

Positive Talk

A resource for Carewest staff, volunteers, residents, clients and families about ethics in our care centres.



Positive Talk is a Carewest-developed series of booklets intended to help you communicate effectively and positively with the people around you. This module highlights several health ethics scenarios that can occur at Carewest and offers a framework to help you think through those situations. It touches upon some of the things that influence our decisions (such as culture, gender, background, values, race and religion) when staff, volunteers, residents, clients and families are facing difficult decisions.



What is Health Ethics?

Ethics is a way of looking at a situation and asking:
What is the right thing to do?

Health Ethics is the branch of ethics that focuses on ethical issues in health care, medicine and biology. It includes decisions that may need to be made about treatment choices and care options that residents/clients, families, health care providers and volunteers can face.

The importance of considering the ethical perspective in health care cannot be ignored. At Carewest, we aim to educate staff, volunteers, clients, residents and family members about health ethics while addressing some of the difficult ethical issues and questions raised daily in the care setting. For example, situations present themselves when the client can't speak for himself/herself and the family disagrees on what to do. Or the staff disagree. Who should decide?

The ethical decision-making process may include making decisions about the use of resources, making decisions about end-of-life care and trying to make sure people can make the most informed decision about their own or their loved one's care.

Sometimes difficult health care choices must be made. Different members of the health care team might have different ideas about the right thing to do. And the answer isn't always clear. Sometimes there are many choices when making an ethical decision.

Through this booklet, Carewest strives to educate everyone about their role in ethical decision-making, recognizing that choice and independence must be balanced with potential risk.

You can use this booklet as a reference when handling certain types of situations that may arise within a health care setting. In the end, the ownership of ethical decision-making rests with you.

The following pages highlight some situations that can occur in our care centres and offers insights on how to work through those situations.

1. Scenario

Accepting gifts

Ernest decided to recognize his favourite caregiver Abigail by buying her a box of chocolates.



Things to Consider:

Even though Ernest gave the chocolates specifically to Abigail for a job well done, it's Abigail's responsibility to decide whether or not she can accept the gift and if it can be shared with her colleagues. Gifts must not be encouraged and some should not be accepted. If Ernest wants to offer Abigail a small token of appreciation, she should let her manager know and share it with the members of her team so everyone's contribution can be recognized. Staff should never accept gifts of money but instead direct the client to donate to Carewest through the Calgary Health Foundation, if they wish.

Rights and Responsibilities:

- Staff must never accept gifts of money from clients.
- Any small tokens of appreciation should be shared amongst the team.
- Employees must never engage in financial dealings with clients such as wills or banking.


2. Scenario

Neutral choice

Mrs. Green's husband has advanced dementia. At his care conference, the nurse asks Mrs. Green, who is now speaking on her husband's behalf and if he had any end-of-life wishes.

I understand Mr. Green hasn't put his wishes in writing. I know this is a difficult time Mrs. Green, but can you tell me if Mr. Green expressed his wishes regarding end-of-life care?

Oh dear! We didn't ever really talk about this but I do recall him saying he did not want to live with dementia. What do you think I should do?



Unfortunately, this decision is for you and your family. But it might help to consider your husband's values and religious beliefs. Did he say anything to you that might indicate his wishes? Would you like to speak further with your husband's physician or some of the resource people available to help make a decision that feels right to you?

Things to Consider:

Mrs. Green must weigh and interpret what her husband may have communicated with her and the information she was provided by health care professionals, balanced with her own feelings about death. It's important for the nurse in this scenario to stay neutral to allow Mrs. Green to make her own decision. However, she may guide Mrs. Green through discussion about Mr. Green's values, religious beliefs and culture.

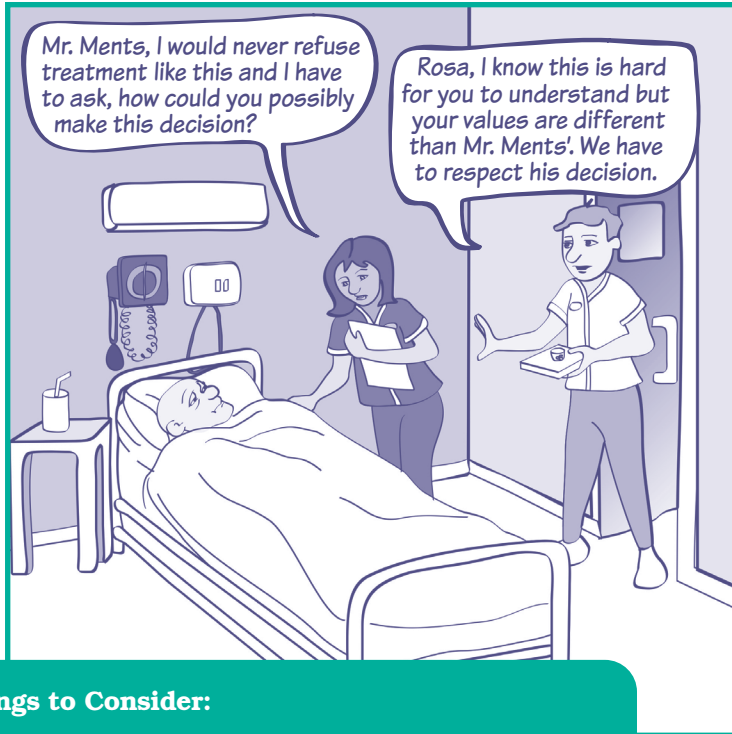
Rights and Responsibilities:

- It's the responsibility of health care professionals to stay neutral during times of decision-making.
- Staff can guide clients and families through discussion about what's important to them.
- Clients/family need to have the opportunity to consider all information carefully in order to make an informed choice.

3. Scenario

Differing values

Mr. Ments is dying in Hospice. His choice is not to have potentially life-saving treatment due to his religious beliefs. Rosa, a new employee, is shocked to see someone making that kind of a decision. She enters his room to ask him why.



Things to Consider:

Sometimes the values, cultures and beliefs of clients, families and staff differ. Everyone is entitled to their own beliefs and many people use their beliefs and values to make decisions about their care. Just because you might feel one way, it doesn't mean everyone around you must feel the same – everyone is entitled to their own beliefs.

Rights and Responsibilities:

- Clients have the right to their own religious and cultural beliefs.
- Clients should be provided information in order to make an informed choice.
- Staff have the responsibility to look at client needs through a holistic approach – physical, mental, emotional, spiritual, cultural and social.

4. Scenario

What do you do?

In a meeting with her father's physician, Danielle is informed her father has stopped eating. Her father can no longer communicate for himself and Danielle doesn't know if feeding her father through a tube would be against her father's wishes.

I don't know what to do! I don't want to just allow Dad to waste away but I don't know if he would agree with the idea of being fed through a tube. I wish he could give me a sign but he hasn't been able to communicate for the last few weeks. What should I do?



Things to Consider:

This is a common dilemma in continuing care and you are not alone. There are always many things to consider – your wishes, your loved one's wishes and staff recommendations. Keep in mind that the AHS Clinical Ethics Service can help you work through dilemmas like this (see pg. 15 for more information).

Rights and Responsibilities:

- You have the right to ask for help and for more information.
- Your loved ones have the right to have their last wishes honoured.
- Staff have the responsibility to respect the client's and family's choices.

Ethical Decision-Making Framework

Four areas of thought can be used by teams as guidelines for discussion and decision-making when working through an ethical situation. They include:

- 1) Doing good or acting in another's best interests;
- 2) The right of each person to make informed choices;
- 3) To do no harm and to protect others from harm;
- 4) All persons should be treated fairly.

1. Doing Good

How is the client benefiting from care?

- Medical history, diagnoses, prognosis?
- Condition acute? Chronic? Reversible?
- Goals of treatment?
- Possibility of success?
- Possibility of failure? Any plans?

2. Informed Choices

Is the client's right to choose being respected to the highest level possible?

- What has the client said about choices?
- Is the client aware of risks and benefits?
- Demonstrates understanding/has given consent?
- Mentally/legally competent? Evidence?
- Advance directive? Previous choice?
- If not competent, who is the Agent/Guardian?
- If no Agent/Guardian, who makes decisions?
- Client able and willing to cooperate?

3. Do No Harm

Is the suggested action likely to cause more harm than good?

- Client's view of quality of life?
- Able to return to prior level of function?
- Preconceptions due to caregiver's values/beliefs?
- Potential harm if treatment refused?
- Any plans/reasons not to treat?
- Client statements re: desire to live/die?
- Any plans for comfort/palliative care?

4. Treated Fairly

Is the client being treated fairly?

- Family/cultural/spiritual factors?
- Caregiver/interdisciplinary team issues?
- Any reason to breach confidentiality?
- Resource issues – staffing/equipment?
- Legal issues?
- Influence of clinical research or teaching?

Worksheet

Use the following worksheet to think through an ethical dilemma you're facing:

1. Doing Good

How is the client benefiting from care?

2. Informed Choices

Is the client's right to choose being respected to the highest level possible?

3. Do No Harm

Is the suggested action likely to cause more harm than good?

4. Treated Fairly

Is the client being treated fairly, relative to others?

5. Scenario

Conducting personal business at work

Teresa has just begun selling Avon products. She left a few of her brochures in the staff rooms and lounges on the unit where she works. Mrs. Sinclair, a resident on her unit, approaches Teresa to ask for a brochure.



Things to Consider:

How might some of the other residents under Teresa's care feel if they didn't buy her products and Mrs. Sinclair did? What if they felt Teresa was showing them less attention? What if Mrs. Sinclair was dissatisfied with the product? Any private business dealings done by staff, in which transactions occur with residents and clients, are not allowed.

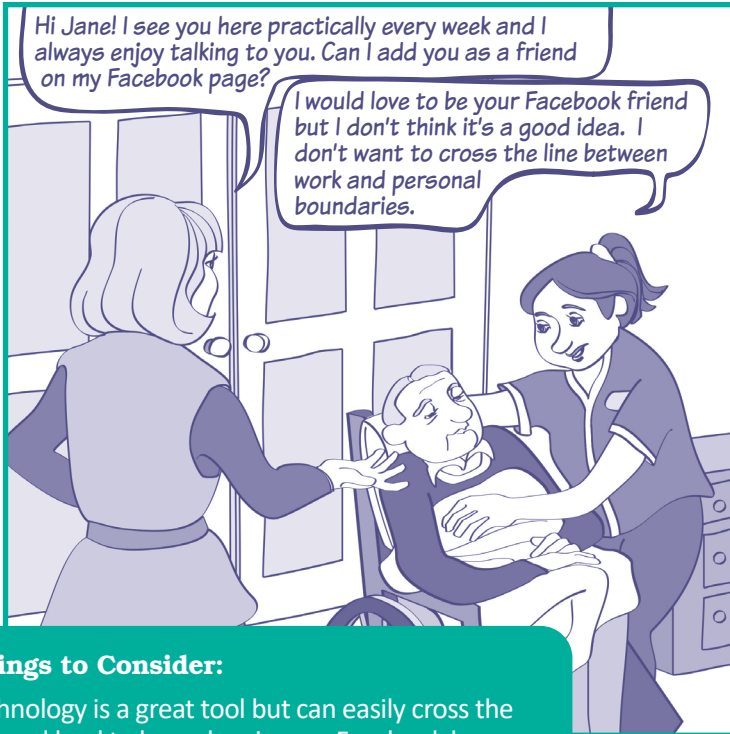
Rights and Responsibilities:

- Staff have a responsibility to ensure there is no conflict of interest.
- Clients have a right not to feel pressured to do personal business with staff.
- Financial transactions with residents and clients are not allowed.

6. Scenario

Confidentiality and the use of technology

Jane was working on the unit when she was approached by Sally – the daughter of one of the residents under her care.



Things to Consider:

Technology is a great tool but can easily cross the line and lead to boundary issues. Facebook has amazing potential for creating social networks but it's best not to "friend" clients or their family members. There are times when social networking can cross boundaries and compromise confidentiality for all parties. The use of Facebook while at work is not permitted. The use of technology, such as computers or cell phones, must be done in accordance with Carewest policies.

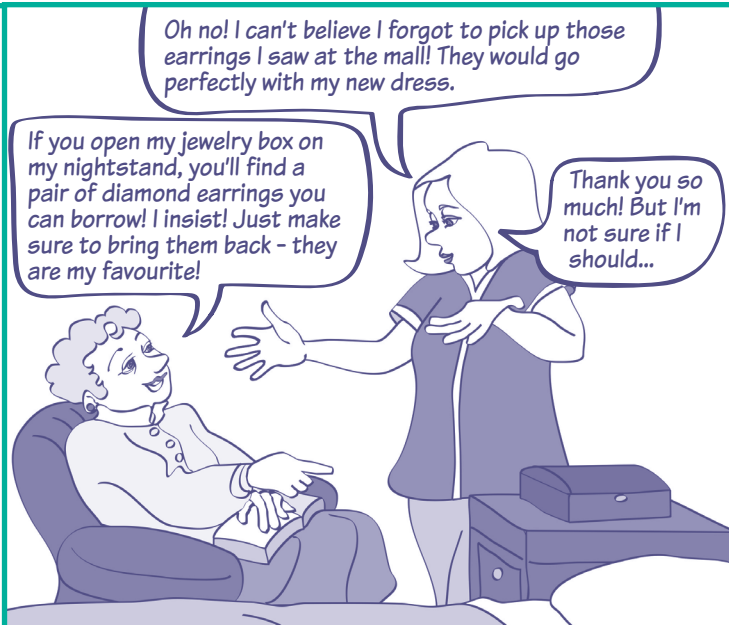
Rights and Responsibilities:

- Clients and their families have the right to confidentiality.
- Staff have the right to confidentiality.
- Staff have the responsibility to manage personal and professional boundaries.

7. Scenario

Client relations/Professional boundaries

Michelle is excited about a dinner date with her boyfriend after work and was telling her client, Mrs. Hubbard, about it when she realized she forgot to buy new earrings to go with her dress. Mrs. Hubbard offered to lend Michelle her diamond earrings for her date.



Things to Consider:

Michelle may not be sure about borrowing those earrings because she might feel it would go against Carewest policy. She would be correct. Borrowing money or possessions from clients is considered taking advantage of a client. Even though Mrs. Hubbard insisted, Michelle still has a lot to consider. What if the earrings were lost? What if she got in trouble at work? It may seem difficult to keep our professional lives and personal lives separate because of the personal nature of the work we do but borrowing items from residents or clients is not permitted.

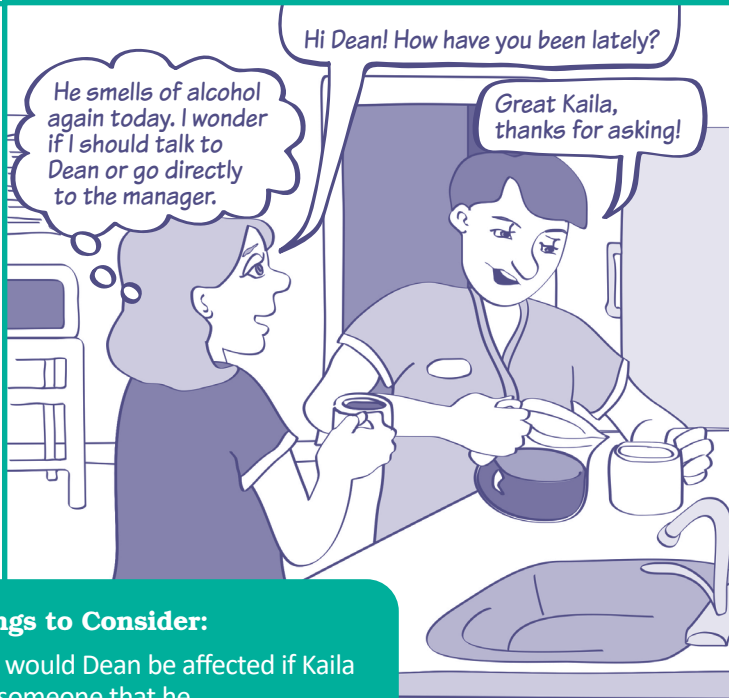
Rights and Responsibilities:

- Staff have the responsibility to be professional and honest.
- Residents have the right to have their personal property respected.
- Residents have the right not to be taken advantage of.

8. Scenario

Safety vs. confidentiality

Kaila notices her colleague Dean has been arriving at work in the morning smelling of alcohol. She has watched him for the past few weeks and his strong work ethic hasn't changed. She wonders what she should do.



Things to Consider:

How would Dean be affected if Kaila told someone that he smells of alcohol each day? How would her actions benefit residents and clients? Do Kaila's feelings about Dean as a colleague influence whether or not she brings the issue to someone's attention? And what about Kaila's feelings about drinking? What would you do?

Rights and Responsibilities:

- It is Carewest policy that no employee shall be allowed to commence duties if, in the opinion of the most responsible person, the employee is under the influence of alcohol or an illegal substance.
- Employees are expected to be honest, dedicated and caring professionals and will conduct themselves with honesty, respect and professionalism.
- You have the responsibility to report any concerns to a manager if there is a potential safety risk to residents or clients.

9. Scenario

Attendance

It's Friday and Gabrielle called in sick. Jeff asks Shannon if Gabrielle is okay.



Things to Consider:

Your lifestyle choices affect the people you care for more than you realize. Calling in sick when you aren't sick can put additional stress on your co-workers and the whole unit, which can affect our residents and clients. Using your sick-time benefit when you aren't sick is wrong.

Rights and Responsibilities:

- Clients have the right to safe, quality care within the resources that are available.
- Staff have the responsibility to regularly attend their scheduled shifts.
- Staff are expected to conduct themselves honestly.

Clinical Ethics

If you are in a situation where a difficult health care choice must be made, you should first have a thorough discussion with your family, physician and the rest of the health care team.

The Ethics Decision Making Framework can help guide you in those discussions (Pg. 8-9).

If there are still unresolved questions or the issue is creating conflict, a trained ethicist can provide additional help.

Carewest has access to the AHS Clinical Ethics Service with a health ethicist who focuses on community and mental health, including continuing care.

Through guided discussion, the ethicist assists the people directly involved in the situation to look at the concerns from all sides so that they can make the best decision possible.

The ethicist's role is to help identify the issues more clearly and help explore alternatives.

Any staff member, physician, family member, client or resident of Carewest can use this service.

As a first step, e-mail clinicaethics@healthshareservices.ca.

The information that you provide to the ethicist during the course of the process will be treated with confidentiality and respect.



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