

Reference Manual

Ethical Duty during an Emergency, Disaster or Pandemic for Pharmacists and Pharmacy Technicians

(Adapted from Nova Scotia College of Pharmacists - A Pharmacist's Duty during a Pandemic - an Ethical Framework)

In this document, unless the context indicates otherwise, "member(s)" includes licensed pharmacist(s) and pharmacy technician(s).

The possibility of a health care emergency, a man-made or natural disaster or influenza pandemic can cause fear and anxiety in anyone, including front-line health care workers such as members. Circumstances may be such that staff availability maybe limited due to their inability to get to work or the fear of getting ill or putting family members at risk of becoming ill if they come to work. This may cause some members to reconsider whether they want to report to work.

All members need to be aware of their ethical duty during any health emergency, disaster or pandemic. Those members that are having reservations need only review their professional Code of Ethics to obtain guidance. The Saskatchewan College of Pharmacy Professionals (SCPP) Code of Ethics states that "A member shall hold the health and safety of the public to be of first consideration in the practice of his profession rendering to each patient the full measure of his ability as an essential health care practitioner."

The University of Toronto Joint Centre for Bioethics Pandemic Influenza Working Group report, Stand on Guard for Thee: Ethical Considerations in Preparedness Planning for Pandemic Influenza (Upshur, R., et al. 2005) identified 10 substantive values that can be used as an ethical framework for planning and decision making both in advance of and during an emergency, disaster or pandemic. These values are intended to guide members when making their plans and also while providing care during the emergency, disaster or pandemic. The values include:

- Individual liberty restrictions may be necessary to protect the public from harm
- **Protection of the public from harm** actions may need to be taken which impinge on individual liberties
- Proportionality restrictions and actions should not exceed what is necessary based on actual level of risk and needs of the community
- **Privacy** individual's right to privacy may need to be weighed against the right to protect the public from harm
- **Duty to provide care** need to weigh demands of professional roles against competing obligations to own health, and that of family
- Reciprocity society's responsibility to support those who take on a disproportionate burden in protecting the public
- Equity decisions will need to made about which health services will be maintained and which will be deferred

- Trust need to maintain stakeholder trust through transparency and accountable for decisions.
- **Solidarity** collaborative approaches that set aside traditional values of self- interest and territoriality among health care professionals, services and institutions
- **Stewardship** good-decision making regarding resources to achieve the best patient and public health outcomes

There is an ethical obligation for members to care for patients, even in the face of personal risk. According to the *Stand on Guard for Thee* document, it is explained that the duty to care for those in need is a primary ethical obligation for health care workers for a number of reasons, including the following:

- The ability of healthcare workers to provide care is greater than that of the public, thus increasing their obligations.
- By freely choosing a profession devoted to the care of the ill, they assume risks.
- The profession has a social contract that calls on members to be available in times of emergency.

Therefore, SCPP believes that members have a professional and ethical obligation to help others during times of crisis. A member's decision not to be involved during a health care emergency shifts the burden to others, including fellow members, other health care providers and facilities, and places the public at risk.

Along with a health care professional's obligation to provide care during health care emergencies, there is also a reciprocal obligation by employers, public health authorities, and regional health authorities to provide the appropriate resources and policies to support a safe environment, that minimizes as much as possible the risks to the health care provider. These resources will be determined by the emergency, disaster or pandemic. Clear policies should include the appropriate support for families of members, suitable remuneration schemes and provisions for disability and other insurance for members. Government and pharmacy advocacy bodies also play a role in ensuring these safe guards are in place.

All members have the same ethical obligation to provide care during an emergency. There is also an obligation to take any steps required to protect themselves. When resources and supplies are made available to members and their families, they need to utilize them.

However, there may be personal challenges or vulnerabilities that prevent some members from assuming the same level of involvement in the provision of care to the public. It is expected by SCPP that colleagues and employers will recognize and protect/support these members.

Members may need to shift their standard of care from one that focuses on individual patients to one that focuses on what is best for the greatest number of patients.

With respect to the allocation of medications during an emergency, disaster or pandemic, the needs of individuals must be balanced against the greater good. Decisions regarding resource allocation should be left to public health officials. SCPP advises members to comply with any directives that are set out by public health authorities with respect to the allocation of medications.

The preceding information is intended to assist members in understanding their professional and ethical responsibilities in the event of a medical emergency. Members are asked to consider the 10 substantive values set out in the *Stand on Guard for Thee* document when developing emergency plans and while providing care. Ultimately, members are free to make necessary independent decisions during the course of a crisis, but they should be prepared to reasonably justify these decisions, if necessary.

It is important that pharmacies have a plan in place regarding delivery of health care services during an emergency, disaster or pandemic. There will also be guidelines for health care professionals who will be made by public health agencies and regional health authorities. Therefore, members will need to determine what their commitment will be when faced with a public health emergency.

Questions? info@saskpharm.ca Created: Dec. 2015

Revised: Nov. 2016