



Ethical Decision Making for Clinical or Patient Care Issues Guideline

1. Background

The purpose of this document is to provide guidance to WA Country Health Service (WACHS) staff who are faced with a difficult ethical decisions. Ethics is about ways in which we do, and should, treat each other. This extends from the 'bedside to the boardroom' and everywhere in between, and includes individuals as well as groups.

The WACHS values underpin our everyday actions however determining what should be done can sometimes be challenging. This is where ethics, a systematic method for deciding what to do, can be of use. For example, while there may not always be one right choice, there will usually be a choice that is better than others. Using informed ethical decision processes can help determine which choice is better, and provide a basis for explaining our decisions to others.

Clinical ethical decisions are typically those that involve and impact specific patients or staff members and focus on individual values (e.g. should treatment for Ms C be discontinued?).

2. Guideline

Many decisions within health services involve ethical considerations and are resolved appropriately as part of day to day operations. The purpose of this guideline is to support WACHS staff to achieve timely and transparent decisions where competing priorities, resources, views or values mean that consensus cannot easily be reached.

The goals of using an ethical decision-making framework are to:

- identify situations that would benefit from consideration of ethical implications
- apply a systematic method for making a difficult decision
- promote discussion of ethically relevant considerations with all relevant stakeholders
- work toward an acceptable solution or decision that best balances all ethical considerations such as obligations, risks and benefits, policy, professional standards, and best interests.

This guideline should help guide you to find the most ethical solution to an ethical conflict or difficult decision. Health professionals using this guideline should also refer to their profession's code of ethics and/or professional standards where these exist.

When seeking to resolve an ethical problem or dilemma, staff should consider:

2.1 Ethical principles

The following four (non-hierarchical) principles provide the foundation for analysing ethical situations:

1. **Autonomy:** The principle that each individual has the right to make his or her own choice, which forms the basis for the practice of informed consent in the physician-patient relationship regarding the provision of healthcare.

2. **Beneficence:** The principle of acting with the best interest of the other in mind, it is the basic premise that healthcare providers have a duty to be of a benefit to the patient as well as to take positive steps to prevent and remove harm from the patient.
3. **Non-maleficence:** The principle is that “above all, do no harm,” as stated in the Hippocratic Oath, the fundamental commitment on the part of healthcare professionals to protect their patient’s from harm.
4. **Justice:** The principle emphasises fairness and equality among individuals as both procedural justice and distributive justice form the foundation from which scarce healthcare resources are provided in an egalitarian method.

2.2 WACHS Ethical Decision Making Escalation Guide and Flow Chart:

The Guide and Escalation Flow Chart should be used with reference to the [Ethical Decision Guide for Difficult Clinical and Non Clinical Situations 2019 \(Winnipeg Regional Health Authority used with permission from Shared Health Manitoba\)](#)

2.2.1 Ethical Decision Guide – Ethical Decision Guide for Difficult Clinical and Non Clinical Situations 2019 (Winnipeg Regional Health Authority used with permission from Shared Health Manitoba) – summary [Appendix A](#)

2.2.2 Ethical Decision Escalation Flow Chart – [Appendix B](#)

Where consensus regarding a course of action cannot be reached or the issue is urgent or complex, the issue should be escalated to the next level.

2.2.3 Using the Ethical Decision Making Guide - [video](#) (external resource). Note this video includes reference to a checklist which is not part of the WACHS guideline.

3. Definitions

Ethics	The study of morality and moral life; a system for deciding what is right and wrong
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4. Roles and Responsibilities

Clinical staff need to be aware of how to recognise an ethical issue and work with the patient, carer and family and other clinicians and/or staff to reach a satisfactory outcome.

Managers need to support clinical staff when required to help resolve ethical issues. Where a satisfactory outcome cannot be reached at the local or regional level managers should, in consultation with the Regional Director, escalate the issue to the Chief Executive Officer.

The Chief Executive, where required, will convene a panel and/or seek specialist input advice.

5. Compliance

Failure to comply with this policy document may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System.

[Records Management Policy](#)

All WACHS clinical records must be managed in accordance with [Health Record Management Policy](#).

7. Evaluation

Monitoring of compliance of this document will be achieved through:

- any consumer and staff feedback associated with management of ethical issues
- the number of ethical issues escalated to the Chief Executive
- any clinical incidents where decision making related to an ethical issue was found to be a contributing factor in the outcome.

8. Related Standards

[National Safety and Quality Health Service Standards](#)

Partnering with Consumers Standard: 2.4

9. Legislation

[Public Interest Disclosure Act 2003](#) (WA)

10. References

1. Winnipeg Regional Health Authority – Health Service Ethics: [Ethical Decision Guide for Difficult Clinical and Non Clinical Situations](#)
2. Beuchamp T and Childress J – Principles of Biomedical Ethics 1979 cited in: [Ethical Decision-Making in a Caring Environment: The Four Principles and LEADS](#), Levitt D, Healthcare Management Forum January 22, 2014

11. Related Forms

Nil

12. Related Policy Documents

WACHS [Advance Health Directive and Enduring Power of Guardianship Guideline](#)
WACHS [Goals of Patient Care \(Adults\) Guideline](#)
WACHS [Maternity Care Clinical Conflict Escalation Pathway Policy](#)
WACHS [Open Disclosure Procedure](#)
WACHS [Risk Management Policy](#)

13. Related WA Health Policies

[MP 0124/19 Code of Conduct Policy](#)
[OD 0657/16 WA Health Consent to Treatment Policy](#)
[MP 0138/20 Managing Conflict of Interest Policy](#)
[MP 0125/19 Notifiable and Reportable Conduct Policy](#)
[OD 0446/13 Research Governance and Single Ethical Review Standard Operating Procedures](#)
[OD 0411/12 Research Governance Policy and Procedures](#)

14. WA Health Policy Framework

[Clinical Governance, Safety and Quality](#)

15. Appendices

Appendix A: [Ethical Decision Guide for Difficult Clinical and Non-Clinical Situations](#)

Appendix B: [Ethical Decision-Making Escalation Flow Chart - for clinical or patient-care issues](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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Appendix A: Ethical Decision Guide for Difficult Clinical and Non-Clinical Situations

1



Identify

1. Name the problem clearly. What is the decision to be made?
2. Identify the affected parties. Whose values are central? What are they?

2



Reflect

3. Think about principles: autonomy, beneficence, non-maleficence, justice.
4. Consider obligations: ideals, rules, laws, or duties.
5. Other factors: relationships, circumstances, or constraints.

3



Deliberate

6. Assess risks and benefits for the decision maker and those affected. What will the ripple effect be?

4



Resolve

7. Make a choice. Evaluate your process. Did you do the right thing?
8. Address moral distress and policy implications.

Source: Winnipeg Regional Health Authority used with permission from Shared Health Manitoba.

Appendix B: Ethical Decision-Making Escalation Flow Chart for clinical or patient-care issues

