challenging situations. By engaging in The Teachings: *Thee eat; Eyhh slaxin; Nuts a maht; Whax hooks in shqwalowin; Kwum kwum stun shqwalowin; Tee ma thit* in our interactions we are ready to commit to the truth, be good medicine, know that we are one, open our hearts and minds, make up our minds to be strong, and do our best as we work together to resolve ethical challenges.

Healthcare ethics involves determining how to provide services in ways that are consistent with healthcare values. Ethical practice involves thinking critically about our values and how our attitudes, behaviours, actions and relationships can affect the health and wellbeing of others. When values come into conflict, an ethical dilemma can emerge.

You may have an ethical dilemma if you are asking:

- What should we do?
- What is the right thing to do?
- What is the best way forward?
- What is most important?
- What course of action will support me being in good relationship with others?
- What is my responsibility in this relationship?
- How do we resolve conflict when there is disagreement about the right thing to do?
- How do we distribute scarce resources and services fairly?

When we encounter ethical dilemmas, a structured process is used to find an ethical path forward. This involves healthcare professionals, leadership, patients, families, Indigenous Health and/or other interested parties working together to develop, implement and evaluate an ethical resolution. The Ethical Resolution Process described in this guide offers a structured approach for addressing a broad range of ethical dilemmas.

Ethical Resolution Process

When people face an ethical dilemma in healthcare, determining what should be done can be challenging. Having a structured process to address ethical dilemmas can support procedural justice (fair process) as well as ethical resolutions that are aligned with healthcare values and The Teachings. We encourage everyone to use the PHSA Ethical Resolution Process as we strive to provide healthcare of the highest quality to all people, and particularly to Indigenous Peoples and others who have been harmed and continue to be harmed by systemic oppression (e.g., colonialism, medical racism, ableism).

This is the Ethical Resolution Process used by the PHSA Ethics Service:

1. Describe the ethical dilemma

2. Identify interested parties

3. Gather information

4. Identify and analyze options

5. Reach, implement and evaluate an ethical resolution

While there are five components outlined to guide us through the Ethical Resolution Process, it should be noted that the process is often iterative and non-linear. This means that we may move back and forth between components, rather than taking each step in sequence. For example, after gathering some information, we may understand the ethical dilemma differently or learn about additional interested parties who should be included. If an ethically justifiable option is not feasible, we may need to gather more information or identify and analyze modified options before reaching a resolution. Together, these five components help guide us through the complexities of resolving ethical dilemmas in healthcare.

The PHSA Ethical Resolution Process is designed to support teams to:

- Ensure The Teachings and healthcare values are at the foundation of how we resolve ethical issues at PHSA

- Keep patients, clients, families and communities at the centre of the process

- Understand the role of values and context in addressing ethical issues

- Engage in inclusive, collaborative, transparent and culturally safe processes

1. Ethical Dilemma

The first step in the Ethical Resolution Process is to describe the ethical dilemma. Ethical dilemmas arise when values come into conflict or tension, we do not know what to do or people disagree about the right thing to do.

Some issues of concern in healthcare will be ethical in nature (i.e., values are in conflict) and other will not (e.g., communication challenges, workplace bullying, staffing shortages). If the issue relates to uncertainty about the right course of action, it is likely an ethical dilemma. It can be helpful to state the issue as a question asking what should be done (e.g., Should we…?).

When describing an ethical dilemma, the values in conflict should be identified. For example, the value of respect may conflict with the value of stewardship when resources are distributed in ways that are not supported by all communities. Ideal ethical resolutions align with all healthcare values, but often circumstances require that trade-offs be made. It is important to carefully consider and justify which values are being upheld and which are not in working toward the most ethical resolution possible.

2. Interested Parties

People or groups who are closely affected by the ethical dilemma and its resolution are referred to as *interested parties* and should be included in the process of reaching an ethical resolution. Interested parties may include patients, clients, families and communities. Healthcare providers and professionals, staff, substitute decision makers, PHSA Indigenous Health, administrators and leaders may also be interested parties.

Interested parties such as patients and families often have the most to gain and the most to lose in a given situation. They bring important perspectives, knowledge and experience, particularly about values and context. It is important that these interested parties be engaged throughout the Ethical Resolution Process whenever possible.

When team members encounter an ethical dilemma, care should be taken to identify all potential interested parties so that they can be invited to participate in the Ethical Resolution Process. For example, a team can consult with a patient or family to identify friends, community-based health and social service providers, and specialists involved in the care of an individual.

Policy issues may require engagement of representatives of relevant communities, such as people who use drugs, transplant recipients or remote communities. When Indigenous individuals and/or communities are affected by the ethical dilemma, PHSA Indigenous Health should be invited to participate.

Engagement

Well-facilitated engagement can bring parties together to identify how to work toward an ethical resolution. Inclusive, trauma- and violence-informed and safe engagement can be informed by multiple reports and documents (e.g. the *In Plain Sight* report). Engagement may occur in multiple forms, including one-on-one conversations, meetings, emails or surveys. Healthcare providers and professionals play important roles in promoting confidentiality, strong relationships and communication with all interested parties. Patients and families should be supported to make informed choices about their health and healthcare. When working with members of equity-deserving groups, it is important to actively address power imbalances, harmful biases and structural barriers within healthcare systems to ensure meaningful and effective engagement.

It is important to foster strong communication and relationships throughout the Ethical Resolution Process. Interested parties should be engaged in inclusive, collaborative, trauma- and violence-informed, transparent and culturally safe discussions when addressing ethical issues. Confidentiality should be carefully maintained and consent sought for sharing information among interested parties as ethical issues are resolved.

At PHSA, we draw on The Teachings to help us engage with one another in a good way: *Thee eat; Eyhh slaxin; Nuts a maht; Whax hooks in shqwalowin; Kwum kwum stun shqwalowin; Tee ma thit*. We must each be ready to say the truth, be good medicine, know that we are one, open our hearts and minds, make up our minds to be strong, and do our best as we work together to resolve ethical challenges.

Power and Privilege

When engaging with interested parties, it is important to address power differences and potentially harmful biases held by those who have power within healthcare systems (e.g., physicians, nurses, allied health professionals, administrators). We can reflect on the power and privilege affecting engagement among interested parties in these ways:

- Personal: Recognize each individual's social location, power and privilege

- Professional: Understand how professional roles relate to power and privilege

- Process: Centre the voices of those with the least power and privilege (e.g., patients, families, members of equity-deserving groups) to address power imbalances during engagement with interested parties.

Facilitation

Effective facilitation of meetings among interested parties to discuss ethical dilemmas can be supported through the following strategies:

Ensure the leader of the meeting is grounded in the The Teachings and brings:

- Humility

- Commitment to building trusting relationships with interested parties

- Patient/family/community-centred approaches

- Strong facilitation and communication skills

- Solid understanding of the ethical dilemma and the Ethical Resolution Process[3–5]

Prepare interested parties for the meeting:

- Clearly communicate the reason for the meeting

- Ask what each interested party wants to address in the meeting

- Ask how interested parties can be supported to participate

- Ask if additional interested parties should be included[3,6]

During the meeting:

- Present a clear structure for the meeting

- Clarify roles and objectives

- Provide education about the Ethical Resolution Process

- Ensure all interested parties are able to contribute (e.g., voices of those with the least power and privilege are included)

- Identify points of consensus and disagreement

- Clearly communicate conclusions and next steps[4,5]

3. Information

Information may need to be gathered about many topics, such as patient concerns, a medical condition, an emerging outbreak or resource considerations. Information can be gathered from the scientific literature, clinical records, public health data, interested parties, patient and family stories, healthcare professionals, administrators and leaders. The information that is initially gathered helps to clarify ethical dilemmas and inform potential options for resolution. Further information gathering is often required as options are explored and resolutions are evaluated.

Interested parties should work together to gather needed information. The amount of information that can realistically be obtained may depend on time available. Some ethical dilemmas may need to be resolved within the day, while others will unfold over weeks or months. Different kinds of information are needed to address different ethical dilemmas.

The following questions may be helpful in identifying what information is needed:

- What do we already know?

- What social factors, cultural factors, facts and evidence should be considered?

- What resources are available (e.g., financial, environmental, human resources)?

- What do interested parties hope to get from the resolution?

- How should competing needs, priorities and values be balanced?

- What biases and assumptions need to be addressed? (e.g. consider the sources of our knowledge or understanding of the situation?)

- What laws, rights (e.g., basic human rights, Indigenous-specific rights), organizational values, guidelines, policies and procedures are relevant?

4. Options

Multiple options for resolving the dilemma are identified. They are then analyzed using one or more approaches to ethical reasoning (e.g., relational, narrative, rights-based, intersectional, and principles-based) to determine whether they are ethically acceptable. Feasibility is also analyzed in order to determine whether the resources necessary to safely implement each options are available.

Identify Options

Encourage interested parties to put all ideas on the table. Innovative, ethical resolutions may be found through open and inclusive engagement. If possible, identify more than two options.

Analyze Options

One or more approaches to ethical reasoning is applied to analyze whether each option is ethically acceptable.

There are many approaches to analyzing and addressing ethical dilemmas, including but not limited to: relational, narrative, rights-based, intersectional, and principles-based approaches to ethical reasoning. No single approach is best for resolving all dilemmas, and we may draw on multiple approaches to inform our ethical analysis in a particular situation. Each approach is described briefly below.

- **Relational Ethics:** Relational ethics focuses on the ways we interact and connect with those in our care.[7,8] It highlights the relational nature of human beings. Relationships are seen as the moral space in which ethics are enacted.[7] Healthcare providers bring attentiveness, empathy, openness, humility and responsiveness to care for another person.[9,10] Relational ethics involves seeing people within their social context, rather than in isolation.

- **Narrative Ethics:** Narrative ethics recognizes the importance and power of storytelling about healthcare journeys. With this approach, we gain ethical insight from stories. Narratives help us to: understand the way another person sees the world; organize information; connect values to actions; and develop potential resolutions to ethical dilemmas.[11] Narratives go beyond informing ethical decisions; rather, exploring the narrative is itself the method of resolving ethical dilemmas.[12] This is a process of looking backward to see how the interested parties arrived at this place in their stories, sideways to understand social and political influences, and forward to understand possibilities for resolution.[13]

- **Intersectional Bioethics**: Intersectionality is a concept introduced by Kimberlé Crenshaw to describe the complex and cumulative effects of experiencing multiple, intersecting forms of discrimination (e.g., racism, sexism and ableism simultaneously).[14] Intersectional bioethics is an approach to ethical reasoning that focuses on addressing these unique forms of oppression, as well as the structural and systemic barriers that cause them, as an approach to ethical reasoning.[15,16]

- **Rights-based Approaches**: Rights-based approaches focus on the ethical responsibility to recognize and fulfill our shared commitments to all human beings. Human rights are grounded in societal agreements about what each person is entitled to as a human being.[17] In rights-based ethics, there is a balance of the rights of one individual with the rights of others.[18] Human rights in healthcare are often understood as the rights of individuals that are agreed to within human rights-based documents.[19] The following are important to a rights-based ethics approach within healthcare in BC: 1946 Constitution of the World Health Organization[20], the BC Human Rights Code[21] and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP); *Truth and Reconciliation*

Commission of Canada: Calls to Action[22]; *Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls*[23]; *In Plain Sight Report*[24]; and *British Columbia Cultural Safety and Humility Standard*[25].

- **Principles-based Approaches**: Principles are concepts that guide our actions. Principles-based approaches to healthcare ethics involve analyzing how specific principles should be balanced in resolving ethical dilemmas. [26,27] Sometimes it is not possible to uphold all principles when resolving an ethical dilemma, so the analysis involves balancing multiple principles and making choices about which principles to prioritize. In clinical ethical dilemmas, one principles-based model is the four western principles of biomedical ethics, in which autonomy, beneficence, nonmaleficence and justice are applied and balanced in analyzing ethical dilemmas and reaching justified resolutions.

An ethically acceptable option is one that is justified based on analysis using an appropriate ethical approach or approaches. For example, the justification may demonstrate how the resolution fits within the narrative of the patient, family or community; how human rights and/or Indigenous-specific rights are upheld; and/or how the principles of biomedical ethics are upheld.

Feasibility Analysis

Each option should be analyzed in terms of feasibility. This means evaluating whether the resources necessary to safely implement an option are available. These can include healthcare resources, community resources and social supports. The interested parties may need to gather additional information in order to evaluate feasibility. If an ethically acceptable option is not feasible as proposed, it may be possible to modify the option to improve feasibility. If an option is modified, more information may need to be gathered and the ethical analysis may need to be reconsidered.

The following questions can be helpful in guiding the feasibility analysis of each option.

- Which options can realistically be implemented?

- Are all the resources needed to safely implement options available?

- If all the necessary resources are not available to implement a specific option, can the option be modified to improve feasibility while still resolving the dilemma in an ethically acceptable manner?

5. Resolution

Resolution involves reaching, implementing and evaluating an ethically acceptable and feasible option.

Reach a Resolution

Ideally, the analysis of options leads to at least one ethically acceptable and feasible option that is satisfactory to all interested parties. If multiple options are ethically acceptable and feasible, the interested parties most affected by the ethical dilemma (e.g., patient, family) should choose one resolution from those options.

Consensus

While the goal is to reach consensus on a mutually agreeable resolution, this may not always be possible. If no ethically acceptable and feasible options are satisfactory to all interested parties, PHSA team members (e.g., healthcare providers, leaders) should engage in transparent and culturally safe discussions with other interested parties (e.g., patients, families, members of equity-deserving groups) about available options and limitations.

If a resolution that is satisfactory to all interested parties cannot be reached, it may be necessary to involve additional PHSA services, such as the Ethics Service, Indigenous Health, Privacy, Risk or Legal. Information from additional consultations and discussions among PHSA team members should be clearly documented. If consensus cannot be reached and a decision about how to resolve an ethical issues is made by PHSA team members, interested parties (e.g., patient, family) who are not in agreement should be informed of any right to review or appeal the conclusions of the PHSA team.

Document the Ethical Justification

The rationale for selecting the option for resolution should be clearly documented. This includes the interested parties who were involved in the process and any consensus or disagreement about the resolution.

The following questions can guide documentation of the ethical justification:

- What was the ethical dilemma?
- Which interested parties were engaged?
- What information was central to the analysis?
- What options were considered?
- What was the proposed resolution?

- Was there consensus among interested parties about the resolution?

- How was it determined that the resolution was ethically acceptable and feasible?

Implement the Resolution

Several factors should be considered when planning to implement the resolution:

- How can the key interested parties be kept at the centre of the resolution process?

- How can trust and relationships be nurtured through this process?

- Who is best situated to communicate information about the resolution?

- How can accountability, humility, inclusivity, integrity, respect and solidarity be upheld in implementing the resolution?

Evaluate the Resolution

It is important to continuously evaluate the outcomes and implications of the resolution. It may be appropriate to hold a meeting with interested parties as part of the evaluation process or to gather feedback via email, survey or meetings. Documentation of the evaluation is important for informing future practice and policy.

The following questions can guide evaluation of ethical resolutions:

- Was the resolution facilitated in a manner consistent with the values of the interested parties?

- Were relationships impacted as a result of the ethical dilemma and resolution process?

- Were the actual outcomes of the resolution the same as the anticipated outcomes?

- Were potential harms effectively mitigated?

- Was the resolution appealed or reviewed?

- Is further follow-up with any interested parties needed?

- What can be learned from this process to inform future practice?

- Should any changes to policies or procedures be made as a result of this process?

Conclusion

Thank you for your interest in ethical practice at PHSA. If you would like to learn more about healthcare ethics, you can visit the Ethics Service webpage for resources, access online learning modules through PHSA, and email the Ethics Service to be added to our mailing list.

For support with an ethical issue at PHSA, please contact the Ethics Service:

- Email: ethics@phsa.ca

- Phone: 604-875-3182

- Toll-free (within BC): 1-888-300-3088, extension 3182

Acknowledgments

The PHSA Ethics Service is grateful to all patients, clients, family members, healthcare providers and professionals, administrators and leaders who provided feedback throughout the development of the first edition of this guide. Thank you to PHSA Indigenous Health for their ongoing support in the development of this guide and to the following members of PHSA Indigenous Health for their contributions to the second edition: Makonen Bondoc, Kaz MacKenzie and Penny Cooper.

Citation

Clark DBA, Virani A, Jegathesan T, Olmos Pérez A, & Preto N. (2025). *Provincial Health Services Authority Ethical Practice Guide* (2nd ed.). http://www.phsa.ca/our-services/programs-services/ethics-service#Resources

Definitions

"Best Practices" are **western approaches to care t**hat have been shown by research and experience to produce optimal results and that are established or proposed as a standard suitable for widespread use.

"Harm Reduction" is an approach that minimizes and prevents undue health and social harms (e.g., HIV, hepatitis C, illness, infection, overdose) related to substance use and sexual activity both for people who use substances as well as communities.

"Indigenous Cultural Humility and Cultural Safety" "Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health care system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care. Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience."[28]

"Interested Parties" are patients, clients, families, substitute decision makers, communities, healthcare providers and professionals, administrators and leaders who have an interest in an ethical issue and its resolution.

"Intersectionality" is a framework developed by Kimberlé Crenshaw to explain how individuals experience oppression based on the ways in which their unique identities (e.g., Indigenous identity, race, class, gender, sex, sexual orientation, dis/ability, ancestry, place of origin, age) intersect.

"Trauma- and Violence-informed Approaches" take into account an understanding of trauma and violence in all aspects of care and place priority on minimizing potential for harm and re-traumatization, as well as enhancing patient safety, choice and control.[23]

"Wise Practices" are strengths-based actions, tools, principles or decisions that are culturally appropriate and community driven. Wise practices recognize the wisdom in each Indigenous community and in the community's own stories of achieving success. The concept of wise practices recognizes that culture matters.

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