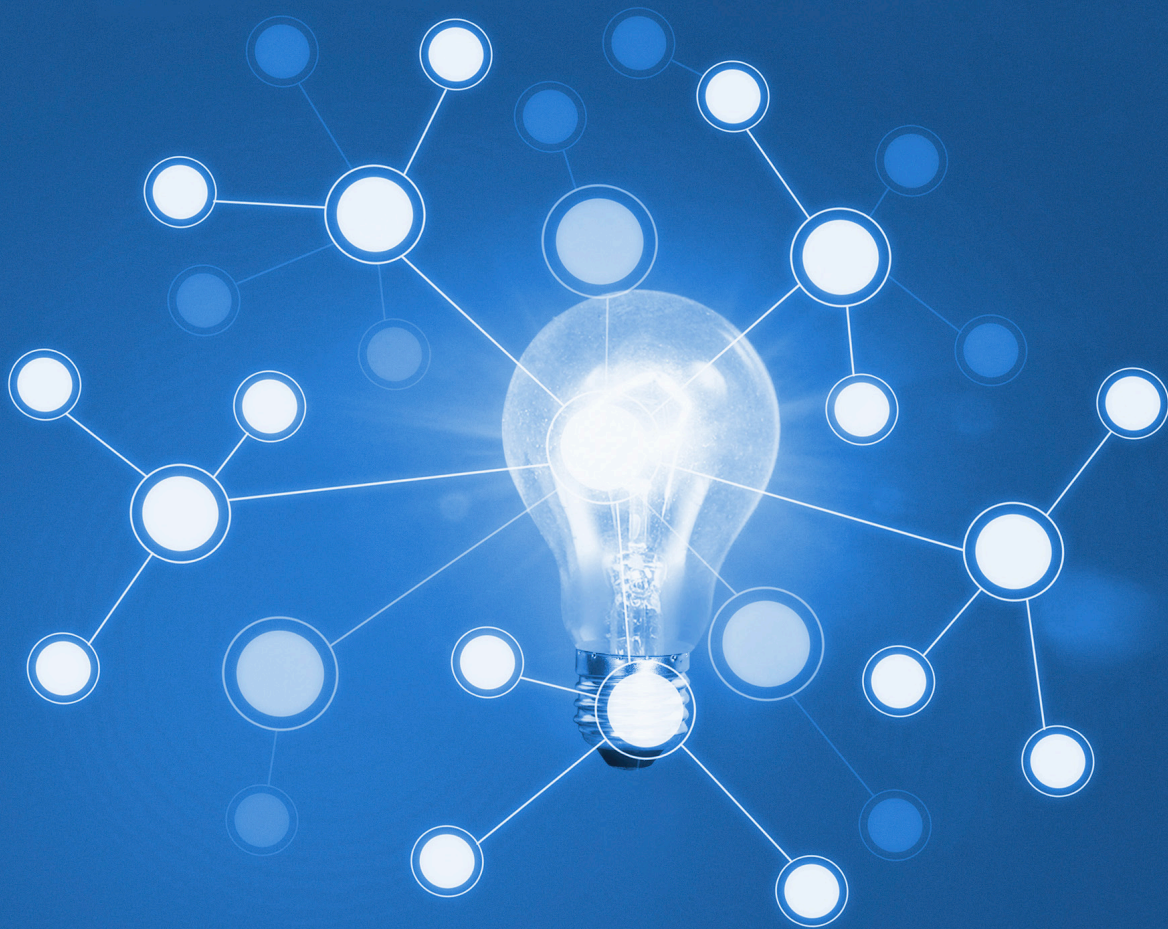




Bermuda Hospitals Board

# IDEA

IDENTIFY | DETERMINE | EXPLORE | ACT



ETHICAL DECISION-MAKING FRAMEWORK



## INTRODUCTION

Ethical issues arise every day in healthcare, and everyone has a role to play in ensuring the ethical delivery of care, from bedside to boardroom. Ethical principles and values are incorporated into the way that decisions are made and care is delivered every day.

Bermuda Hospitals Board (BHB) endorses the IDEA Ethical Decision-making Framework to guide and support individuals and teams in dealing with ethical dilemmas. This framework is available to Board members, staff, physicians, volunteers, students, patients, families and the general public.

## GOAL OF THE ETHICS FRAMEWORK

Develop a common approach to enhance and guide ethical decision making and practice, which applies to both clinical and organisational ethical issues at BHB.

### Objectives

- Build awareness and understanding of the ethical dimensions of healthcare provision and administration
- Facilitate staff, physicians and Board members to identify ethical dilemmas and issues in their work and roles
- Help staff, physicians and Board members to analyse, deliberate and resolve ethical dilemmas and issues
- Encourage staff, physicians and Board members to align their decisions and actions with relevant values, duties and principles

## ETHICS IN THE CLINICAL AND ORGANISATIONAL SETTINGS

Ethics is about making 'right' or 'good' choices and the reasons we give for our choices and actions. Ethics promotes reflective practice in the delivery of healthcare. Ethics addresses the question, "What should we do and why?"

Ethics is about:

- Deciding what we should do – what decisions are morally right or acceptable
- Explaining why we should do it – justifying our decision using language of values and principles
- Describing how we should do it – outlining an appropriate process for enacting the decision<sup>1</sup>
- Having a plan to assess and evaluate how the decision is impacting the situation
- Providing opportunities to revisit decisions when new information becomes available

While many decisions healthcare workers make on a daily basis have some ethical dimension, not every decision requires application of this framework. Ethical oversight in a clinical context is typically supported by policies, systems and procedures.

However, in some situations, knowing or doing the right thing is unclear or difficult. These situations represent **ethical dilemmas**, which this framework is designed to address. Anyone who identifies an ethical dilemma is encouraged to apply this ethical framework to address the issue with appropriate stakeholders.

<sup>1</sup>Definition adapted from Dr Barbara Secker, Joint Centre for Bioethics, University of Toronto

Ethical issues are often framed as 'should' questions. For example:

- How *should* the organisation make decisions about how much funding to provide to each of its programmes?
- If there is a shortage of critical care beds, how *should* decisions about who to admit (and who not to admit) be made?
- *Should* life-sustaining treatment be continued for a patient for whom the treatment is burdensome, with little to no benefit?
- *Should* a colleague's suspected alcohol abuse be reported?
- *Should* a patient be informed of a near miss in his or her care?

Ethical issues may involve one or more of the following:

- **Ethical Violation:** When an action that appears to be unethical is being proposed or carried out (e.g., a patient is being given a treatment without providing a valid consent)
- **Ethical Dilemma:** When there are competing courses of action, all of which may be ethically defensible (e.g., conflicting values) and there is a difference of opinion as to how to proceed
- **Ethical Uncertainty:** When it is unclear what ethical principles are at play, or whether or not the situation represents an ethical problem
- **Ethical (Moral) Distress:** When you find yourself in a situation of discomfort, if you have failed to live up to your own ethical expectations, or if you are unable to carry out what you believe is the right course of action due to organisational or other constraints

Signs of an ethical dilemma may include:

- The 'yuck factor' – an intuition that something isn't right; a feeling of moral angst or distress
- Knowing the right thing to do in a situation, but encountering organisational or personal barriers
- Wondering what a good person or professional ought do in a given situation
- Encountering a situation where two equally important values seem to conflict (e.g., between telling the whole truth and preserving confidentiality)
- Conflict between members of a team around a challenging situation, often stemming from differing professional roles, beliefs or world views
- Moral ambiguity – a situation characterised by uncertainty about the right thing to do, either because it is novel or because it has unique features that make standards of practice difficult to apply

As healthcare organisations seek to provide quality care in the face of significant financial constraints, they encounter difficult decisions. Both technical (e.g., cost-effectiveness analyses) and principle-based (e.g., distributive justice) solutions alone are limited in their ability to resolve priority-setting challenges (Gibson, Martin, and Singer, 2005). Given that there may be competing goals and values, ensuring procedural fairness may be the best way to ensure decisions are socially accepted and demonstrate public accountability (Gibson et al., 2005).

## USING THE ETHICAL FRAMEWORK

Use of the framework can help an individual, team or community to work through an ethical issue. It can help a team or community work together by introducing a shared systematic process, facilitating effective communication, developing a shared language, and building a common understanding of how to approach difficult ethical issues. The purpose of the IDEA: Ethical Decision-making Framework (page 5) is to provide a step-by-step, fair process to help guide staff, physicians and Board members in working through ethical issues encountered in the delivery of healthcare. The framework addresses two general types of ethical decisions that lie across a continuum: clinical and organisational.

Clinical ethical decisions are typically those that involve and impact specific individuals or staff members. Organisational ethical decisions are generally those that involve and impact groups of patients/clients/residents, staff members, units, systems or the organisation as a whole, and centre on the values of the organisation. Some ethical decisions may be predominantly clinical in nature. Others will be largely organisationally focused. A number of ethical decisions will have both clinical and organisational aspects.

The IDEA: Ethical Decision-making Framework comprises four steps and incorporates five conditions identified as important in the accountability for reasonableness framework developed by Daniels and Sabin (2002) and adapted by Gibson et al. (2005). The first letter of each step in this framework – identify, determine, explore, act – forms the acronym 'IDEA', with a light bulb at the centre of the framework. The light bulb contains a set of questions to assist staff, physicians and Board members in the identification of ethical issues to which the framework can be applied. The framework is depicted as circular, signifying the need to revisit decisions as new facts emerge.

### The four steps are:

1. **I**dentify the facts
2. **D**etermine the relevant ethical principles
3. **E**xplore the options
4. **A**ct

### The five conditions are:

**Empowerment:** There should be efforts to minimise power differences in the decision-making context and to optimise effective opportunities for participation (Gibson et al., 2005).

**Publicity:** The framework (process), decisions and their rationales should be transparent and accessible to the relevant public/stakeholders (Daniels & Sabin, 2002).

**Relevance:** Decisions should be made on the basis of reasons (i.e., evidence, principles and arguments) that fair-minded people can agree are relevant under the circumstances (Daniels & Sabin, 2002).

**Revisions and Appeals:** There should be opportunities to revisit and revise decisions in light of further evidence or arguments. There should be a mechanism for challenge and dispute resolution (Daniels & Sabin, 2002).

**Compliance (Enforcement):** There should be either voluntary or public regulation of the process to ensure that the other four conditions are met (Daniels & Sabin, 2002).

Use of the IDEA Framework should keep BHB's vision, mission and values at the core of its deliberations.

**Our Vision:** Exceptional Care. Strong Partnerships. Healthy Community.

**Our Mission:** Delivering safe, high-quality, people-centred, compassionate care, every day

**Our Values:** Respect, Accountability, Integrity, Service, Excellence



Bermuda Hospitals Board

# IDEA

## ETHICAL DECISION-MAKING FRAMEWORK

### 4. ACT

- Recommend
- Implement
- Evaluate

**ASK:** Are we (am I) comfortable with this decision?

### 1. IDENTIFY the facts

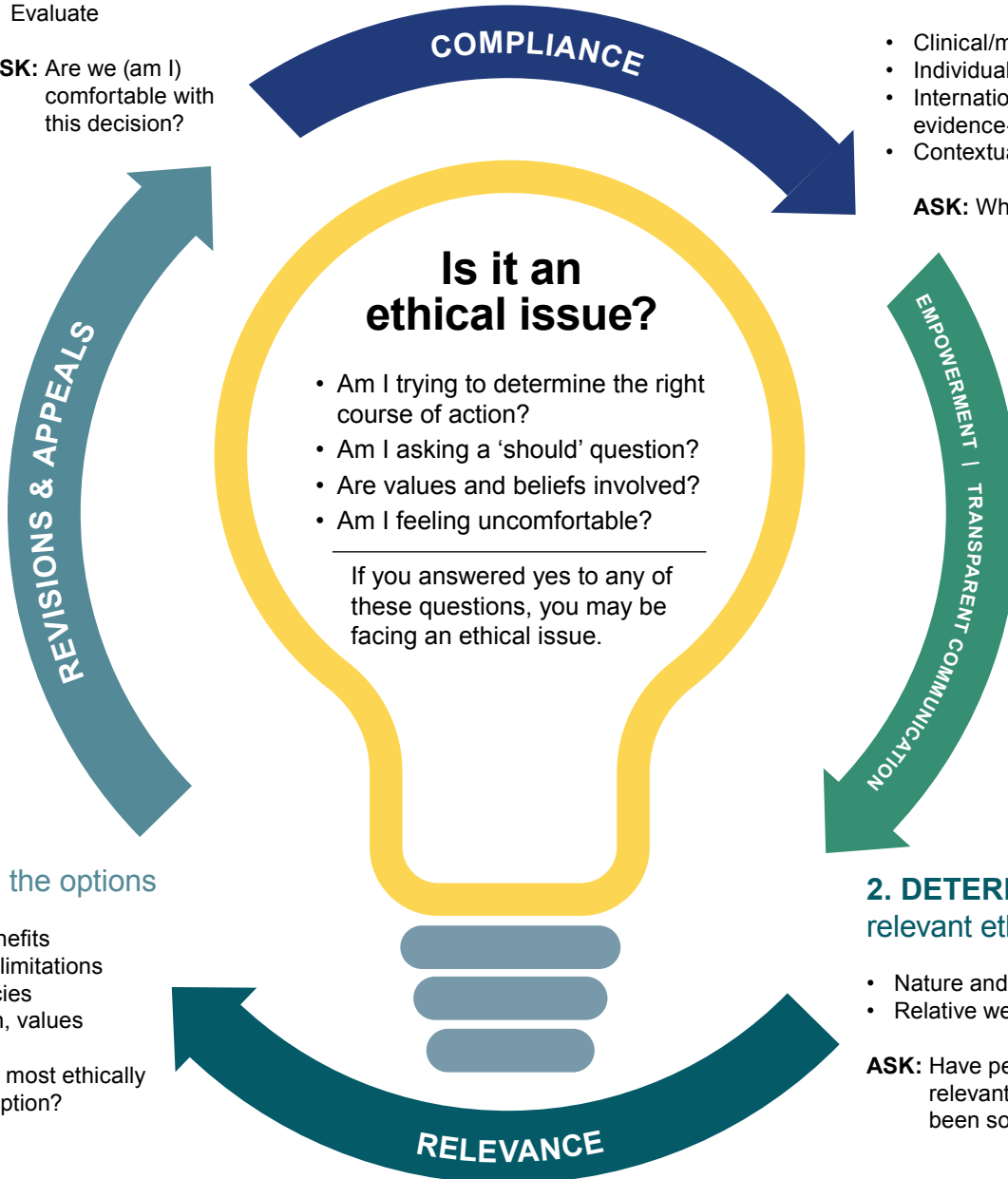
- Clinical/medical indications
- Individual preferences
- International best practice/ evidence-based practice
- Contextual features

**ASK:** What is the ethical issue?

### Is it an ethical issue?

- Am I trying to determine the right course of action?
- Am I asking a 'should' question?
- Are values and beliefs involved?
- Am I feeling uncomfortable?

If you answered yes to any of these questions, you may be facing an ethical issue.



### 3. EXPLORE the options

- Harms and benefits
- Strengths and limitations
- Laws and policies
- Vision, mission, values

**ASK:** What is the most ethically justifiable option?

### 2. DETERMINE the relevant ethical principles

- Nature and scope
- Relative weights

**ASK:** Have perspectives of relevant individuals been sought?

## STEP-BY-STEP GUIDELINES

For each step in the framework, a number of guiding questions and/or considerations and an overarching question are posed. Some of the questions may be more relevant for clinical decisions and others for organisational decisions. In addition, the conditions that should be met during each step of the process are described. At any point in the process, you may wish to seek the assistance of an ethicist, ethics facilitator, ethics forum or other professionals to help you work through the process and resolve any areas of contention.

### Step 1: Identify the Facts

Given that ethical issues often arise because of a lack of sufficient information or evidence, as well as disagreement about the facts, the first step in the ethical decision-making process is an explicit call for identification of the facts. This may help to resolve some conflicts and sets the stage for an effective process in others. Begin by asking the question, “What is the ethical issue that has been identified?”

#### Medical indications

- What is the patient’s healthcare problem, or the healthcare problem for a group of patients?
- What are the diagnosis and prognosis for this patient/patient population?
- Is the problem acute, chronic, critical, emergent or reversible?
- What are the goals of treatment/intervention?
- What are the probabilities of success?
- What are the plans in case of therapeutic failure?
- What are the benefits of the treatment/intervention? How can these be maximised?
- What are the harms of the treatment/intervention? How can these be minimised?

#### Patient preferences

- What are the patient’s preferences regarding treatment/intervention?
- What is the patient’s assessment of quality of life with and without treatment/intervention?
- Is the patient’s decision voluntary and informed?
- If patient isn’t capable of making the decision, who is the substitute decision maker? Is the substitute decision maker following principles governing substitute decision making?
- If the patient is a minor, has his/her ability to consent been ascertained?
- Has the patient expressed prior wishes in writing, orally or in any other manner?
- Is the patient unwilling or unable to cooperate with treatment/intervention? If so, why?
- Is the patient’s right to choose being respected to the extent possible in ethics and law?

#### International best practice/evidence-based practice

- What is the standard of practice?
- What data to inform the decision is available locally and/or internationally?
- What research findings/literature is available to inform the decision?
- What documentation is available, e.g., advance directives?

#### Context

- Are family issues possibly influencing decisions about the treatment/intervention?
- Are there any religious or cultural factors?
- Are there any health provider/administrator biases that might influence the decision, including judgments about quality of life?
- Is clinical research or teaching involved?
- Is there any relevant legislation?
- Are there any confidentiality concerns or limits?
- What are the financial implications associated with the decision?
- What organisational policies are relevant to the decision?
- Is there any conflict of interest on the part of the healthcare providers or the institution?
- What are the vision, mission, values and strategic direction of the organisation?

## Personal considerations

- What are your personal emotions, beliefs, values and biases regarding this case/issue?
- How might the above influence you in your professional role? Are you able to respond professionally, not personally? If this is difficult, what steps can you take to rectify this?
- How will you address expectations that don't align with your role or are beyond your scope?

## Conditions

**Empowerment:** Strategies to minimise power differentials and optimise effective opportunities for participation should be implemented at the outset and incorporated throughout the process. Such strategies reflect the condition of empowerment and, depending on the nature of the situation, may include community engagement, encouraging expression of divergent views, democratic voting procedures, secret ballots, ample preparatory time and capacity building (Gibson et al., 2005).

**Transparent communication:** Similarly, the condition of transparent communication should be evident at each step of the process. This requires establishing and maintaining open channels of communication between relevant parties and transparency about the process.

## Overarching question

Before proceeding to Step 2, revisit the question: "What is the ethical issue(s)?" Sometimes after the collection of relevant facts, the framing of the ethical issue requires modification.

## Step 2: Determine the Relevant Ethical Principles

In the second step, open discussion about the dominant values and principles of the relevant parties (individuals and/or groups, as well as those of the organisation) is necessary to further clarify the ethical issue(s) at hand. This step requires an exploration of the nature and scope of the identified ethical principles (see Appendix A) and consideration of the relative weight they hold for each individual involved. The agreed set of prioritised principles (decision-making criteria) will be used to guide the decision-making process.

- Which principles/values do stakeholders consider most relevant to this issue?
- Which principles/values do the stakeholders agree are most important?
- Are there any additional factors that should be considered?

## Condition

**Relevance:** Completion of Step 2 of the process helps to satisfy the condition of relevance, that is, decisions should be made on the basis of reasons (evidence, principles) that fair-minded people can agree are pertinent and important given the current context.

## Overarching question

Before proceeding to Step 3, the following question should be considered: "Have the perspectives of relevant individuals been sought?"

## Step 3: Explore the Options

The third step encourages brainstorming and reflection on a range of possible alternative courses of action. In any given situation, an attempt to identify at least three options should be made. Strengths and limitations of each option are explored. The level of restrictiveness and invasiveness of all options are to be taken into consideration. Options consistent with relevant laws and policies are identified. Options must be consistent with BHB's vision, mission and values. The agreed principles of decision-making, identified in Step 2, are applied to each viable option.

## Condition

**Revisions and appeals:** Before a decision is acted on, a mechanism for revisions and appeals is established, if it is not already in place. The decision may be revisited and revised in light of new or additional evidence. These procedures are necessary to satisfy the condition of revisions and appeals.

## Overarching question

What is the most ethically justifiable option?

## Step 4: Act

Finally, the fourth step focuses on action. The most ethically justifiable option, identified in Step 3, is recommended for implementation. The decision(s) and the process used to arrive at the decision(s) is documented and communicated to relevant parties. An implementation plan is articulated. A process for evaluating the decision is determined.

## Condition

**Compliance (enforcement):** To satisfy the condition of compliance (enforcement), the decision-making process should be reviewed to ensure that all of the conditions have been satisfactorily met. Although this review can be carried out by those directly involved in the decision-making process, validation by an individual or group that has not been directly involved is preferable as it is likely to be perceived as less biased.

## Overarching question

Lastly, it is important to ask the question: “Are we (am I) comfortable with this decision?” The decision arrived upon might not be the one that would be preferred by particular individuals or groups. However, those involved in the decision-making process should feel comfortable with the decision and the process used to reach the decision. If decision makers are not comfortable with the decision, further exploration of the reasons for the discomfort is warranted prior to implementation.

Another way to think about this question is to consider: “If this decision and the reasons for it were published in the newspaper tomorrow, would I be able to adequately defend the decision and the process?”

## USING THE ETHICS WORKSHEET

The Ethics Worksheet (Appendix B) has been developed to facilitate and document the use of the IDEA: Ethical Decision-making Framework. Each step in the IDEA Framework is identified, and key questions to address are outlined. For each step, consider the scope of your role and level of expertise, and whether you should involve other resources (e.g., ethicist, ethics facilitator, ethics forum, risk manager, professional practice expert, lawyer, patient/family council, supervisor, administrator) to support, facilitate or further inform the decision-making process.

## REVIEW OF CLINICAL RESEARCH PROPOSALS

All clinical research in Bermuda involving the use of human subjects requires prior ethical approval from the BHB Ethics Committee's Research Subcommittee. All such research proposals will be reviewed by the Subcommittee using the IDEA: Ethical Decision-making Framework.

Anyone who wishes to conduct research involving any BHB resource, or under the remit of the Bermuda Government Department of Health Research Governance Framework, must use the IDEA Framework.



## ACKNOWLEDGMENTS

The IDEA: Ethical Decision-making Framework was modified and reprinted at BHB with permission from Sunnybrook Health Sciences Centre, Trillium Health Partners Regional Ethics Program. The IDEA: Ethical Decision-making Framework builds upon the Toronto Central Community Care Access Centre Community Ethics Toolkit (2008), which was based on the work of Jonsen, Seigler and Winslade (2002), and the work of the Core Curriculum Working Group at the University of Toronto Joint Centre for Bioethics. It incorporates aspects of the accountability for reasonableness framework developed by Daniels and Sabin (2002), and adapted by Gibson, Martin, and Singer (2005).

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## APPENDIX A: ETHICAL VALUES/PRINCIPLES<sup>2</sup>

**These ethics principles can help guide decision making on individual, clinical, organisational and system-wide issues.**

**AUTONOMY: Respect for autonomy.** Respect people's right to self-determination or self-governance such that their views, decisions and actions are based on their personal values and beliefs. The vehicle for this principle in healthcare and research is generally the free and informed consent process.

**ACCOUNTABILITY:** Obligation or willingness to accept responsibility.

**BENEFICENCE: Act beneficently toward others.** Contribute to the welfare of others, which may include preventing harm, removing harm, promoting wellbeing or maximising good.

At a corporate level, beneficence emphasises the importance of identifying and mitigating possible harms for all patients.

**CONFIDENTIALITY:** Keep private information confidential. Keep identifying personal information as well as confidences secret, unless consent to disclose this information is given by the person to whom it belongs or disclosure is required by law.

**EFFICIENCY:** Promote the most efficient models and approaches for delivering healthcare. This principle can be extended to include consideration of the efficacy and clinical relevance, as well as the cost effectiveness, of treatments and therapies.

**EQUITY:** Reduce disparities among individuals and groups in terms of their opportunities for being healthy and in terms of their access to healthcare.

**INTEGRITY:** Honesty and truthfulness or accuracy of one's actions.

**JUSTICE: Promote justice and fairness.** Treat people and groups fairly by treating morally relevant cases alike, by promoting fair relations among individuals and social groups, and by ensuring fair and equitable access to resources and opportunities, including fair distribution of benefits and burdens.

**Distributive justice:** Distribute the benefits and burdens as fairly as possible on the basis of health needs and available resources.

**Formal justice:** Treat individuals and groups the same unless there is a demonstrable, relevant difference among them that should be taken into account.

**Social justice:** Identify and reflect on the particular advantages and disadvantages of individuals and groups who will be directly affected by any recommendations or changes in healthcare.

**NON-MALEFICENCE: Act so as to do no harm.** Avoid causing harm to individuals or groups, or risking harms of significant magnitude and probability.

At a corporate level, non-maleficence emphasises the importance of identifying and mitigating possible harms for all patients, while recognising that some may potentially be harmed more than others as a result of what health services are or are not provided.

**PERSON-CENTRED or FAMILY-CENTRED CARE: Provide person-centred or family-centred care.** Organise and provide therapies, services, interventions and interactions in ways that respect and respond to the person's or family's values, preferences, decisions or self-identified best interests.

**SAFETY: Ensure safety.** Avoid injury and reduce risks of harm to individuals and groups. Promote a culture that reports errors and near misses, and strives to improve the safety of clinical, research and organisational environments.

**STEWARDSHIP:** Careful and responsible management of something entrusted to one's care.

**SUSTAINABILITY:** An enduring and balanced approach to economic activity, environmental responsibility and societal benefit.

At a corporate level, sustainability focuses on what resources are needed now and into the future, based on anticipated care needs and challenges as part of determining what it is possible to provide currently and going forward.

**TRANSPARENCY: Make decision making transparent.** Communicate and make accessible decisions and their rationales to all stakeholders.

<sup>2</sup>This is not an exhaustive list. There may be other ethical values at play in a particular situation.

# ETHICS WORKSHEET

|   |                                       |
|---|---------------------------------------|
| I | Identify the facts                    |
| D | Determine relevant ethical principles |
| E | Explore the options                   |
| A | Act: Recommend and implement          |

Date: \_\_\_\_\_

## Step 1: Identify the facts

What is the presenting ethical issue(s)?

What are the relevant medical/clinical indications?

What are the individual/group preferences?

What is the evidence?

What are the contextual features?

What is the ethical issue?

**Step 2: Determine the relevant ethical principles**

Who are the stakeholders/relevant parties?

What principles/criteria do stakeholders believe are relevant to the issue?

Which principles/criteria do stakeholders agree are most important in the current context?  
List in priority order.

Are there any other factors that need to be considered?

Have perspectives of relevant individuals been sought?



### Step 3: Explore the options

|  |  |  |
|--|--|--|
| Option 1:  | Option 2:  | Option 3:  |
| <input type="checkbox"/> Consistent with laws and policies<br><input type="checkbox"/> Consistent with vision, mission, values and strategic direction   | <input type="checkbox"/> Consistent with laws and policies<br><input type="checkbox"/> Consistent with vision, mission, values and strategic direction   | <input type="checkbox"/> Consistent with laws and policies<br><input type="checkbox"/> Consistent with vision, mission, values and strategic direction   |
| Benefits/strengths:  | Benefits/strengths:  | Benefits/strengths:  |
| Harms/limitations:   | Harms/limitations:   | Harms/limitations:   |
| Meets decision-making criteria (list)  | Meets decision-making criteria (list)  | Meets decision-making criteria (list)  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Additional resources used (list):  | Additional resources used (list):  | Additional resources used (list):  |

### What is the most ethically justifiable option?

## Step 4: Act

Documentation/communication of decision (who, what, where, how):

Implementation plan:

Evaluation plan:

Process met conditions:

Evidence:

Reviewed by:

Relevance

Publicity

Revisions and appeals

Empowerment

Are we (am I) comfortable with this decision?





# Bermuda Hospitals Board

**Produced by the BHB Ethics Committee**  
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