

# REVISING OUR CODE OF ETHICS . . . WHY NOW?

## Part 2 of 4

In the last issue of *Pharmacy Connection* (Spring 2015) we published the first in a series of four articles about the initiative to revise our Code of Ethics.

[Part One – What's Ethics Got to Do With It?](#) – provided an introduction and overview on the role and purpose of a Code of Ethics. The article was a reminder that the objective of a profession's Code of Ethics is to outline the unique obligations and behavioural and conduct expectations that come with being a health-care professional.

At the core of this obligation is the commitment to put the best interests of your patient first and foremost. The established ethical principles of healthcare: beneficence, non-maleficence, respect for persons/justice and accountability (fidelity) were defined and reinforced as *the* principles – not your own – that must guide and inform every decision you make as a healthcare professional.

The Code of Ethics – along with Standards of Practice, relevant legislation, policies and guidelines – are the foundational documents of all healthcare professions and collectively express the what, how and why of practice. Additionally, the requirements outlined in this profession's Standards of Practice and Code of Ethics communicate the *minimum* expectations of practice (diagram 1) that must be consistently met in order to deliver safe, effective and ethical care.

Ensuring that you clearly understand and are effectively practising to these expectations is a fundamental responsibility and strategic priority for the College.

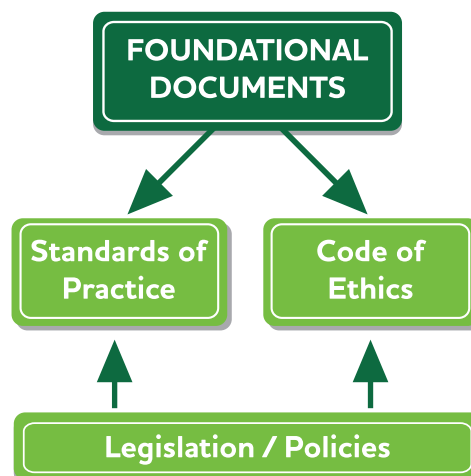
### EVOLVING EXPECTATIONS

The last substantial update to the College's Code of Ethics happened 20 years ago – a lot has changed since then!

The growing pressures of an overstretched health-care system, combined with an aging population have

**DIAGRAM 1**

Standards of Practice and Code of Ethics communicate the minimum expectations of practice for all pharmacists and pharmacy technicians, regardless of practice setting.



resulted in evolving expectations from government and the public, for all healthcare professionals. With an objective of *Putting Patients First* – in part through providing better access to the *right* care, by the *right* person at the *right* time – government has supported a number of enhancements to the scopes of practice of many professions – including pharmacy.

Expanded authority in the areas of prescribing, renewing and adapting prescriptions, and administering a drug by injection or inhalation – with more on the horizon – have enhanced a pharmacist's role and responsibility as a decision-maker. This has shifted the focus from the more technical aspects of dispensing medications to the delivery of clinical services.

As the pharmacist's role as a clinician increases, so too does their responsibility to ensure decisions are guided

by the ethical principles of healthcare. Ultimately, decisions must support the overriding commitment to put the best interests of patients first.

This shift in practice is evident in both hospital and community settings and has been supported in part by the introduction of a brand new healthcare professional – the pharmacy technician. Nearly 3,500 pharmacy technicians are currently registered with the College and working throughout Ontario. These integral members of the pharmacy team are not only independently responsible and accountable for their own scope of practice but are also held to the same ethical standards as pharmacists.

### MAINTAINING PUBLIC TRUST

There have been a number of other factors and incidents that have influenced society's confidence in the ability for healthcare professionals and regulators to effectively maintain the public's trust. As explained in Part One of our Code of Ethics series, all healthcare professionals have entered into a social contract with society. In exchange for society granting the profession the autonomy to govern itself, and the privileges and status that come with being a healthcare professional, pharmacists and pharmacy technicians – like all healthcare professionals – must continuously demonstrate their commitment to putting the needs of their patient above their own personal or business interests. This concept of being a fiduciary of the public trust is a critical point, and in fact is the foundation on which a profession's Code of Ethics is built.

### COMMITMENT TO ACCOUNTABILITY AND TRANSPARENCY

These changes that have happened over the past few decades are not unique to Ontario, or even Canada. As patient expectations evolve and trust erodes there is more and more pressure on healthcare professionals to demonstrate their understanding and commitment to delivering ethical care. The net effect has been a heightened focus – by both government and the College – on our mandates to serve and protect the public interest through our longstanding commitments to accountability and transparency.

To more effectively hold pharmacists and pharmacy technicians accountable for their professional conduct, the College must ensure that expectations are clearly understood and applied by all

## HELPFUL DEFINITIONS

### Fiduciary

Given the inherent power imbalance in the professional/patient relationship healthcare professionals are required under the social contract to act for and on behalf of the patient/society in order to retain public trust and confidence.

### Principle of Beneficence

The ethical principle of beneficence refers to the healthcare professional's obligation to actively and positively serve and benefit the patient and society.

### Principle of Non-Maleficence

The ethical principle of non-maleficence refers to the healthcare professional's obligation to protect their patients and society from harm.

### Principle of Respect for Persons/Justice

The ethical principle of respect for persons/justice refers to the healthcare professional's obligation to respect and honour the intrinsic worth and dignity of every patient as a human being, and to treat all patients fairly and equitably.

### Principle of Accountability (Fidelity)

The ethical principle of accountability (fidelity) refers to the healthcare professional's fiduciary duty to be a responsible and faithful custodian of the public trust.

practitioners.. In addition, these expectations must be transparent to the public, and any concerns regarding the ethical conduct of a pharmacy professional be noted on the College's website so patients can make informed decisions about their healthcare.

### REVISED CODE REFLECTS BEST PRACTICE

It is for all of these reasons that the College is revising our Code of Ethics. The project began when Council appointed a task force, who with guidance from an ethicist, reviewed and compared Codes of Ethics from pharmacy regulatory colleges across Canada, the United States, Australia and Great Britain. They also reviewed ethical conduct standards for physicians and nurses in Ontario.. Particular attention was given to codes that had been revised in the last five years or so, and were considered to be best practice. In particular, these included: the College of Pharmacists of British Columbia, the Alberta College of Pharmacists, and the General Pharmaceutical Council (the regulator for pharmacists and pharmacy technicians in England, Scotland and Wales.)

The most striking similarity of these codes is that they are all comprehensive with substantive content that describes expectations and provides guidance for understanding and applying to practice. They also include some form of context that outlines the role and purpose of the code, reference ethical principles and define who the code is applicable to. These codes also reflect the understanding that a profession's Code of Ethics, Standards of Practice and legislation – although companion documents that should not be read or applied in isolation of the other(s) – will contain duplication as some requirements are both ethical and legal.

### A SYSTEMATIC APPROACH TO DEVELOPMENT

An initial draft of the Code was developed using these sample codes as guides, and drawing on the feedback gathered from staff regarding current practice issues. This draft was modified using feedback gathered through informal focus groups with key stakeholders from a variety of practice settings and perspectives. These groups included practising community and hospital pharmacists and pharmacy technicians, corporate pharmacy managers, academic program leaders and pharmacy organization representatives.

Through this systematic approach to development, the task force created a proposed draft of the Code of Ethics which will be brought forward to Council at their September meeting for approval

for public consultation. The draft Code – which is for pharmacists, pharmacy technicians and the public – is a comprehensive document that outlines the core ethical principles in healthcare that dictate a healthcare professional's ethical duty to patients and society. The document supports these principles with standards that indicate how a pharmacy professional is expected to fulfill his or her ethical responsibilities. In addition to the Code, the task force has drafted a Declaration of Commitment which is meant to be signed by individual practitioners to confirm their understanding and commitment to their Code of Ethics.

Expectations outlined in the proposed draft of the Code of Ethics are unchanged and align with those in the current Code and Professional Responsibility Principles, Standards of Practice and all relevant legislation, policies and guidelines – they are simply more explicit in the new draft..

### WE WANT TO HEAR FROM YOU

After Council's anticipated approval of the proposed draft of the Code of Ethics at their September Council meeting, the document will be posted on the website for public consultation. This is an important step in the development of any proposed change to legislation, policy or foundational document such as the Code. The details of the consultation, including the deadline for submissions, will be communicated on the website, in e-Connect and through all social media channels following the Council meeting.

The consultation process is completely transparent with feedback welcomed from pharmacists and pharmacy technicians, and anyone who may have an interest, including corporations, institutions, associations and members of the public. All feedback received is posted on the website in accordance with [posting guidelines](#).

Following the consultation period, the task force will consider all feedback received as they finalize the College's new Code of Ethics. The new Code is expected to be presented to Council at their December 2015 meeting for approval.

Once the final Code has been approved, a comprehensive communications and education plan will support current and new practitioners as they understand and apply the Code in practice.

Stay tuned for more updates about the Code of Ethics project. 