Nova Scotia Health Ethics Network

Annual Report
April 1, 2014 - March 31, 2015

Enhancing Capacity for Ethical Practice
ETHICS

NSHEN

support, capacity, year, accreditation, withing, planning, education, well, answers, district, report, organizational, health, activities, committee, conference, new, members, professional, process, well, sessions, authority, requests, throughout, April, work, questions, staff, annual, telehealth, consultation, related, workshops, past.
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On behalf of the Advisory Council of the Nova Scotia Health Ethics Network (NSHEN), I am pleased to present our 2014-2015 Annual Report. NSHEN is in its eighth year of operation and continues to be responsive to healthcare ethics needs within the province.

Throughout this year, NSHEN has supported the work of, and responded to, many ethics-related inquiries and requests. The Network has provided valuable assistance across the province in a variety of ways to meet the needs of the districts. District ethics days, telehealth broadcasts, newsletters, workshops, developing frameworks and advisory council meetings briefly capture some of our hard work and dedication. Fireside chats on ethics topics of interest have been videoed and are available on the website for viewing anytime by anyone. Our website at www.nshen.ca has been redesigned for easier navigation and use. Ethics information including readings, ethics-related presentations, and videos are also available there. NSHEN has a twitter feed to share health care ethics ideas, news and interests across the province and world wide.

Our fall conference was held October 22-23, 2014, in Liverpool, Nova Scotia, with the theme “Risky Business: Ethics of Risk in Healthcare”. National Health Ethics Week in March 2015 was celebrated by hosting an interactive discussion about the book Being Mortal by Atul Gawande.

Preparing for April 1st, 2015 and the establishment of the Nova Scotia Health Authority (NSHA), NSHEN embraced the opportunity to envision and design ethics support for this health authority (and for the province). Early in 2015, with input and collaboration from its partners across the province, NSHEN submitted a proposal to the Nova Scotia Health Authority with a vision for how to best meet the province's health needs.

I encourage you to review this report and reflect on the activities and work of the Nova Scotia Health Ethics Network for 2014-2015. We look forward to working with our new partners in the future.

Chantel Bishop
Chair, NSHEN Advisory Council
NSHEN Administrator

It’s hard to believe another year has come and gone. During this past fiscal year, NSHEN has been committed to maintaining our service delivery despite the uncertainty that was evident with the health system change to one district.

Our annual conference, various ethics workshops, health ethics week events and requests from various areas for assistance, have kept NSHEN busy. We are looking forward to what the future may bring with these health system changes and will stay focused on bringing health ethics knowledge and information to the forefront of the Nova Scotia Health Authority.

NSHEN would like to thank all of our Advisory Council members for their assistance and patience over the past few months.

As always, if there are any comments/suggestions on what NSHEN offers for education events, or if there are any topics you would like to see discussed, please don’t hesitate to contact us and be sure to visit our website NSHEN.ca to see upcoming news and events.

NSHEN’s Identity Statement

Building Capacity for Ethical Practice

Building awareness, sensitivity, knowledge, and confidence for integrating ethics into what we do every day.

– Through –

Connection

Creating opportunities to talk, share, consult, and for diverse voices to be included and heard.

Collaboration

Committing and being open to exploring new ways to work together.

Critical Reflection

Challenging values, assumptions, norms, interests, choices, and processes from a diversity of perspectives.

Creativity

Fostering innovative approaches to ethical process and practice.
Annapolis Valley Health
Beth Synder

Seven committee meetings were held during the period of April 2014 and March 2015. The committee is comprised of 12 members, with the addition of a new member with a strong ethics background when another member stepped down. The committee is very vibrant and continues to advance their learning to create capacity within the organization. Each meeting the committee continues to review hypothetical ethical cases, based on real situations faced if there are no official consultations.

The 7th Annual Ethics Day that was held at the Old Orchard Inn on May 7, 2014 was a huge success with over 100 people in attendance. Dr. Fiona Bergin was the keynote speaker and pertinent topics of gift giving, professional favors and rural environment were covered.

Consultation was provided by two members of the Committee at the request of the Department of Community Services for staff working in a small group setting on the ethical dilemma of eating at risk.

Four members of the AVH Ethics Committee attended NSHEN’s Risky Business, Risk in Healthcare in Liverpool last October. Several Telehealth sessions were made available to interested staff on ethics topics.

Two members of the Committee provided Educational Outreach Sessions to two key committees in the organization, Leadership Forum and the District Nurse Practice Committee; to improve awareness of ethics, how to work through an ethical issue using the ethics tool and the consultation process. Two more are planned.

Two members participated in the discussions in October 2014 and January 2015 about a new model for ethics in the province to align with the new NS Health Authority.

There has been conversation about partnering with the other districts to create a Western Zone Ethics Conference for May or June 2016.

Cape Breton District Health Authority
Linda Dieltgens

The CBDHA Ethics Committee meets on a regular basis alternating one month with an education session and the alternate month with a business meeting under the leadership of our new Chair, Anne MacIntyre. We welcomed new members to our Committee and they are becoming familiar with the mandate and role of the Ethics Committee. We held three education sessions, April 2014, “Advance Care Planning” conducted by our Palliative Care Staff. It was well received and repeated again in March 2015 for National Ethics Week. In June 2014, we provided a session on the work of Adult Protection provided by Deborah Dithurbide, the local supervisor for Adult Protection. In February, 2015, Dr. Paul MacDonald provided a very informative education session “Having Difficult Conversations in the Critical Care Setting”. These three sessions were also broadcasted to our outlying facilities via Telehealth.

For National Ethics Week in addition to the education session, we sent an email flyer to all staff informing them about CBDHA’s Ethics Committee. We have a section on the Intranet with links to NSHEN. Referral forms and brochures regarding the Committee are also available.

We continue to grow in our knowledge and to spread information about the function and mandate of the Ethics Committee as well as providing guidance to staff faced with ethical dilemma. We are planning a workshop for committee members in May 2015 to build capacity in Ethical Consultative work.

On a personal note, my term with NSHEN is ending and Anne MacIntyre, the chair of our local Ethics Committee will be my replacement. I want to thank NSHEN for the wonder educational opportunities afforded to me as a member of the Advisory Council. This experience has allowed me to grow both professionally and personally as I developed my “Ethics Lens.” I wish NSHEN the very best in the future.
Capital District Health Authority
Mary McNally

From the perspectives of both Ethics Education and Clinical Ethics Consultation, two components of Capital Health Ethics Support, it was a very busy year. Several consultation requests were received throughout the year, many involving issues related to decision-making at the end of life, moral distress about patient choices, and uncertainty about how to proceed in very socially and medically complex situations. Ethics Education was also involved in delivering sessions on moral distress as part of Leadership Development and several sessions related to advance care planning.

The Policy Development and Review component of CHES reviewed a number of policies throughout the year, and was heavily involved in supporting the development of two related draft policies, i.e., the duties to provide care and provide a safe work environment policy and the pest management policy (which focuses primarily on bed bugs). Organizational Ethics received a few informal requests for input earlier in the year, and saw a “slow-down” in these requests compared to previous years as a likely result of planning for the transition to the new health authority.

CHES wants to extend a whole-hearted thank you to Leslie MacLean, who was the Coordinator for Clinical Ethics Consultation, for several years. She retired from Capital Health mid-way through the year. We also want to extend the same thank you to Deb McLane, as the Coordinator for Ethics Education, who retired on March 31, 2015 – but who will continue as a community member and transitional Coordinator for Ethics Education. We have benefitted greatly from both Leslie’s and Deb’s enthusiasm, commitment and dedication to “putting values into practice” at Capital Health.

Colchester East Hants Health Authority
Chantel Bishop

The Organizational Clinical Ethics Committee in Colchester East Hants Health Authority works to ensure clinical teams, staff, physicians and volunteers have access to education, resources and advice on ethical issues. NSHEN has been an invaluable support for our committee and the district. Telehealth sessions, fireside chats, newsletters, workshops and conferences have been welcomed educational opportunities.

2014-2015 will be remembered as the year of change, uncertainty with the anticipation of the Nova Scotia Health Authority April 1st, 2015. Our committee has said good bye to many founding members of the ethics committee.

We hope to continue to support, strengthen, and develop a higher ethics awareness and capacity. We look forward to working with our neighbours in Cumberland and Pictou County in our new zone.
Cumberland Health Authority

Due to the restructuring of our health authorities, some Advisory Council members were not available to generate their annual report. The NSHEN Operations Team still maintained service delivery when requested.

Dalhousie University
Christy Simpson

It is hard to believe that another year with NSHEN has come and gone already. Through the workshops, events, talks, conference, requests for ethics support and preparation for the transition to the Nova Scotia Health Authority, it doesn’t take long for the days to go by. With Marika Warren, the NSHEN ethicist, on parental leave from mid May 2014-mid January 2015, we were pleased to have the continued contributions of Cathy Simpson to several NSHEN activities. We also welcomed Amy Middleton as our part-time programming coordinator to assist with NSHEN's needs, especially in relation to several new ethics education initiatives. Thanks to Marika for her wonderful organization of and details relating to ongoing projects and activities prior to her leave. Jeff Kirby and myself both were involved with several NSHEN events, including workshops and the annual conference, as well as responding to ethics requests – rounding out the team of persons from the Department of Bioethics engaged with NSHEN.

As is apparent from the other sections in this annual report, there are many ways in which we are engaged with ethics issues throughout the health care system. With the Carter decision at the Supreme Court, there has naturally been increased attention to the potential clinical and organizational implications – something which will continue for the next year (and likely beyond) as we anticipate provincial and federal responses. And, with the transition to the Nova Scotia Health Authority on April 1, 2015, as we have already been discussing with the collaborating partners in NSHEN, there will be new opportunities to reflect on and consider how best to meet ethics needs across the province. Lots to look forward to in the year to come!
Guysborough Antigonish Health Authority
Matthew Murphy

The GASHA Ethics Committee conducts its work within the mission, vision, and values of GASHA, and is particularly conscious of the importance of respect for the dignity of all human beings and for diversity, including that of culture and belief. The Committee’s purpose is to act as an advisory and consultative body to assist with ethical decision making and to promote the use of ethical principles throughout facilities and programs within the district. It also seeks to encourage reflection and increase the level of consciousness about ethical issues amongst GASHA staff, physicians, patients, families, community members and volunteers.

This past year has been another successful year for the GASHA Ethics Committee. Consistent, dedicated membership has resulted in a raised awareness of the Committee and the valuable work that it provides. This was evidenced throughout the past year via increased rates of both clinical and organizational ethics review referrals, as well as requests for policy review.

Further, the Annual Education Day, hosted with support from the Nova Scotia Health Ethics Network (NSHEN), held on March 25 and 26, saw a tremendous number of participants both from GASHA staff and physicians, as well as from the general public. The events were aimed at increasing awareness and knowledge about people’s right to live at risk, and the various ethical principles that may come into play when considering this complex topic.

As we transition into the new Nova Scotia Health Authority, GASHA as a legal entity will cease to be, and thus the GASHA Ethics Committee will need to change. The Committee will work with NSHEN, and the various other Ethics Committees around the province to create a new structure that will ensure ethics remains of vital importance.

IWK Health Centre
Lisa Clements-Titcombe

Following a standard agenda, including updates from the Nova Scotia Health Ethics Network (NSHEN), policy review, review of clinical and organizational consultations, the IWK Ethics Committee meets on a monthly basis. We are in the process of receiving IWK Board approval for new committee members, adding to our strong membership.

Among reviewing a number of different policies (including the Conflict of Interest, Decision-Making about potentially life sustaining treatment), the Ethics Committee has also helped to re-vamp the Partners in Care handout; making it more comprehensive and providing a better understanding of the responsibilities of our patients & families, our staff, and the responsibilities we share. Committee members are also active in a Donation in Kind Working group, working closely with Child Life, the IWK Foundation, along with other stakeholders to ensure donations to the Health Centre are managed in a consistent way.

As always, education events are very important to the committee; a portion of each committee meeting is set aside for discussion and review of an ethical situation (case-based, topical, or theoretical). “Edible Ethics” also continued to rave reviews from participants; this 50 minute facilitated conversations provide staff, physicians and volunteers the opportunity to discuss pre-determined scenarios/topics.

With Accreditation quickly approaching, the Ethics committee has been very active in educating the IWK community about ethics supports at the IWK, taking part in various information sessions in the Gallery. The Ethics Framework has also been updated to demonstrate how ethics is woven and supported throughout the IWK.
Nova Scotia Department of Health & Wellness
Tracey Barbrick

Due to the restructuring of our health authorities, some Advisory Council members were not available to generate their annual report. The NSHEN Operations Team still maintained service delivery when requested.

Pictou County Health Authority
Lynda McAllister

In 2014/15, the PCHA Ethics Committee continued to meet monthly to build our own capacity, to explore ways to increase membership, and to build awareness among front line staff of the committee’s mandate.

This fiscal year we had three committee members step down – two due to realignment of work responsibilities and one due to retirement. As a result of a recruitment campaign, we also experienced a long awaited expansion of our membership to include three RNs, and a member of the clergy, as well as replacements for the members who stepped down (a long-term care representative and senior leadership liaison).

Currently, the committee is reviewing decision-making tools around clinical ethics. Once we decide on a tool, next step will be to create and implement an education plan for front line staff, physicians, patients/clients/families on how to incorporate the tool into their practice when required.

The roll out of this decision-making tool will be a part of a more general communication plan around increasing awareness of the committee, how the committee can be of benefit district wide, and how the committee will work within the new provincial ethics structure in the new fiscal.

NSHEN continued to provide valuable support and educational opportunities throughout this fiscal year; for example committee members participated in the Advanced Clinical Ethics education session in April 2014 and participated in the planning sessions for ethics in the new provincial health authority.

Our hope looking forward is that we continue to grow as a local team and contribute to and collaborate with our partners in the Northern Zone and across the province.
South Shore Health
Paul Fieldhouse

This past year has seen the South Shore Ethics Committee maintain a focus on education for the committee members as well as conduct an organization wide Needs Assessment around ethics education. We also welcomed four new members this year each one working in a different aspect of health, which has strengthened the committee and added fresh perspectives.

Committee members have been viewing the NSHEN fireside chats during the education portion of our meetings and one of our members attended the excellent workshop on the “Duty to Care” led by Christy Simpson and Cathy Simpson of NSHEN. Our committee also responded to a full clinical consult as well as a number of less formal consults. Members continue to provide an introduction to ethics at general orientation for South Shore NSHA employees. The committee also continues its work hosting an ethics blog on the South Shore intranet where a case study and commentary are posted and discussed each month. This is drawing a number of staff to the ethics site on a daily basis.

The Ethics Committee of South Shore is looking forward to hosting our second Annual Ethics workshop in June entitled “Little Things Make a BIG Difference” with NSHEN Ethicist Marika Warren facilitating. We will be exploring issues of diversity in health and looking at the micro ethical moments in day to day practice where we can make better or worse choices.

We look forward to working within the new Nova Scotia Health Authority and partnering with the committees in South West and the Annapolis Valley.

We look forward to collaborating with NSHEN to plan and offer our second Ethics Education day on the South Shore in fall of 2014.

South West Health
Julie Ford

Due to the restructuring of our health authorities, some Advisory Council members were not available to generate their annual report. The NSHEN Operations Team still maintained service delivery when requested.
NSHEN’S WORK

Ethics Education

NSHEN has addressed a wide range of health ethics issues through a variety of educational formats this year, including our annual conference, newsletter, fireside chat videos, a bioethics book club, the NSHEN library, social media, a new website, and several workshops.

NSHEN launched a new educational resource this year in the form of six short video discussions with experts on various health ethics issues. These Fireside Chat videos are posted on the NSHEN website with discussion questions and resource lists for those looking for more education on the issue. The topics discussed in the videos include:

- Advance Care Planning
- Building Trust and Bridging Values in Times of Conflict
- Dealing Ethically and Collaboratively with Difficult Patients
- Disability, Dignity and Medical Aid in Dying
- Ethics and Personal Responsibility for Health
- Ethics, Diversity and Inclusion in the Health Care System

These videos are intended to be conversation starters and we welcome suggestions for other ways to use them.

Clinical Ethics

In the past year, NSHEN offered two workshops for addressing ethics issues relevant to the clinical context. The first was the Advanced Clinical Ethics Consultation (Level 2) workshop delivered in Truro (April 2014). This workshop is designed to further enhance the capacity of ethics committee members who respond to requests for assistance with clinical ethics issues. Largely case-based in focus, this workshop provides the opportunity for participants to explore more complex cases, reflecting on both content and process related aspects of consultations. It also creates a space in which participants can share their experiences with clinical ethics consultation, ask questions and seek feedback.

The second was the Duty to Care workshop held in New Glasgow (November 2014). This is a new workshop developed in direct response to ongoing interest in further opportunities to explore the nature of the duty to care, especially in respect of the duty to provide a safe work environment. This workshop canvasses both clinical and organizational examples that help to illustrate tensions that may arise in practice as well as encourage reflection on our personal and professional perspectives in relation to these two duties. It is a natural extension of earlier NSHEN-led work in developing an ethics discussion guide related to the duties to provide care and a safe work environment at both clinical and organizational levels. This workshop received much positive feedback, and forms the basis for an upcoming presentation at the Canadian Bioethics Society Annual Conference in May 2015.

We also responded to requests for clinical ethics support which included complex patient situations, especially in respect of decision-making, and assistance with addressing staff moral distress and identifying appropriate communication lines within one’s place of work.

Over the past year, in collaboration with the provincial Baby Friendly Initiative Coordinator, there has also been ongoing work in relation to developing a tool to support health care providers and others as they talk with women in respect of informed choices about infant feeding.
Health Policy

NSHEN piloted a new Ethics and Health Policy Workshop in June 2014 that was designed to enhance the capacities of ethics committee members and healthcare providers to perform ethics reviews of health policies with significant ethics dimensions. The workshop was held on a beautiful summer day in Pictou County at the Pictou Lodge Resort, and was facilitated by two members of the NSHEN Operations Team, Cathy Simpson and Jeff Kirby. Although an overview of the fundamental elements of socially-just health policy development was presented, the workshop was, intentionally, a very hands-on, pragmatic experience for the participants. Ethics policy review exercises were developed during the planning process that made use of specific policy content within existing district policies including a Potentially Life-sustaining Treatment Policy, a Palliative Sedation Policy and a Conflict of Interest Policy.

A new policy tool that was recently developed by NSHEN and the Department of Health & Wellness, i.e., the Privacy Breach Notification Decision Making Tool, was also reviewed by the participants. NSHEN’s existing Ethics Review Template was used to structure the collaborative ethics review work throughout the workshop. Considerable time was built into the workshop for dynamic, interactive discussion and dialogue.

During the year, some preliminary work was performed by Marika Warren and her public health colleagues on the development of a novel public health ethics framework. This work grew out of a previous, well-attended NSHEN Public Health Workshop, and was championed by Dr. Frank Atherton, the province’s Deputy Chief Medical Officer of Health. It is anticipated that development work on this framework will resume in the summer of 2015. Although NSHEN had intentions to begin development work on a general, ethics-informed decision making framework for the NS Department of Health & Wellness (DHW) over the last year, this initiative had to be put on hold due to the heavy demands placed on DHW related to planning for the transition to the new provincial Nova Scotia Health Authority (NSHA) on April 1st, 2015.

In an important, policy-related initiative, NSHEN worked closely with the Dalhousie University Department of Bioethics and the Ethics Committees of nine (former) health districts to develop a comprehensive proposal for an innovative ethics-support model for the new provincial health authority. This proposal was submitted to NSHA Leads in March 2015.

Organizational Ethics

Organizational ethics focuses on the questions, challenges and concerns that can arise in the organization and delivery of health care. In many instances, this includes identifying and addressing potentially competing responsibilities related to the key values that underlie what we do, and believe we should do, in health care.

Requests for organizational ethics support in the past year included decision-making about the disclosure of adverse events, addressing conflicts about potentially life-sustaining treatment at a program/unit/organizational level, and guidance about interpretation and application of relevant international guidelines in a provincial context. These requests canvass a broad range of organizational issues, providing the opportunity to demonstrate in different contexts the value of including an ethics lense as part of addressing the relevant questions, concerns, and options for moving forward.

Interestingly, in the past year, several requests related to organizational ethics were also received from organizations and individuals outside of both NSHEN’s jurisdiction as well as the province. In responding to these requests (primarily by providing information or speaking with the requestor), the profile of NSHEN, and the value of ethics support generally, is heightened. The requests included guidance about ethics frameworks in relation to Accreditation Canada’s requirements; feedback on how a new ethics committee has been set-up; and, information about how NSHEN was developed and is structured. As noted in the 2013-2014 Annual Report, as other provinces move to district and regional models for delivering health care, interest in how ethics needs are being met in Nova Scotia has increased.
Network Request Summary

* indicates more than one request in that topic area

| Outreach | Process and Specific Topics | 2 | Request for assistance with Bioethics Book Club request  
| | | | Request for Duty to Care Discussion Guide |
| Organizational Process | Process and Specific Topics | 6 | Requests include: PHEEP request, follow-up request for NSHEN operational information, DHW policy request related to breast feeding, request for information on how to develop a regional ethics network in Hamilton ON, request for assistance with LTC Ethics Committee (2)  
| | | | Requesting areas: PHEEP, Hamilton ON (2), DoHW, Northwood |
| Organizational Specific Topic | Process and Specific Topics | 4 | Requests include: NSHEN assistance with Accreditation Canada, request for discussion on addressing conflicts about life sustaining treatment, request for assistance with decision making process and disclosure, LTC looking for information on policy decision making/guidance to help make organizational funding decision  
| | | | Requesting areas: GASHA, Shoreham Village, CEHHA, SWNDHA |
| Clinical Process | Process and Specific Topics | 0 | |
| Clinical Specific Topic | Process and Specific Topics | 3 | Requests include: complex patient situation, support for patient crisis, guidance on staff moral distress  
| | | | Requesting areas: SSDHA (2), CHA |
| Education Specific Topic | Process and Specific Topics | 1 | Requests include: information request for ethics/culture/homosexuality  
| | | | Requesting areas: SSDHA |
The following activities were initiated by NSHEN throughout 2014-2015. The topics presented were based on feedback received from evaluation forms distributed at previous sessions. Overall feedback from each session was very positive.

<table>
<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Topic</th>
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<tr>
<td>April 2014</td>
<td>Telehealth</td>
<td>Ethics Committee Live: The case of the hidden camera</td>
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<td>April 2014</td>
<td>Bi-Monthly Newsletter</td>
<td>Considering the “Grey” Zone: Professional Boundaries and Ethics Week</td>
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<td>July 2014</td>
<td>Bi-Monthly Newsletter</td>
<td>Reflections on Dignity, Disability and Dying</td>
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<td>September 2014</td>
<td>Bi-Monthly Newsletter</td>
<td>NSHEN’s Upcoming Conference on Ethics of Risk</td>
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<td>October 2014</td>
<td>Annual Conference</td>
<td>Risky Business: Ethics of Risk in Healthcare</td>
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<td>October 2014</td>
<td>Fireside Chat Series</td>
<td>Ethics and Personal Responsibility for Health, Michael Vallis</td>
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<td>Building Trust and Bridging Values in Times of Conflict, Part 1, Paul Hutchinson</td>
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<td>Building Trust and Bridging Values in Times of Conflict, Part 2, Paul Hutchinson</td>
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<td>March 2015</td>
<td>Fireside Chat Series</td>
<td>Advanced Care Planning, Deb McLane &amp; Cathy Simpson</td>
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<td>March 2015</td>
<td>National Health Ethics Week: NSHEN Bioethics Book Club</td>
<td>Interactive discussion about the book Being Mortal by Atul Gawande</td>
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The following NSHEN hosted workshops were also held:

- NSHEN Advanced Clinical Ethics Consultation Workshop, April 9, 2014, Truro NS
- NSHEN Policy Workshop, June 3, 2014, Pictou NS
- NSHEN Duty to Care Workshop, November 26, 2014, New Glasgow NS
## Expense Overview

### Fiscal Year 14-15

April 1, 2014 to March 31, 2015

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<td>Revenue from Conference</td>
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* Event support, website development  
** Annual conference  
*** Includes Administrator phone, photocopying of conference materials and supplies
NSHEN’s Annual Conference  
Liverpool, Nova Scotia

Risky Business: Ethics and Risk in Health Care

The annual NSHEN conference, Risky Business: Ethics and Risk in Health Care was held this year in Liverpool on October 23, 2014. A panel presentation on Medical Aid in Dying was also held the evening of October 22nd. We were happy with the turnout for both events and feedback from participants was very positive.

The evening panel on Medical Aid in Dying provided a rich exploration of this complex topic across a spectrum of end-of-life care practices. Moderated by Dr. Christy Simpson, the panel included perspectives from spiritual care (Dr. Cathy Simpson), palliative care (Dr. Anne-Marie Krueger-Naug), health law (Martina Munden) and ethics (Dr. Jeff Kirby). The panelists provided clear definitions of relevant terms and explanations of pertinent legislation and case law, discussed key values underlying the issue, considered a variety of spiritual and religious perspectives on the topic, and explored how to negotiate the sometimes conflicting ethical and legal rights and responsibilities of health care providers, patients and families. Evaluations indicated that attendees found the event very informative and thought provoking.

NSHEN coordinates an annual conference with the aim of delivering ethics education to Nova Scotia’s health care providers, administrators and policy-makers. It also provides a forum for networking and collaboration between people interested and working in health ethics. This year’s topic of Ethics and Risk was explored with the following guiding questions:

• How do our perceptions of risk affect our ethical judgment?
• How do we deal with risk ethically in our everyday practice?
• How do we communicate information about risk in the context of supporting informed choice?
• How should we act in the face of risk and uncertainty?
• How does system change generate risk (and opportunity)?

Dr. Peter Vaughan, Deputy Minister of Health and Wellness, opened the conference with a plenary presentation on risk related to provincial health system change. The remainder of the day was filled with breakout sessions exploring risk related to five different themes.

Dr. Aileen Brunet presented on risk and mental health, specifically related to her work as a forensic psychologist. She presented a number of complex ethical issues that arise in this work, asking participants how our perceptions of risk in each situation affect our ethical and clinical judgments.

Dr. Frank Atherton’s session explored risk related to public health and the environment. He used local public health examples to illustrate how we perceive, communicate and practically deal with environmental risk in ethical ways.
Maha Amin, Dr. Susie Brigham and Kara Paul formed a panel on risk in a cultural context. The speakers used case examples and a role-play exercise to explore issues around cultural competency and cultural safety in the context of providing health care to diverse populations.

Dr. Cathy Simpson and Dr. Christy Simpson presented an interactive workshop on risk in light of the duty to provide care. This discussion canvassed a wide range of aspects of duty to provide care, including how much risk is acceptable and who makes this decision, identifying relevant- and often conflicting- values and principles, the subjectivity of risk assessment and inequity of risk distribution.

Dr. Jeff Kirby’s session explored ethical issues related to public disclosure of adverse patient safety events. Participants used an ethics decision-making framework to work through a case study related to the communication of risk at an organizational level, considering issues of truth-telling, trust, relational autonomy and justice.

Thank you to the speakers and participants for your contributions to the event; we appreciate your support for developing health ethics capacity in Nova Scotia.
NSHEN partnered again this year with the Canadian Bioethics Society to coordinate the second annual National Health Ethics Week, March 2-8, 2015.

NSHEN made a significant contribution to this national event by providing time within Amy Middleton’s position to coordinate the initiative. We were one of over 80 organizations from all 10 provinces and 1 territory to participate – a huge increase over the 28 participating organizations in 2014.

NSHEN held a Bioethics Book Club discussion to discuss Atul Gawande’s recent book Being Mortal: Medicine and What Matters in the End. Due to a change in Capital Health’s Telehealth Booking policy for educational events, we were unfortunately unable to hold the event province-wide via telehealth. However, we distributed discussion questions so district ethics committees could hold their own local event, and had a rich and insightful in-person discussion with a group of participants in Halifax.

NSHEN was so pleased to see 8 other Nova Scotian health districts and organizations participating this year:

- Cape Breton District Health Authority
- Capital District Health Authority
- Dalhousie University Department of Bioethics
- IWK Health Centre
- Maritime SPOR SUPPORT Unit
- Mount Saint Vincent University
- Saint Mary’s University
- South Shore District Health Authority

More information about the initiative, including listings of participating organizations and events that took place across the country, can be found at www.bioethics.ca/ethicsweek.

NSHEN is looking forward to planning our involvement in next year’s National Health Ethics Week to be held April 4-10, 2016.
Nova Scotia Health Authority

ETHICS IN THE NOVA SCOTIA HEALTH AUTHORITY

With the shift from DHAs to the Nova Scotia Health Authority this past year NSHEN has been working with representatives from the DHAs to determine how best to continue to meet the ethics needs in the province, since these needs will not be significantly altered by the shift to a new organizational structure. That said, the creation of a new structure does generate opportunities to apply ethics lenses to that structure and its function as well as potential to address more effectively address certain types of ethical questions, especially in the areas of policy and organizational ethics.

Knowing that the shift was coming, NSHEN has worked with representatives from the former DHAs to determine where various aspects of the ethics work currently being done in Nova Scotia should be housed in the new health authority structure. These conversations began at the annual conference in October 2014 and continued at a day long meeting in January 2015. These discussions confirmed the commitment to ethics in the province and the interest in exploring new ways of supporting ethics work.

In preparing for these discussions, an inventory of ethics committees and resources was created, which served in part to highlight the considerable capacity that we have developed in the province (available by request). A draft proposal was generated after the January 2015 meeting and all participants had a chance to revise it. The resulting document was circulated to DHA ethics committees for feedback. The proposal was then shared with NSHA CEO Janet Knox, who passed it on to Dr. Patrick McGrath, VP Research, Innovation, and Knowledge Translation. We are now preparing supporting materials so that Dr. McGrath can present the proposal to the other members of the executive.

The exact nature of the structures providing ethics support are still being determined, and we anticipate that it will take some time for new committees and groups to settle into place. In the proposal, we envision ethics work being divided between local teams which are responsible for consultation and delivery of education, zone committees that coordinate consultation and education and provide local lenses on policy and organizational issues, and health authority teams that work to generate consistent approaches to policy and organizational ethics, with NSHEN providing support for all of these activities.

We are planning to run workshops focusing on ethics committees, policy, and organizational ethics in the fall as one means of providing support for these new entities, although we anticipate that many of the people currently involved in ethics work will remain engaged since there is broad agreement that we don’t want to lose the capacity and enthusiasm we’ve built.

We look forward to continued discussion regarding how best to meet ethics needs in the province within the fiscal constraints established by the provincial budget and to capitalizing on new opportunities that arise as the health care system shifts and settles into its new form.
Looking Ahead

There are a number of interesting and challenging ethical issues and questions that are arising as the health care system changes and public expectations of the system shift. Some of these include dealing proactively and systematically with conflicts of interest, making hard choices around accessing various sources of funding for research, services, and programs, and allocating resources fairly. In addition, many other issues remain perennial, such as making decisions appropriately, addressing risk professionally and organizationally, recognizing the right to live at risk, as well as determining suitable boundaries within caring relationships, dealing ethically with health information, and determining how to provide good care to an increasingly diverse population.

As the health system changes, some of these ethical questions that are always present can be examined in new ways. This is especially true of questions around justice and equity regarding division of and access to financial, capital, and human resources. Change presents the opportunity to bring the actuality of health care delivery more into line with our ethical ideals.

Fiscal restraint, however, remains the order of the day while patient and population needs remain constant or increase. In these circumstances, it becomes especially important to address obligations to provide a safe work environment for health care providers while also providing patients with a safe environment in which to receive care and to think broadly about what we mean by safe. Challenges related to funding in the health care system are apparent and health system restructuring presents an opportunity to find effective ways to apply ethics lenses to budgeting and planning processes.

Nationally, upcoming changes to the status of medically assisted death in Canada will present us with new ethical questions as we work through what these changes will mean legally, medically, and socially. These changes raise specific questions about conscientious objection and equitable access that will likely be especially relevant to smaller provinces such as Nova Scotia.

And as always there are many “little things” in everyday practice that can make a significant difference to patient and family experiences in health care. So while it is important to be aware of and attentive to the “big” issues of the sort discussed above, cultivating good ethical habits, which addresses “microethics,” is also of value in healthcare settings.

In conclusion, there is no shortage of ethics work to be done at every level of the health system. We are confident, however, that we have the capacity in Nova Scotia to work through these challenges in a careful, thoughtful, and comprehensive manner and we look forward to further enhancing the ability of health care providers and policy makers to address ethical issues as they encounter them.