



Western Health Ethics Framework

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Introduction

Western Health's geographical boundaries are from Port aux Basques southeast to Francois, northwest to Bartlett's Harbour, and on the eastern boundary north to Jackson's Arm. Within this geographical region, Western Health services a population of approximately 76,608 residents.

Western Health offers a broad range of programs and services to the people of Western Newfoundland. Its regional office is located in Corner Brook. The organization has over 3,100 employees and approximately 80 per cent of employees are female. There are approximately 1,500 volunteers who assist in delivering programs, services and special events, which enhance the quality of life for patients, residents and clients.

Western Health accomplishes its mandate through six lines of business:

- promoting health and well-being;
- preventing illness and injury;
- providing supportive care;
- treating illness and injury;
- providing rehabilitative services; and
- administering distinctive provincial programs.

Please visit Western Health's [website](#) for information about its mandate, programs and services, and facilities.

* Throughout this document, client(s) refers to client(s)/patient(s)/resident(s).

Western Health Vision and Values

Vision

The vision of Western Health is *Our People, Our Communities - Healthy Together*. This vision highlights the important role that residents and communities throughout the Western region play in achieving and promoting good health. Western Health works collaboratively with residents, communities, and partners to achieve this vision.

Values

The core values of Western Health offer principles and a guiding framework for all employees as they work in their various capacities to protect the rights and freedoms of the people of Newfoundland and Labrador and to support decision making. These core values and the related action statements are:

- Accountability:* We follow through on our responsibilities with a focus on quality and safety.
- Care:* We are compassionate and client centered.
- Collaboration:* We work together with clients, patients, residents, families, and/or communities to enhance health.
- Excellence:* We strive to be and do our best.
- Respect:* We are courteous to and considerate of all individuals.
- Transparency:* We are open and honest while respecting privacy and confidentiality.

Ethics Framework

The Western Health ethics framework, initially developed in 2006, was based on the strengths of the former established ethics committees (Health and Community Services Western and the Western Health Care Corporation), the vision, mission, and values of Western Health, as well as available best practices. The Western Health ethics framework has been reviewed and revised several times since 2006. Two major landmarks in the development of health care ethics in Newfoundland and Labrador were the Provincial Health Ethics Network Newfoundland and Labrador (PHENNL) and the provincial Health Research Ethics Authority (HREA). These provincial groups consolidated ethics expertise within the province, ensuring access to expert resources, opportunity to participate in ethics related professional development and sharing of ethics experience, activities and research within the province.

With the support of leadership and the Board of Trustees, the Western Health Ethics Framework has been incorporated into Western Health's programs and services throughout the region. The ethics framework guides: (a) ethics education; (b) application of an ethical lens in policy development and review; (c) the ethics consultation service, (d) research review, (e) application of an ethical lens in evaluation initiatives, and (f) ethical decision making processes. The Western Health Ethics Committee collaborates with the PHENNL to ensure that its role is fulfilled as outlined in the Committee's terms of reference. The Western Health Research Review Committee collaborates with the HREA to ensure that its role is fulfilled.

Ethics Service

Western Health defines ethics as doing what is right. Good quality health care is achieved by doing the right things and doing things right. The delivery of health care requires precise coordination and collaboration of care providers with a very wide array of knowledge, skills and interests.

Western Health is committed to promoting an ethical culture. The Quality Department and two Western Health committees support ethics review and ethical decision making: the Western Health Ethics Committee and the Western Health Research Review Committee. Two provincial groups support Western Health in ethics review and decision making: PHENNL and HREA.

1. Western Health Ethics Committee

The Western Health Ethics Committee provides leadership in: (a) ethics education; (b) policy development and review; and (c) the ethics consultation service. In keeping with its terms of reference (Appendix A), the committee membership is multidisciplinary with membership from each of the organizational branches, major programs, Spiritual Care and the community. The membership reflects the geographic diversity of Western Health. The ethics committee meets bi-monthly to fulfill its goals in keeping with its terms of reference. The Regional Manager, Research and Evaluation acts as the chairperson of the Western Health Ethics Committee.

a. Ethics Education

The Western Health Ethics Committee provides leadership in ethics education as it:

- provides and facilitates ethics education, training, and service promotion to its members; staff, volunteers, and advisors of Western Health; and to clients, families, caregivers, community stakeholders, and the public, in collaboration with PHENNL;
- identifies and utilizes existing processes for education and promotion including team meetings, rounds, webinars, teleconferences, videoconferences, newsletters, social media platforms, etc.;
- identifies any current or upcoming ethics-related policies that require education of relevant Western Health stakeholders;

- develops the ethics page on Western Health’s intranet and website;
- prepares articles on ethics for the Western Health newsletter;
- prepares promotional materials for Western Health’s social media platforms;
- links with Employee Development in orientation of new staff and managers; and
- develops and revises the Code of Ethics for Western Health.

b. Policy Development and Review

The Western Health Ethics Committee provides leadership in policy development and review at the request of, and/or in response to ethical issues from Western Health stakeholders. The committee supports and facilitates the application of an ethical lens throughout the organizational policy development and review/revision process and collaborates with PHENNL in the development of provincial policy.

c. Ethics Consultation Service

A significant activity of the Western Health Ethics Committee is its ethics consultation service. Through this service, the committee facilitates consultations and/or case reviews on clinical, administrative and/or public health ethics issues. The goal of the Ethics Consultation Service and process is to aid in making ethical decisions regarding clinical cases, operations, policies, and systems within the health care system in the province. The committee utilizes an ethics decision making template and works in collaboration with PHENNL to complete these consultations and reviews. The process for the ethics consultation service is delineated in the Western Health ethics consultation policy [#6-01-120](#) and PHENNL ethics consultation document (PHENNL, 2021). A provincial template for ethics consultation on public health issues has been developed and has been used in developing decision making frameworks for several provincial issues, such as pandemic planning (Eastern Health Ethics Service, 2009), the drug shortage (Eastern Health Ethics Service, 2012), Ebola Virus Disease Planning Response and Recovery (Eastern Health Ethics Service, 2014), and COVID-19 Pandemic Planning (PHENNL, 2020). A provincial template is used to provide feedback to the individual(s) who request the ethics consultation service.

The committee promotes access to the consultation service through Western Health intranet, internet, newsletters, social media, and other communication to staff, clients, families, caregivers, volunteers, advisors, and the public. An ethics consultation can be requested by: client/patient/resident and their family or substitute decision-maker, member of the general public, Western Health staff and leadership, volunteer, or other health care professional. Wherever possible, Western Health frontline employees interested in requesting an ethics consultation should discuss consultation with their immediate manager before a request for an ethics consultation is made.

Following the consultation, evaluation and follow-up will be completed in collaboration with PHENNL. Status updates on the case are presented to the Committee as appropriate and the Committee determines if there are emerging trends in ethics consultation which signal the need to offer ethics education on particular topics or if a program or the organization should review its policies or processes which are triggering the need for ethics consultation. The number of ethics consultations is included in Western Health's Board Monitoring reports.

2. Western Health Research Review Committee

The Western Health Research Review Committee approves and monitors research involving Western Health and decides if a proposed study can be accommodated and/or of benefit to Western Health. All research reviewed by this committee must have prior approval of the HREA. The process is delineated in the Western Health research and evaluation requests policy #6-03-11. In keeping with its terms of reference (Appendix B), the committee membership is multidisciplinary. Regional positions, as well as representatives from rural sites, comprise the membership to represent the geographic diversity of Western Health.

The Western Health Research Review Committee communicates its review processes and provides access to the common Organizational Approval for Research Application Form (Form # 12-965) on the intranet and internet (Provincial Health Data Governance Committee, 2022). All research review applications must be approved by the committee prior to the start of any study involving Western Health. On a case-by-case basis, a provincial review process may be utilized

for applications involving multiple regional health authorities (RHAs) and the Newfoundland and Labrador Centre for Health Information (NLCHI). When a project is provincial in scope, the Research Review Committee may be comprised of representatives from each of the RHAs and NLCHI. The committee supports the HREA in its communication of its ethical review of research processes. The committee maintains a database of approved research reviews.

Committee members utilize Western Health research policies and link with the HREA for support and expertise in the monitoring of research. The Regional Manager, Research and Evaluation acts as the chairperson of the Western Health Research Review Committee.

3. Provincial Health Ethics Network Newfoundland and Labrador (PHENNL)

The mandate of PHENNL focuses on four areas: (a) ethics education; (b) policy review and development; (c) clinical and administrative consultations and (d) support for accreditation. Specifically, PHENNL provides expertise and perspective on ethics education activities, advice on ethics policy development and review, oversees the ethics consultation service, receives reports and highlights of activities from the ethics committees and services throughout the province, and offers direction on other aspects of ethics to support the enhancement of a culture of ethics.

PHENNL takes direction from, and is accountable to, the Provincial Health Ethics Network of Newfoundland and Labrador Advisory Committee (Appendix C). The PHENNL Advisory Committee is a provincial committee that assists in the development and coordination of shared ethics activities for the RHAs. Each of the RHAs has designated ethics leads to serve as the main contacts regarding regular PHENNL activities. The ethics leads for Western Health's Ethics Consultation Service are the Regional Manager of Research and Evaluation and the Regional Director of Planning and Performance, who report to the Vice President of People, Quality & Safety. The Manager for Spiritual Health and the community representative on the Western Health Ethics Committee are also representatives on PHENNL.

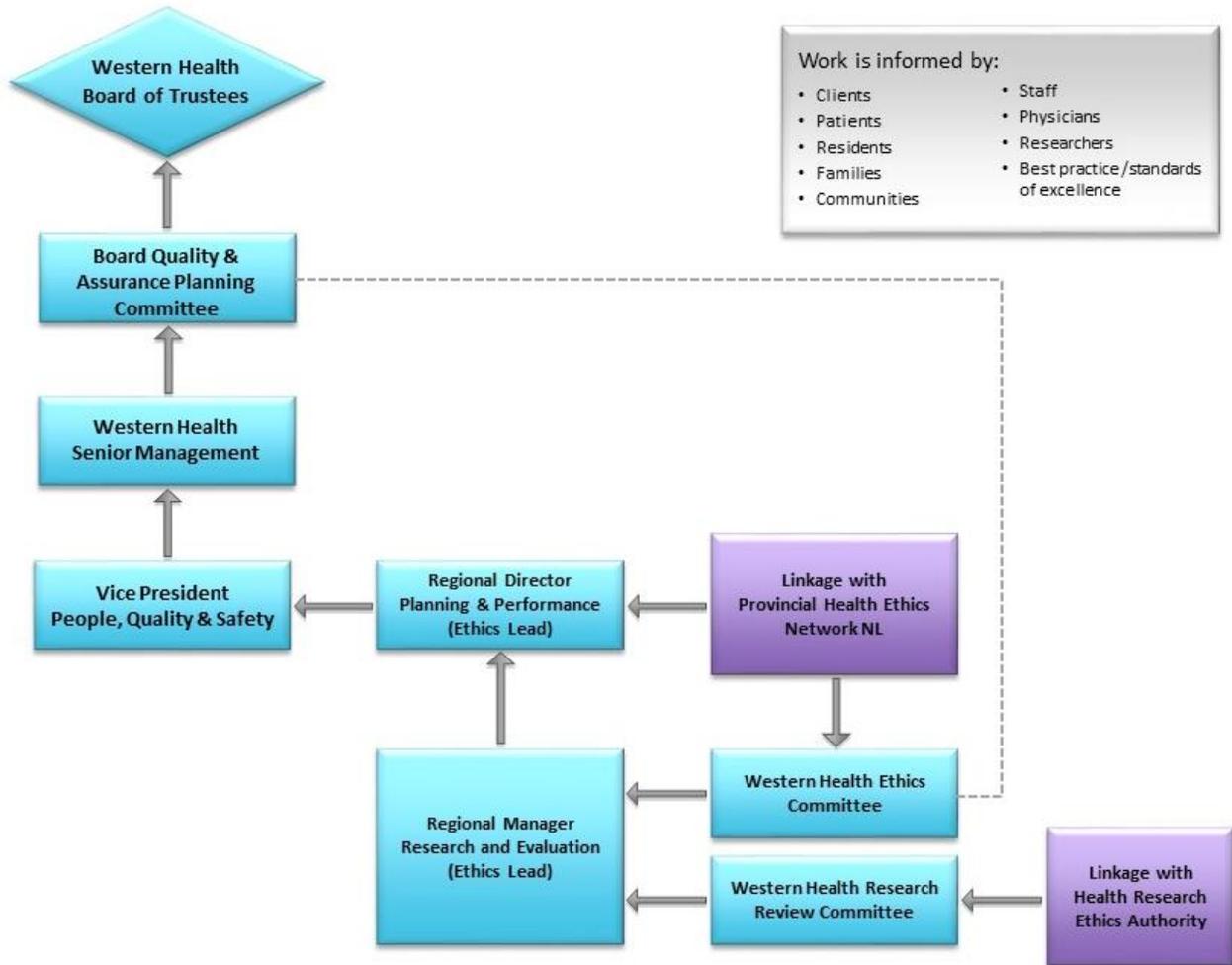
The provincial Ethics Consultation Service is administered through the Pastoral Care and Ethics Department of Eastern Health. Facilitators for the service are recruited from within the

Department and other interested individuals throughout the RHAs and the Department of Health and Community Services. Ethics consultation activities are reported to the PHENNL Advisory Committee. The regular ethicists for the service are ethics faculty members with the Centre for Bioethics, Faculty of Medicine, Memorial University. Occasionally other ethicists may be recruited to assist with specific consultations.

4. Health Research Ethics Authority

The *Health Research Ethics Authority Act* was proclaimed on July 1, 2011. This *Act* requires that all health research conducted in the province be reviewed and approved by a local (Newfoundland and Labrador) research ethics review board. All research conducted within Western Health requires review and approval by the HREA. Principal investigators are then required to submit their HREA approved research to the Western Health Research Review Committee to determine if the proposed study can be accommodated and/or of benefit to Western Health.

Western Health Ethics Framework Model



Ethical Decision Making

Western Health is obligated to clients, staff and the public to act in both a responsible and ethical manner in carrying out its mandate. The vision and values of Western Health and the organization's strategic plan provide direction in planning, decision making, and service delivery. A strong culture of ethics is fostered through the Western Health Code of Ethics (2007). The Code of Ethics and the basic ethical principles guide the development of appropriate policies and/or practices within Western Health.

Western Health Code of Ethics

The Code of Ethics provides the foundation for the identity and integrity of Western Health. The Code of Ethics shapes the organization's character and behavior. All employees must consider the following ten ethical principles to guide their everyday work:

- Respect:* We respect the uniqueness and worth of every individual.
- Self-determination:* We support the right of individuals to participate in decision-making.
- Justice:* We provide the best possible treatment, care, and service according to need, potential benefit, and the responsible use of resources.
- Collaboration:* We work together to enhance service delivery and maximize the use of resources.
- Accountability:* We have a strong culture of accountability and are transparent in our decision-making.
- Research/Teaching:* We engage in quality research activities and endeavor to provide opportunities for professional development.
- Environment:* We strive to ensure a safe and healthy environment
- Conflict of Interest:* We are committed to address conflict of interest issues.
- Excellence:* We strive to provide the highest quality of treatment, care and service *possible*.
- Privacy:* We will protect the privacy of all individuals in keeping with privacy laws.

Basic Ethical Principles

The four basic ethical principles, adapted from Beauchamp and Childress (2013), provide an additional set of standards of conduct for healthcare policy and practice. The four basic ethical principles include: autonomy, beneficence, non-maleficence and justice.

Autonomy

This is the ethical principle that prompts health care providers to treat clients as individuals having the right and freedom to make decisions for themselves. These choices include accepting or refusing care that might be of value to them. The principle of autonomy further suggests that:

- each client is respected;
- each client is presumed capable and competent to make choices about his/her care;
- clients are represented by a substitute decision maker who will act in the client's best interest in cases where the individual is verified as incompetent or unable to make a decision for themselves for whatever reason;
- each client is appropriately informed and understands the alternatives, the benefits and harms of the treatment, and implications of accepting or rejecting care;
- client choices include accepting or refusing care that might be of benefit to them;
- an individual client may not harm others in trying to satisfy his/her personal choices; and
- clients cannot expect health care providers to cooperate in a choice or action contrary to providers' conscience and code of ethics.

Beneficence

This refers to the duty to help others especially with respect to furthering their overall health. The principle of beneficence implies that:

- the professional/client relationship carries certain duties to act that go beyond kindness and charity;
- the intention is to bring about a positive outcome, to remove harm or prevent potential harm; and
- The benefits and harms of the treatment must be balanced in the context of overall best interest of the client.

Non-Maleficence

This refers to the duty to avoid intention and risk of injury: “above all, do not harm.” The principle of non-maleficence implies that:

- the client should not be harmed by what a health care worker does or refuses to do;
- the balance of benefits and harms of a treatment must be agreed to by the client;
- the possible harm resulting from a treatment should not outweigh the benefit; and
- the health care worker must carry his/her duties in a way that avoids harm or injury that could result from neglect or substandard care.

Justice

This principle requires fairness in all of our transactions and in the way we allocate resources. Justice as a principle of bioethics presumes that:

- people are equal to each other and are to be treated with dignity and respect;
- programs and services will be based on assessed needs; and
- health care resources are distributed equitably in a way that meets the differing needs of individuals and groups within the region.

Policies Supporting a Culture of Ethics

Western Health has a variety of policies that support ethical practices and decision making throughout the organization. These include:

- Conflict of Interest ([policy # 2-02-10](#))
- Harassment and Discrimination Free Workplace ([policy # 2-02-20](#))
- Acceptance of Gifts ([policy # 6-01-60](#))
- Corporate Sponsorship ([policy # 6-01-70](#))
- Registered Nurses’/Licensed Practical Nurses’ Duty to Address Unsafe & Unethical Situations ([policy # 14-03-10](#))

Ethics Decision Making Process

Health care decisions require that facts, options, outcomes and consequences be carefully deliberated. There are a number of templates available for decision making in health care. The following is a decision making process adapted from Kirby (2008) that provides guidance to assist the Board of Trustees, senior executive, leadership, staff, clients, and families when making difficult decisions:

Ethics Decision Making Process



Ethics Screening Tool

One template available to assist in decision-making in health care is the Ethics Screening Tool. This tool is intended to help individuals focus on issues and support them to identify a case or situation appropriate to refer for an Ethics Consultation.

This tool is appropriate for use by anyone considering requesting an ethics consultation, including a client/patient/resident and their family or substitute decision-maker, member of the general public, Western Health staff and leadership, volunteer, or other health care professional. This screen does not cover every issue and matter that could lead to an ethics consult but it would prompt most matters for a consultation.



**NL Health
Services**

Ethics Screening Tool

This screening tool is intended to help you focus on issues that allow you to identify a case or situation appropriate to refer for an ethics consultation. This screen does not cover every issue and matter that could lead to an ethics consult but it would prompt most matters for a consultation.

Values

Is there a plan or activity that clashes with something I hold as important?

- My personal values
- My professional ethics, professional values, or Code of Conduct and Professional Practice
- Our organizational values

Decisions

Is there a clash, confusion, dispute, or ambivalence about the decision making?

- Who should make the decision
- Competence
- Substitute decision-maker
- Best interest of patient/resident/client/family member
- Information exchange
- Current wishes
- Advanced Health Care Directive

Care Plan

Is there confusion or dispute over the plan of care?

- Goal is unclear (why are we doing this?)
- Status has changed and the goal has not been appropriately revised
- Interventions seem futile
- Disproportion of risk and pain over benefit

Other

- Gut feeling (something doesn't feel right about this)
- Confidentiality
- Consensus among team and/or other that an open discussion is needed in this case
- Patient/resident/client/family member questions the ethics of care or options

For more information, please contact:

Sandra Lush
Chair, Western Zone Ethics Committee
Regional Manager – Spiritual Health
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Ethics Guideline for Evaluation Initiatives

Evaluation is an essential component in the provision of health care services. Evaluation processes provide information for evidence-based decision-making and enhance accountability. It is also imperative that steps are taken to ensure that evaluation initiatives, quality improvement projects, needs assessments, knowledge transfer initiatives, and health innovations are carried out in an ethically sound manner that is supportive of those involved in the evaluation and those impacted by the results.

In following Western Health's policy [#6-03-11](#): Review and Approval of Research and Evaluation Requests, program evaluation that is conducted by a third party and/or involves external personnel, students, or other third parties having access to personal health information, must be reviewed and approved by Western Health's Quality Department.

Building evaluation capacity within Western Health is a priority for the Quality, People & Safety Branch. Western Health's [Evaluation Framework](#) provides a guideline to support and encourage evaluation across programs and services. The Framework is based on Western Health's vision, and values. To ensure evaluation supports a culture of ethics, all Western Health staff and leadership conducting evaluation are to follow the steps outlined in the evaluation standard of 'propriety' that is outlined in the Evaluation Framework. In addition, the Ethics Guideline for Evaluations Initiatives is a tool adapted from Alberta Innovates (2017) that is intended to help individuals and project teams consider the ethical implications of evaluation and innovation initiatives. Links to the full tool, as well as the accompanying Ethics Screening Tool, are available [here](#) on the Alberta Innovates website.

Ethics Guideline for Evaluation Initiatives

1. How will the knowledge gained be useful?

- What is the problem, issue or situation that you are addressing?
- How will you use the information?
- With whom will you share the results and how will you do this?
- How will you report results that are negative or unfavourable?
- What relevant literature, best practices or sources have you consulted?

2. How will the described method or approach generate the desired knowledge?

- What method or strategy will you use and why is it appropriate for your project considering the type of data, the populations, the context, timeline and resources?
- How will you collect and analyze the data?
- How will you know when you have obtained enough data?
- Do you need to consult with someone who has expertise in certain areas?

3. How will you ensure that the participant (or data) selection process is fair and appropriate?

- How will you choose the participants or the data?
- Will you exclude anybody or any group for your project? If yes, why?
- How will you ensure that you are not overburdening anybody or group?
- How many participants or how much data will you use in your project?
- What sampling strategy will you use for obtaining participants or data?

4. How will you maximize benefits and minimize or mitigate the ethical risks?

- How will your organization(s) and participants benefit from the project?
- What are the ethical risks for participants and the organization(s) and how will you minimize and mitigate them?
- What are the risks of not doing this project?
- Will your organization tolerate the risks that remain in your project?

5. How will the rights of individuals, communities and populations be respected?

- How will you ensure privacy when collecting data?
- How will you maintain confidentiality when using the data or when communicating the results?
- How will you appropriately retain, store, secure and destroy the data (in accordance with Western Health policies and applicable legislation)?

6. Will informed consent be needed?

- How will you inform participants about the ethical risks of the project?
- What type of consent process you will use for your project. If expressed consent is needed, how will you obtain that?
- How will you minimize and mitigate the risk that people will feel pressured into participating?

Evaluation of the Ethics Framework

Key performance measures for the Western Health Ethics Framework have been established and incorporated into the People, Quality, & Safety branch and the organizational balanced scorecard. Performance measures include the number of research reviews and the number of ethics consultations completed.

The evaluation of components of the Ethics Framework also includes feedback from the Board of Trustees, senior management, staff and physicians, the Western Health Research Review Committee, the Western Health Ethics Committee, and other stakeholders such as clients and their families. This also includes seeking feedback on ethics related resources and documents such as policies, e-learnings, education tools, and communication materials. Action plans, including indicators for each component of the Western Health Ethics Framework, have been developed and ongoing monitoring provides information to identify areas for improvement.

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Appendix A

Western Health Ethics Committee

TERMS OF REFERENCE

TITLE

Western Health Ethics Committee

REPORTS

Vice President, People, Quality & Safety

GOALS

The Western Health Ethics Committee will provide ethics leadership for Western Health.

OBJECTIVES

The goal of the Western Health Ethics Committee will be achieved as the Committee:

1. Builds awareness of the vision and goals for an ethics framework within Western Health.
2. Engages in education of the Ethics Committee members in collaboration with the Provincial Health Ethics Network Newfoundland and Labrador (PHENNL).
3. Develops and provides ethics case facilitation, consultation and review in collaboration with PHENNL.
4. Develops and provides ethics education and training of Western Health staff and community in collaboration with PHENNL.
5. Establishes linkages with other education initiatives of Western Health and external organizations.
6. Facilitates discussion and increased understanding of Western Health's values.
7. Establishes mechanisms to provide support to the Board of Trustees, Senior Management and Leadership regarding organizational ethics issues.
8. Identifies and advocates for the ethics related needs and interests of various programs and services.
9. Reviews policies from an ethical perspective at the request of Western Health stakeholders.
10. Establishes and reviews organizational Code of Ethics.
11. Provides support for accreditation.
12. Develops yearly work plan.
13. Develops evaluation plan.

FREQUENCY

The Western Health Ethics Committee will meet bi-monthly with a minimum of 5 meetings a year to fulfill its goal.

MEMBERSHIP

Multidisciplinary, diverse membership consisting of members representing each of the following:

- Regional Manager Research and Evaluation (Chair)
- Access & Privacy
- Bioethics Faculty, Memorial University
- Community Member(s)
- Financial Services
- Long Term Care
- Medical Services
- Patient Services
- PHENNL
- Population Health
- Spiritual Health

Membership will reflect the geographic diversity of Western Health. Branch representatives will be responsible for communicating and consulting within their respective branches.

Members are expected to contact the Chair if unable to attend a meeting. If a member misses three consecutive meetings without cause, the Chair will contact him or her.

Ex-officio members, including ethics facilitators and/or persons who can articulate and advocate for the position of a client may attend as required.

A quorum will consist of 50% plus one of the committee members.

Minutes will rotate. Minute takers will complete the provided minute template and return to the Chair for finalization.

* *Client refers to client/patient/resident*

Revised: March 25, 2021

Appendix B

Research Review Committee

TERMS OF REFERENCE

A. INTRODUCTION

The Western Health Research Review Committee will have the authority to approve and monitor research projects throughout Western Health. The Research Review Committee will only review research proposals that have been approved by the Health Research Ethics Authority (HREA). The Research Review Committee will also liaise with the HREA when appropriate. The Research Review Committee reports to the Regional Planning and Performance Improvement who will report to the Vice President, People, Quality, & Safety.

B. PURPOSE

The Research Review Committee will:

1. Ensure that proposed studies have received approval from the HREA to conduct the research.
2. Decide if a proposed study can be accommodated and/or of benefit to Western Health.
3. Ensure that researchers have consulted with individuals in decision making roles in appropriate departments within Western Health regarding the proposed study to ensure that resources to conduct the research are available.
4. Ensure that departmental impact statements are completed by researchers and individuals in decision making roles within appropriate departments.
5. Ensure that access to confidential information for any project has been reviewed.
6. Submit an annual report of research review activity within Western Health to the Regional Director Planning and Performance Improvement, or when requested by this Director.

C. REVIEW PROCESS

1. All Health Research Ethics Authority approved research involving human subjects (clients, staff, and/or students) will be submitted to Research Review Committee for review.

2. When reviewing research proposals, the Research Review Committee will ensure that all departments have been consulted prior to approving and that resources have been assessed between the researcher and the individuals with decision making authority within impacted departments. Access to confidential information for the proposed research will be reviewed.
3. The chair of the Research Review Committee will maintain a database of all research that has been reviewed.

D. MEMBERSHIP

The Research Review Committee will comprise a minimum of five members with representation from the following programs:

- Regional Manager Research and Evaluation (Chair)
- Information Management
- Financial Services
- Pharmacy
- Laboratory Services

The Regional Manager Research and Evaluation will be a permanent member of the Research Review Committee and will also chair the committee. Departmental representatives will be appointed by the Regional Directors for that department. Upon resignation, a representative from that department will be required and will be appointed by the Regional Director for that department.

The Research Review Committee will co-opt representatives from departments potentially impacted by a specific research project when necessary.

All members are eligible to vote with the exception of co-opted representatives.

The Research Review Committee will meet when necessary, and at the discretion of the chair. A quorum will comprise 50% plus one members. Members attending by telephone or video conference will be included in the quorum.

* Client(s) refers to client(s)/patient(s)/resident(s)

Revised: November 27, 2017

Appendix C

Provincial Health Ethics Network Newfoundland Labrador

Advisory Committee

Terms of Reference

The Provincial Health Ethics Network Newfoundland Labrador Advisory Committee (PHENNLAC) is a provincial committee that assists in the development and coordination of shared ethics activities for the Regional Health Authorities (RHA).

Purpose

PHENNLAC shall provide advice and feedback on the shared work of the Ethics Committees and Ethics services in the four RHAs. The committee shall therefore be committed to collaboration and facilitation of ethics structures and activities with a vision of strengthening the ethics culture of the partner organizations.

Role/Responsibilities

1. Provide expertise and perspective on ethics education activities.
2. Provide advice on ethics policy development and review.
3. Oversee the Ethics Consultation Service.
4. Receive reports and highlights of activities from the Ethics Committees and Ethics Services throughout the province.
5. Offer direction on other aspects of ethics that would include, but are not limited to education, policy development and review, ethics consultation, and enhancement of a culture of ethics.

Reporting Mechanism

Each of the RHAs has designated an Ethics Lead for PHENNL. The Ethics Leads will report to their respective RHAs.

PHENNL will also report to the Newfoundland and Labrador Health Boards Association through the Executive Director.

Membership

The committee shall consist of, but not limited to:

- Executive Lead (or a designate) for Ethics from each RHA partner in PHENNL (4)
- Ethics Lead from each RHA partner (4)
- *Ex officio* Representative of DHCS (1)
- Executive Director, NLHBA (1)
- Director of PHENNL / EH Director of Pastoral Care and Ethics (1)
- Ethicists from Division of Community Health and Humanities, Faculty of Medicine, MUN (4)
- Others as deemed necessary to ensure broad and balanced representation.

The Committee Chairperson will be selected from the RHA Executive Leads for Ethics.

Membership and attendance patterns will be reviewed annually at the spring meeting.

Quorum

A quorum for the Committee will consist of 50% of the members.

Members may designate another person to attend PHENNLAC meetings to represent their respective constituency.

Minutes

Minutes shall be distributed to all members of PHENNL for review prior to the next meeting.

Frequency of Meetings

The Committee shall meet quarterly. Special Meetings can be held at the call of a Co-Chair, when necessary.

Terms of Reference will be reviewed annually at the spring meeting.

Revised: 26 June 2012