Professionalism and Ethical Decision Making

A revised Professional Misconduct Regulation was reviewed and approved by Council in December 2013 and subsequently submitted to the Ministry where it is awaiting final approval and enactment. The proposed regulation outlines the College's expectations for members in practice. Regulation sets the legal framework for professional practice, but it is only meaningful in conjunction with the requirement for accepted skills, knowledge and judgment, and in the context of professional responsibility, codes of ethics and standards of practice.

Professionalism has been described as "a set of attitudes, skills and behaviours, attributes and values. which are expected from those to whom society has extended the privilege of being considered a professional". 1 Professionalism incorporates both character and behaviour.² The Principles of Professional Responsibility, Code of Ethics and Standards of Practice adopted by the College guide a member's behaviour when interacting with colleagues, other healthcare professionals, and patients.

While the Principles of Professional Responsibility, Code of Ethics and Standards of Practice provide a blueprint for what is considered professional behaviour and practice, good character is a trait that needs to be continuously developed and refined. Good character is the "grey" area of professionalism, and is a quality which members are expected to bring to clinical decision-making. When faced with difficult situations a member must always act with professionalism and use the resources discussed above to make decisions that reflect good character.

PRINCIPLES OF PROFESSIONAL RESPONSIBILITY

Principles are fundamental propositions that serve as the foundation for a system of behaviour.3 To ensure patient safety and the best patient outcomes a member must exercise all of his or her responsibilities, even when he or she is not working in a traditional pharmacy setting. The Principles of Professional Responsibility collectively articulate and are foundational to a member's professional responsibility. When making decisions a member must reflect on these principles to ensure he or she is thinking about his or her responsibility in delivering care within the broad context of the healthcare system during the decision-making process. Integration of these principles into the decision-making process will support members in being engaged, responsible and accountable as a part of a larger system of care than just the immediate task at hand.

CODE OF ETHICS

Ethics refer to the principles of conduct governing an individual or a group.⁴ The purpose of an ethical code is to describe a general approach for the provision of care within a moral environment.⁵ The Code of Ethics provides members with principles for ethical decisionmaking and outlines the Colleges' expectations regarding members' behaviour. The Code of Ethics provides principles that can be applied in relation to any situation that poses an ethical dilemma or conflict of interest. The ability to identify and apply these principles is one of many factors that ensure decisions reflect principled pharmacy practice. The Code of Ethics is not prescriptive and is meant to aide members in making ethical decisions; application of the Code of Ethics is the responsibility of individual members. There are no 'right' or 'wrong' solutions when confronting an ethical dilemma or conflict of interest, a member must uniquely consider each situation, given the relevant facts, to determine the best approach to achieve the outcome that serves the patient's best interest.

STANDARDS OF PRACTICE

Standards of Practice (SOP) outline essential competencies that define the profession and the generally accepted minimum level of practice for the profession. The purpose

of the standards of practice are to distinguish the minimal accepted practice against which a members' performance can be evaluated when undertaking the activities required for safe and effective pharmacy practice.⁶ The standards define the levels of proficiency for members and help members assess their practice relative to the expectations of peers, colleagues and the profession as a whole. Standards provide a guide to the knowledge, skills, judgment and attitudes members should apply to their practice to provide patients with safe and ethical care. When faced with an ethical dilemma or conflict of interest, a member should consider if there are SOP that apply to the situation.

THE SOP FOR PHARMACISTS USE FOUR BROAD DOMAINS TO CATEGORIZE PRACTICE;

- Expertise in medications and medication-use
- Collaboration
- Safety and Quality
- Professionalism and Ethics

The SOP for pharmacy technicians are identical except for the first domain where 'Expertise in drug distribution systems' replaces 'Expertise in medications and medication use'. The first two domains outline expectations with respect to central responsibilities for members, the latter two domains refer to critical attributes required to support successful delivery of practice.

STEPS FOR ETHICAL DECISION MAKING

When evaluating options it is important to keep in mind that there is not one correct option to resolve an issue. The best option for the patient depends on many factors including: the patient's treatment history and conditions; the prescription history; the patient's current condition; and the

pharmacist's knowledge and skill. A member needs to apply his or her professional judgment to determine which option is in the best interest of the patient in each individual circumstance.

The framework below can be used to assist a member in assessing a situation that poses a ethical dilemma or conflict of interest.

1. Recognize and describe the ethical issue.

- a) What is the underlying issue?
- b) What are the facts of the situation?
- c) Identify the principles related to the situation.
- d) Reflect to recognize your motives and ensure they do not influence your decision.
- e) Consider if you need further information or clarification.

2. Identify information required to assist in developing options.

- a) Is there any relevant legislation, policies, standards or guidelines, literature, research or best practice?
- b) Consult with colleagues.
- c) Have a discussion with the patient to get an understanding of the patient's expectations.
- d) Members must provide patients with the information required to make an informed decision.

Identify the best options based on facts and professional judgment

- a) Apply the principles and take into account any legislation, regulation, standard, guideline, or policy that applies.
- b) Consider the outcome that would provide the best solution for the patient giving consideration to the patient's wants and needs.
- c) What would be the possible

- consequence of each option?
- d) Use professional judgment to assess the options and document all options considered.

4. Choose the best option

- a) How would I feel if I was the patient in this situation?
- b) How would I feel if my actions were made public or presented to colleagues?
- c) What would happen if all practitioners did this?
- d) Could I explain how my solution best benefits the patient?

5. Implement and reflect on your choice

- a) Document your rationale.
- b) Notify other healthcare professionals if applicable.

The Principles of Professional Responsibility. Code of Ethics and Standards of Practice are tools that help members to make ethical decisions but are not unto themselves the answer and must all be considered in conjunction with the current practice environment. A member must reflect on his or her obligations as a healthcare provider when making decisions and use these tools to guide the decision-making process.

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- 3. Oxford Dictionary. Definition of Principle.
- 4. Merriam-Webster. Definition of Ethics.
- Alexander E. Limentani. An ethical code for everybody in health care. BMJ. 1998;v.316(7142):1458.
 Accessed at http://www.ncbi.nlm.nih.gov/pmc/articles/ PMC1113129/ November 14, 2013.
- National Association of Pharmacy Regulatory
 Authorities. Model Standards of Practice for Canadian
 Pharmacists.

The following example provides an illustration of how to apply the Steps for Ethical Decision-Making.

The parents of an adult child, age 23 years, who are long-time patients at your pharmacy, come to you with concerns that they are unable to obtain information regarding their daughter and that they are worried about her. She is being treated for diabetes mellitus and chronic pain secondary to injuries sustained in a motor vehicle accident two years previously. The parents have noticed their daughter has become increasingly withdrawn, moody and secretive and that her personality has changed. You have recently spoken to their daughter when she was picking up a new prescription for an antidepressant and she confided in you that she has been feeling very depressed since the accident. You are not sure if her physician is aware of the extent of the recent changes to her mood. They have asked you to provide them with a list of her current medications and any information you may have about her current condition.

1. Recognize and describe the ethical issue.

In this scenario the pharmacist has known the patient's parents for a long period of time and needs to determine what information, if any, he can provide regarding their daughters current therapy. Members are required to preserve the confidentiality of patient information and not divulge this information except where authorized by the patient, required by law, or where there is a compelling need to share information in order to protect the patient or another person from harm.

2. Identify information required to assist in developing options

A member is not able to disclose personal health information without the consent of the patient except under specific circumstances outlined in the Regulated Health Professions Act, 1991, which includes if there are reasonable grounds that disclosure is necessary to prevent risk of harm to the patient or public.1 A member is required to use his or her professional judgment to assess whether the patient poses a risk to herself or others and determine who should be notified of his or her concerns for the patient's well-being. The pharmacist does not have reason to believe the patient is at risk of harming herself or others at this time.

3. Identify the best options based on facts and professional judgment

Potential options may include:

- a) Provide the parents with the requested information as you have a longstanding relationship with them, do not want them to feel worried about their daughter, and do not want them to be upset with you.
- b) Inform the parents that you cannot provide information about their daughter's therapy and refer them to speak to her physician about their observations.
- c) Inform the parents that you cannot provide information about their daughter's therapy but assure them you will

speak to her to assess her current condition. Privately call the patient to follow-up on her antidepressant therapy and also follow-up with the patient's physician to ensure that he or she is aware of the information provided by the parents.

4. Choose the best option

Of the potential options outlined above, the most appropriate option in this particular case – since the pharmacist does not currently have reason to believe that the patient is at risk of harming herself or others - would be option c. This option preserves patient confidentiality and allows the pharmacist to open dialogue with the patient to further assess the situation, while ensuring the patient's physician is aware of the important information provided by her parents. If the pharmacist had chosen option a he would have violated patient confidentiality which is integral to the pharmacistpatient relationship. Choosing to do nothing as in option b would have maintained patient confidentiality, but the pharmacist would not have exercised his professional practice responsibilities and would not have demonstrated patientcentered care.

5. Implement and reflect on your choice

After calling the patient and her physician the pharmacist would document the dialogue in the patient record.

1. RHAP, 1991 s.36(1)